

All Vermont Acute Care Community Hospitals

Table 2B - Counts of Top 2018 Outpatient Procedures

Procedures displayed include the number of cases for each community hospital's top outpatient surgical procedures by volume for the period of 10/1/2017 to 9/30/2018. Hospital System Number of Cases and Average Gross Charges include all hospitals. For individual hospitals, procedures having fewer than 15 cases are not shown. Blanks in the table indicate that the hospital has fewer than 15 cases for that procedure or the hospital does not perform that procedure. The hospital, however, may perform a similar procedure under a different code which may not be shown. Please call the hospital for more information. Note: the surgical cases shown include some anesthetic procedures for the treatment of pain not connected with surgery.

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* "Clinical Classification System" (CCS) groups similar CPT codes, such as all those affecting a given organ system of the body.

"No data" indicates that no procedure in that particular grouping meets the minimum limits based on the methodology described above.

Outpatient Procedures		Hospital System		Vermont Community Hospitals - Counts Displayed Include Each Hospital's Top Outpatient Procedures By Volume														
CCS High-level Group ¹	CCS Single-level Category	System Number of Cases ²	System Average Gross Charges ³	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Gifford Medical Center	Grace Cottage Family Health & Hospital	Mt Ascutney Hospital	North Country Hospital	Northeastern Vermont Regional Hospital	Northwestern Medical Center	Porter Medical Center	Rutland Regional Medical Center	Southwestern Vermont Medical Center	Springfield Hospital	University of Vermont Medical Center	
CCS 1: Operations on the nervous system																		
5	Insert cath, spinal stimulator, inject into spinal canal	4,103	\$2,312		401	111	63		44	125	182	254		822	448		1,652	
6	Decompression peripheral nerve	1,575	\$5,079	81	156	106	35			91	81	150	67	203	27	75	502	
7	Other diagnostic nervous system procedures	2,560	\$1,700									20		612			1,918	
8	Other non-OR or closed therapeutic nerv syst procs	2,108	\$4,098		223	52			23	46	114			250	29		1,352	
9	Other OR therapeutic nervous system procedures	1,723	\$7,092						15		56			273			1,340	
CCS 3: Operations on the eye																		
14	Glaucoma procedures	431	\$2,376		67									39			307	
15	Lens & cataract procedures	4,700	\$6,159	461	733	105	209		355	385	450	438	383	347		149	685	
21	Other extraocular muscle & orbit therapeutic procedures	134	\$8,371														82	
CCS 4: Operations on the ear																		
23	Myringotomy	861	\$3,756		32								60	94	18	22	610	
26	Other therapeutic ear procedures	2,287	\$1,995											1,413			861	
CCS 5: Operations on the nose, mouth, and pharynx																		
30	Tonsillectomy and/or adenoidectomy	572	\$7,059		53					32			51	116	30	18	248	
31	Diagnostic procedures on nose, mouth & pharynx	2,027	\$670				19			26				1,009	18		892	
33	Other OR therapeutic procedures on nose, mouth & pharynx	350	\$11,235		24								40	51			199	
CCS 6: Operations on the respiratory system																		
35	Tracheoscopy & laryngoscopy with biopsy	1,907	\$710		55									1,106			734	
38	Other diagnostic procedures on lung & bronchus	10,023	\$836	216	586	66	150		104	421	233	485	49	979	1,900	215	4,619	
CCS 7: Operations on the cardiovascular system																		
54	Other vascular catheterization, not heart	1,121	\$11,150	22	127					37	19			120	94		663	
62	Other diagnostic cardiovascular procedures	687	\$6,037	98	56		19							139	63		309	
63	Other non-OR therapeutic cardiovascular procedures	3,427	\$1,597	26	109	53				213	864	165	111	432	341	73	1,029	

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CCS 9: Operations on the digestive system																	
69	Esophageal dilatation	432	\$4,707	51	52					17		23		52	21		181
70	Upper gastrointestinal endoscopy, biopsy	5,165	\$3,519	182	474	168	39		151	166	105	569	123	547	446	215	1,980
76	Colonoscopy & biopsy	22,468	\$3,999	972	2,662	751	344		684	839	723	1,905	1,055	1,972	2,443	715	7,403
77	Proctoscopy & anorectal biopsy	612	\$1,870	16	35	16				16		40		41	34	21	369
84	Cholecystectomy & common duct exploration	931	\$13,399	41	127	30	17		19	48	35	152	29	78	116	35	204
85	Inguinal & femoral hernia repair	1,093	\$12,960	55	94	62	30		28	48	53	100	44	120	95	30	334
86	Other hernia repair	835	\$12,555	22	91	15			21	34	39	95	27	99	117	29	235
88	Abdominal paracentesis	356	\$2,258	22	17									30	125		132
91	Peritoneal dialysis	2,587	\$11,946												98		2,489
CCS 10: Operations on the urinary system																	
100	Endoscopy & endoscopic biopsy of the urinary tract	1,230	\$2,701		38						33	18		311		16	758
101	Transurethral excision, drainage, rem urinary obstruction	679	\$7,467	24	29		15			16	30	19	20	111	41	24	336
106	Genitourinary incontinence procedures	206	\$15,051				34							16			113
107	Extracorporeal lithotripsy, urinary	893	\$14,657	34	100	38	38			26	25	30	35	150	77	35	305
109	Procedures on the urethra	198	\$6,017										32	55			86
112	Other OR therapeutic procedures of urinary tract	336	\$9,544		25		30						18	54	15	16	138
CCS 11: Operations on the male genital organs																	
115	Circumcision	259	\$4,296		38					21		16	37		21		90
116	Diagnostic procedures, male genital	375	\$2,953							26				57		129	140
118	Other OR therapeutic procedures, male genital	442	\$12,194								19			20		26	300
CCS 12: Operations on the female genital organs																	
119	Oophorectomy, unilateral & bilateral	394	\$13,090	15						37	22	29	17	55	22	23	151
124	Hysterectomy, abdominal & vaginal	618	\$22,969	25		15	18			29	17	50	22	46	46		332
125	Other excision of cervix & uterus	346	\$9,046	19		21					16	68	23	28	45		97
130	Other diagnostic procedures, female organs	2,912	\$2,067	50	619	22	19			36	20	55	24	428	1,261	26	352
131	Other non-OR therapeutic procedures, female organs	616	\$2,113											314			293
132	Other OR therapeutic procedures, female organs	404	\$10,761	21						34		29		53	22		206
CCS 13: Obstetrical procedures																	
139	Fetal monitoring	4,043	\$799	651	589	347	171			277	260		71	210	211	202	1,054

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CCS 14: Operations on the musculoskeletal system																	
142	Partial excision bone	451	\$11,003	19	22	15	18				34	25		64	34		199
143	Bunionectomy or repair of toe deformities	483	\$12,199		28	27	57				30	55	24	30	36		168
145	Treatment, fracture or disloc of radius & ulna	450	\$14,183	19	51	54				24	16	30	26	64	34		116
147	Treatment, fracture or disloc of lower extremity	520	\$15,827	17	47	45				20		43		55	40		205
148	Other fracture & dislocation procedure	545	\$16,595		50	70				22	20	21	15	47	44		230
151	Excision of semilunar cartilage of knee	979	\$9,046	95	56	84	16			16	41	67	21	117	84		368
152	Arthroplasty knee	157	\$31,046			19						62		22			26
155	Arthrocentesis	5,704	\$735	113						33	18		36	2,744			2,729
156	Injections & aspirations of muscles, tendons, etc.	1,438	\$1,236		210	24					23			364	29		779
160	Other therapeutic procedures on muscles & tendons	2,627	\$10,376	142	180	244	22			106	162	281	48	366	160	43	867
161	Other OR therapeutic procedures on bone	584	\$11,869	16	45	41					19	29	16	47	42		295
162	Other OR therapeutic procedures on joints	1,060	\$14,160	41	49	95				27	56	58	32	127	70	41	452
CCS 15: Operations on the integumentary system																	
165	Breast biopsy & other diagnostic procedures on breast	1,277	\$4,456	52	131		17		18			90	40	121	146	38	611
166	Lumpectomy, quadrantectomy of breast	492	\$11,233	28	58							22		68	54	17	201
169	Debridement of wound, infection or burn	305	\$1,565	60										72			141
170	Excision of skin lesion	4,689	\$2,461	52	66	112	35		16	48	58	197	24	165	69	28	3,819
172	Skin graft	657	\$7,717	60										23	18		521
173	Other diagnostic proc on skin & subcutaneous tissue	286	\$1,166											212	15		37
174	Other non-OR therapeutic procedures on skin & breast	3,730	\$543			1,274					527			52			1,830
Sorted by CCS procedure groups and alphabetically by Hospital. Data source: the Vermont Uniform Hospital Discharge Data Sets as of January 2020. Please see the Act 53 Pricing FAQs for more information. Grace Cottage Hospital has no procedures with 15 or more cases. ¹ Based on "Current Procedural Terminology" (CPT) codes that define outpatient procedures for the period October 1, 2017 through September 30, 2018. "Clinical Classification System" (CCS) groups similar CPT codes, such as all those affecting a given organ system of the body. ² System Number of Cases includes the number of cases for all hospitals with charges. Records with zero charges are not included. ³ System Average Gross Charge is an average based on all hospital cases with charges.																	