

2012

Vermont Hospitals Report

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Vermont Green Mountain Care Board

Vermont Department of Health

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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, Vermont has exchanged 2012 hospital data with New York and Massachusetts. As of July 2014, 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.

2012 Vermont Hospitals Report

Table of Contents

User's Guide	1		
Highlights	5	Table I-6	44
Charges and In-migration to Vermont Hospitals.....	7	Clinical Classifications Software (CCS) High Level Diagnosis Groups of Inpatient Discharges from Vermont Hospitals by Principal Payer, 2012	
Inpatient Discharges from Vermont Hospitals	9	Table I-7	45
Visits to Vermont Hospital Emergency Departments	12	Inpatient In-migration by Vermont Hospital, 2012	
Outpatient Procedures and Services in Vermont Hospitals.....	15	Emergency Department Visits	47
Comparisons across Vermont Hospital Settings	19	Table E-1	49
Inpatient Discharges	21	ED Visits to Vermont Hospitals by Type of Visit, 2012	
Table I-1	23	Table E-2	50
Vermont Hospitals by Inpatient Admission Type, 2012		ED Visits to Vermont Hospitals by Type of Visit and Year, 2008-2012	
Table I-2	24	Table E-3	52
Summary Statistics for Vermont Hospitals: 1992, 2002 and 2012 Inpatient Discharges, Patient Days and Average Length of Stay		Clinical Classifications Software (CCS) High Level Diagnosis Groups and Type of Visit of ED Visits to Vermont Hospitals, 2012	
Table I-3	25	Table E-4	67
Summary Statistics for Vermont Hospitals and Clinical Classifications Software (CCS) High Level Diagnosis Groups: 1992, 2002 and 2012 Inpatient Discharges, Patient Days and Average Length of Stay		ED Visits to Vermont Hospitals by Age Group, 2012	
Table I-4	40	Table E-5	68
Vermont Hospitals by Age Group, 2012: Inpatient Discharges, Patient Days and Average Length of Stay		ED Visits to Vermont Hospitals by Principal Payer, 2012	
Table I-5	43	Table E-6	69
Vermont Hospitals by Principal Payer, 2012		Clinical Classifications Software (CCS) High Level Diagnosis Groups of ED Visits to Vermont Hospitals by Principal Payer, 2012	
		Table E-7	70
		ED In-migration by Vermont Hospital, 2012	

Outpatient Procedures and Services	71
Table O-1	73
Outpatient Procedures at Vermont Hospitals by State of Residence, 2012	
Table O-2	74
Outpatient Procedures at Vermont Hospitals by Year, 2008-2012	
Table O-3	75
Clinical Classifications Software (CCS) High Level Diagnosis Groups of Outpatient Procedures by Vermont Hospital, 2012	
Table O-4	76
Clinical Classifications Software (CCS) High Level Procedure Groups of Outpatient Procedures by Vermont Hospital, 2012	
Table O-5	77
Outpatient Procedures at Vermont Hospitals by Age Group, 2012	
Table O-6	78
Outpatient Procedures at Vermont Hospitals by Principal Payer, 2012	
Table O-7	79
Clinical Classifications Software (CCS) High Level Diagnosis Groups of Outpatient Procedures at Vermont Hospitals by Principal Payer, 2012	
Table O-8	80
Clinical Classifications Software (CCS) High Level Procedure Groups of Outpatient Procedures at Vermont Hospitals by Principal Payer, 2012	
Table O-9	81
Outpatient Procedure Groups and Average Charges by Vermont Hospitals, 2012	
Table O-10	90
Expanded Outpatient Services: Primary Cost Centers by Vermont Hospitals, 2012	

Table O-11	92
Observation Bed Records and Average Charges by Vermont Hospitals and Setting, 2012	
Table O-12	93
Outpatient In-migration by Vermont Hospitals, 2012	

Comparisons across Hospital Settings..... 95

Table C-1	97
Vermont Hospitals by Setting, 2012	
Table C-2	98
Number of Records and Average Charges for Clinical Classifications Software (CCS) High Level Diagnosis Groups by Vermont Hospitals and Setting, 2012	
Table C-3	99
Number of Records and Average Charges for Clinical Classifications Software (CCS) High Level Procedure Groups by Vermont Hospitals and Setting, 2012	

Appendices 101

Appendix A:	103
Definitions	
Appendix B:	105
Major Diagnostic Categories (MDCs)	
Appendix C:	106
Major Diagnostic Categories (MDCs) and MS-Diagnosis Related Groups (DRGs)	

Appendix D:	116
2012 Clinical Classifications Software (CCS) High Level Diagnosis and Procedure Groups	
Appendix E:	117
2012 Clinical Classifications Software (CCS) High Level and Single Level Diagnosis Categories	
Appendix F:	121
2012 Clinical Classifications Software (CCS) High Level and Single Level Procedure Groups	
Appendix G:	125
Crosswalk for Revenue Code to Primary Cost Center	
Appendix H:	138
Hospitals in This Report	
Appendix I:	142
Vermont Hospital Discharge Data Elements	

Note: Reporting is limited to Vermont hospitals until the 2012 data are available for Vermont residents served in New Hampshire, Massachusetts and New York hospitals. 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, Vermont has exchanged 2012 hospital data with New York and Massachusetts.

2012 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.hcup-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 inpatient discharges from Vermont hospitals** increased substantially by 6.4% from 2011 to 2012, and charges for Vermont residents increased by 7.6%. These increases are much larger than those from 2010 to 2011, when total charges increased by 2.5%, and charges for Vermont residents increased by 2.0%. Charges for non-residents increased slightly by 1.0% from 2011 to 2012, compared to an increase of 4.7% from 2010 to 2011. The *number* of inpatient discharges for both Vermont residents and non-residents changed very little from 2011 to 2012 (0.2% and 1.2% respectively).
- **Total charges for Vermont residents with ED visits to Vermont hospitals** increased substantially by 11.1% from 2011 to 2012, similar to the increase of 11.4% for non-residents. These increases are 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 changed very little from 2011 to 2012 (2.1% increase in both groups).
- **Total charges for Vermont residents with outpatient procedures in ICD-9-CM range 00-86 at Vermont hospitals** increased by 6.2% from 2011 to 2012, more than the increase of 4.5% for non-residents. At the same time, the *number* of outpatient procedures in range for both Vermont residents and non-residents changed very little from 2011 to 2012 (0.5% and -0.4% respectively).

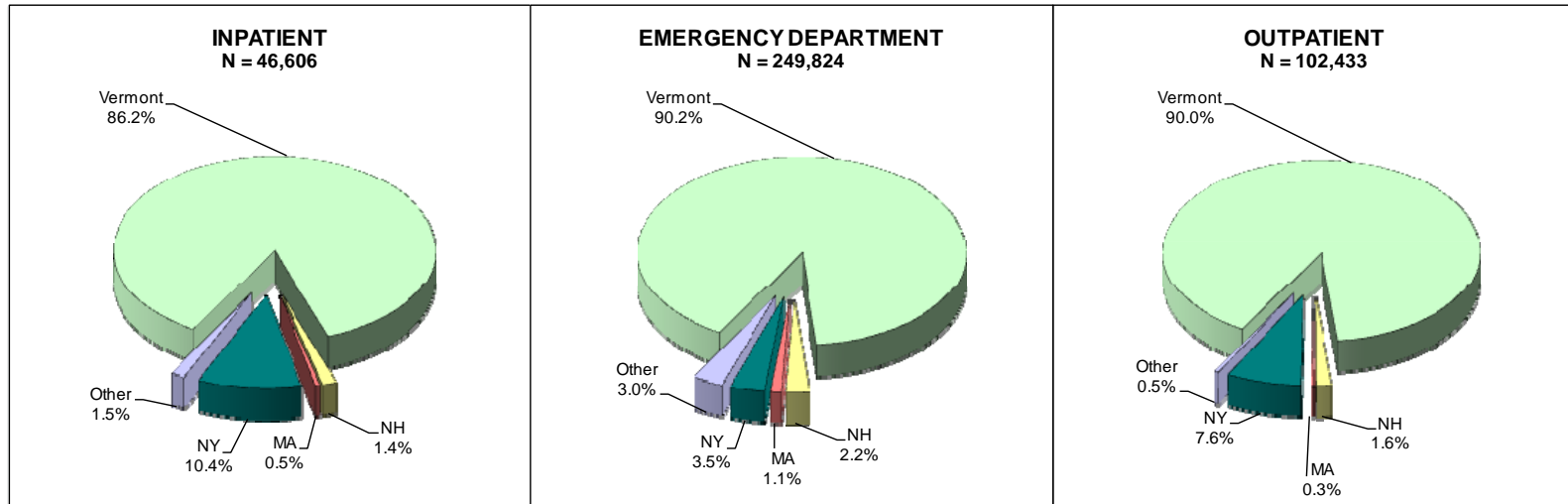
In-migration

- Most in-migration to Vermont hospitals in 2012 continues to be by New York residents for inpatient care, ED visits, and outpatient procedures in range. As in 2011, New York residents comprise a much smaller percent of all ED visits than of either inpatient discharges or outpatient procedures (3.5% of ED visits, compared to 10.4% of inpatient discharges and 7.6% of outpatient procedures in range).
- New York residents account for a higher percent of total charges than of total discharges in all three settings (4.3% of ED charges, 14.8% of inpatient charges and 10.0% of outpatient charges).

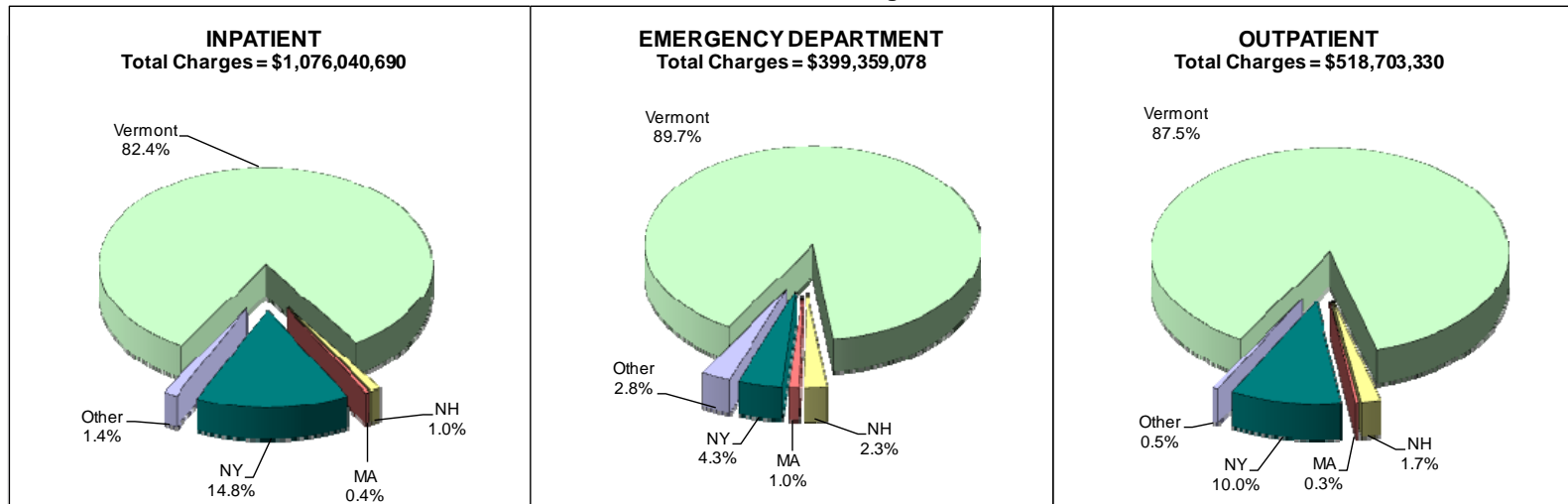
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2012 Vermont Hospitals Summary of Patients' State of Residence by Hospital Setting

Percent of Total Discharges



Percent of Total Charges

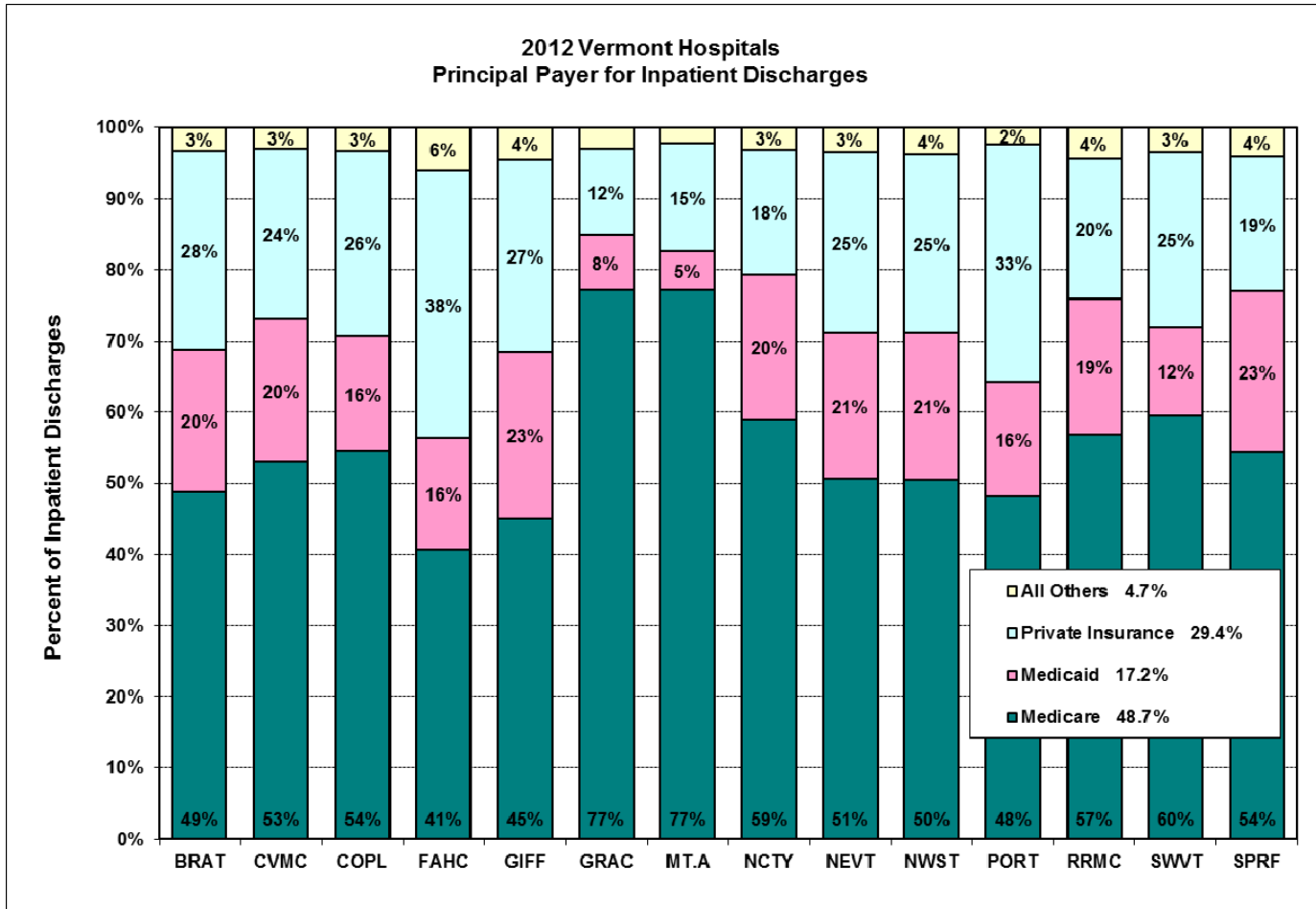


Numbers of discharges exclude newborns. Total charges include charges for newborns.

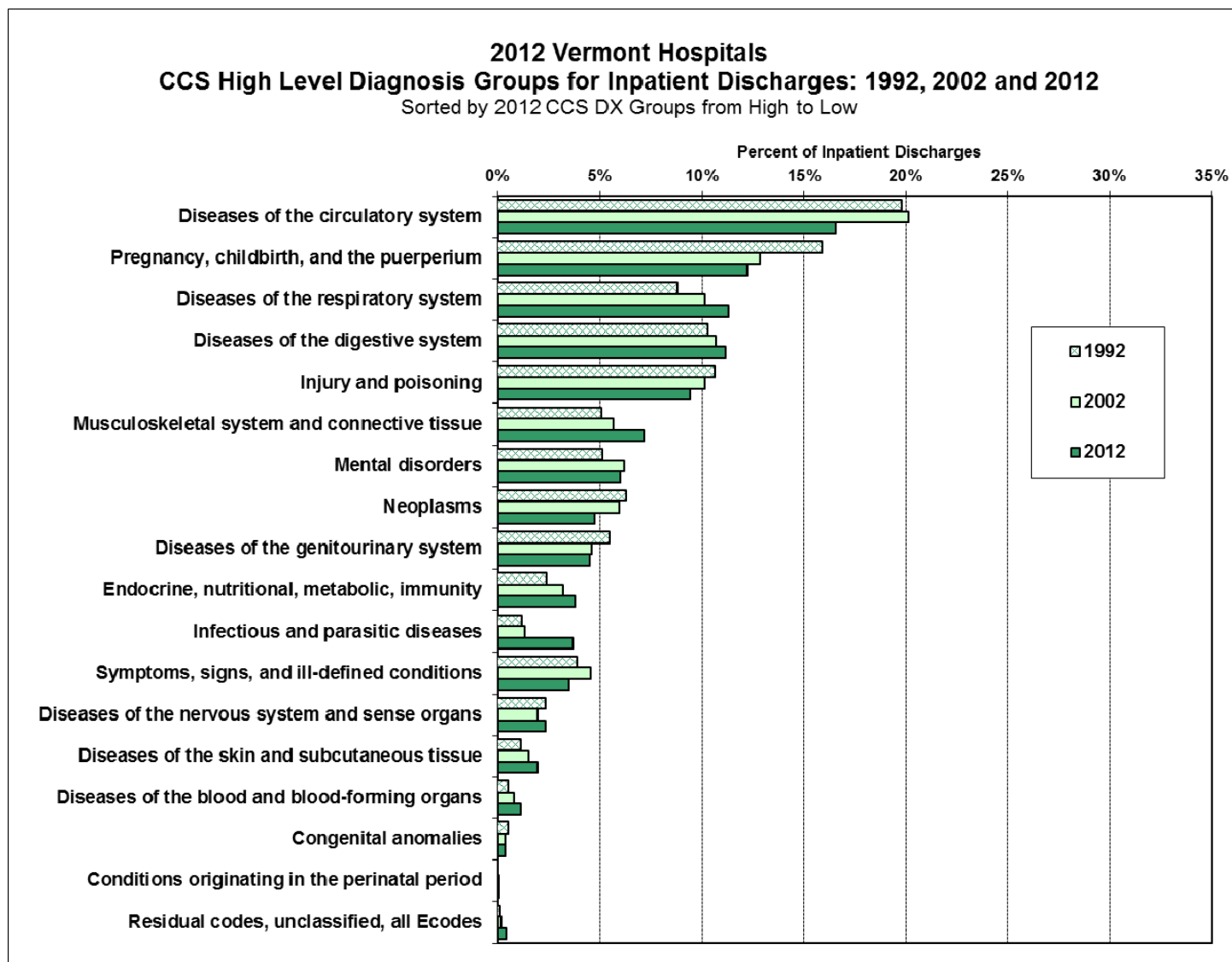
Highlights of Inpatient Discharges from Vermont Hospitals

- **In 2012 there were 46,606 inpatient discharges from Vermont hospitals**, excluding newborns but including maternal records. Of these, 86.2% were Vermont residents, and 13.8% were residents of New Hampshire, Massachusetts, New York or elsewhere.
- **The number of inpatient discharges from Vermont hospitals has declined** 10.3% from 1992, and 5.7% from 2002, including both Vermont residents and non-residents. The average length of stay for these discharges has declined from 6.2 days per discharge in 1992, to 4.8 in 2002, and 4.6 in 2012. No inpatient discharges at any hospital are coded as swing beds.
- **Similar to findings in recent years**, more than half of the total inpatient discharges from Vermont hospitals in 2012 originated in the Emergency Department (53.6%).
- **Fletcher Allen Health Care** continues to have the highest number of inpatient discharges at 19,919 in 2012 (42.7% of all inpatient discharges, compared to 35.6% in 1992 and 40.5% in 2002). Grace Cottage Hospital and Mt. Ascutney Hospital and Health Center have the lowest total numbers of inpatient discharges (166 and 408 respectively).
- **Fletcher Allen Health Care** continues to have the highest total number of patient days at 105,206 in 2012 (49.3% of all patient days), followed by Rutland Regional Medical Center with 14.5%. Grace Cottage Hospital has the lowest total number of patient days (513).
- **In 2012, average length of stay in Vermont hospitals varied** from 3.0 days per discharge at Copley Hospital to 5.8 days per discharge at Mt. Ascutney Hospital and Health Center. Fletcher Allen's average length of stay in 2012 was 5.3 days per discharge.
- **While inpatient discharges from Mt. Ascutney decreased 18.7%**, from 502 in 2011 to 408 in 2012, the total number of patient days increased by 18.6% (from 1,987 to 2,356) and the average length of stay increased by 45.9% (from 4.0 to 5.8). These increases at Mt. Ascutney are due primarily to large increases in the number of patient days and average length of stay for discharges with a CCS diagnosis group of mental disorders (from 7 to 11 discharges, 18 to 343 patient days, and 2.6 to 31.2 average length of stay), and for discharges with a CCS diagnosis group of diseases of the respiratory system (from 121 to 96 discharges, 538 to 902 patient days, and 4.4 to 9.4 average length of stay).

- In 2012, Medicare continues to be the leading principal payer for inpatient discharges from Vermont hospitals at 48.7% of total discharges, followed by Private Insurance at 29.4% and Medicaid at 17.2%. However, there is wide variation among hospitals in payer mix.**



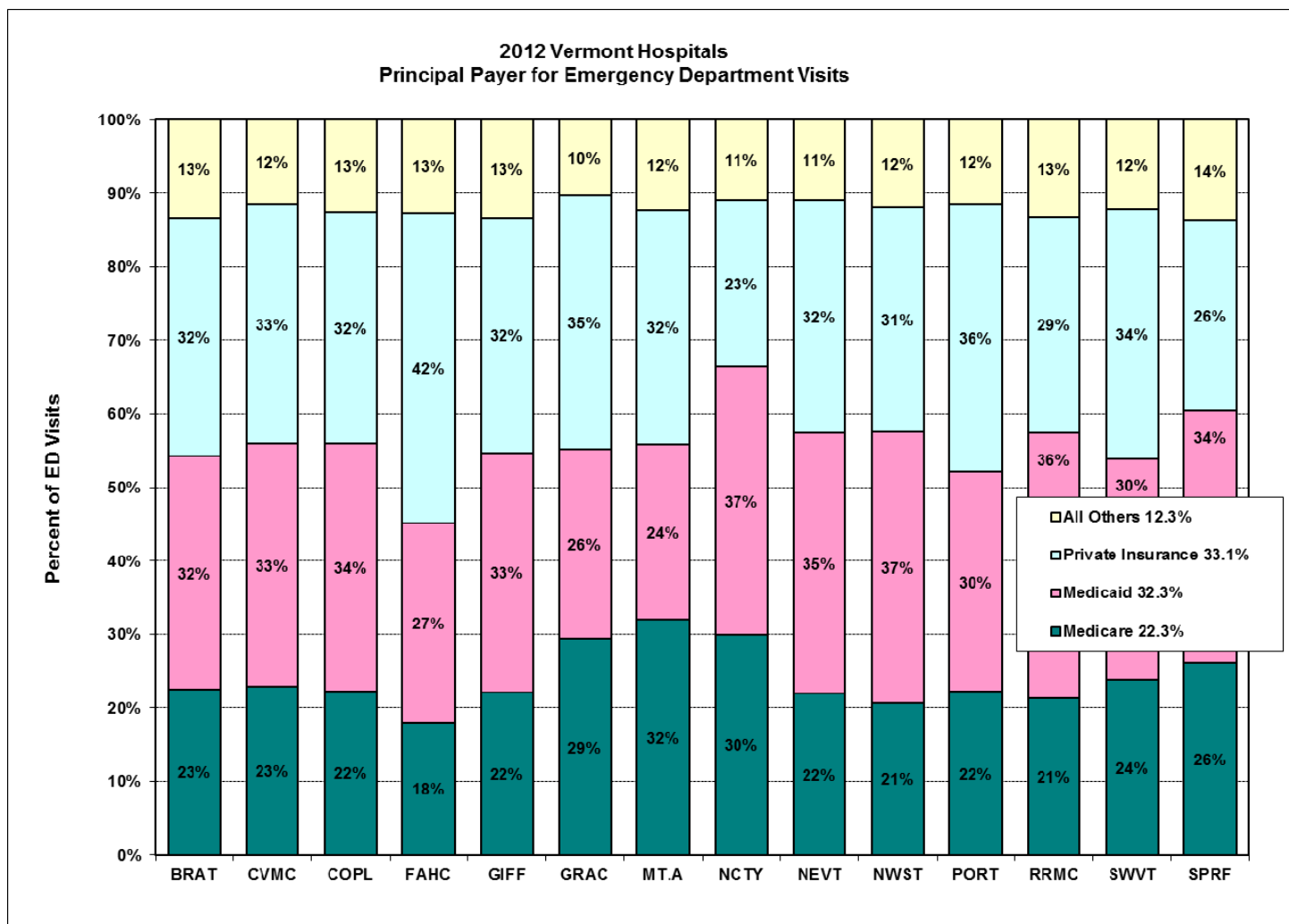
- **The most frequent reasons for hospitalization in 2012** were Diseases of the circulatory system; Pregnancy, childbirth and the puerperium; Diseases of the respiratory system; Diseases of the digestive system; and Injury and poisoning; consistent with recent years.



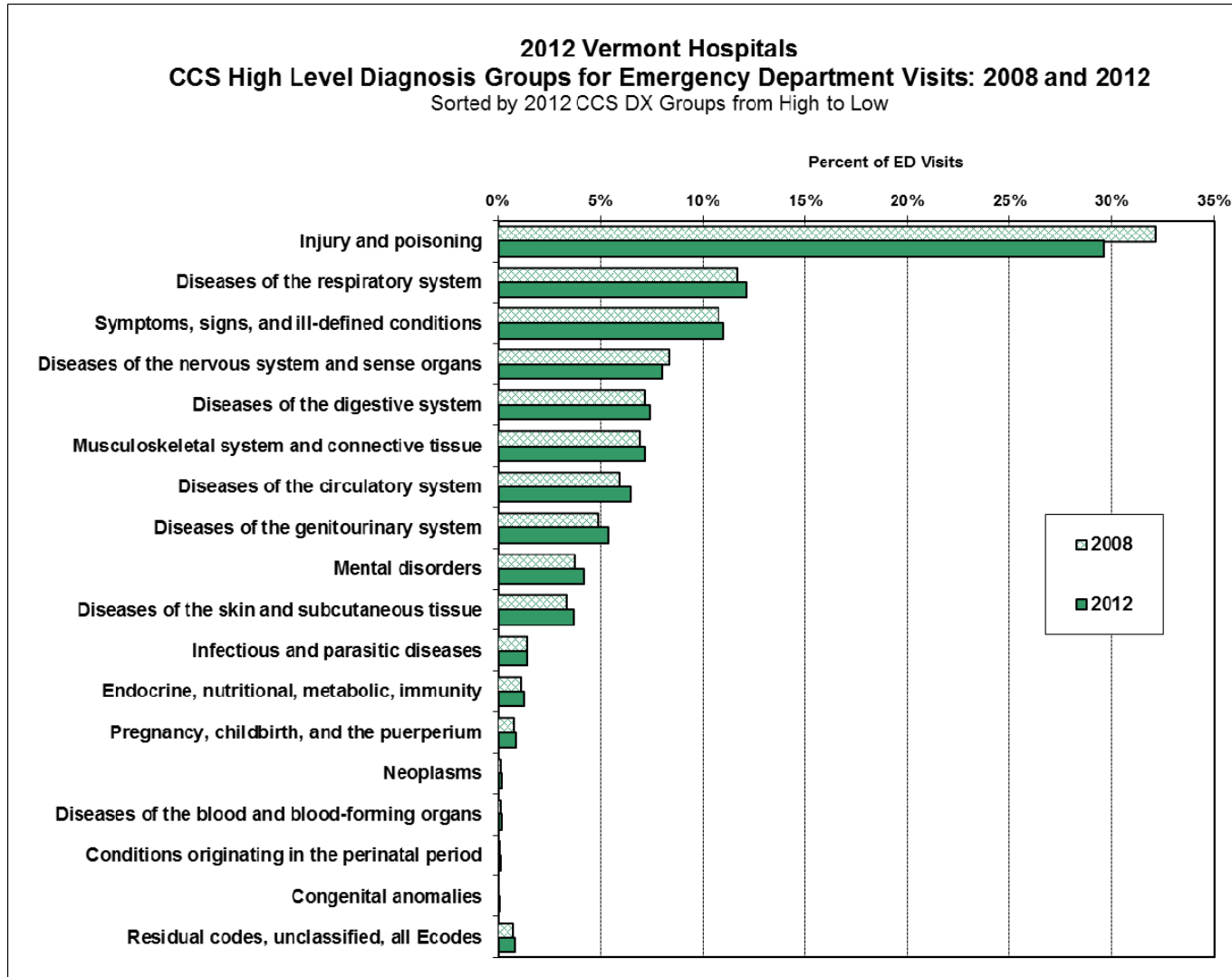
Highlights of Visits to Vermont Hospital Emergency Departments

- **In 2012 there were a total of 274,803 visits to Vermont hospital Emergency Departments**, including both Vermont residents and non-residents. As in 2011, about 91% (249,824) of these ED visits were not admitted, while the remaining 9% (24,979) of ED visits were admitted and categorized as inpatient discharges.
- **The number of all ED visits has increased** from 2008 to 2012 by 4.2% overall (4.3% for ED visits not admitted and 3.4% for those admitted as inpatients).
- **In 2012, the percent of ED visits that are admitted as inpatients increases with increasing age.** About 2% of ED visits by children under age 15 are admitted, as are 2.5% of visits by individuals age 15-24, 4.2% of visits by those age 25-44, 11.2% of those age 45-64, 19.5% of those age 65-74, and 26.3% of those age 75 and older.
- **Fletcher Allen Health Care** continues to have the highest percent of visits to the ED in 2012, leading all Vermont hospitals with 21.0% of all ED visits. Of all ED visits to FAHC, 16.6% were admitted as inpatients, consistent with 2011.
- **The percent of ED visits that were admitted in 2012** ranged from highs of 16.6% at FAHC, 13.9% at Rutland Regional Medical Center, and 12.7% at Southwestern Vermont Medical Center, to a low of 0.9% at Grace Cottage Hospital.
- **Overall, there was a noticeable increase from 2011 to 2012** in the percent of ED visits with a CCS diagnosis group of congenital anomalies that were admitted (from 27.2% of such cases to 37.2%). The increase was seen primarily at FAHC, where 45.0% of 40 cases were admitted in 2011, and 64.9% of 37 cases were admitted in 2012. While there is little change in the percent of ED visits that are admitted within specific CCS diagnosis groups from 2011 to 2012, there is much variation within individual hospitals over time that could be accounted for by the severity of each case.

- In 2012, private insurance was the leading principal payer for ED visits not admitted at 33.1% of these visits, followed by Medicaid at 32.3% and Medicare at 22.3%. These figures are comparable to those for 2010 and 2011.



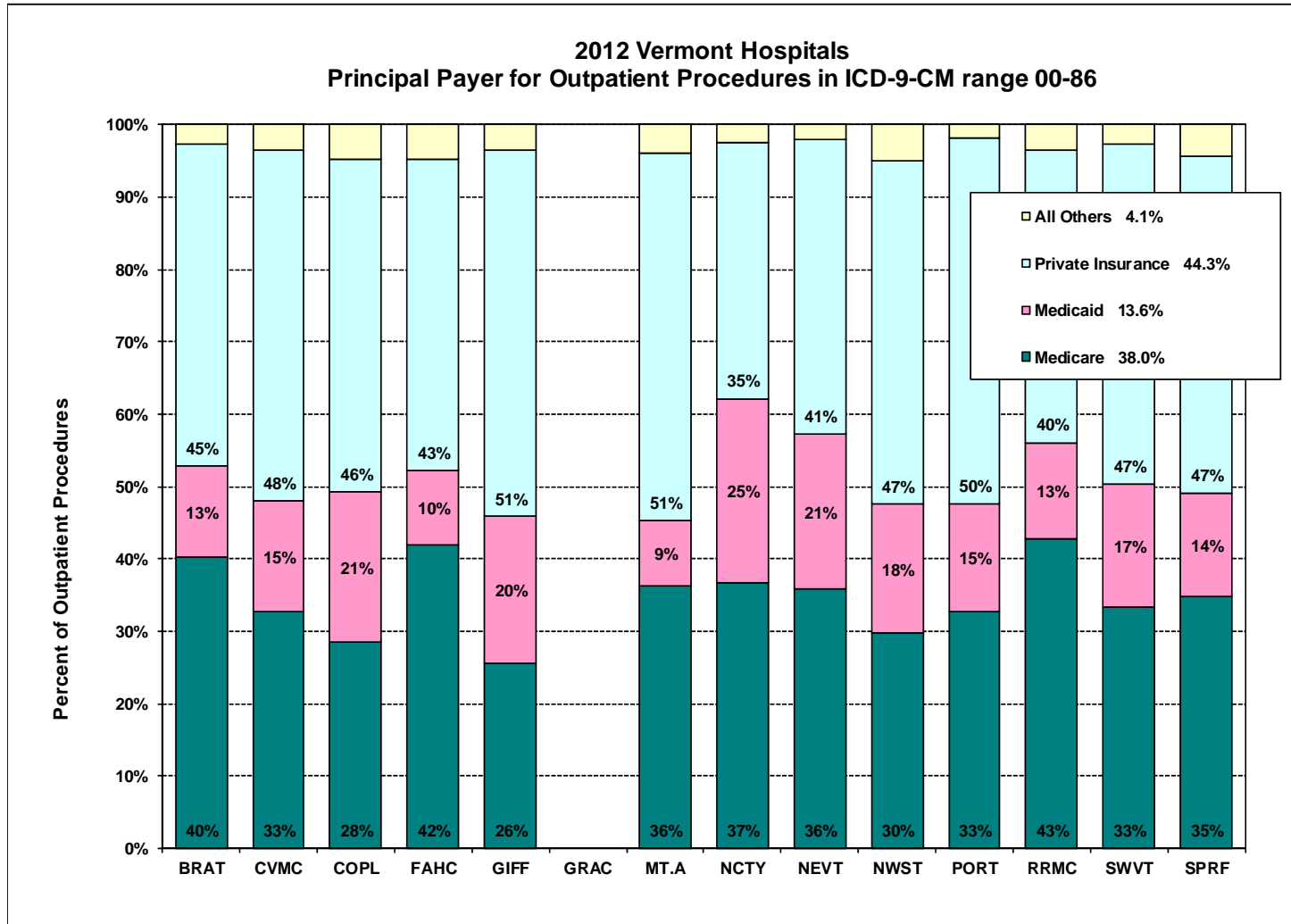
- **The most frequent reasons for ED visits not admitted in 2012** were Injury and poisoning; Diseases of the respiratory system; Symptoms, signs and ill-defined conditions; Diseases of the nervous system and sense organs; Diseases of the digestive system; and Musculoskeletal system & connective tissue, consistent with recent years.



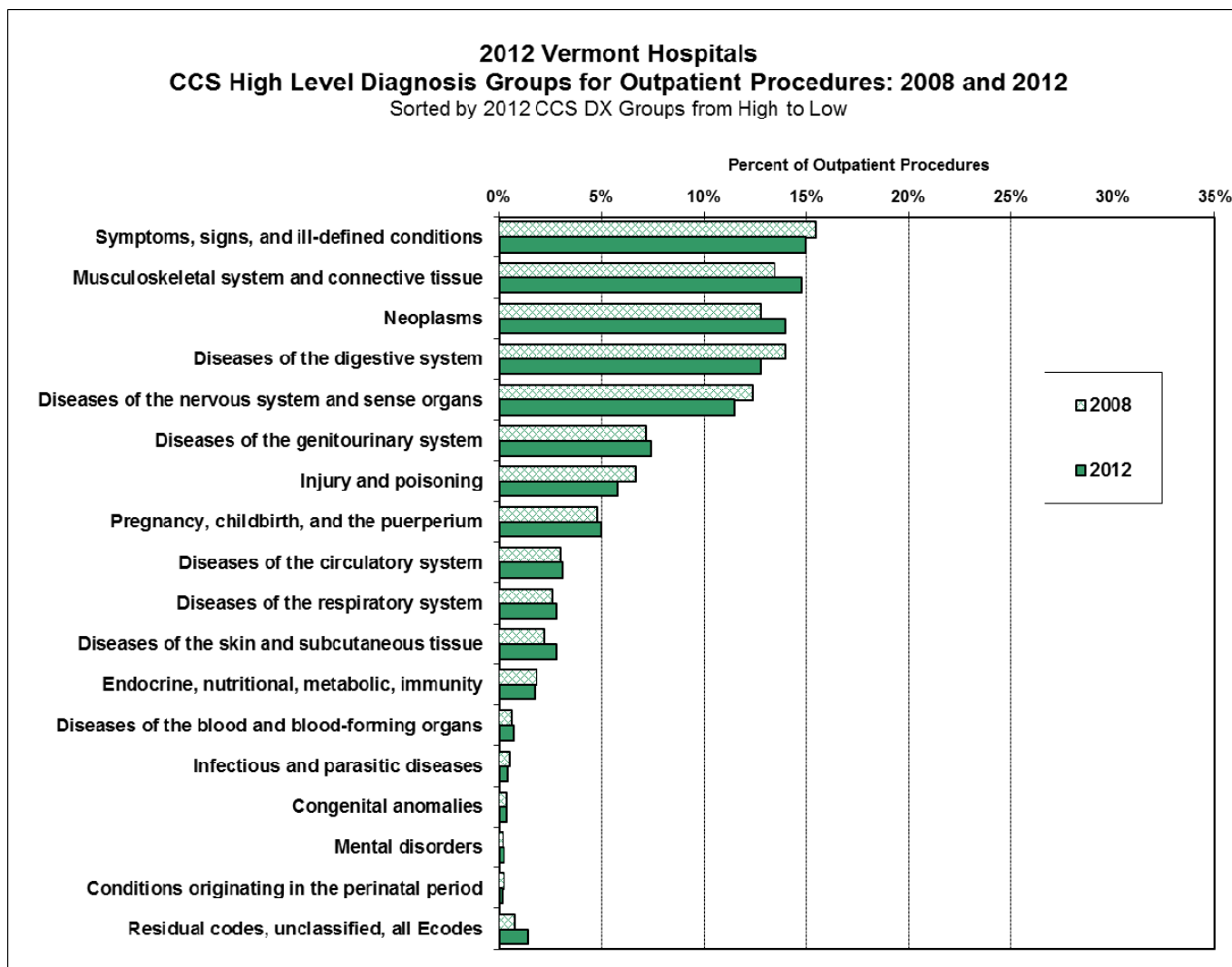
Highlights of Outpatient Visits to Vermont Hospitals

- **In 2012, there were 102,833 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 3.2% from 2008 to 2012. Most of this increase was seen from 2008 to 2009.
- **Overall, non-residents accounted for 10.0% of the 102,833 visits to Vermont hospitals for outpatient procedures** in 2012. However, there was wide variation among hospitals, with non-residents comprising 34.9% of Mt. Ascutney Hospital and Health Center's outpatient visits and 22.5% 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 38.0% of all visits to Vermont hospitals for outpatient procedures in 2012. Brattleboro Memorial Hospital, Fletcher Allen Health Care 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 (68.0% and 61.2%, respectively).
- **Mt. Ascutney Hospital and Health Center reported the lowest percent of outpatient procedures with Medicaid** as primary payer (9.0%), followed by Fletcher Allen Health Care with 10.1%, while North Country Hospital reported the highest percent with Medicaid as primary payer (25.5%).
- **The services most frequently provided in expanded outpatient visits** in 2012 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, Laboratory-Pathological, and Cytology. These findings are consistent with recent years.
- **Compared to 2011, in 2012 the total number of observation beds decreased by 5.5%, while the average charge per observation bed increased by 8.1%.** Fletcher Allen Health Care had the most observation bed records, with 19.9% of all observation bed records (including inpatient, outpatient and ED settings). Rutland Regional Medical Center had 13.7% of these records, followed closely by Central Vermont Medical Center (12.5%), Northwestern Medical Center (11.0%), and Southwestern Vermont Medical Center (10.4%). 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.

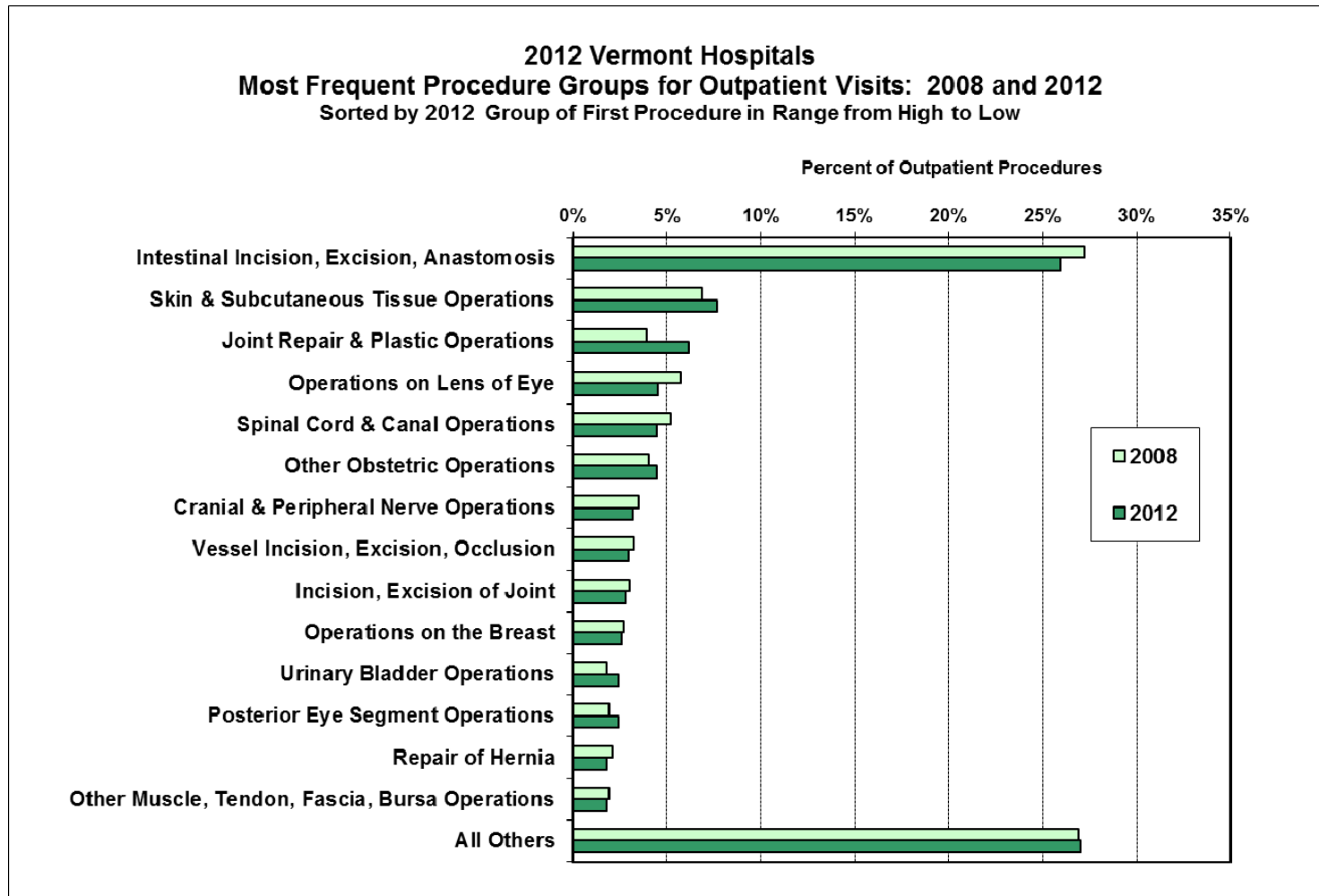
- In 2012, private insurance was the leading principal payer for outpatient procedures in range at 44.3% of these procedures, followed by Medicare at 38.0% and Medicaid at 13.6%.



- **The most frequent reasons for outpatient procedures in range** in 2012 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 2012 are consistent with those in recent years, although their rank order may differ a little.

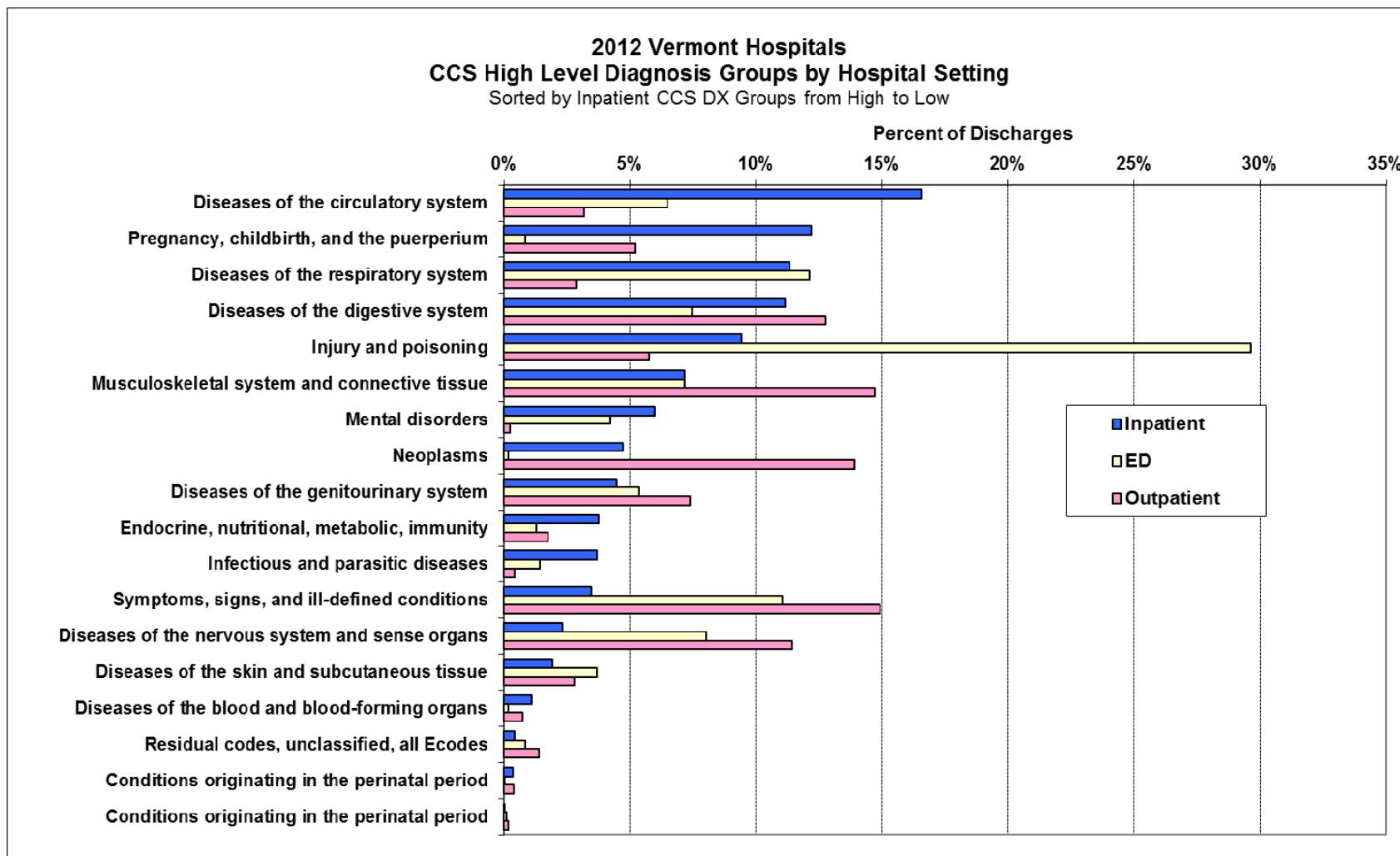


- The leading group of the first outpatient procedure in range in both 2012 and 2008** was Intestinal Incision, Excision, and Anastomosis of Intestine. This procedure group includes diagnostic and other procedures on the small or large intestine. Following this procedure group are Skin & Subcutaneous Tissue Operations (i.e., operations on hair follicles or nails); Joint Repair & Plastic Operations (i.e., spinal fusion, joint replacement); Operations on Lens of Eye; Spinal Cord & Canal Operations (i.e., exploration and decompression of spinal canal structures, excision or destruction of lesion of spinal cord or spinal meninges); and Other Obstetric Conditions. The most frequent first-in-range procedure groups in 2012 are consistent with those in recent years, although their rank order may differ a little.

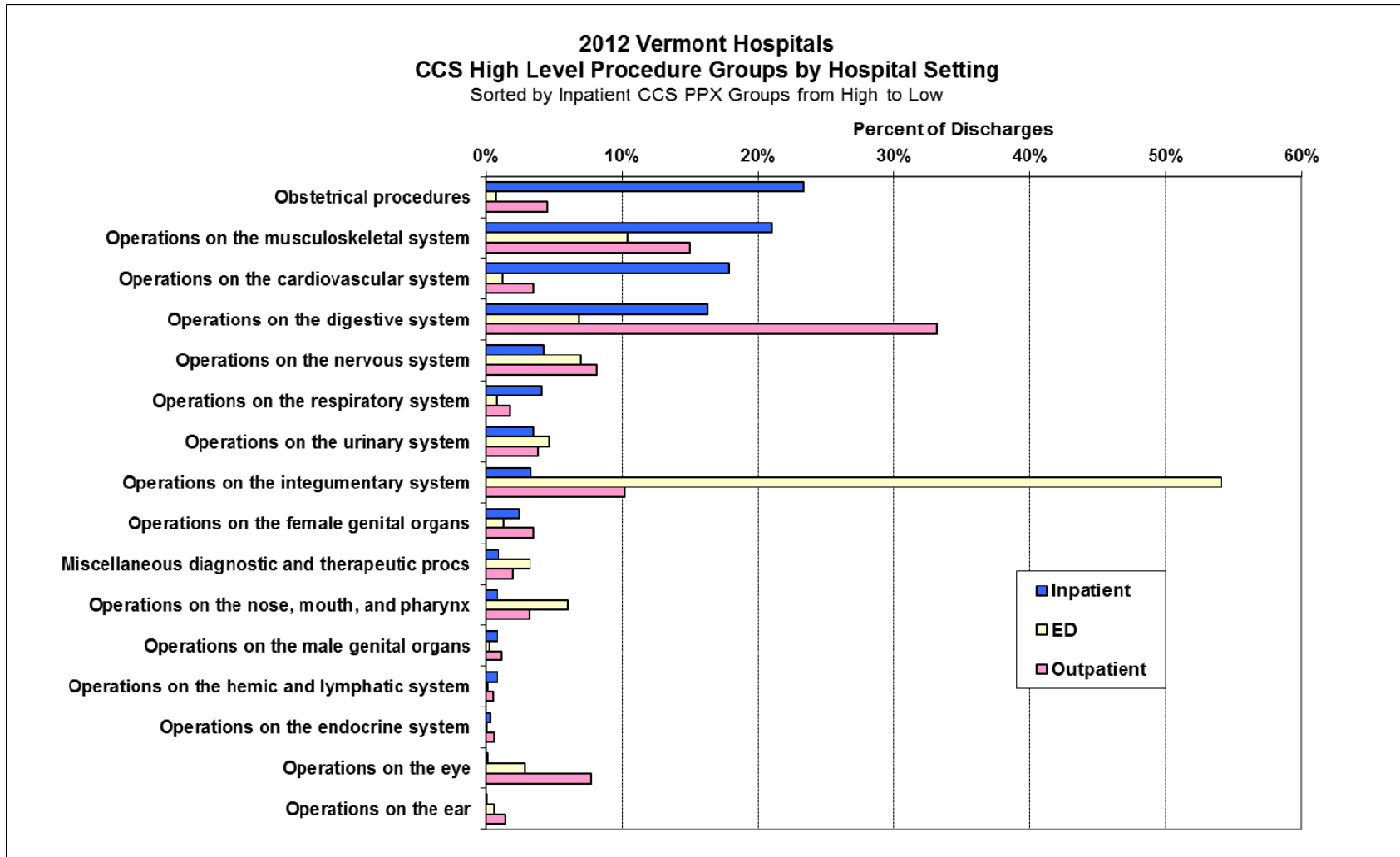


Highlights of Comparisons across Vermont Hospital Settings

- The most frequent CCS high level diagnosis groups differ across Vermont hospital settings in 2012.** The most frequent diagnosis group for inpatients is Diseases of the circulatory system. The most frequent diagnosis group for ED visits is 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 differ across hospital settings in 2012.** The most frequent procedure group (based on the first procedure in range) for inpatients is Obstetrical procedures, followed by Operations on the musculoskeletal system. The most frequent procedure group for ED visits is 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
2012 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	751	44.9%	920	55.1%	1,671	3.6%
Central Vermont Medical Center	791	25.3%	2,332	74.7%	3,123	6.7%
Copley Hospital	1,179	82.2%	256	17.8%	1,435	3.1%
Fletcher Allen Health Care	10,353	52.0%	9,566	48.0%	19,919	42.7%
Gifford Medical Center	504	45.3%	608	54.7%	1,112	2.4%
Grace Cottage Hospital	139	83.7%	27	16.3%	166	0.4%
Mt. Ascutney Hospital and Health Center	314	77.0%	94	23.0%	408	0.9%
North Country Hospital	1,105	81.4%	253	18.6%	1,358	2.9%
Northeastern Vermont Regional Hospital	995	72.9%	369	27.1%	1,364	2.9%
Northwestern Medical Center	933	41.9%	1,293	58.1%	2,226	4.8%
Porter Medical Center	874	57.6%	643	42.4%	1,517	3.3%
Rutland Regional Medical Center	1,749	28.0%	4,488	72.0%	6,237	13.4%
Southwestern Vermont Medical Center	903	22.9%	3,044	77.1%	3,947	8.5%
Springfield Hospital	1,037	48.8%	1,086	51.2%	2,123	4.6%
Total	21,627	46.4%	24,979	53.6%	46,606	100.0%

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

Table I-2
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012

<u>Vermont Hospital</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Brattleboro Memorial Hospital	2,482	2,168	1,671	13,868	9,508	5,891	5.6	4.4	3.5
Central Vermont Medical Center	4,516	3,581	3,123	25,150	16,240	15,636	5.6	4.5	5.0
Copley Hospital	1,650	1,251	1,435	7,267	4,612	4,295	4.4	3.7	3.0
Fletcher Allen Health Care	18,470	20,040	19,919	128,386	118,403	105,206	7.0	5.9	5.3
Gifford Medical Center	1,226	982	1,112	4,854	3,078	3,606	4.0	3.1	3.2
Grace Cottage Hospital	183	209	166	547	587	513	3.0	2.8	3.1
Mt. Ascutney Hospital and Health Center	655	411	408	3,455	1,403	2,356	5.3	3.4	5.8
North Country Hospital	2,177	1,726	1,358	9,133	5,526	5,189	4.2	3.2	3.8
Northeastern Vermont Regional Hospital	2,370	1,595	1,364	17,443	5,151	4,382	7.4	3.2	3.2
Northwestern Medical Center	2,297	2,476	2,226	13,634	9,017	7,248	5.9	3.6	3.3
Porter Medical Center	1,561	1,539	1,517	7,162	5,872	4,915	4.6	3.8	3.2
Rutland Regional Medical Center	7,308	6,288	6,237	48,049	29,405	31,015	6.6	4.7	5.0
Southwestern Vermont Medical Center	4,820	4,585	3,947	29,386	17,755	14,066	6.1	3.9	3.6
Springfield Hospital	2,215	2,583	2,123	11,982	11,531	8,996	5.4	4.5	4.2
Total	51,930	49,434	46,606	320,316	238,088	213,314	6.2	4.8	4.6

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
All Vermont Hospitals									
Infectious & parasitic diseases	632	649	1,713	5,002	4,249	11,466	7.9	6.5	6.7
Neoplasms	3,289	2,926	2,201	23,597	18,044	12,128	7.2	6.2	5.5
Endocrine, nutritional, metabolic, immunity	1,252	1,589	1,749	8,879	7,807	8,052	7.1	4.9	4.6
Diseases of the blood & blood-forming organs	264	384	515	1,616	1,811	2,134	6.1	4.7	4.1
Mental disorders	2,680	3,067	2,791	33,276	21,988	25,283	12.4	7.2	9.1
Diseases of the nervous system and sense organs	1,223	947	1,084	7,307	4,267	4,761	6.0	4.5	4.4
Diseases of the circulatory system	10,306	9,945	7,718	71,077	43,148	29,186	6.9	4.3	3.8
Diseases of the respiratory system	4,582	5,004	5,275	30,288	26,335	24,610	6.6	5.3	4.7
Diseases of the digestive system	5,375	5,266	5,191	30,067	25,283	21,613	5.6	4.8	4.2
Diseases of the genitourinary system	2,852	2,271	2,090	12,278	7,918	7,957	4.3	3.5	3.8
Pregnancy, childbirth, and the puerperium	8,278	6,351	5,684	21,251	15,863	14,833	2.6	2.5	2.6
Diseases of the skin and subcutaneous tissue	612	748	901	4,606	3,830	4,375	7.5	5.1	4.9
Musculoskeletal system and connective tissue	2,647	2,783	3,337	15,204	12,094	11,292	5.7	4.3	3.4
Congenital anomalies	273	159	158	1,118	684	655	4.1	4.3	4.1
Conditions originating in the perinatal period	20	1	5	20	1	127	1.0	1.0	25.4
Injury & poisoning	5,539	5,017	4,388	34,716	26,799	20,843	6.3	5.3	4.8
Symptoms, signs & ill-defined conditions	2,034	2,250	1,619	19,577	17,691	13,409	9.6	7.9	8.3
Residual codes, unclassified, all Ecodes	72	77	187	437	276	590	6.1	3.6	3.2
Total	51,930	49,434	46,606	320,316	238,088	213,314	6.2	4.8	4.6

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Brattleboro Memorial Hospital									
Infectious & parasitic diseases	28	26	76	214	204	338	7.6	7.8	4.4
Neoplasms	130	114	72	1,021	524	319	7.9	4.6	4.4
Endocrine, nutritional, metabolic, immunity	87	80	54	598	341	223	6.9	4.3	4.1
Diseases of the blood & blood-forming organs	8	16	18	38	48	53	4.8	3.0	2.9
Mental disorders	54	19	31	240	88	111	4.4	4.6	3.6
Diseases of the nervous system and sense organs	50	46	25	252	187	117	5.0	4.1	4.7
Diseases of the circulatory system	369	381	196	2,670	1,579	673	7.2	4.1	3.4
Diseases of the respiratory system	181	203	183	1,418	1,302	821	7.8	6.4	4.5
Diseases of the digestive system	273	282	214	1,928	1,248	857	7.1	4.4	4.0
Diseases of the genitourinary system	166	127	85	664	458	279	4.0	3.6	3.3
Pregnancy, childbirth, and the puerperium	553	341	376	1,438	827	925	2.6	2.4	2.5
Diseases of the skin and subcutaneous tissue	20	34	22	174	185	110	8.7	5.4	5.0
Musculoskeletal system and connective tissue	156	177	180	1,171	869	553	7.5	4.9	3.1
Congenital anomalies	4	2	1	5	2	6	1.3	1.0	6.0
Conditions originating in the perinatal period	5	-	-	5	-	-	1.0	-	-
Injury & poisoning	333	263	120	1,783	1,299	460	5.4	4.9	3.8
Symptoms, signs & ill-defined conditions	61	52	16	231	315	43	3.8	6.1	2.7
Residual codes, unclassified, all Ecodes	4	5	2	18	32	3	4.5	6.4	1.5
Total	2,482	2,168	1,671	13,868	9,508	5,891	5.6	4.4	3.5

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Central Vermont Medical Center									
Infectious & parasitic diseases	50	37	115	264	215	671	5.3	5.8	5.8
Neoplasms	275	169	83	1,918	1,057	511	7.0	6.3	6.2
Endocrine, nutritional, metabolic, immunity	127	114	70	898	528	268	7.1	4.6	3.8
Diseases of the blood & blood-forming organs	12	21	29	57	84	135	4.8	4.0	4.7
Mental disorders	321	574	505	2,987	4,139	5,042	9.3	7.2	10.0
Diseases of the nervous system and sense organs	85	40	48	492	180	230	5.8	4.5	4.8
Diseases of the circulatory system	867	548	359	4,929	2,127	1,365	5.7	3.9	3.8
Diseases of the respiratory system	380	460	552	2,048	2,174	2,463	5.4	4.7	4.5
Diseases of the digestive system	626	422	375	3,639	1,915	1,647	5.8	4.5	4.4
Diseases of the genitourinary system	366	147	149	1,570	447	562	4.3	3.0	3.8
Pregnancy, childbirth, and the puerperium	646	463	357	1,655	976	876	2.6	2.1	2.5
Diseases of the skin and subcutaneous tissue	48	54	97	319	235	382	6.6	4.4	3.9
Musculoskeletal system and connective tissue	166	184	151	1,105	703	540	6.7	3.8	3.6
Congenital anomalies	3	4	4	10	17	37	3.3	4.3	9.3
Conditions originating in the perinatal period	2	-	2	2	-	8	1.0	-	4.0
Injury & poisoning	409	300	208	2,729	1,305	831	6.7	4.4	4.0
Symptoms, signs & ill-defined conditions	122	41	14	473	116	49	3.9	2.8	3.5
Residual codes, unclassified, all Ecodes	11	3	5	55	22	19	5.0	7.3	3.8
Total	4,516	3,581	3,123	25,150	16,240	15,636	5.6	4.5	5.0

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Copley Hospital									
Infectious & parasitic diseases	24	25	20	136	113	102	5.7	4.5	5.1
Neoplasms	69	30	19	400	145	84	5.8	4.8	4.4
Endocrine, nutritional, metabolic, immunity	49	35	58	291	187	189	5.9	5.3	3.3
Diseases of the blood & blood-forming organs	2	7	10	7	27	25	3.5	3.9	2.5
Mental disorders	34	23	28	200	84	73	5.9	3.7	2.6
Diseases of the nervous system and sense organs	19	21	41	70	77	96	3.7	3.7	2.3
Diseases of the circulatory system	289	191	183	1,431	660	487	5.0	3.5	2.7
Diseases of the respiratory system	200	146	180	1,079	579	696	5.4	4.0	3.9
Diseases of the digestive system	206	162	195	861	676	597	4.2	4.2	3.1
Diseases of the genitourinary system	92	60	71	381	205	213	4.1	3.4	3.0
Pregnancy, childbirth, and the puerperium	252	275	193	571	593	368	2.3	2.2	1.9
Diseases of the skin and subcutaneous tissue	34	34	29	168	218	128	4.9	6.4	4.4
Musculoskeletal system and connective tissue	66	53	241	367	250	568	5.6	4.7	2.4
Congenital anomalies	1	1	-	1	3	-	1.0	3.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	238	146	145	1,040	664	620	4.4	4.5	4.3
Symptoms, signs & ill-defined conditions	74	42	19	259	131	39	3.5	3.1	2.1
Residual codes, unclassified, all Ecodes	1	-	3	5	-	10	5.0	-	3.3
Total	1,650	1,251	1,435	7,267	4,612	4,295	4.4	3.7	3.0

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Fletcher Allen Health Care									
Infectious & parasitic diseases	203	224	701	2,269	2,133	5,947	11.2	9.5	8.5
Neoplasms	1,572	1,577	1,420	11,273	11,048	8,237	7.2	7.0	5.8
Endocrine, nutritional, metabolic, immunity	341	634	826	2,788	3,763	4,639	8.2	5.9	5.6
Diseases of the blood & blood-forming organs	97	187	218	623	1,070	1,137	6.4	5.7	5.2
Mental disorders	818	803	811	11,724	7,668	9,017	14.3	9.5	11.1
Diseases of the nervous system and sense organs	537	440	587	3,998	2,490	2,964	7.4	5.7	5.0
Diseases of the circulatory system	3,938	4,655	4,348	32,864	24,454	18,622	8.3	5.3	4.3
Diseases of the respiratory system	1,143	1,356	1,377	8,228	9,295	7,487	7.2	6.9	5.4
Diseases of the digestive system	1,385	1,839	1,802	8,294	10,333	8,168	6.0	5.6	4.5
Diseases of the genitourinary system	732	818	646	3,412	3,386	2,914	4.7	4.1	4.5
Pregnancy, childbirth, and the puerperium	3,263	2,322	2,260	9,240	6,964	6,669	2.8	3.0	3.0
Diseases of the skin and subcutaneous tissue	165	236	234	1,455	1,591	1,247	8.8	6.7	5.3
Musculoskeletal system and connective tissue	1,091	1,157	1,243	5,329	5,645	4,826	4.9	4.9	3.9
Congenital anomalies	225	135	131	874	598	546	3.9	4.4	4.2
Conditions originating in the perinatal period	3	-	2	3	-	113	1.0	-	56.5
Injury & poisoning	1,969	2,332	2,228	13,131	15,106	12,404	6.7	6.5	5.6
Symptoms, signs & ill-defined conditions	968	1,293	996	12,762	12,751	10,010	13.2	9.9	10.1
Residual codes, unclassified, all Ecodes	20	32	89	119	108	259	6.0	3.4	2.9
Total	18,470	20,040	19,919	128,386	118,403	105,206	7.0	5.9	5.3

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Gifford Medical Center									
Infectious & parasitic diseases	20	9	20	101	36	77	5.1	4.0	3.9
Neoplasms	46	34	15	311	108	79	6.8	3.2	5.3
Endocrine, nutritional, metabolic, immunity	32	37	39	142	143	149	4.4	3.9	3.8
Diseases of the blood & blood-forming organs	5	8	16	13	26	64	2.6	3.3	4.0
Mental disorders	20	5	62	70	17	218	3.5	3.4	3.5
Diseases of the nervous system and sense organs	28	17	21	95	59	53	3.4	3.5	2.5
Diseases of the circulatory system	222	159	131	896	502	368	4.0	3.2	2.8
Diseases of the respiratory system	128	109	151	667	413	512	5.2	3.8	3.4
Diseases of the digestive system	174	100	114	771	391	393	4.4	3.9	3.4
Diseases of the genitourinary system	65	63	64	241	207	201	3.7	3.3	3.1
Pregnancy, childbirth, and the puerperium	306	301	233	602	626	589	2.0	2.1	2.5
Diseases of the skin and subcutaneous tissue	23	20	45	96	67	153	4.2	3.4	3.4
Musculoskeletal system and connective tissue	43	36	102	308	144	377	7.2	4.0	3.7
Congenital anomalies	-	1	-	-	4	-	-	4.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	102	61	59	522	276	240	5.1	4.5	4.1
Symptoms, signs & ill-defined conditions	11	21	31	15	57	105	1.4	2.7	3.4
Residual codes, unclassified, all Ecodes	1	1	9	4	2	28	4.0	2.0	3.1
Total	1,226	982	1,112	4,854	3,078	3,606	4.0	3.1	3.2

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Grace Cottage Hospital									
Infectious & parasitic diseases	1	3	-	3	10	-	3.0	3.3	-
Neoplasms	8	12	10	21	35	24	2.6	2.9	2.4
Endocrine, nutritional, metabolic, immunity	4	16	9	11	37	26	2.8	2.3	2.9
Diseases of the blood & blood-forming organs	-	5	2	-	13	6	-	2.6	3.0
Mental disorders	5	19	3	14	64	10	2.8	3.4	3.3
Diseases of the nervous system and sense organs	7	7	2	17	18	8	2.4	2.6	4.0
Diseases of the circulatory system	39	36	37	132	89	107	3.4	2.5	2.9
Diseases of the respiratory system	44	43	30	153	132	110	3.5	3.1	3.7
Diseases of the digestive system	10	10	12	31	29	41	3.1	2.9	3.4
Diseases of the genitourinary system	7	5	12	19	10	37	2.7	2.0	3.1
Pregnancy, childbirth, and the puerperium	34	10	-	70	14	-	2.1	1.4	-
Diseases of the skin and subcutaneous tissue	4	12	7	15	49	22	3.8	4.1	3.1
Musculoskeletal system and connective tissue	5	7	6	16	21	18	3.2	3.0	3.0
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	8	11	18	23	35	59	2.9	3.2	3.3
Symptoms, signs & ill-defined conditions	6	10	11	18	22	24	3.0	2.2	2.2
Residual codes, unclassified, all Ecodes	1	3	7	4	9	21	4.0	3.0	3.0
Total	183	209	166	547	587	513	3.0	2.8	3.1

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Mt. Ascutney Hospital and Health Center									
Infectious & parasitic diseases	6	6	10	128	27	45	21.3	4.5	4.5
Neoplasms	44	23	22	245	68	98	5.6	3.0	4.5
Endocrine, nutritional, metabolic, immunity	15	13	20	84	45	61	5.6	3.5	3.1
Diseases of the blood & blood-forming organs	7	8	10	16	23	27	2.3	2.9	2.7
Mental disorders	30	6	11	191	21	343	6.4	3.5	31.2
Diseases of the nervous system and sense organs	6	3	3	34	6	8	5.7	2.0	2.7
Diseases of the circulatory system	150	93	75	640	291	257	4.3	3.1	3.4
Diseases of the respiratory system	86	72	96	429	248	902	5.0	3.4	9.4
Diseases of the digestive system	85	55	67	413	189	269	4.9	3.4	4.0
Diseases of the genitourinary system	35	32	31	159	98	108	4.5	3.1	3.5
Pregnancy, childbirth, and the puerperium	-	-	-	-	-	-	-	-	-
Diseases of the skin and subcutaneous tissue	20	17	16	140	66	54	7.0	3.9	3.4
Musculoskeletal system and connective tissue	61	39	13	246	161	37	4.0	4.1	2.8
Congenital anomalies	6	-	-	22	-	-	3.7	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	75	26	16	410	102	57	5.5	3.9	3.6
Symptoms, signs & ill-defined conditions	27	18	11	270	58	74	10.0	3.2	6.7
Residual codes, unclassified, all Ecodes	2	-	7	28	-	16	14.0	-	2.3
Total	655	411	408	3,455	1,403	2,356	5.3	3.4	5.8

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
North Country Hospital									
Infectious & parasitic diseases	40	40	14	181	140	90	4.5	3.5	6.4
Neoplasms	82	74	33	439	338	164	5.4	4.6	5.0
Endocrine, nutritional, metabolic, immunity	58	60	82	218	182	246	3.8	3.0	3.0
Diseases of the blood & blood-forming organs	9	12	30	37	31	129	4.1	2.6	4.3
Mental disorders	58	25	21	217	62	64	3.7	2.5	3.0
Diseases of the nervous system and sense organs	47	60	18	172	139	51	3.7	2.3	2.8
Diseases of the circulatory system	503	417	210	2,226	1,106	656	4.4	2.7	3.1
Diseases of the respiratory system	325	227	220	1,516	940	984	4.7	4.1	4.5
Diseases of the digestive system	271	218	184	1,250	849	868	4.6	3.9	4.7
Diseases of the genitourinary system	152	111	80	537	302	367	3.5	2.7	4.6
Pregnancy, childbirth, and the puerperium	317	204	219	994	475	547	3.1	2.3	2.5
Diseases of the skin and subcutaneous tissue	25	30	40	136	104	170	5.4	3.5	4.3
Musculoskeletal system and connective tissue	54	55	95	312	223	379	5.8	4.1	4.0
Congenital anomalies	1	2	-	7	8	-	7.0	4.0	-
Conditions originating in the perinatal period	2	-	-	2	-	-	1.0	-	-
Injury & poisoning	165	138	91	679	508	405	4.1	3.7	4.5
Symptoms, signs & ill-defined conditions	60	49	14	180	106	39	3.0	2.2	2.8
Residual codes, unclassified, all Ecodes	8	4	7	30	13	30	3.8	3.3	4.3
Total	2,177	1,726	1,358	9,133	5,526	5,189	4.2	3.2	3.8

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Northeastern Vermont Regional Hospital									
Infectious & parasitic diseases	22	41	44	87	146	156	4.0	3.6	3.5
Neoplasms	90	47	31	526	164	144	5.8	3.5	4.6
Endocrine, nutritional, metabolic, immunity	39	53	41	186	174	124	4.8	3.3	3.0
Diseases of the blood & blood-forming organs	11	7	14	37	14	54	3.4	2.0	3.9
Mental disorders	521	19	37	9,683	88	118	18.6	4.6	3.2
Diseases of the nervous system and sense organs	35	29	43	116	93	154	3.3	3.2	3.6
Diseases of the circulatory system	316	287	167	1,369	966	445	4.3	3.4	2.7
Diseases of the respiratory system	257	211	190	995	712	603	3.9	3.4	3.2
Diseases of the digestive system	211	189	241	999	629	900	4.7	3.3	3.7
Diseases of the genitourinary system	135	121	56	441	272	161	3.3	2.2	2.9
Pregnancy, childbirth, and the puerperium	316	279	214	777	595	471	2.5	2.1	2.2
Diseases of the skin and subcutaneous tissue	28	36	23	121	164	83	4.3	4.6	3.6
Musculoskeletal system and connective tissue	114	95	84	714	425	345	6.3	4.5	4.1
Congenital anomalies	4	2	-	15	6	-	3.8	3.0	-
Conditions originating in the perinatal period	1	-	-	1	-	-	1.0	-	-
Injury & poisoning	225	140	143	1,247	592	517	5.5	4.2	3.6
Symptoms, signs & ill-defined conditions	44	38	33	126	110	101	2.9	2.9	3.1
Residual codes, unclassified, all Ecodes	1	1	3	3	1	6	3.0	1.0	2.0
Total	2,370	1,595	1,364	17,443	5,151	4,382	7.4	3.2	3.2

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Northwestern Medical Center									
Infectious & parasitic diseases	39	32	39	268	183	212	6.9	5.7	5.4
Neoplasms	117	124	48	737	674	192	6.3	5.4	4.0
Endocrine, nutritional, metabolic, immunity	44	85	57	253	422	211	5.8	5.0	3.7
Diseases of the blood & blood-forming organs	11	17	25	95	67	75	8.6	3.9	3.0
Mental disorders	43	31	29	679	146	83	15.8	4.7	2.9
Diseases of the nervous system and sense organs	38	19	21	159	67	65	4.2	3.5	3.1
Diseases of the circulatory system	518	470	238	3,660	1,550	722	7.1	3.3	3.0
Diseases of the respiratory system	225	300	319	1,763	1,372	1,278	7.8	4.6	4.0
Diseases of the digestive system	320	357	295	1,618	1,443	1,158	5.1	4.0	3.9
Diseases of the genitourinary system	161	92	132	791	380	462	4.9	4.1	3.5
Pregnancy, childbirth, and the puerperium	435	498	426	920	1,049	958	2.1	2.1	2.2
Diseases of the skin and subcutaneous tissue	43	36	59	400	182	245	9.3	5.1	4.2
Musculoskeletal system and connective tissue	75	145	319	443	559	772	5.9	3.9	2.4
Congenital anomalies	1	2	14	1	5	41	1.0	2.5	2.9
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	181	212	167	1,585	787	583	8.8	3.7	3.5
Symptoms, signs & ill-defined conditions	45	51	33	251	121	174	5.6	2.4	5.3
Residual codes, unclassified, all Ecodes	1	5	5	11	10	17	11.0	2.0	3.4
Total	2,297	2,476	2,226	13,634	9,017	7,248	5.9	3.6	3.3

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Porter Medical Center									
Infectious & parasitic diseases	5	17	32	32	83	149	6.4	4.9	4.7
Neoplasms	60	74	38	317	409	135	5.3	5.5	3.6
Endocrine, nutritional, metabolic, immunity	29	46	56	147	202	175	5.1	4.4	3.1
Diseases of the blood & blood-forming organs	4	13	14	70	69	33	17.5	5.3	2.4
Mental disorders	10	7	24	66	23	77	6.6	3.3	3.2
Diseases of the nervous system and sense organs	8	17	27	33	69	63	4.1	4.1	2.3
Diseases of the circulatory system	279	287	157	1,689	904	437	6.1	3.1	2.8
Diseases of the respiratory system	162	214	247	1,053	1,019	1,059	6.5	4.8	4.3
Diseases of the digestive system	242	206	177	1,247	1,027	605	5.2	5.0	3.4
Diseases of the genitourinary system	104	88	67	482	291	176	4.6	3.3	2.6
Pregnancy, childbirth, and the puerperium	418	276	337	873	562	776	2.1	2.0	2.3
Diseases of the skin and subcutaneous tissue	23	28	46	138	144	190	6.0	5.1	4.1
Musculoskeletal system and connective tissue	44	74	150	241	293	486	5.5	4.0	3.2
Congenital anomalies	-	-	1	-	-	7	-	-	7.0
Conditions originating in the perinatal period	3	-	-	3	-	-	1.0	-	-
Injury & poisoning	133	140	130	667	620	502	5.0	4.4	3.9
Symptoms, signs & ill-defined conditions	35	42	9	100	130	18	2.9	3.1	2.0
Residual codes, unclassified, all Ecodes	2	10	5	4	27	27	2.0	2.7	5.4
Total	1,561	1,539	1,517	7,162	5,872	4,915	4.6	3.8	3.2

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Rutland Regional Medical Center									
Infectious & parasitic diseases	92	91	282	668	497	1,975	7.3	5.5	7.0
Neoplasms	400	346	264	3,500	1,943	1,352	8.7	5.6	5.1
Endocrine, nutritional, metabolic, immunity	259	185	187	1,967	753	898	7.6	4.1	4.8
Diseases of the blood & blood-forming organs	57	39	59	321	160	176	5.6	4.1	3.0
Mental disorders	358	802	732	3,203	4,787	6,916	8.9	6.0	9.4
Diseases of the nervous system and sense organs	193	101	146	1,010	389	641	5.2	3.9	4.4
Diseases of the circulatory system	1,418	1,025	802	9,877	4,049	2,527	7.0	4.0	3.2
Diseases of the respiratory system	743	727	858	6,080	3,776	4,107	8.2	5.2	4.8
Diseases of the digestive system	659	623	665	3,930	2,918	2,972	6.0	4.7	4.5
Diseases of the genitourinary system	445	311	384	1,929	940	1,400	4.3	3.0	3.6
Pregnancy, childbirth, and the puerperium	936	558	436	2,111	1,286	1,108	2.3	2.3	2.5
Diseases of the skin and subcutaneous tissue	82	95	115	661	383	877	8.1	4.0	7.6
Musculoskeletal system and connective tissue	376	397	450	2,425	1,372	1,360	6.4	3.5	3.0
Congenital anomalies	17	6	3	105	19	4	6.2	3.2	1.3
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	868	591	574	6,082	2,997	2,297	7.0	5.1	4.0
Symptoms, signs & ill-defined conditions	395	381	268	4,067	3,095	2,343	10.3	8.1	8.7
Residual codes, unclassified, all Ecodes	10	10	12	113	41	62	11.3	4.1	5.2
Total	7,308	6,288	6,237	48,049	29,405	31,015	6.6	4.7	5.0

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
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>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Southwestern Vermont Medical Center									
Infectious & parasitic diseases	63	45	322	399	223	1,506	6.3	5.0	4.7
Neoplasms	295	216	119	2,191	1,153	669	7.4	5.3	5.6
Endocrine, nutritional, metabolic, immunity	118	174	186	1,032	828	548	8.7	4.8	2.9
Diseases of the blood & blood-forming organs	38	32	49	290	109	152	7.6	3.4	3.1
Mental disorders	221	74	60	2,244	252	197	10.2	3.4	3.3
Diseases of the nervous system and sense organs	118	123	60	670	402	183	5.7	3.3	3.1
Diseases of the circulatory system	868	932	534	5,944	3,363	1,618	6.8	3.6	3.0
Diseases of the respiratory system	504	644	558	3,656	3,043	2,404	7.3	4.7	4.3
Diseases of the digestive system	624	596	574	3,658	2,771	2,081	5.9	4.6	3.6
Diseases of the genitourinary system	270	209	207	1,209	669	693	4.5	3.2	3.3
Pregnancy, childbirth, and the puerperium	599	570	458	1,516	1,328	1,157	2.5	2.3	2.5
Diseases of the skin and subcutaneous tissue	78	92	116	644	326	493	8.3	3.5	4.3
Musculoskeletal system and connective tissue	295	263	208	1,838	1,014	683	6.2	3.9	3.3
Congenital anomalies	8	4	3	69	22	7	8.6	5.5	2.3
Conditions originating in the perinatal period	4	-	-	4	-	-	1.0	-	-
Injury & poisoning	585	459	369	3,439	1,739	1,391	5.9	3.8	3.8
Symptoms, signs & ill-defined conditions	127	151	101	563	511	218	4.4	3.4	2.2
Residual codes, unclassified, all Ecodes	5	1	23	20	2	66	4.0	2.0	2.9
Total	4,820	4,585	3,947	29,386	17,755	14,066	6.1	3.9	3.6

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

Table I-3
2012 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1992, 2002 and 2012
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>	<u>1992</u>	<u>2002</u>	<u>2012</u>
Springfield Hospital									
Infectious & parasitic diseases	39	53	38	252	239	198	6.5	4.5	5.2
Neoplasms	101	86	27	698	378	120	6.9	4.4	4.4
Endocrine, nutritional, metabolic, immunity	50	57	64	264	202	295	5.3	3.5	4.6
Diseases of the blood & blood-forming organs	3	12	21	12	70	68	4.0	5.8	3.2
Mental disorders	187	660	437	1,758	4,549	3,014	9.4	6.9	6.9
Diseases of the nervous system and sense organs	52	24	42	189	91	128	3.6	3.8	3.0
Diseases of the circulatory system	530	464	281	2,750	1,508	902	5.2	3.3	3.2
Diseases of the respiratory system	204	292	314	1,203	1,330	1,184	5.9	4.6	3.8
Diseases of the digestive system	289	207	276	1,428	865	1,057	4.9	4.2	3.8
Diseases of the genitourinary system	122	87	106	443	253	384	3.6	2.9	3.6
Pregnancy, childbirth, and the puerperium	203	254	175	484	568	389	2.4	2.2	2.2
Diseases of the skin and subcutaneous tissue	19	24	52	139	116	221	7.3	4.8	4.3
Musculoskeletal system and connective tissue	101	101	95	689	415	348	6.8	4.1	3.7
Congenital anomalies	3	-	1	9	-	7	3.0	-	7.0
Conditions originating in the perinatal period	-	1	1	-	1	6	-	1.0	6.0
Injury & poisoning	248	198	120	1,379	769	477	5.6	3.9	4.0
Symptoms, signs & ill-defined conditions	59	61	63	262	168	172	4.4	2.8	2.7
Residual codes, unclassified, all Ecodes	5	2	10	23	9	26	4.6	4.5	2.6
Total	2,215	2,583	2,123	11,982	11,531	8,996	5.4	4.5	4.2

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

Table I-4
2012 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

Discharges 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	21	497	421	124	119	143	346	939	732	1,671
Central Vermont Medical Center	35	876	891	201	191	253	676	1,802	1,321	3,123
Copley Hospital	7	323	391	128	117	123	346	721	714	1,435
Fletcher Allen Health Care	891	5,422	5,959	1,850	1,577	1,463	2,757	12,272	7,647	19,919
Gifford Medical Center	8	356	288	64	71	82	243	652	460	1,112
Grace Cottage Hospital	-	15	29	12	16	18	76	44	122	166
Mt. Ascutney Hospital and Health Center	1	27	75	30	47	35	193	103	305	408
North Country Hospital	23	330	278	118	141	123	345	631	727	1,358
Northeastern Vermont Regional Hospital	63	366	277	112	107	99	340	706	658	1,364
Northwestern Medical Center	11	701	497	172	170	179	496	1,209	1,017	2,226
Porter Medical Center	9	461	349	111	108	107	372	819	698	1,517
Rutland Regional Medical Center	112	1,430	1,697	575	560	537	1,326	3,239	2,998	6,237
Southwestern Vermont Medical Center	36	861	833	369	367	420	1,061	1,730	2,217	3,947
Springfield Hospital	27	592	590	164	146	143	461	1,209	914	2,123
Total	1,244	12,257	12,575	4,030	3,737	3,725	9,038	26,076	20,530	46,606

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

Table I-4
2012 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	37	1,267	1,693	465	436	562	1,431	2,997	2,894	5,891
Central Vermont Medical Center	82	4,139	4,974	1,127	998	1,126	3,190	9,195	6,441	15,636
Copley Hospital	13	657	1,174	371	302	439	1,339	1,844	2,451	4,295
Fletcher Allen Health Care	3,742	25,675	33,687	10,527	8,345	8,500	14,730	63,104	42,102	105,206
Gifford Medical Center	15	931	979	222	247	303	909	1,925	1,681	3,606
Grace Cottage Hospital	-	56	84	43	42	49	239	140	373	513
Mt. Ascutney Hospital and Health Center	1	88	234	105	705	168	1,055	323	2,033	2,356
North Country Hospital	59	902	1,038	463	563	528	1,636	1,999	3,190	5,189
Northeastern Vermont Regional Hospital	105	883	909	409	432	343	1,301	1,897	2,485	4,382
Northwestern Medical Center	18	1,702	1,586	574	619	654	2,095	3,306	3,942	7,248
Porter Medical Center	20	1,132	1,130	375	374	421	1,463	2,282	2,633	4,915
Rutland Regional Medical Center	226	5,865	9,747	2,878	2,620	2,886	6,793	15,838	15,177	31,015
Southwestern Vermont Medical Center	58	2,244	2,948	1,484	1,429	1,555	4,348	5,250	8,816	14,066
Springfield Hospital	64	2,490	2,817	610	536	632	1,847	5,371	3,625	8,996
Total	4,440	48,031	63,000	19,653	17,648	18,166	42,376	115,471	97,843	213,314

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

Table I-4
2012 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

Average Length of Stay 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	1.8	2.5	4.0	3.8	3.7	3.9	4.1	3.2	4.0	3.5
Central Vermont Medical Center	2.3	4.7	5.6	5.6	5.2	4.5	4.7	5.1	4.9	5.0
Copley Hospital	1.9	2.0	3.0	2.9	2.6	3.6	3.9	2.6	3.4	3.0
Fletcher Allen Health Care	4.2	4.7	5.7	5.7	5.3	5.8	5.3	5.1	5.5	5.3
Gifford Medical Center	1.9	2.6	3.4	3.5	3.5	3.7	3.7	3.0	3.7	3.2
Grace Cottage Hospital	0.0	3.7	2.9	3.6	2.6	2.7	3.1	3.2	3.1	3.1
Mt. Ascutney Hospital and Health Center	1.0	3.3	3.1	3.5	15.0	4.8	5.5	3.1	6.7	5.8
North Country Hospital	2.6	2.7	3.7	3.9	4.0	4.3	4.7	3.2	4.4	3.8
Northeastern Vermont Regional Hospital	1.7	2.4	3.3	3.7	4.0	3.5	3.8	2.7	3.8	3.2
Northwestern Medical Center	1.6	2.4	3.2	3.3	3.6	3.7	4.2	2.7	3.9	3.3
Porter Medical Center	2.2	2.5	3.2	3.4	3.5	3.9	3.9	2.8	3.8	3.2
Rutland Regional Medical Center	2.0	4.1	5.7	5.0	4.7	5.4	5.1	4.9	5.1	5.0
Southwestern Vermont Medical Center	1.6	2.6	3.5	4.0	3.9	3.7	4.1	3.0	4.0	3.6
Springfield Hospital	2.4	4.2	4.8	3.7	3.7	4.4	4.0	4.4	4.0	4.2
Total	3.6	3.9	5.0	4.9	4.7	4.9	4.7	4.4	4.8	4.6

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

**Table I-5
2012 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	815	48.8%	334	20.0%	9	0.5%	2	0.1%	466	27.9%	45	2.7%	-	0.0%	1,671	3.6%
Central Vermont Medical Center	1,656	53.0%	626	20.0%	20	0.6%	8	0.3%	749	24.0%	64	2.0%	-	0.0%	3,123	6.7%
Copley Hospital	782	54.5%	232	16.2%	3	0.2%	6	0.4%	374	26.1%	37	2.6%	1	0.1%	1,435	3.1%
Fletcher Allen Health Care	8,100	40.7%	3,129	15.7%	289	1.5%	144	0.7%	7,472	37.5%	405	2.0%	380	1.9%	19,919	42.7%
Gifford Medical Center	501	45.1%	260	23.4%	10	0.9%	2	0.2%	301	27.1%	38	3.4%	-	0.0%	1,112	2.4%
Grace Cottage Hospital	128	77.1%	13	7.8%	-	0.0%	-	0.0%	20	12.0%	5	3.0%	-	0.0%	166	0.4%
Mt. Ascutney Hospital and Health Center	315	77.2%	22	5.4%	-	0.0%	-	0.0%	62	15.2%	8	2.0%	1	0.2%	408	0.9%
North Country Hospital	801	59.0%	277	20.4%	6	0.4%	3	0.2%	238	17.5%	33	2.4%	-	0.0%	1,358	2.9%
Northeastern Vermont Regional Hospital	690	50.6%	280	20.5%	4	0.3%	6	0.4%	347	25.4%	37	2.7%	-	0.0%	1,364	2.9%
Northwestern Medical Center	1,123	50.4%	458	20.6%	19	0.9%	22	1.0%	560	25.2%	43	1.9%	1	0.0%	2,226	4.8%
Porter Medical Center	731	48.2%	243	16.0%	4	0.3%	-	0.0%	507	33.4%	30	2.0%	2	0.1%	1,517	3.3%
Rutland Regional Medical Center	3,546	56.9%	1,189	19.1%	18	0.3%	18	0.3%	1,225	19.6%	241	3.9%	-	0.0%	6,237	13.4%
Southwestern Vermont Medical Center	2,350	59.5%	488	12.4%	19	0.5%	14	0.4%	975	24.7%	101	2.6%	-	0.0%	3,947	8.5%
Springfield Hospital	1,155	54.4%	479	22.6%	3	0.1%	2	0.1%	402	18.9%	80	3.8%	2	0.1%	2,123	4.6%
Total	22,693	48.7%	8,030	17.2%	404	0.9%	227	0.5%	13,698	29.4%	1,167	2.5%	387	0.8%	46,606	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
2012 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	1,133	66.1%	170	9.9%	8	0.5%	1	0.1%	342	20.0%	28	1.6%	31	1.8%	1,713	3.7%
Neoplasms	1,019	46.3%	212	9.6%	25	1.1%	-	0.0%	918	41.7%	23	1.0%	4	0.2%	2,201	4.7%
Endocrine, nutritional, metabolic, immunity	866	49.5%	334	19.1%	10	0.6%	2	0.1%	445	25.4%	54	3.1%	38	2.2%	1,749	3.8%
Diseases of the blood & blood-forming organs	285	55.3%	69	13.4%	2	0.4%	-	0.0%	142	27.6%	9	1.7%	8	1.6%	515	1.1%
Mental disorders	886	31.7%	1,077	38.6%	15	0.5%	4	0.1%	603	21.6%	196	7.0%	10	0.4%	2,791	6.0%
Diseases of the nervous system and sense organs	495	45.7%	186	17.2%	13	1.2%	8	0.7%	346	31.9%	25	2.3%	11	1.0%	1,084	2.3%
Diseases of the circulatory system	5,139	66.6%	498	6.5%	84	1.1%	8	0.1%	1,714	22.2%	177	2.3%	98	1.3%	7,718	16.6%
Diseases of the respiratory system	3,654	69.3%	678	12.9%	20	0.4%	1	0.0%	780	14.8%	93	1.8%	49	0.9%	5,275	11.3%
Diseases of the digestive system	2,521	48.6%	735	14.2%	42	0.8%	7	0.1%	1,628	31.4%	224	4.3%	34	0.7%	5,191	11.1%
Diseases of the genitourinary system	1,317	63.0%	250	12.0%	17	0.8%	2	0.1%	444	21.2%	40	1.9%	20	1.0%	2,090	4.5%
Pregnancy, childbirth, and the puerperium	79	1.4%	2,424	42.6%	74	1.3%	-	0.0%	3,051	53.7%	54	1.0%	2	0.0%	5,684	12.2%
Diseases of the skin and subcutaneous tissue	444	49.3%	184	20.4%	3	0.3%	7	0.8%	222	24.6%	37	4.1%	4	0.4%	901	1.9%
Musculoskeletal system and connective tissue	1,713	51.3%	358	10.7%	31	0.9%	73	2.2%	1,144	34.3%	16	0.5%	2	0.1%	3,337	7.2%
Congenital anomalies	21	13.3%	48	30.4%	1	0.6%	1	0.6%	83	52.5%	3	1.9%	1	0.6%	158	0.3%
Conditions originating in the perinatal period	-	0.0%	4	80.0%	-	0.0%	-	0.0%	1	20.0%	-	0.0%	-	0.0%	5	0.0%
Injury & poisoning	2,162	49.3%	569	13.0%	36	0.8%	96	2.2%	1,321	30.1%	155	3.5%	49	1.1%	4,388	9.4%
Symptoms, signs & ill-defined conditions	853	52.7%	201	12.4%	11	0.7%	17	1.1%	486	30.0%	26	1.6%	25	1.5%	1,619	3.5%
Residual codes, unclassified, all Ecodes	106	56.7%	33	17.6%	12	6.4%	-	0.0%	28	15.0%	7	3.7%	1	0.5%	187	0.4%
Total	22,693	48.7%	8,030	17.2%	404	0.9%	227	0.5%	13,698	29.4%	1,167	2.5%	387	0.8%	46,606	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
2012 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	1,398	\$22,628,179	273	\$4,209,586	1,671	\$26,837,765
Central Vermont Medical Center	3,055	\$53,746,388	68	\$1,143,650	3,123	\$54,890,039
Copley Hospital	1,387	\$20,954,597	48	\$919,261	1,435	\$21,873,858
Fletcher Allen Health Care	16,091	\$453,144,458	3,828	\$145,606,666	19,919	\$598,751,123
Gifford Medical Center	1,094	\$18,194,267	18	\$211,106	1,112	\$18,405,373
Grace Cottage Hospital	156	\$1,023,847	10	\$58,563	166	\$1,082,410
Mt. Ascutney Hospital and Health Center	320	\$3,281,300	88	\$1,099,743	408	\$4,381,043
North Country Hospital	1,316	\$23,923,209	42	\$706,835	1,358	\$24,630,044
Northeastern Vermont Regional Hospital	1,325	\$25,435,873	39	\$628,636	1,364	\$26,064,509
Northwestern Medical Center	2,190	\$37,159,442	36	\$772,932	2,226	\$37,932,373
Porter Medical Center	1,430	\$24,911,448	87	\$1,736,817	1,517	\$26,648,265
Rutland Regional Medical Center	5,709	\$132,470,996	528	\$11,604,717	6,237	\$144,075,713
Southwestern Vermont Medical Center	2,900	\$47,767,821	1,047	\$16,923,877	3,947	\$64,691,699
Springfield Hospital	1,817	\$21,888,293	306	\$3,888,182	2,123	\$25,776,475
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
2012 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	920	7.1%	12,077	92.9%	12,997	4.7%
Central Vermont Medical Center	2,332	8.0%	26,766	92.0%	29,098	10.6%
Copley Hospital	256	1.9%	13,091	98.1%	13,347	4.9%
Fletcher Allen Health Care	9,566	16.6%	48,138	83.4%	57,704	21.0%
Gifford Medical Center	608	8.4%	6,604	91.6%	7,212	2.6%
Grace Cottage Hospital	27	0.9%	3,091	99.1%	3,118	1.1%
Mt. Ascutney Hospital and Health Center	94	1.7%	5,338	98.3%	5,432	2.0%
North Country Hospital	253	1.6%	15,274	98.4%	15,527	5.7%
Northeastern Vermont Regional Hospital	369	2.6%	13,848	97.4%	14,217	5.2%
Northwestern Medical Center	1,293	4.7%	26,340	95.3%	27,633	10.1%
Porter Medical Center	643	4.2%	14,638	95.8%	15,281	5.6%
Rutland Regional Medical Center	4,488	13.9%	27,865	86.1%	32,353	11.8%
Southwestern Vermont Medical Center	3,044	12.7%	20,977	87.3%	24,021	8.7%
Springfield Hospital	1,086	6.4%	15,777	93.6%	16,863	6.1%
Total	24,979	9.1%	249,824	90.9%	274,803	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
2012 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Comparison of 2008 through 2012

Inpatient Discharges Originating in ED	2008	2009	2010	2011	2012
Brattleboro Memorial Hospital	1,050	977	1,001	949	920
Central Vermont Medical Center	2,505	2,280	2,503	2,370	2,332
Copley Hospital	213	194	292	272	256
Fletcher Allen Health Care	8,536	8,652	8,842	8,858	9,566
Gifford Medical Center	634	686	531	590	608
Grace Cottage Hospital	4	15	17	20	27
Mt. Ascutney Hospital and Health Center	72	59	65	66	94
North Country Hospital	322	256	293	337	253
Northeastern Vermont Regional Hospital	404	375	367	318	369
Northwestern Medical Center	1,117	1,009	940	1,233	1,293
Porter Medical Center	232	304	293	285	643
Rutland Regional Medical Center	4,129	4,469	4,378	4,535	4,488
Southwestern Vermont Medical Center	3,426	2,958	2,997	2,906	3,044
Springfield Hospital	1,506	1,447	1,475	1,546	1,086
Total	24,150	23,681	23,994	24,285	24,979
ED Visits Not Admitted	2008	2009	2010	2011	2012
Brattleboro Memorial Hospital	11,171	11,430	11,546	11,836	12,077
Central Vermont Medical Center	27,092	27,564	26,852	26,017	26,766
Copley Hospital	12,186	12,121	12,275	12,807	13,091
Fletcher Allen Health Care	48,872	48,936	49,358	49,273	48,138
Gifford Medical Center	6,187	6,807	6,499	6,372	6,604
Grace Cottage Hospital	2,575	2,786	2,797	2,797	3,091
Mt. Ascutney Hospital and Health Center	5,050	4,996	5,022	4,159	5,338
North Country Hospital	13,083	13,740	14,501	15,377	15,274
Northeastern Vermont Regional Hospital	10,838	9,713	9,232	14,307	13,848
Northwestern Medical Center	26,316	26,270	26,602	26,460	26,340
Porter Medical Center	13,281	13,344	13,427	14,675	14,638
Rutland Regional Medical Center	28,918	29,573	28,055	25,190	27,865
Southwestern Vermont Medical Center	19,370	15,404	19,402	20,897	20,977
Springfield Hospital	14,650	14,792	14,761	14,480	15,777
Total	239,589	237,476	240,329	244,647	249,824

Table E-2
2012 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Comparison of 2008 through 2012

All ED Visits, Including Those Admitted	2008	2009	2010	2011	2012
Brattleboro Memorial Hospital	12,221	12,407	12,547	12,785	12,997
Central Vermont Medical Center	29,597	29,844	29,355	28,387	29,098
Copley Hospital	12,399	12,315	12,567	13,079	13,347
Fletcher Allen Health Care	57,408	57,588	58,200	58,131	57,704
Gifford Medical Center	6,821	7,493	7,030	6,962	7,212
Grace Cottage Hospital	2,579	2,801	2,814	2,817	3,118
Mt. Ascutney Hospital and Health Center	5,122	5,055	5,087	4,225	5,432
North Country Hospital	13,405	13,996	14,794	15,714	15,527
Northeastern Vermont Regional Hospital	11,242	10,088	9,599	14,625	14,217
Northwestern Medical Center	27,433	27,279	27,542	27,693	27,633
Porter Medical Center	13,513	13,648	13,720	14,960	15,281
Rutland Regional Medical Center	33,047	34,042	32,433	29,725	32,353
Southwestern Vermont Medical Center	22,796	18,362	22,399	23,803	24,021
Springfield Hospital	16,156	16,239	16,236	16,026	16,863
Total	263,739	261,157	264,323	268,932	274,803

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
2012 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	1,412	28.7%	3,514	71.3%	4,926	1.8%
Neoplasms	609	59.5%	415	40.5%	1,024	0.4%
Endocrine, nutritional, metabolic, immunity	1,088	25.5%	3,184	74.5%	4,272	1.6%
Diseases of the blood & blood-forming organs	354	46.5%	407	53.5%	761	0.3%
Mental disorders	1,576	13.0%	10,562	87.0%	12,138	4.4%
Diseases of the nervous system and sense organs	700	3.4%	20,067	96.6%	20,767	7.6%
Diseases of the circulatory system	4,944	23.4%	16,197	76.6%	21,141	7.7%
Diseases of the respiratory system	4,044	11.8%	30,267	88.2%	34,311	12.5%
Diseases of the digestive system	3,797	17.0%	18,604	83.0%	22,401	8.2%
Diseases of the genitourinary system	1,363	9.2%	13,402	90.8%	14,765	5.4%
Pregnancy, childbirth, and the puerperium	140	6.2%	2,136	93.8%	2,276	0.8%
Diseases of the skin and subcutaneous tissue	690	7.0%	9,235	93.0%	9,925	3.6%
Musculoskeletal system and connective tissue	445	2.4%	17,877	97.6%	18,322	6.7%
Congenital anomalies	29	36.7%	50	63.3%	79	0.0%
Conditions originating in the perinatal period	0	0.0%	247	100.0%	247	0.1%
Injury & poisoning	3,150	4.1%	74,005	95.9%	77,155	28.1%
Symptoms, signs & ill-defined conditions	533	1.9%	27,571	98.1%	28,104	10.2%
Residual codes, unclassified, all Ecodes	105	4.8%	2,084	95.2%	2,189	0.8%
Total	24,979	9.1%	249,824	90.9%	274,803	100.0%

Table E-3
2012 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	72	37.1%	122	62.9%	194	1.5%
Neoplasms	26	42.6%	35	57.4%	61	0.5%
Endocrine, nutritional, metabolic, immunity	50	15.4%	274	84.6%	324	2.5%
Diseases of the blood & blood-forming organs	16	41.0%	23	59.0%	39	0.3%
Mental disorders	30	3.4%	846	96.6%	876	6.7%
Diseases of the nervous system and sense organs	19	2.0%	912	98.0%	931	7.2%
Diseases of the circulatory system	184	21.2%	685	78.8%	869	6.7%
Diseases of the respiratory system	160	9.8%	1,475	90.2%	1,635	12.6%
Diseases of the digestive system	169	14.6%	985	85.4%	1,154	8.9%
Diseases of the genitourinary system	52	7.8%	618	92.2%	670	5.2%
Pregnancy, childbirth, and the puerperium	5	4.6%	104	95.4%	109	0.8%
Diseases of the skin and subcutaneous tissue	18	4.5%	384	95.5%	402	3.1%
Musculoskeletal system and connective tissue	12	1.8%	646	98.2%	658	5.1%
Congenital anomalies	1	50.0%	1	50.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	15	100.0%	15	0.1%
Injury & poisoning	93	2.3%	3,959	97.7%	4,052	31.2%
Symptoms, signs & ill-defined conditions	12	1.3%	901	98.7%	913	7.0%
Residual codes, unclassified, all Ecodes	1	1.1%	92	98.9%	93	0.7%
Total	920	7.1%	12,077	92.9%	12,997	100.0%

Table E-3
2012 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	109	16.4%	555	83.6%	664	2.3%
Neoplasms	47	58.8%	33	41.3%	80	0.3%
Endocrine, nutritional, metabolic, immunity	67	18.7%	292	81.3%	359	1.2%
Diseases of the blood & blood-forming organs	26	38.8%	41	61.2%	67	0.2%
Mental disorders	339	23.4%	1,112	76.6%	1,451	5.0%
Diseases of the nervous system and sense organs	45	2.1%	2,087	97.9%	2,132	7.3%
Diseases of the circulatory system	340	16.7%	1,694	83.3%	2,034	7.0%
Diseases of the respiratory system	543	13.8%	3,384	86.2%	3,927	13.5%
Diseases of the digestive system	351	14.5%	2,071	85.5%	2,422	8.3%
Diseases of the genitourinary system	123	8.4%	1,341	91.6%	1,464	5.0%
Pregnancy, childbirth, and the puerperium	3	1.8%	161	98.2%	164	0.6%
Diseases of the skin and subcutaneous tissue	92	9.3%	896	90.7%	988	3.4%
Musculoskeletal system and connective tissue	38	1.6%	2,371	98.4%	2,409	8.3%
Congenital anomalies	2	33.3%	4	66.7%	6	0.0%
Conditions originating in the perinatal period	0	0.0%	17	100.0%	17	0.1%
Injury & poisoning	191	2.5%	7,482	97.5%	7,673	26.4%
Symptoms, signs & ill-defined conditions	12	0.4%	2,976	99.6%	2,988	10.3%
Residual codes, unclassified, all Ecodes	4	1.6%	249	98.4%	253	0.9%
Total	2,332	8.0%	26,766	92.0%	29,098	100.0%

Table E-3
2012 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	2.8%	205	97.2%	211	1.6%
Neoplasms	1	5.9%	16	94.1%	17	0.1%
Endocrine, nutritional, metabolic, immunity	13	8.1%	147	91.9%	160	1.2%
Diseases of the blood & blood-forming organs	3	23.1%	10	76.9%	13	0.1%
Mental disorders	14	4.2%	316	95.8%	330	2.5%
Diseases of the nervous system and sense organs	8	0.8%	966	99.2%	974	7.3%
Diseases of the circulatory system	39	5.0%	738	95.0%	777	5.8%
Diseases of the respiratory system	30	1.8%	1,674	98.2%	1,704	12.8%
Diseases of the digestive system	65	6.4%	950	93.6%	1,015	7.6%
Diseases of the genitourinary system	21	3.1%	650	96.9%	671	5.0%
Pregnancy, childbirth, and the puerperium	0	0.0%	149	100.0%	149	1.1%
Diseases of the skin and subcutaneous tissue	9	1.9%	461	98.1%	470	3.5%
Musculoskeletal system and connective tissue	7	0.7%	983	99.3%	990	7.4%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	8	100.0%	8	0.1%
Injury & poisoning	34	0.8%	4,495	99.2%	4,529	33.9%
Symptoms, signs & ill-defined conditions	6	0.5%	1,254	99.5%	1,260	9.4%
Residual codes, unclassified, all Ecodes	0	0.0%	68	100.0%	68	0.5%
Total	256	1.9%	13,091	98.1%	13,347	100.0%

Table E-3
2012 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	530	53.4%	462	46.6%	992	1.7%
Neoplasms	320	81.4%	73	18.6%	393	0.7%
Endocrine, nutritional, metabolic, immunity	424	36.1%	749	63.9%	1,173	2.0%
Diseases of the blood & blood-forming organs	146	72.6%	55	27.4%	201	0.3%
Mental disorders	440	13.3%	2,864	86.7%	3,304	5.7%
Diseases of the nervous system and sense organs	347	8.0%	3,971	92.0%	4,318	7.5%
Diseases of the circulatory system	2,392	42.0%	3,299	58.0%	5,691	9.9%
Diseases of the respiratory system	1,020	19.4%	4,228	80.6%	5,248	9.1%
Diseases of the digestive system	1,223	27.5%	3,221	72.5%	4,444	7.7%
Diseases of the genitourinary system	377	12.6%	2,613	87.4%	2,990	5.2%
Pregnancy, childbirth, and the puerperium	58	9.8%	533	90.2%	591	1.0%
Diseases of the skin and subcutaneous tissue	186	11.1%	1,497	88.9%	1,683	2.9%
Musculoskeletal system and connective tissue	201	5.4%	3,498	94.6%	3,699	6.4%
Congenital anomalies	24	64.9%	13	35.1%	37	0.1%
Conditions originating in the perinatal period	0	0.0%	60	100.0%	60	0.1%
Injury & poisoning	1,623	10.5%	13,848	89.5%	15,471	26.8%
Symptoms, signs & ill-defined conditions	207	3.0%	6,681	97.0%	6,888	11.9%
Residual codes, unclassified, all Ecodes	48	9.2%	473	90.8%	521	0.9%
Total	9,566	16.6%	48,138	83.4%	57,704	100.0%

Table E-3
2012 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	19	10.7%	159	89.3%	178	2.5%
Neoplasms	2	20.0%	8	80.0%	10	0.1%
Endocrine, nutritional, metabolic, immunity	28	23.9%	89	76.1%	117	1.6%
Diseases of the blood & blood-forming organs	9	39.1%	14	60.9%	23	0.3%
Mental disorders	51	18.6%	223	81.4%	274	3.8%
Diseases of the nervous system and sense organs	17	3.0%	554	97.0%	571	7.9%
Diseases of the circulatory system	102	18.6%	446	81.4%	548	7.6%
Diseases of the respiratory system	125	13.5%	799	86.5%	924	12.8%
Diseases of the digestive system	97	14.3%	581	85.7%	678	9.4%
Diseases of the genitourinary system	45	11.7%	338	88.3%	383	5.3%
Pregnancy, childbirth, and the puerperium	4	5.7%	66	94.3%	70	1.0%
Diseases of the skin and subcutaneous tissue	29	11.8%	216	88.2%	245	3.4%
Musculoskeletal system and connective tissue	19	4.3%	427	95.7%	446	6.2%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	8	100.0%	8	0.1%
Injury & poisoning	38	1.8%	2,110	98.2%	2,148	29.8%
Symptoms, signs & ill-defined conditions	16	3.1%	500	96.9%	516	7.2%
Residual codes, unclassified, all Ecodes	7	9.6%	66	90.4%	73	1.0%
Total	608	8.4%	6,604	91.6%	7,212	100.0%

Table E-3
2012 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	0	0.0%	52	100.0%	52	1.7%
Neoplasms	0	0.0%	6	100.0%	6	0.2%
Endocrine, nutritional, metabolic, immunity	1	1.5%	65	98.5%	66	2.1%
Diseases of the blood & blood-forming organs	0	0.0%	35	100.0%	35	1.1%
Mental disorders	1	1.3%	76	98.7%	77	2.5%
Diseases of the nervous system and sense organs	1	0.4%	229	99.6%	230	7.4%
Diseases of the circulatory system	3	1.7%	172	98.3%	175	5.6%
Diseases of the respiratory system	5	1.2%	398	98.8%	403	12.9%
Diseases of the digestive system	4	1.8%	218	98.2%	222	7.1%
Diseases of the genitourinary system	5	3.2%	152	96.8%	157	5.0%
Pregnancy, childbirth, and the puerperium	0	0.0%	3	100.0%	3	0.1%
Diseases of the skin and subcutaneous tissue	1	0.7%	134	99.3%	135	4.3%
Musculoskeletal system and connective tissue	1	0.5%	200	99.5%	201	6.4%
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	3	0.3%	1,035	99.7%	1,038	33.3%
Symptoms, signs & ill-defined conditions	2	0.7%	288	99.3%	290	9.3%
Residual codes, unclassified, all Ecodes	0	0.0%	23	100.0%	23	0.7%
Total	27	0.9%	3,091	99.1%	3,118	100.0%

Table E-3
2012 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	1	1.1%	91	98.9%	92	1.7%
Neoplasms	1	5.6%	17	94.4%	18	0.3%
Endocrine, nutritional, metabolic, immunity	8	12.3%	57	87.7%	65	1.2%
Diseases of the blood & blood-forming organs	3	21.4%	11	78.6%	14	0.3%
Mental disorders	3	1.4%	213	98.6%	216	4.0%
Diseases of the nervous system and sense organs	1	0.3%	380	99.7%	381	7.0%
Diseases of the circulatory system	19	4.3%	428	95.7%	447	8.2%
Diseases of the respiratory system	18	2.8%	620	97.2%	638	11.7%
Diseases of the digestive system	12	2.6%	443	97.4%	455	8.4%
Diseases of the genitourinary system	10	3.0%	327	97.0%	337	6.2%
Pregnancy, childbirth, and the puerperium	0	0.0%	10	100.0%	10	0.2%
Diseases of the skin and subcutaneous tissue	3	1.1%	273	98.9%	276	5.1%
Musculoskeletal system and connective tissue	4	1.1%	344	98.9%	348	6.4%
Congenital anomalies	0	0.0%	4	100.0%	4	0.1%
Conditions originating in the perinatal period	0	0.0%	5	100.0%	5	0.1%
Injury & poisoning	5	0.3%	1,537	99.7%	1,542	28.4%
Symptoms, signs & ill-defined conditions	6	1.1%	537	98.9%	543	10.0%
Residual codes, unclassified, all Ecodes	0	0.0%	41	100.0%	41	0.8%
Total	94	1.7%	5,338	98.3%	5,432	100.0%

Table E-3
2012 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	2	0.8%	242	99.2%	244	1.6%
Neoplasms	5	11.9%	37	88.1%	42	0.3%
Endocrine, nutritional, metabolic, immunity	25	11.6%	191	88.4%	216	1.4%
Diseases of the blood & blood-forming organs	7	15.2%	39	84.8%	46	0.3%
Mental disorders	9	1.8%	482	98.2%	491	3.2%
Diseases of the nervous system and sense organs	7	0.6%	1,249	99.4%	1,256	8.1%
Diseases of the circulatory system	30	2.9%	1,009	97.1%	1,039	6.7%
Diseases of the respiratory system	41	1.8%	2,202	98.2%	2,243	14.4%
Diseases of the digestive system	70	6.1%	1,082	93.9%	1,152	7.4%
Diseases of the genitourinary system	8	0.9%	892	99.1%	900	5.8%
Pregnancy, childbirth, and the puerperium	6	3.7%	156	96.3%	162	1.0%
Diseases of the skin and subcutaneous tissue	9	1.4%	622	98.6%	631	4.1%
Musculoskeletal system and connective tissue	3	0.3%	1,067	99.7%	1,070	6.9%
Congenital anomalies	0	0.0%	4	100.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	16	100.0%	16	0.1%
Injury & poisoning	26	0.6%	4,208	99.4%	4,234	27.3%
Symptoms, signs & ill-defined conditions	4	0.2%	1,622	99.8%	1,626	10.5%
Residual codes, unclassified, all Ecodes	1	0.6%	154	99.4%	155	1.0%
Total	253	1.6%	15,274	98.4%	15,527	100.0%

Table E-3
2012 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	15	7.8%	178	92.2%	193	1.4%
Neoplasms	3	9.1%	30	90.9%	33	0.2%
Endocrine, nutritional, metabolic, immunity	11	5.7%	182	94.3%	193	1.4%
Diseases of the blood & blood-forming organs	5	33.3%	10	66.7%	15	0.1%
Mental disorders	16	3.4%	448	96.6%	464	3.3%
Diseases of the nervous system and sense organs	10	0.7%	1,324	99.3%	1,334	9.4%
Diseases of the circulatory system	40	5.7%	658	94.3%	698	4.9%
Diseases of the respiratory system	56	2.3%	2,372	97.7%	2,428	17.1%
Diseases of the digestive system	114	9.7%	1,059	90.3%	1,173	8.3%
Diseases of the genitourinary system	15	1.8%	823	98.2%	838	5.9%
Pregnancy, childbirth, and the puerperium	8	12.3%	57	87.7%	65	0.5%
Diseases of the skin and subcutaneous tissue	12	2.1%	553	97.9%	565	4.0%
Musculoskeletal system and connective tissue	0	0.0%	969	100.0%	969	6.8%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	9	100.0%	9	0.1%
Injury & poisoning	56	1.4%	3,917	98.6%	3,973	27.9%
Symptoms, signs & ill-defined conditions	7	0.6%	1,163	99.4%	1,170	8.2%
Residual codes, unclassified, all Ecodes	1	1.1%	94	98.9%	95	0.7%
Total	369	2.6%	13,848	97.4%	14,217	100.0%

Table E-3
2012 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	37	10.9%	304	89.1%	341	1.2%
Neoplasms	16	29.1%	39	70.9%	55	0.2%
Endocrine, nutritional, metabolic, immunity	51	12.6%	353	87.4%	404	1.5%
Diseases of the blood & blood-forming organs	24	35.3%	44	64.7%	68	0.2%
Mental disorders	17	2.2%	744	97.8%	761	2.8%
Diseases of the nervous system and sense organs	20	0.9%	2,143	99.1%	2,163	7.8%
Diseases of the circulatory system	232	12.7%	1,599	87.3%	1,831	6.6%
Diseases of the respiratory system	315	8.4%	3,423	91.6%	3,738	13.5%
Diseases of the digestive system	256	10.6%	2,148	89.4%	2,404	8.7%
Diseases of the genitourinary system	119	7.4%	1,484	92.6%	1,603	5.8%
Pregnancy, childbirth, and the puerperium	5	1.5%	320	98.5%	325	1.2%
Diseases of the skin and subcutaneous tissue	56	5.0%	1,064	95.0%	1,120	4.1%
Musculoskeletal system and connective tissue	15	0.7%	2,013	99.3%	2,028	7.3%
Congenital anomalies	0	0.0%	4	100.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	34	100.0%	34	0.1%
Injury & poisoning	109	1.4%	7,560	98.6%	7,669	27.8%
Symptoms, signs & ill-defined conditions	16	0.6%	2,885	99.4%	2,901	10.5%
Residual codes, unclassified, all Ecodes	5	2.7%	179	97.3%	184	0.7%
Total	1,293	4.7%	26,340	95.3%	27,633	100.0%

Table E-3
2012 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	16	7.7%	191	92.3%	207	1.4%
Neoplasms	3	20.0%	12	80.0%	15	0.1%
Endocrine, nutritional, metabolic, immunity	42	18.3%	187	81.7%	229	1.5%
Diseases of the blood & blood-forming organs	10	45.5%	12	54.5%	22	0.1%
Mental disorders	20	4.8%	397	95.2%	417	2.7%
Diseases of the nervous system and sense organs	19	1.6%	1,167	98.4%	1,186	7.8%
Diseases of the circulatory system	106	10.5%	906	89.5%	1,012	6.6%
Diseases of the respiratory system	147	7.0%	1,951	93.0%	2,098	13.7%
Diseases of the digestive system	132	12.6%	914	87.4%	1,046	6.8%
Diseases of the genitourinary system	25	3.6%	660	96.4%	685	4.5%
Pregnancy, childbirth, and the puerperium	1	1.5%	65	98.5%	66	0.4%
Diseases of the skin and subcutaneous tissue	25	4.4%	548	95.6%	573	3.7%
Musculoskeletal system and connective tissue	13	1.3%	955	98.7%	968	6.3%
Congenital anomalies	1	50.0%	1	50.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	6	100.0%	6	0.0%
Injury & poisoning	75	1.6%	4,735	98.4%	4,810	31.5%
Symptoms, signs & ill-defined conditions	7	0.4%	1,834	99.6%	1,841	12.0%
Residual codes, unclassified, all Ecodes	1	1.0%	97	99.0%	98	0.6%
Total	643	4.2%	14,638	95.8%	15,281	100.0%

Table E-3
2012 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	268	43.2%	353	56.8%	621	1.9%
Neoplasms	116	79.5%	30	20.5%	146	0.5%
Endocrine, nutritional, metabolic, immunity	162	37.2%	273	62.8%	435	1.3%
Diseases of the blood & blood-forming organs	45	50.0%	45	50.0%	90	0.3%
Mental disorders	510	28.7%	1,264	71.3%	1,774	5.5%
Diseases of the nervous system and sense organs	121	4.9%	2,351	95.1%	2,472	7.6%
Diseases of the circulatory system	762	30.2%	1,760	69.8%	2,522	7.8%
Diseases of the respiratory system	807	20.0%	3,238	80.0%	4,045	12.5%
Diseases of the digestive system	574	21.0%	2,160	79.0%	2,734	8.5%
Diseases of the genitourinary system	323	18.2%	1,453	81.8%	1,776	5.5%
Pregnancy, childbirth, and the puerperium	30	11.5%	230	88.5%	260	0.8%
Diseases of the skin and subcutaneous tissue	106	9.2%	1,040	90.8%	1,146	3.5%
Musculoskeletal system and connective tissue	63	3.0%	2,050	97.0%	2,113	6.5%
Congenital anomalies	0	0.0%	8	100.0%	8	0.0%
Conditions originating in the perinatal period	0	0.0%	33	100.0%	33	0.1%
Injury & poisoning	492	5.7%	8,202	94.3%	8,694	26.9%
Symptoms, signs & ill-defined conditions	100	3.1%	3,157	96.9%	3,257	10.1%
Residual codes, unclassified, all Ecodes	9	4.0%	218	96.0%	227	0.7%
Total	4,488	13.9%	27,865	86.1%	32,353	100.0%

Table E-3
2012 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	317	49.8%	319	50.2%	636	2.6%
Neoplasms	57	66.3%	29	33.7%	86	0.4%
Endocrine, nutritional, metabolic, immunity	168	44.1%	213	55.9%	381	1.6%
Diseases of the blood & blood-forming organs	47	61.8%	29	38.2%	76	0.3%
Mental disorders	54	5.6%	911	94.4%	965	4.0%
Diseases of the nervous system and sense organs	58	3.4%	1,638	96.6%	1,696	7.1%
Diseases of the circulatory system	500	23.8%	1,598	76.2%	2,098	8.7%
Diseases of the respiratory system	543	18.4%	2,401	81.6%	2,944	12.3%
Diseases of the digestive system	516	26.7%	1,419	73.3%	1,935	8.1%
Diseases of the genitourinary system	185	14.5%	1,089	85.5%	1,274	5.3%
Pregnancy, childbirth, and the puerperium	13	7.0%	174	93.0%	187	0.8%
Diseases of the skin and subcutaneous tissue	104	14.7%	604	85.3%	708	2.9%
Musculoskeletal system and connective tissue	41	2.8%	1,440	97.2%	1,481	6.2%
Congenital anomalies	1	16.7%	5	83.3%	6	0.0%
Conditions originating in the perinatal period	0	0.0%	19	100.0%	19	0.1%
Injury & poisoning	321	4.8%	6,418	95.2%	6,739	28.1%
Symptoms, signs & ill-defined conditions	96	3.7%	2,468	96.3%	2,564	10.7%
Residual codes, unclassified, all Ecodes	23	10.2%	203	89.8%	226	0.9%
Total	3,044	12.7%	20,977	87.3%	24,021	100.0%

Table E-3
2012 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	20	6.6%	281	93.4%	301	1.8%
Neoplasms	12	19.4%	50	80.6%	62	0.4%
Endocrine, nutritional, metabolic, immunity	38	25.3%	112	74.7%	150	0.9%
Diseases of the blood & blood-forming organs	13	25.0%	39	75.0%	52	0.3%
Mental disorders	72	9.8%	666	90.2%	738	4.4%
Diseases of the nervous system and sense organs	27	2.4%	1,096	97.6%	1,123	6.7%
Diseases of the circulatory system	195	13.9%	1,205	86.1%	1,400	8.3%
Diseases of the respiratory system	234	10.0%	2,102	90.0%	2,336	13.9%
Diseases of the digestive system	214	13.7%	1,353	86.3%	1,567	9.3%
Diseases of the genitourinary system	55	5.4%	962	94.6%	1,017	6.0%
Pregnancy, childbirth, and the puerperium	7	6.1%	108	93.9%	115	0.7%
Diseases of the skin and subcutaneous tissue	40	4.1%	943	95.9%	983	5.8%
Musculoskeletal system and connective tissue	28	3.0%	914	97.0%	942	5.6%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	14	100.0%	14	0.1%
Injury & poisoning	84	1.8%	4,499	98.2%	4,583	27.2%
Symptoms, signs & ill-defined conditions	42	3.1%	1,305	96.9%	1,347	8.0%
Residual codes, unclassified, all Ecodes	5	3.8%	127	96.2%	132	0.8%
Total	1,086	6.4%	15,777	93.6%	16,863	100.0%

Table E-4
2012 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	1,534	5,684	2,900	453	348	332	826	10,118	1,959	12,077
Central Vermont Medical Center	4,099	12,066	6,367	1,015	793	718	1,708	22,532	4,234	26,766
Copley Hospital	2,230	5,981	2,704	510	415	372	878	10,915	2,175	13,090
Fletcher Allen Health Care	5,838	24,397	11,195	1,684	1,260	1,235	2,529	41,430	6,708	48,138
Gifford Medical Center	1,036	2,912	1,485	289	204	209	469	5,433	1,171	6,604
Grace Cottage Hospital	525	1,007	753	184	145	134	343	2,285	806	3,091
Mt. Ascutney Hospital and Health Center	669	1,907	1,236	256	302	266	702	3,812	1,526	5,338
North Country Hospital	2,240	6,337	3,284	707	753	590	1,363	11,861	3,413	15,274
Northeastern Vermont Regional Hospital	2,059	6,155	3,160	641	472	381	980	11,374	2,474	13,848
Northwestern Medical Center	3,890	12,401	5,967	981	768	732	1,601	22,258	4,082	26,340
Porter Medical Center	2,236	6,706	3,115	599	472	466	1,044	12,057	2,581	14,638
Rutland Regional Medical Center	3,987	13,535	6,519	950	782	663	1,429	24,041	3,824	27,865
Southwestern Vermont Medical Center	3,111	9,583	4,599	878	685	640	1,481	17,293	3,684	20,977
Springfield Hospital	2,538	6,519	3,808	755	589	447	1,121	12,865	2,912	15,777
Total	35,992	115,190	57,092	9,902	7,988	7,185	16,474	208,274	41,549	249,823

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
2012 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%	N	Row%		
Brattleboro Memorial Hospital	2,719	22.5%	3,825	31.7%	83	0.7%	411	3.4%	3,921	32.5%	1,115	9.2%	3	0.0%	12,077	4.8%
Central Vermont Medical Center	6,118	22.9%	8,853	33.1%	416	1.6%	599	2.2%	8,703	32.5%	2,077	7.8%	-	0.0%	26,766	10.7%
Copley Hospital	2,912	22.2%	4,407	33.7%	146	1.1%	233	1.8%	4,134	31.6%	1,247	9.5%	12	0.1%	13,091	5.2%
Fletcher Allen Health Care	8,679	18.0%	13,037	27.1%	773	1.6%	947	2.0%	20,344	42.3%	4,104	8.5%	254	0.5%	48,138	19.3%
Gifford Medical Center	1,461	22.1%	2,151	32.6%	72	1.1%	129	2.0%	2,113	32.0%	678	10.3%	-	0.0%	6,604	2.6%
Grace Cottage Hospital	906	29.3%	799	25.8%	8	0.3%	62	2.0%	1,067	34.5%	249	8.1%	-	0.0%	3,091	1.2%
Mt. Ascutney Hospital and Health Center	1,705	31.9%	1,276	23.9%	37	0.7%	117	2.2%	1,704	31.9%	478	9.0%	21	0.4%	5,338	2.1%
North Country Hospital	4,565	29.9%	5,577	36.5%	102	0.7%	401	2.6%	3,454	22.6%	1,175	7.7%	-	0.0%	15,274	6.1%
Northeastern Vermont Regional Hospital	3,031	21.9%	4,915	35.5%	32	0.2%	246	1.8%	4,386	31.7%	1,238	8.9%	-	0.0%	13,848	5.5%
Northwestern Medical Center	5,441	20.7%	9,732	36.9%	355	1.3%	558	2.1%	8,040	30.5%	2,214	8.4%	-	0.0%	26,340	10.5%
Porter Medical Center	3,242	22.1%	4,385	30.0%	83	0.6%	138	0.9%	5,326	36.4%	1,308	8.9%	156	1.1%	14,638	5.9%
Rutland Regional Medical Center	5,928	21.3%	10,073	36.1%	189	0.7%	714	2.6%	8,184	29.4%	2,771	9.9%	6	0.0%	27,865	11.2%
Southwestern Vermont Medical Center	4,980	23.7%	6,321	30.1%	142	0.7%	568	2.7%	7,117	33.9%	1,849	8.8%	-	0.0%	20,977	8.4%
Springfield Hospital	4,118	26.1%	5,415	34.3%	86	0.5%	214	1.4%	4,078	25.8%	1,865	11.8%	1	0.0%	15,777	6.3%
Total	55,805	22.3%	80,766	32.3%	2,524	1.0%	5,337	2.1%	82,571	33.1%	22,368	9.0%	453	0.2%	249,824	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
2012 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	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%			
Infectious & parasitic diseases	480	13.7%	1,524	43.4%	48	1.4%	34	1.0%	1,069	30.4%	351	10.0%	8	0.2%	3,514	1.4%	
Neoplasms	175	42.2%	76	18.3%	-	0.0%	-	0.0%	145	34.9%	19	4.6%	-	0.0%	415	0.2%	
Endocrine, nutritional, metabolic, immunity	1,415	44.4%	648	20.4%	30	0.9%	5	0.2%	883	27.7%	175	5.5%	28	0.9%	3,184	1.3%	
Diseases of the blood & blood-forming organs	230	56.5%	89	21.9%	4	1.0%	-	0.0%	71	17.4%	13	3.2%	-	0.0%	407	0.2%	
Mental disorders	2,306	21.8%	4,394	41.6%	95	0.9%	21	0.2%	2,575	24.4%	1,163	11.0%	8	0.1%	10,562	4.2%	
Diseases of the nervous system and sense organs	3,958	19.7%	7,472	37.2%	234	1.2%	140	0.7%	6,640	33.1%	1,604	8.0%	19	0.1%	20,067	8.0%	
Diseases of the circulatory system	7,198	44.4%	2,406	14.9%	166	1.0%	31	0.2%	5,434	33.5%	922	5.7%	40	0.2%	16,197	6.5%	
Diseases of the respiratory system	6,919	22.9%	11,204	37.0%	316	1.0%	48	0.2%	9,003	29.7%	2,724	9.0%	53	0.2%	30,267	12.1%	
Diseases of the digestive system	4,095	22.0%	6,880	37.0%	133	0.7%	31	0.2%	5,064	27.2%	2,385	12.8%	16	0.1%	18,604	7.4%	
Diseases of the genitourinary system	3,502	26.1%	3,927	29.3%	133	1.0%	16	0.1%	4,681	34.9%	1,126	8.4%	17	0.1%	13,402	5.4%	
Pregnancy, childbirth, and the puerperium	42	2.0%	1,261	59.0%	21	1.0%	9	0.4%	647	30.3%	156	7.3%	-	0.0%	2,136	0.9%	
Diseases of the skin and subcutaneous tissue	1,995	21.6%	3,239	35.1%	89	1.0%	99	1.1%	2,826	30.6%	978	10.6%	9	0.1%	9,235	3.7%	
Musculoskeletal system and connective tissue	4,869	27.2%	5,516	30.9%	152	0.9%	547	3.1%	5,141	28.8%	1,623	9.1%	29	0.2%	17,877	7.2%	
Congenital anomalies	16	32.0%	15	30.0%	-	0.0%	-	0.0%	17	34.0%	1	2.0%	1	2.0%	50	0.0%	
Conditions originating in the perinatal period	-	0.0%	167	67.6%	2	0.8%	-	0.0%	49	19.8%	29	11.7%	-	0.0%	247	0.1%	
Injury & poisoning	11,982	16.2%	21,897	29.6%	771	1.0%	4,152	5.6%	28,287	38.2%	6,755	9.1%	161	0.2%	74,005	29.6%	
Symptoms, signs & ill-defined conditions	5,740	20.8%	9,559	34.7%	314	1.1%	136	0.5%	9,524	34.5%	2,244	8.1%	54	0.2%	27,571	11.0%	
Residual codes, unclassified, all Ecodes	883	42.4%	492	23.6%	16	0.8%	68	3.3%	515	24.7%	100	4.8%	10	0.5%	2,084	0.8%	
Total	55,805	22.3%	80,766	32.3%	2,524	1.0%	5,337	2.1%	82,571	33.1%	22,368	9.0%	453	0.2%	249,824	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	9,346	\$16,178,742	2,731	\$4,760,707	12,077	\$20,939,450
Central Vermont Medical Center	25,541	\$40,606,970	1,225	\$1,886,321	26,766	\$42,493,292
Copley Hospital	11,779	\$10,245,307	1,312	\$1,082,850	13,091	\$11,328,157
Fletcher Allen Health Care	45,048	\$103,980,135	3,090	\$8,099,760	48,138	\$112,079,895
Gifford Medical Center	6,340	\$11,421,891	264	\$333,495	6,604	\$11,755,386
Grace Cottage Hospital	2,607	\$2,825,874	484	\$457,552	3,091	\$3,283,427
Mt. Ascutney Hospital and Health Center	4,227	\$6,406,098	1,111	\$1,676,467	5,338	\$8,082,565
North Country Hospital	14,351	\$23,460,719	923	\$1,441,642	15,274	\$24,902,361
Northeastern Vermont Regional Hospital	13,028	\$14,433,107	820	\$836,583	13,848	\$15,269,691
Northwestern Medical Center	25,732	\$33,105,457	608	\$743,968	26,340	\$33,849,426
Porter Medical Center	13,575	\$15,211,807	1,063	\$1,122,226	14,638	\$16,334,033
Rutland Regional Medical Center	25,118	\$33,396,370	2,747	\$3,829,782	27,865	\$37,226,151
Southwestern Vermont Medical Center	15,586	\$27,048,870	5,391	\$10,345,149	20,977	\$37,394,019
Springfield Hospital	13,026	\$19,876,126	2,751	\$4,545,100	15,777	\$24,421,226
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
2012 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	2,897	85.3%	501	14.7%	3,398	3.3%
Central Vermont Medical Center	7,759	99.5%	37	0.5%	7,796	7.6%
Copley Hospital	4,097	99.0%	40	1.0%	4,137	4.0%
Fletcher Allen Health Care	42,526	87.3%	6,185	12.7%	48,711	47.4%
Gifford Medical Center	2,374	96.7%	81	3.3%	2,455	2.4%
Grace Cottage Hospital	-	0%	-	0%	-	0.0%
Mt. Ascutney Hospital and Health Center	843	65.1%	451	34.9%	1,294	1.3%
North Country Hospital	3,611	99.0%	37	1.0%	3,648	3.5%
Northeastern Vermont Regional Hospital	2,925	90.8%	296	9.2%	3,221	3.1%
Northwestern Medical Center	6,970	98.9%	74	1.1%	7,044	6.8%
Porter Medical Center	3,070	92.7%	240	7.3%	3,310	3.2%
Rutland Regional Medical Center	8,131	94.4%	479	5.6%	8,610	8.4%
Southwestern Vermont Medical Center	5,287	77.5%	1,536	22.5%	6,823	6.6%
Springfield Hospital	2,047	85.8%	339	14.2%	2,386	2.3%
Total	92,537	90.0%	10,296	10.0%	102,833	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
2012 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 2008 through 2012

Vermont Hospital	2008	2009	2010	2011	2012
Brattleboro Memorial Hospital	3,913	4,055	3,578	3,322	3,398
Central Vermont Medical Center	7,430	7,702	8,156	7,852	7,796
Copley Hospital	3,881	3,920	3,796	3,898	4,137
Fletcher Allen Health Care	44,346	45,034	44,954	47,531	48,711
Gifford Medical Center	2,434	2,471	3,071	2,505	2,455
Grace Cottage Hospital	4	-	-	2	-
Mt. Ascutney Hospital and Health Center	1,198	1,380	1,402	1,108	1,294
North Country Hospital	3,556	3,460	3,801	3,889	3,648
Northeastern Vermont Regional Hospital	3,489	3,551	3,606	3,811	3,221
Northwestern Medical Center	7,076	7,386	7,397	6,724	7,044
Porter Medical Center	3,685	3,804	3,498	3,362	3,310
Rutland Regional Medical Center	10,063	9,682	9,208	9,036	8,610
Southwestern Vermont Medical Center	6,260	6,834	6,992	7,053	6,823
Springfield Hospital	2,343	2,437	2,349	2,309	2,386
Total	99,678	101,716	101,808	102,402	102,833

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
2012 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	22	17	5	278	28	-	2	7	6	23	4	23	15	3	433
Neoplasms	386	531	374	9,039	287	-	76	456	534	232	191	656	1,340	319	14,421
Endocrine, nutritional, metabolic, immunity	10	95	40	1,199	4	-	65	41	15	49	13	91	137	14	1,773
Diseases of the blood & blood-forming organs	22	75	18	297	3	-	17	41	32	75	7	119	43	11	760
Mental disorders	1	1	2	64	-	-	-	2	20	4	1	22	132	-	249
Diseases of the nervous system and sense organs	592	907	270	5,584	377	-	247	470	630	418	738	974	283	321	11,811
Diseases of the circulatory system	68	94	35	2,401	70	-	4	56	23	59	15	199	142	27	3,193
Diseases of the respiratory system	17	148	7	1,649	2	-	34	137	50	73	199	470	73	43	2,902
Diseases of the digestive system	585	991	441	5,340	217	-	206	599	353	1,234	313	1,356	1,188	323	13,146
Diseases of the genitourinary system	197	628	202	4,275	194	-	25	182	173	404	166	400	575	219	7,640
Pregnancy, childbirth, and the puerperium	41	794	473	1,494	481	-	5	634	376	240	156	72	312	38	5,116
Diseases of the skin and subcutaneous tissue	12	116	75	1,903	22	-	24	68	30	307	26	160	103	29	2,875
Musculoskeletal system and connective tissue	363	816	1,309	6,643	360	-	296	396	212	1,672	155	1,683	1,145	162	15,212
Congenital anomalies	4	19	5	299	7	-	-	6	4	13	5	4	13	8	387
Conditions originating in the perinatal period	-	30	2	13	1	-	-	6	15	12	9	-	30	28	146
Injury & poisoning	353	403	361	2,536	179	-	23	147	172	387	225	605	402	146	5,939
Symptoms, signs & ill-defined conditions	719	2,101	514	4,850	176	-	248	345	571	1,813	1,082	1,746	543	685	15,393
Residual codes, unclassified, all Ecodes	6	30	4	847	47	-	22	55	5	29	5	30	347	10	1,437
Total	3,398	7,796	4,137	48,711	2,455	-	1,294	3,648	3,221	7,044	3,310	8,610	6,823	2,386	102,833

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
2012 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	153	641	366	3,161	173	-	200	293	68	1,181	84	1,303	659	85	8,367
Operations on the endocrine system	1	51	1	362	-	-	4	8	1	8	7	1	118	14	576
Operations on the eye	503	657	131	3,631	222	-	228	339	546	166	505	708	99	202	7,937
Operations on the ear	5	82	5	882	1	-	6	39	16	66	153	99	79	40	1,473
Operations on the nose, mouth, and pharynx	29	140	96	1,822	1	-	34	134	62	97	222	375	194	55	3,261
Operations on the respiratory system	21	47	2	1,239	1	-	3	42	10	9	21	348	60	23	1,826
Operations on the cardiovascular system	28	86	14	3,119	4	-	5	36	10	14	10	147	99	8	3,580
Operations on the hemic and lymphatic system	6	14	10	361	6	-	5	11	9	11	9	40	25	11	518
Operations on the digestive system	1,583	3,282	1,085	12,807	671	-	523	1,242	1,044	2,742	1,471	3,347	3,122	1,217	34,136
Operations on the urinary system	87	360	149	2,559	112	-	7	27	72	67	66	208	135	63	3,912
Operations on the male genital organs	17	115	46	597	55	-	9	14	65	27	40	74	68	50	1,177
Operations on the female genital organs	145	225	104	1,672	100	-	6	183	110	356	98	207	276	129	3,611
Obstetrical procedures	7	746	447	1,288	493	-	-	702	372	173	134	-	247	12	4,621
Operations on the musculoskeletal system	649	758	1,445	7,385	527	-	128	321	371	1,047	359	1,066	1,026	302	15,384
Operations on the integumentary system	142	555	177	7,121	89	-	68	226	107	459	122	602	613	174	10,455
Miscellaneous diagnostic and therapeutic procs	22	37	59	705	-	-	68	31	358	621	9	85	3	1	1,999
Total	3,398	7,796	4,137	48,711	2,455	-	1,294	3,648	3,221	7,044	3,310	8,610	6,823	2,386	102,833

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
2012 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	47	544	1,505	403	319	232	348	2,096	1,302	3,398
Central Vermont Medical Center	187	1,871	3,304	809	598	489	538	5,362	2,434	7,796
Copley Hospital	113	1,179	1,714	381	303	255	192	3,006	1,131	4,137
Fletcher Allen Health Care	2,341	9,272	17,789	5,672	4,519	3,676	5,442	29,402	19,309	48,711
Gifford Medical Center	25	893	952	193	154	109	129	1,870	585	2,455
Grace Cottage Hospital	-	-	-	-	-	-	-	-	-	-
Mt. Ascutney Hospital and Health Center	30	182	607	163	87	104	121	819	475	1,294
North Country Hospital	76	1,293	1,084	337	306	234	318	2,453	1,195	3,648
Northeastern Vermont Regional Hospital	84	779	1,225	351	269	257	256	2,088	1,133	3,221
Northwestern Medical Center	153	1,866	3,138	602	488	369	428	5,157	1,887	7,044
Porter Medical Center	268	610	1,315	321	287	265	244	2,193	1,117	3,310
Rutland Regional Medical Center	184	1,514	3,671	969	836	666	770	5,369	3,241	8,610
Southwestern Vermont Medical Center	251	1,533	2,914	720	518	396	491	4,698	2,125	6,823
Springfield Hospital	110	417	1,107	269	228	134	121	1,634	752	2,386
Total	3,869	21,953	40,325	11,190	8,912	7,186	9,398	66,147	36,686	102,833

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
2012 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	1,367	40.2%	427	12.6%	13	0.4%	54	1.6%	1,513	44.5%	24	0.7%	-	0.0%	3,398	3.3%
Central Vermont Medical Center	2,548	32.7%	1,195	15.3%	122	1.6%	98	1.3%	3,775	48.4%	58	0.7%	-	0.0%	7,796	7.6%
Copley Hospital	1,178	28.5%	858	20.7%	16	0.4%	122	2.9%	1,900	45.9%	61	1.5%	2	0.0%	4,137	4.0%
Fletcher Allen Health Care	20,479	42.0%	4,911	10.1%	611	1.3%	797	1.6%	21,020	43.2%	404	0.8%	489	1.0%	48,711	47.4%
Gifford Medical Center	629	25.6%	496	20.2%	32	1.3%	39	1.6%	1,245	50.7%	14	0.6%	-	0.0%	2,455	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	470	36.3%	116	9.0%	5	0.4%	14	1.1%	657	50.8%	29	2.2%	3	0.2%	1,294	1.3%
North Country Hospital	1,337	36.7%	930	25.5%	19	0.5%	30	0.8%	1,290	35.4%	42	1.2%	-	0.0%	3,648	3.5%
Northeastern Vermont Regional Hospital	1,152	35.8%	690	21.4%	9	0.3%	23	0.7%	1,310	40.7%	37	1.1%	-	0.0%	3,221	3.1%
Northwestern Medical Center	2,092	29.7%	1,257	17.8%	117	1.7%	194	2.8%	3,338	47.4%	46	0.7%	-	0.0%	7,044	6.8%
Porter Medical Center	1,083	32.7%	493	14.9%	20	0.6%	3	0.1%	1,670	50.5%	39	1.2%	2	0.1%	3,310	3.2%
Rutland Regional Medical Center	3,683	42.8%	1,144	13.3%	59	0.7%	142	1.6%	3,479	40.4%	103	1.2%	-	0.0%	8,610	8.4%
Southwestern Vermont Medical Center	2,273	33.3%	1,159	17.0%	42	0.6%	100	1.5%	3,211	47.1%	38	0.6%	-	0.0%	6,823	6.6%
Springfield Hospital	829	34.7%	342	14.3%	3	0.1%	16	0.7%	1,111	46.6%	85	3.6%	-	0.0%	2,386	2.3%
Total	39,120	38.0%	14,018	13.6%	1,068	1.0%	1,632	1.6%	45,519	44.3%	980	1.0%	496	0.5%	102,833	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
2012 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												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	175	40.4%	91	21.0%	2	0.5%	-	0.0%	159	36.7%	4	0.9%	2	0.5%	433	0.4%
Neoplasms	7,516	52.1%	925	6.4%	116	0.8%	7	0.0%	5,774	40.0%	56	0.4%	27	0.2%	14,421	14.0%
Endocrine, nutritional, metabolic, immunity	769	43.4%	180	10.2%	7	0.4%	-	0.0%	786	44.3%	9	0.5%	22	1.2%	1,773	1.7%
Diseases of the blood & blood-forming organs	377	49.6%	96	12.6%	6	0.8%	-	0.0%	268	35.3%	7	0.9%	6	0.8%	760	0.7%
Mental disorders	40	16.1%	167	67.1%	-	0.0%	-	0.0%	41	16.5%	1	0.4%	-	0.0%	249	0.2%
Diseases of the nervous system and sense organs	7,225	61.2%	1,226	10.4%	86	0.7%	177	1.5%	3,026	25.6%	52	0.4%	19	0.2%	11,811	11.5%
Diseases of the circulatory system	1,359	42.6%	313	9.8%	31	1.0%	5	0.2%	1,322	41.4%	27	0.8%	136	4.3%	3,193	3.1%
Diseases of the respiratory system	1,199	41.3%	519	17.9%	35	1.2%	6	0.2%	1,115	38.4%	24	0.8%	4	0.1%	2,902	2.8%
Diseases of the digestive system	4,149	31.6%	2,221	16.9%	140	1.1%	81	0.6%	6,364	48.4%	164	1.2%	27	0.2%	13,146	12.8%
Diseases of the genitourinary system	2,541	33.3%	999	13.1%	103	1.3%	6	0.1%	3,770	49.3%	99	1.3%	122	1.6%	7,640	7.4%
Pregnancy, childbirth, and the puerperium	107	2.1%	2,583	50.5%	50	1.0%	4	0.1%	2,289	44.7%	82	1.6%	1	0.0%	5,116	5.0%
Diseases of the skin and subcutaneous tissue	1,956	68.0%	253	8.8%	9	0.3%	9	0.3%	623	21.7%	20	0.7%	5	0.2%	2,875	2.8%
Musculoskeletal system and connective tissue	5,774	38.0%	1,911	12.6%	174	1.1%	829	5.4%	6,425	42.2%	90	0.6%	9	0.1%	15,212	14.8%
Congenital anomalies	62	16.0%	139	35.9%	7	1.8%	2	0.5%	175	45.2%	2	0.5%	-	0.0%	387	0.4%
Conditions originating in the perinatal period	-	0.0%	65	44.5%	2	1.4%	-	0.0%	52	35.6%	27	18.5%	-	0.0%	146	0.1%
Injury & poisoning	1,186	20.0%	820	13.8%	104	1.8%	471	7.9%	3,097	52.1%	162	2.7%	99	1.7%	5,939	5.8%
Symptoms, signs & ill-defined conditions	4,361	28.3%	1,350	8.8%	185	1.2%	35	0.2%	9,359	60.8%	87	0.6%	16	0.1%	15,393	15.0%
Residual codes, unclassified, all Ecodes	324	22.5%	160	11.1%	11	0.8%	-	0.0%	874	60.8%	67	4.7%	1	0.1%	1,437	1.4%
Total	39,120	38.0%	14,018	13.6%	1,068	1.0%	1,632	1.6%	45,519	44.3%	980	1.0%	496	0.5%	102,833	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-8
2012 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 N Col%	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown			
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		
Operations on the nervous system	3,287	39.3%	1,178	14.1%	86	1.0%	470	5.6%	3,277	39.2%	64	0.8%	5	0.1%	8,367	8.1%
Operations on the endocrine system	216	37.5%	57	9.9%	5	0.9%	-	0.0%	297	51.6%	1	0.2%	-	0.0%	576	0.6%
Operations on the eye	6,019	75.8%	275	3.5%	49	0.6%	3	0.0%	1,537	19.4%	31	0.4%	23	0.3%	7,937	7.7%
Operations on the ear	254	17.2%	594	40.3%	20	1.4%	-	0.0%	599	40.7%	6	0.4%	-	0.0%	1,473	1.4%
Operations on the nose, mouth, and pharynx	1,018	31.2%	1,062	32.6%	29	0.9%	4	0.1%	1,123	34.4%	24	0.7%	1	0.0%	3,261	3.2%
Operations on the respiratory system	1,117	61.2%	179	9.8%	18	1.0%	5	0.3%	490	26.8%	14	0.8%	3	0.2%	1,826	1.8%
Operations on the cardiovascular system	1,483	41.4%	322	9.0%	33	0.9%	2	0.1%	1,442	40.3%	31	0.9%	267	7.5%	3,580	3.5%
Operations on the hemic and lymphatic system	194	37.5%	64	12.4%	3	0.6%	1	0.2%	249	48.1%	1	0.2%	6	1.2%	518	0.5%
Operations on the digestive system	10,668	31.3%	3,558	10.4%	385	1.1%	87	0.3%	19,106	56.0%	274	0.8%	58	0.2%	34,136	33.2%
Operations on the urinary system	2,319	59.3%	287	7.3%	46	1.2%	2	0.1%	1,174	30.0%	36	0.9%	48	1.2%	3,912	3.8%
Operations on the male genital organs	333	28.3%	221	18.8%	18	1.5%	3	0.3%	560	47.6%	41	3.5%	1	0.1%	1,177	1.1%
Operations on the female genital organs	493	13.7%	778	21.5%	34	0.9%	1	0.0%	2,262	62.6%	41	1.1%	2	0.1%	3,611	3.5%
Obstetrical procedures	93	2.0%	2,424	52.5%	41	0.9%	5	0.1%	1,987	43.0%	70	1.5%	1	0.0%	4,621	4.5%
Operations on the musculoskeletal system	4,609	30.0%	1,979	12.9%	214	1.4%	993	6.5%	7,388	48.0%	189	1.2%	12	0.1%	15,384	15.0%
Operations on the integumentary system	6,253	59.8%	745	7.1%	73	0.7%	29	0.3%	3,156	30.2%	136	1.3%	63	0.6%	10,455	10.2%
Miscellaneous diagnostic and therapeutic procs	764	38.2%	295	14.8%	14	0.7%	27	1.4%	872	43.6%	21	1.1%	6	0.3%	1,999	1.9%
Total	39,120	38.0%	14,018	13.6%	1,068	1.0%	1,632	1.6%	45,519	44.3%	980	1.0%	496	0.5%	102,833	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
2012 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	6	-	13	362	-	-	-	-	13	-	1	3	-	-	398
Avg\$	\$ 12,734	\$ -	\$ 358	\$ 31,591	\$ -	\$ -	\$ -	\$ -	\$ 9,030	\$ -	\$ 34,388	\$ 100,334	\$ -	\$ -	\$ 29,898
01 Incision, Excision of Brain, Skull															
N	-	-	-	2	-	-	-	-	-	-	-	-	-	-	2
Avg\$	\$ -	\$ -	\$ -	\$ 5,133	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,133
02 Other Brain, Skull Operations															
N	-	-	-	7	-	-	-	-	-	-	-	-	-	-	7
Avg\$	\$ -	\$ -	\$ -	\$ 15,822	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 15,822
03 Spinal Cord & Canal Operations															
N	64	448	186	1,180	38	-	130	216	-	784	-	1,095	451	2	4,594
Avg\$	\$ 3,271	\$ 1,448	\$ 1,005	\$ 2,823	\$ 2,148	\$ -	\$ 2,114	\$ 2,104	\$ -	\$ 924	\$ -	\$ 2,221	\$ 2,303	\$ 904	\$ 2,042
04 Cranial & Peripheral Nerve Operations															
N	85	187	179	1,565	135	-	68	77	68	374	84	176	180	83	3,261
Avg\$	\$ 3,589	\$ 3,900	\$ 4,606	\$ 5,011	\$ 6,762	\$ -	\$ 3,057	\$ 4,688	\$ 5,956	\$ 2,213	\$ 4,536	\$ 3,669	\$ 4,050	\$ 2,384	\$ 4,408
05 Sympathetic Nerve Operations															
N	-	3	1	133	-	-	2	-	-	10	-	-	3	-	152
Avg\$	\$ -	\$ 1,997	\$ 1,564	\$ 5,818	\$ -	\$ -	\$ 2,548	\$ -	\$ -	\$ 846	\$ -	\$ -	\$ 2,747	\$ -	\$ 5,284
06 Thyroid, Parathyroid Operations															
N	1	49	1	359	-	-	4	8	1	8	7	1	118	14	571
Avg\$	\$ 19,830	\$ 5,089	\$ 12,020	\$ 8,674	\$ -	\$ -	\$ 6,143	\$ 4,629	\$ 27,832	\$ 5,722	\$ 7,235	\$ 13,295	\$ 1,163	\$ 3,170	\$ 6,613
07 Other Endocrine Gland Operations															
N	-	2	-	3	-	-	-	-	-	-	-	-	-	-	5
Avg\$	\$ -	\$ 3,950	\$ -	\$ 8,871	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,902
08 Eyelid Operations															
N	10	6	1	134	-	-	3	6	1	12	46	25	5	3	252
Avg\$	\$ 4,103	\$ 3,497	\$ 1,041	\$ 3,708	\$ -	\$ -	\$ 5,364	\$ 2,490	\$ 4,951	\$ 1,938	\$ 3,972	\$ 2,435	\$ 1,834	\$ 4,458	\$ 3,513
09 Lacrimal System Operations															
N	-	-	-	90	-	-	-	-	-	4	1	-	-	-	95
Avg\$	\$ -	\$ -	\$ -	\$ 3,803	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,860	\$ 3,925	\$ -	\$ -	\$ -	\$ 3,807
10 Conjunctival Operations															
N	-	1	-	12	-	-	-	-	1	-	-	-	1	-	15
Avg\$	\$ -	\$ 5,498	\$ -	\$ 5,998	\$ -	\$ -	\$ -	\$ -	\$ 10,960	\$ -	\$ -	\$ -	\$ 4,051	\$ -	\$ 6,166

Table O-9
2012 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	-	-	-	41	1	-	-	1	-	3	1	1	-	-	48
Avg\$	\$ -	\$ -	\$ -	\$ 13,393	\$ 3,212	\$ -	\$ -	\$ 7,645	\$ -	\$ 6,754	\$ 3,679	\$ 2,580	\$ -	\$ -	\$ 12,218
12 Anterior Eye Segment Operations															
N	5	23	-	164	-	-	-	12	40	-	2	52	8	1	307
Avg\$	\$ 2,274	\$ 845	\$ -	\$ 7,245	\$ -	\$ -	\$ -	\$ 8,891	\$ 2,096	\$ -	\$ 6,130	\$ 1,626	\$ 1,385	\$ 4,193	\$ 4,956
13 Operations on Lens of Eye															
N	486	625	130	635	176	-	225	318	504	145	455	630	84	194	4,607
Avg\$	\$ 4,692	\$ 3,778	\$ 5,476	\$ 4,856	\$ 6,095	\$ -	\$ 8,148	\$ 6,053	\$ 7,186	\$ 5,163	\$ 4,830	\$ 5,565	\$ 3,186	\$ 3,671	\$ 5,279
14 Posterior Eye Segment Operations															
N	1	2	-	2,451	-	-	-	2	-	-	-	-	1	1	2,458
Avg\$	\$ 10,219	\$ 4,937	\$ -	\$ 5,675	\$ -	\$ -	\$ -	\$ 7,301	\$ -	\$ -	\$ -	\$ -	\$ 1,330	\$ 3,878	\$ 5,675
15 Extraocular Muscle Operations															
N	1	-	-	2	45	-	-	-	-	2	-	-	-	2	52
Avg\$	\$ 5,411	\$ -	\$ -	\$ 5,428	\$ 10,008	\$ -	\$ -	\$ -	\$ -	\$ 4,494	\$ -	\$ -	\$ -	\$ 6,339	\$ 9,390
16 Orbit & Eyeball Operations															
N	-	-	-	102	-	-	-	-	-	-	-	-	-	1	103
Avg\$	\$ -	\$ -	\$ -	\$ 2,278	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,946	\$ 2,294
17 Other Miscellaneous Procedures															
N	-	23	-	34	-	-	3	1	4	22	-	1	73	3	164
Avg\$	\$ -	\$ 11,361	\$ -	\$ 16,053	\$ -	\$ -	\$ 15,686	\$ 18,465	\$ 27,157	\$ 9,834	\$ -	\$ 15,672	\$ 13,072	\$ 21,178	\$ 13,604
18 External Ear Operations															
N	-	5	4	156	1	-	1	3	1	15	6	19	17	2	230
Avg\$	\$ -	\$ 5,076	\$ 1,221	\$ 3,042	\$ 9,097	\$ -	\$ 7,406	\$ 4,254	\$ 2,247	\$ 1,183	\$ 4,798	\$ 3,147	\$ 2,027	\$ 3,926	\$ 2,978
19 Middle Ear Reconstructions															
N	-	13	-	53	-	-	-	6	4	-	12	7	8	-	103
Avg\$	\$ -	\$ 5,833	\$ -	\$ 13,321	\$ -	\$ -	\$ -	\$ 11,238	\$ 14,866	\$ -	\$ 4,656	\$ 7,679	\$ 3,452	\$ -	\$ 10,155
20 Other Middle & Inner Ear Operations															
N	5	64	1	673	-	-	5	30	11	51	135	73	54	38	1,140
Avg\$	\$ 3,817	\$ 3,496	\$ 5,795	\$ 5,511	\$ -	\$ -	\$ 7,890	\$ 3,488	\$ 5,774	\$ 3,342	\$ 4,381	\$ 2,986	\$ 2,333	\$ 2,154	\$ 4,695

Table O-9
2012 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	2	13	6	798	-	-	4	48	9	25	58	184	37	14	1,198
Avg\$	\$ 3,280	\$ 8,392	\$ 5,120	\$ 3,935	\$ -	\$ -	\$ 12,516	\$ 5,358	\$ 9,405	\$ 5,317	\$ 5,820	\$ 2,798	\$ 4,002	\$ 7,156	\$ 4,094
22 Nasal Sinus Operations															
N	1	24	-	111	-	-	3	12	3	4	11	29	3	5	206
Avg\$	\$ 16,251	\$ 9,105	\$ -	\$ 16,860	\$ -	\$ -	\$ 22,956	\$ 7,575	\$ 12,538	\$ 7,212	\$ 8,180	\$ 7,914	\$ 4,768	\$ 10,637	\$ 13,201
23 Tooth Removal & Restoration															
N	24	2	84	327	-	-	-	-	7	-	-	44	129	9	626
Avg\$	\$ 9,978	\$ 4,616	\$ 8,353	\$ 8,255	\$ -	\$ -	\$ -	\$ -	\$ 12,971	\$ -	\$ -	\$ 11,560	\$ 3,703	\$ 2,365	\$ 7,585
24 Other Operations on Teeth & Gums															
N	-	-	-	2	1	-	-	-	-	-	-	-	-	-	3
Avg\$	\$ -	\$ -	\$ -	\$ 7,958	\$ 10,454	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,790
25 Operations on Tongue															
N	-	5	1	35	-	-	-	5	2	2	4	5	-	1	60
Avg\$	\$ -	\$ 4,336	\$ -	\$ 6,765	\$ -	\$ -	\$ -	\$ 2,795	\$ 2,601	\$ 3,726	\$ 4,193	\$ 3,283	\$ -	\$ 1,561	\$ 5,421
26 Salivary Gland Operations															
N	-	9	2	32	-	-	1	2	1	-	4	5	2	1	59
Avg\$	\$ -	\$ 9,696	\$ 9,019	\$ 13,634	\$ -	\$ -	\$ 22,582	\$ 4,676	\$ 18,911	\$ -	\$ 7,975	\$ 10,230	\$ 11,613	\$ 2,483	\$ 11,885
27 Other Mouth & Face Operations															
N	-	5	2	128	-	-	-	8	5	7	3	18	5	7	188
Avg\$	\$ -	\$ 8,852	\$ 1,155	\$ 4,505	\$ -	\$ -	\$ -	\$ 8,003	\$ 7,662	\$ 1,645	\$ 7,451	\$ 3,970	\$ 1,980	\$ 4,788	\$ 4,654
28 Tonsil & Adenoid Operations															
N	2	77	1	358	-	-	26	58	35	59	142	46	16	18	838
Avg\$	\$ 11,501	\$ 6,189	\$ 4,453	\$ 4,415	\$ -	\$ -	\$ 9,322	\$ 6,019	\$ 7,706	\$ 4,324	\$ 6,120	\$ 5,377	\$ 2,930	\$ 5,880	\$ 5,334
29 Operations on Pharynx															
N	-	5	-	31	-	-	-	1	-	-	-	44	2	-	83
Avg\$	\$ -	\$ 9,030	\$ -	\$ 6,564	\$ -	\$ -	\$ -	\$ 17,380	\$ -	\$ -	\$ -	\$ 633	\$ 1,071	\$ -	\$ 3,567
30 Excision of Larynx															
N	-	8	-	52	-	-	-	6	3	2	1	8	7	2	89
Avg\$	\$ -	\$ 6,582	\$ -	\$ 7,786	\$ -	\$ -	\$ -	\$ 5,659	\$ 6,411	\$ 4,169	\$ 7,206	\$ 5,927	\$ 5,118	\$ 4,808	\$ 6,956

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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	1	2	-	627	-	-	-	3	2	3	17	308	1	2	966
Avg\$	\$ 6,873	\$ 6,745	\$ -	\$ 1,504	\$ -	\$ -	\$ -	\$ 3,780	\$ 7,279	\$ 4,596	\$ 6,730	\$ 595	\$ 3,494	\$ 6,977	\$ 1,365
32 Lung & Bronchus Excision															
N	-	-	-	12	-	-	-	-	-	-	-	-	-	-	12
Avg\$	\$ -	\$ -	\$ -	\$ 13,758	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,758
33 Other Bronchial & Lung Operations															
N	5	30	-	398	1	-	-	24	-	-	-	30	40	11	539
Avg\$	\$ 4,751	\$ 5,196	\$ -	\$ 5,908	\$ 2,647	\$ -	\$ -	\$ 9,609	\$ -	\$ -	\$ -	\$ 5,329	\$ 3,811	\$ 3,380	\$ 5,778
34 Thorax Operations Except Lung															
N	15	7	2	150	-	-	3	9	5	4	3	2	12	8	220
Avg\$	\$ 3,545	\$ 2,956	\$ 1,755	\$ 3,336	\$ -	\$ -	\$ 2,183	\$ 3,104	\$ 7,990	\$ 2,076	\$ 3,129	\$ 4,580	\$ 3,521	\$ 2,566	\$ 3,377
35 Heart Valve & Septa Operations															
N	-	-	-	9	-	-	-	-	-	-	-	-	-	-	9
Avg\$	\$ -	\$ -	\$ -	\$ 35,578	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 35,578
36 Operations on Heart Vessels															
N	-	-	-	19	-	-	-	-	-	-	-	-	-	-	19
Avg\$	\$ -	\$ -	\$ -	\$ 33,335	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 33,335
37 Other Heart & Pericardium Operations															
N	-	27	-	1,113	-	-	-	-	2	-	5	116	31	-	1,294
Avg\$	\$ -	\$ 18,575	\$ -	\$ 21,381	\$ -	\$ -	\$ -	\$ -	\$ 29,508	\$ -	\$ 9,514	\$ 19,225	\$ 16,337	\$ -	\$ 20,981
38 Vessel Incision, Excision, Occlusion															
N	25	63	60	1,589	4	-	73	65	353	633	13	105	52	9	3,044
Avg\$	\$ 1,923	\$ 2,409	\$ 2,018	\$ 1,575	\$ 12,580	\$ -	\$ 278	\$ 3,771	\$ 1,773	\$ 529	\$ 376	\$ 850	\$ 3,155	\$ 6,130	\$ 1,449
39 Other Operations on Vessels															
N	19	33	-	715	-	-	-	2	-	2	-	8	19	-	798
Avg\$	\$ 4,939	\$ 10,539	\$ -	\$ 16,584	\$ -	\$ -	\$ -	\$ 1,014	\$ -	\$ 3,206	\$ -	\$ 23,376	\$ 9,760	\$ -	\$ 15,880
40 Lymphatic System Operations															
N	5	7	6	164	6	-	4	11	7	11	9	39	24	8	301
Avg\$	\$ 4,801	\$ 8,449	\$ 8,321	\$ 8,151	\$ 21,366	\$ -	\$ 13,039	\$ 8,502	\$ 8,480	\$ 3,153	\$ 7,846	\$ 5,449	\$ 4,623	\$ 11,713	\$ 7,726

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Procedure Groups	BRAT	CVMC	COPL	FAHC	GIFF	GRAC	MT.A	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	Total
41 Bone Marrow & Spleen Operations															
N	1	7	4	197	-	-	1	-	2	-	-	1	1	3	217
Avg\$	\$ 3,245	\$ 3,428	\$ 2,497	\$ 5,683	\$ -	\$ -	\$ 1,548	\$ -	\$ 4,018	\$ -	\$ -	\$ -	\$ 1,400	\$ 2,870	\$ 5,445
42 Operations on Esophagus															
N	20	88	34	215	12	-	13	4	1	19	8	119	19	3	555
Avg\$	\$ 2,140	\$ 3,528	\$ 2,925	\$ 4,837	\$ 3,792	\$ -	\$ 2,397	\$ 3,386	\$ 3,966	\$ 3,202	\$ 3,946	\$ 3,550	\$ 2,317	\$ 2,200	\$ 3,880
43 Incision, Excision of Stomach															
N	9	12	22	77	2	-	2	9	1	7	3	26	23	4	197
Avg\$	\$ 2,730	\$ 3,977	\$ 3,385	\$ 3,682	\$ 2,701	\$ -	\$ 2,762	\$ 4,343	\$ 5,228	\$ 1,590	\$ 3,994	\$ 3,888	\$ 2,273	\$ 2,690	\$ 3,415
44 Other Operations on Stomach															
N	4	6	-	111	1	-	-	-	-	14	1	5	5	1	148
Avg\$	\$ 2,945	\$ 3,711	\$ -	\$ 7,924	\$ 4,837	\$ -	\$ -	\$ -	\$ -	\$ 12,996	\$ 2,784	\$ 3,595	\$ 5,412	\$ 2,806	\$ 7,810
45 Intestinal Incision, Excision, Anastomosis															
N	1,201	2,522	828	10,033	534	-	391	952	861	2,129	1,151	2,653	2,397	995	26,647
Avg\$	\$ 2,545	\$ 3,295	\$ 2,400	\$ 3,674	\$ 3,676	\$ -	\$ 2,456	\$ 3,495	\$ 3,390	\$ 1,727	\$ 3,022	\$ 3,290	\$ 2,149	\$ 2,084	\$ 3,096
46 Other Intestinal Operations															
N	1	1	-	23	-	-	-	2	-	-	16	2	2	1	48
Avg\$	\$ 9,682	\$ 7,799	\$ -	\$ 3,946	\$ -	\$ -	\$ -	\$ 3,702	\$ -	\$ -	\$ 3,202	\$ 4,943	\$ 3,630	\$ 1,029	\$ 3,855
47 Operations on Appendix															
N	6	4	-	16	1	-	2	7	2	6	3	3	3	1	54
Avg\$	\$ 9,795	\$ 10,934	\$ -	\$ 11,085	\$ 17,491	\$ -	\$ 15,217	\$ 15,889	\$ 14,334	\$ 9,616	\$ 24,377	\$ 16,866	\$ 8,907	\$ 10,149	\$ 12,491
48 Other Rectal & Perirectal Operations															
N	75	196	64	439	17	-	45	24	42	107	118	163	226	83	1,599
Avg\$	\$ 2,661	\$ 3,748	\$ 2,585	\$ 4,193	\$ 5,960	\$ -	\$ 3,126	\$ 3,871	\$ 3,873	\$ 2,072	\$ 2,997	\$ 3,505	\$ 2,173	\$ 2,767	\$ 3,318
49 Operations on Anus															
N	33	45	5	279	14	-	7	29	18	56	16	33	21	19	575
Avg\$	\$ 3,947	\$ 4,852	\$ 2,974	\$ 2,963	\$ 10,678	\$ -	\$ 6,507	\$ 5,713	\$ 8,365	\$ 2,229	\$ 6,517	\$ 6,477	\$ 4,259	\$ 7,384	\$ 4,125
50 Operations on Liver															
N	34	13	-	221	-	-	1	1	-	1	-	7	6	3	287
Avg\$	\$ 3,627	\$ 5,873	\$ -	\$ 7,698	\$ -	\$ -	\$ 4,333	\$ 4,494	\$ -	\$ 7,751	\$ -	\$ 1,640	\$ 3,072	\$ 3,316	\$ 6,820

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51 Biliary Tract Operations															
N	78	160	66	450	29	-	23	82	44	219	58	96	161	36	1,502
Avg\$	\$ 8,555	\$ 10,142	\$ 14,713	\$ 11,609	\$ 24,917	\$ -	\$ 15,918	\$ 11,617	\$ 19,551	\$ 8,169	\$ 20,368	\$ 8,163	\$ 8,310	\$ 8,910	\$ 11,181
52 Operations on Pancreas															
N	-	-	-	11	-	-	-	-	-	-	-	-	4	-	15
Avg\$	\$ -	\$ -	\$ -	\$ 9,961	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,979	\$ -	\$ 8,632
53 Repair of Hernia															
N	91	187	56	636	57	-	30	87	64	144	93	216	140	53	1,854
Avg\$	\$ 6,616	\$ 7,691	\$ 11,013	\$ 8,595	\$ 13,958	\$ -	\$ 11,616	\$ 9,890	\$ 15,046	\$ 7,244	\$ 13,167	\$ 7,918	\$ 7,406	\$ 7,348	\$ 8,898
54 Other Abdominal Region Operations															
N	31	25	10	273	4	-	6	44	7	18	4	23	42	15	502
Avg\$	\$ 4,398	\$ 5,288	\$ 8,727	\$ 5,579	\$ 13,405	\$ -	\$ 3,205	\$ 5,514	\$ 8,640	\$ 4,231	\$ 14,104	\$ 5,382	\$ 3,436	\$ 3,557	\$ 5,396
55 Operations on Kidney															
N	8	15	1	189	4	-	-	-	-	-	-	1	6	-	224
Avg\$	\$ 18,104	\$ 15,734	\$ 19,468	\$ 6,132	\$ 31,891	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,880	\$ 3,110	\$ -	\$ 7,644
56 Operations on Ureter															
N	23	62	15	180	34	-	-	-	33	12	16	44	47	13	479
Avg\$	\$ 10,101	\$ 12,317	\$ 14,609	\$ 9,133	\$ 14,653	\$ -	\$ -	\$ -	\$ 18,957	\$ 8,171	\$ 9,790	\$ 6,995	\$ 9,504	\$ 10,196	\$ 10,730
57 Urinary Bladder Operations															
N	32	224	111	1,769	43	-	4	16	21	29	33	99	57	30	2,468
Avg\$	\$ 6,404	\$ 3,759	\$ 2,324	\$ 2,073	\$ 12,627	\$ -	\$ 11,933	\$ 8,586	\$ 11,288	\$ 4,255	\$ 7,425	\$ 5,692	\$ 5,827	\$ 6,350	\$ 2,991
58 Operations on Urethra															
N	10	30	1	98	6	-	-	2	4	10	-	23	3	8	195
Avg\$	\$ 5,021	\$ 4,948	\$ 13,940	\$ 7,788	\$ 9,960	\$ -	\$ -	\$ 8,594	\$ 7,348	\$ 5,140	\$ -	\$ 5,230	\$ 5,397	\$ 2,599	\$ 6,620
59 Other Urinary Tract Operations															
N	14	29	21	323	25	-	3	9	14	16	17	41	22	12	546
Avg\$	\$ 7,185	\$ 9,547	\$ 8,249	\$ 7,884	\$ 15,225	\$ -	\$ 12,296	\$ 9,066	\$ 13,009	\$ 5,677	\$ 7,649	\$ 7,638	\$ 10,874	\$ 6,281	\$ 8,478
60 Prostate & Seminal Vesicle Operations															
N	4	31	26	277	41	-	-	-	28	2	4	28	17	8	466
Avg\$	\$ 10,879	\$ 11,005	\$ 6,083	\$ 4,894	\$ 8,548	\$ -	\$ -	\$ -	\$ 9,350	\$ 7,061	\$ 13,196	\$ 10,977	\$ 8,288	\$ 12,897	\$ 6,691

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61 Scrotum & Tunica Vaginalis Operations															
N	1	4	1	53	4	-	3	3	4	4	7	12	7	5	108
Avg\$	\$ 7,259	\$ 6,890	\$ 456	\$ 6,187	\$ 10,386	\$ -	\$ 5,023	\$ 9,114	\$ 10,551	\$ 6,021	\$ 6,137	\$ 5,511	\$ 5,854	\$ 5,515	\$ 6,399
62 Operations on Testes															
N	1	6	-	56	1	-	-	-	3	-	2	2	1	2	74
Avg\$	\$ 11,915	\$ 10,383	\$ -	\$ 7,936	\$ 12,316	\$ -	\$ -	\$ -	\$ 15,038	\$ -	\$ 13,424	\$ 6,650	\$ 6,271	\$ 5,901	\$ 8,571
63 Spermatic Cord, Epididymis, Vas Deferens Operations															
N	3	24	13	78	4	-	6	1	3	4	13	8	9	2	168
Avg\$	\$ 6,736	\$ 3,864	\$ 3,061	\$ 5,128	\$ 20,549	\$ -	\$ 3,504	\$ 10,229	\$ 8,566	\$ 3,288	\$ 3,884	\$ 2,576	\$ 2,339	\$ 4,638	\$ 4,800
64 Operations on Penis															
N	8	50	6	133	5	-	-	10	27	17	14	24	34	33	361
Avg\$	\$ 6,082	\$ 3,899	\$ 1,237	\$ 8,081	\$ 9,067	\$ -	\$ -	\$ 3,483	\$ 5,587	\$ 1,370	\$ 2,211	\$ 8,701	\$ 841	\$ 1,137	\$ 5,224
65 Operations on Ovary															
N	24	18	4	282	23	-	2	31	6	28	12	6	16	4	456
Avg\$	\$ 9,459	\$ 9,749	\$ 14,941	\$ 8,958	\$ 20,256	\$ -	\$ 14,671	\$ 11,708	\$ 15,399	\$ 7,088	\$ 17,213	\$ 8,837	\$ 12,676	\$ 13,902	\$ 10,210
66 Fallopian Tube Operations															
N	18	33	19	74	9	-	-	23	17	42	11	34	36	23	339
Avg\$	\$ 6,257	\$ 6,687	\$ 9,618	\$ 9,181	\$ 13,419	\$ -	\$ -	\$ 8,044	\$ 10,203	\$ 5,977	\$ 8,031	\$ 6,741	\$ 7,058	\$ 6,941	\$ 7,821
67 Operations on Cervix															
N	9	9	34	67	2	-	-	10	3	40	4	26	27	32	263
Avg\$	\$ 5,545	\$ 6,447	\$ 2,035	\$ 4,545	\$ 9,219	\$ -	\$ -	\$ 2,890	\$ 6,432	\$ 1,896	\$ 4,957	\$ 3,263	\$ 3,798	\$ 5,895	\$ 3,876
68 Other Uterine Incision, Excision															
N	53	28	9	477	29	-	2	72	51	161	34	53	99	50	1,118
Avg\$	\$ 9,027	\$ 12,636	\$ 8,462	\$ 16,154	\$ 21,084	\$ -	\$ 10,244	\$ 13,066	\$ 20,012	\$ 6,614	\$ 11,994	\$ 7,296	\$ 12,222	\$ 7,471	\$ 13,104
69 Other Uterus & Supporting Structure Operations															
N	37	123	31	512	29	-	2	23	27	56	32	71	91	13	1,047
Avg\$	\$ 5,255	\$ 4,292	\$ 3,596	\$ 4,727	\$ 8,492	\$ -	\$ 9,648	\$ 6,037	\$ 7,364	\$ 3,867	\$ 5,385	\$ 5,212	\$ 4,441	\$ 6,955	\$ 4,881
70 Vagina & Cul-de-sac Operations															
N	4	5	4	175	6	-	-	17	3	13	1	7	5	2	242
Avg\$	\$ 6,919	\$ 4,705	\$ 7,742	\$ 7,081	\$ 15,127	\$ -	\$ -	\$ 16,031	\$ 15,406	\$ 6,367	\$ 11,217	\$ 7,245	\$ 8,510	\$ 3,859	\$ 7,929

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71 Vulvar & Perineal Operations															
N	2	9	4	102	2	-	-	7	3	18	4	10	5	5	171
Avg\$	\$ 4,219	\$ 3,581	\$ 4,403	\$ 5,095	\$ 3,335	\$ -	\$ -	\$ 1,365	\$ 5,823	\$ 1,975	\$ 4,358	\$ 2,908	\$ 3,441	\$ 3,875	\$ 4,271
73 Assisting, Inducing Delivery, NEC															
N	1	6	-	21	-	-	-	-	3	5	1	-	2	-	39
Avg\$	\$ 1,320	\$ 1,890	\$ -	\$ 2,530	\$ -	\$ -	\$ -	\$ -	\$ 3,286	\$ 3,455	\$ 847	\$ -	\$ 1,032	\$ -	\$ 2,457
74 C-Section, Removal of Fetus															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 11,527	\$ 11,527
75 Other Obstetric Operations															
N	4	740	446	1,256	493	-	-	702	369	166	133	-	242	11	4,562
Avg\$	\$ 446	\$ 451	\$ 628	\$ 1,086	\$ 850	\$ -	\$ -	\$ 676	\$ 547	\$ 392	\$ 487	\$ -	\$ 1,084	\$ 1,398	\$ 766
76 Facial Bone & Joint Operations															
N	1	4	1	90	-	-	-	1	-	-	2	-	-	-	99
Avg\$	\$ 4,606	\$ 10,832	\$ 7	\$ 12,022	\$ -	\$ -	\$ -	\$ 5,792	\$ -	\$ -	\$ 20,047	\$ -	\$ -	\$ -	\$ 11,877
77 Incision, Excision, Division of Bone, NEC															
N	37	19	57	473	189	-	30	10	77	92	40	25	114	32	1,195
Avg\$	\$ 6,761	\$ 8,696	\$ 15,988	\$ 7,239	\$ 13,206	\$ -	\$ 11,160	\$ 9,849	\$ 11,384	\$ 6,090	\$ 10,033	\$ 6,826	\$ 8,306	\$ 7,814	\$ 9,108
78 Other Bone Operations Except Face															
N	29	41	30	269	11	-	3	14	22	34	23	46	61	16	599
Avg\$	\$ 4,400	\$ 6,795	\$ 11,881	\$ 8,240	\$ 9,276	\$ -	\$ 3,337	\$ 8,156	\$ 9,391	\$ 5,212	\$ 5,990	\$ 5,145	\$ 6,055	\$ 5,969	\$ 7,399
79 Reduction of Fracture, Dislocation															
N	56	128	103	421	21	-	1	53	51	74	67	105	94	23	1,197
Avg\$	\$ 10,265	\$ 10,385	\$ 18,074	\$ 13,914	\$ 22,103	\$ -	\$ 17,161	\$ 17,498	\$ 16,073	\$ 7,811	\$ 14,374	\$ 9,287	\$ 8,834	\$ 10,558	\$ 12,937
80 Incision, Excision of Joint															
N	205	153	169	1,220	149	-	17	47	74	190	74	225	229	109	2,861
Avg\$	\$ 4,867	\$ 6,696	\$ 11,156	\$ 8,550	\$ 15,870	\$ -	\$ 12,707	\$ 11,378	\$ 12,170	\$ 7,190	\$ 9,241	\$ 6,612	\$ 6,794	\$ 7,651	\$ 8,489

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81 Joint Repair & Plastic Operations															
N	138	226	859	3,517	45	-	52	132	44	405	71	442	312	75	6,318
Avg\$	\$ 9,491	\$ 6,041	\$ 5,116	\$ 4,832	\$ 23,142	\$ -	\$ 4,261	\$ 4,042	\$ 12,356	\$ 4,519	\$ 16,472	\$ 6,627	\$ 8,111	\$ 7,713	\$ 5,609
82 Hand Muscle, Tendon, Fascia Operations															
N	88	82	43	714	7	-	12	28	46	143	35	135	80	22	1,435
Avg\$	\$ 3,337	\$ 3,179	\$ 6,390	\$ 3,230	\$ 7,963	\$ -	\$ 6,880	\$ 3,694	\$ 4,192	\$ 3,429	\$ 4,636	\$ 2,977	\$ 4,145	\$ 1,444	\$ 3,476
83 Other Muscle, Tendon, Fascia, Bursa Operations															
N	95	107	178	848	91	-	11	29	52	107	39	113	155	25	1,850
Avg\$	\$ 9,061	\$ 8,802	\$ 15,987	\$ 7,005	\$ 15,699	\$ -	\$ 8,775	\$ 11,575	\$ 10,359	\$ 7,308	\$ 16,887	\$ 7,559	\$ 8,720	\$ 6,181	\$ 9,077
84 Other Musculoskeletal Procedure															
N	4	1	5	66	14	-	2	7	5	15	8	6	6	-	139
Avg\$	\$ 5,267	\$ 6,555	\$ 8,370	\$ 5,909	\$ 10,184	\$ -	\$ 7,119	\$ 5,942	\$ 8,213	\$ 3,475	\$ 6,228	\$ 6,531	\$ 5,010	\$ -	\$ 6,258
85 Operations on the Breast															
N	84	263	52	1,435	23	-	20	61	13	48	63	133	327	134	2,656
Avg\$	\$ 8,827	\$ 5,410	\$ 7,848	\$ 7,090	\$ 16,573	\$ -	\$ 13,237	\$ 6,529	\$ 12,179	\$ 3,699	\$ 7,287	\$ 7,452	\$ 4,993	\$ 5,000	\$ 6,731
86 Skin & Subcutaneous Tissue Operations															
N	58	292	125	5,727	66	-	48	165	94	411	59	470	286	40	7,841
Avg\$	\$ 4,916	\$ 4,108	\$ 2,936	\$ 3,412	\$ 7,242	\$ -	\$ 5,376	\$ 3,921	\$ 6,945	\$ 1,578	\$ 4,680	\$ 3,500	\$ 3,675	\$ 5,960	\$ 3,480
Total															
N	3,398	7,796	4,137	48,711	2,455	-	1,294	3,648	3,221	7,044	3,310	8,610	6,823	2,386	102,833
Avg\$	\$ 4,710	\$ 4,196	\$ 5,271	\$ 5,609	\$ 8,037	\$ -	\$ 5,077	\$ 4,798	\$ 6,005	\$ 2,844	\$ 5,577	\$ 4,351	\$ 4,124	\$ 4,013	\$ 5,063

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
2012 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	42,694	82,694	22,378	228,661	29,394	8,941	15,959	33,189	36,292	53,791	39,654	86,525	44,764	36,737	761,673
4100 Radiology - Diagnostic	9,234	9,760	6,650	49,546	7,813	1,587	2,576	5,162	4,629	12,774	7,906	9,776	11,898	6,002	145,313
3440 Mammography	5,612	9,576	2,307	28,937	2,819	-	1,277	3,284	3,046	5,632	3,953	9,310	7,121	3,514	86,388
Screening	4,386	8,241	1,752	23,980	2,187	-	1,005	2,859	2,386	4,746	3,401	8,144	5,562	2,741	71,390
Diagnostic	1,228	1,335	556	5,121	632	-	276	425	666	886	553	1,169	1,564	774	15,185
3630 Ultra Sound	2,509	5,364	1,910	11,697	1,665	396	438	1,626	965	4,514	1,894	4,479	5,651	2,176	45,284
3420 Laboratory - Pathological	1,287	1,533	495	16,161	1,671	-	816	699	3,482	3,135	4,054	1,044	1,720	749	36,846
3240 Cytology	1,354	-	-	18,493	1,741	14	73	1,628	-	-	40	8,462	4,857	-	36,662
5000 Physical Therapy	3,094	3,792	1,714	11,119	2,075	410	631	1,145	4,934	1,737	1,976	1,969	618	1,107	36,321
3430 Magnetic Resonance Imaging (MRI)	1,724	2,082	1,167	11,783	1,201	-	386	1,329	837	2,251	1,028	3,272	2,712	1,160	30,932
3230 CAT Scan	1,184	2,465	818	9,286	687	302	327	1,271	560	2,284	993	2,577	2,587	866	26,207
3280 EKG and EEG	1,143	1,417	1,279	6,832	1,056	398	219	1,333	488	385	391	6,656	1,868	158	23,623
EKG	1,128	1,300	1,115	4,661	995	398	219	835	425	385	391	5,822	1,313	158	19,145
EEG	15	118	165	2,175	61	-	-	499	64	-	-	835	557	-	4,489
3190 Chemotherapy	536	352	401	8,272	54	-	413	539	-	-	-	559	2,171	397	13,694
3260 Echocardiography	426	1,366	542	5,303	305	-	75	922	333	687	583	2,433	295	368	13,638
4800 Intravenous Therapy	805	1,486	556	1,622	151	27	-	1,968	187	286	246	985	4,591	597	13,507
3450 Nuclear Medicine - Diagnostic	467	931	240	3,670	213	-	-	215	359	776	526	1,339	1,105	252	10,093
Pet Scan	-	94	-	52	-	-	-	-	-	-	-	207	372	-	725
All other	467	931	240	3,670	213	-	-	215	359	776	526	1,339	733	252	9,721
3650 Vascular Lab	522	802	368	3,777	227	74	57	511	178	179	69	1,061	846	234	8,905
3560 Pulmonary Function Testing	253	491	76	4,295	197	6	97	549	362	231	365	730	510	164	8,326
3620 Stress Test	421	661	386	2,334	193	-	-	374	357	842	617	1,419	502	137	8,243
3140 Cardiology	631	432	57	4,414	27	-	90	9	495	16	44	1,771	117	-	8,103

Table O-10
2012 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	1,717	-	-	1	41	-	-	851	-	-	-	5,434	-	-	8,044
5100 Occupational Therapy	991	594	318	3,416	334	48	245	227	16	245	56	257	149	96	6,992
3370 Holter Monitor	249	546	-	2,194	62	36	28	462	358	209	1	464	-	74	4,683
5700 Renal Dialysis	-	-	-	3,283	-	-	-	-	-	-	-	-	13	-	3,296
4200 Radiology - Therapeutic	-	371	-	1,721	-	-	-	-	-	-	-	272	90	-	2,454
All Other Cost Centers	1,417	18,864	2,343	61,992	10,735	5	10	430	3,591	5,601	135	12,978	13,120	1,821	133,042
Total (not including subcategories)	78,270	145,579	44,005	498,809	62,661	12,244	23,717	57,723	61,469	95,575	64,531	163,772	107,305	56,609	1,472,269

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
2012 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	101	\$ 15,254	349	\$ 8,441	45	\$ 11,149	26	\$ 13,404	173	\$ 2,908	694	\$ 8,415
Central Vermont Medical Center	335	\$ 21,539	1,079	\$ 7,327	117	\$ 12,581	51	\$ 10,637	37	\$ 4,563	1,619	\$ 10,689
Copley Hospital	63	\$ 9,520	295	\$ 3,940	61	\$ 11,975	249	\$ 6,928	28	\$ 2,467	696	\$ 6,164
Fletcher Allen Health Care	284	\$ 26,613	1,383	\$ 7,703	272	\$ 15,155	479	\$ 17,436	164	\$ 4,949	2,582	\$ 12,199
Gifford Medical Center	73	\$ 15,924	378	\$ 8,697	19	\$ 21,023	76	\$ 19,520	43	\$ 5,353	589	\$ 11,142
Grace Cottage Hospital	2	\$ 4,436	46	\$ 4,752	-	\$ -	-	\$ -	10	\$ 3,343	58	\$ 4,499
Mt. Ascutney Hospital and Health Center	44	\$ 9,700	151	\$ 7,290	14	\$ 12,007	-	\$ -	13	\$ 4,161	222	\$ 7,882
North Country Hospital	59	\$ 14,860	362	\$ 7,516	49	\$ 17,034	88	\$ 18,832	44	\$ 4,818	602	\$ 10,467
Northeastern Vermont Regional Hospital	85	\$ 12,801	129	\$ 4,645	28	\$ 16,107	91	\$ 22,885	96	\$ 1,927	429	\$ 10,270
Northwestern Medical Center	310	\$ 14,986	770	\$ 6,262	115	\$ 10,433	177	\$ 11,815	63	\$ 3,013	1,435	\$ 9,023
Porter Medical Center	80	\$ 14,902	286	\$ 5,851	66	\$ 14,980	50	\$ 18,933	30	\$ 3,086	512	\$ 9,558
Rutland Regional Medical Center	642	\$ 19,449	861	\$ 5,519	88	\$ 11,137	78	\$ 14,758	113	\$ 2,969	1,782	\$ 11,058
Southwestern Vermont Medical Center	107	\$ 14,014	1,149	\$ 5,425	44	\$ 18,807	16	\$ 10,767	31	\$ 3,382	1,347	\$ 6,561
Springfield Hospital	20	\$ 12,287	309	\$ 5,774	35	\$ 9,543	59	\$ 11,243	10	\$ 1,898	433	\$ 7,036
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

2012 Vermont Hospital Outpatient and Expanded Outpatient Data, including VT Residents and Non-residents

In-migration by Vermont Hospital

Outpatient Procedures <u>Vermont Hospital</u>	Vermont Residents		Non-residents		Total	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	2,897	\$13,483,475	501	\$2,484,792	3,398	\$15,968,267
Central Vermont Medical Center	7,759	\$32,429,124	37	\$279,275	7,796	\$32,708,400
Copley Hospital	4,097	\$21,099,391	40	\$616,461	4,137	\$21,715,851
Fletcher Allen Health Care	42,526	\$228,364,377	6,185	\$44,601,906	48,711	\$272,966,282
Gifford Medical Center	2,374	\$18,716,388	81	\$837,052	2,455	\$19,553,440
Grace Cottage Hospital	-	\$0	-	\$0	-	\$0
Mt. Ascutney Hospital and Health Center	843	\$4,379,642	451	\$2,165,207	1,294	\$6,544,849
North Country Hospital	3,611	\$16,517,809	37	\$156,117	3,648	\$16,673,925
Northeastern Vermont Regional Hospital	2,925	\$17,614,122	296	\$1,726,636	3,221	\$19,340,758
Northwestern Medical Center	6,970	\$19,783,692	74	\$243,453	7,044	\$20,027,146
Porter Medical Center	3,070	\$16,944,930	240	\$1,514,761	3,310	\$18,459,691
Rutland Regional Medical Center	8,131	\$34,783,329	479	\$2,281,515	8,610	\$37,064,844
Southwestern Vermont Medical Center	5,287	\$21,599,290	1,536	\$6,538,730	6,823	\$28,138,020
Springfield Hospital	2,047	\$8,040,054	339	\$1,501,804	2,386	\$9,541,858
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

Expanded Outpatient Procedures <u>Vermont Hospital</u>	Vermont Residents		Non-residents		Total	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	62,276	\$35,835,492	10,829	\$6,530,828	73,105	\$42,366,320
Central Vermont Medical Center	138,424	\$78,499,404	1,256	\$611,657	139,680	\$79,111,061
Copley Hospital	44,051	\$19,930,599	501	\$202,585	44,552	\$20,133,183
Fletcher Allen Health Care	443,775	\$405,829,260	30,415	\$44,351,454	474,190	\$450,180,714
Gifford Medical Center	110,503	\$29,503,559	3,399	\$891,260	113,902	\$30,394,820
Grace Cottage Hospital	11,050	\$5,258,363	323	\$157,435	11,373	\$5,415,798
Mt. Ascutney Hospital and Health Center	17,118	\$12,240,675	5,229	\$4,207,942	22,347	\$16,448,616
North Country Hospital	54,647	\$40,404,680	663	\$403,776	55,310	\$40,808,456
Northeastern Vermont Regional Hospital	56,722	\$27,653,498	1,643	\$788,981	58,365	\$28,442,479
Northwestern Medical Center	92,997	\$32,893,110	777	\$292,201	93,774	\$33,185,311
Porter Medical Center	56,842	\$25,782,605	2,724	\$1,395,600	59,566	\$27,178,204
Rutland Regional Medical Center	148,152	\$91,881,275	8,759	\$5,920,912	156,911	\$97,802,187
Southwestern Vermont Medical Center	104,020	\$55,253,273	20,578	\$16,824,931	124,598	\$72,078,205
Springfield Hospital	49,955	\$22,705,112	7,155	\$3,197,815	57,110	\$25,902,927
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
2012 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>	Vermont Residents		Non-residents		Total	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	65,173	\$49,318,967	11,330	\$9,015,620	76,503	\$58,334,587
Central Vermont Medical Center	146,183	\$110,928,528	1,293	\$890,932	147,476	\$111,819,461
Copley Hospital	48,148	\$41,029,989	541	\$819,045	48,689	\$41,849,035
Fletcher Allen Health Care	486,301	\$634,193,637	36,600	\$88,953,359	522,901	\$723,146,996
Gifford Medical Center	112,877	\$48,219,947	3,480	\$1,728,313	116,357	\$49,948,260
Grace Cottage Hospital	11,050	\$5,258,363	323	\$157,435	11,373	\$5,415,798
Mt. Ascutney Hospital and Health Center	17,961	\$16,620,316	5,680	\$6,373,149	23,641	\$22,993,465
North Country Hospital	58,258	\$56,922,489	700	\$559,893	58,958	\$57,482,381
Northeastern Vermont Regional Hospital	59,647	\$45,267,620	1,939	\$2,515,617	61,586	\$47,783,236
Northwestern Medical Center	99,967	\$52,676,802	851	\$535,654	100,818	\$53,212,456
Porter Medical Center	59,912	\$42,727,534	2,964	\$2,910,361	62,876	\$45,637,895
Rutland Regional Medical Center	156,283	\$126,664,603	9,238	\$8,202,428	165,521	\$134,867,031
Southwestern Vermont Medical Center	109,307	\$76,852,563	22,114	\$23,363,661	131,421	\$100,216,225
Springfield Hospital	52,002	\$30,745,166	7,494	\$4,699,619	59,496	\$35,444,785
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
2012 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	1,671	3.6%	3,398	3.3%	12,077	4.8%	73,105	4.9%	90,251	4.8%
Central Vermont Medical Center	3,123	6.7%	7,796	7.6%	26,766	10.7%	139,680	9.4%	177,365	9.4%
Copley Hospital	1,435	3.1%	4,137	4.0%	13,091	5.2%	44,552	3.0%	63,215	3.4%
Fletcher Allen Health Care	19,919	42.7%	48,711	47.4%	48,138	19.3%	474,190	31.9%	590,958	31.4%
Gifford Medical Center	1,112	2.4%	2,455	2.4%	6,604	2.6%	113,902	7.7%	124,073	6.6%
Grace Cottage Hospital	166	0.4%	0	0.0%	3,091	1.2%	11,373	0.8%	14,630	0.8%
Mt. Ascutney Hospital and Health Center	408	0.9%	1,294	1.3%	5,338	2.1%	22,347	1.5%	29,387	1.6%
North Country Hospital	1,358	2.9%	3,648	3.5%	15,274	6.1%	55,310	3.7%	75,590	4.0%
Northeastern Vermont Regional Hospital	1,364	2.9%	3,221	3.1%	13,848	5.5%	58,365	3.9%	76,798	4.1%
Northwestern Medical Center	2,226	4.8%	7,044	6.8%	26,340	10.5%	93,774	6.3%	129,384	6.9%
Porter Medical Center	1,517	3.3%	3,310	3.2%	14,638	5.9%	59,566	4.0%	79,031	4.2%
Rutland Regional Medical Center	6,237	13.4%	8,610	8.4%	27,865	11.2%	156,911	10.6%	199,623	10.6%
Southwestern Vermont Medical Center	3,947	8.5%	6,823	6.6%	20,977	8.4%	124,598	8.4%	156,345	8.3%
Springfield Hospital	2,123	4.6%	2,386	2.3%	15,777	6.3%	57,110	3.8%	77,396	4.1%
Total	46,606	100.0%	102,833	100.0%	249,824	100.0%	1,484,783	100.0%	1,884,046	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
2012 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	1,713	\$29,836	433	\$3,621	3,514	\$1,035	32,633	\$347	38,293	\$1,923
Neoplasms	2,201	\$32,811	14,421	\$4,684	415	\$4,651	84,971	\$2,555	102,008	\$3,536
Endocrine, nutritional, metabolic, immunity	1,749	\$19,599	1,773	\$3,118	3,184	\$2,120	176,732	\$366	183,438	\$609
Diseases of the blood and blood-forming organs	515	\$19,690	760	\$3,470	407	\$3,245	29,758	\$651	31,440	\$1,069
Mental disorders	2,791	\$15,610	249	\$3,021	10,562	\$1,538	33,691	\$405	47,293	\$1,639
Diseases of the nervous system and sense organs	1,084	\$20,856	11,811	\$5,127	20,067	\$1,438	56,655	\$1,089	89,617	\$1,983
Diseases of the circulatory system	7,718	\$25,959	3,193	\$15,826	16,197	\$3,276	199,734	\$468	226,842	\$1,775
Diseases of the respiratory system	5,275	\$18,403	2,902	\$5,013	30,267	\$1,238	76,552	\$527	114,996	\$1,704
Diseases of the digestive system	5,191	\$19,727	13,146	\$5,275	18,604	\$1,957	42,192	\$842	79,133	\$3,141
Diseases of the genitourinary system	2,090	\$16,308	7,640	\$6,419	13,402	\$2,026	134,528	\$667	157,660	\$1,282
Pregnancy, childbirth, and the puerperium	5,684	\$9,558	5,116	\$1,466	2,136	\$1,851	37,338	\$395	50,274	\$1,697
Diseases of the skin and subcutaneous tissue	901	\$14,595	2,875	\$1,864	9,235	\$847	25,361	\$387	38,372	\$982
Musculoskeletal system and connective tissue	3,337	\$37,934	15,212	\$4,617	17,877	\$1,183	184,430	\$903	220,856	\$1,796
Congenital anomalies	158	\$32,345	387	\$8,283	50	\$2,536	3,647	\$1,214	4,242	\$3,086
Conditions originating in the perinatal period	5	\$7,296	146	\$931	247	\$583	1,511	\$186	1,909	\$5,713
Injury and poisoning	4,388	\$28,940	5,939	\$9,962	74,005	\$1,303	51,786	\$647	136,118	\$2,380
Symptoms, signs, and ill-defined conditions	1,619	\$23,014	15,393	\$3,050	27,571	\$1,914	283,111	\$395	327,694	\$775
Residual codes, unclassified, all Ecodes	187	\$15,206	1,437	\$3,946	2,084	\$1,992	30,153	\$1,033	33,861	\$1,327
Total Discharges and Average Charges	46,606	\$20,564	102,833	\$5,063	249,824	\$1,599	1,484,783	\$687	1,884,046	\$1,632
Total Charges	\$1,076,040,690		\$518,703,330		\$399,359,078		\$969,448,281		\$2,963,551,379	

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
2012 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	971	\$37,629	8,367	\$3,615	1,017	\$2,300	-	\$0	10,355	\$6,795
Operations on the endocrine system	71	\$37,287	576	\$6,615	2	\$7,450	-	\$0	649	\$9,973
Operations on the eye	23	\$23,516	7,937	\$5,347	409	\$2,380	-	\$0	8,369	\$5,252
Operations on the ear	13	\$31,341	1,473	\$4,809	85	\$2,627	-	\$0	1,571	\$4,927
Operations on the nose, mouth, and pharynx	194	\$23,782	3,261	\$5,850	877	\$1,763	-	\$0	4,332	\$5,962
Operations on the respiratory system	950	\$41,917	1,826	\$3,262	116	\$5,533	-	\$0	2,892	\$16,203
Operations on the cardiovascular system	4,119	\$47,108	3,580	\$15,493	180	\$13,162	-	\$0	7,879	\$32,188
Operations on the hemic and lymphatic system	185	\$46,079	518	\$6,776	14	\$4,717	-	\$0	717	\$16,905
Operations on the digestive system	3,754	\$31,323	34,136	\$3,954	1,001	\$10,780	-	\$0	38,891	\$6,784
Operations on the urinary system	809	\$28,156	3,912	\$5,146	675	\$5,247	-	\$0	5,396	\$8,625
Operations on the male genital organs	189	\$6,480	1,177	\$6,060	38	\$5,617	-	\$0	1,404	\$6,319
Operations on the female genital organs	563	\$21,649	3,611	\$8,455	192	\$6,840	-	\$0	4,366	\$10,088
Obstetrical procedures	5,373	\$9,417	4,621	\$807	106	\$4,420	-	\$0	10,100	\$5,507
Operations on the musculoskeletal system	4,841	\$40,703	15,384	\$7,189	1,511	\$4,037	-	\$0	21,736	\$14,449
Operations on the integumentary system	755	\$28,198	10,455	\$4,142	7,892	\$1,191	-	\$0	19,102	\$3,878
Miscellaneous diagnostic and therapeutic procs	206	\$49,926	1,999	\$1,005	476	\$2,561	-	\$0	2,681	\$5,179
Total	23,016	\$29,513	102,833	\$5,063	14,591	\$2,825	-	\$0	140,440	\$9,151
Total charges	\$740,958,290		\$518,703,330		\$41,221,366		\$0		\$1,300,882,986	

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 cc=complications or co-morbidity
Effective 10/1/2007 - 9/30/2013

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
 185 M Major chest trauma w/o CC/MCC
 186 M Pleural effusion w MCC
 187 M Pleural effusion w CC
 188 M Pleural effusion w/o CC/MCC
 189 M Pulmonary edema & respiratory failure
 190 M Chronic obstructive pulmonary disease w MCC
 191 M Chronic obstructive pulmonary disease w CC
 192 M Chronic obstructive pulmonary disease w/o CC/MCC
 193 M Simple pneumonia & pleurisy w MCC
 194 M Simple pneumonia & pleurisy w CC
 195 M Simple pneumonia & pleurisy w/o CC/ MCC
 196 M Interstitial lung disease w MCC
 197 M Interstitial lung disease w CC
 198 M Interstitial lung disease w/o CC/MCC
 199 M Pneumothorax w MCC
 200 M Pneumothorax w CC
 201 M Pneumothorax w/o CC/MCC
 202 M Bronchitis & asthma w CC/MCC
 203 M Bronchitis & asthma w/o CC/MCC
 204 M Respiratory signs & symptoms
 205 M Other respiratory system diagnoses w MCC
 206 M Other respiratory system diagnoses w/o MCC
 207 M Respiratory system diagnosis w ventilator support 96+ hours
 208 M Respiratory system diagnosis w ventilator support 96 hours

MDC 5: Diseases and Disorders of the Circulatory System

215 S Other heart assist system implant
 216 S Cardiac valve & oth maj cardiothoracic proc w card cath w MCC
 217 S Cardiac valve & oth maj cardiothoracic proc w card cath w CC
 218 S Cardiac valve & oth maj cardiothoracic proc w card cath w/o CC/MCC
 219 S Cardiac valve & oth maj cardiothoracic proc w/o card cath w MCC
 220 S Cardiac valve & oth maj cardiothoracic proc w/o card cath w CC
 221 S Cardiac valve & oth maj cardiothoracic proc w/o card cath w/o CC/MCC
 222 S Cardiac defib implant w cardiac cath w AMI/HF/shock w MCC
 223 S Cardiac defib implant w cardiac cath w AMI/HF/shock w/o MCC
 224 S Cardiac defib implant w cardiac cath w/o AMI/HF/shock w MCC
 225 S Cardiac defib implant w cardiac cath w/o AMI/HF/shock w/o MCC
 226 S Cardiac defibrillator implant w/o cardiac cath w MCC
 227 S Cardiac defibrillator implant w/o cardiac cath w/o MCC
 228 S Other cardiothoracic procedures w MCC
 229 S Other cardiothoracic procedures w CC
 230 S Other cardiothoracic procedures w/o CC/MCC

231 S Coronary bypass w PTCA w MCC
 232 S Coronary bypass w PTCA w/o MCC
 233 S Coronary bypass w cardiac cath w MCC
 234 S Coronary bypass w cardiac cath w/o MCC
 235 S Coronary bypass w/o cardiac cath w MCC
 236 S Coronary bypass w/o cardiac cath w/o MCC
 237 S Major cardiovasc procedures w MCC or thoracic aortic aneuerysm repair
 238 S Major cardiovasc procedures w/o MCC
 239 S Amputation for circ sys disorders exc upper limb & toe w MCC
 240 S Amputation for circ sys disorders exc upper limb & toe w CC
 241 S Amputation for circ sys disorders exc upper limb & toe w/o CC/MCC
 242 S Permanent cardiac pacemaker implant w MCC
 243 S Permanent cardiac pacemaker implant w CC
 244 S Permanent cardiac pacemaker implant w/o CC/MCC
 245 S AICD Generator Procedures
 246 S Perc cardiovasc proc w drug-eluting stent w MCC or 4+ vessels/stents
 247 S Perc cardiovasc proc w drug-eluting stent w/o MCC
 248 S Perc cardiovasc proc w non-drug-eluting stent w MCC or 4+ ves/stents
 249 S Perc cardiovasc proc w non-drug-eluting stent w/o MCC
 250 S Perc cardiovasc proc w/o coronary artery stent or AMI w MCC
 251 S Perc cardiovasc proc w/o coronary artery stent or AMI w/o MCC
 252 S Other vascular procedures w MCC
 253 S Other vascular procedures w CC
 254 S Other vascular procedures w/o CC/ MCC
 255 S Upper limb & toe amputation for circ system disorders w MCC
 256 S Upper limb & toe amputation for circ system disorders w CC
 257 S Upper limb & toe amputation for circ system disorders w/o CC/MCC
 258 S Cardiac pacemaker device replacement w MCC
 259 S Cardiac pacemaker device replacement w/o MCC
 260 S Cardiac pacemaker revision except device replacement w MCC
 261 S Cardiac pacemaker revision except device replacement w CC
 262 S Cardiac pacemaker revision except device replacement w/o CC/MCC
 263 S Vein ligation & stripping
 264 S Other circulatory system O.R. procedures
 265 S AICD Lead Procedures
 280 M Acute myocardial infarction, discharged alive w MCC
 281 M Acute myocardial infarction, discharged alive w CC
 282 M Acute myocardia infarction, discharged alive w/o CC/MCC
 283 M Acute myocardial infarction, expired w MCC
 284 M Acute myocardial infarction, expired w CC
 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
- 289 M Acute & subacute endocarditis w CC
- 290 M Acute & subacute endocarditis w/o CC/MCC
- 291 M Heart failure & shock w MCC
- 292 M Heart failure & shock w CC
- 293 M Heart failure & shock w/o CC/MCC
- 294 M Deep vein thrombophlebitis w CC/ MCC
- 295 M Deep vein thrombophlebitis w/o CC/ MCC
- 296 M Cardiac arrest, unexplained w MCC
- 297 M Cardiac arrest, unexplained w CC
- 298 M Cardiac arrest, unexplained w/o CC/ MCC
- 299 M Peripheral vascular disorders w MCC
- 300 M Peripheral vascular disorders w CC
- 301 M Peripheral vascular disorders w/o CC/ MCC
- 302 M Atherosclerosis w MCC
- 303 M Atherosclerosis w/o MCC
- 304 M Hypertension w MCC
- 305 M Hypertension w/o MCC
- 306 M Cardiac congenital & valvular disorders w MCC
- 307 M Cardiac congenital & valvular disorders w/o MCC
- 308 M Cardiac arrhythmia & conduction disorders w MCC
- 309 M Cardiac arrhythmia & conduction disorders w CC
- 310 M Cardiac arrhythmia & conduction disorders w/o CC/MCC
- 311 M Angina pectoris
- 312 M Syncope & collapse
- 313 M Chest pain
- 314 M Other circulatory system diagnoses w MCC
- 315 M Other circulatory system diagnoses w CC
- 316 M Other circulatory system diagnoses w/o CC/MCC

- MDC 6: Diseases and Disorders of the Digestive System**
- 326 S Stomach, esophageal & duodenal proc w MCC
- 327 S Stomach, esophageal & duodenal proc w CC
- 328 S Stomach, esophageal & duodenal proc w/o CC/MCC
- 329 S Major small & large bowel procedures w MCC
- 330 S Major small & large bowel procedures w CC
- 331 S Major small & large bowel procedures w/o CC/MCC
- 332 S Rectal resection w MCC
- 333 S Rectal resection w CC
- 334 S Rectal resection w/o CC/MCC
- 335 S Peritoneal adhesiolysis w MCC
- 336 S Peritoneal adhesiolysis w CC
- 337 S Peritoneal adhesiolysis w/o CC/MCC

- 338 S Appendectomy w complicated principal diag w MCC
- 339 S Appendectomy w complicated principal diag w CC
- 340 S Appendectomy w complicated principal diag w/o CC/MCC
- 341 S Appendectomy w/o complicated principal diag w MCC
- 342 S Appendectomy w/o complicated principal diag w CC
- 343 S Appendectomy w/o complicated principal diag w/o CC/MCC
- 344 S Minor small & large bowel procedures w MCC
- 345 S Minor small & large bowel proceduresw CC
- 346 S Minor small & large bowel procedures w/o CC/MCC
- 347 S Anal & stomal procedures w MCC
- 348 S Anal & stomal procedures w CC
- 349 S Anal & stomal procedures w/o CC/ MCC
- 350 S Inguinal & femoral hernia procedures w MCC
- 351 S Inguinal & femoral hernia procedures w CC
- 352 S Inguinal & femoral hernia procedures w/o CC/MCC
- 353 S Hernia procedures except inguinal & femoral w MCC
- 354 S Hernia procedures except inguinal & femoral w CC
- 355 S Hernia procedures except inguinal & femoral w/o CC/MCC
- 356 S Other digestive system O.R. procedures w MCC
- 357 S Other digestive system O.R. procedures w CC
- 358 S Other digestive system O.R. procedures w/o CC/MCC
- 368 M Major esophageal disorders w MCC
- 369 M Major esophageal disorders w CC
- 370 M Major esophageal disorders w/o CC/ MCC
- 371 M Major gastrointestinal disorders & peritoneal infections w MCC
- 372 M Major gastrointestinal disorders & peritoneal infections w CC
- 373 M Major gastrointestinal disorders & peritoneal infections w/o CC/MCC
- 374 M Digestive malignancy w MCC
- 375 M Digestive malignancy w CC
- 376 M Digestive malignancy w/o CC/MCC
- 377 M G.I. hemorrhage w MCC
- 378 M G.I. hemorrhage w CC
- 379 M G.I. hemorrhage w/o CC/MCC
- 380 M Complicated peptic ulcer w MCC
- 381 M Complicated peptic ulcer w CC
- 382 M Complicated peptic ulcer w/o CC/MCC
- 383 M Uncomplicated peptic ulcer w MCC
- 384 M Uncomplicated peptic ulcer w/o MCC
- 385 M Inflammatory bowel disease w MCC
- 386 M Inflammatory bowel disease w CC
- 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 Grp 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
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: Angiocardigraphy	3030	Angiocardigraphy
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
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
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)
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
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
0904	Psychiatric/Psychological Trt: Activity therapy	3580	Recreational 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: Electromyogram	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	
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
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
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
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
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

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
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
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
Grouper	Grouper 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
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