

All Vermont Acute Care Community Hospitals

Table 2B - Counts of Top 2021 Outpatient Procedures

Procedures displayed include the number of cases for each community hospital's top outpatient surgical procedures by volume for the period of 10/1/2020 to 9/30/2021. Hospital System Number of Cases and Average Gross Charges include all hospitals. For individual hospitals, procedures having fewer than 15 cases are not shown. Blanks in the table indicate that the hospital has fewer than 15 cases for that procedure or the hospital does not perform that procedure. The hospital, however, may perform a similar procedure under a different code which may not be shown. Please call the hospital for more information. Note: the surgical cases shown include some anesthetic procedures for the treatment of pain not connected with surgery.

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* "Clinical Classification System" (CCS) groups similar CPT codes, such as all those affecting a given organ system of the body.
 "No data" indicates that no procedure in that particular grouping meets the minimum limits based on the methodology described above.

Outpatient Procedures		Hospital System		Vermont Community Hospitals - Counts Displayed Include Each Hospital's Top Outpatient Procedures By Volume													
CCS High-level Group ¹	CCS Single-level Category	System Number of Cases ²	System Average Gross Charges ³	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Gifford Medical Center	Grace Cottage Family Health & Hospital	Mt. Ascutney Hospital	North Country Hospital	Northeastern Vermont Regional Hospital	Northwestern Medical Center	Porter Medical Center	Rutland Regional Medical Center	Southwestern Vermont Medical Center	Springfield Hospital	University of Vermont Medical Center
CCS 1: Operations on the nervous system																	
5	Insert cath, spinal stimulator, inject into spinal canal	3,772	\$2,066		492	130	121		60		90			854	289		1,735
6	Decompression peripheral nerve	1,612	\$5,797	101	154	140	48			75	97	73	49	250	116	83	392
7	Other diagnostic nervous system procedures	6,644	\$3,018			179	211		520	384		30		1,345	762		3,213
8	Other non-OR or closed therapeutic nerv syst procs	4,030	\$4,535		606	54	21		93		100			450	24		2,678
CCS 3: Operations on the eye																	
15	Lens & cataract procedures	4,134	\$7,004	343	741	109	151		366		476	358	432	385			772
16	Repair of retinal tear, detachment	246	\$7,144														229
19	Other therapeutic procedures on eyelids, conjunctiva, cornea	437	\$4,847										21	148			242
20	Other intraocular therapeutic procedures	1,674	\$3,449														1,655
21	Other extraocular muscle & orbit therapeutic procedures	78	\$13,975				43										34
CCS 4: Operations on the ear																	
26	Other therapeutic ear procedures	2,165	\$520											1,308			830
CCS 5: Operations on the nose, mouth, and pharynx																	
30	Tonsillectomy and/or adenoidectomy	390	\$8,701		38					20	20	83	37	58		15	116
31	Diagnostic procedures on nose, mouth & pharynx	2,096	\$893		44		26			18		37		808	51	59	1,034
33	Other OR therapeutic procedures on nose, mouth & pharynx	478	\$12,878		33							141	57	65		17	155
CCS 6: Operations on the respiratory system																	
35	Tracheoscopy & laryngoscopy with biopsy	1,450	\$1,002											811			612
38	Other diagnostic procedures on lung & bronchus	8,140	\$1,130	277	891	142	214		118	417	264	571		1,081	259	153	3,752
39	Incision of pleura, thoracentesis, chest drainage	232	\$4,327								29			31			142
CCS 7: Operations on the cardiovascular system																	
54	Other vascular catheterization, not heart	1,062	\$12,759	15	105	23				16	22			132	76		646
62	Other diagnostic cardiovascular procedures	632	\$3,215	86	55		27							104	58		300
63	Other non-OR therapeutic cardiovascular procedures	2,971	\$2,340	36	223	118				60	511	167	63	427	269	24	1,066
CCS 9: Operations on the digestive system																	
69	Esophageal dilatation	347	\$4,856	52	61					16				36	26		97
70	Upper gastrointestinal endoscopy, biopsy	5,795	\$4,734	333	420	151	47		132	201	136	609	159	556	555	243	2,075
76	Colonoscopy & biopsy	20,979	\$4,563	1,147	2,549	780	418		388	1,061	692	1,769	1,216	1,887	2,672	704	4,851
77	Proctoscopy & anorectal biopsy	626	\$2,134	23	18					25		16		45	34		408
84	Cholecystectomy & common duct exploration	856	\$16,123	26	91	40	15		28	78	26	168	62	95	80	22	125
85	Inguinal & femoral hernia repair	1,118	\$14,670	65	123	61	16		35	53	46	103	50	122	112	42	284
86	Other hernia repair	755	\$15,172	45	59	16	15		15	55	19	103	31	105	96		179
91	Peritoneal dialysis	3,240	\$12,051												87		3,153

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CCS 10: Operations on the urinary system																	
100	Endoscopy & endoscopic biopsy of the urinary tract	1,637	\$2,485		30		19				28			459	16		1,031
101	Transurethral excision, drainage, rem urinary obstruction	801	\$8,463	33	26		17			23	42	17	29	121	41	18	406
107	Extracorporeal lithotripsy, urinary	906	\$17,037	48	82	25	55		18	32	15	33	48	169	91	30	260
112	Other OR therapeutic procedures of urinary tract	276	\$11,391				21							47	15	18	118
CCS 11: Operations on the male genital organs																	
115	Circumcision	257	\$5,599		56					17			48				89
116	Diagnostic procedures, male genital	430	\$3,085	30										70	39		268
CCS 12: Operations on the female genital organs																	
119	Oophorectomy, unilateral & bilateral	394	\$14,725			32	15			29	18	34	26	37	52	17	107
125	Other excision of cervix & uterus	330	\$10,439			22						70	22	45	43	18	61
127	D&C, aspiration after delivery or abortion	160	\$7,517		19										26		37
130	Other diagnostic procedures, female organs	2,512	\$2,460	39	65		20			40	28	52	32	575	1,356	19	249
132	Other OR therapeutic procedures, female organs	325	\$14,290							39		19		62	22		121
CCS 13: Obstetrical procedures																	
139	Fetal monitoring	3,540	\$853	622	643	230	138			218	345	123	174	565	150		332
CCS 14: Operations on the musculoskeletal system																	
143	Bunionectomy or repair of toe deformities	427	\$15,414		18	30	65				25	38	21	43	48		134
145	Treatment, fracture or disloc of radius & ulna	466	\$16,124	21	62	51				31	16	25	29	101	42		82
147	Treatment, fracture or disloc of lower extremity	501	\$19,305	29	44	66				26		32		99	32		124
148	Other fracture & dislocation procedure	537	\$17,527	34	69	64				16	22	18	18	92	32		162
151	Excision of semilunar cartilage of knee	758	\$12,459	84	87	61	16				43	59	20	109	63		191
152	Arthroplasty knee	751	\$38,419		28	78	22				85	38	56	285	89	23	41
153	Hip replacement, total & partial	599	\$37,119		53	57					55	47	45	186	74		60
155	Arthrocentesis	5,800	\$814	221	26	158				25			34	3,274	39		1,999
156	Injections & aspirations of muscles, tendons, etc.	1,536	\$1,067		188	37					16			412	18		858
157	Amputation of lower extremity	201	\$8,363		17		25					17		28			63
160	Other therapeutic procedures on muscles & tendons	2,349	\$12,293	154	279	282	35			83	167	139	80	332	142	61	545
161	Other OR therapeutic procedures on bone	556	\$14,612	35	60	50					25	34		52	33		231
162	Other OR therapeutic procedures on joints	940	\$18,053	31	74	116	18			18	74	45	36	144	77	28	270
164	Other OR therapeutic procedures on musc system	151	\$30,899									56		36			30

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CCS 15: Operations on the integumentary system																	
165	Breast biopsy & other diagnostic procedures on breast	1,518	\$5,422	48	122	37			19	32		48	37	244	166	43	713
166	Lumpectomy, quadrantectomy of breast	516	\$13,543		55	16								56	55		270
169	Debridement of wound, infection or burn	409	\$2,380	136										61			169
170	Excision of skin lesion	4,938	\$2,447	37	74		53			26	42	148	55	290	78	26	4,070
171	Suture of skin & subcutaneous tissue	849	\$4,338										17	31			778
173	Other diagnostic proc on skin & subcutaneous tissue	2,087	\$1,333			19				17	26	32		273	86		1,596
174	Other non-OR therapeutic procedures on skin & breast	3,671	\$639			1,263					284			115			1,977
175	Other OR therapeutic procedures on skin & breast	406	\$21,257		22							65		19	44		183
<p>Sorted by CCS procedure groups and alphabetically by Hospital. Data source: the Vermont Uniform Hospital Discharge Data Sets as of November 2022. Please see the Act 53 Pricing FAQs for more information. Grace Cottage Hospital has no procedures with 15 or more cases.</p> <p>¹Based on "Current Procedural Terminology" (CPT) codes that define outpatient procedures for the period October 1, 2019 through September 30, 2020. "Clinical Classification System" (CCS) groups similar CPT codes, such as all those affecting a given organ system of the body.</p> <p>²System Number of Cases includes the number of cases for all hospitals with charges. Records with zero charges are not included.</p> <p>³System Average Gross Charge is an average based on all hospital cases with charges.</p>																	