

2013

Vermont Hospitals Report

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Vermont Green Mountain Care Board

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Disclaimer

Vermont hospital discharge data for use in this publication were supplied by the VAHHS-NSO reporting system, Vermont EXPLOR, under a contract with GMCB. These data were supplied upon the authorization of the hospitals through agreements between VAHHS-NSO and each participating hospital.

After receipt of the data files from VAHHS-NSO, the data undergo additional editing and processing by the Vermont Department of Health, under an agreement with GMCB, before inclusion in the Vermont Uniform Hospital Discharge Data Set (VUHDDS). The VUHDDS is used to construct this report and is the official state data file available to the public. The Health Department does not assume responsibility for errors in the data due to coding or processing by hospitals, VAHHS-NSO Vermont EXPLOR, or other data providers.

Vermonters Using Out-of-State Hospitals

GMCB has data sharing agreements with state agencies in New Hampshire, Massachusetts, and New York to receive hospital discharge records for Vermont residents using hospital services outside of Vermont. Unfortunately, the New Hampshire data have not been available in a timely manner. The timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's data collection and processing technologies. At the time of this report, New Hampshire has not released data beyond 2009 that was available for the Vermont Hospital Utilization Reports (VHUR) published in 2011. In 2009, approximately 9,000 of 52,000 Vermont resident inpatient discharges occurred at New Hampshire hospitals and another 2,000 at Massachusetts and New York hospitals.

Requesting Hospital Data Files

Public Use data files are available on the Health Department website: <http://healthvermont.gov/research/hospital-utilization.aspx>.

Information on requesting research hospital discharge data sets (that include non-public data elements not found in Public Use data files) can be found on the Health Department website: http://healthvermont.gov/research/hospital-utilization/VHUR_FAQS.aspx.

For any additional information concerning the data sets, contact the Vermont Green Mountain Care Board at (802) 828-2900 or (800) 631-7788.

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2013 Vermont Hospitals Report

User's Guide

Introduction

The Vermont Hospitals Report presents information about patient health issues and hospital services provided in fourteen Vermont acute care hospitals within inpatient, outpatient and emergency department settings.

Hospital-based analyses are useful for understanding overall hospital utilization, and have applications for health system planning, cost containment, and resource development. Vermont hospitals near Vermont's borders may provide care to people in neighboring, non-Vermont towns. Hospital-based analyses include all people served by each hospital, regardless of their state of residency. This report focuses only on data from Vermont hospitals, and includes all patients who received services regardless of whether they were Vermont residents or residents of other states.

Analyses by hospital service area (HSA) can be used to compare data for residents of geographic regions of Vermont who were provided services in any Vermont, New Hampshire, New York, or Massachusetts hospital. With some caveats, population-based HSA analyses can help compare morbidity and practice variations across different regions of Vermont. Because data for Vermont residents using hospitals in bordering states are not available at the time of production of this report, it is not possible to calculate accurate population-based rates for Vermont residents for this report. ***This report is based only on data from Vermont hospitals: analyses by hospital service area are not available.***

Individuals may have multiple records in any or all of the datasets if they had multiple inpatient discharges, outpatient procedures, expanded outpatient services and/or emergency department visits during the

reporting year. Therefore, the number of discharge/visit records likely exceeds the number of individuals who received hospital-based services during the reporting year.

Sources of Data

All fourteen of Vermont's civilian acute care hospitals, under an agreement with the Vermont Association of Hospitals and Health Systems - Network Services Organization (VAHHS-NSO), supply discharge abstracts directly to VAHHS-NSO in electronic format for processing and consolidation. Under a contract with the Vermont Green Mountain Care Board (GMCB, formerly the Department of Financial Regulation, and prior to that, the Department of Banking, Insurance, Securities and Health Care Administration), VAHHS-NSO provides data to the Vermont Department of Health.

Upon receipt of Vermont hospital discharge data from VAHHS-NSO, the Health Department edits the data and checks for completeness and internal consistency. Results of these analyses are shared with VAHHS-NSO and participating Vermont hospitals as part of an ongoing quality improvement process.

The Veterans Administration hospital in White River Junction submitted data until June 30, 2006. The Brattleboro Retreat in Brattleboro and the Vermont State Hospital are strictly psychiatric hospitals and do not participate in this data collection effort.

Exclusions

As in any data set of this size, there are a small number of records with incomplete or missing elements. These records must be excluded from

particular analyses. The number of missing records is indicated in each table so that all totals can be reconciled.

Throughout the report, to avoid counting hospitalizations for delivery twice, the maternal record is included, but the newborn record is not. This is a standard practice in hospital utilization analysis. However, discharge records for newborns are retained in the Vermont Uniform Hospital Discharge Data Set to support research and analyses that include this population.

Data Collection in Vermont

Inpatient discharge data have been the core of the Vermont hospital utilization reports since 1975. These data have been helpful in hospital planning and have provided a longitudinal view of hospital utilization and the health of Vermonters.

All fourteen of Vermont's civilian acute care hospitals participate in the Emergency Department reporting system. ED usage is of particular interest in a rural state that may have limited sites and hours available for provision of primary and urgent care in some areas. ED data also provide essential information for injury control studies since this is often the setting in which accidental and intentional injuries are evaluated and treated. Reporting of ED data to the hospital discharge reporting system began in 2002.

All fourteen of Vermont's civilian acute care hospitals submit outpatient data to the hospital discharge reporting system. Reporting of outpatient procedures that occurred in an operating room began in 1989.

In 2006 additional types of hospital-based outpatient services were collected in the hospital discharge dataset, such as diagnostic tests and therapeutic services. This report continues to explore these expanded outpatient data and includes information on revenue codes and primary cost centers.

Hospital Settings

Inpatient Discharges. The inpatient dataset includes all discharges that are billed as an inpatient stay, regardless of admission source. Maternal records are included, but newborns (MDC 15) are excluded from reports to avoid duplicate counts (although newborn charges are included in reports of total charges). Several tables provide comparisons of inpatient discharges that originated in the ED with those that did not.

Emergency Department (ED) Visits. ED data are defined as records that originated in the ED, as indicated by an associated revenue code of 450-459, Emergency Room. ED visits are reported in terms of admission or non-admission to the inpatient setting.

Outpatient Procedures. The outpatient procedure data include records that did not originate in the ED and that have a procedure code in the ICD-9-CM code range 00.00-86.99. Outpatient procedures may have been performed in an operating room or other hospital outpatient setting.

Observation Beds. The hospital discharge data also include observation bed records, as indicated by an associated revenue code of 760 or 762, Treatment/Observation Room. These are records with a status recognized by third-party payers for beds occupied by a person in an observation status. The majority of observation bed records can be found in the outpatient setting with an associated ED revenue code and/or a procedure in the ICD-9-CM code range 00.00-86.99. There are a few of inpatient discharges from Vermont hospitals with an associated observation bed revenue code, and some observation bed records can be found in the outpatient data with no associated ED revenue code or ICD-9-CM procedure in range.

Expanded Outpatient Services. The expanded outpatient data include records that do not have an associated ED or observation bed revenue code, and do not have a procedure code in the ICD-9-CM code range

00.00-86.99. These data include additional types of hospital-based outpatient services, such as diagnostic tests and therapeutic services that are not classified elsewhere. Collection of the expanded outpatient data began with the 2006 reporting year.

Comparison across Hospital Settings. Since reporting year 2001, data have been available across three hospital settings: inpatient discharges, outpatient procedures, and emergency department (ED) visits. Comparison of utilization across these three settings offers a comprehensive view of patterns in the health care delivery system. The distribution of discharges among the three settings by hospital offers an interesting snapshot of local patterns of use. In most of these tables, the discharge records are sorted by diagnostic or procedure groups for comparison across the settings (see explanation of Clinical Classifications Software below).

Classification of Inpatient Discharges and Outpatient Procedures and Services

Inpatient discharges are often grouped by diagnoses using Medicare Severity Diagnosis Related Groups (MS-DRGs) and Major Diagnostic Categories (MDCs). MS-DRG groupings describe conditions and procedures related to similar body systems or etiologies, and are further grouped into 25 MDCs. However, for this report, inpatient discharges are grouped using the same Clinical Classifications Software (CCS) as used for outpatient procedures and services and emergency department visits in order to facilitate comparisons across hospital settings.

Hospitals currently report inpatient discharges and outpatient procedures and services in multiple ways, by using the International Classification of Disease codes (9th Revision, Clinical Modification: ICD-9-CM), Current Procedural Terminology (CPT) and Health Care Procedure Coding System (HCPCS) codes, and revenue codes. Using Clinical Classifications Software (CCS), inpatient tables are based upon ICD-9-CM diagnosis groups. Outpatient tables also are based upon ICD-9-CM

diagnosis and procedure groups, and on revenue groups. Records are presented at the visit level, one record per visit, except for Table O-10, where visits with multiple revenue groups are reported more than once. Some tables include records originating in the emergency department, and some do not.

Clinical Classifications Software (CCS). Clinical Classifications Software (CCS) is a tool that can collapse ICD-9-CM principal diagnosis codes (over 12,000) and procedure codes (over 3,500) into meaningful categories. The single-level diagnosis CCS aggregates illnesses and conditions into more than 260 mutually exclusive categories. Similarly, the single-level procedure CCS aggregates procedures into 231 mutually exclusive categories, most representing single types of procedures. High level CCS groups further collapse single-level CCS groups into broad categories based on body systems or condition.

CCS diagnosis and procedure groups are used in these tables to compare patient records within and across health care settings. CCS was developed at the Agency for Healthcare Research and Quality (AHRQ) and is available to the public at the website:

<http://www.heup-us.ahrq.gov/toolssoftware/ccs/ccs.jsp>

ICD-9-CM Procedure Groups. Although up to twenty procedures (the principal and 19 secondary procedures) can be listed on every outpatient discharge record, only the first procedure that is in the ICD-9-CM range 00.00-86.99 is analyzed in these tables. ICD-9-CM procedures have been grouped into categories based on the first two digits of their ICD-9-CM codes.

Revenue Code Primary Cost Center Groups. Primary Cost Centers (PCCR) are used to group revenue codes into broader categories of services. Just a few of all possible PCCR categories are reported individually in these tables. If a visit includes multiple revenue codes that map to the same PCCR category, or to multiple PCCR categories, each distinct category is counted once for that visit.

Highlights

Highlights of Charges and In-migration to Vermont Hospitals

Total Charges and Number of Discharges

- **Total charges for Vermont resident inpatient discharges from Vermont hospitals** increased by 5.6% from 2012 to 2013, a lower rate of increase than that from 2011 to 2012 (7.6%). Charges for non-resident inpatient discharges also increased by 6.1% from 2012 to 2013, compared to an increase of only 1.0% from 2011 to 2012. The *number* of inpatient discharges for Vermont residents decreased somewhat from 2012 to 2013 (-1.8%), and the number of non-resident inpatient discharges decreased by -6.0%.
- **Total charges for Vermont residents with ED visits to Vermont hospitals** increased substantially by 5.2% from 2012 to 2013, a lower rate of increase than that for non-residents (8.8%). These increases are both lower than those from 2011 to 2012 (11.1% and 11.4% respectively), but still much larger than those from 2010 to 2011 (3.2% and 5.1% respectively). The *number* of ED visits for both Vermont residents and non-residents decreased somewhat from 2012 to 2013 (-3.2% and -0.3% respectively).
- **Total charges for Vermont residents with outpatient procedures in ICD-9-CM range 00-86 at Vermont hospitals** increased by 7.3% from 2012 to 2013, less than the increase of 13.2% for non-residents. At the same time, the *number* of outpatient procedures in range for Vermont residents and non-residents increased slightly from 2012 to 2013 (1.5% and 4.1% respectively).

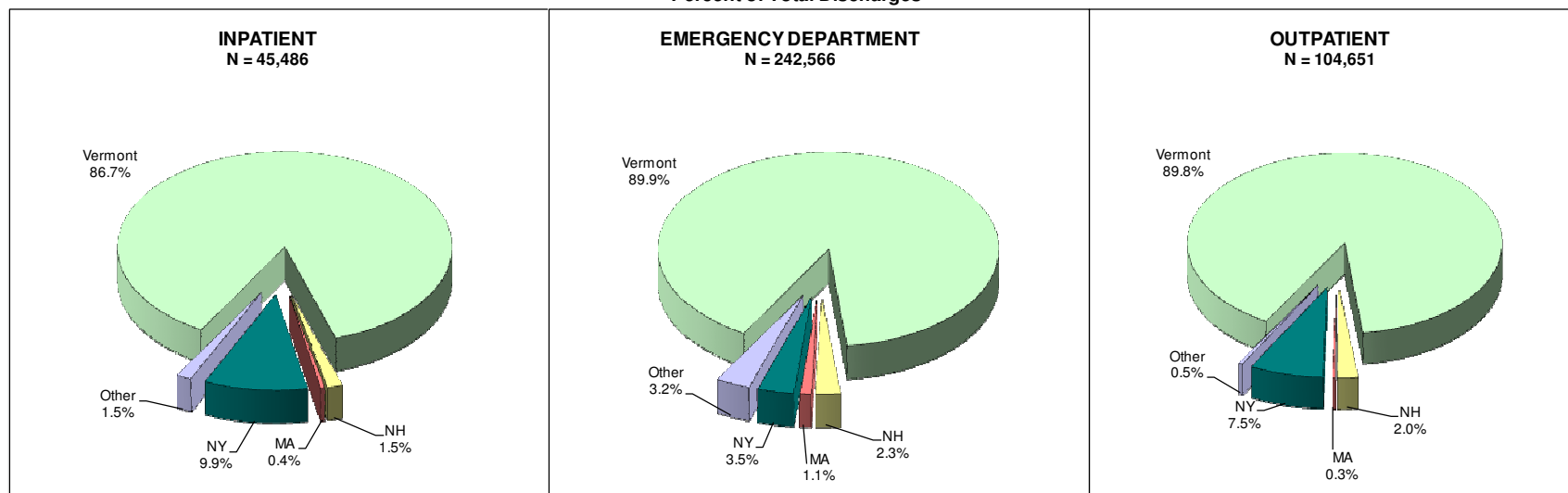
In-migration

- Most in-migration to Vermont hospitals in 2013 continued to be by New York residents for inpatient care, ED visits, and outpatient procedures in range. As in 2012, New York residents comprised a much smaller percent of all ED visits than of either inpatient discharges or outpatient procedures (3.5% of ED visits, compared to 9.9% of inpatient discharges and 7.5% of outpatient procedures in range).
- New York residents accounted for a higher percent of total charges than of total discharges in all three settings (4.2% of ED charges, 14.8% of inpatient charges and 10.3% of outpatient charges).

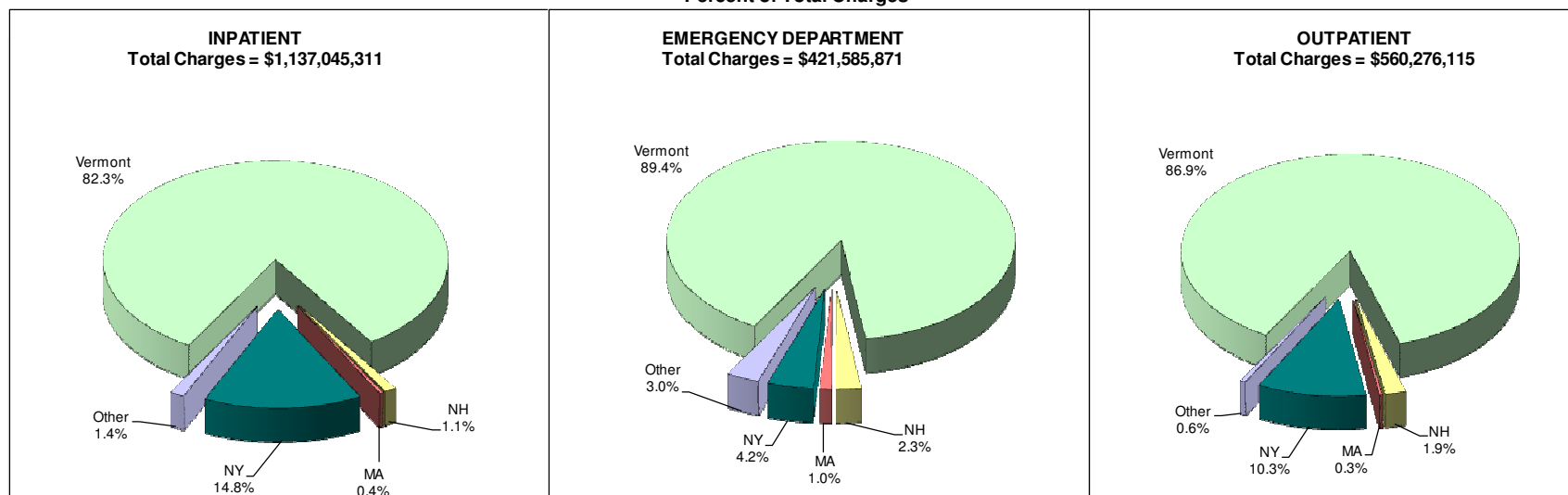
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2013 Vermont Hospitals Summary of Patients' State of Residence by Hospital Setting

Percent of Total Discharges



Percent of Total Charges

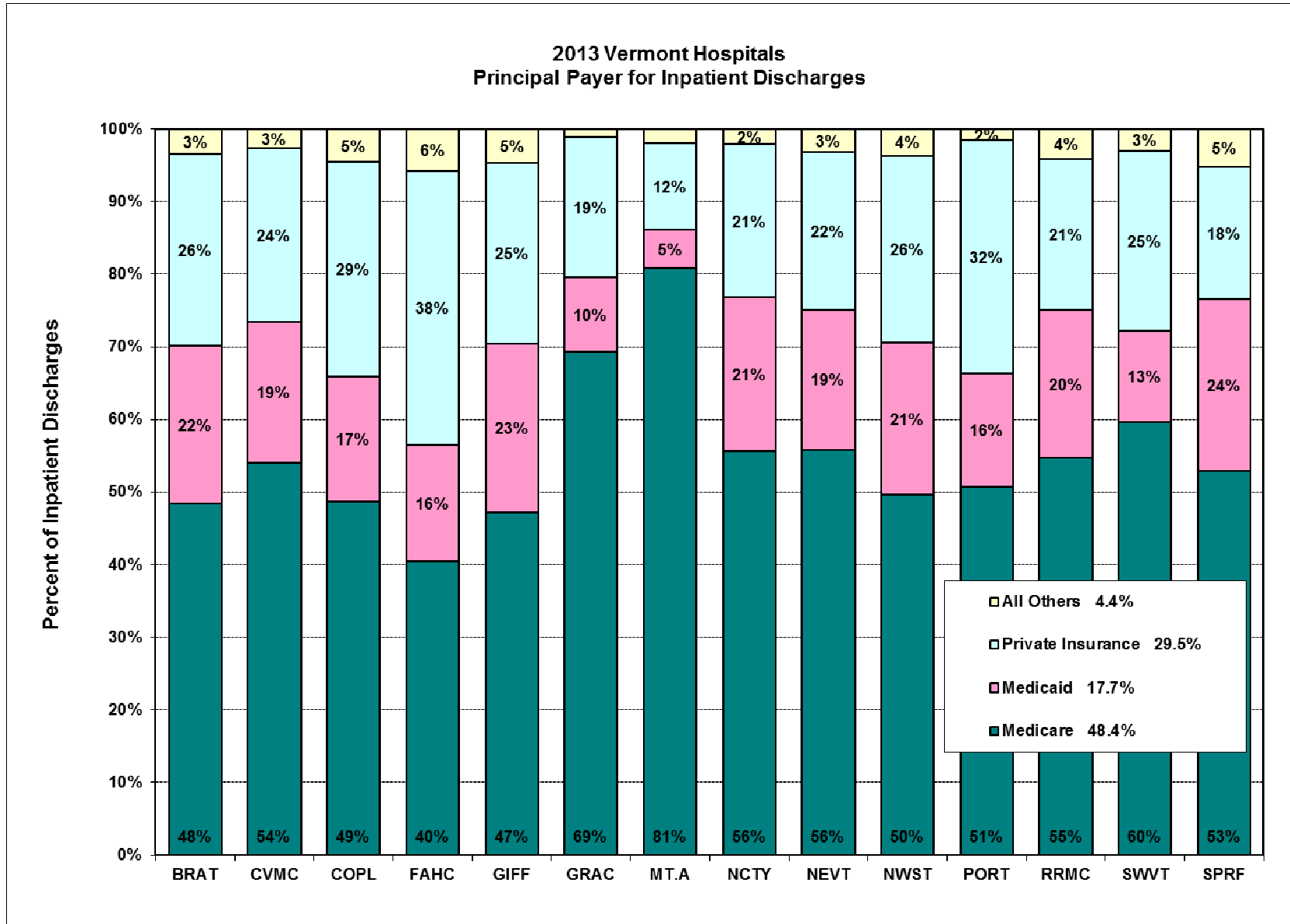


Numbers of discharges exclude newborns. Total charges include charges for newborns.

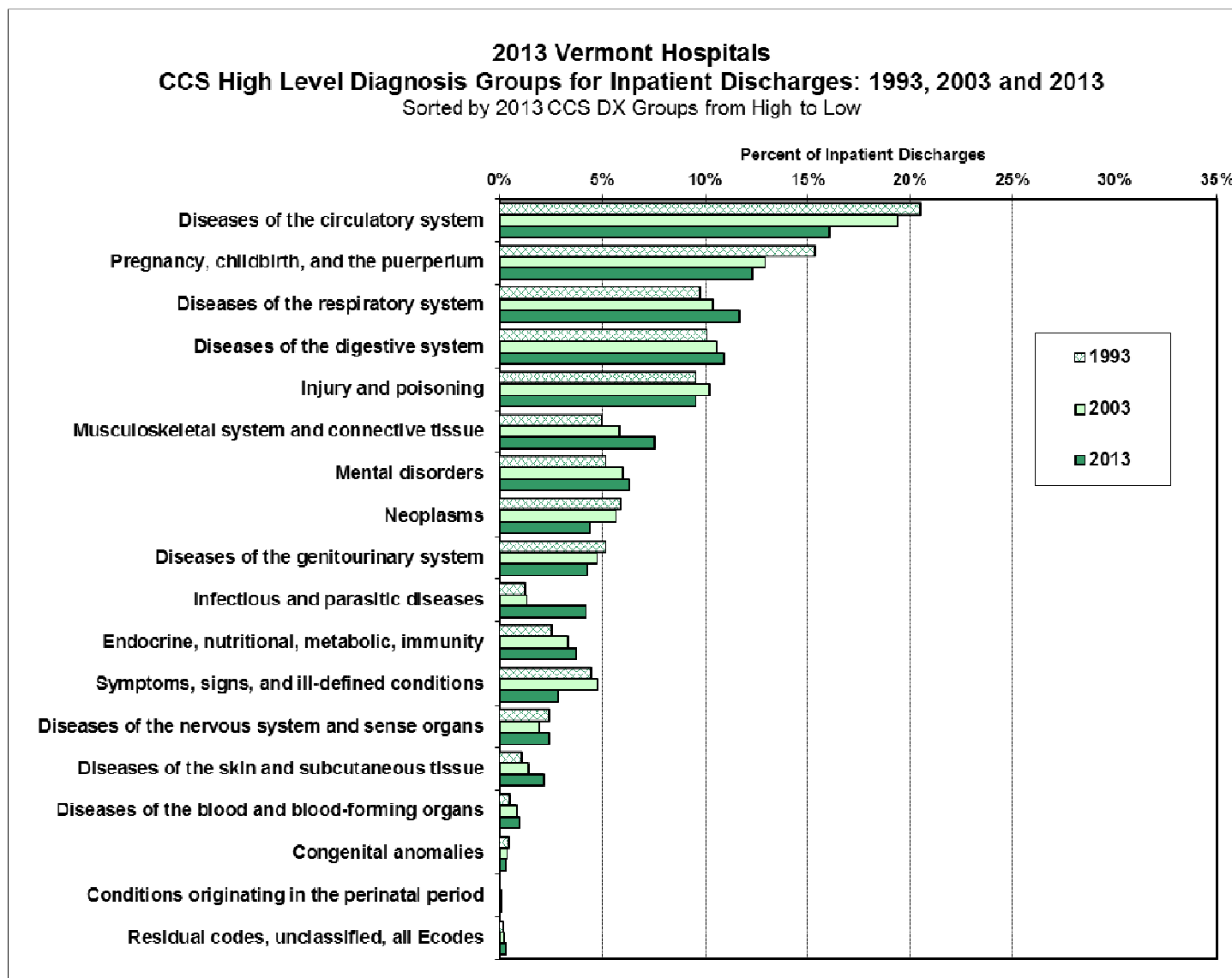
Highlights of Inpatient Discharges from Vermont Hospitals

- **In 2013 there were 45,486 inpatient discharges from Vermont hospitals**, including maternal records but excluding newborns. Of these, 86.7% were Vermont residents, and 13.3% were residents of New Hampshire, Massachusetts, New York or elsewhere.
- **The number of inpatient discharges from Vermont hospitals has declined** 12.8% from 1993, and 9.0% from 2003, including both Vermont residents and non-residents. The average length of stay for these discharges has declined from 5.8 days per discharge in 1993, to 4.7 in 2003, and 4.6 in 2013.
- **Similar to findings in recent years**, more than half of the total inpatient discharges from Vermont hospitals in 2013 originated in the Emergency Department (54.6%).
- **Fletcher Allen Health Care** continued to have the highest number of inpatient discharges at 19,098 in 2013 (42.0% of all inpatient discharges, compared to 35.2% in 1993 and 41.7% in 2003). Rutland followed with 6,201 discharges (13.6%). Grace Cottage Hospital and Mt. Ascutney Hospital and Health Center had the lowest total numbers of inpatient discharges (166 and 360 respectively).
- **Fletcher Allen Health Care** continued to have the highest total number of patient days at 107,686 in 2013 (51.1% of all patient days), followed by Rutland Regional Medical Center with 28,531 (13.5%). Grace Cottage Hospital had the lowest total number of patient days (501).
- **In 2013, average length of stay in Vermont hospitals varied** from 2.7 days per discharge at Copley Hospital to 5.6 days per discharge at Fletcher Allen.

- **In 2013, Medicare continued to be the leading principal payer** for inpatient discharges from Vermont hospitals at 48.4% of total discharges, followed by Private Insurance at 29.5% and Medicaid at 17.7%. However, there was wide variation among hospitals in payer mix.



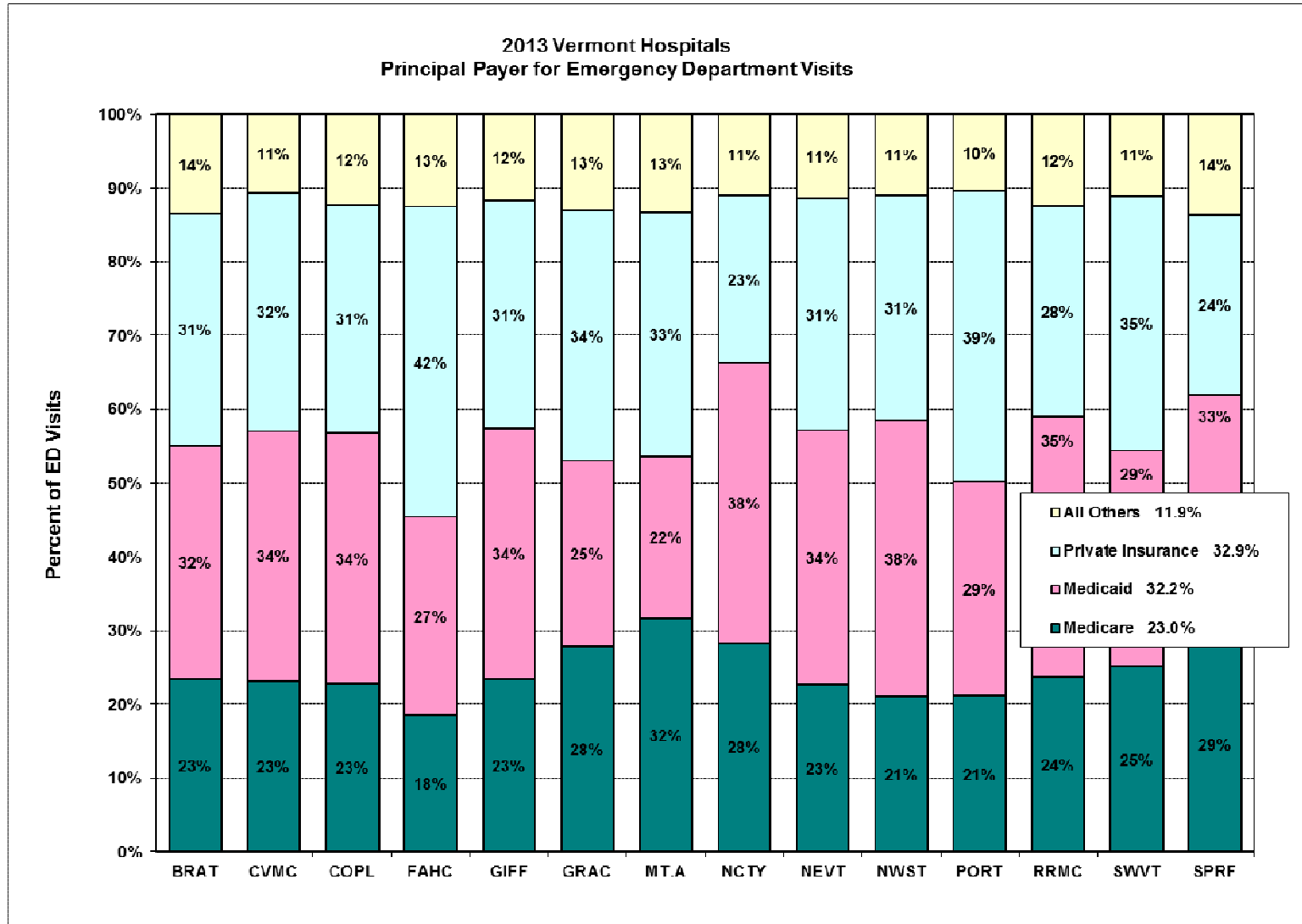
- **The most frequent reasons for hospitalization in 2013** were Diseases of the circulatory system; Pregnancy, childbirth and the puerperium; Diseases of the respiratory system; Diseases of the digestive system; and Injury and poisoning, consistent with recent years.



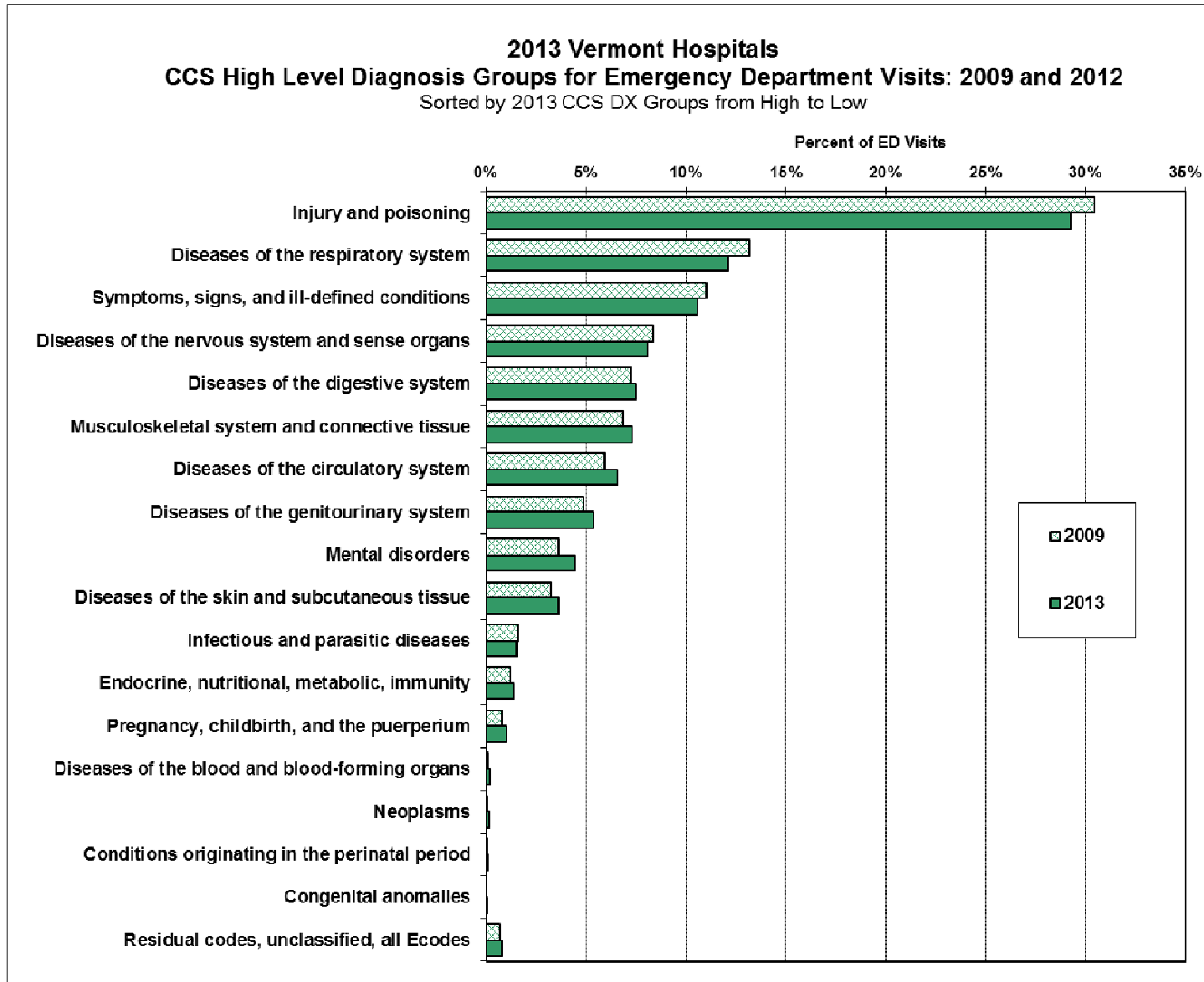
Highlights of Visits to Vermont Hospital Emergency Departments

- **In 2013 there were a total of 267,414 visits to Vermont hospital Emergency Departments**, including both Vermont residents and non-residents, a 2.7% decrease from 2012. As in 2012, about 91% (242,566) of these ED visits were not admitted, while the remaining 9% (24,848) of ED visits were admitted and categorized as inpatient discharges.
- **The number of all ED visits increased** from 2009 to 2013 by 2.4% overall (2.1% for ED visits not admitted and 4.9% for those admitted as inpatients).
- **In 2013, the percent of ED visits that were admitted as inpatients tended to increase with increasing age.** About 3% of ED visits by children under age 15 were admitted, as were 4.5% of visits by individuals age 15-24, 12.2% of visits by those age 25-44, 29.0% of those age 45-64, 17.5% of those age 65-74, and 33.7% of those age 75 and older.
- **Fletcher Allen Health Care** continued to have the highest percent of visits to the ED in 2013, leading all Vermont hospitals with 21.0% of all ED visits. Of all ED visits to FAHC, 16.7% were admitted as inpatients, consistent with 2012.
- **The percent of ED visits that were admitted in 2013** ranged from highs of 16.7% at FAHC, 13.5% at Rutland Regional Medical Center, and 13.2% at Southwestern Vermont Medical Center, to a low of 1.0% at Grace Cottage Hospital.
- **Overall, the percent of ED visits with a CCS diagnosis group of congenital anomalies that were admitted decreased in 2013** (33.7% of such cases, down from 37.2% in 2012), but remains higher than in 2011 (27.2%). While there is little change in the percent of ED visits that are admitted within specific CCS diagnosis groups from 2012 to 2013, there is much variation within individual hospitals over time that could be accounted for by the severity of each case.

In 2013, private insurance was the leading principal payer for ED visits not admitted at 32.9% of these visits, followed by Medicaid at 32.2% and Medicare at 23.0%. These figures are comparable to those in recent years.



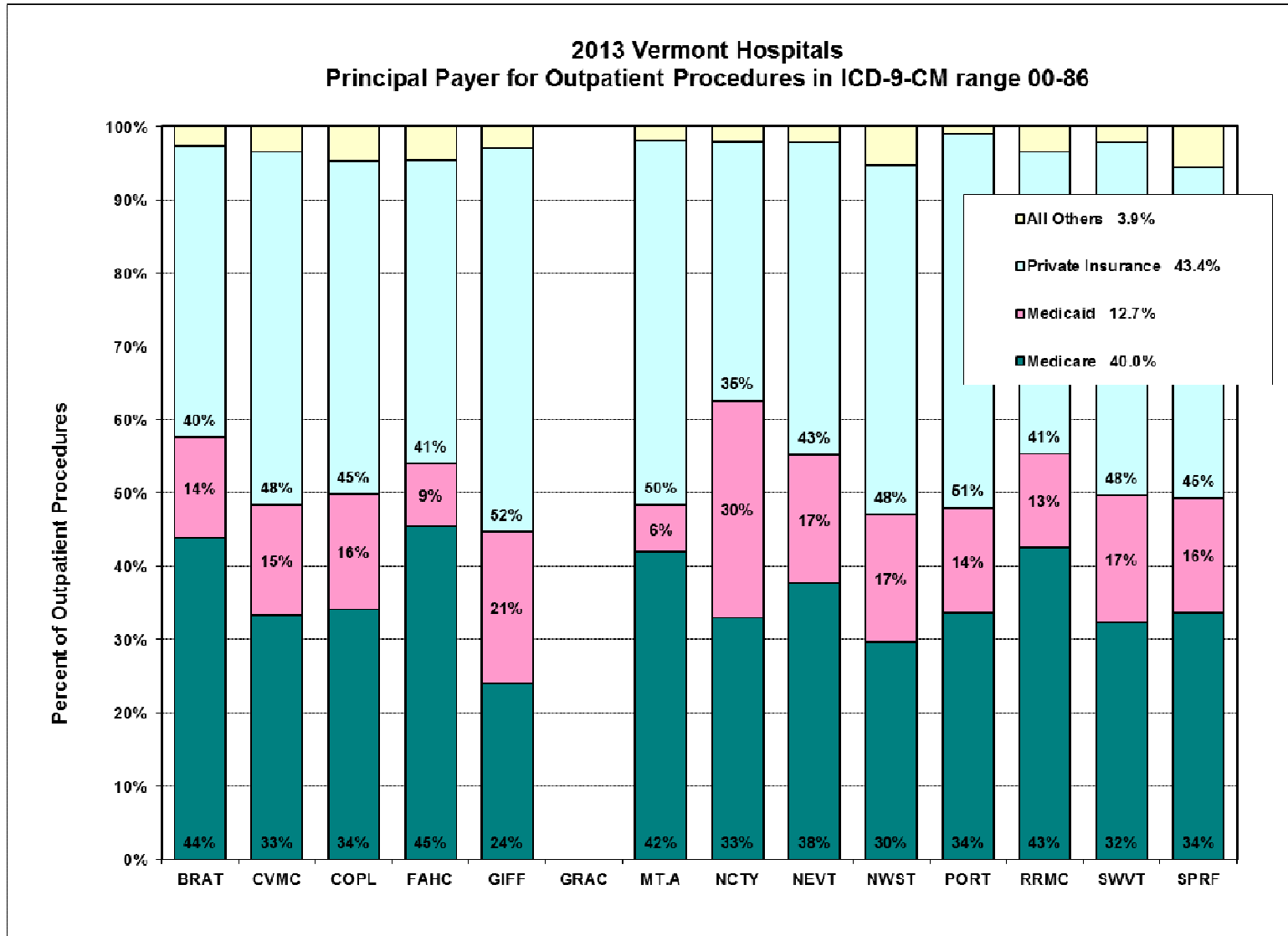
- **The most frequent reasons for ED visits not admitted in 2013** were Injury and poisoning; Diseases of the respiratory system; Symptoms, signs and ill-defined conditions; Diseases of the nervous system and sense organs; Diseases of the digestive system; and Musculoskeletal system & connective tissue, consistent with recent years.



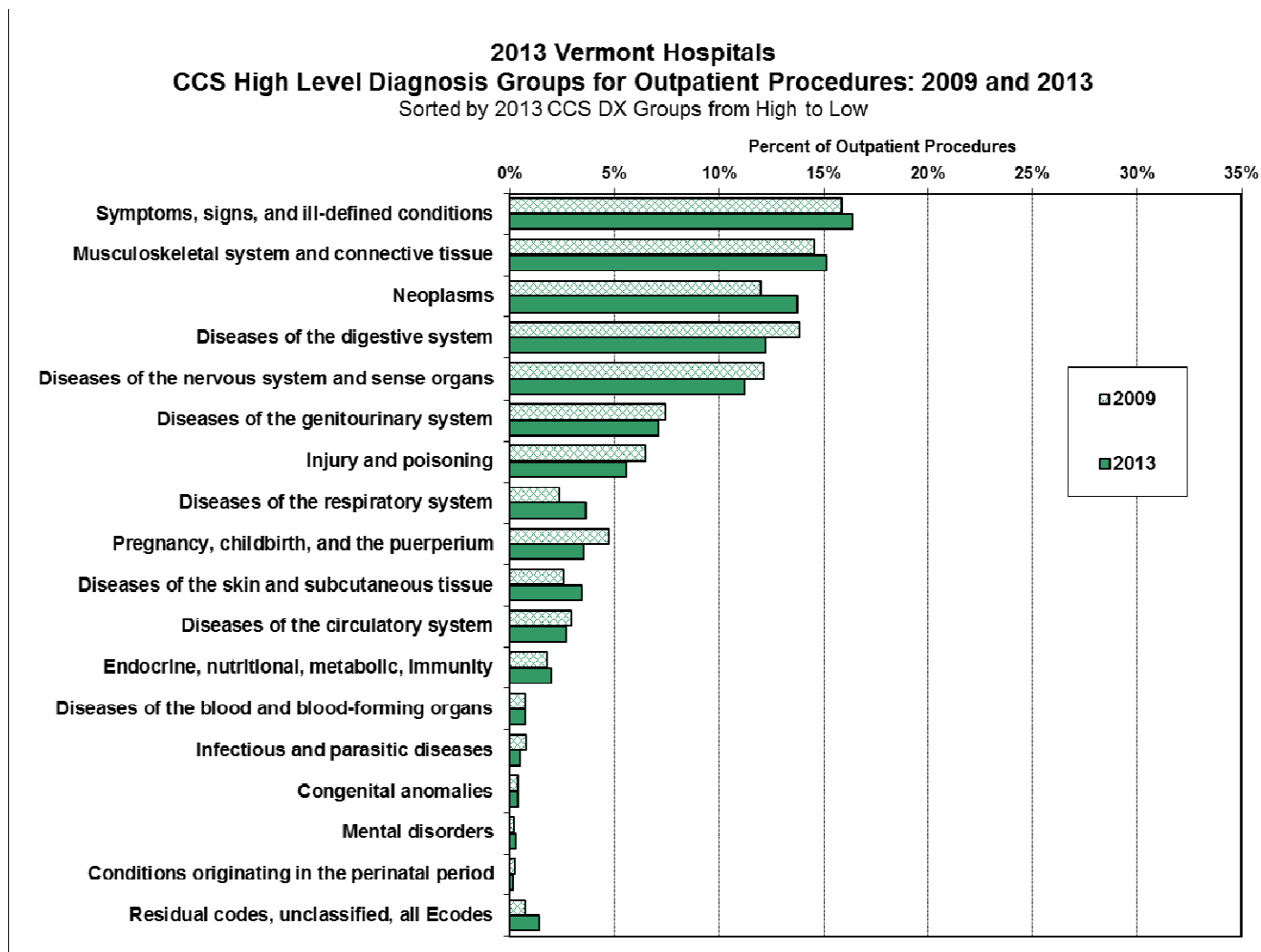
Highlights of Outpatient Visits to Vermont Hospitals

- **In 2013, there were 104,651 visits to Vermont hospitals for outpatient procedures** with an ICD-9-CM procedure code in the range 00.00-86.99, representing both Vermont residents and non-residents. These outpatient visits did not originate in the Emergency Department. Grace Cottage Hospital had no visits for outpatient procedures in range.
- **The number of outpatient procedures in range in Vermont hospitals** continued to increase very slightly as in recent years, showing an overall increase of 2.9% from 2009 to 2013. Most of this increase was seen from 2012 to 2013 (1.8%).
- **Overall, non-residents accounted for 10.2% of the 104,651 visits to Vermont hospitals for outpatient procedures** in 2013. However, there was wide variation among hospitals, with non-residents comprising 40.2% of Mt. Ascutney Hospital and Health Center's outpatient visits and 23.1% of Southwestern Vermont Medical Center's outpatient visits, compared to about 1% of outpatient visits to Central Vermont Medical Center, Copley Hospital, North Country Hospital and Northwestern Medical Center.
- **Medicare was the primary payer** for 40.0% of all visits to Vermont hospitals for outpatient procedures in 2013. Brattleboro Memorial Hospital, Fletcher Allen Health Care, Mt. Ascutney Hospital and Health Center, and Rutland Regional Medical Center reported over 40% of their outpatient visits with Medicare as the primary payer. Consistent with recent years, there was substantial variation by CCS diagnosis group, with Diseases of the skin and subcutaneous tissue and Diseases of the nervous system and sense organs having the highest percent of visits with Medicare as the primary payer (72.7% and 61.4%, respectively).
- **Mt. Ascutney Hospital and Health Center reported the lowest percent of outpatient procedures with Medicaid** as primary payer (6.5%), followed by Fletcher Allen Health Care with 8.5%, while North Country Hospital reported the highest percent with Medicaid as primary payer (29.6%).
- **The services most frequently provided in expanded outpatient visits** in 2013 were charged under the primary cost center for Laboratory-Clinical services, in all 14 Vermont hospitals. The frequency of these services far exceeded the next most frequent services, which were charged under the primary cost centers for Radiology-Diagnostic, Mammography, Ultrasound, Physical Therapy, Laboratory-Pathological, and Cytology. These findings are consistent with recent years.
- **Compared to 2012, in 2013 the total number of observation beds decreased by 9.2%, while the average charge per observation bed increased by 8.6%.** Fletcher Allen Health Care had the most observation bed records, with 18.3% of all observation bed records (including inpatient, outpatient and ED settings). Rutland Regional Medical Center had 16.2% of these records, followed by Central Vermont Medical Center (11.8%). These findings are fairly consistent with recent years, as the same hospitals consistently have the highest percents of observation beds but the rank order may change from one year to another.

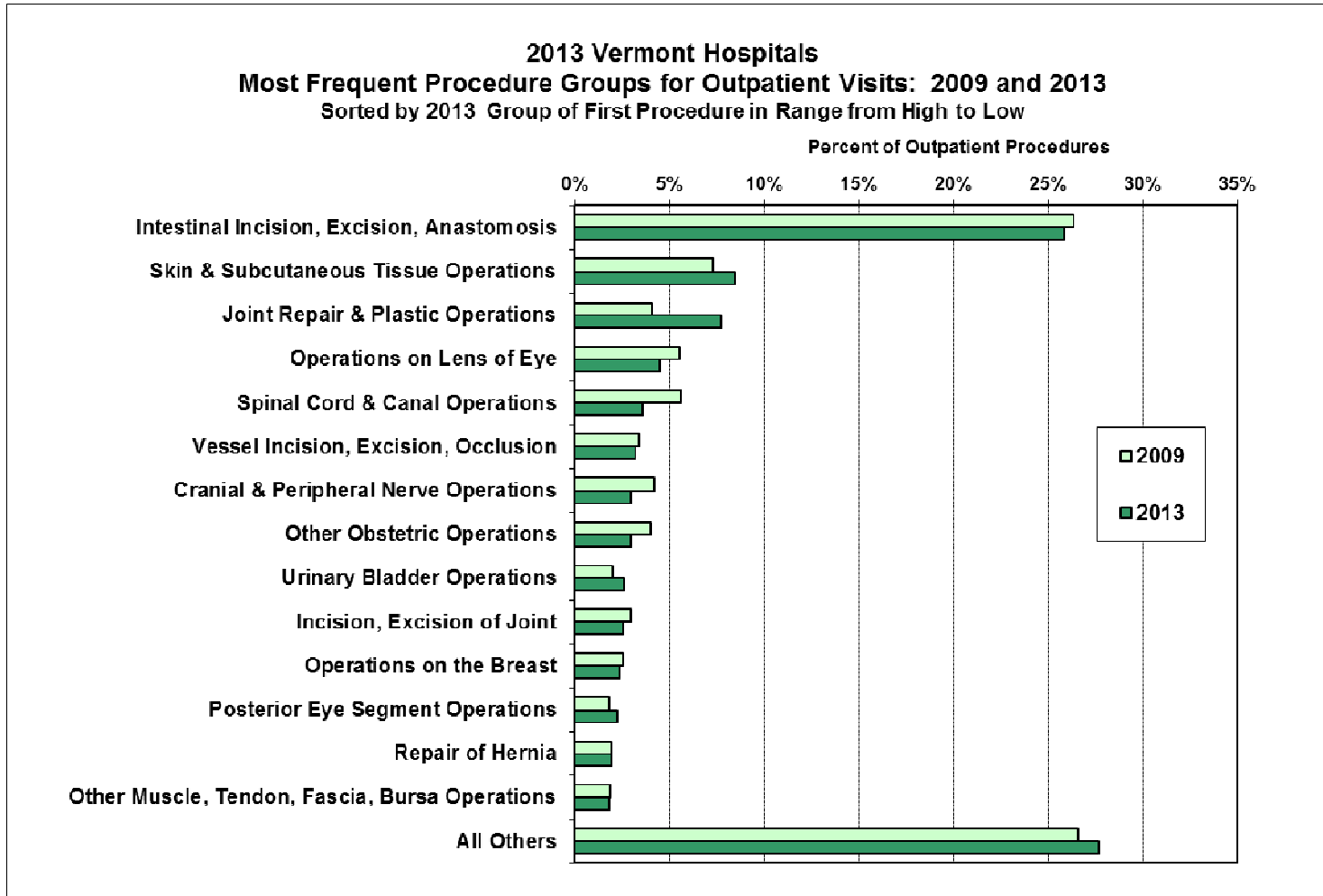
- In 2013, private insurance was the leading principal payer for outpatient procedures in range at 43.4% of these procedures, followed by Medicare at 40.0% and Medicaid at 12.7%.



- **The most frequent reasons for outpatient procedures in range** in 2013 were Symptoms, signs and ill-defined conditions; Musculoskeletal system & connective tissue; Neoplasms; Diseases of the digestive system; and Diseases of the nervous system and sense organs. The most frequent reasons in 2013 are consistent with those in recent years, although their rank order may differ a little.

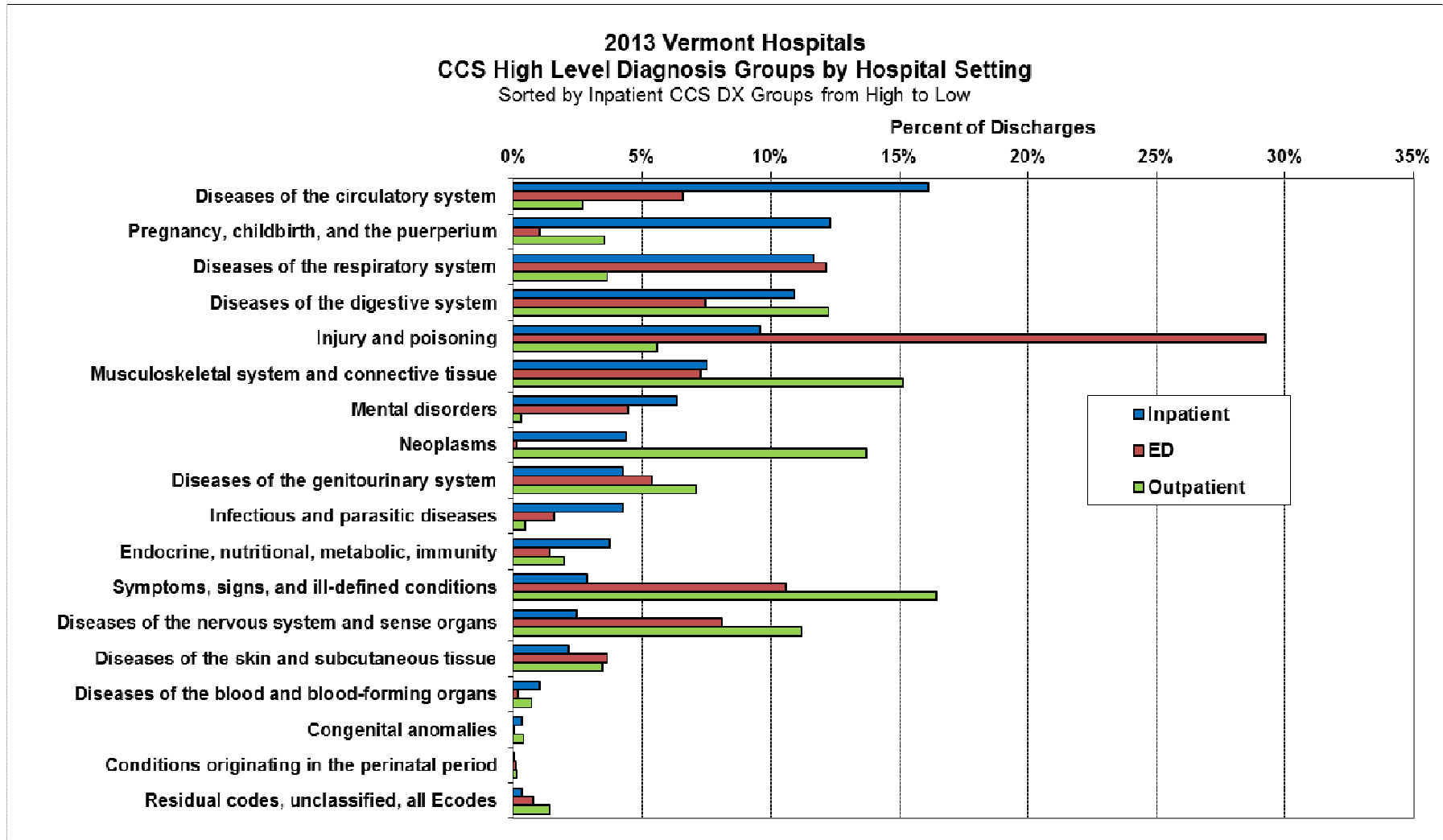


- **The leading group of the first outpatient procedure in range in both 2009 and 2013** was Intestinal Incision, Excision, and Anastomosis of Intestine. This procedure group includes diagnostic and other procedures on the small or large intestine. Following this procedure group were Skin & Subcutaneous Tissue Operations; Joint Repair & Plastic Operations (i.e., spinal fusion, joint replacement); Operations on Lens of Eye; and Spinal Cord & Canal Operations (i.e., exploration and decompression of spinal canal structures, excision or destruction of lesion of spinal cord or spinal meninges). The most frequent first-in-range procedure groups in 2013 are consistent with those in recent years, although their rank order may differ a little.

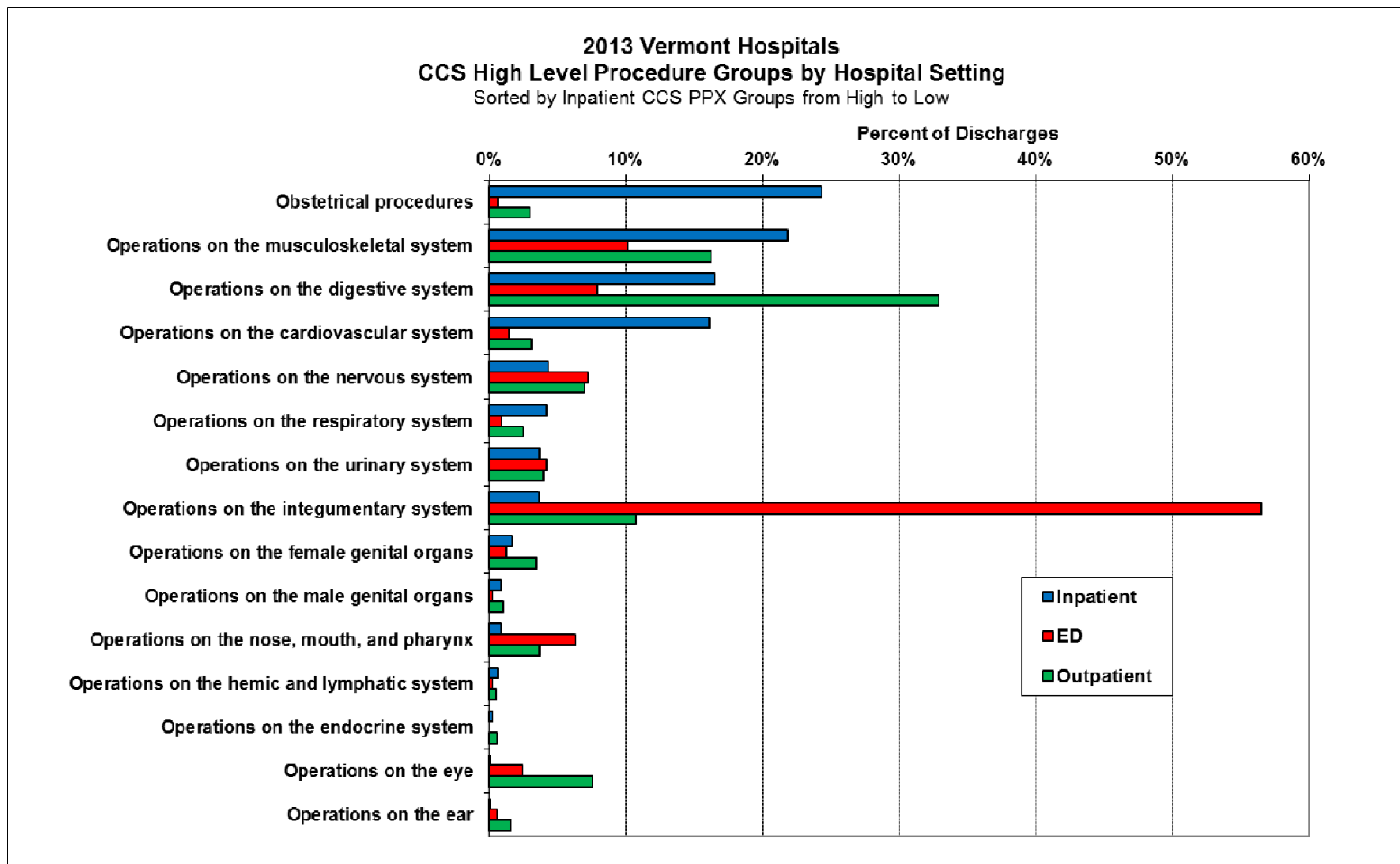


Highlights of Comparisons across Vermont Hospital Settings

- The most frequent CCS high level diagnosis groups differed across Vermont hospital settings in 2013.** The most frequent diagnosis group (based on primary diagnosis) for inpatients was Diseases of the circulatory system. The most frequent diagnosis group for ED visits was Injury and poisoning, and for outpatients, Symptoms, signs, and ill-defined conditions (followed closely Musculoskeletal system and connective tissue, and Neoplasms). The frequencies of these CCS high level diagnosis groups have been consistent in recent years.



- **The most frequent CCS high level procedure groups differed across hospital settings in 2013.** The most frequent procedure group (based on the first procedure in range) for inpatients was Obstetrical procedures, followed by Operations on the musculoskeletal system. The most frequent procedure group for ED visits was Operations on the integumentary system, and for outpatients, Operations on the digestive system. The frequencies of these CCS high level procedure groups have been consistent in recent years.



Inpatient Discharges

Table I-1
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Vermont Hospitals by Setting

Vermont Hospital	Inpatient Discharges NOT Originating in ED		Inpatient Discharges Originating in ED		All Inpatient Discharges	
	N	Row %	N	Row %	N	Col %
Brattleboro Memorial Hospital	738	46.3%	855	53.7%	1,593	3.5%
Central Vermont Medical Center	813	24.3%	2,536	75.7%	3,349	7.4%
Copley Hospital	1,097	77.6%	316	22.4%	1,413	3.1%
Fletcher Allen Health Care	9,701	50.8%	9,397	49.2%	19,098	42.0%
Gifford Medical Center	444	41.6%	624	58.4%	1,068	2.3%
Grace Cottage Hospital	139	83.7%	27	16.3%	166	0.4%
Mt. Ascutney Hospital and Health Center	185	51.4%	175	48.6%	360	0.8%
North Country Hospital	1,016	77.9%	288	22.1%	1,304	2.9%
Northeastern Vermont Regional Hospital	997	77.0%	298	23.0%	1,295	2.8%
Northwestern Medical Center	855	37.4%	1,434	62.6%	2,289	5.0%
Porter Medical Center	633	40.0%	948	60.0%	1,581	3.5%
Rutland Regional Medical Center	1,730	27.9%	4,471	72.1%	6,201	13.6%
Southwestern Vermont Medical Center	888	22.7%	3,016	77.3%	3,904	8.6%
Springfield Hospital	1,402	75.2%	463	24.8%	1,865	4.1%
Total	20,638	45.4%	24,848	54.6%	45,486	100.0%

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

Table I-2
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013

<u>Vermont Hospital</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Brattleboro Memorial Hospital	2,509	2,111	1,593	12,301	9,016	5,374	4.9	4.3	3.4
Central Vermont Medical Center	4,602	3,286	3,349	25,018	14,347	15,978	5.4	4.4	4.8
Copley Hospital	1,606	1,165	1,413	7,079	4,467	3,883	4.4	3.8	2.7
Fletcher Allen Health Care	18,354	20,821	19,098	118,469	114,113	107,686	6.5	5.5	5.6
Gifford Medical Center	1,151	1,070	1,068	4,554	3,525	3,596	4.0	3.3	3.4
Grace Cottage Hospital	219	187	166	645	498	501	2.9	2.7	3.0
Mt. Ascutney Hospital and Health Center	532	402	360	2,970	1,495	1,391	5.6	3.7	3.9
North Country Hospital	2,128	1,839	1,304	8,728	5,667	4,709	4.1	3.1	3.6
Northeastern Vermont Regional Hospital	2,476	1,604	1,295	16,727	5,154	4,250	6.8	3.2	3.3
Northwestern Medical Center	2,397	2,412	2,289	14,349	8,915	7,882	6.0	3.7	3.4
Porter Medical Center	1,687	1,472	1,581	7,299	5,637	5,507	4.3	3.8	3.5
Rutland Regional Medical Center	7,225	6,559	6,201	44,600	31,120	28,531	6.2	4.7	4.6
Southwestern Vermont Medical Center	4,925	4,467	3,904	27,283	17,498	13,030	5.5	3.9	3.3
Springfield Hospital	2,335	2,581	1,865	11,684	11,769	8,430	5.0	4.6	4.5
Total	52,146	49,976	45,486	301,706	233,221	210,748	5.8	4.7	4.6

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
All Vermont Hospitals									
Infectious & parasitic diseases	656	645	1,923	4,396	4,373	12,162	6.7	6.8	6.3
Neoplasms	3,106	2,828	1,995	20,747	15,984	10,921	6.7	5.7	5.5
Endocrine, nutritional, metabolic, immunity	1,343	1,679	1,692	10,006	8,080	8,309	7.5	4.8	4.9
Diseases of the blood & blood-forming organs	269	412	449	1,316	1,794	1,681	4.9	4.4	3.7
Mental disorders	2,712	2,987	2,877	32,423	21,833	27,860	12.0	7.3	9.7
Diseases of the nervous system and sense organs	1,275	970	1,104	5,960	4,181	5,114	4.7	4.3	4.6
Diseases of the circulatory system	10,735	9,710	7,322	66,492	40,356	29,132	6.2	4.2	4.0
Diseases of the respiratory system	5,118	5,186	5,310	31,787	26,469	23,931	6.2	5.1	4.5
Diseases of the digestive system	5,298	5,295	4,963	29,912	25,080	20,761	5.6	4.7	4.2
Diseases of the genitourinary system	2,707	2,371	1,928	11,238	8,009	7,391	4.2	3.4	3.8
Pregnancy, childbirth, and the puerperium	8,024	6,469	5,606	19,089	16,353	14,321	2.4	2.5	2.6
Diseases of the skin and subcutaneous tissue	585	701	966	4,806	3,926	4,993	8.2	5.6	5.2
Musculoskeletal system and connective tissue	2,619	2,930	3,430	14,620	11,925	11,542	5.6	4.1	3.4
Congenital anomalies	260	182	143	1,118	637	640	4.3	3.5	4.5
Conditions originating in the perinatal period	5	1	3	5	2	16	1.0	2.0	5.3
Injury & poisoning	5,003	5,128	4,352	28,688	26,216	20,698	5.7	5.1	4.8
Symptoms, signs & ill-defined conditions	2,335	2,379	1,290	18,734	17,521	10,929	8.0	7.4	8.5
Residual codes, unclassified, all Ecodes	96	103	133	369	482	347	3.8	4.7	2.6
Total	52,146	49,976	45,486	301,706	233,221	210,748	5.8	4.7	4.6

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Brattleboro Memorial Hospital									
Infectious & parasitic diseases	38	29	98	298	170	477	7.8	5.9	4.9
Neoplasms	148	108	64	1,005	616	347	6.8	5.7	5.4
Endocrine, nutritional, metabolic, immunity	80	89	51	652	428	195	8.2	4.8	3.8
Diseases of the blood & blood-forming organs	18	14	22	72	53	65	4.0	3.8	3.0
Mental disorders	34	31	24	278	174	61	8.2	5.6	2.5
Diseases of the nervous system and sense organs	57	40	23	256	177	75	4.5	4.4	3.3
Diseases of the circulatory system	387	361	171	2,017	1,466	579	5.2	4.1	3.4
Diseases of the respiratory system	207	216	168	1,404	1,110	595	6.8	5.1	3.5
Diseases of the digestive system	306	259	183	1,741	1,240	727	5.7	4.8	4.0
Diseases of the genitourinary system	136	127	80	462	401	240	3.4	3.2	3.0
Pregnancy, childbirth, and the puerperium	518	376	362	1,208	938	885	2.3	2.5	2.4
Diseases of the skin and subcutaneous tissue	15	36	50	168	223	181	11.2	6.2	3.6
Musculoskeletal system and connective tissue	151	146	164	887	789	478	5.9	5.4	2.9
Congenital anomalies	4	6	1	8	39	7	2.0	6.5	7.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	343	236	122	1,583	1,081	427	4.6	4.6	3.5
Symptoms, signs & ill-defined conditions	61	33	9	239	98	34	3.9	3.0	3.8
Residual codes, unclassified, all Ecodes	6	4	1	23	13	1	3.8	3.3	1.0
Total	2,509	2,111	1,593	12,301	9,016	5,374	4.9	4.3	3.4

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Central Vermont Medical Center									
Infectious & parasitic diseases	56	35	149	375	170	735	6.7	4.9	4.9
Neoplasms	334	173	77	2,213	842	376	6.6	4.9	4.9
Endocrine, nutritional, metabolic, immunity	128	110	85	854	407	370	6.7	3.7	4.4
Diseases of the blood & blood-forming organs	20	28	24	84	85	83	4.2	3.0	3.5
Mental disorders	332	503	545	3,068	3,640	4,886	9.2	7.2	9.0
Diseases of the nervous system and sense organs	99	40	62	418	159	256	4.2	4.0	4.1
Diseases of the circulatory system	808	429	397	4,364	1,446	1,462	5.4	3.4	3.7
Diseases of the respiratory system	479	434	591	2,818	2,272	2,808	5.9	5.2	4.8
Diseases of the digestive system	627	354	366	3,355	1,522	1,466	5.4	4.3	4.0
Diseases of the genitourinary system	297	152	134	1,407	464	495	4.7	3.1	3.7
Pregnancy, childbirth, and the puerperium	642	425	368	1,498	859	904	2.3	2.0	2.5
Diseases of the skin and subcutaneous tissue	48	44	96	364	174	440	7.6	4.0	4.6
Musculoskeletal system and connective tissue	178	199	211	1,160	895	791	6.5	4.5	3.7
Congenital anomalies	8	3	2	24	11	15	3.0	3.7	7.5
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	394	308	209	2,459	1,235	816	6.2	4.0	3.9
Symptoms, signs & ill-defined conditions	147	47	28	544	161	66	3.7	3.4	2.4
Residual codes, unclassified, all Ecodes	5	2	5	13	5	9	2.6	2.5	1.8
Total	4,602	3,286	3,349	25,018	14,347	15,978	5.4	4.4	4.8

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Copley Hospital									
Infectious & parasitic diseases	17	18	23	108	95	120	6.4	5.3	5.2
Neoplasms	71	56	24	366	273	79	5.2	4.9	3.3
Endocrine, nutritional, metabolic, immunity	44	33	34	223	155	88	5.1	4.7	2.6
Diseases of the blood & blood-forming organs	5	9	1	14	28	3	2.8	3.1	3.0
Mental disorders	29	16	16	144	83	47	5.0	5.2	2.9
Diseases of the nervous system and sense organs	30	25	38	124	95	94	4.1	3.8	2.5
Diseases of the circulatory system	292	126	159	1,345	416	430	4.6	3.3	2.7
Diseases of the respiratory system	203	139	191	1,244	637	641	6.1	4.6	3.4
Diseases of the digestive system	180	156	205	913	659	647	5.1	4.2	3.2
Diseases of the genitourinary system	88	52	58	307	166	173	3.5	3.2	3.0
Pregnancy, childbirth, and the puerperium	278	259	221	568	555	403	2.0	2.1	1.8
Diseases of the skin and subcutaneous tissue	27	25	34	177	163	128	6.6	6.5	3.8
Musculoskeletal system and connective tissue	60	66	254	328	326	554	5.5	4.9	2.2
Congenital anomalies	1	-	1	1	-	2	1.0	-	2.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	239	158	123	1,074	733	402	4.5	4.6	3.3
Symptoms, signs & ill-defined conditions	42	24	23	143	73	58	3.4	3.0	2.5
Residual codes, unclassified, all Ecodes	-	3	8	-	10	14	-	3.3	1.8
Total	1,606	1,165	1,413	7,079	4,467	3,883	4.4	3.8	2.7

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Fletcher Allen Health Care									
Infectious & parasitic diseases	196	227	821	1,557	2,171	6,674	7.9	9.6	8.1
Neoplasms	1,328	1,533	1,347	8,566	9,776	7,872	6.5	6.4	5.8
Endocrine, nutritional, metabolic, immunity	355	689	796	2,799	3,840	5,210	7.9	5.6	6.5
Diseases of the blood & blood-forming organs	101	180	179	570	1,004	847	5.6	5.6	4.7
Mental disorders	875	916	710	12,091	8,713	10,794	13.8	9.5	15.2
Diseases of the nervous system and sense organs	578	502	618	2,635	2,556	3,465	4.6	5.1	5.6
Diseases of the circulatory system	4,022	4,880	4,079	30,435	23,514	18,685	7.6	4.8	4.6
Diseases of the respiratory system	1,183	1,255	1,299	8,259	8,555	6,985	7.0	6.8	5.4
Diseases of the digestive system	1,367	1,839	1,757	9,341	9,938	8,501	6.8	5.4	4.8
Diseases of the genitourinary system	691	887	601	3,105	3,360	2,875	4.5	3.8	4.8
Pregnancy, childbirth, and the puerperium	3,238	2,461	2,236	8,399	7,312	6,300	2.6	3.0	2.8
Diseases of the skin and subcutaneous tissue	169	193	200	1,580	1,335	1,913	9.3	6.9	9.6
Musculoskeletal system and connective tissue	1,049	1,220	1,253	5,227	4,901	5,067	5.0	4.0	4.0
Congenital anomalies	213	157	106	968	536	505	4.5	3.4	4.8
Conditions originating in the perinatal period	-	1	2	-	2	14	-	2.0	7.0
Injury & poisoning	1,777	2,403	2,170	11,228	14,442	12,404	6.3	6.0	5.7
Symptoms, signs & ill-defined conditions	1,156	1,433	859	11,498	11,910	9,418	9.9	8.3	11.0
Residual codes, unclassified, all Ecodes	56	45	65	211	248	157	3.8	5.5	2.4
Total	18,354	20,821	19,098	118,469	114,113	107,686	6.5	5.5	5.6

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Gifford Medical Center									
Infectious & parasitic diseases	29	9	26	144	36	143	5.0	4.0	5.5
Neoplasms	35	22	20	238	83	92	6.8	3.8	4.6
Endocrine, nutritional, metabolic, immunity	24	41	36	176	136	128	7.3	3.3	3.6
Diseases of the blood & blood-forming organs	3	8	18	9	29	47	3.0	3.6	2.6
Mental disorders	14	10	53	51	34	163	3.6	3.4	3.1
Diseases of the nervous system and sense organs	11	16	27	36	55	82	3.3	3.4	3.0
Diseases of the circulatory system	237	167	148	948	565	443	4.0	3.4	3.0
Diseases of the respiratory system	174	119	117	970	532	401	5.6	4.5	3.4
Diseases of the digestive system	124	127	107	559	460	389	4.5	3.6	3.6
Diseases of the genitourinary system	74	52	67	238	150	218	3.2	2.9	3.3
Pregnancy, childbirth, and the puerperium	268	338	224	519	790	574	1.9	2.3	2.6
Diseases of the skin and subcutaneous tissue	18	34	41	90	173	172	5.0	5.1	4.2
Musculoskeletal system and connective tissue	34	44	70	175	161	300	5.1	3.7	4.3
Congenital anomalies	-	-	1	-	-	7	-	-	7.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	90	63	73	366	268	277	4.1	4.3	3.8
Symptoms, signs & ill-defined conditions	16	18	33	35	49	146	2.2	2.7	4.4
Residual codes, unclassified, all Ecodes	-	2	7	-	4	14	-	2.0	2.0
Total	1,151	1,070	1,068	4,554	3,525	3,596	4.0	3.3	3.4

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Grace Cottage Hospital									
Infectious & parasitic diseases	3	3	8	7	7	30	2.3	2.3	3.8
Neoplasms	6	5	6	15	8	11	2.5	1.6	1.8
Endocrine, nutritional, metabolic, immunity	11	13	13	39	39	36	3.5	3.0	2.8
Diseases of the blood & blood-forming organs	2	4	2	4	11	9	2.0	2.8	4.5
Mental disorders	14	11	3	38	33	14	2.7	3.0	4.7
Diseases of the nervous system and sense organs	5	5	6	14	19	17	2.8	3.8	2.8
Diseases of the circulatory system	54	43	28	163	122	78	3.0	2.8	2.8
Diseases of the respiratory system	51	58	36	178	149	109	3.5	2.6	3.0
Diseases of the digestive system	17	9	8	46	17	20	2.7	1.9	2.5
Diseases of the genitourinary system	6	8	14	19	18	38	3.2	2.3	2.7
Pregnancy, childbirth, and the puerperium	29	-	-	58	-	-	2.0	-	-
Diseases of the skin and subcutaneous tissue	9	9	5	25	24	14	2.8	2.7	2.8
Musculoskeletal system and connective tissue	5	5	5	17	12	17	3.4	2.4	3.4
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	5	8	23	15	23	83	3.0	2.9	3.6
Symptoms, signs & ill-defined conditions	1	2	8	4	5	22	4.0	2.5	2.8
Residual codes, unclassified, all Ecodes	1	4	1	3	11	3	3.0	2.8	3.0
Total	219	187	166	645	498	501	2.9	2.7	3.0

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
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<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Mt. Ascutney Hospital and Health Center									
Infectious & parasitic diseases	6	7	6	126	39	20	21.0	5.6	3.3
Neoplasms	25	18	8	216	64	48	8.6	3.6	6.0
Endocrine, nutritional, metabolic, immunity	19	18	19	116	63	52	6.1	3.5	2.7
Diseases of the blood & blood-forming organs	1	1	6	1	6	25	1.0	6.0	4.2
Mental disorders	7	5	8	37	10	48	5.3	2.0	6.0
Diseases of the nervous system and sense organs	13	2	9	38	7	36	2.9	3.5	4.0
Diseases of the circulatory system	133	90	57	604	301	220	4.5	3.3	3.9
Diseases of the respiratory system	86	62	98	408	224	370	4.7	3.6	3.8
Diseases of the digestive system	64	75	44	316	310	160	4.9	4.1	3.6
Diseases of the genitourinary system	39	26	32	222	84	123	5.7	3.2	3.8
Pregnancy, childbirth, and the puerperium	1	-	-	2	-	-	2.0	-	-
Diseases of the skin and subcutaneous tissue	9	13	34	64	40	153	7.1	3.1	4.5
Musculoskeletal system and connective tissue	33	32	10	222	111	36	6.7	3.5	3.6
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	64	35	21	304	165	74	4.8	4.7	3.5
Symptoms, signs & ill-defined conditions	30	18	6	268	71	24	8.9	3.9	4.0
Residual codes, unclassified, all Ecodes	2	-	2	26	-	2	13.0	-	1.0
Total	532	402	360	2,970	1,495	1,391	5.6	3.7	3.9

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
North Country Hospital									
Infectious & parasitic diseases	37	42	51	235	207	233	6.4	4.9	4.6
Neoplasms	72	92	31	392	405	140	5.4	4.4	4.5
Endocrine, nutritional, metabolic, immunity	61	57	80	270	195	216	4.4	3.4	2.7
Diseases of the blood & blood-forming organs	10	26	16	33	58	62	3.3	2.2	3.9
Mental disorders	72	25	17	298	69	71	4.1	2.8	4.2
Diseases of the nervous system and sense organs	45	48	27	162	130	103	3.6	2.7	3.8
Diseases of the circulatory system	504	433	186	2,021	1,079	586	4.0	2.5	3.2
Diseases of the respiratory system	285	260	222	1,387	903	885	4.9	3.5	4.0
Diseases of the digestive system	292	234	164	1,366	796	725	4.7	3.4	4.4
Diseases of the genitourinary system	139	100	69	477	291	255	3.4	2.9	3.7
Pregnancy, childbirth, and the puerperium	309	230	212	783	526	490	2.5	2.3	2.3
Diseases of the skin and subcutaneous tissue	24	24	28	119	98	130	5.0	4.1	4.6
Musculoskeletal system and connective tissue	66	45	70	357	183	258	5.4	4.1	3.7
Congenital anomalies	-	1	-	-	1	-	-	1.0	-
Conditions originating in the perinatal period	2	-	-	2	-	-	1.0	-	-
Injury & poisoning	141	154	111	621	566	487	4.4	3.7	4.4
Symptoms, signs & ill-defined conditions	62	60	15	189	143	47	3.0	2.4	3.1
Residual codes, unclassified, all Ecodes	7	8	5	16	17	21	2.3	2.1	4.2
Total	2,128	1,839	1,304	8,728	5,667	4,709	4.1	3.1	3.6

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Northeastern Vermont Regional Hospital									
Infectious & parasitic diseases	44	36	35	204	107	114	4.6	3.0	3.3
Neoplasms	74	56	30	388	242	122	5.2	4.3	4.1
Endocrine, nutritional, metabolic, immunity	47	61	62	200	211	228	4.3	3.5	3.7
Diseases of the blood & blood-forming organs	2	9	13	2	24	52	1.0	2.7	4.0
Mental disorders	510	23	63	9,256	60	197	18.1	2.6	3.1
Diseases of the nervous system and sense organs	33	27	28	133	84	97	4.0	3.1	3.5
Diseases of the circulatory system	402	242	173	1,453	827	524	3.6	3.4	3.0
Diseases of the respiratory system	279	215	164	1,014	637	516	3.6	3.0	3.1
Diseases of the digestive system	242	223	190	926	763	636	3.8	3.4	3.3
Diseases of the genitourinary system	148	99	51	571	266	203	3.9	2.7	4.0
Pregnancy, childbirth, and the puerperium	338	246	191	783	528	409	2.3	2.1	2.1
Diseases of the skin and subcutaneous tissue	33	38	32	210	192	162	6.4	5.1	5.1
Musculoskeletal system and connective tissue	96	107	101	632	439	421	6.6	4.1	4.2
Congenital anomalies	3	1	1	10	3	4	3.3	3.0	4.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	165	170	129	787	636	476	4.8	3.7	3.7
Symptoms, signs & ill-defined conditions	60	46	29	158	116	84	2.6	2.5	2.9
Residual codes, unclassified, all Ecodes	-	5	3	-	19	5	-	3.8	1.7
Total	2,476	1,604	1,295	16,727	5,154	4,250	6.8	3.2	3.3

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Northwestern Medical Center									
Infectious & parasitic diseases	33	32	50	190	229	241	5.8	7.2	4.8
Neoplasms	89	110	40	665	555	200	7.5	5.0	5.0
Endocrine, nutritional, metabolic, immunity	54	91	49	621	354	176	11.5	3.9	3.6
Diseases of the blood & blood-forming organs	10	25	22	52	86	74	5.2	3.4	3.4
Mental disorders	37	23	47	265	79	265	7.2	3.4	5.6
Diseases of the nervous system and sense organs	35	32	27	167	103	90	4.8	3.2	3.3
Diseases of the circulatory system	581	433	238	4,330	1,369	775	7.5	3.2	3.3
Diseases of the respiratory system	306	314	341	2,214	1,580	1,400	7.2	5.0	4.1
Diseases of the digestive system	318	316	310	1,334	1,344	1,223	4.2	4.3	3.9
Diseases of the genitourinary system	139	90	144	867	324	483	6.2	3.6	3.4
Pregnancy, childbirth, and the puerperium	411	480	406	881	1,010	942	2.1	2.1	2.3
Diseases of the skin and subcutaneous tissue	39	40	74	409	252	288	10.5	6.3	3.9
Musculoskeletal system and connective tissue	90	144	316	706	561	765	7.8	3.9	2.4
Congenital anomalies	-	3	22	-	7	75	-	2.3	3.4
Conditions originating in the perinatal period	-	-	1	-	-	2	-	-	2.0
Injury & poisoning	198	256	168	1,200	998	622	6.1	3.9	3.7
Symptoms, signs & ill-defined conditions	56	23	33	447	64	257	8.0	2.8	7.8
Residual codes, unclassified, all Ecodes	1	-	1	1	-	4	1.0	-	4.0
Total	2,397	2,412	2,289	14,349	8,915	7,882	6.0	3.7	3.4

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Porter Medical Center									
Infectious & parasitic diseases	9	15	11	29	70	58	3.2	4.7	5.3
Neoplasms	61	69	32	284	280	133	4.7	4.1	4.2
Endocrine, nutritional, metabolic, immunity	45	58	44	219	358	138	4.9	6.2	3.1
Diseases of the blood & blood-forming organs	6	10	9	32	43	23	5.3	4.3	2.6
Mental disorders	12	12	26	154	39	197	12.8	3.3	7.6
Diseases of the nervous system and sense organs	12	13	24	56	48	97	4.7	3.7	4.0
Diseases of the circulatory system	333	228	168	1,708	878	507	5.1	3.9	3.0
Diseases of the respiratory system	196	192	316	1,182	902	1,402	6.0	4.7	4.4
Diseases of the digestive system	260	192	174	1,183	855	672	4.6	4.5	3.9
Diseases of the genitourinary system	108	111	87	317	350	265	2.9	3.2	3.0
Pregnancy, childbirth, and the puerperium	391	288	347	786	571	826	2.0	2.0	2.4
Diseases of the skin and subcutaneous tissue	24	41	53	213	186	207	8.9	4.5	3.9
Musculoskeletal system and connective tissue	54	90	149	291	386	462	5.4	4.3	3.1
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	133	114	127	667	474	472	5.0	4.2	3.7
Symptoms, signs & ill-defined conditions	43	33	12	178	158	46	4.1	4.8	3.8
Residual codes, unclassified, all Ecodes	-	6	2	-	39	2	-	6.5	1.0
Total	1,687	1,472	1,581	7,299	5,637	5,507	4.3	3.8	3.5

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Rutland Regional Medical Center									
Infectious & parasitic diseases	92	99	269	513	562	1,701	5.6	5.7	6.3
Neoplasms	464	333	198	3,649	1,645	971	7.9	4.9	4.9
Endocrine, nutritional, metabolic, immunity	249	200	194	2,285	1,004	761	9.2	5.0	3.9
Diseases of the blood & blood-forming organs	48	42	70	237	154	205	4.9	3.7	2.9
Mental disorders	317	761	844	2,985	3,943	7,774	9.4	5.2	9.2
Diseases of the nervous system and sense organs	181	85	126	1,017	288	469	5.6	3.4	3.7
Diseases of the circulatory system	1,479	1,006	711	9,052	4,135	2,234	6.1	4.1	3.1
Diseases of the respiratory system	812	825	893	5,563	4,230	4,191	6.9	5.1	4.7
Diseases of the digestive system	649	686	713	4,113	3,268	2,873	6.3	4.8	4.0
Diseases of the genitourinary system	461	324	368	1,685	1,050	1,308	3.7	3.2	3.6
Pregnancy, childbirth, and the puerperium	823	601	422	1,711	1,450	1,072	2.1	2.4	2.5
Diseases of the skin and subcutaneous tissue	73	98	159	660	508	666	9.0	5.2	4.2
Musculoskeletal system and connective tissue	429	460	532	2,525	1,766	1,483	5.9	3.8	2.8
Congenital anomalies	12	2	5	56	11	14	4.7	5.5	2.8
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	653	589	564	4,080	3,001	2,311	6.2	5.1	4.1
Symptoms, signs & ill-defined conditions	470	434	111	4,406	4,043	424	9.4	9.3	3.8
Residual codes, unclassified, all Ecodes	13	14	22	63	62	74	4.8	4.4	3.4
Total	7,225	6,559	6,201	44,600	31,120	28,531	6.2	4.7	4.6

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Southwestern Vermont Medical Center									
Infectious & parasitic diseases	64	60	347	397	305	1,490	6.2	5.1	4.3
Neoplasms	299	199	97	2,148	957	415	7.2	4.8	4.3
Endocrine, nutritional, metabolic, immunity	164	155	172	1,229	658	507	7.5	4.2	2.9
Diseases of the blood & blood-forming organs	27	37	53	94	140	136	3.5	3.8	2.6
Mental disorders	232	46	73	2,024	146	254	8.7	3.2	3.5
Diseases of the nervous system and sense organs	130	103	55	720	352	128	5.5	3.4	2.3
Diseases of the circulatory system	922	815	613	5,324	2,790	1,916	5.8	3.4	3.1
Diseases of the respiratory system	623	766	557	3,929	3,406	2,213	6.3	4.4	4.0
Diseases of the digestive system	593	583	506	3,271	3,025	1,776	5.5	5.2	3.5
Diseases of the genitourinary system	241	231	154	980	792	469	4.1	3.4	3.0
Pregnancy, childbirth, and the puerperium	532	525	453	1,353	1,251	1,126	2.5	2.4	2.5
Diseases of the skin and subcutaneous tissue	69	73	116	575	398	357	8.3	5.5	3.1
Musculoskeletal system and connective tissue	303	269	216	1,719	982	627	5.7	3.7	2.9
Congenital anomalies	15	5	3	44	20	6	2.9	4.0	2.0
Conditions originating in the perinatal period	3	-	-	3	-	-	1.0	-	-
Injury & poisoning	571	452	392	3,008	1,801	1,396	5.3	4.0	3.6
Symptoms, signs & ill-defined conditions	132	143	89	452	447	187	3.4	3.1	2.1
Residual codes, unclassified, all Ecodes	5	5	8	13	28	27	2.6	5.6	3.4
Total	4,925	4,467	3,904	27,283	17,498	13,030	5.5	3.9	3.3

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-3
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1993, 2003 and 2013
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>	<u>1993</u>	<u>2003</u>	<u>2013</u>
Springfield Hospital									
Infectious & parasitic diseases	32	33	29	213	205	126	6.7	6.2	4.3
Neoplasms	100	54	21	602	238	115	6.0	4.4	5.5
Endocrine, nutritional, metabolic, immunity	62	64	57	323	232	204	5.2	3.6	3.6
Diseases of the blood & blood-forming organs	16	19	14	112	73	50	7.0	3.8	3.6
Mental disorders	227	605	448	1,734	4,810	3,089	7.6	8.0	6.9
Diseases of the nervous system and sense organs	46	32	34	184	108	105	4.0	3.4	3.1
Diseases of the circulatory system	581	457	194	2,728	1,448	693	4.7	3.2	3.6
Diseases of the respiratory system	234	331	317	1,217	1,332	1,415	5.2	4.0	4.5
Diseases of the digestive system	259	242	236	1,448	883	946	5.6	3.6	4.0
Diseases of the genitourinary system	140	112	69	581	293	246	4.2	2.6	3.6
Pregnancy, childbirth, and the puerperium	246	240	164	540	563	390	2.2	2.3	2.4
Diseases of the skin and subcutaneous tissue	28	33	44	152	160	182	5.4	4.8	4.1
Musculoskeletal system and connective tissue	71	103	79	374	413	283	5.3	4.0	3.6
Congenital anomalies	4	4	1	7	9	5	1.8	2.3	5.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	230	182	120	1,296	793	451	5.6	4.4	3.8
Symptoms, signs & ill-defined conditions	59	65	35	173	183	116	2.9	2.8	3.3
Residual codes, unclassified, all Ecodes	-	5	3	-	26	14	-	5.2	4.7
Total	2,335	2,581	1,865	11,684	11,769	8,430	5.0	4.6	4.5

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-4
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals
Discharges, Patient Days and Average Length of Stay by Age Group

<u>Vermont Hospitals</u>	Discharges by Age Group								<u>Total</u>	
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>		<u>65+</u>
Brattleboro Memorial Hospital	18	499	402	112	117	128	317	919	674	1,593
Central Vermont Medical Center	20	897	942	237	243	251	759	1,859	1,490	3,349
Copley Hospital	6	337	404	131	128	118	289	747	666	1,413
Fletcher Allen Health Care	959	5,099	5,503	1,844	1,538	1,415	2,740	11,561	7,537	19,098
Gifford Medical Center	10	341	240	80	85	88	224	591	477	1,068
Grace Cottage Hospital	-	9	36	6	19	26	70	45	121	166
Mt. Ascutney Hospital and Health Center	1	19	68	24	46	27	175	88	272	360
North Country Hospital	17	311	309	102	115	106	344	637	667	1,304
Northeastern Vermont Regional Hospital	29	338	267	97	102	118	344	634	661	1,295
Northwestern Medical Center	13	656	560	199	178	170	513	1,229	1,060	2,289
Porter Medical Center	6	479	315	115	114	149	403	800	781	1,581
Rutland Regional Medical Center	154	1,424	1,830	557	595	442	1,199	3,408	2,793	6,201
Southwestern Vermont Medical Center	26	827	876	309	393	348	1,125	1,729	2,175	3,904
Springfield Hospital	5	561	511	121	124	124	419	1,077	788	1,865
Total	1,264	11,797	12,263	3,934	3,797	3,510	8,921	25,324	20,162	45,486

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-4
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals
Discharges, Patient Days and Average Length of Stay by Age Group

Patient Days by Age Group

<u>Vermont Hospitals</u>	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	<u>Total</u>
Brattleboro Memorial Hospital	39	1,305	1,277	442	489	549	1,273	2,621	2,753	5,374
Central Vermont Medical Center	46	3,702	5,318	1,203	1,090	1,175	3,444	9,066	6,912	15,978
Copley Hospital	16	672	1,067	338	347	397	1,046	1,755	2,128	3,883
Fletcher Allen Health Care	4,016	25,171	35,794	10,788	9,371	8,156	14,390	64,981	42,705	107,686
Gifford Medical Center	30	900	902	312	281	319	852	1,832	1,764	3,596
Grace Cottage Hospital	-	27	107	15	63	77	212	134	367	501
Mt. Ascutney Hospital and Health Center	2	53	210	104	169	100	753	265	1,126	1,391
North Country Hospital	42	775	1,047	415	445	426	1,559	1,864	2,845	4,709
Northeastern Vermont Regional Hospital	67	760	930	336	459	445	1,253	1,757	2,493	4,250
Northwestern Medical Center	26	1,619	1,990	769	626	631	2,221	3,635	4,247	7,882
Porter Medical Center	9	1,205	1,122	455	363	581	1,772	2,336	3,171	5,507
Rutland Regional Medical Center	342	5,869	9,415	2,438	2,843	1,932	5,692	15,626	12,905	28,531
Southwestern Vermont Medical Center	43	2,107	2,979	1,073	1,351	1,270	4,207	5,129	7,901	13,030
Springfield Hospital	10	2,286	2,511	532	519	743	1,829	4,807	3,623	8,430
Total	4,688	46,451	64,669	19,220	18,416	16,801	40,503	115,808	94,940	210,748

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-4
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals
Discharges, Patient Days and Average Length of Stay by Age Group

<u>Vermont Hospitals</u>	<u>Average Length of Stay by Age Group</u>									<u>Total</u>
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	
Brattleboro Memorial Hospital	2.2	2.6	3.2	3.9	4.2	4.3	4.0	2.9	4.1	3.4
Central Vermont Medical Center	2.3	4.1	5.6	5.1	4.5	4.7	4.5	4.9	4.6	4.8
Copley Hospital	2.7	2.0	2.6	2.6	2.7	3.4	3.6	2.3	3.2	2.7
Fletcher Allen Health Care	4.2	4.9	6.5	5.9	6.1	5.8	5.3	5.6	5.7	5.6
Gifford Medical Center	3.0	2.6	3.8	3.9	3.3	3.6	3.8	3.1	3.7	3.4
Grace Cottage Hospital	0.0	3.0	3.0	2.5	3.3	3.0	3.0	3.0	3.0	3.0
Mt. Ascutney Hospital and Health Center	2.0	2.8	3.1	4.3	3.7	3.7	4.3	3.0	4.1	3.9
North Country Hospital	2.5	2.5	3.4	4.1	3.9	4.0	4.5	2.9	4.3	3.6
Northeastern Vermont Regional Hospital	2.3	2.2	3.5	3.5	4.5	3.8	3.6	2.8	3.8	3.3
Northwestern Medical Center	2.0	2.5	3.6	3.9	3.5	3.7	4.3	3.0	4.0	3.4
Porter Medical Center	1.5	2.5	3.6	4.0	3.2	3.9	4.4	2.9	4.1	3.5
Rutland Regional Medical Center	2.2	4.1	5.1	4.4	4.8	4.4	4.7	4.6	4.6	4.6
Southwestern Vermont Medical Center	1.7	2.5	3.4	3.5	3.4	3.6	3.7	3.0	3.6	3.3
Springfield Hospital	2.0	4.1	4.9	4.4	4.2	6.0	4.4	4.5	4.6	4.5
Total	3.7	3.9	5.3	4.9	4.9	4.8	4.5	4.6	4.7	4.6

Numbers of inpatient discharges exclude newborns (MDC=15) and any records with missing or invalid diagnosis codes.

Table I-5
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Vermont Hospitals by Principal Payer

Vermont Hospital	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		
Brattleboro Memorial Hospital	772	48.5%	345	21.7%	14	0.9%	2	0.1%	421	26.4%	39	2.4%	-	0.0%	1,593	3.5%
Central Vermont Medical Center	1,811	54.1%	646	19.3%	19	0.6%	11	0.3%	803	24.0%	59	1.8%	-	0.0%	3,349	7.4%
Copley Hospital	688	48.7%	244	17.3%	12	0.8%	19	1.3%	416	29.4%	33	2.3%	1	0.1%	1,413	3.1%
Fletcher Allen Health Care	7,731	40.5%	3,063	16.0%	255	1.3%	143	0.7%	7,202	37.7%	356	1.9%	348	1.8%	19,098	42.0%
Gifford Medical Center	504	47.2%	248	23.2%	14	1.3%	5	0.5%	266	24.9%	31	2.9%	-	0.0%	1,068	2.3%
Grace Cottage Hospital	115	69.3%	17	10.2%	-	0.0%	-	0.0%	32	19.3%	2	1.2%	-	0.0%	166	0.4%
Mt. Ascutney Hospital and Health Center	291	80.8%	19	5.3%	-	0.0%	-	0.0%	43	11.9%	4	1.1%	3	0.8%	360	0.8%
North Country Hospital	725	55.6%	277	21.2%	5	0.4%	2	0.2%	274	21.0%	21	1.6%	-	0.0%	1,304	2.9%
Northeastern Vermont Regional Hospital	723	55.8%	250	19.3%	2	0.2%	5	0.4%	280	21.6%	35	2.7%	-	0.0%	1,295	2.8%
Northwestern Medical Center	1,136	49.6%	480	21.0%	20	0.9%	19	0.8%	589	25.7%	40	1.7%	5	0.2%	2,289	5.0%
Porter Medical Center	803	50.8%	246	15.6%	2	0.1%	-	0.0%	507	32.1%	21	1.3%	2	0.1%	1,581	3.5%
Rutland Regional Medical Center	3,391	54.7%	1,262	20.4%	26	0.4%	16	0.3%	1,291	20.8%	214	3.5%	1	0.0%	6,201	13.6%
Southwestern Vermont Medical Center	2,327	59.6%	492	12.6%	23	0.6%	11	0.3%	967	24.8%	84	2.2%	-	0.0%	3,904	8.6%
Springfield Hospital	986	52.9%	442	23.7%	2	0.1%	-	0.0%	340	18.2%	94	5.0%	1	0.1%	1,865	4.1%
Total	22,003	48.4%	8,031	17.7%	394	0.9%	233	0.5%	13,431	29.5%	1,033	2.3%	361	0.8%	45,486	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

Table I-6
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Principal Payer

CCS Diagnosis Groups	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		
Infectious & parasitic diseases	1,242	64.6%	219	11.4%	19	1.0%	3	0.2%	389	20.2%	27	1.4%	24	1.2%	1,923	4.2%
Neoplasms	905	45.4%	238	11.9%	15	0.8%	-	0.0%	810	40.6%	21	1.1%	6	0.3%	1,995	4.4%
Endocrine, nutritional, metabolic, immunity	774	45.7%	382	22.6%	5	0.3%	2	0.1%	467	27.6%	36	2.1%	26	1.5%	1,692	3.7%
Diseases of the blood & blood-forming organs	272	60.6%	57	12.7%	3	0.7%	-	0.0%	111	24.7%	5	1.1%	1	0.2%	449	1.0%
Mental disorders	949	33.0%	1,110	38.6%	12	0.4%	-	0.0%	593	20.6%	208	7.2%	5	0.2%	2,877	6.3%
Diseases of the nervous system and sense organs	500	45.3%	216	19.6%	10	0.9%	13	1.2%	332	30.1%	23	2.1%	10	0.9%	1,104	2.4%
Diseases of the circulatory system	4,862	66.4%	487	6.7%	67	0.9%	15	0.2%	1,614	22.0%	179	2.4%	98	1.3%	7,322	16.1%
Diseases of the respiratory system	3,634	68.4%	707	13.3%	27	0.5%	1	0.0%	809	15.2%	86	1.6%	46	0.9%	5,310	11.7%
Diseases of the digestive system	2,443	49.2%	723	14.6%	49	1.0%	4	0.1%	1,533	30.9%	170	3.4%	41	0.8%	4,963	10.9%
Diseases of the genitourinary system	1,226	63.6%	221	11.5%	11	0.6%	2	0.1%	416	21.6%	30	1.6%	22	1.1%	1,928	4.2%
Pregnancy, childbirth, and the puerperium	61	1.1%	2,334	41.6%	86	1.5%	-	0.0%	3,089	55.1%	36	0.6%	-	0.0%	5,606	12.3%
Diseases of the skin and subcutaneous tissue	473	49.0%	186	19.3%	4	0.4%	4	0.4%	248	25.7%	46	4.8%	5	0.5%	966	2.1%
Musculoskeletal system and connective tissue	1,735	50.6%	318	9.3%	26	0.8%	84	2.4%	1,248	36.4%	13	0.4%	6	0.2%	3,430	7.5%
Congenital anomalies	23	16.1%	53	37.1%	3	2.1%	-	0.0%	62	43.4%	1	0.7%	1	0.7%	143	0.3%
Conditions originating in the perinatal period	-	0.0%	2	66.7%	-	0.0%	-	0.0%	1	33.3%	-	0.0%	-	0.0%	3	0.0%
Injury & poisoning	2,191	50.3%	561	12.9%	41	0.9%	94	2.2%	1,293	29.7%	124	2.8%	48	1.1%	4,352	9.6%
Symptoms, signs & ill-defined conditions	641	49.7%	201	15.6%	11	0.9%	11	0.9%	385	29.8%	20	1.6%	21	1.6%	1,290	2.8%
Residual codes, unclassified, all Ecodes	72	54.1%	16	12.0%	5	3.8%	-	0.0%	31	23.3%	8	6.0%	1	0.8%	133	0.3%
Total	22,003	48.4%	8,031	17.7%	394	0.9%	233	0.5%	13,431	29.5%	1,033	2.3%	361	0.8%	45,486	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

**Table I-7
2013 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
In-migration by Vermont Hospital**

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-Vermonters</u>		<u>Total for Vermont Hospitals</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	1,291	\$20,870,373	302	\$5,180,696	1,593	\$26,051,069
Central Vermont Medical Center	3,284	\$58,653,454	65	\$1,089,461	3,349	\$59,742,915
Copley Hospital	1,353	\$22,132,767	60	\$1,068,755	1,413	\$23,201,522
Fletcher Allen Health Care	15,570	\$493,943,424	3,528	\$156,907,637	19,098	\$650,851,061
Gifford Medical Center	1,055	\$18,187,912	13	\$268,148	1,068	\$18,456,059
Grace Cottage Hospital	158	\$1,070,570	8	\$59,183	166	\$1,129,754
Mt. Ascutney Hospital and Health Center	290	\$3,186,693	70	\$760,655	360	\$3,947,348
North Country Hospital	1,265	\$22,697,753	39	\$651,151	1,304	\$23,348,904
Northeastern Vermont Regional Hospital	1,238	\$25,449,161	57	\$1,292,815	1,295	\$26,741,977
Northwestern Medical Center	2,266	\$38,361,359	23	\$369,013	2,289	\$38,730,373
Porter Medical Center	1,487	\$27,401,026	94	\$1,977,677	1,581	\$29,378,703
Rutland Regional Medical Center	5,730	\$137,146,151	471	\$11,863,718	6,201	\$149,009,870
Southwestern Vermont Medical Center	2,868	\$46,519,295	1,036	\$16,419,178	3,904	\$62,938,473
Springfield Hospital	1,598	\$20,267,589	267	\$3,249,693	1,865	\$23,517,283
Total for 2013	39,453	\$935,887,527	6,033	\$201,157,783	45,486	\$1,137,045,311
Total for 2012	40,188	\$886,530,118	6,418	\$189,510,572	46,606	\$1,076,040,690
Total for 2011	40,124	\$824,089,888	6,341	\$187,597,337	46,465	\$1,011,687,225
Total for 2010	40,728	\$807,712,818	6,366	\$179,218,150	47,094	\$986,930,968

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.
Total inpatient charges include newborns. Inpatient charges of \$100 or less are considered missing.
Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Emergency Department Visits

Table E-1
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting

Vermont Hospital	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	855	6.7%	11,822	93.3%	12,677	4.7%
Central Vermont Medical Center	2,536	9.1%	25,362	90.9%	27,898	10.4%
Copley Hospital	316	2.4%	13,040	97.6%	13,356	5.0%
Fletcher Allen Health Care	9,397	16.7%	46,776	83.3%	56,173	21.0%
Gifford Medical Center	624	9.0%	6,311	91.0%	6,935	2.6%
Grace Cottage Hospital	27	1.0%	2,792	99.0%	2,819	1.1%
Mt. Ascutney Hospital and Health Center	175	3.2%	5,261	96.8%	5,436	2.0%
North Country Hospital	288	1.9%	14,601	98.1%	14,889	5.6%
Northeastern Vermont Regional Hospital	298	2.1%	13,572	97.9%	13,870	5.2%
Northwestern Medical Center	1,434	5.5%	24,605	94.5%	26,039	9.7%
Porter Medical Center	948	6.4%	13,783	93.6%	14,731	5.5%
Rutland Regional Medical Center	4,471	13.5%	28,729	86.5%	33,200	12.4%
Southwestern Vermont Medical Center	3,016	13.2%	19,771	86.8%	22,787	8.5%
Springfield Hospital	463	2.8%	16,141	97.2%	16,604	6.2%
Total	24,848	9.3%	242,566	90.7%	267,414	100.0%

ED visits include all hospital records (outpatient and inpatient) that originated in the ED.

Inpatient discharges originating in the ED are reported in this table and in the Vermont Hospital Inpatient tables.

Inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

Table E-2
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Comparison of 2009 through 2013

Inpatient Discharges Originating in ED	2009	2010	2011	2012	2013
Brattleboro Memorial Hospital	977	1,001	949	920	855
Central Vermont Medical Center	2,280	2,503	2,370	2,332	2,536
Copley Hospital	194	292	272	256	316
Fletcher Allen Health Care	8,652	8,842	8,858	9,566	9,397
Gifford Medical Center	686	531	590	608	624
Grace Cottage Hospital	15	17	20	27	27
Mt. Ascutney Hospital and Health Center	59	65	66	94	175
North Country Hospital	256	293	337	253	288
Northeastern Vermont Regional Hospital	375	367	318	369	298
Northwestern Medical Center	1,009	940	1,233	1,293	1,434
Porter Medical Center	304	293	285	643	948
Rutland Regional Medical Center	4,469	4,378	4,535	4,488	4,471
Southwestern Vermont Medical Center	2,958	2,997	2,906	3,044	3,016
Springfield Hospital	1,447	1,475	1,546	1,086	463
Total	23,681	23,994	24,285	24,979	24,848
ED Visits Not Admitted	2009	2010	2011	2012	2013
Brattleboro Memorial Hospital	11,430	11,546	11,836	12,077	11,822
Central Vermont Medical Center	27,564	26,852	26,017	26,766	25,362
Copley Hospital	12,121	12,275	12,807	13,091	13,040
Fletcher Allen Health Care	48,936	49,358	49,273	48,138	46,776
Gifford Medical Center	6,807	6,499	6,372	6,604	6,311
Grace Cottage Hospital	2,786	2,797	2,797	3,091	2,792
Mt. Ascutney Hospital and Health Center	4,996	5,022	4,159	5,338	5,261
North Country Hospital	13,740	14,501	15,377	15,274	14,601
Northeastern Vermont Regional Hospital	9,713	9,232	14,307	13,848	13,572
Northwestern Medical Center	26,270	26,602	26,460	26,340	24,605
Porter Medical Center	13,344	13,427	14,675	14,638	13,783
Rutland Regional Medical Center	29,573	28,055	25,190	27,865	28,729
Southwestern Vermont Medical Center	15,404	19,402	20,897	20,977	19,771
Springfield Hospital	14,792	14,761	14,480	15,777	16,141
Total	237,476	240,329	244,647	249,824	242,566

Table E-2
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Comparison of 2009 through 2013

All ED Visits, Including Those Admitted	2009	2010	2011	2012	2013
Brattleboro Memorial Hospital	12,407	12,547	12,785	12,997	12,677
Central Vermont Medical Center	29,844	29,355	28,387	29,098	27,898
Copley Hospital	12,315	12,567	13,079	13,347	13,356
Fletcher Allen Health Care	57,588	58,200	58,131	57,704	56,173
Gifford Medical Center	7,493	7,030	6,962	7,212	6,935
Grace Cottage Hospital	2,801	2,814	2,817	3,118	2,819
Mt. Ascutney Hospital and Health Center	5,055	5,087	4,225	5,432	5,436
North Country Hospital	13,996	14,794	15,714	15,527	14,889
Northeastern Vermont Regional Hospital	10,088	9,599	14,625	14,217	13,870
Northwestern Medical Center	27,279	27,542	27,693	27,633	26,039
Porter Medical Center	13,648	13,720	14,960	15,281	14,731
Rutland Regional Medical Center	34,042	32,433	29,725	32,353	33,200
Southwestern Vermont Medical Center	18,362	22,399	23,803	24,021	22,787
Springfield Hospital	16,239	16,236	16,026	16,863	16,604
Total	261,157	264,323	268,932	274,803	267,414

ED visits include all hospital records (outpatient and inpatient) that originated in the ED.

Inpatient discharges originating in the ED are reported in this table and in the Vermont Hospital Inpatient tables.

Inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

ED visits exclude any records with missing or invalid diagnosis codes.

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
All Vermont Hospitals						
Infectious & parasitic diseases	1,572	29.4%	3,778	70.6%	5,350	2.0%
Neoplasms	587	62.1%	358	37.9%	945	0.4%
Endocrine, nutritional, metabolic, immunity	1,062	24.1%	3,340	75.9%	4,402	1.6%
Diseases of the blood & blood-forming organs	328	43.4%	427	56.6%	755	0.3%
Mental disorders	1,677	13.4%	10,806	86.6%	12,483	4.7%
Diseases of the nervous system and sense organs	694	3.4%	19,615	96.6%	20,309	7.6%
Diseases of the circulatory system	4,737	22.9%	15,989	77.1%	20,726	7.8%
Diseases of the respiratory system	4,091	12.2%	29,435	87.8%	33,526	12.5%
Diseases of the digestive system	3,695	16.9%	18,109	83.1%	21,804	8.2%
Diseases of the genitourinary system	1,335	9.3%	12,970	90.7%	14,305	5.3%
Pregnancy, childbirth, and the puerperium	104	4.1%	2,442	95.9%	2,546	1.0%
Diseases of the skin and subcutaneous tissue	740	7.7%	8,821	92.3%	9,561	3.6%
Musculoskeletal system and connective tissue	463	2.6%	17,640	97.4%	18,103	6.8%
Congenital anomalies	28	33.7%	55	66.3%	83	0.0%
Conditions originating in the perinatal period	1	0.4%	259	99.6%	260	0.1%
Injury & poisoning	3,193	4.3%	70,925	95.7%	74,118	27.7%
Symptoms, signs & ill-defined conditions	469	1.8%	25,690	98.2%	26,159	9.8%
Residual codes, unclassified, all Ecodes	72	3.6%	1,907	96.4%	1,979	0.7%
Total	24,848	9.3%	242,566	90.7%	267,414	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital						
Infectious & parasitic diseases	89	45.2%	108	54.8%	197	1.6%
Neoplasms	26	45.6%	31	54.4%	57	0.4%
Endocrine, nutritional, metabolic, immunity	45	12.4%	318	87.6%	363	2.9%
Diseases of the blood & blood-forming organs	20	40.0%	30	60.0%	50	0.4%
Mental disorders	20	2.3%	862	97.7%	882	7.0%
Diseases of the nervous system and sense organs	18	2.0%	895	98.0%	913	7.2%
Diseases of the circulatory system	157	19.0%	669	81.0%	826	6.5%
Diseases of the respiratory system	152	10.0%	1,372	90.0%	1,524	12.0%
Diseases of the digestive system	138	11.8%	1,028	88.2%	1,166	9.2%
Diseases of the genitourinary system	38	5.5%	658	94.5%	696	5.5%
Pregnancy, childbirth, and the puerperium	2	2.9%	68	97.1%	70	0.6%
Diseases of the skin and subcutaneous tissue	40	9.5%	382	90.5%	422	3.3%
Musculoskeletal system and connective tissue	9	1.4%	655	98.6%	664	5.2%
Congenital anomalies	1	25.0%	3	75.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	9	100.0%	9	0.1%
Injury & poisoning	94	2.4%	3,745	97.6%	3,839	30.3%
Symptoms, signs & ill-defined conditions	6	0.7%	902	99.3%	908	7.2%
Residual codes, unclassified, all Ecodes	0	0.0%	87	100.0%	87	0.7%
Total	855	6.7%	11,822	93.3%	12,677	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Central Vermont Medical Center						
Infectious & parasitic diseases	149	23.2%	494	76.8%	643	2.3%
Neoplasms	52	66.7%	26	33.3%	78	0.3%
Endocrine, nutritional, metabolic, immunity	84	20.4%	328	79.6%	412	1.5%
Diseases of the blood & blood-forming organs	23	35.9%	41	64.1%	64	0.2%
Mental disorders	375	26.1%	1,061	73.9%	1,436	5.1%
Diseases of the nervous system and sense organs	59	2.8%	2,023	97.2%	2,082	7.5%
Diseases of the circulatory system	374	19.1%	1,586	80.9%	1,960	7.0%
Diseases of the respiratory system	584	15.7%	3,128	84.3%	3,712	13.3%
Diseases of the digestive system	349	14.6%	2,039	85.4%	2,388	8.6%
Diseases of the genitourinary system	122	8.4%	1,331	91.6%	1,453	5.2%
Pregnancy, childbirth, and the puerperium	4	1.9%	206	98.1%	210	0.8%
Diseases of the skin and subcutaneous tissue	94	9.9%	859	90.1%	953	3.4%
Musculoskeletal system and connective tissue	49	2.2%	2,170	97.8%	2,219	8.0%
Congenital anomalies	0	0.0%	5	100.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	20	100.0%	20	0.1%
Injury & poisoning	187	2.6%	7,016	97.4%	7,203	25.8%
Symptoms, signs & ill-defined conditions	27	0.9%	2,830	99.1%	2,857	10.2%
Residual codes, unclassified, all Ecodes	4	2.0%	199	98.0%	203	0.7%
Total	2,536	9.1%	25,362	90.9%	27,898	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Copley Hospital						
Infectious & parasitic diseases	6	2.5%	235	97.5%	241	1.8%
Neoplasms	8	26.7%	22	73.3%	30	0.2%
Endocrine, nutritional, metabolic, immunity	16	9.1%	160	90.9%	176	1.3%
Diseases of the blood & blood-forming organs	1	5.3%	18	94.7%	19	0.1%
Mental disorders	11	2.7%	396	97.3%	407	3.0%
Diseases of the nervous system and sense organs	8	0.8%	988	99.2%	996	7.5%
Diseases of the circulatory system	36	4.7%	728	95.3%	764	5.7%
Diseases of the respiratory system	50	2.9%	1,667	97.1%	1,717	12.9%
Diseases of the digestive system	102	9.9%	930	90.1%	1,032	7.7%
Diseases of the genitourinary system	14	2.1%	653	97.9%	667	5.0%
Pregnancy, childbirth, and the puerperium	3	1.8%	163	98.2%	166	1.2%
Diseases of the skin and subcutaneous tissue	16	3.7%	414	96.3%	430	3.2%
Musculoskeletal system and connective tissue	2	0.2%	915	99.8%	917	6.9%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	6	100.0%	6	0.0%
Injury & poisoning	38	0.9%	4,413	99.1%	4,451	33.3%
Symptoms, signs & ill-defined conditions	5	0.4%	1,253	99.6%	1,258	9.4%
Residual codes, unclassified, all Ecodes	0	0.0%	78	100.0%	78	0.6%
Total	316	2.4%	13,040	97.6%	13,356	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Fletcher Allen Health Care						
Infectious & parasitic diseases	620	53.4%	541	46.6%	1,161	2.1%
Neoplasms	309	84.4%	57	15.6%	366	0.7%
Endocrine, nutritional, metabolic, immunity	399	35.8%	717	64.2%	1,116	2.0%
Diseases of the blood & blood-forming organs	127	55.2%	103	44.8%	230	0.4%
Mental disorders	441	12.6%	3,058	87.4%	3,499	6.2%
Diseases of the nervous system and sense organs	353	8.4%	3,867	91.6%	4,220	7.5%
Diseases of the circulatory system	2,264	40.6%	3,309	59.4%	5,573	9.9%
Diseases of the respiratory system	974	18.5%	4,304	81.5%	5,278	9.4%
Diseases of the digestive system	1,237	28.1%	3,162	71.9%	4,399	7.8%
Diseases of the genitourinary system	397	13.7%	2,507	86.3%	2,904	5.2%
Pregnancy, childbirth, and the puerperium	44	7.1%	579	92.9%	623	1.1%
Diseases of the skin and subcutaneous tissue	156	10.3%	1,360	89.7%	1,516	2.7%
Musculoskeletal system and connective tissue	202	5.4%	3,562	94.6%	3,764	6.7%
Congenital anomalies	20	48.8%	21	51.2%	41	0.1%
Conditions originating in the perinatal period	1	1.0%	101	99.0%	102	0.2%
Injury & poisoning	1,634	11.1%	13,057	88.9%	14,691	26.2%
Symptoms, signs & ill-defined conditions	182	2.9%	6,035	97.1%	6,217	11.1%
Residual codes, unclassified, all Ecodes	37	7.8%	436	92.2%	473	0.8%
Total	9,397	16.7%	46,776	83.3%	56,173	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Gifford Medical Center						
Infectious & parasitic diseases	20	12.0%	147	88.0%	167	2.4%
Neoplasms	10	58.8%	7	41.2%	17	0.2%
Endocrine, nutritional, metabolic, immunity	27	28.1%	69	71.9%	96	1.4%
Diseases of the blood & blood-forming organs	16	66.7%	8	33.3%	24	0.3%
Mental disorders	42	15.8%	224	84.2%	266	3.8%
Diseases of the nervous system and sense organs	21	3.5%	573	96.5%	594	8.6%
Diseases of the circulatory system	124	22.7%	422	77.3%	546	7.9%
Diseases of the respiratory system	101	11.2%	801	88.8%	902	13.0%
Diseases of the digestive system	93	13.6%	591	86.4%	684	9.9%
Diseases of the genitourinary system	56	16.3%	288	83.7%	344	5.0%
Pregnancy, childbirth, and the puerperium	3	5.3%	54	94.7%	57	0.8%
Diseases of the skin and subcutaneous tissue	20	9.9%	183	90.1%	203	2.9%
Musculoskeletal system and connective tissue	16	3.2%	491	96.8%	507	7.3%
Congenital anomalies	1	50.0%	1	50.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	5	100.0%	5	0.1%
Injury & poisoning	53	2.8%	1,872	97.2%	1,925	27.8%
Symptoms, signs & ill-defined conditions	17	3.2%	517	96.8%	534	7.7%
Residual codes, unclassified, all Ecodes	4	6.5%	58	93.5%	62	0.9%
Total	624	9.0%	6,311	91.0%	6,935	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Grace Cottage Hospital						
Infectious & parasitic diseases	5	6.8%	69	93.2%	74	2.6%
Neoplasms	0	0.0%	3	100.0%	3	0.1%
Endocrine, nutritional, metabolic, immunity	3	4.1%	70	95.9%	73	2.6%
Diseases of the blood & blood-forming organs	1	7.1%	13	92.9%	14	0.5%
Mental disorders	0	0.0%	65	100.0%	65	2.3%
Diseases of the nervous system and sense organs	1	0.5%	217	99.5%	218	7.7%
Diseases of the circulatory system	3	1.6%	187	98.4%	190	6.7%
Diseases of the respiratory system	8	2.1%	372	97.9%	380	13.5%
Diseases of the digestive system	1	0.5%	207	99.5%	208	7.4%
Diseases of the genitourinary system	1	0.7%	142	99.3%	143	5.1%
Pregnancy, childbirth, and the puerperium	0	0.0%	4	100.0%	4	0.1%
Diseases of the skin and subcutaneous tissue	1	0.7%	134	99.3%	135	4.8%
Musculoskeletal system and connective tissue	0	0.0%	169	100.0%	169	6.0%
Congenital anomalies	0	0.0%	2	100.0%	2	0.1%
Conditions originating in the perinatal period	0	0.0%	3	100.0%	3	0.1%
Injury & poisoning	2	0.2%	871	99.8%	873	31.0%
Symptoms, signs & ill-defined conditions	1	0.4%	252	99.6%	253	9.0%
Residual codes, unclassified, all Ecodes	0	0.0%	12	100.0%	12	0.4%
Total	27	1.0%	2,792	99.0%	2,819	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Mt. Ascutney Hospital and Health Center						
Infectious & parasitic diseases	5	3.1%	156	96.9%	161	3.0%
Neoplasms	2	25.0%	6	75.0%	8	0.1%
Endocrine, nutritional, metabolic, immunity	6	8.1%	68	91.9%	74	1.4%
Diseases of the blood & blood-forming organs	2	15.4%	11	84.6%	13	0.2%
Mental disorders	4	1.7%	225	98.3%	229	4.2%
Diseases of the nervous system and sense organs	1	0.3%	352	99.7%	353	6.5%
Diseases of the circulatory system	24	6.0%	378	94.0%	402	7.4%
Diseases of the respiratory system	51	7.1%	669	92.9%	720	13.2%
Diseases of the digestive system	27	6.9%	363	93.1%	390	7.2%
Diseases of the genitourinary system	20	6.3%	296	93.7%	316	5.8%
Pregnancy, childbirth, and the puerperium	0	0.0%	4	100.0%	4	0.1%
Diseases of the skin and subcutaneous tissue	18	6.3%	267	93.7%	285	5.2%
Musculoskeletal system and connective tissue	3	1.1%	277	98.9%	280	5.2%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	0	0.0%	0	0.0%
Injury & poisoning	11	0.7%	1,642	99.3%	1,653	30.4%
Symptoms, signs & ill-defined conditions	1	0.2%	507	99.8%	508	9.3%
Residual codes, unclassified, all Ecodes	0	0.0%	38	100.0%	38	0.7%
Total	175	3.2%	5,261	96.8%	5,436	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
North Country Hospital						
Infectious & parasitic diseases	10	3.3%	295	96.7%	305	2.0%
Neoplasms	5	19.2%	21	80.8%	26	0.2%
Endocrine, nutritional, metabolic, immunity	37	15.4%	203	84.6%	240	1.6%
Diseases of the blood & blood-forming organs	3	6.5%	43	93.5%	46	0.3%
Mental disorders	7	1.5%	448	98.5%	455	3.1%
Diseases of the nervous system and sense organs	15	1.3%	1,157	98.7%	1,172	7.9%
Diseases of the circulatory system	31	3.1%	983	96.9%	1,014	6.8%
Diseases of the respiratory system	44	2.0%	2,162	98.0%	2,206	14.8%
Diseases of the digestive system	61	5.4%	1,065	94.6%	1,126	7.6%
Diseases of the genitourinary system	20	2.4%	810	97.6%	830	5.6%
Pregnancy, childbirth, and the puerperium	5	2.8%	175	97.2%	180	1.2%
Diseases of the skin and subcutaneous tissue	8	1.5%	516	98.5%	524	3.5%
Musculoskeletal system and connective tissue	6	0.5%	1,122	99.5%	1,128	7.6%
Congenital anomalies	0	0.0%	4	100.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	12	100.0%	12	0.1%
Injury & poisoning	32	0.8%	4,026	99.2%	4,058	27.3%
Symptoms, signs & ill-defined conditions	4	0.3%	1,407	99.7%	1,411	9.5%
Residual codes, unclassified, all Ecodes	0	0.0%	152	100.0%	152	1.0%
Total	288	1.9%	14,601	98.1%	14,889	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Northeastern Vermont Regional Hospital						
Infectious & parasitic diseases	6	3.4%	168	96.6%	174	1.3%
Neoplasms	4	12.5%	28	87.5%	32	0.2%
Endocrine, nutritional, metabolic, immunity	13	6.5%	187	93.5%	200	1.4%
Diseases of the blood & blood-forming organs	3	27.3%	8	72.7%	11	0.1%
Mental disorders	40	7.5%	490	92.5%	530	3.8%
Diseases of the nervous system and sense organs	6	0.5%	1,285	99.5%	1,291	9.3%
Diseases of the circulatory system	30	4.5%	639	95.5%	669	4.8%
Diseases of the respiratory system	37	1.6%	2,299	98.4%	2,336	16.8%
Diseases of the digestive system	88	8.2%	987	91.8%	1,075	7.8%
Diseases of the genitourinary system	13	1.6%	781	98.4%	794	5.7%
Pregnancy, childbirth, and the puerperium	7	9.9%	64	90.1%	71	0.5%
Diseases of the skin and subcutaneous tissue	8	1.4%	545	98.6%	553	4.0%
Musculoskeletal system and connective tissue	1	0.1%	949	99.9%	950	6.8%
Congenital anomalies	0	0.0%	3	100.0%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	8	100.0%	8	0.1%
Injury & poisoning	37	0.9%	3,945	99.1%	3,982	28.7%
Symptoms, signs & ill-defined conditions	5	0.5%	1,100	99.5%	1,105	8.0%
Residual codes, unclassified, all Ecodes	0	0.0%	86	100.0%	86	0.6%
Total	298	2.1%	13,572	97.9%	13,870	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Northwestern Medical Center						
Infectious & parasitic diseases	49	15.9%	259	84.1%	308	1.2%
Neoplasms	19	46.3%	22	53.7%	41	0.2%
Endocrine, nutritional, metabolic, immunity	46	15.1%	258	84.9%	304	1.2%
Diseases of the blood & blood-forming organs	22	40.7%	32	59.3%	54	0.2%
Mental disorders	25	3.3%	734	96.7%	759	2.9%
Diseases of the nervous system and sense organs	23	1.1%	2,046	98.9%	2,069	7.9%
Diseases of the circulatory system	237	13.9%	1,468	86.1%	1,705	6.5%
Diseases of the respiratory system	337	9.6%	3,184	90.4%	3,521	13.5%
Diseases of the digestive system	284	12.4%	1,999	87.6%	2,283	8.8%
Diseases of the genitourinary system	128	8.6%	1,359	91.4%	1,487	5.7%
Pregnancy, childbirth, and the puerperium	6	2.2%	262	97.8%	268	1.0%
Diseases of the skin and subcutaneous tissue	72	6.3%	1,066	93.7%	1,138	4.4%
Musculoskeletal system and connective tissue	28	1.4%	1,989	98.6%	2,017	7.7%
Congenital anomalies	1	20.0%	4	80.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	26	100.0%	26	0.1%
Injury & poisoning	136	1.9%	7,040	98.1%	7,176	27.6%
Symptoms, signs & ill-defined conditions	20	0.7%	2,687	99.3%	2,707	10.4%
Residual codes, unclassified, all Ecodes	1	0.6%	170	99.4%	171	0.7%
Total	1,434	5.5%	24,605	94.5%	26,039	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Porter Medical Center						
Infectious & parasitic diseases	9	3.8%	229	96.2%	238	1.6%
Neoplasms	9	29.0%	22	71.0%	31	0.2%
Endocrine, nutritional, metabolic, immunity	43	22.3%	150	77.7%	193	1.3%
Diseases of the blood & blood-forming organs	9	45.0%	11	55.0%	20	0.1%
Mental disorders	20	5.2%	365	94.8%	385	2.6%
Diseases of the nervous system and sense organs	24	2.1%	1,099	97.9%	1,123	7.6%
Diseases of the circulatory system	155	15.4%	851	84.6%	1,006	6.8%
Diseases of the respiratory system	299	14.6%	1,754	85.4%	2,053	13.9%
Diseases of the digestive system	151	14.8%	868	85.2%	1,019	6.9%
Diseases of the genitourinary system	58	8.1%	657	91.9%	715	4.9%
Pregnancy, childbirth, and the puerperium	1	1.2%	82	98.8%	83	0.6%
Diseases of the skin and subcutaneous tissue	40	7.5%	492	92.5%	532	3.6%
Musculoskeletal system and connective tissue	17	1.8%	950	98.2%	967	6.6%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	10	100.0%	10	0.1%
Injury & poisoning	103	2.2%	4,517	97.8%	4,620	31.4%
Symptoms, signs & ill-defined conditions	10	0.6%	1,639	99.4%	1,649	11.2%
Residual codes, unclassified, all Ecodes	0	0.0%	86	100.0%	86	0.6%
Total	948	6.4%	13,783	93.6%	14,731	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Rutland Regional Medical Center						
Infectious & parasitic diseases	255	35.6%	462	64.4%	717	2.2%
Neoplasms	92	74.2%	32	25.8%	124	0.4%
Endocrine, nutritional, metabolic, immunity	167	30.2%	386	69.8%	553	1.7%
Diseases of the blood & blood-forming organs	49	56.3%	38	43.7%	87	0.3%
Mental disorders	564	30.8%	1,266	69.2%	1,830	5.5%
Diseases of the nervous system and sense organs	104	4.1%	2,463	95.9%	2,567	7.7%
Diseases of the circulatory system	661	25.4%	1,937	74.6%	2,598	7.8%
Diseases of the respiratory system	825	20.1%	3,277	79.9%	4,102	12.4%
Diseases of the digestive system	619	22.2%	2,171	77.8%	2,790	8.4%
Diseases of the genitourinary system	314	17.6%	1,468	82.4%	1,782	5.4%
Pregnancy, childbirth, and the puerperium	16	3.5%	439	96.5%	455	1.4%
Diseases of the skin and subcutaneous tissue	136	10.1%	1,206	89.9%	1,342	4.0%
Musculoskeletal system and connective tissue	74	3.3%	2,178	96.7%	2,252	6.8%
Congenital anomalies	3	42.9%	4	57.1%	7	0.0%
Conditions originating in the perinatal period	0	0.0%	41	100.0%	41	0.1%
Injury & poisoning	484	5.4%	8,446	94.6%	8,930	26.9%
Symptoms, signs & ill-defined conditions	89	3.2%	2,723	96.8%	2,812	8.5%
Residual codes, unclassified, all Ecodes	19	9.0%	192	91.0%	211	0.6%
Total	4,471	13.5%	28,729	86.5%	33,200	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Southwestern Vermont Medical Center						
Infectious & parasitic diseases	340	52.8%	304	47.2%	644	2.8%
Neoplasms	48	50.5%	47	49.5%	95	0.4%
Endocrine, nutritional, metabolic, immunity	154	35.5%	280	64.5%	434	1.9%
Diseases of the blood & blood-forming organs	47	51.1%	45	48.9%	92	0.4%
Mental disorders	61	6.9%	828	93.1%	889	3.9%
Diseases of the nervous system and sense organs	54	3.3%	1,577	96.7%	1,631	7.2%
Diseases of the circulatory system	590	28.1%	1,512	71.9%	2,102	9.2%
Diseases of the respiratory system	548	19.7%	2,227	80.3%	2,775	12.2%
Diseases of the digestive system	448	26.4%	1,248	73.6%	1,696	7.4%
Diseases of the genitourinary system	137	11.9%	1,010	88.1%	1,147	5.0%
Pregnancy, childbirth, and the puerperium	7	2.8%	246	97.2%	253	1.1%
Diseases of the skin and subcutaneous tissue	103	14.9%	590	85.1%	693	3.0%
Musculoskeletal system and connective tissue	49	3.4%	1,389	96.6%	1,438	6.3%
Congenital anomalies	1	33.3%	2	66.7%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	13	100.0%	13	0.1%
Injury & poisoning	335	5.4%	5,860	94.6%	6,195	27.2%
Symptoms, signs & ill-defined conditions	87	3.5%	2,410	96.5%	2,497	11.0%
Residual codes, unclassified, all Ecodes	7	3.7%	183	96.3%	190	0.8%
Total	3,016	13.2%	19,771	86.8%	22,787	100.0%

Table E-3
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Springfield Hospital						
Infectious & parasitic diseases	9	2.8%	311	97.2%	320	1.9%
Neoplasms	3	8.1%	34	91.9%	37	0.2%
Endocrine, nutritional, metabolic, immunity	22	13.1%	146	86.9%	168	1.0%
Diseases of the blood & blood-forming organs	5	16.1%	26	83.9%	31	0.2%
Mental disorders	67	7.9%	784	92.1%	851	5.1%
Diseases of the nervous system and sense organs	7	0.6%	1,073	99.4%	1,080	6.5%
Diseases of the circulatory system	51	3.7%	1,320	96.3%	1,371	8.3%
Diseases of the respiratory system	81	3.5%	2,219	96.5%	2,300	13.9%
Diseases of the digestive system	97	6.3%	1,451	93.7%	1,548	9.3%
Diseases of the genitourinary system	17	1.7%	1,010	98.3%	1,027	6.2%
Pregnancy, childbirth, and the puerperium	6	5.9%	96	94.1%	102	0.6%
Diseases of the skin and subcutaneous tissue	28	3.4%	807	96.6%	835	5.0%
Musculoskeletal system and connective tissue	7	0.8%	824	99.2%	831	5.0%
Congenital anomalies	1	33.3%	2	66.7%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	5	100.0%	5	0.0%
Injury & poisoning	47	1.0%	4,475	99.0%	4,522	27.2%
Symptoms, signs & ill-defined conditions	15	1.0%	1,428	99.0%	1,443	8.7%
Residual codes, unclassified, all Ecodes	0	0.0%	130	100.0%	130	0.8%
Total	463	2.8%	16,141	97.2%	16,604	100.0%

Table E-4
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Age Group

<u>Vermont Hospitals</u>	<u>Age Group</u>									<u>Total</u>
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	
Brattleboro Memorial Hospital	1,529	5,334	2,950	458	403	345	803	9,813	2,009	11,822
Central Vermont Medical Center	3,738	11,478	5,885	1,047	892	739	1,583	21,101	4,261	25,362
Copley Hospital	2,086	6,066	2,649	533	438	394	874	10,801	2,239	13,040
Fletcher Allen Health Care	5,935	23,050	11,046	1,746	1,396	1,150	2,453	40,031	6,745	46,776
Gifford Medical Center	973	2,796	1,403	263	264	227	385	5,172	1,139	6,311
Grace Cottage Hospital	429	928	680	192	173	127	263	2,037	755	2,792
Mt. Ascutney Hospital and Health Center	689	1,861	1,307	292	277	235	600	3,857	1,404	5,261
North Country Hospital	2,235	6,108	3,106	637	663	529	1,323	11,449	3,152	14,601
Northeastern Vermont Regional Hospital	1,967	6,038	3,119	606	513	447	882	11,124	2,448	13,572
Northwestern Medical Center	3,688	11,462	5,665	933	795	657	1,405	20,815	3,790	24,605
Porter Medical Center	1,815	6,475	3,172	607	429	445	840	11,462	2,321	13,783
Rutland Regional Medical Center	3,818	13,565	6,905	1,116	932	734	1,659	24,288	4,441	28,729
Southwestern Vermont Medical Center	2,894	8,725	4,488	860	748	616	1,440	16,107	3,664	19,771
Springfield Hospital	2,263	6,716	3,795	746	652	555	1,414	12,774	3,367	16,141
Total	34,059	110,602	56,170	10,036	8,575	7,200	15,924	200,831	41,735	242,566

ED visits include all hospital records that originated in the ED and did not result in hospital admission.

Inpatient discharges originating in the ED are reported in the Vermont Hospital Inpatient tables.

ED visits exclude 1 record from Copley Hospital with missing age.

Table E-5
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Principal Payer

Vermont Hospital	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%				
Brattleboro Memorial Hospital	2,763	23.4%	3,749	31.7%	75	0.6%	398	3.4%	3,712	31.4%	1,123	9.5%	2	0.0%	11,822	4.9%
Central Vermont Medical Center	5,885	23.2%	8,583	33.8%	392	1.5%	562	2.2%	8,176	32.2%	1,764	7.0%	-	0.0%	25,362	10.5%
Copley Hospital	2,967	22.8%	4,434	34.0%	119	0.9%	270	2.1%	4,044	31.0%	1,206	9.2%	-	0.0%	13,040	5.4%
Fletcher Allen Health Care	8,648	18.5%	12,549	26.8%	808	1.7%	948	2.0%	19,726	42.2%	3,852	8.2%	245	0.5%	46,776	19.3%
Gifford Medical Center	1,477	23.4%	2,147	34.0%	81	1.3%	106	1.7%	1,945	30.8%	555	8.8%	-	0.0%	6,311	2.6%
Grace Cottage Hospital	775	27.8%	705	25.3%	16	0.6%	65	2.3%	946	33.9%	285	10.2%	-	0.0%	2,792	1.2%
Mt. Ascutney Hospital and Health Center	1,666	31.7%	1,156	22.0%	-	0.0%	105	2.0%	1,740	33.1%	512	9.7%	82	1.6%	5,261	2.2%
North Country Hospital	4,130	28.3%	5,538	37.9%	116	0.8%	367	2.5%	3,340	22.9%	1,110	7.6%	-	0.0%	14,601	6.0%
Northeastern Vermont Regional Hospital	3,076	22.7%	4,676	34.5%	44	0.3%	276	2.0%	4,269	31.5%	1,231	9.1%	-	0.0%	13,572	5.6%
Northwestern Medical Center	5,157	21.0%	9,235	37.5%	295	1.2%	528	2.1%	7,506	30.5%	1,833	7.4%	51	0.2%	24,605	10.1%
Porter Medical Center	2,909	21.1%	3,998	29.0%	78	0.6%	103	0.7%	5,436	39.4%	1,040	7.5%	219	1.6%	13,783	5.7%
Rutland Regional Medical Center	6,792	23.6%	10,167	35.4%	187	0.7%	842	2.9%	8,187	28.5%	2,554	8.9%	-	0.0%	28,729	11.8%
Southwestern Vermont Medical Center	4,956	25.1%	5,800	29.3%	125	0.6%	462	2.3%	6,833	34.6%	1,595	8.1%	-	0.0%	19,771	8.2%
Springfield Hospital	4,709	29.2%	5,287	32.8%	81	0.5%	190	1.2%	3,944	24.4%	1,923	11.9%	7	0.0%	16,141	6.7%
Total	55,910	23.0%	78,024	32.2%	2,417	1.0%	5,222	2.2%	79,804	32.9%	20,583	8.5%	606	0.2%	242,566	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

ED visits include all hospital records that originated in the ED and did not result in hospital admission.

Inpatient discharges originating in the ED are reported in the Vermont Hospital Inpatient tables.

Table E-6
2013 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Principal Payer

CCS Diagnosis Groups	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown			
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Infectious & parasitic diseases	562	14.9%	1,562	41.3%	52	1.4%	21	0.6%	1,208	32.0%	361	9.6%	12	0.3%	3,778	1.6%
Neoplasms	164	45.8%	56	15.6%	3	0.8%	1	0.3%	118	33.0%	16	4.5%	-	0.0%	358	0.1%
Endocrine, nutritional, metabolic, immunity	1,509	45.2%	668	20.0%	40	1.2%	11	0.3%	910	27.2%	186	5.6%	16	0.5%	3,340	1.4%
Diseases of the blood & blood-forming organs	234	54.8%	67	15.7%	1	0.2%	-	0.0%	104	24.4%	13	3.0%	8	1.9%	427	0.2%
Mental disorders	2,398	22.2%	4,440	41.1%	105	1.0%	20	0.2%	2,625	24.3%	1,209	11.2%	9	0.1%	10,806	4.5%
Diseases of the nervous system and sense organs	4,184	21.3%	7,212	36.8%	230	1.2%	137	0.7%	6,362	32.4%	1,448	7.4%	42	0.2%	19,615	8.1%
Diseases of the circulatory system	7,035	44.0%	2,487	15.6%	150	0.9%	46	0.3%	5,366	33.6%	848	5.3%	57	0.4%	15,989	6.6%
Diseases of the respiratory system	7,035	23.9%	10,972	37.3%	324	1.1%	43	0.1%	8,440	28.7%	2,565	8.7%	56	0.2%	29,435	12.1%
Diseases of the digestive system	4,060	22.4%	6,929	38.3%	118	0.7%	34	0.2%	4,863	26.9%	2,086	11.5%	19	0.1%	18,109	7.5%
Diseases of the genitourinary system	3,487	26.9%	3,820	29.5%	133	1.0%	5	0.0%	4,422	34.1%	1,079	8.3%	24	0.2%	12,970	5.3%
Pregnancy, childbirth, and the puerperium	47	1.9%	1,433	58.7%	32	1.3%	10	0.4%	756	31.0%	164	6.7%	-	0.0%	2,442	1.0%
Diseases of the skin and subcutaneous tissue	1,922	21.8%	3,010	34.1%	72	0.8%	78	0.9%	2,738	31.0%	983	11.1%	18	0.2%	8,821	3.6%
Musculoskeletal system and connective tissue	4,787	27.1%	5,407	30.7%	169	1.0%	510	2.9%	5,185	29.4%	1,549	8.8%	33	0.2%	17,640	7.3%
Congenital anomalies	16	29.1%	20	36.4%	2	3.6%	-	0.0%	15	27.3%	2	3.6%	-	0.0%	55	0.0%
Conditions originating in the perinatal period	-	0.0%	166	64.1%	2	0.8%	-	0.0%	63	24.3%	28	10.8%	-	0.0%	259	0.1%
Injury & poisoning	12,042	17.0%	20,417	28.8%	711	1.0%	4,095	5.8%	27,383	38.6%	6,030	8.5%	247	0.3%	70,925	29.2%
Symptoms, signs & ill-defined conditions	5,584	21.7%	8,923	34.7%	258	1.0%	148	0.6%	8,803	34.3%	1,919	7.5%	55	0.2%	25,690	10.6%
Residual codes, unclassified, all Ecodes	844	44.3%	435	22.8%	15	0.8%	63	3.3%	443	23.2%	97	5.1%	10	0.5%	1,907	0.8%
Total	55,910	23.0%	78,024	32.2%	2,417	1.0%	5,222	2.2%	79,804	32.9%	20,583	8.5%	606	0.2%	242,566	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

ED visits include all hospital records that originated in the ED and did not result in hospital admission.

Inpatient discharges originating in the ED are reported in the Vermont Hospital Inpatient tables.

Table E-7
2012 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
In-migration by Vermont Hospital

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-Vermonters</u>		<u>Total for Vermont Hospitals</u>	
	<u>Visits</u>	<u>Total Charges</u>	<u>Visits</u>	<u>Total Charges</u>	<u>Visits</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	8,976	\$17,820,111	2,846	\$5,342,014	11,822	\$23,162,125
Central Vermont Medical Center	24,305	\$40,691,005	1,057	\$1,773,718	25,362	\$42,464,723
Copley Hospital	11,654	\$10,477,486	1,386	\$1,126,382	13,040	\$11,603,868
Fletcher Allen Health Care	43,730	\$109,589,029	3,046	\$9,245,578	46,776	\$118,834,608
Gifford Medical Center	6,044	\$11,526,717	267	\$570,338	6,311	\$12,097,055
Grace Cottage Hospital	2,394	\$3,173,666	398	\$432,724	2,792	\$3,606,390
Mt. Ascutney Hospital and Health Center	4,144	\$6,500,571	1,117	\$1,730,331	5,261	\$8,230,902
North Country Hospital	13,696	\$24,083,315	905	\$1,517,359	14,601	\$25,600,674
Northeastern Vermont Regional Hospital	12,640	\$14,813,492	932	\$1,063,517	13,572	\$15,877,009
Northwestern Medical Center	24,013	\$31,014,062	592	\$685,988	24,605	\$31,700,051
Porter Medical Center	12,398	\$16,096,936	1,385	\$1,527,191	13,783	\$17,624,128
Rutland Regional Medical Center	25,885	\$40,460,302	2,844	\$4,693,937	28,729	\$45,154,239
Southwestern Vermont Medical Center	14,830	\$26,636,413	4,941	\$9,829,364	19,771	\$36,465,777
Springfield Hospital	13,408	\$23,934,068	2,733	\$5,230,255	16,141	\$29,164,323
Total for 2013	218,117	\$376,817,175	24,449	\$44,768,696	242,566	\$421,585,871
Total for 2012	225,304	\$358,197,475	24,520	\$41,161,604	249,824	\$399,359,078
Total for 2011	220,622	\$322,541,685	24,025	\$36,962,098	244,647	\$359,503,783
Total for 2010	216,914	\$312,661,204	23,415	\$35,173,398	240,329	\$347,834,603

ED visits include all hospital records that originated in the ED and did not result in hospital admission.

Inpatient discharges originating in the ED are reported in the Vermont Hospital Inpatient tables.

Numbers of ED visits exclude any records with missing or invalid diagnosis codes.

Inpatient charges of \$100 or less and outpatient charges of \$0 are considered missing.

Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Outpatient Procedures and Services

Table O-1
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-Residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Vermont Hospitals by State of Residence

Vermont Hospital	Vermont Residents		Non-residents		All Outpatient Procedures	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	3,346	83.3%	669	16.7%	4,015	3.8%
Central Vermont Medical Center	7,672	99.5%	40	0.5%	7,712	7.4%
Copley Hospital	5,536	98.8%	68	1.2%	5,604	5.4%
Fletcher Allen Health Care	41,196	86.9%	6,187	13.1%	47,383	45.3%
Gifford Medical Center	2,440	97.0%	76	3.0%	2,516	2.4%
Grace Cottage Hospital	-	0%	-	0%	-	0.0%
Mt. Ascutney Hospital and Health Center	1,067	59.8%	718	40.2%	1,785	1.7%
North Country Hospital	3,995	99.5%	21	0.5%	4,016	3.8%
Northeastern Vermont Regional Hospital	2,815	88.8%	356	11.2%	3,171	3.0%
Northwestern Medical Center	6,327	99.0%	61	1.0%	6,388	6.1%
Porter Medical Center	3,112	93.0%	233	7.0%	3,345	3.2%
Rutland Regional Medical Center	9,813	94.3%	592	5.7%	10,405	9.9%
Southwestern Vermont Medical Center	4,660	76.9%	1,397	23.1%	6,057	5.8%
Springfield Hospital	1,957	86.8%	297	13.2%	2,254	2.2%
Total	93,936	89.8%	10,715	10.2%	104,651	100.0%

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Table O-2
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-Residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Vermont Hospitals by Data Year: Comparison of 2009 through 2013

Vermont Hospital	2009	2010	2011	2012	2013
Brattleboro Memorial Hospital	4,055	3,578	3,322	3,398	4,015
Central Vermont Medical Center	7,702	8,156	7,852	7,796	7,712
Copley Hospital	3,920	3,796	3,898	4,137	5,604
Fletcher Allen Health Care	45,034	44,954	47,531	48,711	47,383
Gifford Medical Center	2,471	3,071	2,505	2,455	2,516
Grace Cottage Hospital	-	-	2	-	-
Mt. Ascutney Hospital and Health Center	1,380	1,402	1,108	1,294	1,785
North Country Hospital	3,460	3,801	3,889	3,648	4,016
Northeastern Vermont Regional Hospital	3,551	3,606	3,811	3,221	3,171
Northwestern Medical Center	7,386	7,397	6,724	7,044	6,388
Porter Medical Center	3,804	3,498	3,362	3,310	3,345
Rutland Regional Medical Center	9,682	9,208	9,036	8,610	10,405
Southwestern Vermont Medical Center	6,834	6,992	7,053	6,823	6,057
Springfield Hospital	2,437	2,349	2,309	2,386	2,254
Total	101,716	101,808	102,402	102,833	104,651

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Table O-3
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Vermont Hospitals

CCS Diagnosis Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
Infectious & parasitic diseases	8	13	21	306	35	-	1	6	4	17	6	23	22	4	466
Neoplasms	368	765	363	8,750	260	-	139	384	685	267	208	830	1,145	198	14,362
Endocrine, nutritional, metabolic, immunity	146	130	20	1,340	2	-	19	42	25	69	16	86	141	9	2,045
Diseases of the blood & blood-forming organs	27	60	16	316	-	-	9	8	50	52	13	117	73	2	743
Mental disorders	2	5	-	75	-	-	2	2	12	-	-	57	135	1	291
Diseases of the nervous system and sense organs	593	904	264	5,335	350	-	315	474	578	472	815	1,161	210	273	11,744
Diseases of the circulatory system	102	103	20	2,091	81	-	8	68	35	52	4	168	82	21	2,835
Diseases of the respiratory system	18	155	8	1,765	4	-	24	129	51	37	161	1,328	88	39	3,807
Diseases of the digestive system	599	976	450	4,844	206	-	312	708	366	1,165	302	1,522	957	398	12,805
Diseases of the genitourinary system	222	364	268	4,424	161	-	17	186	119	347	170	410	557	168	7,413
Pregnancy, childbirth, and the puerperium	46	881	116	289	581	-	10	832	187	225	95	75	343	14	3,694
Diseases of the skin and subcutaneous tissue	322	108	117	2,317	33	-	27	59	31	290	15	170	71	32	3,592
Musculoskeletal system and connective tissue	343	825	2,783	6,748	356	-	227	426	238	1,159	175	1,742	696	138	15,856
Congenital anomalies	2	8	9	293	7	-	2	9	4	20	5	12	10	4	385
Conditions originating in the perinatal period	-	37	-	11	-	-	-	2	8	16	12	3	29	17	135
Injury & poisoning	397	406	445	2,368	197	-	39	170	150	282	208	632	365	160	5,819
Symptoms, signs & ill-defined conditions	810	1,962	694	5,137	198	-	596	473	624	1,903	1,122	2,002	893	773	17,187
Residual codes, unclassified, all Ecodes	10	10	10	974	45	-	38	38	4	15	18	67	240	3	1,472
Total	4,015	7,712	5,604	47,383	2,516	-	1,785	4,016	3,171	6,388	3,345	10,405	6,057	2,254	104,651

Outpatient procedures include all outpatient records with any procedure in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

CCS Diagnosis Groups are based on the first listed ICD-9-CM diagnosis code.

Column headers denote hospitals: key to the hospital abbreviations can be found in Appendix H.

Table O-4
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Clinical Classifications Software (CCS) High Level Procedure Groups by Vermont Hospitals

CCS Procedure Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
Operations on the nervous system	139	559	280	3,230	110	-	164	291	67	690	83	1,331	305	71	7,320
Operations on the endocrine system	3	63	3	375	-	-	1	11	-	10	10	7	128	12	623
Operations on the eye	506	667	127	3,412	256	-	283	342	478	310	587	670	81	183	7,902
Operations on the ear	13	76	5	901	1	-	11	27	26	50	152	265	58	27	1,612
Operations on the nose, mouth, and pharynx	53	134	157	1,950	1	-	32	142	56	39	194	835	200	66	3,859
Operations on the respiratory system	14	48	8	1,268	1	-	6	22	8	9	17	1,137	69	12	2,619
Operations on the cardiovascular system	30	86	15	2,780	13	-	6	36	16	9	7	142	95	6	3,241
Operations on the hemic and lymphatic system	7	20	13	403	7	-	4	14	10	11	7	28	24	12	560
Operations on the digestive system	1,661	3,341	1,162	12,144	652	-	1,041	1,317	1,084	2,660	1,524	3,681	2,921	1,250	34,438
Operations on the urinary system	97	219	124	3,005	103	-	7	28	60	70	67	218	123	5	4,126
Operations on the male genital organs	19	82	47	602	48	-	8	7	43	34	45	81	64	17	1,097
Operations on the female genital organs	161	170	264	1,499	69	-	10	174	91	337	117	249	271	156	3,568
Obstetrical procedures	17	818	4	36	628	-	-	962	171	135	55	1	272	-	3,099
Operations on the musculoskeletal system	629	868	3,079	7,389	545	-	133	392	361	871	365	1,172	895	296	16,995
Operations on the integumentary system	641	502	291	7,520	79	-	62	211	114	446	110	539	547	141	11,203
Miscellaneous diagnostic and therapeutic procs	25	59	25	869	3	-	17	40	586	707	5	49	4	-	2,389
Total	4,015	7,712	5,604	47,383	2,516	-	1,785	4,016	3,171	6,388	3,345	10,405	6,057	2,254	104,651

Outpatient procedures include all outpatient records with any procedure in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

CCS Procedure Groups are based on the first ICD-9-CM procedure in range 00.0-86.99.

Column headers denote hospitals: key to the hospital abbreviations can be found in Appendix H.

Table O-5
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-Residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Vermont Hospitals by Age Group

<u>Vermont Hospital</u>	<u>Age Group</u>									<u>Total</u>
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	
Brattleboro Memorial Hospital	55	572	1,753	518	372	312	433	2,380	1,635	4,015
Central Vermont Medical Center	155	1,912	3,215	849	627	461	493	5,282	2,430	7,712
Copley Hospital	173	1,097	2,601	603	424	362	344	3,871	1,733	5,604
Fletcher Allen Health Care	2,327	7,588	16,914	6,155	5,011	3,679	5,709	26,829	20,554	47,383
Gifford Medical Center	43	972	901	222	146	121	111	1,916	600	2,516
Grace Cottage Hospital	-	-	-	-	-	-	-	-	-	-
Mt. Ascutney Hospital and Health Center	20	216	810	235	194	144	166	1,046	739	1,785
North Country Hospital	76	1,581	1,140	399	330	232	258	2,797	1,219	4,016
Northeastern Vermont Regional Hospital	72	576	1,300	414	282	249	278	1,948	1,223	3,171
Northwestern Medical Center	119	1,568	2,899	625	473	337	367	4,586	1,802	6,388
Porter Medical Center	254	527	1,372	377	310	230	275	2,153	1,192	3,345
Rutland Regional Medical Center	254	1,812	4,351	1,221	1,063	785	919	6,417	3,988	10,405
Southwestern Vermont Medical Center	249	1,317	2,602	606	556	354	373	4,168	1,889	6,057
Springfield Hospital	85	406	1,087	254	145	143	134	1,578	676	2,254
Total	3,882	20,144	40,945	12,478	9,933	7,409	9,860	64,971	39,680	104,651

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Table O-6
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-Residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Vermont Hospitals by Principal Payer

Vermont Hospital	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	1,760	43.8%	552	13.7%	16	0.4%	59	1.5%	1,593	39.7%	34	0.8%	1	0.0%	4,015	3.8%
Central Vermont Medical Center	2,570	33.3%	1,160	15.0%	124	1.6%	105	1.4%	3,713	48.1%	40	0.5%	-	0.0%	7,712	7.4%
Copley Hospital	1,911	34.1%	882	15.7%	31	0.6%	181	3.2%	2,544	45.4%	55	1.0%	-	0.0%	5,604	5.4%
Fletcher Allen Health Care	21,545	45.5%	4,037	8.5%	547	1.2%	766	1.6%	19,600	41.4%	357	0.8%	531	1.1%	47,383	45.3%
Gifford Medical Center	604	24.0%	520	20.7%	28	1.1%	40	1.6%	1,317	52.3%	7	0.3%	-	0.0%	2,516	2.4%
Grace Cottage Hospital	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Mt. Ascutney Hospital and Health Center	747	41.8%	116	6.5%	-	0.0%	5	0.3%	888	49.7%	21	1.2%	8	0.4%	1,785	1.7%
North Country Hospital	1,325	33.0%	1,187	29.6%	20	0.5%	28	0.7%	1,422	35.4%	34	0.8%	-	0.0%	4,016	3.8%
Northeastern Vermont Regional Hospital	1,195	37.7%	553	17.4%	9	0.3%	25	0.8%	1,353	42.7%	36	1.1%	-	0.0%	3,171	3.0%
Northwestern Medical Center	1,898	29.7%	1,108	17.3%	82	1.3%	200	3.1%	3,037	47.5%	55	0.9%	8	0.1%	6,388	6.1%
Porter Medical Center	1,122	33.5%	480	14.3%	9	0.3%	4	0.1%	1,709	51.1%	19	0.6%	2	0.1%	3,345	3.2%
Rutland Regional Medical Center	4,431	42.6%	1,319	12.7%	84	0.8%	161	1.5%	4,294	41.3%	116	1.1%	-	0.0%	10,405	9.9%
Southwestern Vermont Medical Center	1,955	32.3%	1,056	17.4%	43	0.7%	61	1.0%	2,909	48.0%	33	0.5%	-	0.0%	6,057	5.8%
Springfield Hospital	757	33.6%	354	15.7%	9	0.4%	34	1.5%	1,017	45.1%	83	3.7%	-	0.0%	2,254	2.2%
Total	41,820	40.0%	13,324	12.7%	1,002	1.0%	1,669	1.6%	45,396	43.4%	890	0.9%	550	0.5%	104,651	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Table O-7
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-Residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Principal Payer

CCS Diagnosis Groups	Principal Payer															
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		Total	
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Infectious & parasitic diseases	203	43.6%	93	20.0%	6	1.3%	-	0.0%	156	33.5%	5	1.1%	3	0.6%	466	0.4%
Neoplasms	7,643	53.2%	887	6.2%	91	0.6%	2	0.0%	5,659	39.4%	61	0.4%	19	0.1%	14,362	13.7%
Endocrine, nutritional, metabolic, immunity	891	43.6%	250	12.2%	18	0.9%	1	0.0%	849	41.5%	14	0.7%	22	1.1%	2,045	2.0%
Diseases of the blood & blood-forming organs	416	56.0%	72	9.7%	2	0.3%	-	0.0%	242	32.6%	8	1.1%	3	0.4%	743	0.7%
Mental disorders	64	22.0%	162	55.7%	1	0.3%	1	0.3%	58	19.9%	4	1.4%	1	0.3%	291	0.3%
Diseases of the nervous system and sense organs	7,215	61.4%	1,204	10.3%	88	0.7%	191	1.6%	2,976	25.3%	40	0.3%	30	0.3%	11,744	11.2%
Diseases of the circulatory system	1,314	46.3%	227	8.0%	30	1.1%	4	0.1%	1,116	39.4%	18	0.6%	126	4.4%	2,835	2.7%
Diseases of the respiratory system	1,702	44.7%	577	15.2%	36	0.9%	6	0.2%	1,443	37.9%	33	0.9%	10	0.3%	3,807	3.6%
Diseases of the digestive system	4,191	32.7%	2,165	16.9%	125	1.0%	83	0.6%	6,085	47.5%	136	1.1%	20	0.2%	12,805	12.2%
Diseases of the genitourinary system	2,597	35.0%	968	13.1%	73	1.0%	2	0.0%	3,502	47.2%	83	1.1%	188	2.5%	7,413	7.1%
Pregnancy, childbirth, and the puerperium	62	1.7%	1,814	49.1%	58	1.6%	3	0.1%	1,715	46.4%	42	1.1%	-	0.0%	3,694	3.5%
Diseases of the skin and subcutaneous tissue	2,612	72.7%	257	7.2%	12	0.3%	6	0.2%	668	18.6%	29	0.8%	8	0.2%	3,592	3.4%
Musculoskeletal system and connective tissue	6,318	39.8%	1,925	12.1%	164	1.0%	868	5.5%	6,468	40.8%	105	0.7%	8	0.1%	15,856	15.2%
Congenital anomalies	27	7.0%	129	33.5%	4	1.0%	-	0.0%	221	57.4%	4	1.0%	-	0.0%	385	0.4%
Conditions originating in the perinatal period	-	0.0%	54	40.0%	1	0.7%	-	0.0%	49	36.3%	31	23.0%	-	0.0%	135	0.1%
Injury & poisoning	1,201	20.6%	792	13.6%	70	1.2%	459	7.9%	3,074	52.8%	137	2.4%	86	1.5%	5,819	5.6%
Symptoms, signs & ill-defined conditions	4,995	29.1%	1,586	9.2%	202	1.2%	42	0.2%	10,261	59.7%	79	0.5%	22	0.1%	17,187	16.4%
Residual codes, unclassified, all Ecodes	369	25.1%	162	11.0%	21	1.4%	1	0.1%	854	58.0%	61	4.1%	4	0.3%	1,472	1.4%
Total	41,820	40.0%	13,324	12.7%	1,002	1.0%	1,669	1.6%	45,396	43.4%	890	0.9%	550	0.5%	104,651	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

CCS Diagnosis Groups are based on the first listed ICD-9-CM diagnosis code.

Table O-8
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-Residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99
Clinical Classifications Software (CCS) High Level Procedure Groups by Principal Payer

CCS Procedure Groups	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Operations on the nervous system	2,888	39.5%	1,010	13.8%	86	1.2%	458	6.3%	2,823	38.6%	55	0.8%	-	0.0%	7,320	7.0%
Operations on the endocrine system	242	38.8%	55	8.8%	4	0.6%	-	0.0%	317	50.9%	5	0.8%	-	0.0%	623	0.6%
Operations on the eye	6,031	76.3%	296	3.7%	53	0.7%	5	0.1%	1,444	18.3%	32	0.4%	41	0.5%	7,902	7.6%
Operations on the ear	435	27.0%	556	34.5%	8	0.5%	1	0.1%	603	37.4%	8	0.5%	1	0.1%	1,612	1.5%
Operations on the nose, mouth, and pharynx	1,317	34.1%	1,163	30.1%	36	0.9%	6	0.2%	1,306	33.8%	29	0.8%	2	0.1%	3,859	3.7%
Operations on the respiratory system	1,589	60.7%	220	8.4%	18	0.7%	4	0.2%	754	28.8%	23	0.9%	11	0.4%	2,619	2.5%
Operations on the cardiovascular system	1,392	42.9%	256	7.9%	26	0.8%	8	0.2%	1,232	38.0%	16	0.5%	311	9.6%	3,241	3.1%
Operations on the hemic and lymphatic system	208	37.1%	53	9.5%	4	0.7%	-	0.0%	284	50.7%	9	1.6%	2	0.4%	560	0.5%
Operations on the digestive system	10,883	31.6%	3,530	10.3%	381	1.1%	82	0.2%	19,285	56.0%	236	0.7%	41	0.1%	34,438	32.9%
Operations on the urinary system	2,493	60.4%	315	7.6%	26	0.6%	-	0.0%	1,226	29.7%	24	0.6%	42	1.0%	4,126	3.9%
Operations on the male genital organs	292	26.6%	193	17.6%	14	1.3%	-	0.0%	555	50.6%	43	3.9%	-	0.0%	1,097	1.0%
Operations on the female genital organs	520	14.6%	825	23.1%	34	1.0%	1	0.0%	2,138	59.9%	46	1.3%	4	0.1%	3,568	3.4%
Obstetrical procedures	47	1.5%	1,636	52.8%	49	1.6%	3	0.1%	1,332	43.0%	32	1.0%	-	0.0%	3,099	3.0%
Operations on the musculoskeletal system	5,537	32.6%	2,055	12.1%	181	1.1%	1,035	6.1%	8,001	47.1%	174	1.0%	12	0.1%	16,995	16.2%
Operations on the integumentary system	7,056	63.0%	762	6.8%	72	0.6%	25	0.2%	3,075	27.4%	133	1.2%	80	0.7%	11,203	10.7%
Miscellaneous diagnostic and therapeutic procs	890	37.3%	399	16.7%	10	0.4%	41	1.7%	1,021	42.7%	25	1.0%	3	0.1%	2,389	2.3%
Total	41,820	40.0%	13,324	12.7%	1,002	1.0%	1,669	1.6%	45,396	43.4%	890	0.9%	550	0.5%	104,651	100.0%

"Other" payer includes self-pay, no charge, and other sources of payment.

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

CCS Procedure Groups are based on the first ICD-9-CM procedure in range 00.0-86.99.

Table O-9
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99 and Average Charges by Vermont Hospitals
 Procedure Groups defined by first two digits of the first procedure in range

Procedure Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
00 Procedures and Interventions, NEC															
N	-	2	-	297	3	-	-	1	27	1	-	4	-	-	335
Avg\$	\$ -	\$ 11,671	\$ -	\$ 40,306	\$ 3,198	\$ -	\$ -	\$ 1,446	\$ 7,213	\$ 688	\$ -	\$ 116,005	\$ -	\$ -	\$ 37,805
01 Incision, Excision of Brain, Skull															
N	-	-	-	7	-	-	-	-	-	-	-	-	-	-	7
Avg\$	\$ -	\$ -	\$ -	\$ 14,252	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,252
02 Other Brain, Skull Operations															
N	-	-	-	5	-	-	-	-	-	-	-	-	-	-	5
Avg\$	\$ -	\$ -	\$ -	\$ 16,818	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,818
03 Spinal Cord & Canal Operations															
N	45	376	120	1,160	21	-	78	196	1	443	-	1,083	202	-	3,725
Avg\$	\$ 4,552	\$ 1,711	\$ 1,178	\$ 3,381	\$ 2,509	\$ -	\$ 1,419	\$ 2,167	\$ 4,434	\$ 1,035	\$ -	\$ 2,271	\$ 2,612	\$ -	\$ 2,403
04 Cranial & Peripheral Nerve Operations															
N	82	173	155	1,663	88	-	85	95	66	219	83	222	79	71	3,081
Avg\$	\$ 4,448	\$ 4,295	\$ 4,756	\$ 5,837	\$ 8,617	\$ -	\$ 2,295	\$ 5,004	\$ 6,315	\$ 2,353	\$ 4,952	\$ 3,915	\$ 5,015	\$ 2,346	\$ 5,117
05 Sympathetic Nerve Operations															
N	-	3	5	137	1	-	1	-	-	1	-	-	-	-	148
Avg\$	\$ -	\$ 1,712	\$ 320	\$ 5,646	\$ -	\$ -	\$ 838	\$ -	\$ -	\$ 892	\$ -	\$ -	\$ -	\$ -	\$ 5,319
06 Thyroid, Parathyroid Operations															
N	3	63	3	369	-	-	1	11	-	10	10	7	128	12	617
Avg\$	\$ 21,049	\$ 3,434	\$ 1,571	\$ 8,554	\$ -	\$ -	\$ 1,116	\$ 2,669	\$ -	\$ 5,841	\$ 8,420	\$ 22,207	\$ 1,435	\$ 3,265	\$ 6,419
07 Other Endocrine Gland Operations															
N	-	-	-	6	-	-	-	-	-	-	-	-	-	-	6
Avg\$	\$ -	\$ -	\$ -	\$ 9,010	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,010
08 Eyelid Operations															
N	15	8	1	136	2	-	17	8	2	15	46	10	4	2	266
Avg\$	\$ 5,236	\$ 5,074	\$ 1,101	\$ 4,808	\$ 10,207	\$ -	\$ 7,980	\$ 2,701	\$ 3,492	\$ 2,223	\$ 4,434	\$ 2,061	\$ 2,666	\$ 2,202	\$ 4,610
09 Lacrimal System Operations															
N	1	-	-	83	-	-	-	-	-	3	1	-	1	-	89
Avg\$	\$ 3,563	\$ -	\$ -	\$ 4,612	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,715	\$ 3,304	\$ -	\$ 2,129	\$ -	\$ 4,527
10 Conjunctival Operations															
N	-	2	-	8	2	-	-	1	-	1	1	1	-	-	16
Avg\$	\$ -	\$ 4,679	\$ -	\$ 5,819	\$ 5,762	\$ -	\$ -	\$ 4,765	\$ -	\$ 8,224	\$ 3,342	\$ 1,638	\$ -	\$ -	\$ 5,337

Table O-9
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99 and Average Charges by Vermont Hospitals
 Procedure Groups defined by first two digits of the first procedure in range

Procedure Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
11 Operations on Cornea															
N	2	1	-	48	3	-	-	-	-	2	2	3	-	-	61
Avg\$	\$ 4,602	\$ 5,809	\$ -	\$ 13,000	\$ 2,833	\$ -	\$ -	\$ -	\$ -	\$ 7,802	\$ 4,187	\$ 6,304	\$ -	\$ -	\$ 11,460
12 Anterior Eye Segment Operations															
N	4	20	-	232	-	-	-	7	20	7	6	40	6	4	346
Avg\$	\$ 5,838	\$ 563	\$ -	\$ 4,817	\$ -	\$ -	\$ -	\$ 7,144	\$ 1,977	\$ 4,580	\$ 6,402	\$ 1,807	\$ 1,690	\$ 3,662	\$ 4,071
13 Operations on Lens of Eye															
N	482	636	126	521	186	-	266	326	455	282	529	616	70	175	4,670
Avg\$	\$ 5,174	\$ 3,838	\$ 5,316	\$ 5,084	\$ 6,416	\$ -	\$ 8,574	\$ 5,692	\$ 8,613	\$ 5,118	\$ 4,116	\$ 5,481	\$ 1,553	\$ 3,603	\$ 5,404
14 Posterior Eye Segment Operations															
N	-	-	-	2,318	1	-	-	-	1	-	1	-	-	2	2,323
Avg\$	\$ -	\$ -	\$ -	\$ 5,502	\$ 8,788	\$ -	\$ -	\$ -	\$ 15,694	\$ -	\$ 6,384	\$ -	\$ -	\$ 5,308	\$ 5,508
15 Extraocular Muscle Operations															
N	2	-	-	-	62	-	-	-	-	-	-	-	-	-	64
Avg\$	\$ 6,331	\$ -	\$ -	\$ -	\$ 12,062	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,883
16 Orbit & Eyeball Operations															
N	-	-	-	66	-	-	-	-	-	-	1	-	-	-	67
Avg\$	\$ -	\$ -	\$ -	\$ 2,452	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,850	\$ -	\$ -	\$ -	\$ 2,488
17 Other Miscellaneous Procedures															
N	-	30	3	23	-	-	8	-	12	26	-	6	102	1	211
Avg\$	\$ -	\$ 12,466	\$ -	\$ 15,091	\$ -	\$ -	\$ 24,492	\$ -	\$ 27,385	\$ 8,774	\$ -	\$ 16,153	\$ 11,041	\$ -	\$ 13,028
18 External Ear Operations															
N	2	6	5	217	1	-	3	6	4	15	4	65	16	2	346
Avg\$	\$ 9,051	\$ 4,835	\$ 1,695	\$ 2,007	\$ 5,959	\$ -	\$ 13,703	\$ 3,056	\$ 6,708	\$ 1,367	\$ 4,275	\$ 2,094	\$ 3,543	\$ 4,641	\$ 2,380
19 Middle Ear Reconstructions															
N	-	15	-	78	-	-	1	4	3	-	16	14	8	1	140
Avg\$	\$ -	\$ 5,267	\$ -	\$ 12,534	\$ -	\$ -	\$ 30,234	\$ 11,492	\$ 9,814	\$ -	\$ 6,335	\$ 5,917	\$ 3,907	\$ 1,793	\$ 9,854
20 Other Middle & Inner Ear Operations															
N	11	55	-	606	-	-	7	17	19	35	132	186	34	24	1,126
Avg\$	\$ 4,870	\$ 3,883	\$ -	\$ 6,859	\$ -	\$ -	\$ 7,984	\$ 3,943	\$ 5,838	\$ 3,391	\$ 4,775	\$ 1,657	\$ 2,688	\$ 2,135	\$ 5,207

Table O-9
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-residents
Outpatient Visits with any Procedure in ICD-9-CM range 00-86.99 and Average Charges by Vermont Hospitals
 Procedure Groups defined by first two digits of the first procedure in range

Procedure Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
21 Operations on Nose															
N	13	20	5	913	1	-	8	43	10	18	52	406	22	13	1,524
Avg\$	\$ 8,819	\$ 9,278	\$ 1,161	\$ 3,398	\$ -	\$ -	\$ 19,277	\$ 5,363	\$ 8,655	\$ 3,572	\$ 6,056	\$ 1,502	\$ 4,513	\$ 7,883	\$ 3,336
22 Nasal Sinus Operations															
N	5	17	-	181	-	-	-	11	1	1	17	64	2	2	301
Avg\$	\$ 18,615	\$ 10,172	\$ -	\$ 15,829	\$ -	\$ -	\$ -	\$ 7,453	\$ 10,057	\$ 6,195	\$ 9,879	\$ 2,589	\$ 4,855	\$ 11,186	\$ 12,038
23 Tooth Removal & Restoration															
N	23	-	149	331	-	-	-	-	3	-	-	42	133	25	706
Avg\$	\$ 10,742	\$ -	\$ 8,902	\$ 8,568	\$ -	\$ -	\$ -	\$ -	\$ 13,546	\$ -	\$ -	\$ 13,930	\$ 4,163	\$ 4,736	\$ 8,084
24 Other Operations on Teeth & Gums															
N	-	-	2	3	-	-	-	1	-	-	-	-	-	-	6
Avg\$	\$ -	\$ -	\$ 10,066	\$ 9,698	\$ -	\$ -	\$ -	\$ 4,761	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,998
25 Operations on Tongue															
N	-	3	-	40	-	-	-	5	1	1	2	10	3	2	67
Avg\$	\$ -	\$ 8,817	\$ -	\$ 5,597	\$ -	\$ -	\$ -	\$ 1,058	\$ 3,993	\$ 259	\$ 4,241	\$ 4,101	\$ 3,258	\$ 6,042	\$ 4,944
26 Salivary Gland Operations															
N	2	8	-	31	-	-	4	1	-	-	4	12	-	-	62
Avg\$	\$ 8,288	\$ 10,813	\$ -	\$ 15,570	\$ -	\$ -	\$ 19,099	\$ 643	\$ -	\$ -	\$ 19,218	\$ 8,384	\$ -	\$ -	\$ 13,552
27 Other Mouth & Face Operations															
N	1	2	1	131	-	-	1	9	4	2	4	39	5	4	203
Avg\$	\$ 7,743	\$ 6,389	\$ 1,979	\$ 5,541	\$ -	\$ -	\$ 2,412	\$ 5,884	\$ 8,644	\$ 845	\$ 5,803	\$ 2,937	\$ 3,332	\$ 4,162	\$ 4,981
28 Tonsil & Adenoid Operations															
N	8	83	-	300	-	-	19	71	37	17	115	74	33	20	777
Avg\$	\$ 9,316	\$ 6,421	\$ -	\$ 4,897	\$ -	\$ -	\$ 9,828	\$ 5,674	\$ 8,714	\$ 4,610	\$ 6,336	\$ 5,792	\$ 4,565	\$ 6,146	\$ 5,788
29 Operations on Pharynx															
N	1	1	-	20	-	-	-	1	-	-	-	188	2	-	213
Avg\$	\$ 6,812	\$ 9,445	\$ -	\$ 4,710	\$ -	\$ -	\$ -	\$ 7,915	\$ -	\$ -	\$ -	\$ 369	\$ 758	\$ -	\$ 894
30 Excision of Larynx															
N	-	7	-	49	-	-	-	-	3	1	1	3	6	2	72
Avg\$	\$ -	\$ 6,457	\$ -	\$ 8,085	\$ -	\$ -	\$ -	\$ -	\$ 8,013	\$ 4,561	\$ 6,595	\$ 6,719	\$ 5,762	\$ 6,231	\$ 7,545

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Procedure Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
31 Larynx Trachea Operations, NEC															
N	2	3	1	656	1	-	5	1	-	1	7	1,084	2	2	1,765
Avg\$	\$ 7,069	\$ 6,636	\$ 923	\$ 1,522	\$ 7,362	\$ -	\$ 10,666	\$ 4,482	\$ -	\$ 4,901	\$ 7,863	\$ 381	\$ 6,767	\$ 4,986	\$ 908
32 Lung & Bronchus Excision															
N	-	-	-	14	-	-	-	-	-	-	-	-	-	-	14
Avg\$	\$ -	\$ -	\$ -	\$ 13,917	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,917
33 Other Bronchial & Lung Operations															
N	10	30	-	352	-	-	-	16	-	6	-	48	50	5	517
Avg\$	\$ 5,226	\$ 5,539	\$ -	\$ 6,489	\$ -	\$ -	\$ -	\$ 9,483	\$ -	\$ 1,609	\$ -	\$ 5,154	\$ 4,258	\$ 3,952	\$ 6,083
34 Thorax Operations Except Lung															
N	2	8	7	197	-	-	1	5	5	1	9	2	11	3	251
Avg\$	\$ 3,278	\$ 3,249	\$ 1,548	\$ 3,080	\$ -	\$ -	\$ 3,224	\$ 1,998	\$ 2,723	\$ 736	\$ 2,311	\$ 8,646	\$ 3,370	\$ 4,422	\$ 3,053
35 Heart Valve & Septa Operations															
N	1	-	-	7	-	-	-	-	-	-	-	-	-	-	8
Avg\$	\$ 155	\$ -	\$ -	\$ 39,974	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34,997
36 Operations on Heart Vessels															
N	-	-	-	9	-	-	-	-	-	-	-	-	-	-	9
Avg\$	\$ -	\$ -	\$ -	\$ 36,262	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 36,262
37 Other Heart & Pericardium Operations															
N	-	30	-	1,055	1	-	-	-	5	1	3	116	14	-	1,225
Avg\$	\$ -	\$ 17,220	\$ -	\$ 32,650	\$ 32,668	\$ -	\$ -	\$ -	\$ 18,663	\$ 460	\$ 12,397	\$ 28,288	\$ 16,930	\$ -	\$ 31,548
38 Vessel Incision, Excision, Occlusion															
N	33	85	36	1,619	12	-	22	74	564	714	9	68	58	6	3,300
Avg\$	\$ 2,490	\$ 1,841	\$ 3,606	\$ 1,816	\$ 17,487	\$ -	\$ 4,253	\$ 5,054	\$ 2,289	\$ 493	\$ 2,696	\$ 1,811	\$ 3,474	\$ 7,172	\$ 1,825
39 Other Operations on Vessels															
N	21	28	1	655	-	-	1	1	6	-	-	3	27	-	743
Avg\$	\$ 6,124	\$ 11,855	\$ 159	\$ 18,797	\$ -	\$ -	\$ 19,914	\$ 16,145	\$ 16,266	\$ -	\$ -	\$ 23,197	\$ 11,827	\$ -	\$ 17,892
40 Lymphatic System Operations															
N	5	15	7	160	7	-	4	14	8	11	7	28	23	9	298
Avg\$	\$ 7,273	\$ 6,775	\$ 6,732	\$ 8,890	\$ 15,268	\$ -	\$ 12,633	\$ 8,670	\$ 17,742	\$ 4,212	\$ 7,662	\$ 5,394	\$ 4,886	\$ 7,345	\$ 8,232

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41 Bone Marrow & Spleen Operations															
N	2	5	6	243	-	-	-	-	2	-	-	-	1	3	262
Avg\$	\$ 7,210	\$ 3,874	\$ 2,628	\$ 6,109	\$ -	\$ -	\$ -	\$ -	\$ 6,055	\$ -	\$ -	\$ -	\$ 4,543	\$ 2,392	\$ 5,947
42 Operations on Esophagus															
N	27	84	18	295	17	-	13	-	2	15	11	83	30	4	599
Avg\$	\$ 2,433	\$ 3,883	\$ 3,347	\$ 4,536	\$ 3,303	\$ -	\$ 3,055	\$ -	\$ 7,409	\$ 3,097	\$ 3,956	\$ 3,887	\$ 2,139	\$ 2,586	\$ 3,987
43 Incision, Excision of Stomach															
N	9	7	21	107	1	-	10	4	1	6	9	26	16	2	219
Avg\$	\$ 3,244	\$ 3,906	\$ 3,103	\$ 4,595	\$ 5,115	\$ -	\$ 3,910	\$ 3,703	\$ 11,363	\$ 1,546	\$ 3,850	\$ 4,962	\$ 2,315	\$ 2,794	\$ 4,107
44 Other Operations on Stomach															
N	2	6	31	74	-	-	4	-	1	5	4	12	4	2	145
Avg\$	\$ 2,174	\$ 4,202	\$ 3,265	\$ 8,626	\$ -	\$ -	\$ 16,769	\$ -	\$ 39,257	\$ 9,619	\$ 6,115	\$ 6,256	\$ 1,316	\$ 1,662	\$ 7,115
45 Intestinal Incision, Excision, Anastomosis															
N	1,269	2,679	904	9,425	501	-	823	1,012	867	2,055	1,248	2,980	2,237	1,074	27,074
Avg\$	\$ 2,948	\$ 3,501	\$ 2,552	\$ 3,678	\$ 3,700	\$ -	\$ 2,425	\$ 3,624	\$ 6,330	\$ 1,701	\$ 3,219	\$ 3,632	\$ 2,188	\$ 2,145	\$ 3,273
46 Other Intestinal Operations															
N	1	-	-	17	-	-	-	1	-	-	-	4	2	1	26
Avg\$	\$ -	\$ -	\$ -	\$ 4,986	\$ -	\$ -	\$ -	\$ 7,177	\$ -	\$ -	\$ -	\$ 2,772	\$ 2,760	\$ 2,190	\$ 4,430
47 Operations on Appendix															
N	12	3	1	19	1	-	2	9	1	1	2	3	3	1	58
Avg\$	\$ 10,755	\$ 9,308	\$ 13,042	\$ 11,779	\$ 17,295	\$ -	\$ 15,096	\$ 14,119	\$ 19,813	\$ 7,865	\$ 17,557	\$ 13,594	\$ 10,910	\$ 15,051	\$ 12,388
48 Other Rectal & Perirectal Operations															
N	71	149	60	421	14	-	115	28	40	107	108	149	168	40	1,470
Avg\$	\$ 2,964	\$ 3,921	\$ 2,564	\$ 3,989	\$ 5,622	\$ -	\$ 2,723	\$ 4,099	\$ 6,241	\$ 2,079	\$ 3,414	\$ 3,865	\$ 2,242	\$ 2,356	\$ 3,416
49 Operations on Anus															
N	35	33	8	192	15	-	5	27	20	56	6	42	27	10	476
Avg\$	\$ 4,960	\$ 5,381	\$ 5,583	\$ 3,356	\$ 11,114	\$ -	\$ 10,275	\$ 5,976	\$ 9,576	\$ 3,081	\$ 4,765	\$ 6,851	\$ 4,046	\$ 6,280	\$ 4,773
50 Operations on Liver															
N	12	18	-	208	-	-	1	1	-	2	-	6	9	2	259
Avg\$	\$ 3,670	\$ 6,090	\$ -	\$ 7,944	\$ -	\$ -	\$ 4,864	\$ 4,816	\$ -	\$ 5,484	\$ -	\$ 1,727	\$ 2,856	\$ 3,762	\$ 7,221

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51 Biliary Tract Operations															
N	78	137	44	425	27	-	24	69	49	200	41	103	147	29	1,373
Avg\$	\$ 9,203	\$ 11,679	\$ 15,788	\$ 11,685	\$ 27,141	\$ -	\$ 19,200	\$ 12,245	\$ 19,285	\$ 8,263	\$ 20,637	\$ 8,815	\$ 8,073	\$ 9,281	\$ 11,536
52 Operations on Pancreas															
N	-	1	-	10	-	-	-	-	-	-	-	-	-	-	11
Avg\$	\$ -	\$ 14,501	\$ -	\$ 10,984	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,304
53 Repair of Hernia															
N	119	161	66	664	67	-	31	102	83	163	88	240	117	66	1,967
Avg\$	\$ 6,860	\$ 8,108	\$ 10,836	\$ 9,105	\$ 15,567	\$ -	\$ 13,713	\$ 8,990	\$ 16,004	\$ 7,424	\$ 15,325	\$ 8,767	\$ 7,740	\$ 8,423	\$ 9,515
54 Other Abdominal Region Operations															
N	26	33	9	269	9	-	5	64	8	24	7	27	59	18	558
Avg\$	\$ 6,918	\$ 3,727	\$ 9,529	\$ 5,085	\$ 14,759	\$ -	\$ 13,004	\$ 5,575	\$ 9,692	\$ 3,915	\$ 10,849	\$ 5,522	\$ 3,904	\$ 8,647	\$ 5,544
55 Operations on Kidney															
N	7	-	-	229	4	-	-	-	1	-	-	2	4	-	247
Avg\$	\$ 13,220	\$ -	\$ -	\$ 6,173	\$ 43,786	\$ -	\$ -	\$ -	\$ 36,174	\$ -	\$ -	\$ 7,789	\$ 3,102	\$ -	\$ 7,042
56 Operations on Ureter															
N	24	24	6	304	24	-	-	-	19	6	23	40	53	-	523
Avg\$	\$ 12,112	\$ 10,844	\$ 10,776	\$ 10,083	\$ 11,989	\$ -	\$ -	\$ -	\$ 26,228	\$ 9,132	\$ 14,502	\$ 7,666	\$ 10,119	\$ -	\$ 10,926
57 Urinary Bladder Operations															
N	43	166	104	2,089	42	-	3	8	22	39	28	101	47	2	2,694
Avg\$	\$ 7,640	\$ 3,709	\$ 1,847	\$ 2,152	\$ 9,256	\$ -	\$ 10,354	\$ 6,941	\$ 14,941	\$ 5,010	\$ 9,842	\$ 6,294	\$ 7,481	\$ 14,076	\$ 2,937
58 Operations on Urethra															
N	4	9	2	119	5	-	-	1	2	6	5	22	6	-	181
Avg\$	\$ 7,168	\$ 4,294	\$ 3,930	\$ 8,631	\$ 7,983	\$ -	\$ -	\$ 7,044	\$ 23,341	\$ 5,605	\$ 6,468	\$ 6,102	\$ 3,624	\$ -	\$ 7,843
59 Other Urinary Tract Operations															
N	19	20	12	264	28	-	4	19	16	19	11	53	13	3	481
Avg\$	\$ 10,668	\$ 7,596	\$ 9,130	\$ 9,619	\$ 18,202	\$ -	\$ 13,235	\$ 11,079	\$ 15,002	\$ 7,745	\$ 11,979	\$ 7,451	\$ 8,811	\$ 10,287	\$ 10,060
60 Prostate & Seminal Vesicle Operations															
N	6	7	16	270	30	-	1	-	21	2	7	24	21	-	405
Avg\$	\$ 11,583	\$ 11,421	\$ 5,261	\$ 4,121	\$ 10,582	\$ -	\$ 16,303	\$ -	\$ 15,157	\$ 6,226	\$ 17,042	\$ 7,863	\$ 10,387	\$ -	\$ 6,265

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61 Scrotum & Tunica Vaginalis Operations															
N	3	8	3	46	5	-	-	2	5	10	6	11	7	-	106
Avg\$	\$ 5,886	\$ 6,486	\$ 2,667	\$ 6,410	\$ 9,871	\$ -	\$ -	\$ 7,575	\$ 17,258	\$ 5,044	\$ 6,198	\$ 6,754	\$ 5,868	\$ -	\$ 6,851
62 Operations on Testes															
N	1	2	2	99	2	-	-	-	1	-	-	4	-	-	111
Avg\$	\$ 7,101	\$ 10,353	\$ 11,893	\$ 9,732	\$ 17,737	\$ -	\$ -	\$ -	\$ 12,704	\$ -	\$ -	\$ 6,910	\$ -	\$ -	\$ 9,828
63 Spermatic Cord, Epididymis, Vas Deferens Operations															
N	3	23	18	73	3	-	7	1	-	3	12	16	4	-	163
Avg\$	\$ 7,901	\$ 4,182	\$ 2,937	\$ 5,510	\$ 8,817	\$ -	\$ 2,529	\$ 13,526	\$ -	\$ 5,427	\$ 3,100	\$ 4,140	\$ 6,092	\$ -	\$ 4,766
64 Operations on Penis															
N	6	42	8	114	8	-	-	4	16	19	20	26	32	17	312
Avg\$	\$ 7,581	\$ 1,603	\$ 565	\$ 7,922	\$ 9,913	\$ -	\$ -	\$ 5,801	\$ 10,942	\$ 994	\$ 2,175	\$ 5,608	\$ 952	\$ 641	\$ 5,017
65 Operations on Ovary															
N	18	10	14	221	4	-	-	23	8	24	12	16	20	15	385
Avg\$	\$ 11,546	\$ 11,092	\$ 16,372	\$ 8,271	\$ 20,783	\$ -	\$ -	\$ 12,343	\$ 20,541	\$ 7,478	\$ 15,733	\$ 11,466	\$ 13,574	\$ 13,651	\$ 10,205
66 Fallopian Tube Operations															
N	15	22	24	90	9	-	2	28	17	54	21	37	47	10	376
Avg\$	\$ 7,700	\$ 7,276	\$ 9,895	\$ 9,393	\$ 12,109	\$ -	\$ 6,847	\$ 8,565	\$ 11,734	\$ 6,114	\$ 10,161	\$ 7,947	\$ 6,601	\$ 7,277	\$ 8,354
67 Operations on Cervix															
N	8	14	64	82	2	-	1	7	3	28	1	41	13	21	285
Avg\$	\$ 5,862	\$ 5,359	\$ 1,612	\$ 5,780	\$ 14,372	\$ -	\$ 10,421	\$ 2,622	\$ 5,790	\$ 1,887	\$ 8,536	\$ 4,820	\$ 3,762	\$ 5,663	\$ 4,638
68 Other Uterine Incision, Excision															
N	73	17	49	465	35	-	1	59	41	153	37	65	93	59	1,147
Avg\$	\$ 9,109	\$ 10,334	\$ 14,596	\$ 15,957	\$ 25,308	\$ -	\$ 8,319	\$ 11,683	\$ 16,227	\$ 6,659	\$ 18,045	\$ 11,636	\$ 9,931	\$ 10,951	\$ 13,286
69 Other Uterus & Supporting Structure Operations															
N	37	98	92	440	16	-	4	26	21	55	39	66	89	40	1,023
Avg\$	\$ 5,911	\$ 4,835	\$ 2,991	\$ 4,849	\$ 11,755	\$ -	\$ 7,915	\$ 5,923	\$ 6,584	\$ 3,971	\$ 5,613	\$ 6,180	\$ 4,371	\$ 5,487	\$ 4,963
70 Vagina & Cul-de-sac Operations															
N	5	1	15	117	2	-	1	27	-	10	4	7	1	8	198
Avg\$	\$ 10,215	\$ 4,938	\$ 5,507	\$ 7,502	\$ 9,649	\$ -	\$ 7,898	\$ 19,465	\$ -	\$ 7,000	\$ 14,048	\$ 10,502	\$ 11,577	\$ 9,076	\$ 9,461

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71 Vulvar & Perineal Operations															
N	6	8	6	95	1	-	1	4	1	14	3	17	11	3	170
Avg\$	\$ 4,606	\$ 5,132	\$ 5,225	\$ 3,996	\$ 12,243	\$ -	\$ 6,052	\$ 2,200	\$ 9,435	\$ 1,379	\$ 4,920	\$ 3,792	\$ 5,821	\$ 4,555	\$ 4,052
72 Forceps, Vacuum, Breech Delivery															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
73 Assisting, Inducing Delivery, NEC															
N	-	2	3	11	-	-	-	1	2	4	1	1	1	-	26
Avg\$	\$ -	\$ 3,849	\$ 2,588	\$ 3,297	\$ -	\$ -	\$ -	\$ 820	\$ 961	\$ 1,470	\$ 862	\$ 1,230	\$ 836	\$ -	\$ 2,434
74 C-Section, Removal of Fetus															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
75 Other Obstetric Operations															
N	16	816	1	16	628	-	-	961	169	130	54	-	268	-	3,059
Avg\$	\$ 2,543	\$ 509	\$ 1,417	\$ 4,636	\$ 784	\$ -	\$ -	\$ 787	\$ 622	\$ 299	\$ 360	\$ -	\$ 1,210	\$ -	\$ 736
76 Facial Bone & Joint Operations															
N	-	-	1	127	-	-	-	-	-	-	1	1	1	-	131
Avg\$	\$ -	\$ -	\$ 7	\$ 20,733	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 15,340	\$ 7,381	\$ 30,815	\$ -	\$ 20,508
77 Incision, Excision, Division of Bone, NEC															
N	39	13	62	418	209	-	33	21	82	87	40	40	144	31	1,219
Avg\$	\$ 8,128	\$ 9,457	\$ 18,196	\$ 7,950	\$ 14,314	\$ -	\$ 13,059	\$ 12,136	\$ 12,107	\$ 5,913	\$ 12,307	\$ 7,181	\$ 8,237	\$ 7,825	\$ 10,077
78 Other Bone Operations Except Face															
N	25	44	37	288	19	-	2	12	17	27	21	39	58	15	604
Avg\$	\$ 5,143	\$ 8,264	\$ 11,186	\$ 8,283	\$ 14,415	\$ -	\$ 14,433	\$ 11,775	\$ 11,454	\$ 5,631	\$ 7,409	\$ 6,547	\$ 6,015	\$ 7,044	\$ 8,194
79 Reduction of Fracture, Dislocation															
N	45	122	119	471	29	-	-	52	27	68	62	102	86	34	1,217
Avg\$	\$ 12,044	\$ 10,765	\$ 17,373	\$ 15,683	\$ 22,560	\$ -	\$ -	\$ 19,572	\$ 14,337	\$ 7,344	\$ 14,051	\$ 9,668	\$ 10,142	\$ 11,480	\$ 13,992

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80 Incision, Excision of Joint															
N	248	193	148	985	102	-	23	59	82	141	79	283	188	95	2,626
Avg\$	\$ 5,582	\$ 8,381	\$ 12,335	\$ 9,090	\$ 15,563	\$ -	\$ 11,908	\$ 9,263	\$ 13,905	\$ 8,219	\$ 10,346	\$ 7,189	\$ 7,438	\$ 8,119	\$ 8,929
81 Joint Repair & Plastic Operations															
N	116	314	2,451	3,742	28	-	43	154	34	397	63	414	272	54	8,082
Avg\$	\$ 12,504	\$ 4,183	\$ 1,946	\$ 5,618	\$ 20,926	\$ -	\$ 7,508	\$ 5,978	\$ 12,306	\$ 5,045	\$ 13,125	\$ 6,964	\$ 10,447	\$ 10,245	\$ 4,936
82 Hand Muscle, Tendon, Fascia Operations															
N	70	104	43	636	18	-	4	47	66	95	50	165	32	30	1,360
Avg\$	\$ 3,524	\$ 3,484	\$ 8,528	\$ 4,352	\$ 8,917	\$ -	\$ 8,276	\$ 5,095	\$ 2,849	\$ 3,241	\$ 4,778	\$ 3,284	\$ 5,416	\$ 2,914	\$ 4,198
83 Other Muscle, Tendon, Fascia, Bursa Operations															
N	91	85	209	857	103	-	25	40	41	66	41	147	132	36	1,873
Avg\$	\$ 9,133	\$ 9,487	\$ 14,934	\$ 7,695	\$ 19,433	\$ -	\$ 8,699	\$ 14,575	\$ 12,998	\$ 8,243	\$ 15,549	\$ 6,968	\$ 8,412	\$ 6,006	\$ 9,729
84 Other Musculoskeletal Procedure															
N	5	-	9	86	37	-	3	7	12	17	8	7	6	1	198
Avg\$	\$ 5,494	\$ -	\$ 10,733	\$ 7,347	\$ 8,940	\$ -	\$ 10,613	\$ 6,629	\$ 6,967	\$ 11,242	\$ 6,790	\$ 5,372	\$ 8,632	\$ 12,338	\$ 8,059
85 Operations on the Breast															
N	77	233	61	1,308	16	-	17	68	14	33	65	95	343	98	2,428
Avg\$	\$ 8,937	\$ 5,715	\$ 6,446	\$ 7,627	\$ 22,670	\$ -	\$ 16,990	\$ 6,837	\$ 12,858	\$ 4,153	\$ 8,530	\$ 8,356	\$ 5,322	\$ 5,414	\$ 7,219
86 Skin & Subcutaneous Tissue Operations															
N	566	269	230	6,249	63	-	45	143	100	413	45	444	204	43	8,814
Avg\$	\$ 1,107	\$ 4,349	\$ 2,553	\$ 3,494	\$ 7,284	\$ -	\$ 9,468	\$ 4,849	\$ 7,659	\$ 1,509	\$ 6,648	\$ 4,138	\$ 4,160	\$ 5,928	\$ 3,455
Total															
N	4,015	7,712	5,604	47,383	2,516	-	1,785	4,016	3,171	6,388	3,345	10,405	6,057	2,254	104,651
Avg\$	\$ 4,747	\$ 4,174	\$ 4,338	\$ 6,234	\$ 8,119	\$ -	\$ 5,278	\$ 4,945	\$ 7,429	\$ 2,986	\$ 5,797	\$ 4,274	\$ 4,427	\$ 4,221	\$ 5,388

Outpatient procedures include all outpatient records with any procedure in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Procedure groups are created from the first two digits of the first procedure in the ICD-9-CM code range 00.0-86.99 on each record.

Column headers denote hospitals: key to the hospital abbreviations can be found in Appendix H.

Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Table O-10
2013 Vermont Hospital Expanded Outpatient Services, including VT Residents and Non-residents
Primary Cost Centers of Services Provided by Vermont Hospitals

Primary Cost Center	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
3390 Laboratory - Clinical	40,490	83,426	21,688	230,073	29,731	9,541	15,187	31,580	29,316	53,826	39,584	83,407	51,463	36,470	755,782
4100 Radiology - Diagnostic	9,048	10,311	6,896	55,957	7,530	1,496	2,640	4,776	4,405	12,426	7,442	15,030	13,534	4,221	155,712
3440 Mammography	5,686	9,402	2,320	28,595	2,458	-	1,412	3,228	3,096	5,187	4,049	9,217	6,980	3,187	84,817
Screening	4,483	8,106	1,774	24,661	2,010	-	1,132	2,817	2,376	4,423	3,546	8,188	5,582	2,503	71,601
Diagnostic	1,206	1,296	546	4,015	449	-	281	411	723	765	503	1,030	1,399	690	13,314
3630 Ultra Sound	2,607	5,842	2,036	11,650	1,647	421	504	1,512	996	4,617	2,375	5,260	5,929	2,045	47,441
5000 Physical Therapy	2,972	4,704	2,256	11,677	1,820	571	523	1,271	4,892	1,599	2,230	2,109	897	1,139	38,660
3420 Laboratory - Pathological	1,329	1,463	458	16,198	1,969	-	901	442	708	3,608	3,631	1,054	1,859	537	34,157
3240 Cytology	1,028	344	-	15,076	1,513	-	50	1,051	2,435	-	-	7,589	4,472	-	33,558
3430 Magnetic Resonance Imaging (MRI)	1,737	1,974	1,136	11,223	1,140	-	443	1,393	798	2,090	996	3,347	2,493	1,097	29,867
3230 CAT Scan	1,116	2,242	807	8,790	674	294	399	1,224	561	2,029	894	2,811	2,427	752	25,020
3280 EKG and EEG	1,190	1,572	1,361	6,412	1,191	403	86	1,338	486	484	398	5,982	1,731	173	22,807
EKG	1,157	1,436	1,146	4,125	1,144	403	86	814	415	484	398	5,109	1,216	173	18,106
EEG	33	136	215	2,289	47	-	-	524	71	-	-	876	515	-	4,706
3260 Echocardiography	342	1,375	519	5,004	266	-	152	913	290	576	591	2,305	1,965	428	14,726
4800 Intravenous Therapy	844	2,545	424	2,244	135	26	-	1,413	201	506	218	1,122	4,255	635	14,568
3190 Chemotherapy	527	350	304	8,846	43	-	85	416	-	-	-	688	2,185	402	13,846
3450 Nuclear Medicine - Diagnostic	453	849	224	3,543	216	-	-	325	340	767	480	1,348	1,075	249	9,869
PET Scan	-	95	-	104	-	-	-	-	-	-	-	225	308	-	732
All other	453	849	224	3,537	216	-	-	325	340	767	480	1,348	767	249	9,555
3140 Cardiology	693	560	65	4,339	22	-	31	30	425	9	26	1,769	1,081	-	9,050
3620 Stress Test	418	701	351	2,262	228	-	-	357	303	1,049	635	1,333	969	213	8,819
3650 Vascular Lab	607	777	326	3,901	208	101	106	457	179	-	-	1,097	745	291	8,795
3560 Pulmonary Function Testing	255	490	105	4,058	160	-	63	505	342	252	322	855	492	230	8,129

Table O-10
2013 Vermont Hospital Expanded Outpatient Services, including VT Residents and Non-residents
Primary Cost Centers of Services Provided by Vermont Hospitals

Primary Cost Center	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
3480 Oncology	1,629	-	-	1	48	-	-	766	-	-	-	5,544	-	-	7,988
5100 Occupational Therapy	952	780	313	3,513	350	44	234	184	4	194	75	215	187	132	7,177
3370 Holter Monitor	231	475	-	2,309	70	37	1	494	627	271	9	404	-	110	5,038
5700 Renal Dialysis	-	-	-	3,436	-	-	-	-	-	-	-	-	245	-	3,681
4200 Radiology - Therapeutic	-	381	-	1,804	-	-	-	-	-	-	-	248	137	-	2,570
All Other Cost Centers	1,596	20,124	2,706	63,344	12,378	2	10	465	3,638	8,413	121	16,724	16,992	924	147,437
Total (not including subcategories)	75,750	150,687	44,295	504,255	63,797	12,936	22,827	54,140	54,042	97,903	64,076	169,458	122,113	53,235	1,489,514

Only Expanded Outpatient Records are included in this table.

Outpatient visits with an ICD-9-CM procedure code in range 00-86.99 or an associated ED or Observation Bed revenue record are excluded.

The Primary Cost Centers reported here are just a partial list of all possible cost centers. See Appendix G for all cost centers and associated revenue codes.

Visits with multiple revenue codes for services provided within a Primary Cost Center are counted only once in that cost center per visit. Visits may have more than one Primary Cost Center and can represent more than one unit of service. Therefore, the totals shown in this table do not add up to the total number of visits to or services provided by the hospitals.

Diagnostic Mammography = revenue code 401 and Screening Mammography = revenue code 403

EKG/ECG = revenue code 730, 732 or 739 and EEG = revenue code 740 or 749

Pet Scan = revenue code 404

Column headers denote hospitals: key to the hospital abbreviations can be found in Appendix H.

Table O-11
2013 Vermont Hospital Outpatient Data, including VT Residents and Non-residents
Observation Bed Records and Average Charges by Vermont Hospital and Setting

Vermont Hospital	Inpatient Obs Bed Records		Outpatient Obs Bed Records								Total Obs Bed Records	
	N	Avg\$	with ED revenue code only		with ED revenue code and Proc in Range		with Proc in Range only		with no ED revenue code or Proc in Range		N	Avg\$
			N	Avg\$	N	Avg\$	N	Avg\$	N	Avg\$		
Brattleboro Memorial Hospital	105	\$ 17,397	424	\$ 10,729	52	\$ 15,513	79	\$ 10,091	201	\$ 3,369	861	\$ 10,078
Central Vermont Medical Center	291	\$ 16,948	988	\$ 6,988	66	\$ 11,242	33	\$ 9,849	14	\$ 1,970	1,392	\$ 9,289
Copley Hospital	47	\$ 8,489	401	\$ 4,101	46	\$ 13,241	81	\$ 26,462	399	\$ 722	974	\$ 5,223
Fletcher Allen Health Care	336	\$ 29,809	1,089	\$ 8,787	267	\$ 16,951	257	\$ 24,142	212	\$ 7,687	2,161	\$ 14,782
Gifford Medical Center	70	\$ 17,383	318	\$ 10,584	23	\$ 27,537	69	\$ 21,982	27	\$ 7,570	507	\$ 13,683
Grace Cottage Hospital	3	\$ 10,133	49	\$ 5,728	-	\$ -	-	\$ -	9	\$ 3,540	61	\$ 5,622
Mt. Ascutney Hospital and Health Center	4	\$ 11,696	108	\$ 7,267	9	\$ 12,471	10	\$ 24,646	10	\$ 5,954	141	\$ 8,864
North Country Hospital	74	\$ 19,899	434	\$ 7,955	45	\$ 18,134	78	\$ 19,228	45	\$ 4,270	676	\$ 10,995
Northeastern Vermont Regional Hospital	68	\$ 17,417	121	\$ 5,558	30	\$ 17,579	61	\$ 24,963	33	\$ 3,152	313	\$ 12,815
Northwestern Medical Center	100	\$ 16,043	488	\$ 6,177	81	\$ 10,659	145	\$ 12,785	74	\$ 1,327	888	\$ 8,380
Porter Medical Center	103	\$ 18,603	241	\$ 6,543	75	\$ 19,314	49	\$ 24,524	28	\$ 2,515	496	\$ 12,527
Rutland Regional Medical Center	492	\$ 23,975	1,145	\$ 6,603	77	\$ 13,759	65	\$ 15,816	128	\$ 3,743	1,907	\$ 11,496
Southwestern Vermont Medical Center	97	\$ 13,954	637	\$ 6,866	51	\$ 11,454	19	\$ 13,639	40	\$ 2,620	844	\$ 7,909
Springfield Hospital	12	\$ 14,365	429	\$ 6,723	77	\$ 14,421	52	\$ 16,159	15	\$ 3,226	585	\$ 8,642
Total for 2013	1,802	\$ 21,059	6,872	\$ 7,368	899	\$ 15,393	998	\$ 19,478	1,235	\$ 3,251	11,806	\$ 10,665
Total for 2012	2,205	\$ 18,384	7,547	\$ 6,606	953	\$ 13,651	1,440	\$ 14,734	855	\$ 3,520	13,000	\$ 9,819
Total for 2011	2,061	\$ 17,852	8,037	\$ 6,298	964	\$ 12,779	1,524	\$ 14,084	1,166	\$ 3,199	13,752	\$ 9,084

Observation Bed records are defined as having an associated revenue code of 760 or 762.

Emergency Department records are defined as having an associated revenue code between 450 and 459.

Numbers of inpatient discharges exclude newborns (MDC 15), but average charges include newborns.

Procedure in Range records include all outpatient records with any procedure in the ICD-9-CM procedure range of 00 - 86.99.

Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Records with missing charges are included in the number of procedures reported but excluded from the average charges calculation.

Table O-12
2013 Vermont Hospital Outpatient and Expanded Outpatient Data, including VT Residents and Non-residents
In-migration by Vermont Hospital

Outpatient Procedures

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-residents</u>		<u>Total</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	3,346	\$15,866,339	669	\$3,159,162	4,015	\$19,025,501
Central Vermont Medical Center	7,672	\$31,915,877	40	\$275,870	7,712	\$32,191,747
Copley Hospital	5,536	\$23,143,538	68	\$562,019	5,604	\$23,705,557
Fletcher Allen Health Care	41,196	\$244,505,447	6,187	\$50,547,982	47,383	\$295,053,430
Gifford Medical Center	2,440	\$19,698,393	76	\$656,373	2,516	\$20,354,766
Grace Cottage Hospital	-	\$0	-		-	\$0
Mt. Ascutney Hospital and Health Center	1,067	\$5,808,180	718	\$3,596,738	1,785	\$9,404,918
North Country Hospital	3,995	\$18,208,928	21	\$88,270	4,016	\$18,297,198
Northeastern Vermont Regional Hospital	2,815	\$21,417,522	356	\$2,139,340	3,171	\$23,556,862
Northwestern Medical Center	6,327	\$18,814,615	61	\$262,595	6,388	\$19,077,209
Porter Medical Center	3,112	\$17,632,398	233	\$1,759,787	3,345	\$19,392,185
Rutland Regional Medical Center	9,813	\$41,361,739	592	\$2,586,400	10,405	\$43,948,139
Southwestern Vermont Medical Center	4,660	\$20,258,185	1,397	\$6,555,565	6,057	\$26,813,749
Springfield Hospital	1,957	\$8,145,682	297	\$1,309,172	2,254	\$9,454,854
Total for 2013	93,936	\$486,776,842	10,715	\$73,499,273	104,651	\$560,276,115
Total for 2012	92,537	\$453,755,623	10,296	\$64,947,708	102,833	\$518,703,330
Total for 2011	92,068	\$427,448,786	10,334	\$62,155,175	102,402	\$489,603,961
Total for 2010	91,655	\$403,387,969	10,153	\$56,221,922	101,808	\$459,609,892

Table O-12
2013 Vermont Hospital Outpatient and Expanded Outpatient Data, including VT Residents and Non-residents
In-migration by Vermont Hospital

Expanded Outpatient Procedures

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-residents</u>		<u>Total</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	60,076	\$38,950,817	10,612	\$6,453,998	70,688	\$45,404,815
Central Vermont Medical Center	143,646	\$88,506,598	1,464	\$672,790	145,110	\$89,179,388
Copley Hospital	50,716	\$20,252,340	649	\$288,618	51,365	\$20,540,958
Fletcher Allen Health Care	446,803	\$440,398,102	30,628	\$49,451,876	477,431	\$489,849,978
Gifford Medical Center	109,407	\$30,552,225	3,298	\$702,455	112,705	\$31,254,680
Grace Cottage Hospital	11,658	\$5,455,230	401	\$180,734	12,059	\$5,635,964
Mt. Ascutney Hospital and Health Center	16,245	\$10,558,085	5,182	\$4,130,721	21,427	\$14,688,807
North Country Hospital	51,583	\$40,782,058	485	\$324,536	52,068	\$41,106,595
Northeastern Vermont Regional Hospital	54,681	\$28,074,077	1,876	\$1,037,108	56,557	\$29,111,185
Northwestern Medical Center	95,507	\$32,981,631	832	\$302,879	96,339	\$33,284,510
Porter Medical Center	56,260	\$26,122,428	3,113	\$1,618,395	59,373	\$27,740,823
Rutland Regional Medical Center	153,802	\$105,964,669	8,950	\$5,565,032	162,752	\$111,529,701
Southwestern Vermont Medical Center	110,696	\$65,102,934	26,077	\$21,128,977	136,773	\$86,231,910
Springfield Hospital	46,683	\$22,511,542	6,576	\$3,656,043	53,259	\$26,167,585
Total for 2013	1,407,763	\$956,212,737	100,143	\$95,514,163	1,507,906	\$1,051,726,900
Total for 2012	1,390,532	\$883,670,902	94,251	\$85,777,378	1,484,783	\$969,448,281
Total for 2011	1,378,829	\$821,614,254	91,096	\$74,894,930	1,469,925	\$896,509,185
Total for 2010	1,419,401	\$791,965,046	95,475	\$74,765,366	1,514,876	\$866,730,412

Table O-12
2013 Vermont Hospital Outpatient and Expanded Outpatient Data, including VT Residents and Non-residents
In-migration by Vermont Hospital

All Outpatient Procedures

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-residents</u>		<u>Total</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	63,422	\$54,817,156	11,281	\$9,613,160	74,703	\$64,430,315
Central Vermont Medical Center	151,318	\$120,422,475	1,504	\$948,661	152,822	\$121,371,135
Copley Hospital	56,252	\$43,395,878	717	\$850,638	56,969	\$44,246,516
Fletcher Allen Health Care	487,999	\$684,903,549	36,815	\$99,999,859	524,814	\$784,903,408
Gifford Medical Center	111,847	\$50,250,618	3,374	\$1,358,828	115,221	\$51,609,447
Grace Cottage Hospital	11,658	\$5,455,230	401	\$180,734	12,059	\$5,635,964
Mt. Ascutney Hospital and Health Center	17,312	\$16,366,266	5,900	\$7,727,459	23,212	\$24,093,725
North Country Hospital	55,578	\$58,990,986	506	\$412,806	56,084	\$59,403,792
Northeastern Vermont Regional Hospital	57,496	\$49,491,599	2,232	\$3,176,448	59,728	\$52,668,047
Northwestern Medical Center	101,834	\$51,796,246	893	\$565,473	102,727	\$52,361,719
Porter Medical Center	59,372	\$43,754,825	3,346	\$3,378,183	62,718	\$47,133,008
Rutland Regional Medical Center	163,615	\$147,326,408	9,542	\$8,151,432	173,157	\$155,477,840
Southwestern Vermont Medical Center	115,356	\$85,361,119	27,474	\$27,684,541	142,830	\$113,045,660
Springfield Hospital	48,640	\$30,657,224	6,873	\$4,965,215	55,513	\$35,622,439
Total for 2013	1,501,699	\$1,442,989,579	110,858	\$169,013,436	1,612,557	\$1,612,003,015
Total for 2012	1,483,069	\$1,337,426,525	104,547	\$150,725,086	1,587,616	\$1,488,151,611
Total for 2011	1,470,897	\$1,249,063,041	101,430	\$137,050,105	1,572,327	\$1,386,113,146
Total for 2010	1,511,056	\$1,195,353,015	105,628	\$130,987,288	1,616,684	\$1,326,340,304

Outpatient procedures include all outpatient records with a procedure in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Expanded Outpatient procedure records include outpatient records that have no procedure in the ICD-9-CM code range 00.0-86.99, and no associated ED or ObsBed revenue record.

Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Comparisons across Hospital Settings

Table C-1
2013 Vermont Hospital Data, including VT Residents and Non-residents
Summary of Vermont Hospitals by Setting

Vermont Hospital	Inpatient Discharges		Outpatient Procedures		Emergency Department		Expanded Outpatient		Total	
	N	Col%	N	Col%	N	Col%	N	Col%	N	Col%
Brattleboro Memorial Hospital	1,593	3.5%	4,015	3.8%	11,822	4.9%	70,688	4.7%	88,118	4.6%
Central Vermont Medical Center	3,349	7.4%	7,712	7.4%	25,362	10.5%	145,110	9.6%	181,533	9.6%
Copley Hospital	1,413	3.1%	5,604	5.4%	13,040	5.4%	51,365	3.4%	71,422	3.8%
Fletcher Allen Health Care	19,098	42.0%	47,383	45.3%	46,776	19.3%	477,431	31.7%	590,688	31.1%
Gifford Medical Center	1,068	2.3%	2,516	2.4%	6,311	2.6%	112,705	7.5%	122,600	6.5%
Grace Cottage Hospital	166	0.4%	0	0.0%	2,792	1.2%	12,059	0.8%	15,017	0.8%
Mt. Ascutney Hospital and Health Center	360	0.8%	1,785	1.7%	5,261	2.2%	21,427	1.4%	28,833	1.5%
North Country Hospital	1,304	2.9%	4,016	3.8%	14,601	6.0%	52,068	3.5%	71,989	3.8%
Northeastern Vermont Regional Hospital	1,295	2.8%	3,171	3.0%	13,572	5.6%	56,557	3.8%	74,595	3.9%
Northwestern Medical Center	2,289	5.0%	6,388	6.1%	24,605	10.1%	96,339	6.4%	129,621	6.8%
Porter Medical Center	1,581	3.5%	3,345	3.2%	13,783	5.7%	59,373	3.9%	78,082	4.1%
Rutland Regional Medical Center	6,201	13.6%	10,405	9.9%	28,729	11.8%	162,752	10.8%	208,087	10.9%
Southwestern Vermont Medical Center	3,904	8.6%	6,057	5.8%	19,771	8.2%	136,773	9.1%	166,505	8.8%
Springfield Hospital	1,865	4.1%	2,254	2.2%	16,141	6.7%	53,259	3.5%	73,519	3.9%
Total	45,486	100.0%	104,651	100.0%	242,566	100.0%	1,507,906	100.0%	1,900,609	100.0%

Numbers of inpatient discharges exclude newborns (MDC 15) and 1 record with missing or invalid diagnosis codes.

Outpatient procedures include all outpatient records with procedures in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

ED visits include all outpatient visits that originated in the ED and did not result in an inpatient stay, and exclude 1 visit with missing or invalid diagnosis codes.

Expanded Outpatient records include all outpatient records with no ICD-9-CM procedure code in range 00-86.99, and no associated ED or ObsBed revenue record.

Table C-2
2013 Vermont Hospital Data, including VT Residents and Non-residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Hospital Setting
Summary of Discharges and Average Charges

CCS Diagnosis Groups	Inpatient Discharges		Outpatient Procedures		Emergency Department		Expanded Outpatient		Total	
	N	Avg\$	N	Avg\$	N	Avg\$	N	Avg\$	N	Avg\$
Infectious and parasitic diseases	1,923	\$30,134	466	\$3,627	3,778	\$1,073	35,309	\$320	41,476	\$1,950
Neoplasms	1,995	\$36,005	14,362	\$4,971	358	\$4,854	84,286	\$2,830	101,001	\$3,816
Endocrine, nutritional, metabolic, immunity	1,692	\$21,607	2,045	\$3,095	3,340	\$2,209	179,120	\$381	186,197	\$639
Diseases of the blood and blood-forming organs	449	\$19,453	743	\$3,823	427	\$3,810	29,600	\$752	31,219	\$1,140
Mental disorders	2,877	\$18,705	291	\$2,861	10,806	\$1,633	34,583	\$431	48,557	\$1,897
Diseases of the nervous system and sense organs	1,104	\$22,940	11,744	\$5,253	19,615	\$1,558	62,500	\$1,142	94,963	\$2,029
Diseases of the circulatory system	7,322	\$29,034	2,835	\$21,714	15,989	\$3,396	201,553	\$493	227,699	\$1,901
Diseases of the respiratory system	5,310	\$18,956	3,807	\$4,176	29,435	\$1,344	73,688	\$638	112,240	\$1,865
Diseases of the digestive system	4,963	\$20,934	12,805	\$5,708	18,109	\$2,151	42,013	\$948	77,890	\$3,352
Diseases of the genitourinary system	1,928	\$18,060	7,413	\$6,671	12,970	\$2,246	128,350	\$742	150,661	\$1,399
Pregnancy, childbirth, and the puerperium	5,606	\$10,117	3,694	\$1,975	2,442	\$1,881	42,980	\$419	54,722	\$1,716
Diseases of the skin and subcutaneous tissue	966	\$15,831	3,592	\$1,702	8,821	\$892	28,590	\$418	41,969	\$1,023
Musculoskeletal system and connective tissue	3,430	\$40,498	15,856	\$4,881	17,640	\$1,302	194,129	\$922	231,055	\$1,872
Congenital anomalies	143	\$39,415	385	\$9,136	55	\$3,581	3,415	\$1,252	3,998	\$3,476
Conditions originating in the perinatal period	3	\$7,712	135	\$1,019	259	\$958	1,788	\$165	2,185	\$5,993
Injury and poisoning	4,352	\$30,891	5,819	\$10,707	70,925	\$1,427	54,440	\$643	135,536	\$2,535
Symptoms, signs, and ill-defined conditions	1,290	\$25,760	17,187	\$3,209	25,690	\$2,150	282,465	\$418	326,632	\$815
Residual codes, unclassified, all Ecodes	133	\$17,171	1,472	\$4,380	1,907	\$2,260	29,097	\$1,047	32,609	\$1,358
Total Discharges and Average Charges	45,486	\$22,198	104,651	\$5,388	242,566	\$1,738	1,507,906	\$734	1,900,609	\$1,732
Total Charges	\$1,137,045,311		\$560,276,115		\$421,585,871		\$1,051,726,900		\$3,170,634,197	

Numbers of inpatient discharges exclude newborns (MDC 15), but average charges include newborns.

Outpatient procedures include all outpatient records with a procedure in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Emergency department visits include all outpatient visits that originated in the ED and did not result in an inpatient stay.

Expanded Outpatient records include all outpatient records with no ICD-9-CM procedure code in range 00-86.99, and no associated ED or Observation Bed revenue record.

Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Records with missing charges are included in the number of procedures reported but excluded from the average charges.

Total charges of \$0.00 or less are considered missing for outpatient records and total charges of \$100 or less are considered missing for inpatient records.

Table C-3
2013 Vermont Hospital Data, including VT Residents and Non-residents
Clinical Classifications Software (CCS) High Level Procedure Groups by Hospital Setting
Summary of Discharges and Average Charges

CCS Procedure Groups	Inpatient Discharges		Outpatient Procedures		Emergency Department		Expanded Outpatient		Total	
	N	Avg\$	N	Avg\$	N	Avg\$	N	Avg\$	N	Avg\$
Operations on the nervous system	955	\$45,659	7,320	\$4,355	876	\$2,009	-	\$0	9,151	\$8,604
Operations on the endocrine system	52	\$32,573	623	\$6,444	-	\$0	-	\$0	675	\$8,463
Operations on the eye	15	\$57,208	7,902	\$5,414	296	\$2,122	-	\$0	8,213	\$5,396
Operations on the ear	15	\$24,992	1,612	\$5,005	70	\$2,309	-	\$0	1,697	\$5,070
Operations on the nose, mouth, and pharynx	181	\$25,332	3,859	\$5,534	760	\$1,555	-	\$0	4,800	\$5,885
Operations on the respiratory system	929	\$43,142	2,619	\$2,392	107	\$6,937	-	\$0	3,655	\$13,031
Operations on the cardiovascular system	3,572	\$53,706	3,241	\$21,112	177	\$15,219	-	\$0	6,990	\$37,840
Operations on the hemic and lymphatic system	138	\$70,654	560	\$7,161	26	\$6,251	-	\$0	724	\$19,247
Operations on the digestive system	3,663	\$34,145	34,438	\$4,160	954	\$12,645	-	\$0	39,055	\$7,192
Operations on the urinary system	830	\$29,196	4,126	\$5,232	502	\$5,603	-	\$0	5,458	\$8,920
Operations on the male genital organs	191	\$7,300	1,097	\$6,108	31	\$7,140	-	\$0	1,319	\$6,892
Operations on the female genital organs	380	\$23,992	3,568	\$8,773	147	\$9,422	-	\$0	4,095	\$10,229
Obstetrical procedures	5,404	\$10,134	3,099	\$791	76	\$4,963	-	\$0	8,579	\$6,931
Operations on the musculoskeletal system	4,848	\$43,314	16,995	\$7,148	1,221	\$4,572	-	\$0	23,064	\$14,640
Operations on the integumentary system	810	\$30,289	11,203	\$4,112	6,831	\$1,139	-	\$0	18,844	\$4,164
Miscellaneous diagnostic and therapeutic procs	233	\$45,280	2,389	\$1,296	20	\$13,210	-	\$0	2,642	\$5,393
Total Discharges and Average Charges	22,216	\$31,879	104,651	\$5,388	12,094	\$3,127	-	\$0	138,961	\$9,782
Total charges	\$775,361,165		\$560,276,115		\$37,812,632		\$0		\$1,373,449,912	

CCS Procedure Groups are based on the first ICD-9-CM procedure in range 00.0-86.99.

Numbers of inpatient discharges exclude newborns (MDC 15), but average and total charges include newborns.

Outpatient procedures include all outpatient records with a procedure in the ICD-9-CM code range 00.0-86.99 that did not originate in the ED.

Emergency department visits include all outpatient visits which originated in the ED and did not result in an inpatient stay.

Expanded Outpatient records include all outpatient records with no ICD-9-CM procedure code in range 00-86.99, and no associated ED or Observation Bed revenue record.

Charge data should be used with caution. See discussion in the User's Guide to Vermont Hospitals Report for details.

Records with missing charges are included in the number of procedures reported but excluded from the average charges.

Total charges of \$0.00 or less are considered missing for outpatient records and total charges of \$100 or less are considered missing for inpatient records.

Appendices

Appendix A

Additional Definitions

Average length of stay: Average length of stay is the total patient days divided by the number of discharges in a selected category. It is a rough measure of the amount of care provided during a typical hospital stay.

Charges: Charges in this report are defined as hospital "facility" charges that are calculated by subtracting professional fees and patient convenience items charges from the total charge. However, facility charge data are not always reported according to the strict definition and some hospitals may have included salaried and contracted physician fees in their facility charges.

Comparative analyses of hospital charges must take into account the limitations of charge data. The payments that hospitals receive for an episode of care rarely equal what is charged. All patients, or insurance plans, do not pay the same amount for similar treatments, supplies and services, even though they may be billed the same amount. Private insurers generally negotiate separately with hospitals to set reimbursement rates. The federal and state governments set Medicare and Medicaid reimbursement rates independently. Variations in charges and reimbursement may be designed so services are cross-subsidized.

Charges for hospital admissions with the same principal procedure cannot be expected to be identical, not only because hospitals differ in their assignment of charges, but because patients differ in the severity of their conditions. In general, charges for inpatient procedures tend to be higher than comparable procedures performed in an outpatient setting. In many cases, those treated in an inpatient setting have complicating conditions or other health risks that add to the cost of their care and make them poor candidates for outpatient services.

Throughout this report, to avoid counting hospitalizations for delivery twice, the maternal record is included, but the newborn record is not. However, charges on the newborn record are included in summary calculations of charges.

Clinical Classifications Software (CCS) Grouper: CCS developed at the Agency for Healthcare Research and Quality (AHRQ) and available at the website: <http://www.hcup-us.ahrq.gov/toolsoftware/ccs/ccs.jsp>. CCS collapses ICD-9-CM principal diagnosis and procedure codes into meaningful categories. The single-level diagnosis CCS aggregates illnesses and conditions into more than 260 categories. Similarly, the single-level procedure CCS aggregates procedures into 231 categories, most representing single types of procedures. High level CCS groups further collapse single-level CCS into broad groups based on body systems or condition categories.

Clinical Classifications Software (CCS) for CPT and HCPCS Procedures: CCS developed at the Agency for Healthcare Research and Quality (AHRQ) and available at the website: http://www.hcup-us.ahrq.gov/toolsoftware/ccs_svcsproc/ccssvcproc.jsp. This software can be used to collapse Current Procedural Terminology (CPT) codes and Healthcare Common Procedure Coding System (HCPCS) codes into the same categories as the CCS categories for ICD-9-CM procedures. Additional categories are added to effectively represent codes specific to CPT/HCPCS procedures and services.

Diagnosis: The condition, determined after study, which occasioned the patient's admission to the hospital. The accuracy or reliability of the diagnosis depends on several factors including the physician's understanding of the problem and the recorder's ability to fit this to established coding conventions. For those cases with multiple problems, the primary diagnosis may not be the reason for surgery or cause of death.

Discharge: The equivalent of a hospital admission, except that for a specified time period, only those cases discharged are counted. A count of discharges measures how often care is sought. The same individual will be counted as more than one discharge if hospitalized more than once during the time studied. Note that discharges do not necessarily reflect disease incidence or prevalence, just the fact of utilization of the hospital resource. Maternal records are included, but newborn records are excluded from the inpatient tables, to avoid duplicate counts. However, newborn records are retained in the Vermont Uniform Hospital Discharge Dataset.

Emergency Department (ED) Dataset: Consists of all records with an associated revenue code of 45x (Emergency Room).

Expanded Outpatient Dataset: Consists of all outpatient records that do not have a procedure in the ICD-9-CM code range of 00.0-86.00 or an associated ED or Observation Bed revenue code. Dataset includes all other diagnostic and therapeutic services such as laboratory and radiological services.

Inpatient Dataset: Consists of discharge records that were billed as an inpatient stay. Maternal records are included, but newborns are excluded, to avoid duplicate counts. However, newborn records are retained in the Vermont Uniform Hospital Discharge Dataset and charges on the newborn record are included in summary calculations of charges.

Observation Bed: Outpatient records with an associated revenue code of 760 or 762. A status recognized by third-party payers - e.g. Medicare, health insurance companies and others, in which a patient is admitted to the hospital for a period of 23 hrs and 59 minutes or more, depending on the 3rd party, with either a specific 'rule/out' diagnostic consideration—e.g., appendicitis, angina, MI, or pneumonia; observation may also refer to a known patient status, in which a previously diagnosed condition is managed under observation - e.g., dehydration, anemia, etc; a popular term for a bed occupied by a person in an outpatient observation status. (McGraw-Hill Concise Dictionary of Modern Medicine. © 2002 by The McGraw-Hill Companies, Inc.)

Outpatient Procedures Dataset: Consists of outpatient records with a procedure in the ICD-9-CM code range of 00.0-86.99 that was performed in an operating room, ambulatory surgery area, or other outpatient setting.

Patient day: Defined as a stay in a hospital for all or part of a day. Patient days are one way of measuring the amount of care provided.

Population-based Rate: The rate of a population's use of hospital services. Because data for Vermont residents using hospitals in bordering states are not available at the time of production of this report, it is not possible to calculate accurate population-based rates for Vermont residents for this report.

Primary Cost Center: The Centers for Medicare and Medicaid Services (CMS) developed a mapping tool to map revenue charges on a claim to a cost center. The crosswalk is available at the website: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Annual-Policy-Files-Items/CMS1253695.html?DLPage=1&DLSort=0&DLSortDir=ascending>.

Principal Payer: The anticipated principal source of payment of the patient's hospital bill recorded by the hospital on each discharge record.

APPENDIX B
Major Diagnostic Categories (MDCs)

- 1 Diseases and disorders of the nervous system
- 2 Diseases and disorders of the eye
- 3 Diseases and disorders of the ear, nose, mouth and throat
- 4 Diseases and disorders of the respiratory system
- 5 Diseases and disorders of the circulatory system
- 6 Diseases and disorders of the digestive system
- 7 Diseases and disorders of the hepatobiliary system (liver) and pancreas
- 8 Diseases and disorders of the musculoskeletal system and connective tissue
- 9 Diseases and disorders of the skin, subcutaneous tissue and breast
- 10 Endocrine, nutritional and metabolic diseases and disorders
- 11 Diseases and disorders of the kidney and urinary tract
- 12 Diseases and disorders of the male reproductive system
- 13 Diseases and disorders of the female reproductive system
- 14 Pregnancy, childbirth, and the puerperium
- 15 Newborns and other neonates with conditions originating in the perinatal period
- 16 Diseases and disorders of the blood and blood-forming organs and immunological disorders
- 17 Myeloproliferative diseases and disorders and poorly differentiated neoplasms
- 18 Infectious and parasitic diseases
- 19 Mental diseases and disorders
- 20 Alcohol/drug use and alcohol/drug-induced organic mental disorders
- 21 Injuries, poisonings and toxic effects of drugs
- 22 Burns
- 23 Factors influencing health status and other contacts with health services
- 24 Multiple significant trauma
- 25 Human immunodeficiency virus infections

APPENDIX C
Major Diagnostic Categories (MDCs) and Diagnosis Related Groups (MSDRGs)
M= Medical S= Surgical (M)CC=(major) complications or co-morbidity
Effective 10/1/2007 - 9/30/2014

Pre-MDC

1	S	Heart transplant or implant of heart assist system w MCC.
2	S	Heart transplant or implant of heart assist system w/o MCC.
3	S	ECMO or trach w MV 96+ hrs or PDX exc face, mouth & neck w maj O.R
4	S	Trach w MV 96+ hrs or PDX exc face, mouth & neck w/o maj O.R
5	S	Liver transplant w MCC or intestinal transplant
6	S	Liver transplant w/o MCC
7	S	Lung transplant
8	S	Simultaneous pancreas/kidney transplant
9	S	Bone marrow transplant
10	S	Pancreas transplant
11	S	Tracheostomy for face,mouth & neck diagnoses w MCC
12	S	Tracheostomy for face,mouth & neck diagnoses w CC
13	S	Tracheostomy for face,mouth & neck diagnoses w/o CC/MCC
14	S	Allogeneic Bone Marrow Transplnt
15	S	Autologous Bone Marrow Transplant
16	S	Autologous Bone Marrow Transplant w CC/MCC
17	S	Autologous Bone Marrow Transplant w/o CC/MCC

DRGs classified as Pre-MDC are not assigned a specific MDC and may be associated with multiple MDCs.

MDC 1: Diseases and Disorders of the Nervous System

20	S	Intracranial vascular procedures w PDX hemorrhage w MCC
21	S	Intracranial vascular procedures w PDX hemorrhage w CC
22	S	Intracranial vascular procedures w PDX hemorrhage w/o CC/MCC
23	S	Cranio w major dev impl/acute complex CNS PDX w MCC or chemo implant
24	S	Cranio w major dev impl/acute complex CNS PDX w/o MCC
25	S	Craniotomy & endovascular intracranial procedures w MCC
26	S	Craniotomy & endovascular intracranial procedures w CC
27	S	Craniotomy & endovascular intracranial procedures w/o CC/ MCC
28	S	Spinal procedures w MCC
29	S	Spinal procedures w CC or spinal neurostimulators

30	S	Spinal procedures w/o CC/MCC
31	S	Ventricular shunt procedures w MCC
32	S	Ventricular shunt procedures w CC
33	S	Ventricular shunt procedures w/o CC/ MCC
34	S	Carotid artery stent procedure w MCC
35	S	Carotid artery stent procedure w CC ..
36	S	Carotid artery stent procedure w/o CC/MCC
37	S	Extracranial procedures w MCC
38	S	Extracranial procedures w CC
39	S	Extracranial procedures w/o CC/MCC
40	S	Periph/cranial nerve & other nerv syst proc w MCC
41	S	Periph/cranial nerve & other nerv syst proc w CC or periph neurostim
42	S	Periph/cranial nerve & other nerv syst proc w/o CC/MCC
52	M	Spinal disorders & injuries w CC/MCC
53	M	Spinal disorders & injuries w/o CC/ MCC
54	M	Nervous system neoplasms w MCC
55	M	Nervous system neoplasms w/o MCC
56	M	Degenerative nervous system disorders w MCC
57	M	Degenerative nervous system disorders w/o MCC
58	M	Multiple sclerosis & cerebellar ataxia w MCC
59	M	Multiple sclerosis & cerebellar ataxia w CC
60	M	Multiple sclerosis & cerebellar ataxia w/o CC/MCC
61	M	Acute ischemic stroke w use of thrombolytic agent w MCC
62	M	Acute ischemic stroke w use of thrombolytic agent w CC
63	M	Acute ischemic stroke w use of thrombolytic agent w/o CC/MCC
64	M	Intracranial hemorrhage or cerebral infarction w MCC
65	M	Intracranial hemorrhage or cerebral infarction w CC
66	M	Intracranial hemorrhage or cerebral infarction w/o CC/MCC
67	M	Nonspecific cva & precerebral occlusion w/o infarct w MCC
68	M	Nonspecific cva & precerebral occlusion w/o infarct w/o MCC
69	M	Transient ischemia
70	M	Nonspecific cerebrovascular disorders w MCC
71	M	Nonspecific cerebrovascular disorders w CC
72	M	Nonspecific cerebrovascular disorders w/o CC/MCC
73	M	Cranial & peripheral nerve disorders w MCC
74	M	Cranial & peripheral nerve disorders w/o MCC

- 75 M Viral meningitis w CC/MCC
- 76 M Viral meningitis w/o CC/MCC
- 77 M Hypertensive encephalopathy w MCC
- 78 M Hypertensive encephalopathy w CC
- 79 M Hypertensive encephalopathy w/o CC/ MCC
- 80 M Nontraumatic stupor & coma w MCC
- 81 M Nontraumatic stupor & coma w/o MCC
- 82 M Traumatic stupor & coma, coma \geq 1 hr w MCC
- 83 M Traumatic stupor & coma, coma \geq 1 hr w CC
- 84 M Traumatic stupor & coma, coma \geq 1 hr w/o CC/MCC
- 85 M Traumatic stupor & coma, coma $<$ 1 hr w MCC
- 86 M Traumatic stupor & coma, coma $<$ 1 hr w CC
- 87 M Traumatic stupor & coma, coma $<$ 1 hr w/o CC/MCC
- 88 M Concussion w MCC
- 89 M Concussion w CC
- 90 M Concussion w/o CC/MCC
- 91 M Other disorders of nervous system w MCC
- 92 M Other disorders of nervous system w CC
- 93 M Other disorders of nervous system w/o CC/MCC
- 94 M Bacterial & tuberculous infections of nervous system w MCC
- 95 M Bacterial & tuberculous infections of nervous system w CC
- 96 M Bacterial & tuberculous infections of nervous system w/o CC/MCC
- 97 M Non-bacterial infect of nervous sys exc viral meningitis w MCC
- 98 M Non-bacterial infect of nervous sys exc viral meningitis w CC
- 99 M Non-bacterial infect of nervous sys exc viral meningitis w/o CC/MCC
- 100 M Seizures w MCC
- 101 M Seizures w/o MCC
- 102 M Headaches w MCC
- 103 M Headaches w/o MCC

MDC 2: Diseases and Disorders of the Eye

- 113 S Orbital procedures w CC/MCC
- 114 S Orbital procedures w/o CC/MCC
- 115 S Extraocular procedures except orbit
- 116 S Intraocular procedures w CC/MCC
- 117 S Intraocular procedures w/o CC/MCC
- 121 M Acute major eye infections w CC/MCC
- 122 M Acute major eye infections w/o CC/ MCC
- 123 M Neurological eye disorders
- 124 M Other disorders of the eye w MCC
- 125 M Other disorders of the eye w/o MCC

MDC 3: Diseases and Disorders of the Ear, Nose, Mouth, and Throat

- 129 S Major head & neck procedures w CC/ MCC or major device
- 130 S Major head & neck procedures w/o CC/MCC
- 131 S Cranial/facial procedures w CC/MCC
- 132 S Cranial/facial procedures w/o CC/ MCC
- 133 S Other ear, nose, mouth & throat O.R. procedures w CC/MCC
- 134 S Other ear, nose, mouth & throat O.R. procedures w/o CC/MCC
- 135 S Sinus & mastoid procedures w CC/ MCC
- 136 S Sinus & mastoid procedures w/o CC/ MCC
- 137 S Mouth procedures w CC/MCC
- 138 S Mouth procedures w/o CC/MCC
- 139 S Salivary gland procedures
- 146 M Ear, nose, mouth & throat malignancy w MCC
- 147 M Ear, nose, mouth & throat malignancy w CC
- 148 M Ear, nose, mouth & throat malignancy w/o CC/MCC
- 149 M Dysequilibrium
- 150 M Epistaxis w MCC
- 151 M Epistaxis w/o MCC
- 152 M Otitis media & URI w MCC
- 153 M Otitis media & URI w/o MCC
- 154 M Nasal trauma & deformity w MCC
- 155 M Nasal trauma & deformity w CC
- 156 M Nasal trauma & deformity w/o CC/ MCC
- 157 M Dental & Oral Diseases w MCC
- 158 M Dental & Oral Diseases w CC
- 159 M Dental & Oral Diseases w/o CC/MCC

MDC 4: Diseases and Disorders of the Respiratory System

- 163 S Major chest procedures w MCC
- 164 S Major chest procedures w CC
- 165 S Major chest procedures w/o CC/MCC
- 166 S Other resp system O.R. procedures w MCC
- 167 S Other resp system O.R. procedures w CC
- 168 S Other resp system O.R. procedures w/o CC/MCC
- 175 M Pulmonary embolism w MCC
- 176 M Pulmonary embolism w/o MCC
- 177 M Respiratory infections & inflammations w MCC
- 178 M Respiratory infections & inflammations w CC
- 179 M Respiratory infections & inflammations w/o CC/MCC
- 180 M Respiratory neoplasms w MCC
- 181 M Respiratory neoplasms w CC
- 182 M Respiratory neoplasms w/o CC/MCC
- 183 M Major chest trauma w MCC

184	M	Major chest trauma w CC	231	S	Coronary bypass w PTCA w MCC
185	M	Major chest trauma w/o CC/MCC	232	S	Coronary bypass w PTCA w/o MCC
186	M	Pleural effusion w MCC	233	S	Coronary bypass w cardiac cath w MCC
187	M	Pleural effusion w CC	234	S	Coronary bypass w cardiac cath w/o MCC
188	M	Pleural effusion w/o CC/MCC	235	S	Coronary bypass w/o cardiac cath w MCC
189	M	Pulmonary edema & respiratory failure	236	S	Coronary bypass w/o cardiac cath w/o MCC
190	M	Chronic obstructive pulmonary disease w MCC	237	S	Major cardiovasc procedures w MCC or thoracic aortic aneuerysm repair
191	M	Chronic obstructive pulmonary disease w CC	238	S	Major cardiovasc procedures w/o MCC
192	M	Chronic obstructive pulmonary disease w/o CC/MCC	239	S	Amputation for circ sys disorders exc upper limb & toe w MCC
193	M	Simple pneumonia & pleurisy w MCC	240	S	Amputation for circ sys disorders exc upper limb & toe w CC
194	M	Simple pneumonia & pleurisy w CC	241	S	Amputation for circ sys disorders exc upper limb & toe w/o CC/MCC
195	M	Simple pneumonia & pleurisy w/o CC/ MCC	242	S	Permanent cardiac pacemaker implant w MCC
196	M	Interstitial lung disease w MCC	243	S	Permanent cardiac pacemaker implant w CC
197	M	Interstitial lung disease w CC	244	S	Permanent cardiac pacemaker implant w/o CC/MCC
198	M	Interstitial lung disease w/o CC/MCC	245	S	AICD Generator Procedures
199	M	Pneumothorax w MCC	246	S	Perc cardiovasc proc w drug-eluting stent w MCC or 4+ vessels/stents
200	M	Pneumothorax w CC	247	S	Perc cardiovasc proc w drug-eluting stent w/o MCC
201	M	Pneumothorax w/o CC/MCC	248	S	Perc cardiovasc proc w non-drug-eluting stent w MCC or 4+ ves/stents
202	M	Bronchitis & asthma w CC/MCC	249	S	Perc cardiovasc proc w non-drug-eluting stent w/o MCC
203	M	Bronchitis & asthma w/o CC/MCC	250	S	Perc cardiovasc proc w/o coronary artery stent or AMI w MCC
204	M	Respiratory signs & symptoms	251	S	Perc cardiovasc proc w/o coronary artery stent or AMI w/o MCC
205	M	Other respiratory system diagnoses w MCC	252	S	Other vascular procedures w MCC
206	M	Other respiratory system diagnoses w/o MCC	253	S	Other vascular procedures w CC
207	M	Respiratory system diagnosis w ventilator support 96+ hours	254	S	Other vascular procedures w/o CC/ MCC
208	M	Respiratory system diagnosis w ventilator support 96 hours	255	S	Upper limb & toe amputation for circ system disorders w MCC
MDC 5: Diseases and Disorders of the Circulatory System					
215	S	Other heart assist system implant	256	S	Upper limb & toe amputation for circ system disorders w CC
216	S	Cardiac valve & oth maj cardiothoracic proc w card cath w MCC	257	S	Upper limb & toe amputation for circ system disorders w/o CC/MCC
217	S	Cardiac valve & oth maj cardiothoracic proc w card cath w CC	258	S	Cardiac pacemaker device replacement w MCC
218	S	Cardiac valve & oth maj cardiothoracic proc w card cath w/o CC/MCC	259	S	Cardiac pacemaker device replacement w/o MCC
219	S	Cardiac valve & oth maj cardiothoracic proc w/o card cath w MCC	260	S	Cardiac pacemaker revision except device replacement w MCC
220	S	Cardiac valve & oth maj cardiothoracic proc w/o card cath w CC	261	S	Cardiac pacemaker revision except device replacement w CC
221	S	Cardiac valve & oth maj cardiothoracic proc w/o card cath w/o CC/MCC	262	S	Cardiac pacemaker revision except device replacement w/o CC/MCC
222	S	Cardiac defib implant w cardiac cath w AMI/HF/shock w MCC	263	S	Vein ligation & stripping
223	S	Cardiac defib implant w cardiac cath w AMI/HF/shock w/o MCC	264	S	Other circulatory system O.R. procedures
224	S	Cardiac defib implant w cardiac cath w/o AMI/HF/shock w MCC	265	S	AICD Lead Procedures
225	S	Cardiac defib implant w cardiac cath w/o AMI/HF/shock w/o MCC	280	M	Acute myocardial infarction, discharged alive w MCC
226	S	Cardiac defibrillator implant w/o cardiac cath w MCC	281	M	Acute myocardial infarction, discharged alive w CC
227	S	Cardiac defibrillator implant w/o cardiac cath w/o MCC	282	M	Acute myocardia infarction, discharged alive w/o CC/MCC
228	S	Other cardiothoracic procedures w MCC	283	M	Acute myocardial infarction, expired w MCC
229	S	Other cardiothoracic procedures w CC	284	M	Acute myocardial infarction, expired w CC
230	S	Other cardiothoracic procedures w/o CC/MCC	285	M	Acute myocardial infarction, expired w/o CC/MCC
			286	M	Circulatory disorders except AMI, w card cath w MCC
			287	M	Circulatory disorders except AMI, w card cath w/o MCC

288	M	Acute & subacute endocarditis w MCC	338	S	Appendectomy w complicated principal diag w MCC
289	M	Acute & subacute endocarditis w CC	339	S	Appendectomy w complicated principal diag w CC
290	M	Acute & subacute endocarditis w/o CC/MCC	340	S	Appendectomy w complicated principal diag w/o CC/MCC
291	M	Heart failure & shock w MCC	341	S	Appendectomy w/o complicated principal diag w MCC
292	M	Heart failure & shock w CC	342	S	Appendectomy w/o complicated principal diag w CC
293	M	Heart failure & shock w/o CC/MCC	343	S	Appendectomy w/o complicated principal diag w/o CC/MCC
294	M	Deep vein thrombophlebitis w CC/ MCC	344	S	Minor small & large bowel procedures w MCC
295	M	Deep vein thrombophlebitis w/o CC/ MCC	345	S	Minor small & large bowel proceduresw CC
296	M	Cardiac arrest, unexplained w MCC	346	S	Minor small & large bowel procedures w/o CC/MCC
297	M	Cardiac arrest, unexplained w CC	347	S	Anal & stomal procedures w MCC
298	M	Cardiac arrest, unexplained w/o CC/ MCC	348	S	Anal & stomal procedures w CC
299	M	Peripheral vascular disorders w MCC	349	S	Anal & stomal procedures w/o CC/ MCC
300	M	Peripheral vascular disorders w CC	350	S	Inguinal & femoral hernia procedures w MCC
301	M	Peripheral vascular disorders w/o CC/ MCC	351	S	Inguinal & femoral hernia procedures w CC
302	M	Atherosclerosis w MCC	352	S	Inguinal & femoral hernia procedures w/o CC/MCC
303	M	Atherosclerosis w/o MCC	353	S	Hernia procedures except inguinal & femoral w MCC
304	M	Hypertension w MCC	354	S	Hernia procedures except inguinal & femoral w CC
305	M	Hypertension w/o MCC	355	S	Hernia procedures except inguinal & femoral w/o CC/MCC
306	M	Cardiac congenital & valvular disorders w MCC	356	S	Other digestive system O.R. procedures w MCC
307	M	Cardiac congenital & valvular disorders w/o MCC	357	S	Other digestive system O.R. procedures w CC
308	M	Cardiac arrhythmia & conduction disorders w MCC	358	S	Other digestive system O.R. procedures w/o CC/MCC
309	M	Cardiac arrhythmia & conduction disorders w CC	368	M	Major esophageal disorders w MCC
310	M	Cardiac arrhythmia & conduction disorders w/o CC/MCC	369	M	Major esophageal disorders w CC
311	M	Angina pectoris	370	M	Major esophageal disorders w/o CC/ MCC
312	M	Syncope & collapse	371	M	Major gastrointestinal disorders & peritoneal infections w MCC
313	M	Chest pain	372	M	Major gastrointestinal disorders & peritoneal infections w CC
314	M	Other circulatory system diagnoses w MCC	373	M	Major gastrointestinal disorders & peritoneal infections w/o CC/MCC
315	M	Other circulatory system diagnoses w CC	374	M	Digestive malignancy w MCC
316	M	Other circulatory system diagnoses w/o CC/MCC	375	M	Digestive malignancy w CC
MDC 6: Diseases and Disorders of the Digestive System					
326	S	Stomach, esophageal & duodenal proc w MCC	376	M	Digestive malignancy w/o CC/MCC
327	S	Stomach, esophageal & duodenal proc w CC	377	M	G.I. hemorrhage w MCC
328	S	Stomach, esophageal & duodenal proc w/o CC/MCC	378	M	G.I. hemorrhage w CC
329	S	Major small & large bowel procedures w MCC	379	M	G.I. hemorrhage w/o CC/MCC
330	S	Major small & large bowel procedures w CC	380	M	Complicated peptic ulcer w MCC
331	S	Major small & large bowel procedures w/o CC/MCC	381	M	Complicated peptic ulcer w CC
332	S	Rectal resection w MCC	382	M	Complicated peptic ulcer w/o CC/MCC
333	S	Rectal resection w CC	383	M	Uncomplicated peptic ulcer w MCC
334	S	Rectal resection w/o CC/MCC	384	M	Uncomplicated peptic ulcer w/o MCC
335	S	Peritoneal adhesiolysis w MCC	385	M	Inflammatory bowel disease w MCC
336	S	Peritoneal adhesiolysis w CC	386	M	Inflammatory bowel disease w CC
337	S	Peritoneal adhesiolysis w/o CC/MCC	387	M	Inflammatory bowel disease w/o CC/ MCC
			388	M	G.I. obstruction w MCC
			389	M	G.I. obstruction w CC

- 390 M G.I. obstruction w/o CC/MCC
- 391 M Esophagitis, gastroent & misc digest disorders w MCC
- 392 M Esophagitis, gastroent & misc digest disorders w/o MCC
- 393 M Other digestive system diagnoses w MCC
- 394 M Other digestive system diagnoses w CC
- 395 M Other digestive system diagnoses w/o CC/MCC

MDC 7: Diseases and Disorders of the Hepatobiliary (Liver) System and Pancreas

- 405 S Pancreas, liver & shunt procedures w MCC
- 406 S Pancreas, liver & shunt procedures w CC
- 407 S Pancreas, liver & shunt procedures w/o CC/MCC
- 408 S Biliary tract proc except only cholecyst w or w/o c.d.e. w MCC
- 409 S Biliary tract proc except only cholecyst w or w/o c.d.e. w CC
- 410 S Biliary tract proc except only cholecyst w or w/o c.d.e. w/o CC/MCC
- 411 S Cholecystectomy w c.d.e. w MCC
- 412 S Cholecystectomy w c.d.e. w CC
- 413 S Cholecystectomy w c.d.e. w/o CC/MCC
- 414 S Cholecystectomy except by laparoscope w/o c.d.e. w MCC
- 415 S Cholecystectomy except by laparoscope w/o c.d.e. w CC
- 416 S Cholecystectomy except by laparoscope w/o c.d.e. w/o CC/MCC
- 417 S Laparoscopic cholecystectomy w/o c.d.e. w MCC
- 418 S Laparoscopic cholecystectomy w/o c.d.e. w CC
- 419 S Laparoscopic cholecystectomy w/o c.d.e. w/o CC/MCC
- 420 S Hepatobiliary diagnostic procedures w MCC
- 421 S Hepatobiliary diagnostic procedures w CC
- 422 S Hepatobiliary diagnostic procedures w/o CC/MCC
- 423 S Other hepatobiliary or pancreas O.R. procedures w MCC
- 424 S Other hepatobiliary or pancreas O.R. procedures w CC
- 425 S Other hepatobiliary or pancreas O.R. procedures w/o CC/MCC
- 432 M Cirrhosis & alcoholic hepatitis w MCC
- 433 M Cirrhosis & alcoholic hepatitis w CC
- 434 M Cirrhosis & alcoholic hepatitis w/o CC/ MCC
- 435 M Malignancy of hepatobiliary system or pancreas w MCC
- 436 M Malignancy of hepatobiliary system or pancreas w CC
- 437 M Malignancy of hepatobiliary system or pancreas w/o CC/MCC
- 438 M Disorders of pancreas except malignancy w MCC
- 439 M Disorders of pancreas except malignancy w CC
- 440 M Disorders of pancreas except malignancy w/o CC/MCC
- 441 M Disorders of liver except malig,cirr,alchepa w MCC
- 442 M Disorders of liver except malig,cirr,alchepa w CC
- 443 M Disorders of liver except malig,cirr,alchepa w/o CC/MCC
- 444 M Disorders of the biliary tract w MCC

- 445 M Disorders of the biliary tract w CC
- 446 M Disorders of the biliary tract w/o CC/ MCC

MDC 8: Diseases and Disorders of the Musculoskeletal System and Connective Tissue

- 453 S Combined anterior/posterior spinal fusion w MCC
- 454 S Combined anterior/posterior spinal fusion w CC
- 455 S Combined anterior/posterior spinal fusion w/o CC/MCC
- 456 S Spinal fus exc cerv w spinal curv/ malig/infec or 9+ fus w MCC
- 457 S Spinal fus exc cerv w spinal curv/ malig/infec or 9+ fus w CC
- 458 S Spinal fus exc cerv w spinal curv/ malig/infec or 9+ fus w/o CC/MCC
- 459 S Spinal fusion except cervical w MCC
- 460 S Spinal fusion except cervical w/o MCC
- 461 S Bilateral or multiple major joint procs of lower extremity w MCC
- 462 S Bilateral or multiple major joint procs of lower extremity w/o MCC
- 463 S Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w MCC
- 464 S Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w CC
- 465 S Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w/o CC/MCC
- 466 S Revision of hip or knee replacement w MCC
- 467 S Revision of hip or knee replacement w CC
- 468 S Revision of hip or knee replacement w/o CC/MCC
- 469 S Major joint replacement or reattachment of lower extremity w MCC
- 470 S Major joint replacement or reattachment of lower extremity w/o MCC
- 471 S Cervical spinal fusion w MCC
- 472 S Cervical spinal fusion w CC
- 473 S Cervical spinal fusion w/o CC/MCC
- 474 S Amputation for musculoskeletal sys & conn tissue dis w MCC
- 475 S Amputation for musculoskeletal sys & conn tissue dis w CC
- 476 S Amputation for musculoskeletal sys & conn tissue dis w/o CC/MCC
- 477 S Biopsies of musculoskeletal system & connective tissue w MCC
- 478 S Biopsies of musculoskeletal system & connective tissue w CC
- 479 S Biopsies of musculoskeletal system & connective tissue w/o CC/MCC
- 480 S Hip & femur procedures except major joint w MCC
- 481 S Hip & femur procedures except major joint w CC
- 482 S Hip & femur procedures except major joint w/o CC/MCC
- 483 S Major joint & limb reattachment proc of upper extremity w CC/MCC
- 484 S Major joint & limb reattachment proc of upper extremity w/o CC/MCC
- 485 S Knee procedures w pdx of infection w MCC
- 486 S Knee procedures w pdx of infection w CC
- 487 S Knee procedures w pdx of infection w/o CC/MCC
- 488 S Knee procedures w/o pdx of infection w CC/MCC
- 489 S Knee procedures w/o pdx of infection w/o CC/MCC
- 490 S Back & neck proc exc spinal fusion w CC/MCC or disc device/neurostim

491 S Back & neck proc exc spinal fusion w/ o CC/MCC
 492 S Lower extrem & humer proc except hip,foot,femur w MCC
 493 S Lower extrem & humer proc except hip,foot,femur w CC
 494 S Lower extrem & humer proc except hip,foot,femur w/o CC/MCC
 495 S Local excision & removal int fix devices exc hip & femur w MCC
 496 S Local excision & removal int fix devices exc hip & femur w CC
 497 S Local excision & removal int fix devices exc hip & femur w/o CC/MCC
 498 S Local excision & removal int fix devices of hip & femur w CC/MCC
 499 S Local excision & removal int fix devices of hip & femur w/o CC/MCC
 500 S Soft tissue procedures w MCC
 501 S Soft tissue procedures w CC
 502 S Soft tissue procedures w/o CC/MCC
 503 S Foot procedures w MCC
 504 S Foot procedures w CC
 505 S Foot procedures w/o CC/MCC
 506 S Major thumb or joint procedures
 507 S Major shoulder or elbow joint procedures w CC/MCC
 508 S Major shoulder or elbow joint procedures w/o CC/MCC
 509 S Arthroscopy
 510 S Shoulder,elbow or forearm proc,exc major joint proc w MCC
 511 S Shoulder,elbow or forearm proc,exc major joint proc w CC
 512 S Shoulder,elbow or forearm proc,exc major joint proc w/o CC/MCC
 513 S Hand or wrist proc, except major thumb or joint proc w CC/MCC
 514 S Hand or wrist proc, except major thumb or joint proc w/o CC/MCC
 515 S Other musculoskelet sys & conn tiss O.R. proc w MCC
 516 S Other musculoskelet sys & conn tiss O.R. proc w CC
 517 S Other musculoskelet sys & conn tiss O.R. proc w/o CC/MCC
 533 M Fractures of femur w MCC
 534 M Fractures of femur w/o MCC
 535 M Fractures of hip & pelvis w MCC
 536 M Fractures of hip & pelvis w/o MCC
 537 M Sprains, strains, & dislocations of hip, pelvis & thigh w CC/MCC
 538 M Sprains, strains, & dislocations of hip, pelvis & thigh w/o CC/MCC
 539 M Osteomyelitis w MCC
 540 M Osteomyelitis w CC
 541 M Osteomyelitis w/o CC/MCC
 542 M Pathological fractures & musculoskelet & conn tiss malig w MCC
 543 M Pathological fractures & musculoskelet & conn tiss malig w CC
 544 M Pathological fractures & musculoskelet & conn tiss malig w/o CC/MCC
 545 M Connective tissue disorders w MCC
 546 M Connective tissue disorders w CC
 547 M Connective tissue disorders w/o CC/ MCC
 548 M Septic arthritis w MCC .

549 M Septic arthritis w CC
 550 M Septic arthritis w/o CC/MCC
 551 M Medical back problems w MCC
 552 M Medical back problems w/o MCC
 553 M Bone diseases & arthropathies w MCC
 554 M Bone diseases & arthropathies w/o MCC
 555 M Signs & symptoms of musculoskeletal system & conn tissue w MCC
 556 M Signs & symptoms of musculoskeletal system & conn tissue w/o MCC
 557 M Tendonitis, myositis & bursitis w MCC
 558 M Tendonitis, myositis & bursitis w/o MCC
 559 M Aftercare, musculoskeletal system & connective tissue w MCC
 560 M Aftercare, musculoskeletal system & connective tissue w CC
 561 M Aftercare, musculoskeletal system & connective tissue w/o CC/MCC
 562 M Fx, sprn, strn & disl except femur, hip, pelvis & thigh w MCC
 563 M Fx, sprn, strn & disl except femur, hip, pelvis & thigh w/o MCC
 564 M Other musculoskeletal sys & connective tissue diagnoses w MCC
 565 M Other musculoskeletal sys & connective tissue diagnoses w CC
 566 M Other musculoskeletal sys & connective tissue diagnoses w/o CC/MCC

MDC 9: Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast

570 S Skin debridement w MCC
 571 S Skin debridement w CC
 572 S Skin debridement w/o CC/MCC
 573 S Skin graft &/or debrid for skn ulcer or cellulitis w MCC
 574 S Skin graft &/or debrid for skn ulcer or cellulitis w CC
 575 S Skin graft &/or debrid for skn ulcer or cellulitis w/o CC/MCC
 576 S Skin graft &/or debrid exc for skin ulcer or cellulitis w MCC
 577 S Skin graft &/or debrid exc for skin ulcer or cellulitis w CC
 578 S Skin graft &/or debrid exc for skin ulcer or cellulitis w/o CC/MCC
 579 S Other skin, subcut tiss & breast proc w MCC
 580 S Other skin, subcut tiss & breast proc w CC
 581 S Other skin, subcut tiss & breast proc w/o CC/MCC
 582 S Mastectomy for malignancy w CC/ MCC
 583 S Mastectomy for malignancy w/o CC/ MCC
 584 S Breast biopsy, local excision & other breast procedures w CC/MCC
 585 S Breast biopsy, local excision & other breast procedures w/o CC/MCC
 592 M Skin ulcers w MCC
 593 M Skin ulcers w CC
 594 M Skin ulcers w/o CC/MCC
 595 M Major skin disorders w MCC
 596 M Major skin disorders w/o MCC
 597 M Malignant breast disorders w MCC
 598 M Malignant breast disorders w CC

- 599 M Malignant breast disorders w/o CC/ MCC
- 600 M Non-malignant breast disorders w CC/ MCC
- 601 M Non-malignant breast disorders w/o CC/MCC
- 602 M Cellulitis w MCC
- 603 M Cellulitis w/o MCC.
- 604 M Trauma to the skin, subcut tiss & breast w MCC
- 605 M Trauma to the skin, subcut tiss & breast w/o MCC
- 606 M Minor skin disorders w MCC
- 607 M Minor skin disorders w/o MCC

MDC 10: Endocrine, Nutritional and Metabolic Diseases and Disorders

- 614 S Adrenal & pituitary procedures w CC/ MCC
- 615 S Adrenal & pituitary procedures w/o CC/MCC
- 616 S Amputat of lower limb for endocrine,nutrit,& metabol dis w MCC
- 617 S Amputat of lower limb for endocrine,nutrit,& metabol dis w CC
- 618 S Amputat of lower limb for endocrine,nutrit,& metabol dis w/o CC/MCC
- 619 S O.R. procedures for obesity w MCC
- 620 S O.R. procedures for obesity w CC
- 621 S O.R. procedures for obesity w/o CC/ MCC
- 622 S Skin grafts & wound debrid for endoc, nutrit & metab dis w MCC
- 623 S Skin grafts & wound debrid for endoc, nutrit & metab dis w CC
- 624 S Skin grafts & wound debrid for endoc, nutrit & metab dis w/o CC/MCC
- 625 S Thyroid, parathyroid & thyroglossal procedures w MCC
- 626 S Thyroid, parathyroid & thyroglossal procedures w CC
- 627 S Thyroid, parathyroid & thyroglossal procedures w/o CC/MCC
- 628 S Other endocrine, nutrit & metab O.R. proc w MCC
- 629 S Other endocrine, nutrit & metab O.R. proc w CC
- 630 S Other endocrine, nutrit & metab O.R. proc w/o CC/MCC
- 637 M Diabetes w MCC
- 638 M Diabetes w CC
- 639 M Diabetes w/o CC/MCC
- 640 M Nutritional & misc metabolic disorders w MCC
- 641 M Nutritional & misc metabolic disorders w/o MCC
- 642 M Inborn errors of metabolism
- 643 M Endocrine disorders w MCC
- 644 M Endocrine disorders w CC
- 645 M Endocrine disorders w/o CC/MCC

MDC 11: Diseases and Disorders of the Kidney and Urinary Tract

- 652 S Kidney transplant
- 653 S Major bladder procedures w MCC
- 654 S Major bladder procedures w CC
- 655 S Major bladder procedures w/o CC/ MCC

- 656 S Kidney & ureter procedures for neoplasm w MCC
- 657 S Kidney & ureter procedures for neoplasm w CC
- 658 S Kidney & ureter procedures for neoplasm w/o CC/MCC
- 659 S Kidney & ureter procedures for nonneoplasm w MCC
- 660 S Kidney & ureter procedures for non-neoplasm w CC
- 661 S Kidney & ureter procedures for non-neoplasm w/o CC/MCC
- 662 S Minor bladder procedures w MCC
- 663 S Minor bladder procedures w CC
- 664 S Minor bladder procedures w/o CC/ MCC
- 665 S Prostatectomy w MCC
- 666 S Prostatectomy w CC
- 667 S Prostatectomy w/o CC/MCC
- 668 S Transurethral procedures w MCC
- 669 S Transurethral procedures w CC
- 670 S Transurethral procedures w/o CC/ MCC
- 671 S Urethral procedures w CC/MCC
- 672 S Urethral procedures w/o CC/MCC
- 673 S Other kidney & urinary tract procedures w MCC
- 674 S Other kidney & urinary tract procedures w CC
- 675 S Other kidney & urinary tract procedures w/o CC/MCC
- 682 M Renal failure w MCC
- 683 M Renal failure w CC
- 684 M Renal failure w/o CC/MCC
- 685 M Admit for renal dialysis
- 686 M Kidney & urinary tract neoplasms w MCC
- 687 M Kidney & urinary tract neoplasms w CC
- 688 M Kidney & urinary tract neoplasms w/o CC/MCC
- 689 M Kidney & urinary tract infections w MCC
- 690 M Kidney & urinary tract infections w/o MCC
- 691 M Urinary stones w esw lithotripsy w CC/MCC
- 692 M Urinary stones w esw lithotripsy w/o CC/MCC
- 693 M Urinary stones w/o esw lithotripsy w MCC
- 694 M Urinary stones w/o esw lithotripsy w/o MCC
- 695 M Kidney & urinary tract signs & symptoms w MCC
- 696 M Kidney & urinary tract signs & symptoms w/o MCC
- 697 M Urethral stricture
- 698 M Other kidney & urinary tract diagnoses w MCC
- 699 M Other kidney & urinary tract diagnoses w CC
- 700 M Other kidney & urinary tract diagnoses w/o CC/MCC

MDC 12: Diseases and Disorders of the Male Reproductive System

- 707 S Major male pelvic procedures w CC/ MCC
- 708 S Major male pelvic procedures w/o CC/ MCC

709 S Penis procedures w CC/MCC
 710 S Penis procedures w/o CC/MCC
 711 S Testes procedures w CC/MCC
 712 S Testes procedures w/o CC/MCC
 713 S Transurethral prostatectomy w CC/ MCC
 714 S Transurethral prostatectomy w/o CC/ MCC
 715 S Other male reproductive system O.R. proc for malignancy w CC/MCC
 716 S Other male reproductive system O.R. proc for malignancy w/o CC/MCC
 717 S Other male reproductive system O.R. proc exc malignancy w CC/MCC
 718 S Other male reproductive system O.R. proc exc malignancy w/o CC/MCC
 722 M Malignancy, male reproductive system w MCC
 723 M Malignancy, male reproductive system w CC
 724 M Malignancy, male reproductive system w/o CC/MCC
 725 M Benign prostatic hypertrophy w MCC
 726 M Benign prostatic hypertrophy w/o MCC
 727 M Inflammation of the male reproductive system w MCC
 728 M Inflammation of the male reproductive system w/o MCC
 729 M Other male reproductive system diagnoses w CC/MCC
 730 M Other male reproductive system diagnoses w/o CC/MCC

MDC 13: Diseases and Disorders of the Female Reproductive System

734 S Pelvic evisceration, rad hysterectomy & rad vulvectomy w CC/MCC
 735 S Pelvic evisceration, rad hysterectomy & rad vulvectomy w/o CC/MCC
 736 S Uterine & adnexa proc for ovarian or adnexal malignancy w MCC
 737 S Uterine & adnexa proc for ovarian or adnexal malignancy w CC
 738 S Uterine & adnexa proc for ovarian or adnexal malignancy w/o CC/MCC
 739 S Uterine,adnexa proc for non-ovarian/ adnexal malig w MCC
 740 S Uterine,adnexa proc for non-ovarian/ adnexal malig w CC
 741 S Uterine,adnexa proc for non-ovarian/ adnexal malig w/o CC/MCC
 742 S Uterine & adnexa proc for non-malignancy w CC/MCC
 743 S Uterine & adnexa proc for non-malignancy w/o CC/MCC
 744 S D&C, conization, laparoscopy & tubal interruption w CC/MCC
 745 S D&C, conization, laparoscopy & tubal interruption w/o CC/MCC
 746 S Vagina, cervix & vulva procedures w CC/MCC
 747 S Vagina, cervix & vulva procedures w/o CC/MCC
 748 S Female reproductive system reconstructive procedures
 749 S Other female reproductive system O.R. procedures w CC/MCC
 750 S Other female reproductive system O.R. procedures w/o CC/MCC
 754 M Malignancy, female reproductive system w MCC
 755 M Malignancy, female reproductive system w CC
 756 M Malignancy, female reproductive system w/o CC/MCC
 757 M Infections, female reproductive system w MCC
 758 M Infections, female reproductive system w CC

759 M Infections, female reproductive system w/o CC/MCC
 760 M Menstrual & other female reproductive system disorders w CC/MCC
 761 M Menstrual & other female reproductive system disorders w/o CC/MCC

MDC 14: Pregnancy, Childbirth, and the Puerperium

765 S Cesarean section w CC/MCC
 766 S Cesarean section w/o CC/MCC
 767 S Vaginal delivery w sterilization &/or D&C
 768 S Vaginal delivery w O.R. proc except steril &/or D&C
 769 S Postpartum & post abortion diagnoses w O.R. procedure
 770 S Abortion w D&C, aspiration curettage or hysterotomy
 774 M Vaginal delivery w complicating diagnoses
 775 M Vaginal delivery w/o complicating diagnoses
 776 M Postpartum & post abortion diagnoses w/o O.R. procedure
 777 M Ectopic pregnancy
 778 M Threatened abortion
 779 M Abortion w/o D&C
 780 M False labor
 781 M Other antepartum diagnoses w medical complications
 782 M Other antepartum diagnoses w/o medical complications

MDC 15: Newborns and Other Neonates with Conditions Originating in the Perinatal Period

789 M Neonates, died or transferred to another acute care facility
 790 M Extreme immaturity or respiratory distress syndrome, neonate
 791 M Prematurity w major problems
 792 M Prematurity w/o major problems
 793 M Full term neonate w major problems
 794 M Neonate w other significant problems
 795 M Normal newborn

MDC 16: Diseases and Disorders of the Blood and Blood Forming Organs and Immunological Disorders

799 S Splenectomy w MCC
 800 S Splenectomy w CC
 801 S Splenectomy w/o CC/MCC
 802 S Other O.R. proc of the blood & blood forming organs w MCC
 803 S Other O.R. proc of the blood & blood forming organs w CC
 804 S Other O.R. proc of the blood & blood forming organs w/o CC/MCC
 808 M Major hematol/immun diag exc sickle cell crisis & coagul w MCC
 809 M Major hematol/immun diag exc sickle cell crisis & coagul w CC
 810 M Major hematol/immun diag exc sickle cell crisis & coagul w/o CC/MCC
 811 M Red blood cell disorders w MCC

- 812 M Red blood cell disorders w/o MCC
- 813 M Coagulation disorders
- 814 M Reticuloendothelial & immunity disorders w MCC
- 815 M Reticuloendothelial & immunity disorders w CC
- 816 M Reticuloendothelial & immunity disorders w/o CC/MCC

MDC 17: Myeloproliferative Diseases and Disorders and Poorly Differentiated Neoplasms

- 820 S Lymphoma & leukemia w major O.R. procedure w MCC
- 821 S Lymphoma & leukemia w major O.R. procedure w CC
- 822 S Lymphoma & leukemia w major O.R. procedure w/o CC/MCC
- 823 S Lymphoma & non-acute leukemia w other O.R. proc w MCC
- 824 S Lymphoma & non-acute leukemia w other O.R. proc w CC
- 825 S Lymphoma & non-acute leukemia w other O.R. proc w/o CC/MCC
- 826 S Myeloprolif disord or poorly diff neopl w maj O.R. proc w MCC
- 827 S Myeloprolif disord or poorly diff neopl w maj O.R. proc w CC
- 828 S Myeloprolif disord or poorly diff neopl w maj O.R. proc w/o CC/MCC
- 829 S Myeloprolif disord or poorly diff neopl w other O.R. proc w CC/MCC
- 830 S Myeloprolif disord or poorly diff neopl w other O.R. proc w/o CC/MCC
- 834 M Acute leukemia w/o major O.R. procedure w MCC
- 835 M Acute leukemia w/o major O.R. procedure w CC
- 836 M Acute leukemia w/o major O.R. procedure w/o CC/MCC
- 837 M Chemo w acute leukemia as sdx or w high dose chemo agent w MCC
- 838 M Chemo w acute leukemia as sdx w CC or high dose chemo agent
- 839 M Chemo w acute leukemia as sdx w/o CC/MCC
- 840 M Lymphoma & non-acute leukemia w MCC
- 841 M Lymphoma & non-acute leukemia w CC
- 842 M Lymphoma & non-acute leukemia w/o CC/MCC
- 843 M Other myeloprolif dis or poorly diff neopl diag w MCC
- 844 M Other myeloprolif dis or poorly diff neopl diag w CC
- 845 M Other myeloprolif dis or poorly diff neopl diag w/o CC/MCC
- 846 M Chemotherapy w/o acute leukemia as secondary diagnosis w MCC
- 847 M Chemotherapy w/o acute leukemia as secondary diagnosis w CC
- 848 M Chemotherapy w/o acute leukemia as secondary diagnosis w/o CC/MCC
- 849 M Radiotherapy

MDC 18: Infectious and Parasitic Diseases (Systemic or Unspecified Sites)

- 853 S Infectious & parasitic diseases w O.R. procedure w MCC
- 854 S Infectious & parasitic diseases w O.R. procedure w CC
- 855 S Infectious & parasitic diseases w O.R. procedure w/o CC/MCC
- 856 S Postoperative or post-traumatic infections w O.R. proc w MCC
- 857 S Postoperative or post-traumatic infections w O.R. proc w CC
- 858 S Postoperative or post-traumatic infections w O.R. proc w/o CC/MCC

- 862 M Postoperative & post-traumatic infections w MCC
- 863 M Postoperative & post-traumatic infections w/o MCC
- 864 M Fever of unknown origin
- 865 M Viral illness w MCC
- 866 M Viral illness w/o MCC
- 867 M Other infectious & parasitic diseases diagnoses w MCC
- 868 M Other infectious & parasitic diseases diagnoses w CC
- 869 M Other infectious & parasitic diseases diagnoses w/o CC/MCC
- 870 M Septicemia w MV 96+ hours
- 871 M Septicemia w/o MV 96+ hours w MCC
- 872 M Septicemia w/o MV 96+ hours w/o MCC

MDC 19: Mental Diseases and Disorders

- 876 S O.R. procedure w principal diagnoses of mental illness
- 880 M Acute adjustment reaction & psychosocial dysfunction
- 881 M Depressive neuroses
- 882 M Neuroses except depressive
- 883 M Disorders of personality & impulse control
- 884 M Organic disturbances & mental retardation
- 885 M Psychoses
- 886 M Behavioral & developmental disorders
- 887 M Other mental disorder diagnoses

MDC 20: Alcohol/Drug Use and Alcohol/Drug Induced Organic Mental

- 894 M Alcohol/drug abuse or dependence, left ama
- 895 M Alcohol/drug abuse or dependence w rehabilitation therapy
- 896 M Alcohol/drug abuse or dependence w/o rehabilitation therapy w MCC
- 897 M Alcohol/drug abuse or dependence w/o rehabilitation therapy w/o MCC

MDC 21: Injuries, Poisonings, and Toxic Effects of Drugs

- 901 S Wound debridements for injuries w MCC
- 902 S Wound debridements for injuries w CC
- 903 S Wound debridements for injuries w/o CC/MCC
- 904 S Skin grafts for injuries w CC/MCC
- 905 S Skin grafts for injuries w/o CC/MCC
- 906 S Hand procedures for injuries
- 907 S Other O.R. procedures for injuries w MCC
- 908 S Other O.R. procedures for injuries w CC
- 909 S Other O.R. procedures for injuries w/o CC/MCC
- 913 M Traumatic injury w MCC
- 914 M Traumatic injury w/o MCC
- 915 M Allergic reactions w MCC
- 916 M Allergic reactions w/o MCC

- 917 M Poisoning & toxic effects of drugs w MCC
- 918 M Poisoning & toxic effects of drugs w/o MCC
- 919 M Complications of treatment w MCC
- 920 M Complications of treatment w CC
- 921 M Complications of treatment w/o CC/ MCC
- 922 M Other injury, poisoning & toxic effect diag w MCC
- 923 M Other injury, poisoning & toxic effect diag w/o MCC

MDC 22: Burns

- 927 S Extensive burns or full thickness burns w MV 96+ hrs w skin graft
- 928 S Full thickness burn w skin graft or inhal inj w CC/MCC
- 929 S Full thickness burn w skin graft or inhal inj w/o CC/MCC
- 933 M Extensive burns or full thickness burns w MV 96+ hrs w/o skin graft
- 934 M Full thickness burn w/o skin grft or inhal inj
- 935 M Non-extensive burns

MDC 23: Factors Influencing Health Status and Other Contacts with Health Services

- 939 S O.R. proc w diagnoses of other contact w health services w MCC
- 940 S O.R. proc w diagnoses of other contact w health services w CC
- 941 S O.R. proc w diagnoses of other contact w health services w/o CC/MCC
- 945 M Rehabilitation w CC/MCC
- 946 M Rehabilitation w/o CC/MCC
- 947 M Signs & symptoms w MCC
- 948 M Signs & symptoms w/o MCC
- 949 M Aftercare w CC/MCC
- 950 M Aftercare w/o CC/MCC
- 951 M Other factors influencing health status

MDC 24: Multiple Significant Trauma

- 955 S Craniotomy for multiple significant trauma
- 956 S Limb reattachment, hip & femur proc for multiple significant trauma
- 957 S Other O.R. procedures for multiple significant trauma w MCC
- 958 S Other O.R. procedures for multiple significant trauma w CC
- 959 S Other O.R. procedures for multiple significant trauma w/o CC/MCC
- 963 M Other multiple significant trauma w MCC
- 964 M Other multiple significant trauma w CC
- 965 M Other multiple significant trauma w/o CC/MCC

MDC 25: Human Immunodeficiency Virus Infections

- 969 S HIV w extensive O.R. procedure w MCC
- 970 S HIV w extensive O.R. procedure w/o MCC
- 974 M HIV w major related condition w MCC

- 975 M HIV w major related condition w CC
- 976 M HIV w major related condition w/o CC/MCC
- 977 M HIV w or w/o other related condition

DRGs Assigned to More than One MDC

- 981 S Extensive O.R. procedure unrelated to principal diagnosis w MCC
- 982 S Extensive O.R. procedure unrelated to principal diagnosis w CC
- 983 S Extensive O.R. procedure unrelated to principal diagnosis w/o CC/MCC
- 984 S Prostatic O.R. procedure unrelated to principal diagnosis w MCC
- 985 S Prostatic O.R. procedure unrelated to principal diagnosis w CC
- 986 S Prostatic O.R. procedure unrelated to principal diagnosis w/o CC/MCC
- 987 S Non-extensive O.R. proc unrelated to principal diagnosis w MCC
- 988 S Non-extensive O.R. proc unrelated to principal diagnosis w CC
- 989 S Non-extensive O.R. proc unrelated to principal diagnosis w/o CC/MCC

DRGs that contain cases not assigned to valid MDCs

- 998 ** Principal diagnosis invalid as discharge diagnosis
- 999 ** Ungroupable

APPENDIX D

Clinical Classifications Software (CCS) High Level Diagnostic and Procedure Categories

CCS High Level Diagnosis Groups

- 1 Infectious and parasitic diseases
- 2 Neoplasms
- 3 Endocrine, nutritional, metabolic, and immunity disorders
- 4 Diseases of the blood and blood-forming organs
- 5 Mental disorders
- 6 Diseases of the nervous system and sense organs
- 7 Diseases of the circulatory system
- 8 Diseases of the respiratory system
- 9 Diseases of the digestive system
- 10 Diseases of the genitourinary system
- 11 Contraception and complications of pregnancy and childbirth
- 12 Diseases of the skin and subcutaneous tissue
- 13 Musculoskeletal system and connective tissue
- 14 Congenital anomalies
- 15 Conditions originating in the perinatal period
- 16 Injury and poisoning
- 17 Symptoms, signs and ill-defined conditions
- 18 Residual codes, unclassified, all E codes (external cause codes)

CCS High Level Procedure Groups

- 1 Operations on the nervous system
- 2 Operations on the endocrine system
- 3 Operations on the eye
- 4 Operations on the ear
- 5 Operations on the nose, mouth, and pharynx
- 6 Operations on the respiratory system
- 7 Operations on the cardiovascular system
- 8 Operations on the hemic and lymphatic system
- 9 Operations on the digestive system
- 10 Operations on the urinary system
- 11 Operations on the male genital organs
- 12 Operations on the female genital organs
- 13 Obstetrical procedures
- 14 Operations on the musculoskeletal system
- 15 Operations on the integumentary system
- 16 Miscellaneous diagnostic and therapeutic procedures

APPENDIX E

Clinical Classifications Software (CCS) High-Level and Single-Level Diagnosis Categories

CCS High Level Diagnosis Group 1: Infectious and Parasitic Diseases

- 1 Tuberculosis
- 2 Septicemia (except in labor)
- 3 Bacterial infection, unspecified site
- 4 Mycoses
- 5 HIV infection
- 6 Hepatitis
- 7 Viral infection
- 8 Other infections, including parasitic
- 9 Sexually transmitted infections (not HIV or hepatitis)
- 10 Immunizations & screening for infectious disease

CCS High Level Diagnosis Group 2: Neoplasms

- 11 Cancer of head & neck
- 12 Cancer of esophagus
- 13 Cancer of stomach
- 14 Cancer of colon
- 15 Cancer of rectum & anus
- 16 Cancer of liver & intrahepatic bile duct
- 17 Cancer of pancreas
- 18 Cancer of other GI organs, peritoneum
- 19 Cancer of bronchus, lung
- 20 Cancer, other respiratory & intrathoracic
- 21 Cancer of bone & connective tissue
- 22 Melanomas of skin
- 23 Other non-epithelial cancer of skin
- 24 Cancer of breast
- 25 Cancer of uterus
- 26 Cancer of cervix
- 27 Cancer of ovary
- 28 Cancer of other female genital organs
- 29 Cancer of prostate
- 30 Cancer of testis
- 31 Cancer of other male genital organs
- 32 Cancer of bladder
- 33 Cancer of kidney & renal pelvis
- 34 Cancer of other urinary organs
- 35 Cancer of brain & nervous system
- 36 Cancer of thyroid
- 37 Hodgkin's disease

- 38 Non-Hodgkin's lymphoma
- 39 Leukemias
- 40 Multiple myeloma
- 41 Cancer, other & unspecified primary
- 42 Secondary malignancies
- 43 Malignant neoplasm without specification of site
- 44 Neoplasms of unspecified nature or uncertain behavior
- 45 Maintenance chemotherapy, radiotherapy
- 46 Benign neoplasm of uterus
- 47 Other & unspecified benign neoplasm

CCS High Level Diagnosis Group 3: Endocrine, Nutritional, Metabolic and Immunity Disorders

- 48 Thyroid disorders
- 49 Diabetes mellitus without complication
- 50 Diabetes mellitus with complications
- 51 Other endocrine disorders
- 52 Nutritional deficiencies
- 53 Disorders of lipid metabolism
- 54 Gout & other crystal arthropathies
- 55 Fluid & electrolyte disorders
- 56 Cystic fibrosis
- 57 Immunity disorders
- 58 Other nutritional, endocrine & metabolic disorders

CCS High Level Diagnosis Group 4: Diseases of the Blood and Blood-Forming Organs

- 59 Deficiency & other anemia
- 60 Acute posthemorrhagic anemia
- 61 Sickle cell anemia
- 62 Coagulation & hemorrhagic disorders
- 63 Diseases of white blood cells
- 64 Other hematologic conditions

CCS High Level Diagnosis Group 5: Mental Disorders

- 650 MHSA: Adjustment disorders
- 651 MHSA: Anxiety disorders
- 652 MHSA: Attention-deficit, conduct, and disruptive behavior disorders
- 653 MHSA: Delirium, dementia, and amnesic and other cognitive disorders
- 654 MHSA: Developmental disorders

- 655 MHSA: Disorders usually diagnosed in infancy, childhood, or adolescence
- 656 MHSA: Impulse control disorders, NEC
- 657 MHSA: Mood disorders
- 658 MHSA: Personality disorders
- 659 MHSA: Schizophrenia and other psychotic disorders
- 660 MHSA: Alcohol-related disorders
- 661 MHSA: Substance-related disorders
- 662 MHSA: Suicide and intentional self-inflicted injury
- 663 MHSA: Screening and history of mental health and substance abuse codes
- 670 MHSA: Miscellaneous mental disorders

CCS High Level Diagnosis Group 6: Diseases of the Nervous System and Sense Organs

- 76 Meningitis (except that caused by tuberculosis or STD)
- 77 Encephalitis (except that caused by tuberculosis or STD)
- 78 Other CNS infection & poliomyelitis
- 79 Parkinson's disease
- 80 Multiple sclerosis
- 81 Other hereditary & degenerative nervous system conditions
- 82 Paralysis
- 83 Epilepsy, convulsions
- 84 Headache, including migraine
- 85 Coma, stupor & brain damage
- 86 Cataract
- 87 Retinal detachments, defects, vascular occlusion & retinopathy
- 88 Glaucoma
- 89 Blindness & vision defects
- 90 Inflammation, infection of eye (except that caused by tuberculosis or STD)
- 91 Other eye disorders
- 92 Otitis media & related conditions
- 93 Conditions associated with dizziness or vertigo
- 94 Other ear & sense organ disorders
- 95 Other nervous system disorders

CCS High Level Diagnosis Group 7: Diseases of the Circulatory System

- 96 Heart valve disorders
- 97 Peri-, endo- & myocarditis, cardiomyopathy (except that caused by tuberculosis or STD)
- 98 Essential hypertension
- 99 Hypertension with complications & secondary hypertension
- 100 Acute myocardial infarction
- 101 Coronary atherosclerosis & other heart disease
- 102 Nonspecific chest pain

- 103 Pulmonary heart disease
- 104 Other & ill-defined heart disease
- 105 Conduction disorders
- 106 Cardiac dysrhythmias
- 107 Cardiac arrest & ventricular fibrillation
- 108 Congestive heart failure, nonhypertensive
- 109 Acute cerebrovascular disease
- 110 Occlusion or stenosis of precerebral arteries
- 111 Other & ill-defined cerebrovascular disease
- 112 Transient cerebral ischemia
- 113 Late effects of cerebrovascular disease
- 114 Peripheral & visceral atherosclerosis
- 115 Aortic, peripheral & visceral artery aneurysms
- 116 Aortic & peripheral arterial embolism or thrombosis
- 117 Other circulatory disease
- 118 Phlebitis, thrombophlebitis & thromboembolism
- 119 Varicose veins of lower extremity
- 120 Hemorrhoids
- 121 Other diseases of veins & lymphatics

CCS High Level Diagnosis Group 8: Diseases of the Respiratory System

- 122 Pneumonia (except that caused by tuberculosis or STD)
- 123 Influenza
- 124 Acute & chronic tonsillitis
- 125 Acute bronchitis
- 126 Other upper respiratory infections
- 127 Chronic obstructive pulmonary disease & bronchiectasis
- 128 Asthma
- 129 Aspiration pneumonitis, food/vomitus
- 130 Pleurisy, pneumothorax, pulmonary collapse
- 131 Respiratory failure, insufficiency, arrest (adult)
- 132 Lung disease due to external agents
- 133 Other lower respiratory disease
- 134 Other upper respiratory disease

CCS High Level Diagnosis Group 9: Diseases of the Digestive System

- 135 Intestinal infection
- 136 Disorders of teeth & jaw
- 137 Diseases of mouth, excluding dental
- 138 Esophageal disorders
- 139 Gastroduodenal ulcer (except hemorrhage)
- 140 Gastritis & duodenitis
- 141 Other disorders of stomach & duodenum

- 142 Appendicitis & other appendiceal conditions
- 143 Abdominal hernia
- 144 Regional enteritis & ulcerative colitis
- 145 Intestinal obstruction without hernia
- 146 Diverticulosis & diverticulitis
- 147 Anal & rectal conditions
- 148 Peritonitis & intestinal abscess
- 149 Biliary tract disease
- 150 Liver disease, alcohol-related
- 151 Other liver diseases
- 152 Pancreatic disorders (not diabetes)
- 153 Gastrointestinal hemorrhage
- 154 Noninfectious gastroenteritis
- 155 Other gastrointestinal disorders

CCS High Level Diagnosis Group 10: Diseases of the Genitourinary System

- 156 Nephritis, nephrosis, renal sclerosis
- 157 Acute & unspecified renal failure
- 158 Chronic renal failure
- 159 Urinary tract infections
- 160 Calculus of urinary tract
- 161 Other diseases of kidney & ureters
- 162 Other diseases of bladder & urethra
- 163 Genitourinary symptoms & ill-defined conditions
- 164 Hyperplasia of prostate
- 165 Inflammatory conditions of male genital organs
- 166 Other male genital disorders
- 167 Nonmalignant breast conditions
- 168 Inflammatory diseases of female pelvic organs
- 169 Endometriosis
- 170 Prolapse of female genital organs
- 171 Menstrual disorders
- 172 Ovarian cyst
- 173 Menopausal disorders
- 174 Female infertility
- 175 Other female genital disorders

CCS High Level Diagnosis Group 11: Contraception and Complications of Pregnancy and Childbirth

- 176 Contraceptive & procreative management
- 177 Spontaneous abortion
- 178 Induced abortion
- 179 Postabortion complications

- 180 Ectopic pregnancy
- 181 Other complications of pregnancy
- 182 Hemorrhage during pregnancy, abruptio placenta, placenta previa
- 183 Hypertension complicating pregnancy, childbirth & the puerperium
- 184 Early or threatened labor
- 185 Prolonged pregnancy
- 186 Diabetes or abnormal glucose tolerance complicating pregnancy, childbirth or the puerperium
- 187 Malposition, malpresentation
- 188 Fetopelvic disproportion, obstruction
- 189 Previous C-section
- 190 Fetal distress & abnormal forces of labor
- 191 Polyhydramnios & other problems of amniotic cavity
- 192 Umbilical cord complication
- 193 Trauma to perineum & vulva
- 194 Forceps delivery
- 195 Other complications of birth, puerperium affecting management of mother
- 196 Normal pregnancy and/or delivery

CCS High Level Diagnosis Group 12: Diseases of the Skin and Subcutaneous Tissue

- 197 Skin & subcutaneous tissue infections
- 198 Other inflammatory condition of skin
- 199 Chronic ulcer of skin
- 200 Other skin disorders

CCS High Level Diagnosis Group 13: Musculoskeletal System and Connective Tissue

- 201 Infective arthritis & osteomyelitis (except that caused by tuberculosis or sexually transmitted disease)
- 202 Rheumatoid arthritis & related disease
- 203 Osteoarthritis
- 204 Other non-traumatic joint disorders
- 205 Spondylosis, intervertebral disc disorders, other back problems
- 206 Osteoporosis
- 207 Pathological fracture
- 208 Acquired foot deformities
- 209 Other acquired deformities
- 210 Systemic lupus erythematosus & connective tissue disorders
- 211 Other connective tissue disease
- 212 Other bone disease & musculoskeletal deformities

CCS High Level Diagnosis Group 14: Congenital Anomalies

- 213 Cardiac & circulatory congenital anomalies
- 214 Digestive congenital anomalies
- 215 Genitourinary congenital anomalies
- 216 Nervous system congenital anomalies
- 217 Other congenital anomalies

CCS High Level Diagnosis Group 15: Conditions Originating in the Perinatal Period

- 218 Liveborn
- 219 Short gestation, low birth weight & fetal growth retardation
- 220 Intrauterine hypoxia & birth asphyxia
- 221 Respiratory distress syndrome
- 222 Hemolytic jaundice & perinatal jaundice
- 223 Birth trauma
- 224 Other perinatal conditions

CCS High Level Diagnosis Group 16: Injury and Poisoning

- 225 Joint disorders & dislocations, trauma-related
- 226 Fracture of neck of femur (hip)
- 227 Spinal cord injury
- 228 Skull & face fractures
- 229 Fracture of upper limb
- 230 Fracture of lower limb
- 231 Other fractures
- 232 Sprains & strains
- 233 Intracranial injury
- 234 Crushing injury or internal injury
- 235 Open wounds of head, neck & trunk
- 236 Open wounds of extremities
- 237 Complication of device, implant or graft
- 238 Complications of surgical procedures or medical care
- 239 Superficial injury, contusion
- 240 Burns
- 241 Poisoning by psychotropic agents
- 242 Poisoning by other medications & drugs
- 243 Poisoning by nonmedicinal substances
- 244 Other injuries & conditions due to external causes

CCS High Level Diagnosis Group 17: Symptoms, Signs and Ill-Defined Conditions

- 245 Syncope

- 246 Fever of unknown origin
- 247 Lymphadenitis
- 248 Gangrene
- 249 Shock
- 250 Nausea & vomiting
- 251 Abdominal pain
- 252 Malaise & fatigue
- 253 Allergic reactions
- 254 Rehabilitation care, fitting of prostheses & adjustment of devices
- 255 Administrative/social admission
- 256 Medical examination/evaluation
- 257 Other aftercare
- 258 Other screening for suspected conditions (not mental disorders or infectious disease)

CCS High Level Diagnosis Group 18: Residual Codes, Unclassified, All E codes (External Cause Codes)

- 259 Residual codes; unclassified
- 2601 E codes: Cut/pierce
- 2602 E codes: Drowning/submersion
- 2603 E codes: Fall
- 2604 E codes: Fire/burn
- 2605 E codes: Firearm
- 2606 E codes: Machinery
- 2607 E codes: Motor vehicle traffic (MVT)
- 2608 E codes: Pedal cyclist; not MVT
- 2609 E codes: Pedestrian; not MVT
- 2610 E codes: Transport; not MVT
- 2611 E codes: Natural/environment
- 2612 E codes: Overexertion
- 2613 E codes: Poisoning
- 2614 E codes: Struck by; against
- 2615 E codes: Suffocation
- 2616 E codes: Adverse effects of medical care
- 2617 E codes: Adverse effects of medical drugs
- 2618 E codes: Other specified and classifiable
- 2619 E codes: Other specified; not elsewhere classified (NEC)
- 2620 E codes: Unspecified
- 2621 E codes: Place of occurrence

APPENDIX F

Clinical Classifications Software (CCS) High-Level and Single-Level Procedure Categories

CCS High Level Procedure Group 1: Operations on the Nervous System

- 1 Incision and excision of CNS
- 2 Insertion, replacement, or removal of extracranial ventricular shunt
- 3 Laminectomy, excision intervertebral disc
- 4 Diagnostic spinal tap
- 5 Insertion of catheter or spinal stimulator and injection into spinal canal
- 6 Decompression peripheral nerve
- 7 Other diagnostic nervous system procedures
- 8 Other non-OR or closed therapeutic nervous system procedures
- 9 Other OR therapeutic nervous system procedures

CCS High Level Procedure Group 2: Operations on the Endocrine System

- 10 Thyroidectomy, partial or complete
- 11 Diagnostic endocrine procedures
- 12 Other therapeutic endocrine procedures

CCS High Level Procedure Group 3: Operations on the Eye

- 13 Corneal transplant
- 14 Glaucoma procedures
- 15 Lens and cataract procedures
- 16 Repair of retinal tear, detachment
- 17 Destruction of lesion of retina and choroid
- 18 Diagnostic procedures on eye
- 19 Other therapeutic procedures on eyelids, conjunctiva, cornea
- 20 Other intraocular therapeutic procedures
- 21 Other extraocular muscle and orbit therapeutic procedures

CCS High Level Procedure Group 4: Operations on the Ear

- 22 Tympanoplasty
- 23 Myringotomy
- 24 Mastoidectomy
- 25 Diagnostic procedures on ear
- 26 Other therapeutic ear procedures

CCS High Level Procedure Group 5: Operations on the Nose, Mouth and Pharynx

- 27 Control of epistaxis
- 28 Plastic procedures on nose

- 29 Dental procedures
- 30 Tonsillectomy and/or adenoidectomy
- 31 Diagnostic procedures on nose, mouth and pharynx
- 32 Other non-OR therapeutic procedures on nose, mouth and pharynx
- 33 Other OR therapeutic procedures on nose, mouth and pharynx

CCS High Level Procedure Group 6: Operations on the Respiratory System

- 34 Tracheostomy, temporary and permanent
- 35 Tracheoscopy and laryngoscopy with biopsy
- 36 Lobectomy or pneumonectomy
- 37 Diagnostic bronchoscopy and biopsy of bronchus
- 38 Other diagnostic procedures on lung and bronchus
- 39 Incision of pleura, thoracentesis, chest drainage
- 40 Other diagnostic procedures of respiratory tract and mediastinum
- 41 Other non-OR therapeutic procedures on respiratory system
- 42 Other OR therapeutic procedures on respiratory system

CCS High Level Procedure Group 7: Operations on the Cardiovascular System

- 43 Heart valve procedures
- 44 Coronary artery bypass graft (CABG)
- 45 Percutaneous transluminal coronary angioplasty (PTCA)
- 46 Coronary thrombolysis
- 47 Diagnostic cardiac catheterization, coronary arteriography
- 48 Insertion, revision, replacement, removal of cardiac pacemaker or cardioverter/defibrillator
- 49 Other OR heart procedures
- 50 Extracorporeal circulation auxiliary to open heart procedures
- 51 Endarterectomy, vessel of head and neck
- 52 Aortic resection, replacement or anastomosis
- 53 Varicose vein stripping, lower limb
- 54 Other vascular catheterization, not heart
- 55 Peripheral vascular bypass
- 56 Other vascular bypass and shunt, not heart
- 57 Creation, revision and removal of arteriovenous fistula or vessel-to-vessel cannula for dialysis
- 58 Hemodialysis
- 59 Other OR procedures on vessels of head and neck

- 60 Embolectomy and endarterectomy of lower limbs
- 61 Other OR procedures on vessels other than head and neck
- 62 Other diagnostic cardiovascular procedures
- 63 Other non-OR therapeutic cardiovascular procedures

CCS High Level Procedure Group 8: Operations on the Hemic and Lymphatic System

- 64 Bone marrow transplant
- 65 Bone marrow biopsy
- 66 Procedures on spleen
- 67 Other therapeutic procedures, hemic and lymphatic system

CCS High Level Procedure Group 9: Operations on the Digestive System

- 68 Injection or ligation of esophageal varices
- 69 Esophageal dilatation
- 70 Upper gastrointestinal endoscopy, biopsy
- 71 Gastrostomy, temporary and permanent
- 72 Colostomy, temporary and permanent
- 73 Ileostomy and other enterostomy
- 74 Gastrectomy, partial and total
- 75 Small bowel resection
- 76 Colonoscopy and biopsy
- 77 Proctoscopy and anorectal biopsy
- 78 Colorectal resection
- 79 Local excision of large intestine lesion (not endoscopic)
- 80 Appendectomy
- 81 Hemorrhoid procedures
- 82 Endoscopic retrograde cannulation of pancreas (ERCP)
- 83 Biopsy of liver
- 84 Cholecystectomy and common duct exploration
- 85 Inguinal and femoral hernia repair
- 86 Other hernia repair
- 87 Laparoscopy
- 88 Abdominal paracentesis
- 89 Exploratory laparotomy
- 90 Excision, lysis peritoneal adhesions
- 91 Peritoneal dialysis
- 92 Other bowel diagnostic procedures
- 93 Other non-OR upper GI therapeutic procedures
- 94 Other OR upper GI therapeutic procedures
- 95 Other non-OR lower GI therapeutic procedures
- 96 Other OR lower GI therapeutic procedures
- 97 Other gastrointestinal diagnostic procedures

- 98 Other non-OR gastrointestinal therapeutic procedures
- 99 Other OR gastrointestinal therapeutic procedures

CCS High Level Procedure Group 10: Operations on the Urinary System

- 100 Endoscopy and endoscopic biopsy of the urinary tract
- 101 Transurethral excision, drainage, or removal urinary obstruction
- 102 Ureteral catheterization
- 103 Nephrotomy and nephrostomy
- 104 Nephrectomy, partial or complete
- 105 Kidney transplant
- 106 Genitourinary incontinence procedures
- 107 Extracorporeal lithotripsy, urinary
- 108 Indwelling catheter
- 109 Procedures on the urethra
- 110 Other diagnostic procedures of urinary tract
- 111 Other non-OR therapeutic procedures of urinary tract
- 112 Other OR therapeutic procedures of urinary tract

CCS High Level Procedure Group 11: Operations on the Male Genital Organs

- 113 Transurethral resection of prostate (TURP)
- 114 Open prostatectomy
- 115 Circumcision
- 116 Diagnostic procedures, male genital
- 117 Other non-OR therapeutic procedures, male genital
- 118 Other OR therapeutic procedures, male genital

CCS High Level Procedure Group 12: Operations on the Female Genital Organs

- 119 Oophorectomy, unilateral and bilateral
- 120 Other operations on ovary
- 121 Ligation of fallopian tubes
- 123 Other operations on fallopian tubes
- 124 Hysterectomy, abdominal and vaginal
- 125 Other excision of cervix and uterus
- 126 Abortion (termination of pregnancy)
- 127 Dilatation and curettage (D&C), aspiration after delivery or abortion
- 128 Diagnostic dilatation and curettage (D&C)
- 129 Repair of cystocele and rectocele, obliteration of vaginal vault
- 130 Other diagnostic procedures, female organs
- 131 Other non-OR therapeutic procedures, female organs
- 132 Other OR therapeutic procedures, female organs

CCS High Level Procedure Group 13: Obstetrical Procedures

- 122 Removal of ectopic pregnancy
- 133 Episiotomy
- 134 Cesarean section
- 135 Forceps, vacuum, and breech delivery
- 136 Artificial rupture of membranes to assist delivery
- 137 Other procedures to assist delivery
- 138 Diagnostic amniocentesis
- 139 Fetal monitoring
- 140 Repair of current obstetric laceration
- 141 Other therapeutic obstetrical procedures

CCS High Level Procedure Group 14: Operations on the Musculoskeletal System

- 142 Partial excision bone
- 143 Bunionectomy or repair of toe deformities
- 144 Treatment, facial fracture or dislocation
- 145 Treatment, fracture or dislocation of radius and ulna
- 146 Treatment, fracture or dislocation of hip and femur
- 147 Treatment, fracture or dislocation of lower extremity (other than hip or femur)
- 148 Other fracture and dislocation procedure
- 149 Arthroscopy
- 150 Division of joint capsule, ligament or cartilage
- 151 Excision of semilunar cartilage of knee
- 152 Arthroplasty knee
- 153 Hip replacement, total and partial
- 154 Arthroplasty other than hip or knee
- 155 Arthrocentesis
- 156 Injections and aspirations of muscles, tendons, bursa, joints and soft tissue
- 157 Amputation of lower extremity
- 158 Spinal fusion
- 159 Other diagnostic procedures on musculoskeletal system
- 160 Other therapeutic procedures on muscles and tendons
- 161 Other OR therapeutic procedures on bone
- 162 Other OR therapeutic procedures on joints
- 163 Other non-OR therapeutic procedures on musculoskeletal system
- 164 Other OR therapeutic procedures on musculoskeletal system

CCS High Level Procedure Group 15: Operations on the Integumentary System

- 165 Breast biopsy and other diagnostic procedures on breast
- 166 Lumpectomy, quadrantectomy of breast
- 167 Mastectomy

- 168 Incision and drainage, skin and subcutaneous tissue
- 169 Debridement of wound, infection or burn
- 170 Excision of skin lesion
- 171 Suture of skin and subcutaneous tissue
- 172 Skin graft
- 173 Other diagnostic procedures on skin and subcutaneous tissue
- 174 Other non-OR therapeutic procedures on skin and breast
- 175 Other OR therapeutic procedures on skin and breast

CCS High Level Procedure Group 16: Miscellaneous Diagnostic and Therapeutic Procedures

- 176 Other organ transplantation
- 177 Computerized axial tomography (CT) scan head
- 178 CT scan chest
- 179 CT scan abdomen
- 180 Other CT scan
- 181 Myelogram
- 182 Mammography
- 183 Routine chest X-ray
- 184 Intraoperative cholangiogram
- 185 Upper gastrointestinal X-ray
- 186 Lower gastrointestinal X-ray
- 187 Intravenous pyelogram
- 188 Cerebral arteriogram
- 189 Contrast aortogram
- 190 Contrast arteriogram of femoral and lower extremity arteries
- 191 Arterio- or venogram (not heart and head)
- 192 Diagnostic ultrasound of head and neck
- 193 Diagnostic ultrasound of heart (echocardiogram)
- 194 Diagnostic ultrasound of gastrointestinal tract
- 195 Diagnostic ultrasound of urinary tract
- 196 Diagnostic ultrasound of abdomen or retroperitoneum
- 197 Other diagnostic ultrasound
- 198 Magnetic resonance imaging
- 199 Electroencephalogram (EEG)
- 200 Nonoperative urinary system measurements
- 201 Cardiac stress tests
- 202 Electrocardiogram
- 203 Electrographic cardiac monitoring
- 204 Swan-Ganz catheterization for monitoring
- 205 Arterial blood gases
- 206 Microscopic examination (bacterial smear, culture, toxicology)
- 207 Radioisotope bone scan

- 208 Radioisotope pulmonary scan
- 209 Radioisotope scan and function studies
- 210 Other radioisotope scan
- 211 Therapeutic radiology
- 212 Diagnostic physical therapy
- 213 Physical therapy exercises, manipulation, and other procedures
- 214 Traction, splints, and other wound care
- 215 Other physical therapy and rehabilitation
- 216 Respiratory intubation and mechanical ventilation
- 217 Other respiratory therapy
- 218 Psychological and psychiatric evaluation and therapy
- 219 Alcohol and drug rehabilitation/detoxification
- 220 Ophthalmologic and otologic diagnosis and treatment
- 221 Nasogastric tube
- 222 Blood transfusion
- 223 Enteral and parenteral nutrition
- 224 Cancer chemotherapy
- 225 Conversion of cardiac rhythm
- 226 Other diagnostic radiology and related techniques
- 227 Other diagnostic procedures (interview, evaluation, consultation)
- 228 Prophylactic vaccinations and inoculations
- 229 Nonoperative removal of foreign body
- 230 Extracorporeal shock wave lithotripsy, other than urinary
- 231 Other therapeutic procedures

APPENDIX G
Crosswalk for Revenue Code to Primary Cost Center

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0250	Pharmacy	5600	Drugs Charged to Patients
0251	Pharmacy: Generic	5600	Drugs Charged to Patients
0252	Pharmacy: Nongeneric	5600	Drugs Charged to Patients
0254	Pharmacy: Incident to other diagnostic services	5600	Drugs Charged to Patients
0255	Pharmacy: Incident to radiology	5600	Drugs Charged to Patients
0256	Pharmacy: Experimental drugs	5600	Drugs Charged to Patients
0257	Pharmacy: Non-prescription	5600	Drugs Charged to Patients
0258	Pharmacy: IV solutions	5600	Drugs Charged to Patients
0259	Pharmacy: Other	5600	Drugs Charged to Patients
0260	IV Therapy	4800	Intravenous Therapy
0261	IV Therapy: Infusion pump	4800	Intravenous Therapy
0262	IV Therapy: IV Therapy, pharm services	4800	Intravenous Therapy
0263	IV Therapy: IV Therapy/drug/supp/delivery	4800	Intravenous Therapy
0264	IV Therapy: supplies	4800	Intravenous Therapy
0269	IV Therapy: Other IV therapy	4800	Intravenous Therapy
0270	Medical/Surgical Supplies	5500	Med Supplies Charged to Patient
0271	Medical/Surgical Supplies: Nonsterile supplies	5500	Med Supplies Charged to Patient
0272	Medical/Surgical Supplies: Sterile supplies	5500	Med Supplies Charged to Patient
0273	Medical/Surgical Supplies: Take home supplies	5500	Med Supplies Charged to Patient
0274	Medical/Surgical Supplies: Prosthetic/Orthotic devices	3540	Prosthetic Devices
0275	Medical/Surgical Supplies: Pacemaker	3540	Prosthetic Devices
0276	Medical/Surgical Supplies: Intraocular lens	3540	Prosthetic Devices
0278	Medical/Surgical Supplies: Other implants	5500	Med Supplies Charged to Patient
0279	Medical/Surgical Supplies: Other supplies/devices	5500	Med Supplies Charged to Patient
0280	Oncology	3480	Oncology
0289	Oncology: Other oncology	3480	Oncology
0299	Durable Medical Equipment: Other equipment	6700	Durable Medical Equip. - Sold
0300	Laboratory - Clinical Diagnostic	3390	Laboratory - Clinical
0301	Laboratory - Clinical Diagnostic: Chemistry	3180	Chemistry
0302	Laboratory - Clinical Diagnostic: Immunology	3380	Immunology
0303	Laboratory - Clinical Diagnostic: Renal patient (home)	3390	Laboratory - Clinical
0304	Laboratory - Clinical Diagnostic: Nonroutine dialysis	3390	Laboratory - Clinical
0305	Laboratory - Clinical Diagnostic: Hematology	3350	Hematology

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0306	Laboratory - Clinical Diagnostic: Bacteriology/microbiology	3050	Bacteriology and Microbiology
0307	Laboratory - Clinical Diagnostic: Urology	3390	Laboratory - Clinical
0309	Laboratory - Clinical Diagnostic: Other laboratory	3390	Laboratory - Clinical
0310	Laboratory - Pathology	3420	Laboratory - Pathological
0311	Laboratory - Pathology: Cytology	3240	Laboratory - Pathological
0312	Laboratory - Pathology: Histology	3360	Histology
0314	Laboratory - Pathology: Biopsy	3060	Biopsy
0319	Laboratory - Pathology: Other	3420	Laboratory - Pathological
0320	Radiology - Diagnostic	4100	Radiology-Diagnostic
0321	Radiology - Diagnostic: Angiocardiology	3030	Angiocardiology
0322	Radiology - Diagnostic: Arthrography	4100	Radiology-Diagnostic
0323	Radiology - Diagnostic: Arteriography	3650	Vascular Lab
0324	Radiology - Diagnostic: Chest X-ray	4100	Radiology-Diagnostic
0329	Radiology - Diagnostic: Other	4100	Radiology-Diagnostic
0330	Radiology - Therapeutic	4200	Radiology-Therapeutic
0331	Radiology - Therapeutic: Chemotherapy - injected	3190	Chemotherapy
0332	Radiology - Therapeutic: Chemotherapy - oral	3190	Chemotherapy
0333	Radiology - Therapeutic: Radiation therapy	4200	Radiology-Therapeutic
0335	Radiology - Therapeutic: Chemotherapy - IV	3190	Chemotherapy
0339	Radiology - Therapeutic: Other	4200	Radiology-Therapeutic
0340	Nuclear Medicine	3450	Nuclear Medicine - Diagnostic
0341	Nuclear Medicine: Diagnostic	3450	Nuclear Medicine - Diagnostic
0342	Nuclear Medicine: Therapeutic	3470	Nuclear Medicine - Therapeutic
0343	Diagnostic Radiopharms	3450	Nuclear Medicine - Diagnostic
0344	Therapeutic Radiopharms	3470	Nuclear Medicine - Therapeutic
0349	Nuclear Medicine: Other	3450	Nuclear Medicine - Diagnostic
0350	CT Scan	3230	CAT Scan
0351	CT Scan: Head	3230	CAT Scan
0352	CT Scan: Body	3230	CAT Scan
0359	CT Scan: Other CT scans	3230	CAT Scan
0360	Operating Room Services	3700	Operating Room
0361	Operating Room Services: Minor surgery	3700	Operating Room
0362	Operating Room Services: Organ trnsplnt, not kidney	3700	Operating Room
0367	Operating Room Services: Kidney transplant	3700	Operating Room
0369	Operating Room Services: Other operating room services	3700	Operating Room
0370	Anesthesia	4000	Anesthesiology
0371	Anesthesia: Incident to radiology	4000	Anesthesiology
0372	Anesthesia: Incident to other diag services	4000	Anesthesiology

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0379	Anesthesia: Other anesthesia	4000	Anesthesiology
0380	Blood	4600	Whole Blood & Packed Red Blood Cells
0381	Blood: Packed red cells	4600	Whole Blood & Packed Red Blood Cells
0382	Blood: Whole blood	4600	Whole Blood & Packed Red Blood Cells
0383	Blood: Plasma	4600	Whole Blood & Packed Red Blood Cells
0384	Blood: Platelets	4600	Whole Blood & Packed Red Blood Cells
0385	Blood: Leukocytes	4600	Whole Blood & Packed Red Blood Cells
0386	Blood: Other components	4600	Whole Blood & Packed Red Blood Cells
0387	Blood: Other derivatives	4600	Whole Blood & Packed Red Blood Cells
0389	Blood: Other blood	4600	Whole Blood & Packed Red Blood Cells
0390	Blood Storage/Processing	4700	Blood Storing, Processing, & Trans.
0391	Blood: Administration (e.g. Transfusion)	4700	Blood Storing, Processing, & Trans.
0392	Blood: Processing and Storage	4700	Blood Storing, Processing, & Trans.
0399	Other blood handling	4700	Blood Storing, Processing, & Trans.
0400	Other Imaging Services	4100	Radiology - Diagnostic
0401	Other Imaging Services: Diagnostic mammography	3440	Mammography
0402	Other Imaging Services: Ultrasound	3630	Ultra Sound
0403	Other Imaging Services: Screening mammography	3440	Mammography
0404	Other Imaging Services: PET scan	3450	Nuclear Medicine-Diagnostic
0409	Other Imaging Services: Other imaging services	4100	Radiology - Diagnostic
0410	Respiratory Services	4900	Respiratory Therapy
0412	Respiratory Services: Inhalation services	4900	Respiratory Therapy
0413	Respiratory Services: Hyberbaric oxygen therapy	4900	Respiratory Therapy
0419	Respiratory Services: Other respiratory services	4900	Respiratory Therapy
0420	Physical Therapy	5000	Physical Therapy
0421	Physical Therapy: Visit charge	5000	Physical Therapy
0422	Physical Therapy: Hourly charge	5000	Physical Therapy
0423	Physical Therapy: Group rate	5000	Physical Therapy
0424	Physical Therapy: Evaluation/re-evaluation	5000	Physical Therapy
0429	Physical Therapy: Other physical therapy	5000	Physical Therapy
0430	Occupational Therapy	5100	Occupational Therapy
0431	Occupational Therapy: Visit charge	5100	Occupational Therapy
0432	Occupational Therapy: Hourly charge	5100	Occupational Therapy
0433	Occupational Therapy: Group rate	5100	Occupational Therapy
0434	Occupational Therapy: Evaluation/re-evaluation	5100	Occupational Therapy
0439	Occupational Therapy: Other occupational therapy	5100	Occupational Therapy
0440	Speech-Language Pathology	5200	Speech Pathology
0441	Speech-Language Pathology: Visit charge	5200	Speech Pathology

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0442	Speech-Language Pathology: Hourly charge	5200	Speech Pathology
0443	Speech-Language Pathology: Group rate	5200	Speech Pathology
0444	Speech-Language Pathology: Evaluation/ re-evaluation	5200	Speech Pathology
0449	Speech-Language Pathology: Other speech language pathology	5200	Speech Pathology
0450	Emergency Room	6100	Emergency
0451	Emergency Room: EM/EMTALA	6100	Emergency
0452	Emergency Room: ER/ Beyond EMTALA	6100	Emergency
0456	Emergency Room: Urgent care	6100	Emergency
0459	Emergency Room: Other emergency room	6100	Emergency
0460	Pulmonary Function	3560	Pulmonary Function Testing
0469	Pulmonary Function: Other	3560	Pulmonary Function Testing
0470	Audiology	3040	Audiology
0471	Audiology: Diagnostic	3040	Audiology
0472	Audiology: Treatment	3040	Audiology
0479	Audiology: Other audiology	3040	Audiology
0480	Cardiology	3140	Cardiology
0481	Cardiology: Cardiac catheter lab	3120	Cardiac Catheterization Laboratory
0482	Cardiology: Stress test	3620	Stress Test
0483	Cardiology: Echocardiology	3260	Echocardiography
0489	Cardiology: Other cardiology	3140	Cardiology
0490	Ambulatory Surgery	5800	ASC
0499	Ambulatory Surgery: Other ambulatory surgical care	5800	ASC
0510	Clinic	6000	Clinic
0511	Clinic: Chronic pain center	6000	Clinic
0512	Clinic: Dental clinic	3250	Dental Services
0513	Clinic: Psychiatric clinic	3550	Psychiatric/Psychological Services
0514	Clinic: OB/GYN clinic	6000	Clinic
0515	Clinic: Pediatric clinic	6000	Clinic
0516	Clinic: Urgent care clinic	6000	Clinic
0517	Clinic: Family clinic	4040	Family Practice
0519	Clinic: Other clinic	6000	Clinic
0530	Osteopathic Services	3530	Osteopathic Therapy
0531	Osteopathic Services: Osteopathic therapy	3530	Osteopathic Therapy
0539	Osteopathic Services: Other osteopathic services	3530	Osteopathic Therapy
0610	Magnetic Resonance Tech. (MRT)	3430	Magnetic Resonance Imaging (MRI)
0611	Magnetic Resonance Tech. (MRT): Brain (incl. Brainstem)	3430	Magnetic Resonance Imaging (MRI)
0612	Magnetic Resonance Tech. (MRT): Spinal cord (incl. spine)	3430	Magnetic Resonance Imaging (MRI)
0614	Magnetic Resonance Tech. (MRT): MRI - Other	3430	Magnetic Resonance Imaging (MRI)

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0615	Magnetic Resonance Tech. (MRT): MRA - Head and Neck	3430	Magnetic Resonance Imaging (MRI)
0616	Magnetic Resonance Tech. (MRT): MRA - Lower Ext	3430	Magnetic Resonance Imaging (MRI)
0618	Magnetic Resonance Tech. (MRT): MRA - Other	3430	Magnetic Resonance Imaging (MRI)
0619	Magnetic Resonance Tech. (MRT): Other MRT	3430	Magnetic Resonance Imaging (MRI)
0621	Med - Surg Supplies Ext. of 270: Incident to radiology	5500	Med Supplies Charged to Patient
0622	Med - Surg Supplies Ext. of 270: Incident to other diag.	5500	Med Supplies Charged to Patient
0623	Surgical dressings	5500	Med Supplies Charged to Patient
0624	Med - Surg Supplies Ext. of 270: Investigational Device (IDE)	5500	Med Supplies Charged to Patient
0631	Drugs Require Specific ID: Single source drug	5600	Drugs Charged to Patients
0632	Drugs Require Specific ID: Multiple source drug	5600	Drugs Charged to Patients
0633	Drugs Require Specific ID: Restrictive prescription	5600	Drugs Charged to Patients
0634	Drugs Require Specific ID: EPO under 10,000 units	5600	Drugs Charged to Patients
0635	Drugs Require Specific ID: EPO over 10,000 units	5600	Drugs Charged to Patients
0636	Drugs Require Specific ID: Drugs requiring detail coding	5600	Drugs Charged to Patients
0637	Drugs Require Specific ID: Self admin drugs (insulin admin in emergency-diabetes coma)	5600	Drugs Charged to Patients
0681	Trauma Response: Level I	6100	Emergency
0682	Trauma Response: Level II	6100	Emergency
0683	Trauma Response: Level III	6100	Emergency
0684	Trauma Response: Level IV	6100	Emergency
0689	Trauma Response: Other	6100	Emergency
0700	Cast Room	6000	Clinic
0710	Recovery Room	3800	Recovery Room
0720	Labor Room	3900	Delivery Room & Labor Room
0721	Labor Room: Labor	3900	Delivery Room & Labor Room
0722	Labor Room: Delivery	3900	Delivery Room & Labor Room
0723	Labor Room: Circumcision	3220	Circumcision
0724	Labor Room: Birthing center	3070	Birthing Center
0729	Labor Room: Other labor room/delivery	3900	Delivery Room & Labor Room
0730	EKG/ECG	3280	EKG and EEG
0731	EKG/ECG: Holter monitor	3370	Holter Monitor
0732	EKG/ECG: Telemetry	3280	EKG and EEG
0739	EKG/ECG: Other EKG/ECG	3280	EKG and EEG
0740	EEG	3280	EKG and EEG
0750	Gastrointestinal	3340	Gastro Intestinal Services
0760	Treatment/Observation Room	6000	Clinic
0761	Treatment/Observation Room: Treatment room	6000	Clinic
0762	Treatment/Observation Room: Observation room	6201	Observation Beds (Distinct Part)
0769	Treatment/Observation Room: Other treatment room	6000	Clinic

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0770	Preventive Care Services	6000	Clinic
0771	Preventive Care Services: Admin. of vaccine	6000	Clinic
0790	Extra-Corp Shock Wave Therapy	3640	Urology
0800	Inpatient Dialysis	5700	Renal Dialysis
0801	Inpatient Hemodialysis	5700	Renal Dialysis
0802	Inpatient peritoneal dialysis	5700	Renal Dialysis
0803	Inpatient dialysis CAPD	5700	Renal Dialysis
0804	Inpatient dialysis CCPD	5700	Renal Dialysis
0809	Other inp dialysis	5700	Renal Dialysis
0810	Organ Acquisition	8600	Other Organ Acquisition (Specify)
0811	Organ Acquisition: Living donor	8600	Other Organ Acquisition (Specify)
0812	Organ Acquisition: Cadaver donor	8600	Other Organ Acquisition (Specify)
0813	Organ Acquisition: Unknown donor	8600	Other Organ Acquisition (Specify)
0814	Organ Acquisition: Unsuccessful Organ Search Donor Bank Charges	8600	Other Organ Acquisition (Specify)
0819	Organ Acquisition: Other donor	8600	Other Organ Acquisition (Specify)
0820	Hemo OPD/Home	5700	Renal Dialysis
0821	Hemo OPD/Home: Hemodialysis comp or other rate	5700	Renal Dialysis
0822	Hemo OPD/Home supplies	5700	Renal Dialysis
0823	Hemo OPD/home equipment	5700	Renal Dialysis
0824	Hemo OPD/Home Maintenance 100%	5700	Renal Dialysis
0825	Hemo OPD/Home Support Services	5700	Renal Dialysis
0829	Hemo OPD/Home: Other HEMO outpatient	5700	Renal Dialysis
0830	Peritoneal OPD/Home	5700	Renal Dialysis
0831	Peritoneal OPD/Home: Peritoneal comp or other rate	5700	Renal Dialysis
0839	Peritoneal OPD/Home: Other peritoneal dialysis	5700	Renal Dialysis
0840	CAPD OPD/Home	5700	Renal Dialysis
0841	CAPD OPD/Home: CAPD comp or other rate	5700	Renal Dialysis
0849	CAPD OPD/Home: Other CAPD dialysis	5700	Renal Dialysis
0850	CCPD OPD/Home	5700	Renal Dialysis
0851	CCPD OPD/Home: CCPD comp or other rate	5700	Renal Dialysis
0859	CCPD OPD/Home: Other CCPD dialysis	5700	Renal Dialysis
0880	Miscellaneous Dialysis	5700	Renal Dialysis
0881	Miscellaneous Dialysis: Ultrafiltration	5700	Renal Dialysis
0889	Miscellaneous Dialysis: Other misc dialysis	5700	Renal Dialysis
0900	Psychiatric/Psychological Trt	3550	Psychiatric/Psychological Services
0901	Psychiatric/Psychological Trt: Electroshock treatment	3320	Electroshock Therapy
0902	Psychiatric/Psychological Trt: Milieu therapy	3550	Psychiatric/Psychological Services
0903	Psychiatric/Psychological Trt: Play therapy	3550	Psychiatric/Psychological Services

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0904	Psychiatric/Psychological Trt: Activity therapy	3580	Recreatonal Therapy
0905	Psychiatric/Psychological Trt: Intensive Outpatient serv-sych	3550	Psychiatric/Psychological Services
0906	Psychiatric/Psychological Trt: Intensive out serv - chem dep	3550	Psychiatric/Psychological Services
0907	Psychiatric/Psychological Trt: Comm behavioral program	3550	Psychiatric/Psychological Services
0911	Psychiatric/Psychological Svcs: Rehabilitation	3550	Psychiatric/Psychological Services
0912	Psychiatric/Psychological Svcs: Partial Hosp - less intensive	3550	Psychiatric/Psychological Services
0913	Psychiatric/Psychological Svcs: Partial Hosp - Intensive	3550	Psychiatric/Psychological Services
0914	Psychiatric/Psychological Svcs: Individual therapy	3550	Psychiatric/Psychological Services
0915	Psychiatric/Psychological Svcs: Group therapy	3550	Psychiatric/Psychological Services
0916	Psychiatric/Psychological Svcs: Family therapy	3550	Psychiatric/Psychological Services
0917	Psychiatric/Psychological Svcs: Biofeedback	3550	Psychiatric/Psychological Services
0918	Psychiatric/Psychological Svcs: Testing	3550	Psychiatric/Psychological Services
0919	Psychiatric/Psychological Svcs: Other behavioral treat/serv	3550	Psychiatric/Psychological Services
0921	Other Diagnostic Services: Peripheral vascular lab	3650	Vascular Lab
0922	Other Diagnostic Services: Electromyelogram	3290	Electromyography
0923	Other Diagnostic Services: Pap smear	3240	Cytology
0924	Other Diagnostic Services: Allergy test	3380	Immunology
0925	Other Diagnostic Services: Pregnancy test	3390	Laboratory - Clinical
0941	Other Therapeutic Serv: Recreation Rx	6000	Clinic
0942	Other Therapeutic Serv: Educ/training	6000	Clinic
0943	Other Therapeutic Serv: Cardiac rehab	3140	cardiology
0944	Other Therapeutic Serv: Drug rehab	3550	Psychiatric/Psychological Services
0945	Other Therapeutic Serv: Alcohol rehab	3550	Psychiatric/Psychological Services
0948	Pulmonary Rehabilitation	4900	respiratory
0001	Total Charge	N/A	
0022	HIPPS	N/A	
0023	HIPPS	N/A	
0024	HIPPS	N/A	
0100	All Inclusive Rate	N/A	
0101	All Inclusive Rate	N/A	
0110	Room & Board (Private)	N/A	
0111	Medical/Surgical/Gyn	N/A	
0112	OB	N/A	
0113	Pediatric	N/A	
0114	Psychiatric	N/A	
0115	Hospice	N/A	
0116	Detoxification	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0117	Oncology	N/A	
0118	Rehab	N/A	
0119	Other	N/A	
0120	Room & Board (Semi-Private 2 beds)	N/A	
0121	Medical/Surgical/Gyn	N/A	
0122	OB	N/A	
0123	Pediatric	N/A	
0124	Psychiatric	N/A	
0125	Hospice	N/A	
0126	Detoxification	N/A	
0127	Oncology	N/A	
0128	Rehab	N/A	
0129	Other	N/A	
0130	Room&Board (Semi private 3-4 beds)	N/A	
0131	Medical/Surgical/Gyn	N/A	
0132	OB	N/A	
0133	Pediatric	N/A	
0134	Psychiatric	N/A	
0135	Hospice	N/A	
0136	Detoxification	N/A	
0137	Oncology	N/A	
0138	Rehab	N/A	
0139	Other	N/A	
0140	Room & Board (Private Deluxe)	N/A	
0141	Medical/Surgical/Gyn	N/A	
0142	OB	N/A	
0143	Pediatric	N/A	
0144	Psychiatric	N/A	
0145	Hospice	N/A	
0146	Detoxification	N/A	
0147	Oncology	N/A	
0148	Rehab	N/A	
0149	Other	N/A	
0150	Room & Board (Ward)	N/A	
0151	Medical/Surgical/Gyn	N/A	
0152	OB	N/A	
0153	Pediatric	N/A	
0154	Psychiatric	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0155	Hospice	N/A	
0156	Detoxification	N/A	
0157	Oncology	N/A	
0158	Rehab	N/A	
0159	Other	N/A	
0160	Room & Board (other)	N/A	
0164	Sterile Environment	N/A	
0167	Self care	N/A	
0169	Other	N/A	
0170	Nursery	N/A	
0171	Newborn-Level I	N/A	
0172	Newborn-Level II	N/A	
0173	Newborn-Level III	N/A	
0174	Newborn-Level IV	N/A	
0179	Other Nursery	N/A	
0180	Leave of Absence	N/A	
0182	Patient Convenience	N/A	
0183	Therapeutic Leave	N/A	
0185	Hospitalization	N/A	
0189	Other leave of absence	N/A	
0190	Subacute care	N/A	
0191	Subacute care-Level I	N/A	
0192	Subacute care-Level II	N/A	
0193	Subacute care-Level III	N/A	
0194	Subacute care-Level IV	N/A	
0199	Other subacute care	N/A	
0200	Intensive care	N/A	
0201	Surgical	N/A	
0202	Medical	N/A	
0203	Pediatric	N/A	
0204	Psychiatric	N/A	
0206	Intermediate ICU	N/A	
0207	Burn care	N/A	
0208	Trauma	N/A	
0209	Other intensive care	N/A	
0210	Coronary care	N/A	
0211	Myocardial Infarction	N/A	
0212	Pulmonary Care	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0213	Heart Transplant	N/A	
0214	Intermediate CCU	N/A	
0219	Other Coronary Care	N/A	
0220	Special charges	N/A	
0221	Admission charge	N/A	
0222	Technical support charge	N/A	
0223	U.R. service charge	N/A	
0224	Late discharge, medically necessary	N/A	
0229	Other special charges	N/A	
0230	Incremental nursing charge rate	N/A	
0231	Nursery	N/A	
0232	OB	N/A	
0233	ICU	N/A	
0234	CCU	N/A	
0235	Hospice	N/A	
0239	Other	N/A	
0240	All inclusive Ancillary	N/A	
0241	Basic	N/A	
0242	Comprehensive	N/A	
0243	Specialty	N/A	
0249	Other all inclusive ancillary	N/A	
0253	Take home drugs	N/A	
0277	Oxygen-Take home	N/A	
0290	Durable Medical Equipment	N/A	
0291	DME Rental	N/A	
0292	Durable Medical Equipment: Purchase - new equipment	N/A	
0293	Purchase of used DME	N/A	
0294	Supplies/Drugs for DME effectiveness (HHA only)	N/A	
0374	Acupuncture	N/A	
0500	Outpatient services	N/A	
0509	Other Outpatient	N/A	
0520	Free-Standing Clinic	N/A	
0521	Rural health-clinic	N/A	
0522	Rural health-home	N/A	
0523	Family Practice Clinic	N/A	
0524	RHC/FQHC visit in Part A covered SNF	N/A	
0525	RHC/FQHC visit in noncovered SNF, NF, ICFMR or other	N/A	
0526	Urgent Care Clinic	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0527	Nurse visit to home in a HH shortage area	N/A	
0528	RHC/FQHC visit to other non RHC/FQHC site	N/A	
0529	Free-Standing Clinic: Other	N/A	
0540	Ambulance	N/A	
0541	Supplies	N/A	
0542	Medical Transport	N/A	
0543	Heart Mobile	N/A	
0544	Oxygen	N/A	
0545	Air ambulance	N/A	
0546	Neonatal ambulance services	N/A	
0547	Pharmacy	N/A	
0548	Telephone Transmission EKG	N/A	
0549	Other ambulance	N/A	
0550	Skilled nursing	N/A	
0551	Visit charge	N/A	
0552	Hourly charge	N/A	
0559	Other skilled nursing	N/A	
0560	Home Health (HH) -- Medical Social Services	N/A	
0561	Home Health (HH) Medical Social Services: Visit charge	N/A	
0562	Home Health (HH) Medical Social Services: Hourly charge	N/A	
0569	Home Health (HH) Medical Social Services: Other Medical Social Services	N/A	
0570	Home health-Home health aide	N/A	
0571	Visit charge	N/A	
0572	Hourly charge	N/A	
0579	Other home health aide	N/A	
0580	Home health-other visits	N/A	
0581	Visit charge	N/A	
0582	Hourly charge	N/A	
0583	Assessment	N/A	
0589	Other home health visit	N/A	
0590	Home health-units of service	N/A	
0600	Home health-oxygen	N/A	
0601	Oxygen-state/equip/suppl/ or cont	N/A	
0602	Oxygen-state/equip/suppl/ or under 1 LPM	N/A	
0603	Oxygen-state/equip/over 4 LPM	N/A	
0604	Oxygen-Portable Add-on	N/A	
0609	Other oxygen	N/A	
0640	Home IV Therapy Services	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0641	Nonroutine nursing, central line	N/A	
0642	IV site care, Central line	N/A	
0643	IV start/change, peripheral line	N/A	
0644	Nonroutine nursing, peripheral line	N/A	
0645	Training, patient/caregiver, central line	N/A	
0646	Training, disabled patient, central line	N/A	
0647	Training, patient/caregiver, peripheral line	N/A	
0648	Training, disabled patient, peripheral line	N/A	
0649	Other IV therapy services	N/A	
0650	Hospice service	N/A	
0651	Routine home care	N/A	
0652	Continuous home care	N/A	
0655	Inpatient respite care	N/A	
0656	General inpatient care (non-respite)	N/A	
0657	Physician services	N/A	
0658	Hospice Room & Board-Nursing facility	N/A	
0659	Other hospice service	N/A	
0660	Respite Care	N/A	
0661	Hourly Repite Care Charge Nursing	N/A	
0662	Hourly Respite Care Charge Aide/Homemaker/Companion	N/A	
0663	Daily Respite Charge	N/A	
0669	Other respite care	N/A	
0670	Outpatient Special Residence Charges	N/A	
0671	Hospital based	N/A	
0672	Contracted	N/A	
0679	Other special residence charge	N/A	
0680	Not Used	N/A	
0780	Telemedicine	N/A	
0832	Home supplies	N/A	
0833	Home equipment	N/A	
0834	Maintenance/100%	N/A	
0835	Support services	N/A	
0842	Home supplies	N/A	
0843	Home equipment	N/A	
0844	Maintenance/100%	N/A	
0845	Support services	N/A	
0852	Home supplies	N/A	
0853	Home equipment	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0854	Maintenance/100%	N/A	
0855	Support services	N/A	
0882	Home dialysis aid visit	N/A	
0920	Other Diagnostic Services	N/A	
0929	Other Diagnostic Services: Other diagnostic services	N/A	
0931	Medical rehab; half day	N/A	
0932	Medical rehab; full day	N/A	
0940	Other Therapeutic Serv	N/A	
0946	Complex medical equipment-Routine	N/A	
0947	Complex medical equipment-Ancillary	N/A	
0949	Other Therapeutic Serv: Additional RX SVS	N/A	
0951	Other therapeutic services-(940x) Athletic training	N/A	
0952	Other therapeutic services-(940x) Kinesiotherapy	N/A	
0960	Professional fees	N/A	
0961	Psychiatric	N/A	
0962	Ophthalmology	N/A	
0963	Anesthesiologist (MD)	N/A	
0964	Anesthetist (CRNA)	N/A	
0969	Other professional fee	N/A	
0971	Professional fees (096x) Laboratory	N/A	
0972	Professional fees (096x) Radiology-Diagnostic	N/A	
0973	Professional fees (096x) Radiology-Therapeutic	N/A	
0974	Professional fees (096x) Radiology-nuclear medicine	N/A	
0975	Professional fees (096x) Operating room	N/A	
0976	Professional fees (096x) Respiratory Therapy	N/A	
0977	Professional fees (096x) Physical therapy	N/A	
0978	Professional fees (096x) Occupational therapy	N/A	
0979	Professional fees (096x) Speech pathology	N/A	
0981	Professional fees (096x) Emergency room	N/A	
0982	Professional fees (096x) Outpatient services	N/A	
0983	Professional fees (096x) clinic	N/A	
0984	Professional fees (096x) medical social services	N/A	
0985	Professional fees (096x) EKG	N/A	
0986	Professional fees (096x) EEK	N/A	
0987	Professional fees (096x) Hospital visit	N/A	
0988	Professional fees (096x) Consultation	N/A	
0989	Private duty nurse	N/A	
0990	Patient convenience items	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0991	Cafeteria/guest tray	N/A	
0992	Private linen service	N/A	
0993	Telephone/telegraph	N/A	
0994	TV/radio	N/A	
0995	Nonpatient room rentals	N/A	
0996	Late discharge charge	N/A	
0997	Admission kits	N/A	
0998	Beauty shop/barber	N/A	
0999	Other patient convenience item	N/A	
1000	Behavioral health accomodations	N/A	
1001	Residential treatment-psychiatric	N/A	
1002	Residential treatment-chemical dependency	N/A	
1003	Supervised living	N/A	
1004	Halfway house	N/A	
1005	Group home	N/A	
2100	Alternative therapy services	N/A	
2101	Acupuncture	N/A	
2102	Acupressure	N/A	
2103	Massage	N/A	
2104	Reflexology	N/A	
2105	Biofeedback	N/A	
2106	Hypnosis	N/A	
2109	Other alternative therapy services	N/A	
3101	Adult day care, Medical and social, hourly	N/A	
3102	Adult day care, social, hourly	N/A	
3103	Adult day care, medical and social, daily	N/A	
3104	Adult day care, social, daily	N/A	
3105	Adult foster care, daily	N/A	
3109	Other adult care	N/A	

APPENDIX H Hospitals in this Report

Vermont Acute Care Hospitals

Brattleboro Memorial Hospital
(BRAT)
17 Belmont Avenue
Brattleboro, Vermont 05301

Central Vermont Medical Center
(CVMC)
P.O. Box 547
Barre, Vermont 05641

Copley Hospital
(COPL)
528 Washington Highway
Morrisville, Vermont 05661

Fletcher Allen Health Care
(FAHC)
111 Colchester Avenue
Burlington, Vermont 05401

Gifford Medical Center
(GIFF)
44 Main Street, P.O. Box 2000
Randolph, Vermont 05060

Grace Cottage Hospital
(GRAC)
Route 35, P.O. Box 216
Townshend, Vermont 05353

Mt. Ascutney Hospital and Health Center
(MT.A)
289 County Road
Windsor, Vermont 05089

North Country Hospital
(NCTY)
189 Prouty Drive
Newport, Vermont 05855

Northeastern Vermont Regional Hospital
(NEVT)
1315 Hospital Drive, P.O. Box 905
St. Johnsbury, Vermont 05819

Northwestern Medical Center
(NWST)
133 Fairfield Street, P.O. Box 1370
St. Albans, Vermont 05478

Porter Medical Center
(PORT)
115 Porter Drive
Middlebury, Vermont 05753

Rutland Regional Medical Center
(RRMC)
160 Allen Street
Rutland, Vermont 05701

Southwestern Vermont Medical Center
(SWVT)
100 Hospital Drive East
Bennington, Vermont 05201

Springfield Hospital
(SPRF)
25 Ridgewood Road, P.O. Box 2003
Springfield, Vermont 05156

The Veterans Administration Medical
and Regional Office Center (V.A.)
215 North Main Street
White River Junction, Vermont 05009

New Hampshire Hospitals Most Frequently Used by Vermont Residents

Alice Peck Day Memorial Hospital
(NH-Alice Day)
Lebanon, New Hampshire

Androscoggin Valley Hospital
(NH-Androscoggin)
Berlin, New Hampshire

Catholic Medical Center
(NH-Catholic)
Manchester, New Hampshire

Cheshire Medical Center
(NH-Cheshire)
Keene, New Hampshire

Concord Hospital
(NH-Concord)
Concord, New Hampshire

Cottage Hospital
(NH-Cottage)
Woodsville, New Hampshire

Dartmouth Hitchcock Medical Center
(NH-Hitchcock)
Lebanon, New Hampshire

Dartmouth Hitchcock Psychiatric Unit*
(NH-Hitch. Psych)
Lebanon, New Hampshire

Elliot Hospital
(NH-Elliot)
Manchester, New Hampshire

Exeter Hospital
(NH-Exeter)
Exeter, New Hampshire

Franklin Regional Hospital
(NH-Franklin)
Franklin, New Hampshire

Frisbie Memorial Hospital
(NH-Frisbie)
Rochester, New Hampshire

Huggins Hospital
(NH-Huggins)
Wolfeboro, New Hampshire

Lakes Region General Hospital
(NH-Lakes Region)
Laconia, New Hampshire

Littleton Hospital
(NH-Littleton)
Littleton, New Hampshire

Memorial Hospital
(NH-Memorial)
North Conway, New Hampshire

Monadnock Community Hospital
(NH-Monadnock)
Peterborough, New Hampshire

New London Hospital
(NH-New London)
New London, New Hampshire

Parkland Medical Center
(NH-Parkland)
Derry, New Hampshire

Portsmouth Regional Hospital
(NH-Portsmouth)
Portsmouth, New Hampshire

Southern New Hampshire Medical Center
(NH-Southern NH)
Nashua, New Hampshire

St. Joseph's Hospital
(NH-St. Joseph's)
Nashua, New Hampshire

Speare Memorial Hospital
(NH-Speare)
Plymouth, New Hampshire

Upper Connecticut Valley Hospital
(NH-Upper CT Val)
Colebrook, New Hampshire

Valley Regional Hospital
(NH-Valley Reg.)
Claremont, New Hampshire

Weeks Medical Center Hospital
(NH-Weeks)
Lancaster, New Hampshire

Wentworth-Douglass Hospital
(NH-Wntwth-Doug)
Dover, New Hampshire

* Records from the Dartmouth Hitchcock Psychiatric Unit are combined with the Dartmouth Hitchcock Medical Center beginning 2008.

Massachusetts Hospitals Most Frequently Used by Vermont Residents

Baystate Medical Center
(MA-Baystate)
Springfield, Massachusetts

Berkshire Medical Center
(MA-Berkshire)
Pittsfield, Massachusetts

Beth Israel Deaconess Medical Center
(MA-Beth Israel)
Boston, Massachusetts

Brigham and Women's Hospital
(MA-Brigham)
Boston, Massachusetts

Children's Hospital Boston
(MA-Children's)
Boston, Massachusetts

Cooley Dickinson Hospital
(MA-Cooley Dicki)
Northampton, Massachusetts

Dana-Farber Cancer Institute
(MA-Dana Farber)
Boston, Massachusetts

Franklin Medical Center
(MA-Franklin Med)
Greenfield, Massachusetts

Hillcrest Hospital
(MA-Hillcrest)
Pittsfield, Massachusetts

Lahey Clinic Hospital
(MA-Lahey)
Burlington, Massachusetts

Massachusetts Eye and Ear Infirmary
(MA-MA Eye & Ear)
Boston, Massachusetts

Massachusetts General Hospital
(MA-MA General)
Boston, Massachusetts

New England Baptist Hospital
(MA-N.E. Baptist)
Boston, Massachusetts

Newton-Wellesley Hospital
(MA-Newton Wells)
Newton, Massachusetts

North Adams Regional Hospital
(MA-North Adams)
North Adams, Massachusetts

Northampton VA Medical Center
(MA-Northampton)
Northampton, Massachusetts

Tufts-New England Medical Center
(MA-N.E. Med Ctr)
Boston, Massachusetts

UMass Memorial Medical Center
(MA-U Mass)
Worcester, Massachusetts

VA Boston Healthcare—Boston Division
(MA-Boston VA)
Boston, Massachusetts

VA Boston Healthcare—Brockton Division
(MA-Brockton VA)
Brockton, Massachusetts

New York Hospitals Most Frequently Used by Vermont Residents

Albany Medical Center Hospital
(NY-Albany)
Albany, New York

Champlain Valley Physicians Hospital
Medical Center (NY-Champ Val)
Plattsburgh, New York

Columbia Presbyterian Medical Center
(NY-Presbyterian)
New York, New York

Glens Falls Hospital
(NY-Glens Falls)
Glens Falls, New York

Leonard Hospital
(NY-Leonard)
Troy, New York

Mary McClellan Hospital
(NY-McClellan)
Cambridge, New York

Memorial Hospital for Cancer and Allied
Disorders (NY-Hosp for CA)
New York, New York

Moses-Ludington Hospital
(NY-Moses-Luding)
Ticonderoga, New York

New York United Hospital Medical Center
(NY-United Med C.)
Port Chester, New York

New York Weill Cornell Medical Center
(NY-New York)
New York, New York

Phelps Memorial Hospital Center
(NY-Phelps)
Sleepy Hollow, New York

Samaritan Hospital
(NY-Samaritan)
Troy, New York

St. Peters Hospital
(NY-St Peters)
Albany, New York

APPENDIX I
Vermont Hospital Discharge Data Elements
Public / Non Public Data Elements and Availability of Data Elements in Datasets

Attribute	Description	Public Use Data Element	Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Admission Date	--	N	Y	Y	Y
Admission Hour	--	N	Y	Y	Y
Admission Quarter	--	Y	Y	Y	Y
Admission Source	Transfer, referral, newborn and court/law enforcement categories.	Y	Y	Y	Y
Admission Type	Emergency, urgent, elective, newborns.	Y	Y	Y	Y
Age	Single-year age at discharge.	N	Y	Y	Y
Age Groups	Under 1, 1-17, 18-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75 and over.	Y	Y	Y	Y
Ambulatory Flag	Record having any procedure in the 00.00 - 86.99 range: This flag not used for inpatient records.	Y	N	Y	Y
Attending physician	Hospital-specific code for attending physician at time of discharge.	N	Y	Y	Y
Bill Type	Bill type as designated by the hospital.	Y	Y	Y	Y
Birth Weight	Birth weight of newborns in grams.	N	Y	N	N
Charges, Charges_HCIA	Total facility charges. See description in Users Guide.	Y	Y	Y	Y
Clinical Classifications Software (CCS) Single Level Diagnosis Groups	Principal diagnosis collapsed into more than 260 categories. See description in Users Guide.	Y	Y	Y	Y
Clinical Classifications Software (CCS) High Level Diagnosis Groups	CCS single level diagnosis groups collapsed into 18 high level categories. See description in Users Guide.	Y	Y	Y	Y
Clinical Classifications Software (CCS) Single Level Procedure Groups	Principal procedure collapsed into 231 categories. See description in Users Guide.	Y	Y	Y	Y
Clinical Classifications Software (CCS) High Level Procedure Groups	CCS single level procedure groups collapsed into 16 high level categories. See description in Users Guide.	Y	Y	Y	Y
County-Town Code	Patient county and town of residence with first two digits representing the county and the second two digits the town.	N	Y	Y	Y
Critical Access Hospital	Coded for VT hospitals only	Y	Y	Y	Y
Date of Birth	--	N	Y	Y	Y

Attribute	Description	Public Use Data Element	Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Diagnosis Related Group (DRG)	Medicare classification system that groups inpatient discharges into more than 900 categories based on diagnosis, type of treatment, age and other relevant criteria. See listing in Appendix B.	Y	Y	N	N
Discharge Date	--	N	Y	Y	Y
Discharge Quarter	--	Y	Y	Y	Y
Discharge Status	Categories indicating destination and type of services required at time of discharge, left against medical advice, or death.	Y	Y	Y	Y
Ecode	Code for external causes of injury and poisoning; primary Ecode appears in this field, secondary Ecodes may be entered as secondary diagnoses.	Y	Y	Y	Y
ERFLAG	Set to 1 if record has an associated revenue code beginning 45, Emergency Room.	Y	Y	Y	Y
Groupers	Groupers version used to assign DRG and MDC.	Y	Y	Y	Y
Hospital	--	Y	Y	Y	Y
Hospital Service Area	Defined by the geographically distinct population of Vermont residents who are highly dependent on a hospital or group of hospitals. See description in Users Guide.	Y	Y	Y	Y
Major Diagnostic Category (MDC)	An aggregation of DRGs (see definition of DRGs above) into 25 groups that define major body systems. See listings in Appendix A and Appendix B.	Y	Y	N	N
Other Physician 1 & 2	Hospital-specific code for other physicians performing procedures.	N	Y	Y	Y
Patient Days	Length of stay; maximum 255 days.	Y	Y	Y	Y
Primary Payer	The anticipated principal source of payment for the patient's hospital bill as coded by the hospital.	Y	Y	Y	Y
Principal and Secondary Procedure Dates	Date of procedure.	N	Y	Y	Y
Principal Diagnosis and Up to 19 Secondary Diagnoses	ICD-9-CM diagnosis code.	Y	Y	Y	Y

Attribute	Description	Public Use Data Element	Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Principal Procedure and Up to 19 Secondary Procedures	ICD-9-CM procedure code.	Y	Y	Y	Y
Race	--	N	Y	Y	Y
Readmission indicator	Any patient readmitted to the same hospital within 30 days.	N	Y	Y	Y
Same Day Flag	Admission and discharge were on the same day: not an overnight stay.	Y	Y	Y	N
Sex	--	Y	Y	Y	Y
Special Care Unit Days	Number of days spent in a special care unit: Inpatient only.	Y	Y	N	N
Year of Discharge	--	Y	Y	Y	Y
ZIP Code	5-digit ZIP code.	N	Y	Y	Y
ZIP Code Groups	3-digit ZIP for most of Vermont ; combined 058 and 059 area; 5-digit ZIP for areas with a population over 10,000 in Vermont and combined zips in other states.	Y	Y	Y	Y
ZipTown Code	Groups of towns that share ZIP code(s).	N	Y	Y	Y

Public use data for resident and non-resident discharges from Vermont hospitals are available online by calendar year.

<http://healthvermont.gov/research/hospital-utilization.aspx>

For additional information, contact:

Vermont Department of Health
Public Health Statistics
108 Cherry Street, PO Box 70
Burlington, VT 05402-0070
(802) 863-7300 or (800) 869-2871

Non-public data elements are available for research purposes only. To request non-public data elements, contact:

Green Mountain Care Board
89 Main Street, Drawer 20
Montpelier, VT 05620-3601
(802) 828-2906

