Monograph VII
Discharges by Vermont Hospital, Major Diagnostic Category
and Principal Payer
2005

State Total 222
Brattleboro Memorial Hospital 224
Central Vermont Medical Center 226
Copley Hospital 228
Fletcher Allen Health Care 230
Gifford Medical Center 232
Grace Cottage Hospital 234
Mount Ascutney Hospital and Health Center 236
North Country Hospital 238
Northeastern Vermont Regional Hospital 240
Northwestern Medical Center 242
Porter Medical Center 244
Rutland Regional Medical Center 246
Southwestern Vermont Medical Center 248
Springfield Hospital 250

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

STATE TOTAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	1434	322	18	22	730	96	5	2627
Eye	23	13	1	3	17	2	0	59
Ear, Nose & Throat	180	128	7	1	228	19	0	563
Respiratory	3827	802	29	14	1043	129	1	5845
Heart & Circulatory	5526	531	49	10	1945	228	1	8290
Digestive	2482	610	29	7	1646	195	3	4972
Liver & Pancreas	625	214	13	1	476	86	0	1415
Musculoskeletal	2888	482	33	183	1584	141	0	5311
Skin And Breast	500	186	6	9	261	80	0	1042
Endocrine	703	248	8	2	395	46	1	1403
Kidney & Urinary	1077	181	10	2	393	61	15	1739
Male Reproductive	208	12	1	0	119	3	0	343
Female Reproductive	233	253	23	2	897	45	0	1453
Preg & Childbirth	30	2600	74	0	3616	104	2	6426
Spleen & Blood	246	65	1	2	137	10	0	461
Lymphatic	181	71	0	1	148	12	0	413
Infection	569	168	12	15	285	25	0	1074
Mental Illness	701	898	13	6	553	229	0	2400
Substance Abuse	84	154	1	1	88	83	0	411
Injury, Toxic eff.	254	207	4	8	254	49	0	776
Burns	8	17	1	6	19	8	0	59
All Other	768	111	7	19	315	252	0	1472
Trauma	22	22	2	5	107	22	4	184
H.I.V.	6	16	1	0	5	0	0	28
Total	22575	8311	343	319	15261	1925	32	48766

State totals are for resident and nonresident discharges from VT hospitals excluding the VA hospital.
“Other” payer includes self-pay, no charge, and other sources of payment.

Monograph VII - Discharges by Vermont Hospital,
Major Diagnostic Category, and Principal Payer

STATE TOTAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	54.6	12.3	0.7	0.8	27.8	3.7	0.2	100.0
Eye	39.0	22.0	1.7	5.1	28.8	3.4	0.0	100.0
Ear, Nose & Throat	32.0	22.7	1.2	0.2	40.5	3.4	0.0	100.0
Respiratory	65.5	13.7	0.5	0.2	17.8	2.2	0.0	100.0
Heart & Circulatory	66.7	6.4	0.6	0.1	23.5	2.8	0.0	100.0
Digestive	49.9	12.3	0.6	0.1	33.1	3.9	0.1	100.0
Liver & Pancreas	44.2	15.1	0.9	0.1	33.6	6.1	0.0	100.0
Musculoskeletal	54.4	9.1	0.6	3.4	29.8	2.7	0.0	100.0
Skin And Breast	48.0	17.9	0.6	0.9	25.0	7.7	0.0	100.0
Endocrine	50.1	17.7	0.6	0.1	28.2	3.3	0.1	100.0
Kidney & Urinary	61.9	10.4	0.6	0.1	22.6	3.5	0.9	100.0
Male Reproductive	60.6	3.5	0.3	0.0	34.7	0.9	0.0	100.0
Female Reproductive	16.0	17.4	1.6	0.1	61.7	3.1	0.0	100.0
Preg & Childbirth	0.5	40.5	1.2	0.0	56.3	1.6	0.0	100.0
Spleen & Blood	53.4	14.1	0.2	0.4	29.7	2.2	0.0	100.0
Lymphatic	43.8	17.2	0.0	0.2	35.8	2.9	0.0	100.0
Infection	53.0	15.6	1.1	1.4	26.5	2.3	0.0	100.0
Mental Illness	29.2	37.4	0.5	0.3	23.0	9.5	0.0	100.0
Substance Abuse	20.4	37.5	0.2	0.2	21.4	20.2	0.0	100.0
Injury, Toxic eff.	32.7	26.7	0.5	1.0	32.7	6.3	0.0	100.0
Burns	13.6	28.8	1.7	10.2	32.2	13.6	0.0	100.0
All Other	52.2	7.5	0.5	1.3	21.4	17.1	0.0	100.0
Trauma	12.0	12.0	1.1	2.7	58.2	12.0	2.2	100.0
H.I.V.	21.4	57.1	3.6	0.0	17.9	0.0	0.0	100.0
Total	46.3	17.0	0.7	0.7	31.3	3.9	0.1	100.0

State totals are for resident and nonresident discharges from VT hospitals excluding the VA hospital.
“Other” payer includes self-pay, no charge, and other sources of payment.

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

BRATTLEBORO MEMORIAL HOSPITAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	59	8	0	0	20	0	0	87
Eye	1	0	0	0	0	0	0	1
Ear, Nose & Throat	7	9	0	0	8	2	0	26
Respiratory	152	22	0	1	40	8	0	223
Heart & Circulatory	199	14	1	0	71	5	0	290
Digestive	123	27	0	0	74	12	1	237
Liver & Pancreas	33	8	3	0	17	4	0	65
Musculoskeletal	194	16	1	5	87	10	0	313
Skin And Breast	22	7	0	0	10	3	0	42
Endocrine	52	16	0	0	22	0	0	90
Kidney & Urinary	55	5	0	0	14	1	0	75
Male Reproductive	25	0	0	0	7	0	0	32
Female Reproductive	17	12	0	0	41	0	0	70
Preg & Childbirth	2	165	3	0	191	0	2	363
Spleen & Blood	12	2	0	0	3	0	0	17
Lymphatic	6	0	0	0	1	0	0	7
Infection	13	4	0	0	11	1	0	29
Mental Illness	8	2	0	0	2	0	0	12
Substance Abuse	2	3	0	0	5	1	0	11
Injury, Toxic eff.	17	11	0	2	29	3	0	62
Burns	0	0	0	0	0	1	0	1
All Other	8	1	0	0	0	0	0	9
Trauma	0	0	0	0	0	0	0	0
H.I.V.	0	0	0	0	0	0	0	0
Total	1007	332	8	8	653	51	3	2062

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

BRATTLEBORO MEMORIAL HOSPITAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	67.8	9.2	0.0	0.0	23.0	0.0	0.0	100.0
Eye	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Ear, Nose & Throat	26.9	34.6	0.0	0.0	30.8	7.7	0.0	100.0
Respiratory	68.2	9.9	0.0	0.4	17.9	3.6	0.0	100.0
Heart & Circulatory	68.6	4.8	0.3	0.0	24.5	1.7	0.0	100.0
Digestive	51.9	11.4	0.0	0.0	31.2	5.1	0.4	100.0
Liver & Pancreas	50.8	12.3	4.6	0.0	26.2	6.2	0.0	100.0
Musculoskeletal	62.0	5.1	0.3	1.6	27.8	3.2	0.0	100.0
Skin And Breast	52.4	16.7	0.0	0.0	23.8	7.1	0.0	100.0
Endocrine	57.8	17.8	0.0	0.0	24.4	0.0	0.0	100.0
Kidney & Urinary	73.3	6.7	0.0	0.0	18.7	1.3	0.0	100.0
Male Reproductive	78.1	0.0	0.0	0.0	21.9	0.0	0.0	100.0
Female Reproductive	24.3	17.1	0.0	0.0	58.6	0.0	0.0	100.0
Preg & Childbirth	0.6	45.5	0.8	0.0	52.6	0.0	0.6	100.0
Spleen & Blood	70.6	11.8	0.0	0.0	17.6	0.0	0.0	100.0
Lymphatic	85.7	0.0	0.0	0.0	14.3	0.0	0.0	100.0
Infection	44.8	13.8	0.0	0.0	37.9	3.4	0.0	100.0
Mental Illness	66.7	16.7	0.0	0.0	16.7	0.0	0.0	100.0
Substance Abuse	18.2	27.3	0.0	0.0	45.5	9.1	0.0	100.0
Injury, Toxic eff.	27.4	17.7	0.0	3.2	46.8	4.8	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	100.0	0.0	100.0
All Other	88.9	11.1	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	48.8	16.1	0.4	0.4	31.7	2.5	0.1	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

CENTRAL VERMONT MEDICAL CENTER

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	73	8	0	1	17	2	0	101
Eye	0	0	0	0	0	0	0	0
Ear, Nose & Throat	5	6	0	0	3	2	0	16
Respiratory	327	63	0	0	69	5	0	464
Heart & Circulatory	296	20	1	0	46	9	0	372
Digestive	183	39	4	1	107	14	0	348
Liver & Pancreas	46	7	2	0	37	5	0	97
Musculoskeletal	185	26	1	9	72	4	0	297
Skin And Breast	41	13	1	0	18	2	0	75
Endocrine	54	27	0	0	24	4	0	109
Kidney & Urinary	61	5	0	0	20	3	0	89
Male Reproductive	8	1	0	0	4	0	0	13
Female Reproductive	7	15	1	0	62	3	0	88
Preg & Childbirth	2	172	5	0	231	6	0	416
Spleen & Blood	23	4	0	0	5	0	0	32
Lymphatic	12	1	0	0	4	1	0	18
Infection	34	10	0	0	11	2	0	57
Mental Illness	124	160	3	2	114	27	0	430
Substance Abuse	6	12	0	0	7	7	0	32
Injury, Toxic eff.	19	24	0	0	19	4	0	66
Burns	1	0	0	0	0	0	0	1
All Other	4	0	0	0	0	0	0	4
Trauma	1	0	0	0	1	1	0	3
H.I.V.	0	0	0	0	0	0	0	0
Total	1512	613	18	13	871	101	0	3128

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

CENTRAL VERMONT MEDICAL CENTER (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	72.3	7.9	0.0	1.0	16.8	2.0	0.0	100.0
Eye	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ear, Nose & Throat	31.3	37.5	0.0	0.0	18.8	12.5	0.0	100.0
Respiratory	70.5	13.6	0.0	0.0	14.9	1.1	0.0	100.0
Heart & Circulatory	79.6	5.4	0.3	0.0	12.4	2.4	0.0	100.0
Digestive	52.6	11.2	1.1	0.3	30.7	4.0	0.0	100.0
Liver & Pancreas	47.4	7.2	2.1	0.0	38.1	5.2	0.0	100.0
Musculoskeletal	62.3	8.8	0.3	3.0	24.2	1.3	0.0	100.0
Skin And Breast	54.7	17.3	1.3	0.0	24.0	2.7	0.0	100.0
Endocrine	49.5	24.8	0.0	0.0	22.0	3.7	0.0	100.0
Kidney & Urinary	68.5	5.6	0.0	0.0	22.5	3.4	0.0	100.0
Male Reproductive	61.5	7.7	0.0	0.0	30.8	0.0	0.0	100.0
Female Reproductive	8.0	17.0	1.1	0.0	70.5	3.4	0.0	100.0
Preg & Childbirth	0.5	41.3	1.2	0.0	55.5	1.4	0.0	100.0
Spleen & Blood	71.9	12.5	0.0	0.0	15.6	0.0	0.0	100.0
Lymphatic	66.7	5.6	0.0	0.0	22.2	5.6	0.0	100.0
Infection	59.6	17.5	0.0	0.0	19.3	3.5	0.0	100.0
Mental Illness	28.8	37.2	0.7	0.5	26.5	6.3	0.0	100.0
Substance Abuse	18.8	37.5	0.0	0.0	21.9	21.9	0.0	100.0
Injury, Toxic eff.	28.8	36.4	0.0	0.0	28.8	6.1	0.0	100.0
Burns	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
All Other	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	33.3	0.0	0.0	0.0	33.3	33.3	0.0	100.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	48.3	19.6	0.6	0.4	27.8	3.2	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

COPLEY HOSPITAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	37	4	0	0	6	3	0	50
Eye	0	0	0	0	0	0	0	0
Ear, Nose & Throat	4	0	0	0	2	0	0	6
Respiratory	116	23	0	1	20	5	0	165
Heart & Circulatory	67	8	0	0	15	4	0	94
Digestive	91	12	0	0	42	11	0	156
Liver & Pancreas	17	4	0	0	18	2	0	41
Musculoskeletal	130	14	1	9	54	7	0	215
Skin And Breast	14	6	0	0	4	2	0	26
Endocrine	19	7	0	0	7	0	0	33
Kidney & Urinary	26	4	0	0	4	4	0	38
Male Reproductive	4	0	0	0	0	0	0	4
Female Reproductive	3	18	0	0	22	3	0	46
Preg & Childbirth	3	158	3	0	117	9	0	290
Spleen & Blood	6	2	0	0	2	2	0	12
Lymphatic	2	0	0	0	0	0	0	2
Infection	8	2	1	0	2	1	0	14
Mental Illness	2	0	0	0	0	0	0	2
Substance Abuse	0	0	0	0	1	0	0	1
Injury, Toxic eff.	3	3	0	0	4	0	0	10
Burns	0	0	0	0	0	0	0	0
All Other	2	0	0	0	0	0	0	2
Trauma	1	1	0	0	2	0	0	4
H.I.V.	0	1	0	0	0	0	0	1
Total	555	267	5	10	322	53	0	1212

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

COPLEY HOSPITAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	74.0	8.0	0.0	0.0	12.0	6.0	0.0	100.0
Eye	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ear, Nose & Throat	66.7	0.0	0.0	0.0	33.3	0.0	0.0	100.0
Respiratory	70.3	13.9	0.0	0.6	12.1	3.0	0.0	100.0
Heart & Circulatory	71.3	8.5	0.0	0.0	16.0	4.3	0.0	100.0
Digestive	58.3	7.7	0.0	0.0	26.9	7.1	0.0	100.0
Liver & Pancreas	41.5	9.8	0.0	0.0	43.9	4.9	0.0	100.0
Musculoskeletal	60.5	6.5	0.5	4.2	25.1	3.3	0.0	100.0
Skin And Breast	53.8	23.1	0.0	0.0	15.4	7.7	0.0	100.0
Endocrine	57.6	21.2	0.0	0.0	21.2	0.0	0.0	100.0
Kidney & Urinary	68.4	10.5	0.0	0.0	10.5	10.5	0.0	100.0
Male Reproductive	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Female Reproductive	6.5	39.1	0.0	0.0	47.8	6.5	0.0	100.0
Preg & Childbirth	1.0	54.5	1.0	0.0	40.3	3.1	0.0	100.0
Spleen & Blood	50.0	16.7	0.0	0.0	16.7	16.7	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	57.1	14.3	7.1	0.0	14.3	7.1	0.0	100.0
Mental Illness	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Substance Abuse	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0
Injury, Toxic eff.	30.0	30.0	0.0	0.0	40.0	0.0	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All Other	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	25.0	25.0	0.0	0.0	50.0	0.0	0.0	100.0
H.I.V.	0.0	100.0	0.0	0.0	0.0	0.0	0.0	100.0
Total	45.8	22.0	0.4	0.8	26.6	4.4	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

FLETCHER ALLEN HEALTH CARE

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	644	233	16	14	546	58	5	1516
Eye	13	7	1	2	14	2	0	39
Ear, Nose & Throat	58	68	6	1	152	9	0	294
Respiratory	783	246	17	6	412	33	0	1497
Heart & Circulatory	2664	317	39	7	1271	140	0	4438
Digestive	740	237	16	5	707	60	1	1766
Liver & Pancreas	213	73	4	0	192	30	0	512
Musculoskeletal	961	264	22	102	750	55	0	2154
Skin And Breast	107	61	4	2	109	37	0	320
Endocrine	188	91	6	0	226	21	0	532
Kidney & Urinary	390	85	5	2	172	15	15	684
Male Reproductive	75	5	1	0	55	3	0	139
Female Reproductive	135	90	17	2	412	12	0	668
Preg & Childbirth	13	789	40	0	1606	37	0	2485
Spleen & Blood	82	44	1	1	83	2	0	213
Lymphatic	114	64	0	1	134	9	0	322
Infection	199	73	10	10	147	5	0	444
Mental Illness	229	298	5	3	256	82	0	873
Substance Abuse	29	25	0	0	25	16	0	95
Injury, Toxic eff.	108	85	3	6	105	16	0	323
Burns	5	11	1	6	17	6	0	46
All Other	458	91	4	15	257	247	0	1072
Trauma	12	17	1	5	76	16	4	131
H.I.V.	5	10	1	0	4	0	0	20
Total	8225	3284	220	190	7728	911	25	20583

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

FLETCHER ALLEN HEALTH CARE (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	42.5	15.4	1.1	0.9	36.0	3.8	0.3	100.0
Eye	33.3	17.9	2.6	5.1	35.9	5.1	0.0	100.0
Ear, Nose & Throat	19.7	23.1	2.0	0.3	51.7	3.1	0.0	100.0
Respiratory	52.3	16.4	1.1	0.4	27.5	2.2	0.0	100.0
Heart & Circulatory	60.0	7.1	0.9	0.2	28.6	3.2	0.0	100.0
Digestive	41.9	13.4	0.9	0.3	40.0	3.4	0.1	100.0
Liver & Pancreas	41.6	14.3	0.8	0.0	37.5	5.9	0.0	100.0
Musculoskeletal	44.6	12.3	1.0	4.7	34.8	2.6	0.0	100.0
Skin And Breast	33.4	19.1	1.3	0.6	34.1	11.6	0.0	100.0
Endocrine	35.3	17.1	1.1	0.0	42.5	3.9	0.0	100.0
Kidney & Urinary	57.0	12.4	0.7	0.3	25.1	2.2	2.2	100.0
Male Reproductive	54.0	3.6	0.7	0.0	39.6	2.2	0.0	100.0
Female Reproductive	20.2	13.5	2.5	0.3	61.7	1.8	0.0	100.0
Preg & Childbirth	0.5	31.8	1.6	0.0	64.6	1.5	0.0	100.0
Spleen & Blood	38.5	20.7	0.5	0.5	39.0	0.9	0.0	100.0
Lymphatic	35.4	19.9	0.0	0.3	41.6	2.8	0.0	100.0
Infection	44.8	16.4	2.3	2.3	33.1	1.1	0.0	100.0
Mental Illness	26.2	34.1	0.6	0.3	29.3	9.4	0.0	100.0
Substance Abuse	30.5	26.3	0.0	0.0	26.3	16.8	0.0	100.0
Injury, Toxic eff.	33.4	26.3	0.9	1.9	32.5	5.0	0.0	100.0
Burns	10.9	23.9	2.2	13.0	37.0	13.0	0.0	100.0
All Other	42.7	8.5	0.4	1.4	24.0	23.0	0.0	100.0
Trauma	9.2	13.0	0.8	3.8	58.0	12.2	3.1	100.0
H.I.V.	25.0	50.0	5.0	0.0	20.0	0.0	0.0	100.0
Total	40.0	16.0	1.1	0.9	37.5	4.4	0.1	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

GIFFORD MEDICAL CENTER

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	18	3	0	0	3	0	0	24
Eye	0	0	0	0	0	0	0	0
Ear, Nose & Throat	3	0	0	0	2	0	0	5
Respiratory	99	7	1	1	16	8	0	132
Heart & Circulatory	96	5	0	0	14	4	0	119
Digestive	43	10	0	0	25	7	0	85
Liver & Pancreas	2	4	0	0	9	2	0	17
Musculoskeletal	61	3	0	1	14	5	0	84
Skin And Breast	19	4	0	0	6	1	0	30
Endocrine	24	2	0	0	4	3	0	33
Kidney & Urinary	20	2	1	0	9	2	0	34
Male Reproductive	7	0	0	0	11	0	0	18
Female Reproductive	4	7	0	0	23	0	0	34
Preg & Childbirth	0	126	3	0	168	8	0	305
Spleen & Blood	3	0	0	0	1	1	0	5
Lymphatic	4	0	0	0	0	0	0	4
Infection	18	3	0	0	0	1	0	22
Mental Illness	4	1	0	0	0	0	0	5
Substance Abuse	2	1	0	0	2	0	0	5
Injury, Toxic eff.	3	0	0	0	4	0	0	7
Burns	0	0	0	0	0	0	0	0
All Other	6	0	0	0	0	1	0	7
Trauma	2	0	0	0	1	0	0	3
H.I.V.	0	0	0	0	0	0	0	0
Total	438	178	5	2	312	43	0	978

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

Monograph VII - Discharges by Vermont Hospital,
Major Diagnostic Category, and Principal Payer

GIFFORD MEDICAL CENTER (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	75.0	12.5	0.0	0.0	12.5	0.0	0.0	100.0
Eye	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ear, Nose & Throat	60.0	0.0	0.0	0.0	40.0	0.0	0.0	100.0
Respiratory	75.0	5.3	0.8	0.8	12.1	6.1	0.0	100.0
Heart & Circulatory	80.7	4.2	0.0	0.0	11.8	3.4	0.0	100.0
Digestive	50.6	11.8	0.0	0.0	29.4	8.2	0.0	100.0
Liver & Pancreas	11.8	23.5	0.0	0.0	52.9	11.8	0.0	100.0
Musculoskeletal	72.6	3.6	0.0	1.2	16.7	6.0	0.0	100.0
Skin And Breast	63.3	13.3	0.0	0.0	20.0	3.3	0.0	100.0
Endocrine	72.7	6.1	0.0	0.0	12.1	9.1	0.0	100.0
Kidney & Urinary	58.8	5.9	2.9	0.0	26.5	5.9	0.0	100.0
Male Reproductive	38.9	0.0	0.0	0.0	61.1	0.0	0.0	100.0
Female Reproductive	11.8	20.6	0.0	0.0	67.6	0.0	0.0	100.0
Preg & Childbirth	0.0	41.3	1.0	0.0	55.1	2.6	0.0	100.0
Spleen & Blood	60.0	0.0	0.0	0.0	20.0	20.0	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	81.8	13.6	0.0	0.0	0.0	4.5	0.0	100.0
Mental Illness	80.0	20.0	0.0	0.0	0.0	0.0	0.0	100.0
Substance Abuse	40.0	20.0	0.0	0.0	40.0	0.0	0.0	100.0
Injury, Toxic eff.	42.9	0.0	0.0	0.0	57.1	0.0	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All Other	85.7	0.0	0.0	0.0	0.0	14.3	0.0	100.0
Trauma	66.7	0.0	0.0	0.0	33.3	0.0	0.0	100.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	44.8	18.2	0.5	0.2	31.9	4.4	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

GRACE COTTAGE HOSPITAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	14	1	0	0	1	0	0	16
Eye	0	0	0	0	0	0	0	0
Ear, Nose & Throat	2	0	0	0	0	0	0	2
Respiratory	46	4	0	1	7	0	0	58
Heart & Circulatory	24	0	1	0	3	0	0	28
Digestive	10	1	0	0	3	1	0	15
Liver & Pancreas	5	1	0	0	0	0	0	6
Musculoskeletal	19	2	0	0	3	0	0	24
Skin And Breast	6	2	1	0	1	0	0	10
Endocrine	5	0	0	0	4	0	0	9
Kidney & Urinary	9	1	0	0	1	1	0	12
Male Reproductive	1	0	0	0	0	0	0	1
Female Reproductive	1	0	0	0	0	0	0	1
Preg & Childbirth	0	0	0	0	0	0	0	0
Spleen & Blood	3	1	0	0	0	0	0	4
Lymphatic	2	0	0	0	0	0	0	2
Infection	3	0	0	0	1	0	0	4
Mental Illness	5	1	0	0	2	0	0	8
Substance Abuse	1	0	0	0	1	1	0	3
Injury, Toxic eff.	2	0	0	0	0	0	0	2
Burns	0	0	0	0	0	0	0	0
All Other	4	1	0	0	0	0	0	5
Trauma	0	0	0	0	0	0	0	0
H.I.V.	0	0	0	0	0	0	0	0
Total	162	15	2	1	27	3	0	210

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

GRACE COTTAGE HOSPITAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	87.5	6.3	0.0	0.0	6.3	0.0	0.0	100.0
Eye	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ear, Nose & Throat	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Respiratory	79.3	6.9	0.0	1.7	12.1	0.0	0.0	100.0
Heart & Circulatory	85.7	0.0	3.6	0.0	10.7	0.0	0.0	100.0
Digestive	66.7	6.7	0.0	0.0	20.0	6.7	0.0	100.0
Liver & Pancreas	83.3	16.7	0.0	0.0	0.0	0.0	0.0	100.0
Musculoskeletal	79.2	8.3	0.0	0.0	12.5	0.0	0.0	100.0
Skin And Breast	60.0	20.0	10.0	0.0	10.0	0.0	0.0	100.0
Endocrine	55.6	0.0	0.0	0.0	44.4	0.0	0.0	100.0
Kidney & Urinary	75.0	8.3	0.0	0.0	8.3	8.3	0.0	100.0
Male Reproductive	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Female Reproductive	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Preg & Childbirth	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Spleen & Blood	75.0	25.0	0.0	0.0	0.0	0.0	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	75.0	0.0	0.0	0.0	25.0	0.0	0.0	100.0
Mental Illness	62.5	12.5	0.0	0.0	25.0	0.0	0.0	100.0
Substance Abuse	33.3	0.0	0.0	0.0	33.3	33.3	0.0	100.0
Injury, Toxic eff.	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All Other	80.0	20.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	77.1	7.1	1.0	0.5	12.9	1.4	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

MT. ASCUTNEY HOSPITAL AND HEALTH CTR.

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	20	1	0	0	2	1	0	24
Eye	0	0	0	0	0	0	0	0
Ear, Nose & Throat	0	0	0	0	1	0	0	1
Respiratory	56	3	0	0	9	8	0	76
Heart & Circulatory	63	1	0	0	4	5	0	73
Digestive	39	7	0	0	9	13	0	68
Liver & Pancreas	9	3	0	0	2	8	0	22
Musculoskeletal	49	3	0	3	6	15	0	76
Skin And Breast	7	1	0	0	1	8	0	17
Endocrine	21	6	0	1	1	2	0	31
Kidney & Urinary	18	2	0	0	6	4	0	30
Male Reproductive	7	0	0	0	1	0	0	8
Female Reproductive	1	0	0	0	4	3	0	8
Preg & Childbirth	0	0	0	0	0	0	0	0
Spleen & Blood	0	0	0	0	1	1	0	2
Lymphatic	2	0	0	0	0	0	0	2
Infection	10	3	0	1	1	3	0	18
Mental Illness	7	0	0	0	0	1	0	8
Substance Abuse	0	0	0	1	1	0	0	2
Injury, Toxic eff.	4	2	0	0	2	3	0	11
Burns	1	0	0	0	0	1	0	2
All Other	1	0	0	0	0	0	0	1
Trauma	0	0	0	0	0	0	0	0
H.I.V.	0	0	0	0	0	0	0	0
Total	315	32	0	6	51	76	0	480

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

MT. ASCUTNEY HOSPITAL AND HEALTH CTR. (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	83.3	4.2	0.0	0.0	8.3	4.2	0.0	100.0
Eye	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ear, Nose & Throat	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0
Respiratory	73.7	3.9	0.0	0.0	11.8	10.5	0.0	100.0
Heart & Circulatory	86.3	1.4	0.0	0.0	5.5	6.8	0.0	100.0
Digestive	57.4	10.3	0.0	0.0	13.2	19.1	0.0	100.0
Liver & Pancreas	40.9	13.6	0.0	0.0	9.1	36.4	0.0	100.0
Musculoskeletal	64.5	3.9	0.0	3.9	7.9	19.7	0.0	100.0
Skin And Breast	41.2	5.9	0.0	0.0	5.9	47.1	0.0	100.0
Endocrine	67.7	19.4	0.0	3.2	3.2	6.5	0.0	100.0
Kidney & Urinary	60.0	6.7	0.0	0.0	20.0	13.3	0.0	100.0
Male Reproductive	87.5	0.0	0.0	0.0	12.5	0.0	0.0	100.0
Female Reproductive	12.5	0.0	0.0	0.0	50.0	37.5	0.0	100.0
Preg & Childbirth	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Spleen & Blood	0.0	0.0	0.0	0.0	50.0	50.0	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	55.6	16.7	0.0	5.6	5.6	16.7	0.0	100.0
Mental Illness	87.5	0.0	0.0	0.0	0.0	12.5	0.0	100.0
Substance Abuse	0.0	0.0	0.0	50.0	50.0	0.0	0.0	100.0
Injury, Toxic eff.	36.4	18.2	0.0	0.0	18.2	27.3	0.0	100.0
Burns	50.0	0.0	0.0	0.0	0.0	50.0	0.0	100.0
All Other	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	65.6	6.7	0.0	1.3	10.6	15.8	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

NORTH COUNTRY HOSPITAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	50	7	0	1	17	4	0	79
Eye	2	1	0	0	0	0	0	3
Ear, Nose & Throat	11	9	0	0	3	0	0	23
Respiratory	212	53	1	1	43	5	0	315
Heart & Circulatory	229	24	2	0	55	10	0	320
Digestive	117	25	2	0	46	10	0	200
Liver & Pancreas	23	6	2	1	15	3	0	50
Musculoskeletal	37	1	2	3	4	0	0	47
Skin And Breast	23	10	0	1	9	4	0	47
Endocrine	36	13	0	0	8	0	0	57
Kidney & Urinary	42	14	1	0	13	4	0	74
Male Reproductive	7	0	0	0	3	0	0	10
Female Reproductive	13	16	0	0	28	5	0	62
Preg & Childbirth	1	140	2	0	86	2	0	231
Spleen & Blood	16	0	0	0	7	0	0	23
Lymphatic	0	0	0	0	1	0	0	1
Infection	23	11	0	1	9	2	0	46
Mental Illness	9	0	0	0	2	0	0	11
Substance Abuse	5	4	0	0	0	1	0	10
Injury, Toxic eff.	13	9	0	0	9	2	0	33
Burns	0	1	0	0	0	0	0	1
All Other	9	1	0	0	0	0	0	10
Trauma	1	0	1	0	0	2	0	4
H.I.V.	0	0	0	0	0	0	0	0
Total	879	345	13	8	358	54	0	1657

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

NORTH COUNTRY HOSPITAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	63.3	8.9	0.0	1.3	21.5	5.1	0.0	100.0
Eye	66.7	33.3	0.0	0.0	0.0	0.0	0.0	100.0
Ear, Nose & Throat	47.8	39.1	0.0	0.0	13.0	0.0	0.0	100.0
Respiratory	67.3	16.8	0.3	0.3	13.7	1.6	0.0	100.0
Heart & Circulatory	71.6	7.5	0.6	0.0	17.2	3.1	0.0	100.0
Digestive	58.5	12.5	1.0	0.0	23.0	5.0	0.0	100.0
Liver & Pancreas	46.0	12.0	4.0	2.0	30.0	6.0	0.0	100.0
Musculoskeletal	78.7	2.1	4.3	6.4	8.5	0.0	0.0	100.0
Skin And Breast	48.9	21.3	0.0	2.1	19.1	8.5	0.0	100.0
Endocrine	63.2	22.8	0.0	0.0	14.0	0.0	0.0	100.0
Kidney & Urinary	56.8	18.9	1.4	0.0	17.6	5.4	0.0	100.0
Male Reproductive	70.0	0.0	0.0	0.0	30.0	0.0	0.0	100.0
Female Reproductive	21.0	25.8	0.0	0.0	45.2	8.1	0.0	100.0
Preg & Childbirth	0.4	60.6	0.9	0.0	37.2	0.9	0.0	100.0
Spleen & Blood	69.6	0.0	0.0	0.0	30.4	0.0	0.0	100.0
Lymphatic	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0
Infection	50.0	23.9	0.0	2.2	19.6	4.3	0.0	100.0
Mental Illness	81.8	0.0	0.0	0.0	18.2	0.0	0.0	100.0
Substance Abuse	50.0	40.0	0.0	0.0	0.0	10.0	0.0	100.0
Injury, Toxic eff.	39.4	27.3	0.0	0.0	27.3	6.1	0.0	100.0
Burns	0.0	100.0	0.0	0.0	0.0	0.0	0.0	100.0
All Other	90.0	10.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	25.0	0.0	25.0	0.0	0.0	50.0	0.0	100.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	53.0	20.8	0.8	0.5	21.6	3.3	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

NORTHEASTERN VERMONT REGIONAL HOSPITAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	37	7	0	1	7	0	0	52
Eye	1	2	0	0	0	0	0	3
Ear, Nose & Throat	1	8	0	0	8	0	0	17
Respiratory	109	69	1	0	42	3	0	224
Heart & Circulatory	152	13	1	0	36	3	0	205
Digestive	97	48	0	0	60	9	0	214
Liver & Pancreas	32	13	0	0	17	1	0	63
Musculoskeletal	76	18	0	0	34	1	0	129
Skin And Breast	23	7	0	1	10	0	0	41
Endocrine	34	16	0	0	17	0	0	67
Kidney & Urinary	30	7	0	0	16	1	0	54
Male Reproductive	2	0	0	0	1	0	0	3
Female Reproductive	3	10	0	0	17	1	0	31
Preg & Childbirth	0	145	0	0	97	4	0	246
Spleen & Blood	4	1	0	0	1	0	0	6
Lymphatic	1	0	0	0	0	0	0	1
Infection	19	11	0	0	10	1	0	41
Mental Illness	7	1	0	0	0	0	0	8
Substance Abuse	2	4	0	0	1	0	0	7
Injury, Toxic eff.	4	5	0	0	4	4	0	17
Burns	0	1	0	0	0	0	0	1
All Other	7	5	0	0	0	0	0	12
Trauma	0	0	0	0	0	0	0	0
H.I.V.	0	0	0	0	0	0	0	0
Total	641	391	2	2	378	28	0	1442

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

NORTHEASTERN VERMONT REGIONAL HOSPITAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	71.2	13.5	0.0	1.9	13.5	0.0	0.0	100.0
Eye	33.3	66.7	0.0	0.0	0.0	0.0	0.0	100.0
Ear, Nose & Throat	5.9	47.1	0.0	0.0	47.1	0.0	0.0	100.0
Respiratory	48.7	30.8	0.4	0.0	18.8	1.3	0.0	100.0
Heart & Circulatory	74.1	6.3	0.5	0.0	17.6	1.5	0.0	100.0
Digestive	45.3	22.4	0.0	0.0	28.0	4.2	0.0	100.0
Liver & Pancreas	50.8	20.6	0.0	0.0	27.0	1.6	0.0	100.0
Musculoskeletal	58.9	14.0	0.0	0.0	26.4	0.8	0.0	100.0
Skin And Breast	56.1	17.1	0.0	2.4	24.4	0.0	0.0	100.0
Endocrine	50.7	23.9	0.0	0.0	25.4	0.0	0.0	100.0
Kidney & Urinary	55.6	13.0	0.0	0.0	29.6	1.9	0.0	100.0
Male Reproductive	66.7	0.0	0.0	0.0	33.3	0.0	0.0	100.0
Female Reproductive	9.7	32.3	0.0	0.0	54.8	3.2	0.0	100.0
Preg & Childbirth	0.0	58.9	0.0	0.0	39.4	1.6	0.0	100.0
Spleen & Blood	66.7	16.7	0.0	0.0	16.7	0.0	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	46.3	26.8	0.0	0.0	24.4	2.4	0.0	100.0
Mental Illness	87.5	12.5	0.0	0.0	0.0	0.0	0.0	100.0
Substance Abuse	28.6	57.1	0.0	0.0	14.3	0.0	0.0	100.0
Injury, Toxic eff.	23.5	29.4	0.0	0.0	23.5	23.5	0.0	100.0
Burns	0.0	100.0	0.0	0.0	0.0	0.0	0.0	100.0
All Other	58.3	41.7	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	44.5	27.1	0.1	0.1	26.2	1.9	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

NORTHWESTERN MEDICAL CENTER

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	66	10	0	0	8	2	0	86
Eye	1	0	0	0	0	0	0	1
Ear, Nose & Throat	8	2	0	0	4	0	0	14
Respiratory	256	38	0	0	27	4	0	325
Heart & Circulatory	181	13	0	0	20	4	0	218
Digestive	126	32	0	0	61	6	0	225
Liver & Pancreas	41	20	0	0	11	6	0	78
Musculoskeletal	185	26	0	8	62	4	0	285
Skin And Breast	25	7	0	1	9	0	0	42
Endocrine	36	4	0	0	5	0	0	45
Kidney & Urinary	56	2	0	0	3	0	0	61
Male Reproductive	3	0	0	0	3	0	0	6
Female Reproductive	7	8	0	0	23	1	0	39
Preg & Childbirth	1	204	0	0	286	6	0	497
Spleen & Blood	15	3	0	0	2	0	0	20
Lymphatic	4	0	0	0	0	0	0	4
Infection	25	4	0	1	5	1	0	36
Mental Illness	8	1	0	0	0	0	0	9
Substance Abuse	2	3	0	0	2	2	0	9
Injury, Toxic eff.	11	5	0	0	5	2	0	23
Burns	0	0	0	0	0	0	0	0
All Other	1	1	0	0	0	0	0	2
Trauma	2	0	0	0	0	0	0	2
H.I.V.	0	0	0	0	1	0	0	1
Total	1060	383	0	10	537	38	0	2028

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

NORTHWESTERN MEDICAL CENTER (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	76.7	11.6	0.0	0.0	9.3	2.3	0.0	100.0
Eye	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Ear, Nose & Throat	57.1	14.3	0.0	0.0	28.6	0.0	0.0	100.0
Respiratory	78.8	11.7	0.0	0.0	8.3	1.2	0.0	100.0
Heart & Circulatory	83.0	6.0	0.0	0.0	9.2	1.8	0.0	100.0
Digestive	56.0	14.2	0.0	0.0	27.1	2.7	0.0	100.0
Liver & Pancreas	52.6	25.6	0.0	0.0	14.1	7.7	0.0	100.0
Musculoskeletal	64.9	9.1	0.0	2.8	21.8	1.4	0.0	100.0
Skin And Breast	59.5	16.7	0.0	2.4	21.4	0.0	0.0	100.0
Endocrine	80.0	8.9	0.0	0.0	11.1	0.0	0.0	100.0
Kidney & Urinary	91.8	3.3	0.0	0.0	4.9	0.0	0.0	100.0
Male Reproductive	50.0	0.0	0.0	0.0	50.0	0.0	0.0	100.0
Female Reproductive	17.9	20.5	0.0	0.0	59.0	2.6	0.0	100.0
Preg & Childbirth	0.2	41.0	0.0	0.0	57.5	1.2	0.0	100.0
Spleen & Blood	75.0	15.0	0.0	0.0	10.0	0.0	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	69.4	11.1	0.0	2.8	13.9	2.8	0.0	100.0
Mental Illness	88.9	11.1	0.0	0.0	0.0	0.0	0.0	100.0
Substance Abuse	22.2	33.3	0.0	0.0	22.2	22.2	0.0	100.0
Injury, Toxic eff.	47.8	21.7	0.0	0.0	21.7	8.7	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All Other	50.0	50.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
H.I.V.	0.0	0.0	0.0	0.0	100.0	0.0	0.0	100.0
Total	52.3	18.9	0.0	0.5	26.5	1.9	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

PORTER MEDICAL CENTER

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	26	4	0	0	5	3	0	38
Eye	0	0	0	0	0	0	0	0
Ear, Nose & Throat	10	2	0	0	4	0	0	16
Respiratory	177	21	2	0	26	4	0	230
Heart & Circulatory	120	12	2	0	40	2	0	176
Digestive	104	19	2	1	54	10	0	190
Liver & Pancreas	30	1	0	0	16	5	0	52
Musculoskeletal	106	10	0	3	35	4	0	158
Skin And Breast	21	5	0	2	10	3	0	41
Endocrine	25	4	0	0	7	8	0	44
Kidney & Urinary	39	4	0	0	2	1	0	46
Male Reproductive	3	1	0	0	4	0	0	8
Female Reproductive	8	8	2	0	49	3	0	70
Preg & Childbirth	2	155	4	0	150	13	0	324
Spleen & Blood	12	0	0	0	3	0	0	15
Lymphatic	2	0	0	0	0	0	0	2
Infection	16	4	0	0	10	0	0	30
Mental Illness	1	1	0	0	0	1	0	3
Substance Abuse	3	1	0	0	4	5	0	13
Injury, Toxic eff.	11	7	0	0	14	1	0	33
Burns	0	0	0	0	0	0	0	0
All Other	8	0	0	0	0	0	0	8
Trauma	0	0	0	0	0	1	0	1
H.I.V.	0	0	0	0	0	0	0	0
Total	724	259	12	6	433	64	0	1498

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

PORTER MEDICAL CENTER (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	68.4	10.5	0.0	0.0	13.2	7.9	0.0	100.0
Eye	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ear, Nose & Throat	62.5	12.5	0.0	0.0	25.0	0.0	0.0	100.0
Respiratory	77.0	9.1	0.9	0.0	11.3	1.7	0.0	100.0
Heart & Circulatory	68.2	6.8	1.1	0.0	22.7	1.1	0.0	100.0
Digestive	54.7	10.0	1.1	0.5	28.4	5.3	0.0	100.0
Liver & Pancreas	57.7	1.9	0.0	0.0	30.8	9.6	0.0	100.0
Musculoskeletal	67.1	6.3	0.0	1.9	22.2	2.5	0.0	100.0
Skin And Breast	51.2	12.2	0.0	4.9	24.4	7.3	0.0	100.0
Endocrine	56.8	9.1	0.0	0.0	15.9	18.2	0.0	100.0
Kidney & Urinary	84.8	8.7	0.0	0.0	4.3	2.2	0.0	100.0
Male Reproductive	37.5	12.5	0.0	0.0	50.0	0.0	0.0	100.0
Female Reproductive	11.4	11.4	2.9	0.0	70.0	4.3	0.0	100.0
Preg & Childbirth	0.6	47.8	1.2	0.0	46.3	4.0	0.0	100.0
Spleen & Blood	80.0	0.0	0.0	0.0	20.0	0.0	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	53.3	13.3	0.0	0.0	33.3	0.0	0.0	100.0
Mental Illness	33.3	33.3	0.0	0.0	0.0	33.3	0.0	100.0
Substance Abuse	23.1	7.7	0.0	0.0	30.8	38.5	0.0	100.0
Injury, Toxic eff.	33.3	21.2	0.0	0.0	42.4	3.0	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All Other	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Trauma	0.0	0.0	0.0	0.0	0.0	100.0	0.0	100.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	48.3	17.3	0.8	0.4	28.9	4.3	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

RUTLAND REGIONAL MEDICAL CENTER

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	203	24	0	3	49	12	0	291
Eye	1	1	0	0	3	0	0	5
Ear, Nose & Throat	24	18	1	0	22	4	0	69
Respiratory	682	141	2	1	165	15	0	1006
Heart & Circulatory	637	54	0	2	161	28	0	882
Digestive	331	83	3	0	233	17	0	667
Liver & Pancreas	86	38	1	0	65	15	0	205
Musculoskeletal	452	72	3	27	269	21	0	844
Skin And Breast	90	32	0	2	40	11	0	175
Endocrine	109	37	2	0	30	4	1	183
Kidney & Urinary	167	30	3	0	78	14	0	292
Male Reproductive	54	3	0	0	20	0	0	77
Female Reproductive	20	23	3	0	128	3	0	177
Preg & Childbirth	3	239	11	0	289	3	0	545
Spleen & Blood	30	4	0	1	10	0	0	45
Lymphatic	18	0	0	0	6	2	0	26
Infection	85	23	0	2	37	2	0	149
Mental Illness	168	186	3	1	86	48	0	492
Substance Abuse	12	77	0	0	30	37	0	156
Injury, Toxic eff.	20	34	1	0	26	5	0	86
Burns	1	3	0	0	1	0	0	5
All Other	236	10	2	4	54	4	0	310
Trauma	1	1	0	0	11	1	0	14
H.I.V.	1	0	0	0	0	0	0	1
Total	3431	1133	35	43	1813	246	1	6702

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

RUTLAND REGIONAL MEDICAL CENTER (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	69.8	8.2	0.0	1.0	16.8	4.1	0.0	100.0
Eye	20.0	20.0	0.0	0.0	60.0	0.0	0.0	100.0
Ear, Nose & Throat	34.8	26.1	1.4	0.0	31.9	5.8	0.0	100.0
Respiratory	67.8	14.0	0.2	0.1	16.4	1.5	0.0	100.0
Heart & Circulatory	72.2	6.1	0.0	0.2	18.3	3.2	0.0	100.0
Digestive	49.6	12.4	0.4	0.0	34.9	2.5	0.0	100.0
Liver & Pancreas	42.0	18.5	0.5	0.0	31.7	7.3	0.0	100.0
Musculoskeletal	53.6	8.5	0.4	3.2	31.9	2.5	0.0	100.0
Skin And Breast	51.4	18.3	0.0	1.1	22.9	6.3	0.0	100.0
Endocrine	59.6	20.2	1.1	0.0	16.4	2.2	0.5	100.0
Kidney & Urinary	57.2	10.3	1.0	0.0	26.7	4.8	0.0	100.0
Male Reproductive	70.1	3.9	0.0	0.0	26.0	0.0	0.0	100.0
Female Reproductive	11.3	13.0	1.7	0.0	72.3	1.7	0.0	100.0
Preg & Childbirth	0.6	43.9	2.0	0.0	53.0	0.6	0.0	100.0
Spleen & Blood	66.7	8.9	0.0	2.2	22.2	0.0	0.0	100.0
Lymphatic	69.2	0.0	0.0	0.0	23.1	7.7	0.0	100.0
Infection	57.0	15.4	0.0	1.3	24.8	1.3	0.0	100.0
Mental Illness	34.1	37.8	0.6	0.2	17.5	9.8	0.0	100.0
Substance Abuse	7.7	49.4	0.0	0.0	19.2	23.7	0.0	100.0
Injury, Toxic eff.	23.3	39.5	1.2	0.0	30.2	5.8	0.0	100.0
Burns	20.0	60.0	0.0	0.0	20.0	0.0	0.0	100.0
All Other	76.1	3.2	0.6	1.3	17.4	1.3	0.0	100.0
Trauma	7.1	7.1	0.0	0.0	78.6	7.1	0.0	100.0
H.I.V.	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Total	51.2	16.9	0.5	0.6	27.1	3.7	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital,
Major Diagnostic Category, and Principal Payer

SOUTHWESTERN VT. MEDICAL CENTER

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	125	3	0	2	43	6	0	179
Eye	3	0	0	1	0	0	0	4
Ear, Nose & Throat	27	2	0	0	16	1	0	46
Respiratory	599	58	3	1	119	15	1	796
Heart & Circulatory	558	30	1	1	143	7	1	741
Digestive	339	38	1	0	165	10	0	553
Liver & Pancreas	65	22	0	0	60	3	0	150
Musculoskeletal	313	20	3	7	152	7	0	502
Skin And Breast	75	20	0	0	23	3	0	121
Endocrine	71	19	0	1	34	4	0	129
Kidney & Urinary	124	14	0	0	47	7	0	192
Male Reproductive	10	2	0	0	10	0	0	22
Female Reproductive	6	14	0	0	60	0	0	80
Preg & Childbirth	3	211	2	0	303	7	0	526
Spleen & Blood	30	1	0	0	12	2	0	45
Lymphatic	11	6	0	0	2	0	0	19
Infection	84	15	0	0	32	4	0	135
Mental Illness	9	0	0	0	1	0	0	10
Substance Abuse	11	6	1	0	3	5	0	26
Injury, Toxic eff.	28	11	0	0	22	5	0	66
Burns	0	0	0	0	0	0	0	0
All Other	15	1	0	0	4	0	0	20
Trauma	2	2	0	0	14	1	0	19
H.I.V.	0	5	0	0	0	0	0	5
Total	2508	500	11	13	1265	87	2	4386

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

SOUTHWESTERN VT. MEDICAL CENTER (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	69.8	1.7	0.0	1.1	24.0	3.4	0.0	100.0
Eye	75.0	0.0	0.0	25.0	0.0	0.0	0.0	100.0
Ear, Nose & Throat	58.7	4.3	0.0	0.0	34.8	2.2	0.0	100.0
Respiratory	75.3	7.3	0.4	0.1	14.9	1.9	0.1	100.0
Heart & Circulatory	75.3	4.0	0.1	0.1	19.3	0.9	0.1	100.0
Digestive	61.3	6.9	0.2	0.0	29.8	1.8	0.0	100.0
Liver & Pancreas	43.3	14.7	0.0	0.0	40.0	2.0	0.0	100.0
Musculoskeletal	62.4	4.0	0.6	1.4	30.3	1.4	0.0	100.0
Skin And Breast	62.0	16.5	0.0	0.0	19.0	2.5	0.0	100.0
Endocrine	55.0	14.7	0.0	0.8	26.4	3.1	0.0	100.0
Kidney & Urinary	64.6	7.3	0.0	0.0	24.5	3.6	0.0	100.0
Male Reproductive	45.5	9.1	0.0	0.0	45.5	0.0	0.0	100.0
Female Reproductive	7.5	17.5	0.0	0.0	75.0	0.0	0.0	100.0
Preg & Childbirth	0.6	40.1	0.4	0.0	57.6	1.3	0.0	100.0
Spleen & Blood	66.7	2.2	0.0	0.0	26.7	4.4	0.0	100.0
Lymphatic	57.9	31.6	0.0	0.0	10.5	0.0	0.0	100.0
Infection	62.2	11.1	0.0	0.0	23.7	3.0	0.0	100.0
Mental Illness	90.0	0.0	0.0	0.0	10.0	0.0	0.0	100.0
Substance Abuse	42.3	23.1	3.8	0.0	11.5	19.2	0.0	100.0
Injury, Toxic eff.	42.4	16.7	0.0	0.0	33.3	7.6	0.0	100.0
Burns	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
All Other	75.0	5.0	0.0	0.0	20.0	0.0	0.0	100.0
Trauma	10.5	10.5	0.0	0.0	73.7	5.3	0.0	100.0
H.I.V.	0.0	100.0	0.0	0.0	0.0	0.0	0.0	100.0
Total	57.2	11.4	0.3	0.3	28.8	2.0	0.0	100.0

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

Monograph VII - Discharges by Vermont Hospital, Major Diagnostic Category, and Principal Payer

SPRINGFIELD HOSPITAL

Number of Discharges

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	62	9	2	0	6	5	0	84
Eye	1	2	0	0	0	0	0	3
Ear, Nose & Throat	20	4	0	0	3	1	0	28
Respiratory	213	54	2	1	48	16	0	334
Heart & Circulatory	240	20	1	0	66	7	0	334
Digestive	139	32	1	0	60	15	1	248
Liver & Pancreas	23	14	1	0	17	2	0	57
Musculoskeletal	120	7	0	6	42	8	0	183
Skin And Breast	27	11	0	0	11	6	0	55
Endocrine	29	6	0	0	6	0	0	41
Kidney & Urinary	40	6	0	0	8	4	0	58
Male Reproductive	2	0	0	0	0	0	0	2
Female Reproductive	8	32	0	0	28	11	0	79
Preg & Childbirth	0	96	1	0	92	9	0	198
Spleen & Blood	10	3	0	0	7	2	0	22
Lymphatic	3	0	0	0	0	0	0	3
Infection	32	5	1	0	9	2	0	49
Mental Illness	120	247	2	0	90	70	0	529
Substance Abuse	9	18	0	0	6	8	0	41
Injury, Toxic eff.	11	11	0	0	11	4	0	37
Burns	0	1	0	0	1	0	0	2
All Other	9	0	1	0	0	0	0	10
Trauma	0	1	0	0	2	0	0	3
H.I.V.	0	0	0	0	0	0	0	0
Total	1118	579	12	7	513	170	1	2400

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

SPRINGFIELD HOSPITAL (continued)

Row Percentages

Major Diagnostic Category	Principal Payer: Medi-care	Medi-caid	Other Gov't	Work. Comp.	Priv. Ins.	Other	Unknown	Total
Brain and C.N.S.	73.8	10.7	2.4	0.0	7.1	6.0	0.0	100.0
Eye	33.3	66.7	0.0	0.0	0.0	0.0	0.0	100.0
Ear, Nose & Throat	71.4	14.3	0.0	0.0	10.7	3.6	0.0	100.0
Respiratory	63.8	16.2	0.6	0.3	14.4	4.8	0.0	100.0
Heart & Circulatory	71.9	6.0	0.3	0.0	19.8	2.1	0.0	100.0
Digestive	56.0	12.9	0.4	0.0	24.2	6.0	0.4	100.0
Liver & Pancreas	40.4	24.6	1.8	0.0	29.8	3.5	0.0	100.0
Musculoskeletal	65.6	3.8	0.0	3.3	23.0	4.4	0.0	100.0
Skin And Breast	49.1	20.0	0.0	0.0	20.0	10.9	0.0	100.0
Endocrine	70.7	14.6	0.0	0.0	14.6	0.0	0.0	100.0
Kidney & Urinary	69.0	10.3	0.0	0.0	13.8	6.9	0.0	100.0
Male Reproductive	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Female Reproductive	10.1	40.5	0.0	0.0	35.4	13.9	0.0	100.0
Preg & Childbirth	0.0	48.5	0.5	0.0	46.5	4.5	0.0	100.0
Spleen & Blood	45.5	13.6	0.0	0.0	31.8	9.1	0.0	100.0
Lymphatic	100.0	0.0	0.0	0.0	0.0	0.0	0.0	100.0
Infection	65.3	10.2	2.0	0.0	18.4	4.1	0.0	100.0
Mental Illness	22.7	46.7	0.4	0.0	17.0	13.2	0.0	100.0
Substance Abuse	22.0	43.9	0.0	0.0	14.6	19.5	0.0	100.0
Injury, Toxic eff.	29.7	29.7	0.0	0.0	29.7	10.8	0.0	100.0
Burns	0.0	50.0	0.0	0.0	50.0	0.0	0.0	100.0
All Other	90.0	0.0	10.0	0.0	0.0	0.0	0.0	100.0
Trauma	0.0	33.3	0.0	0.0	66.7	0.0	0.0	100.0
H.I.V.	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total	46.6	24.1	0.5	0.3	21.4	7.1	0.0	100.0

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