

2016 Hospital Report Card

All Vermont Acute Care Community Hospitals

Table 2B - Counts of Top 2014 Outpatient Procedures

Procedures displayed include the number of cases for each community hospital's top outpatient surgical procedures by volume for the period of 10/1/2013 to 9/30/2014. Hospital System Number of Cases and Average Gross Charges include all hospitals. For individual hospitals, procedures having fewer than 15 cases are excluded. Blanks in the table indicate that the hospital has fewer than 15 cases for that procedure or the hospital does not perform that procedure. The hospital, however, may perform a similar procedure under a different code which may not be shown. Please call the hospital for more information. Note: the surgical cases shown include some anesthetic procedures for the treatment of pain not connected with surgery.

NOTE: Gifford Medical Center's data was updated in July, 2016. This dataset includes Gifford Medical Center in all of the calculations.

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* "Clinical Classification System" (CCS) groups similar ICD-9 codes or similar CPT codes, such as all those affecting a given organ system of the body. "No data" indicates that no procedure in that particular grouping meets the minimum limits based on the methodology described above.

Outpatient Procedures		Hospital System		Vermont Community Hospitals - Counts Displayed Include Each Hospital's Top Outpatient Procedures By Volume														
CCS high and single level groups ¹	Procedure Description	System Number of Cases ²	System Average Gross Charges ³	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Gifford Medical Center ⁴	Grace Cottage Hospital	Mt. Ascutney Hospital ⁵	North Country Hospital ⁵	Northeastern Vermont Regional Hospital	Northwestern Medical Center	Porter Medical Center	Rutland Regional Medical Center	Southwestern Vermont Medical Center	Springfield Hospital ⁵	University of Vermont Medical Center	
CCS 1: Operations on the Nervous System																		
5	Insertion of catheter or spinal stimulator, injection into spinal canal	3349	\$2,123	57	372	154	19		57	182	27	167		1,000	216			1,098
6	Decompression peripheral nerve	1631	\$4,634	108	140	95	42			82	58	116	93	117	19	79		669
8	Other non-OR or closed therapeutic nervous system procedures	774	\$3,647	16	50	58			19	16	22	15		72				498
9	Other OR therapeutic nervous system procedures	1163	\$9,186			16					15			47				1,039
CCS 3: Operations on the Eye																		
14	Glaucoma procedures	135	\$3,547								25			16				76
15	Lens & cataract procedures	4421	\$5,471	498	632	115	132		273	369	551	281	497	373		178		508
19	Other therapeutic procedures on eyelids, conjunctiva, cornea	306	\$4,682									16	32					205
20	Other intraocular therapeutic procedures	1978	\$5,746											22				1,939
21	Other extraocular muscle & orbit therapeutic procedures	105	\$7,501				41											61
CCS 4: Operations on the Ear																		
23	Myringotomy	843	\$3,278		38						15		124	94	21	15		504
26	Other therapeutic ear procedures	738	\$4,173											356				310
CCS 5: Operations on the Nose, Mouth, and Pharynx																		
29	Dental procedures	575	\$8,523	17		113								33	119	39		249
30	Tonsillectomy and/or adenoidectomy	717	\$6,079		71				20	49	26		105	83	46	21		278
31	Diagnostic procedures on nose, mouth & pharynx	977	\$1,442											415				542
33	Other OR therapeutic procedures on nose, mouth & pharynx	491	\$11,606		31					28			39	46				279
CCS 6: Operations on the Respiratory System																		
35	Tracheoscopy & laryngoscopy with biopsy	1653	\$834		20									961				653
CCS 7: Operations on the Cardiovascular System																		
54	Other vascular catheterization, not heart	765	\$5,334	21	28									29	44			619
61	Other OR procedures on vessels other than head & neck	682	\$21,655	18	19					15					33			574
63	Other non-OR therapeutic cardiovascular procedures	744	\$2,116	16	47	49				86	47	50		101	59			273

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CCS 9: Operations on the Digestive System																		
70	Upper gastrointestinal endoscopy, biopsy	5112	\$3,102	264	435	119	33		132	212	141	521	86	604	360	247	1,958	
76	Colonoscopy & biopsy	14081	\$3,101	623	1,347	487	252		484	606	391	1,224	615	1,371	978	732	4,971	
77	Proctoscopy & anorectal biopsy	453	\$2,755	40	22				30			26	24	20	48	24	185	
84	Cholecystectomy & common duct exploration	1100	\$11,536	55	114	38			31	57	42	191	40	113	101	30	278	
85	Inguinal & femoral hernia repair	1205	\$10,220	65	122	46	21		26	65	47	92	59	112	127	36	387	
86	Other hernia repair	888	\$10,428	39	69	24			22	30	35	94	45	112	108	21	269	
88	Abdominal paracentesis	269	\$2,275		17					34					42		124	
93	Other non-OR upper GI therapeutic procedures	371	\$4,142										87	22			208	
95	Other non-OR lower GI therapeutic procedures	8104	\$3,856	156	957	342	69		209	125	245	408	617	884	1,009	133	2,950	
CCS 10: Operations on the Urinary System																		
100	Endoscopy & endoscopic biopsy of the urinary tract	2156	\$2,138		151	83	43							34	22		1,793	
101	Transurethral excision, drainage, rem urinary obstruction	753	\$9,319	46	62	17	29				19	24	28	79	60		378	
107	Extracorporeal lithotripsy, urinary	206	\$12,440			16	19							37	25		70	
108	Indwelling catheter	261	\$940			18											214	
CCS 12: Operations on the Female Genital Organs																		
121	Ligation of fallopian tubes	298	\$8,047	23	25	25				22		40		38	41		53	
124	Hysterectomy, abdominal & vaginal	561	\$19,529	31			16			21		30		71	30	16	305	
125	Other excision of cervix & uterus	557	\$7,971	41	25	25				16	18	108	15	46	69	31	154	
128	Diagnostic dilatation & curettage (D&C)	460	\$6,071	24	58	15						24		33	80	40	155	
130	Other diagnostic procedures, female organs	490	\$4,615	31	31	64				35	18	26		17	31	25	196	
CCS 13: Obstetrical Procedures																		
139	Fetal monitoring	3124	\$777	115	685	116	414			775	175	106	38	78	198	69	355	

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CCS 14: Operations on the Musculoskeletal System																	
142	Partial excision bone	367	\$9,904	18		29	27				22			32	27		166
143	Bunionectomy or repair of toe deformities	608	\$10,806			25	90		18		43	51	34	16	81	21	196
145	Treatment, fracture or dislocation of radius & ulna	452	\$13,188	24	49	38				18	17	18	37	37	30		164
147	Treatment, fracture or dislocation of lower extremity	665	\$12,338	30	53	66				31		30	36	71	64	15	236
148	Other fracture & dislocation procedure	569	\$13,054	17	50	72				29		35	19	57	29	16	218
149	Arthroscopy	405	\$20,792			74						24	15	73	15		143
151	Excision of semilunar cartilage of knee	1287	\$7,584	138	96	76	41		15	22	51	69	42	168	94	38	437
155	Arthrocentesis	905	\$715			24	107							293			446
156	Injections & aspirations of muscles, tendons, etc.	692	\$1,394		23	82	15							32			530
157	Amputation of lower extremity	138	\$6,224				19										63
160	Other therapeutic procedures on muscles & tendons	2632	\$9,333	158	168	226	87		24	77	106	205	93	302	164	62	960
162	Other OR therapeutic procedures on joints	981	\$12,511	69	48	97	18			22	29	50	34	116	80	30	381
163	Other non-OR therapeutic procedures on musc system	4857	\$1,855	45	239	1,740			41	83		160	15	176	102		2,239
CCS 15: Operations on the Integumentary System																	
165	Breast biopsy & other diagnostic procedures on breast	1237	\$4,657	61	133	27							22	23	213	46	671
166	Lumpectomy, quadrantectomy of breast	646	\$9,212	26	77	15			17	27			16	84	71		277
169	Debridement of wound, infection or burn	978	\$1,083	783		30								23			105
170	Excision of skin lesion	4234	\$2,171	33	131	110	147			41	65	307	19	211	95	22	3,042
173	Other diagnostic proc on skin & subcutaneous tissue	1597	\$1,433	15								33					1,517
174	Other non-OR therapeutic procedures on skin & breast	1781	\$5,065	23	37	49	66			34	47	19		124	69		1,289
175	Other OR therapeutic procedures on skin & breast	717	\$10,168		34				15			25		18	59		512
<p>Sorted by CCS and procedure codes and alphabetically by Hospital.</p> <p>Data source: the Vermont Uniform Hospital Discharge Data Sets as of December 2015. Please see the Act 53 Pricing FAQs for more information.</p> <p>Grace Cottage Hospital has no procedures with 15 or more cases.</p> <p>¹ Based on "International Classification of Diseases - 9th Edition" (ICD-9) procedure codes that define outpatient procedures for the period from October 1, 2013 through June 30, 2014.</p> <p>Based on "Current Procedural Terminology" (CPT) codes that define outpatient procedures for the period July 1, 2014 through September 30, 2014.</p> <p>"Clinical Classification System" (CCS) groups similar ICD-9 codes or similar CPT codes, such as all those affecting a given organ system of the body.</p> <p>² System Number of Cases includes the number of cases for all hospitals with charges. Records with zero charges are not included. This data was updated in July, 2016.</p> <p>³ System Average Gross Charge is an average based on all hospital cases with charges. This data was updated in July, 2016.</p> <p>⁴ Gifford Medical Center's data was updated in July, 2016.</p> <p>⁵ Mt. Ascutney Hospital, North Country Hospital, and Springfield Hospital did not review nor validate their data as of May 31, 2016.</p>																	