

2019 Vermont Hospitals Report

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This report was produced in cooperation with the Vermont Department of Health, Division of Health Surveillance

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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 timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's data collection and processing technologies. At the time of this report, New Hampshire has not released data to Vermont beyond 2015. In addition, Massachusetts has not released data to Vermont since 2013 due to changes in their data release policies.

The most recent population-based report, *Vermont Hospital Utilization Reports* (VHUR), was published in 2011 based on data from 2009. 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/health-statistics-vital-records/health-care-systems-reporting/hospital-discharge-data>.

Information on requesting research hospital discharge data sets (that include non-public data elements not found in Public Use data files) also can be found on the Health Department website:

<http://healthvermont.gov/health-statistics-vital-records/health-care-systems-reporting/hospital-discharge-data>.

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

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Note: Reporting is limited to Vermont hospitals until the 2019 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. Data from New Hampshire have not been available since 2015, and Massachusetts data have not been available since the 2013 discharge year.

User's Guide

Introduction

The 2019 Vermont Hospitals Report presents information about patient health issues and hospital services provided in 14 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, such population-based HSA analyses can help compare morbidity and practice variations across different regions of Vermont. Because data for Vermont residents using hospitals in all 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 hospital discharge 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, maternal records are included but newborns (MDC 15) are excluded from reports (although newborn charges are included in reports of total charges). 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. Complete reporting of ED data to the hospital discharge reporting system began in 2003.

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 with a primary CPT code in CCS high level groups 1 through 15 that did not originate in the ED. 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 recognized by third-party payers for beds occupied by a person in an observation status. Most observation bed records can be found in the outpatient setting with an associated ED revenue code and/or a primary CPT code in CCS high level groups 1 through 15. There are a few 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 primary CPT code.

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 primary CPT code in CCS high level groups 1 through 15. 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 2003, data have been available across three hospital settings: inpatient discharges, outpatient procedures and services, 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).

Records are presented at the visit level, one record per visit, except for Table O-11, where expanded outpatient visits with multiple revenue groups are reported more than once.

Classification of Diagnoses and Procedures

No changes in coding systems occurred in 2019.

In 2014 and 2015, hospitals reported diagnoses and procedures using multiple coding systems for inpatients, ED visits and outpatients. Due to changes in Vermont's requirements, as of July 1, 2014, reporting of [outpatient procedures](#) changed from the International Classification of Disease codes (9th Revision, Clinical Modification: ICD-9-CM) to the Current Procedural Terminology (CPT) and Health Care Procedure Coding System (HCPCS) coding system. In addition, as of October 1, 2015, federal mandates required that reporting of [all diagnoses and inpatient procedures](#) change from the ICD-9-CM to the ICD-10-CM/PCS coding system.

Inpatient Diagnosis Groupings

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, these groupings are not used for outpatient or ED records. For this report, to facilitate comparisons across hospital settings, primary diagnoses for all inpatients, outpatients, and ED visits are grouped into the same clinically meaningful categories using Clinical Classifications Software (CCS).

Outpatient ICD-9CM and CPT Primary Procedures

Prior to July 1, 2014, outpatient procedures were reported using the ICD-9-CM coding system; these codes were included as appropriate on each individual discharge record with a primary procedure code determined by the reporting hospital. As of July 1, 2014, outpatient procedures are reported using the HCPCS/CPT coding system; these codes are included on each of one-to-many revenue records per discharge, and there is no determination of primary CPT code by the reporting hospital. Therefore, a primary CPT code is calculated for each outpatient discharge using an algorithm that includes relative value units, charges, and whether the CPT code is for an ambulatory surgical procedure.

Clinical Classification Software

Clinical Classifications Software (CCS) is a tool developed at the Agency for Healthcare Research and Quality (AHRQ) and available to the public at the website: <http://www.hcup-us.ahrq.gov/toolssoftware/ccs/ccs.jsp>. CCS collapses ICD-9-CM and ICD-10-CM principal diagnosis codes into the same 260 mutually exclusive, meaningful, single-level categories. These single-level CCS categories are then collapsed into high-level groups, broad categories based on body systems or condition. Similarly, CCS collapses ICD-9-CM, ICD-10-PCS and HCPCS/CPT procedure codes into the same 244 mutually exclusive, meaningful, single-level procedure categories that are then collapsed into high-level groups 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, and across time.

Revenue Code Primary Cost Center Groups

Primary Cost Centers (PCCR) are used to group revenue codes into broader categories of services. About 25 of the most frequent PCCR categories are reported individually in this report, of over 60 possible categories. If a visit includes multiple revenue codes that map to the same PCCR category, or to multiple PCCR categories, each distinct category is counted once for that visit.

Highlights

Highlights of Charges and In-migration to Vermont Hospitals

Total Charges and Number of Discharges

- **Total charges for Vermont resident inpatient discharges from Vermont hospitals** increased by 6.8% from 2018 to 2019. Charges for non-resident inpatient discharges increased by 4.1%. The *number* of inpatient discharges for Vermont residents in 2019 increased by 0.3% over 2018, and the number of non-resident inpatient discharges was consistent with 2018 with a change of 0.0%.
- **Total charges for Vermont residents with ED visits to Vermont hospitals** increased by 6.7% from 2018 to 2019, a smaller increase than that for non-residents (6.4%). Total charges have fluctuated in recent years, with the smallest increases occurring from 2016 to 2017 (2.5% and 3.6% respectively), and the largest from 2013 to 2014 (10.8% and 10.9% respectively). The *number* of ED visits for both Vermont residents and non-residents has changed very little from 2018 to 2019 (0.3% and 0.6% respectively).
- **Total charges for Vermont residents with outpatient procedures in CCS high-level procedure groups 1 through 15 at Vermont hospitals** increased 6.9% from 2018 to 2019 compared to the increase of 5.0% in total charges for non-residents. The increase for Vermont resident charges is higher than the change from 2017 to 2018 (4.5%), and the increase in total charges for non-residents is lower than the increase from 2017 to 2018 (10.2%). The *number* of outpatient procedures for Vermont residents and non-residents changed slightly from 2018 to 2019 (4.5% and 6.0% respectively).

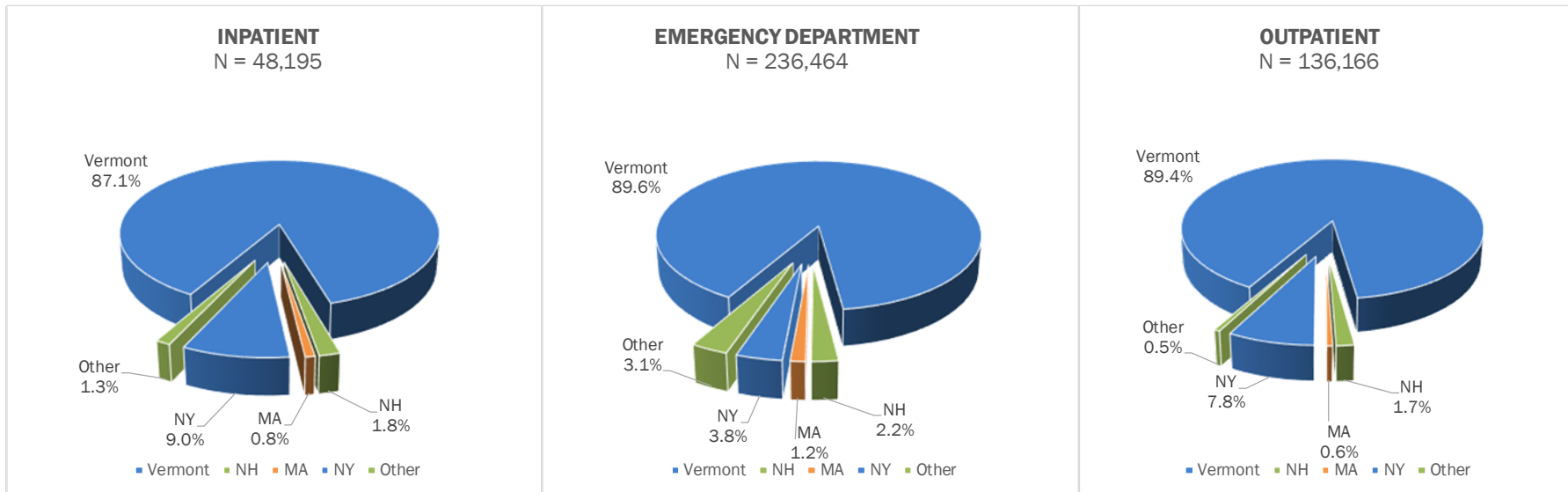
In-migration

- Most in-migration to Vermont hospitals in 2019 continued to be by New York residents for inpatient care, ED visits, and outpatient procedures in range. As in recent years, New York residents accounted for a much smaller percent of all ED visits than of either inpatient discharges or outpatient procedures (3.8% of ED visits, compared to 9.0% of inpatient discharges and 7.8% of outpatient procedures in range).
- In 2019, New York residents accounted for a higher percent of total charges than of total discharges in all three settings (4.6% of ED charges, 13.5% of inpatient charges and 9.3% of outpatient charges), as in recent years.

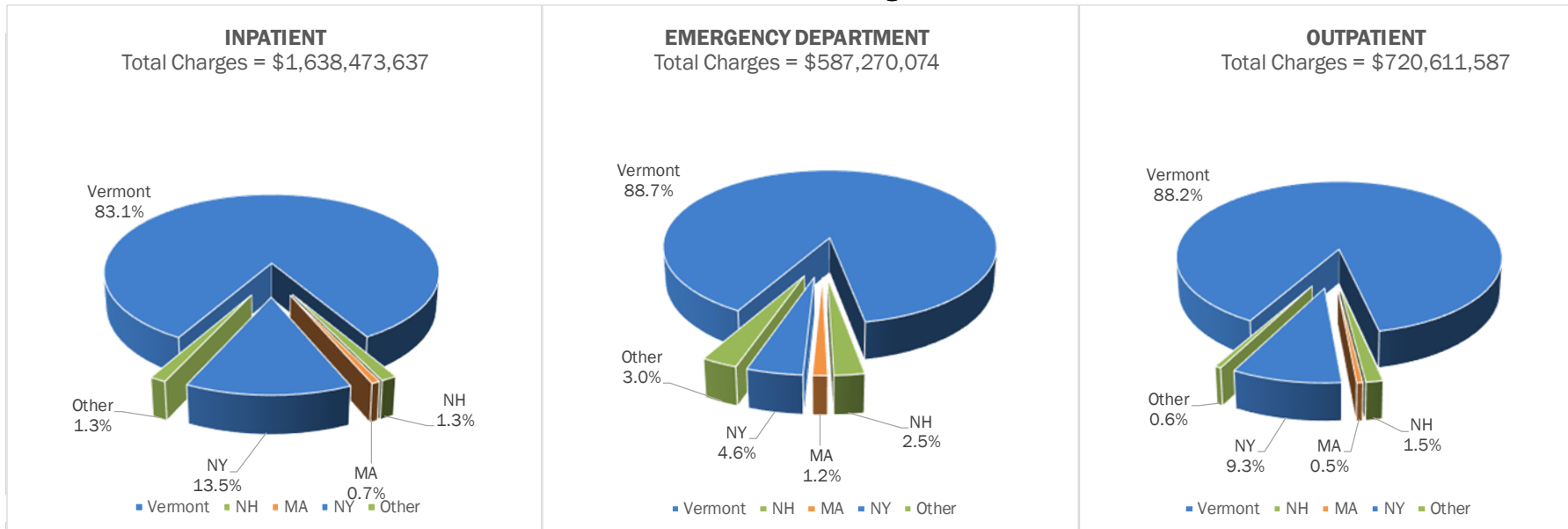
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**2019 Vermont Hospitals
Summary of Patients' State of Residence by Hospital Setting**

Percent of Total Discharges

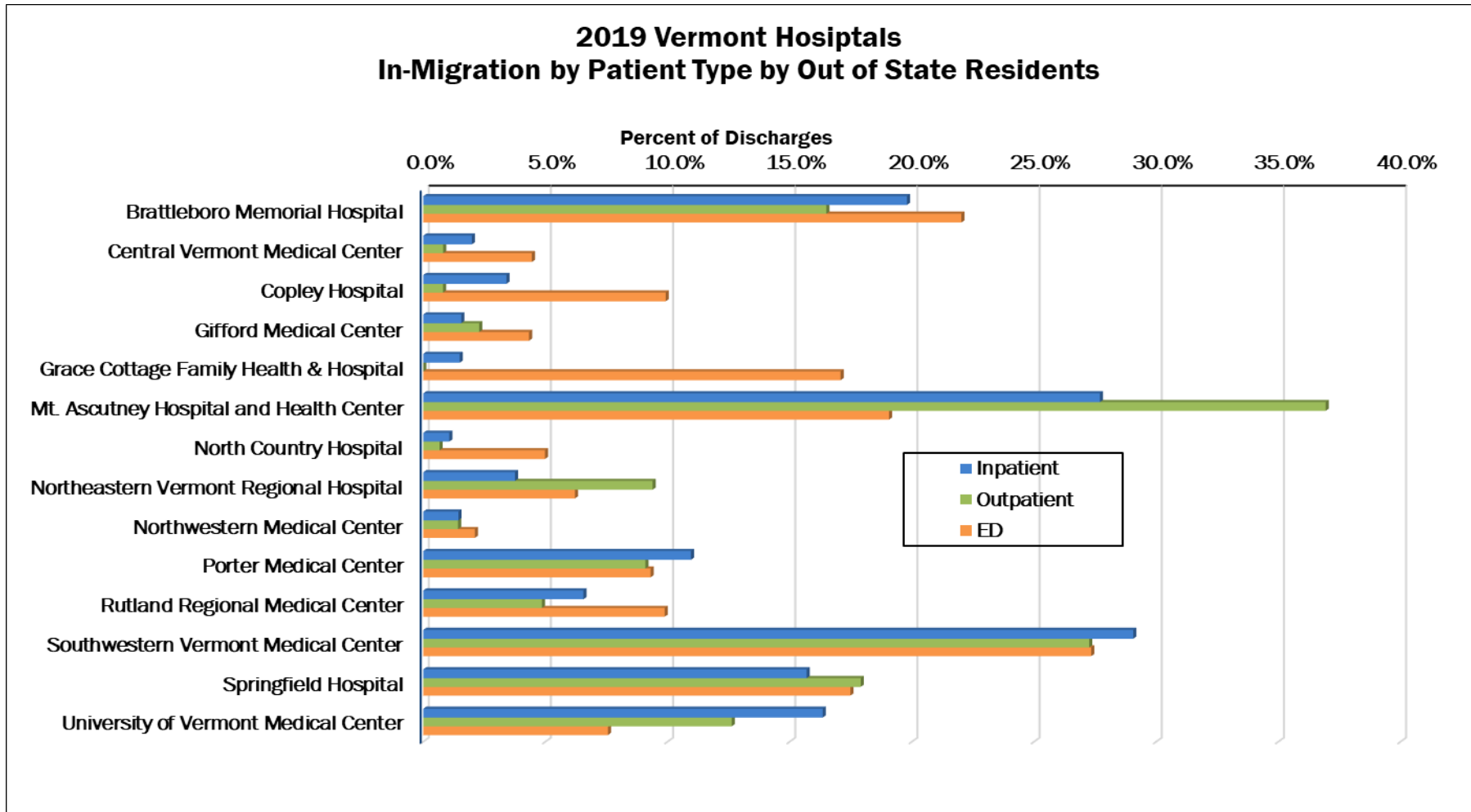


Percent of Total Charges



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

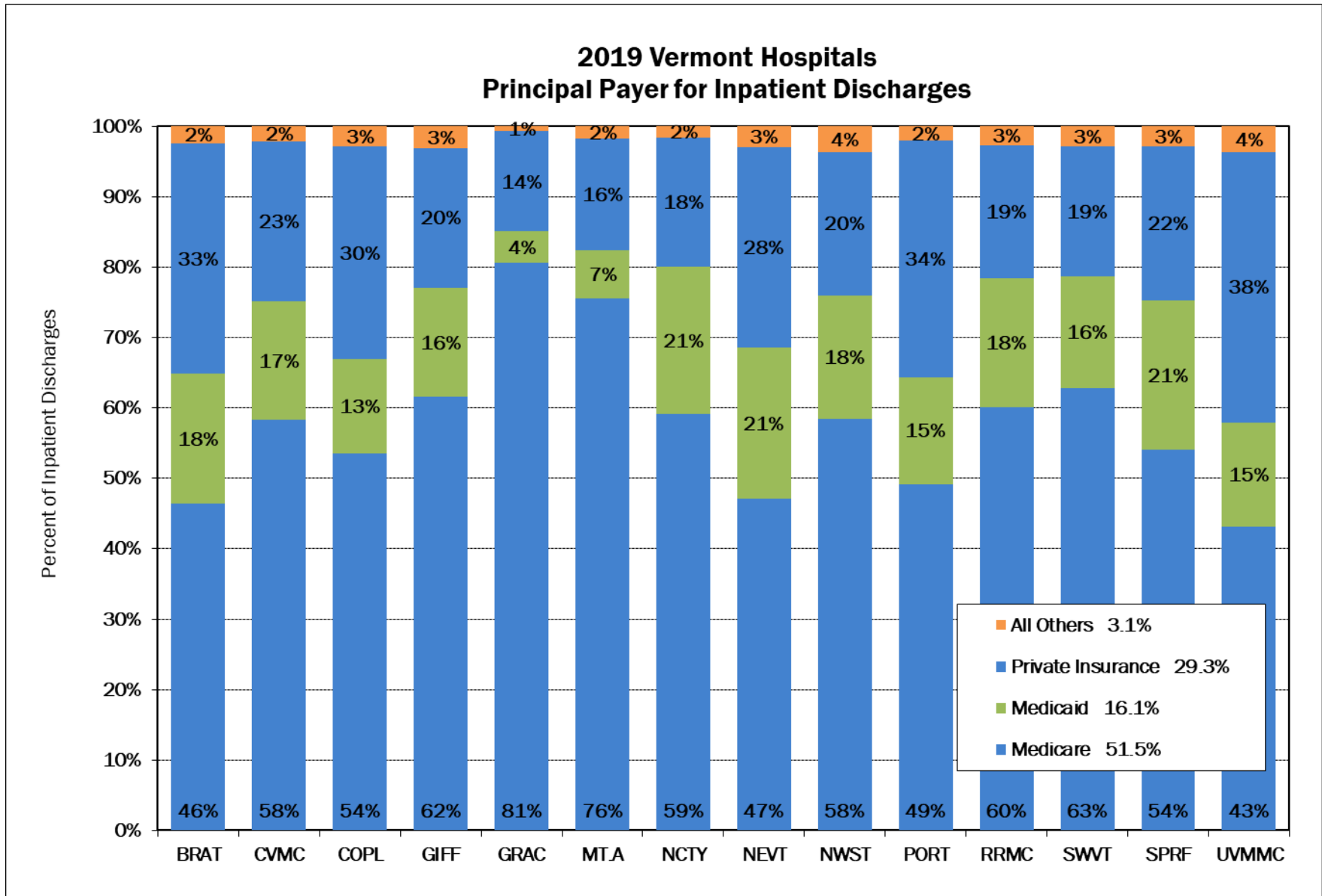
- In 2019, the number of out of state encounters and visits to Vermont hospitals varied by patient type, with ED visits less frequent than outpatient discharges and inpatient discharges. Southwestern Vermont Medical Center, Mt. Ascutney Hospital and Health Center, and Brattleboro Memorial Hospital reported inpatient migration at near 20% or greater, (29.1.4%, 27.7%, and 19.8% respectfully). ED visits from out of state resident at Southwestern Vermont Medical Center were reported at 27.3% followed by Brattleboro Memorial Hospital with 22.0% and Mt. Ascutney Hospital and Health Center with 19.1%. Outpatient discharges from out of state residents at Mt. Ascutney Hospital and Health Center were 36.9%, followed by Southwestern Vermont Medical Center at 27.3% and Springfield Hospital with 17.9%.



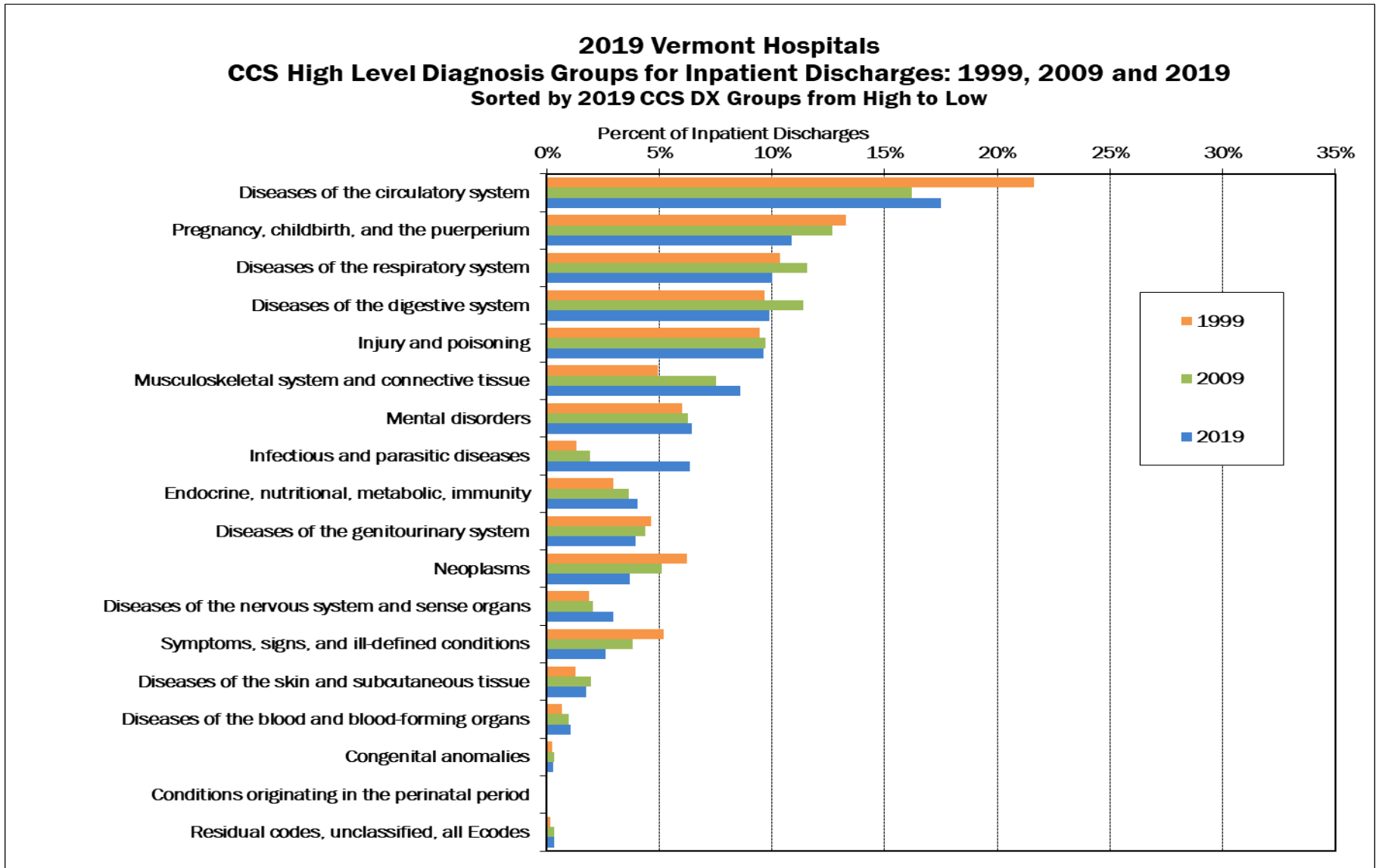
Highlights of Inpatient Discharges from Vermont Hospitals

- **In 2019, there were 48,195 inpatient discharges from Vermont hospitals**, including maternal records but excluding newborns. Of these, 87.1% were Vermont residents, and 12.9% were residents of New Hampshire, Massachusetts, New York or elsewhere.
- **The number of inpatient discharges from Vermont hospitals has decreased** 0.2% from 1999, and increased 1.3% from 2009, including both Vermont residents and non-residents. The average length of stay for these discharges changed very little overall, from 5.0 days per discharge in 1999 to 4.5 in 2009, and to 5.1 in 2019.
- **Similar to findings in recent years**, more than half of the total inpatient discharges from Vermont hospitals in 2019 originated in the Emergency Department (63.1%).
- **The University of Vermont Medical Center** continued to have the highest number of inpatient discharges at 20,992 in 2019 (43.6% of all inpatient discharges, compared to 40.5% in 1999 and 43.2% in 2009). Rutland followed with 6,421 discharges (13.3%). Grace Cottage Family Health & Hospital and Mt. Ascutney Hospital and Health Center had the lowest total numbers of inpatient discharges (134 and 1,076 respectively).
- **The University of Vermont Medical Center** continued to have the highest total number of patient days at 130,812 in 2019 (53.1% of 246,187 patient days statewide), followed by Rutland Regional Medical Center with 31,579 (12.8%). Grace Cottage Family Health & Hospital had the lowest total number of patient days (474).
- **In 2019, average length of stay in Vermont hospitals varied** from 2.5 days per discharge at Copley Hospital to 6.2 days per discharge at The University of Vermont Medical Center: not including Mt. Ascutney Hospital and Health Center.
- **The exception** was Mt. Ascutney Hospital and Health Center, where the average length of stay in 2019 was 9.4. The high average length of stay started in 2014, due in large part to updates made to the computer system at VAHHS-NSO which allows inpatient rehabilitation cases to be submitted. These cases tend to have longer lengths of stay.

- In 2019, Medicare continued to be the leading principal payer for inpatient discharges from Vermont hospitals at 51.5% of total discharges, followed by private insurance at 29.3% and Medicaid at 16.1%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.

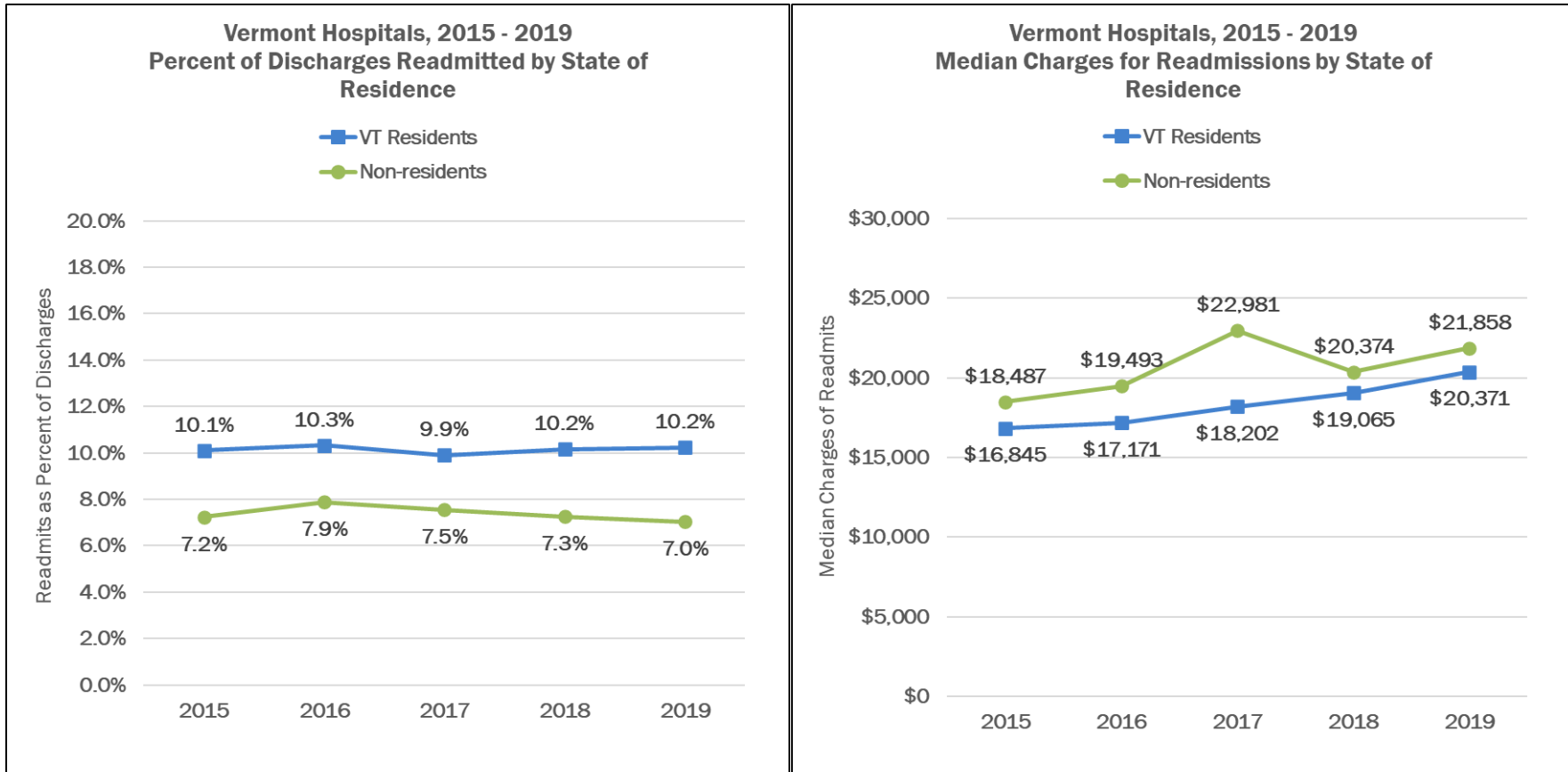


- **The most frequent reasons for hospitalization in 2019** were Diseases of the circulatory system; Pregnancy, childbirth, and the puerperium; Diseases of the respiratory system; Diseases of the digestive system; and Injury and poisoning. This is consistent with recent years. Of note are the continued decreases in percent of hospitalizations with diagnoses for Pregnancy, childbirth and the puerperium, and Symptoms, signs, and ill-defined conditions, and the increases in the percent of diagnoses with Musculoskeletal system and connective tissue, and Infectious and parasitic diseases.



- **The percent of inpatients readmitted to the same hospital for any reason within 30 days of discharge** differs by the patient’s state of residence, with Vermont residents readmitted more frequently than out-of-state residents each year from 2015 through 2019. In contrast, out-of-state residents have higher median charges than Vermont residents when readmitted to Vermont hospitals.

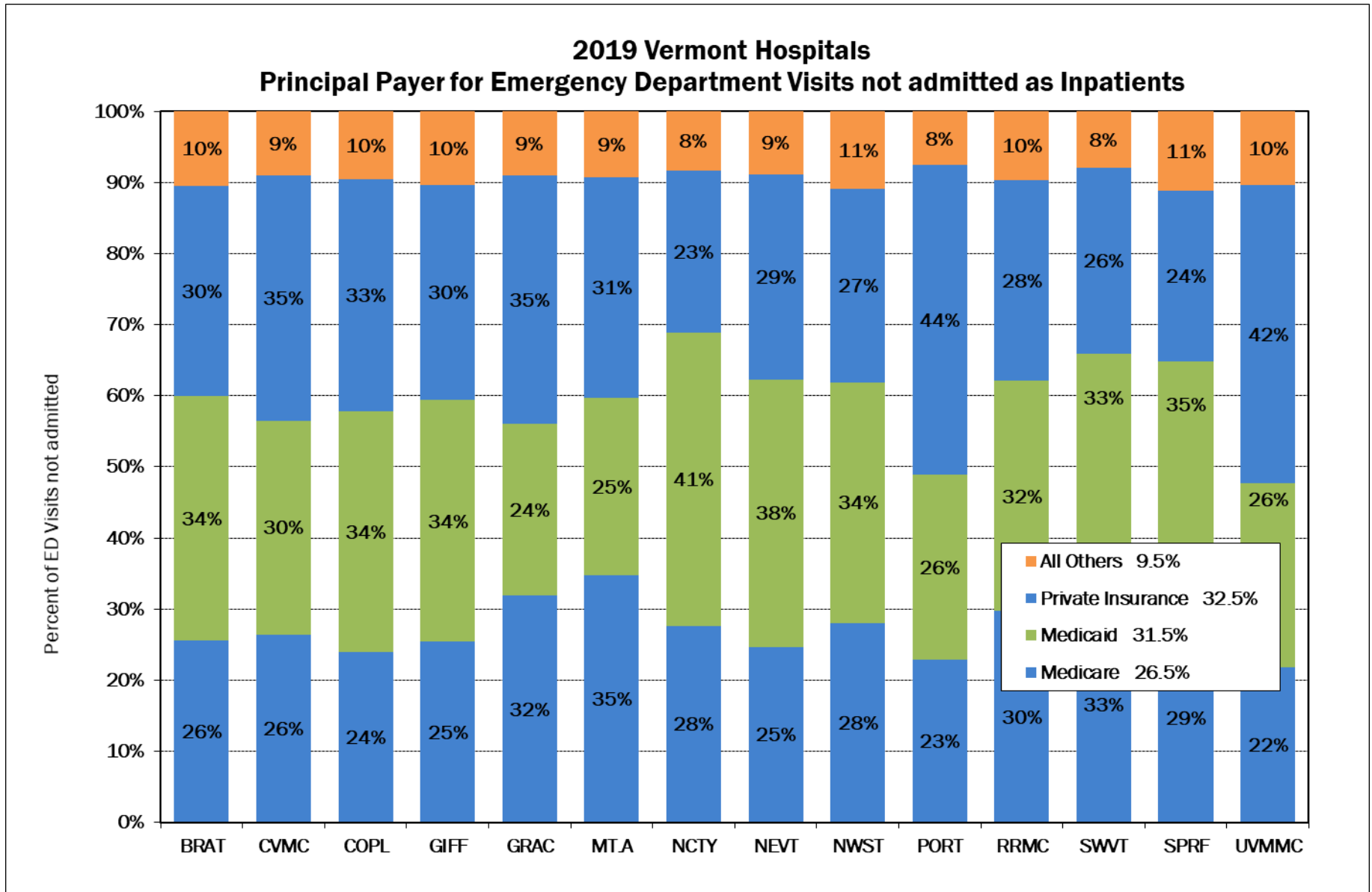
Note: ‘Readmission’ is defined in this report as readmitted to the same hospital for any reason within 30 days of discharge, excluding readmission on the same day as discharge.



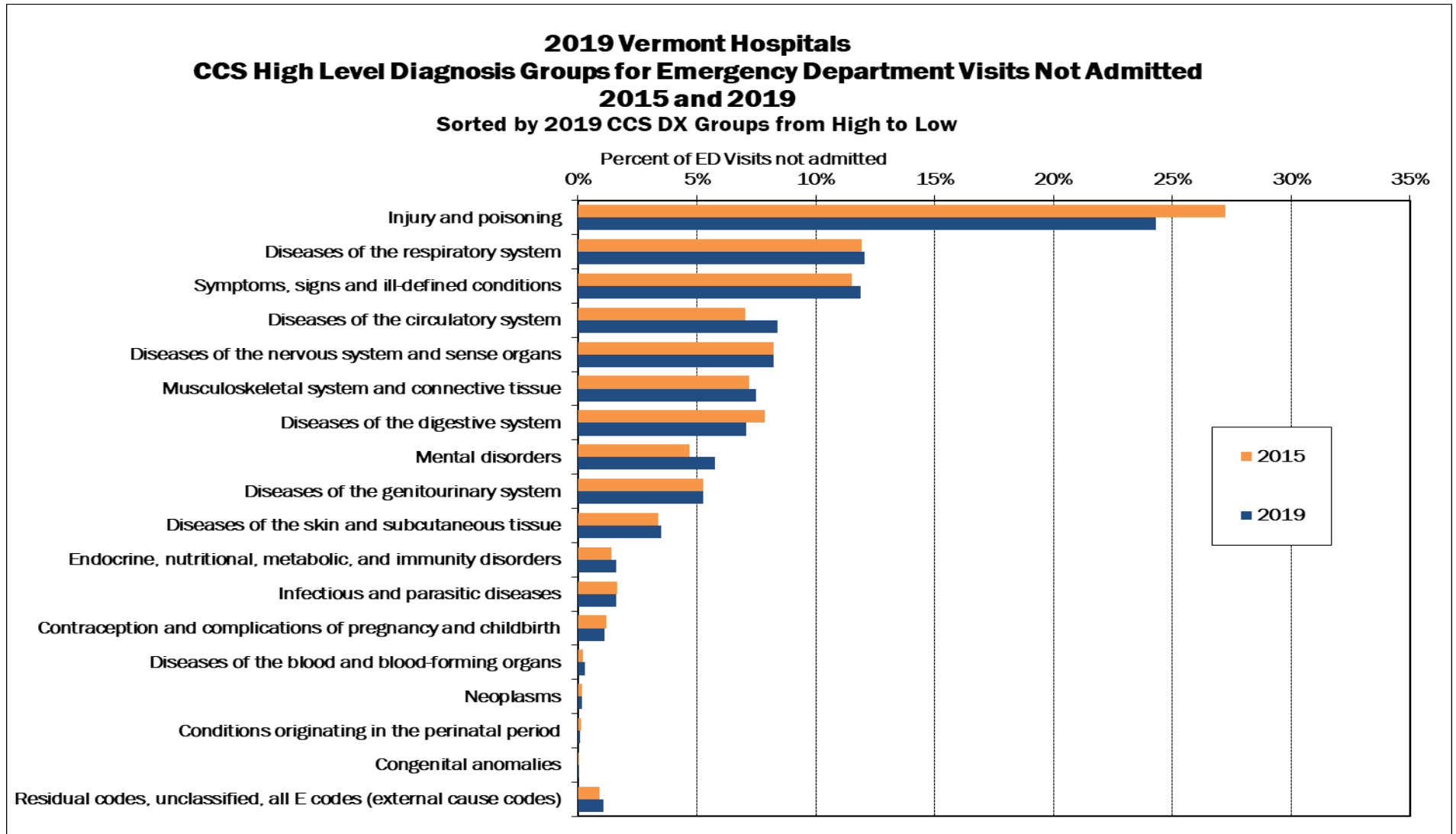
Highlights of Visits to Vermont Hospital Emergency Departments

- **In 2019, there were a total of 266,887 visits to Vermont hospital Emergency Departments**, including both Vermont residents and non-residents, a small increase from 2018. Similar to recent years, 88.6% (236,464) of these ED visits were not admitted, while the remaining 11.4% (30,423) of ED visits were admitted and categorized as inpatient discharges.
- **Overall, the number of ED visits decreased** from 2015 to 2019 by 0.4% (-1.6% for ED visits not admitted, and an increase of 10.0% for those admitted as inpatients).
- **In 2019, as in previous years, the percent of ED visits that were admitted as inpatients increased with increasing age.** Just 2.2% of ED visits by children under age 15 were admitted, as were 4.3% of visits by individuals aged 15-44, 12.2% of those aged 45-64, 18.6% of those aged 65-69, 22.2% of those aged 70-74, 24.5% of those aged 75-79, and 31.1% of those aged 80 and older.
- **The University of Vermont Medical Center** continued to have the highest percent of visits to the ED in 2019, leading all Vermont hospitals with 21.9% of all ED visits. Of all ED visits to The University of Vermont Medical Center, 18.8% were admitted as inpatients, about a 1.0% increase from the previous year's percentage.
- **The percent of ED visits that were admitted in 2019 ranged** from highs of 18.8% at The University of Vermont Medical Center, 16.5% at Rutland Regional Medical Center, and 12.9% at Central Vermont Medical Center, to a low of 3.8% at Grace Cottage Hospital and 3.9% Porter Medical Center.
- **Of all ED visits, those with a primary diagnosis of neoplasms were the most likely to be admitted (61.7%),** followed by those with infectious and parasitic diseases (42.0%), those with diseases of the blood and blood-forming organs (39.4%), and those with congenital anomalies (29.9%). Least likely to be admitted were ED visits for Conditions originating in the perinatal period (0.8%) and for Symptoms, signs and ill-defined conditions (2.2%).

- In 2019, Private Insurance was the leading principal payer for ED visits not admitted at 32.5% of these visits, followed by Medicaid at 31.5% and Medicare at 26.5%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.



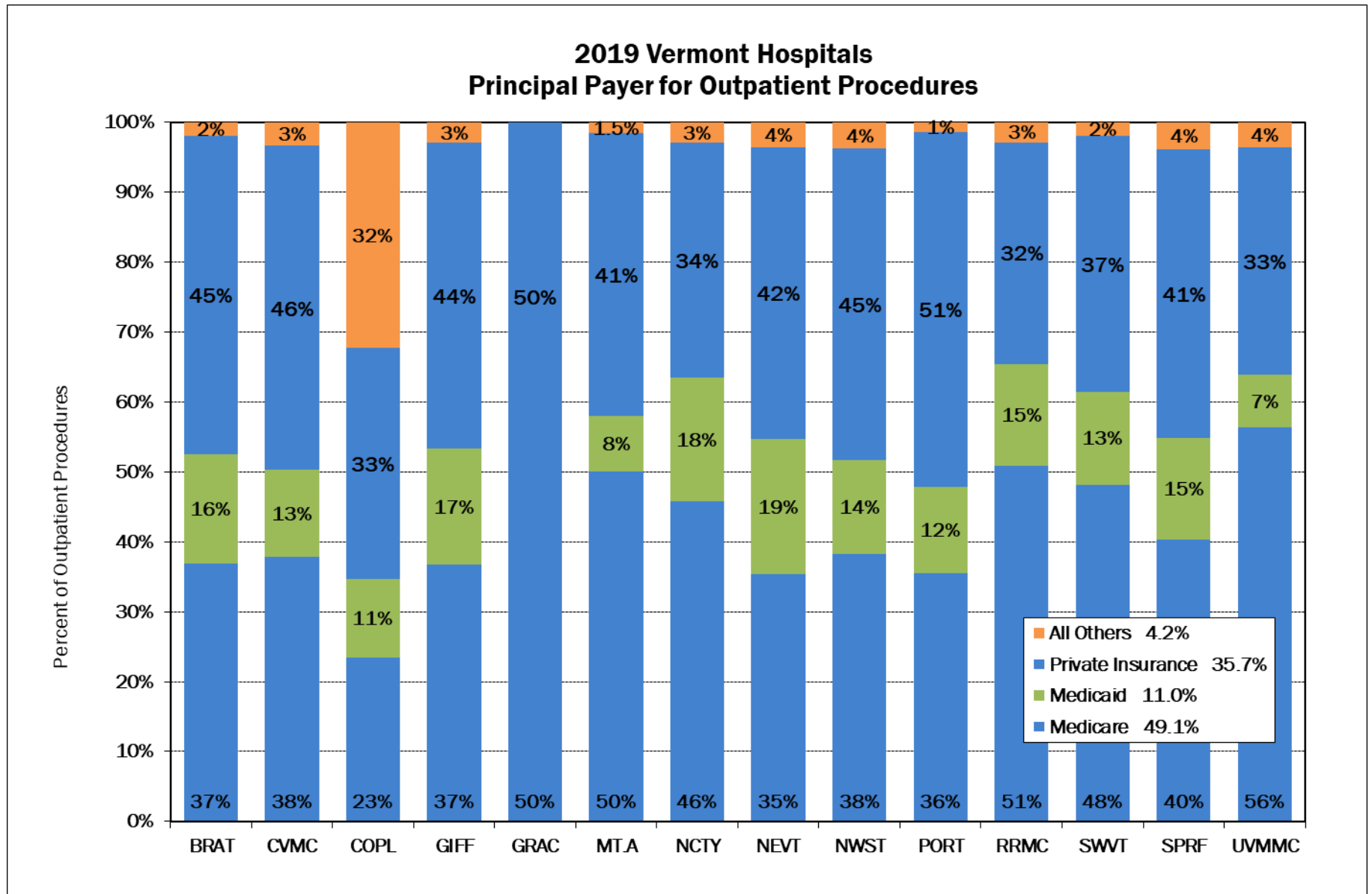
The most frequent reasons for ED visits not admitted in 2019 were Injury and poisoning; Diseases of the respiratory system; Symptoms, signs and ill-defined conditions; Diseases of the circulatory system; Diseases of the nervous system and sense organs; and Musculoskeletal system and connective tissue. This is consistent with recent years. Of note is the substantial decrease over 5 years in the percent of ED visits not admitted for Injury and poisoning, and the increases over 5 years in Diseases of the circulatory system, Mental disorders, Symptoms, signs and ill-defined conditions, and Musculoskeletal system and connective tissue.



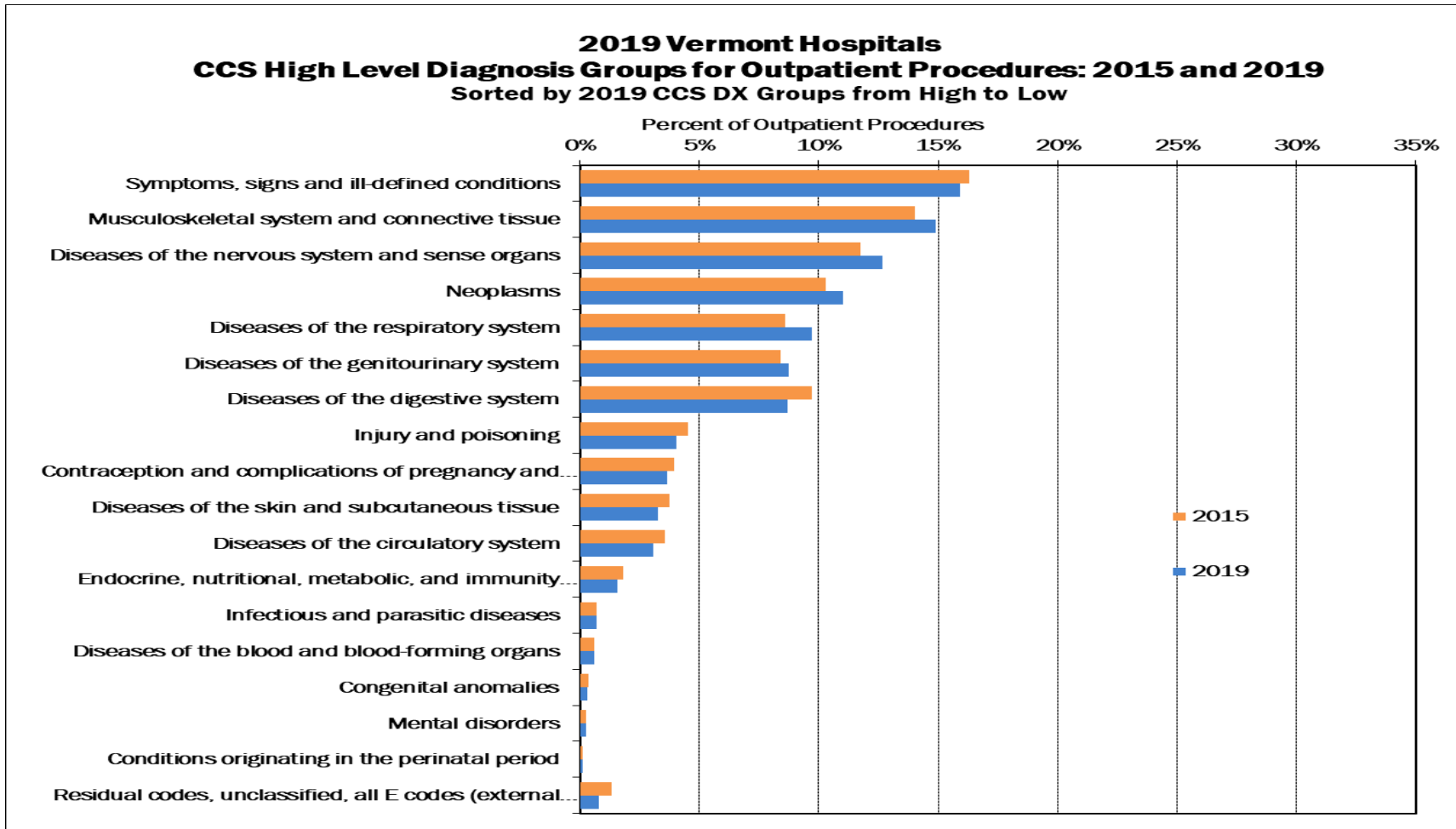
Highlights of Outpatient Procedures and Services in Vermont Hospitals

- **In 2019, there were 136,166 visits to Vermont hospitals for outpatient procedures** with a high-level procedure code in CCS procedure groups 1 through 15, representing both Vermont residents and non-residents. These outpatient visits did not originate in the Emergency Department. Grace Cottage Hospital had two visits for outpatient procedures in this range of CCS procedure groups.
- **The number of outpatient procedures in Vermont hospitals increased** by 4.7% from 2018. This follows a decrease of 0.7% from 2017 to 2018 and a decrease of 1.3% from 2016 to 2017. There has been a 6.0% increase in outpatient procedures in Vermont hospitals over the past five years (2015-2019).
- **Overall, non-residents accounted for 10.6% of all visits to Vermont hospitals for outpatient procedures** in 2019. As in previous years, there was wide variation in the percent of non-residents at Vermont hospitals, with non-residents comprising 36.9% of Mt. Ascutney Hospital and Health Center's outpatient visits and 27.3% of Southwestern Vermont Medical Center's outpatient visits, compared to 1% or less of outpatient visits to Central Vermont Medical Center, Copley Hospital, and North Country Hospital.
- **Medicare was the primary payer** for 49.1% of all visits to Vermont hospitals for outpatient procedures in 2019. University of Vermont Medical Center reported 56.4 % of outpatient visits with Medicare as the primary payer, while Copley Hospital reported the lowest percent with 23.4%. Consistent with recent years, there was substantial variation by CCS diagnosis group, with Diseases of the skin and subcutaneous tissue (81.0%), Infectious and parasitic diseases (74.9%), Diseases of the nervous system and sense organs (65.6%) and Neoplasms (65.3%) having the highest percent of visits with Medicare as the primary payer.
- **Northeastern Vermont Regional Hospital, North Country Hospital and Gifford Medical Center reported the highest percent of outpatient procedures with Medicaid as primary payer** (19.3%, 17.8%, and 16.5% respectively), while the University of Vermont Medical Center, Mt. Ascutney Hospital and Health Center, and Copley Hospital reported the lowest percent with Medicaid as primary payer (7.5%, 7.8%, and 11.4% respectively).
- **The services most frequently provided in expanded outpatient visits** in 2019 were charged under the primary cost center for Laboratory-Clinical services in all 14 Vermont hospitals, as in previous years. The frequency of these services far exceeded the next most frequent services, which were charged under the primary cost centers for Radiology-Diagnostic, Drugs Charged to Patients, Mammography, Chemistry, Ultrasound, and Physical Therapy.
- **The average charge for observation beds in Vermont hospitals** was the highest average charge in recent years, and 24.4% higher in 2019 than in 2015. The number of these beds continues to decrease over time as the average charge has increased. The University of Vermont Medical Center had 31.5% of all observation beds in 2019, followed by Rutland Regional Medical Center (10.4%).

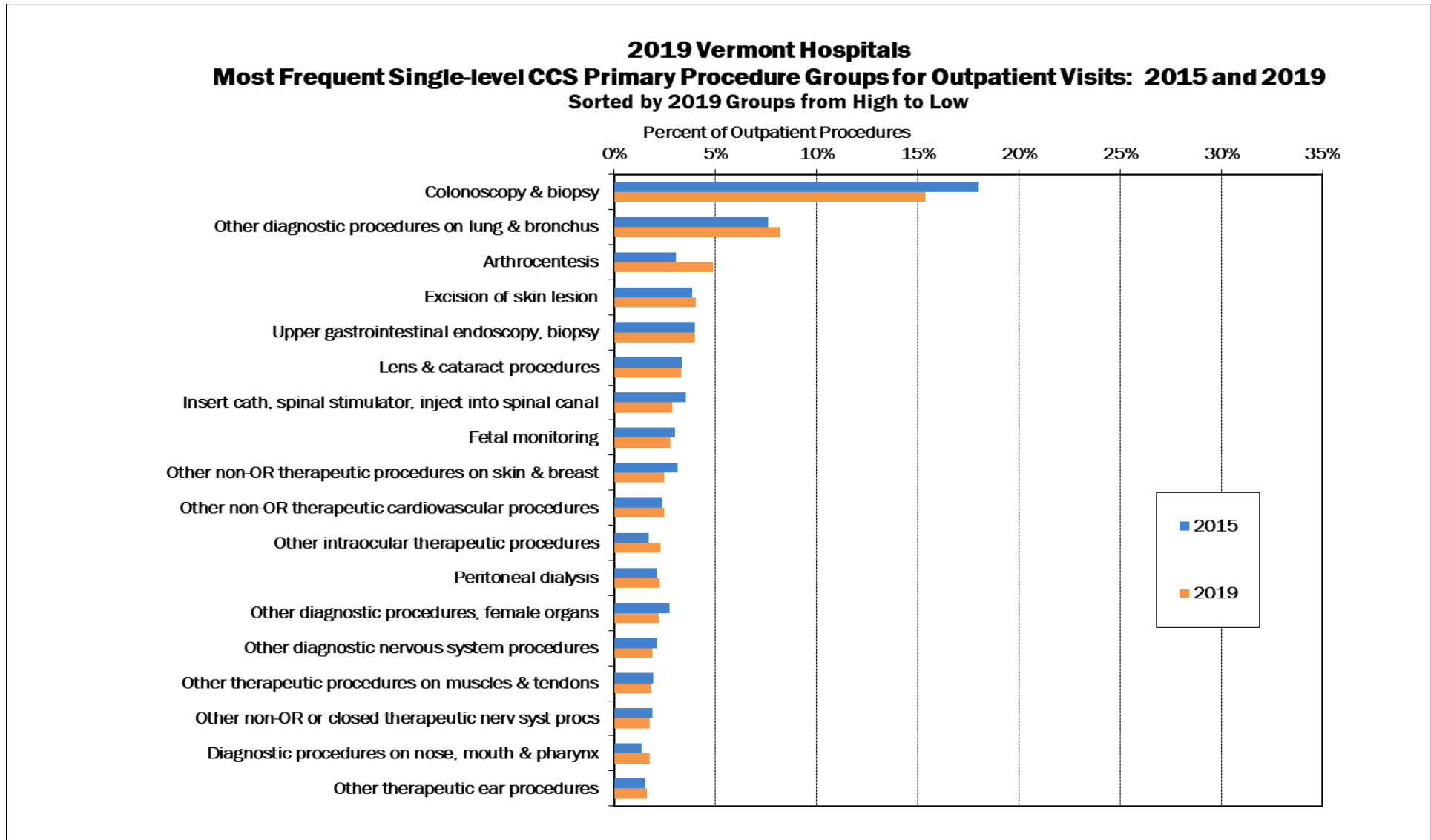
- In 2019, Medicare was the leading principal payer for 49.1% of outpatient procedures in range, followed by Private Insurance at 35.7% and Medicaid at 11.0%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix. (Grace Cottage Family Health & Hospital had only two outpatient procedures.)



- **The most frequent reasons for outpatient procedures in range** in 2019 were Symptoms, signs and ill-defined conditions; Musculoskeletal system and connective tissue; Diseases of the nervous system and sense organs; Neoplasms; and Diseases of the respiratory system. The most frequent reasons in 2019 are consistent with those in recent years, although their rank order may differ a little. Of note are increases in the percent of outpatients diagnosed with Diseases of the respiratory system, Diseases of the nervous system and sense organs, Neoplasms and Musculoskeletal system and connective tissue; and decreases in the percent of outpatients diagnosed with Diseases of the digestive system and Diseases of the skin and subcutaneous tissue, compared to 2015.

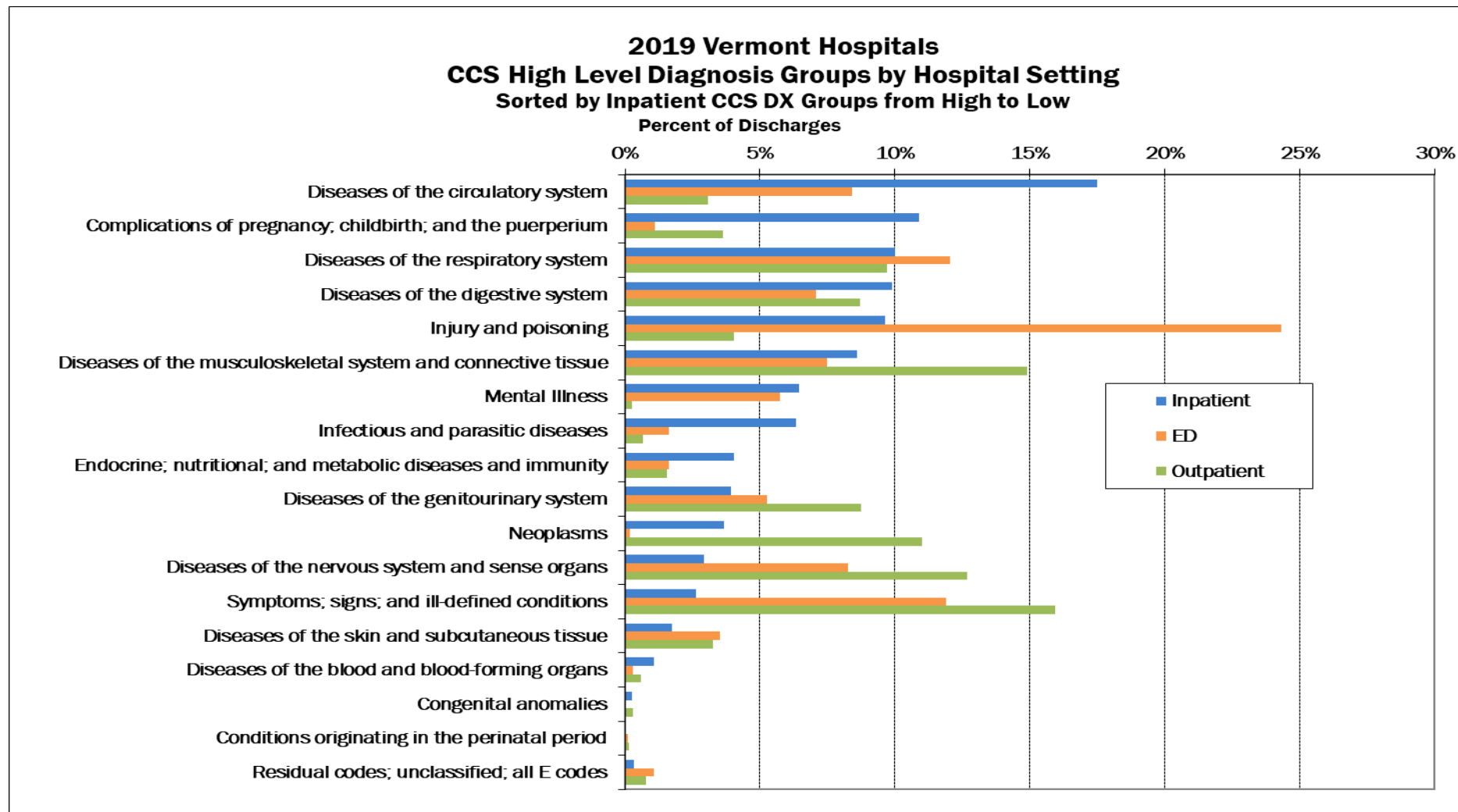


- The leading single-level group of outpatient procedures in high-level CCS procedure groups 1 through 15 in both 2015 and 2019 was Colonoscopy & biopsy. Following this procedure group in 2019 were Other diagnostic procedures on lung & bronchus, and Arthrocentesis. Of note are decreases in the percent of procedures for Other non-OR therapeutic procedures on skin & breast and Other diagnostic procedures, female organs.

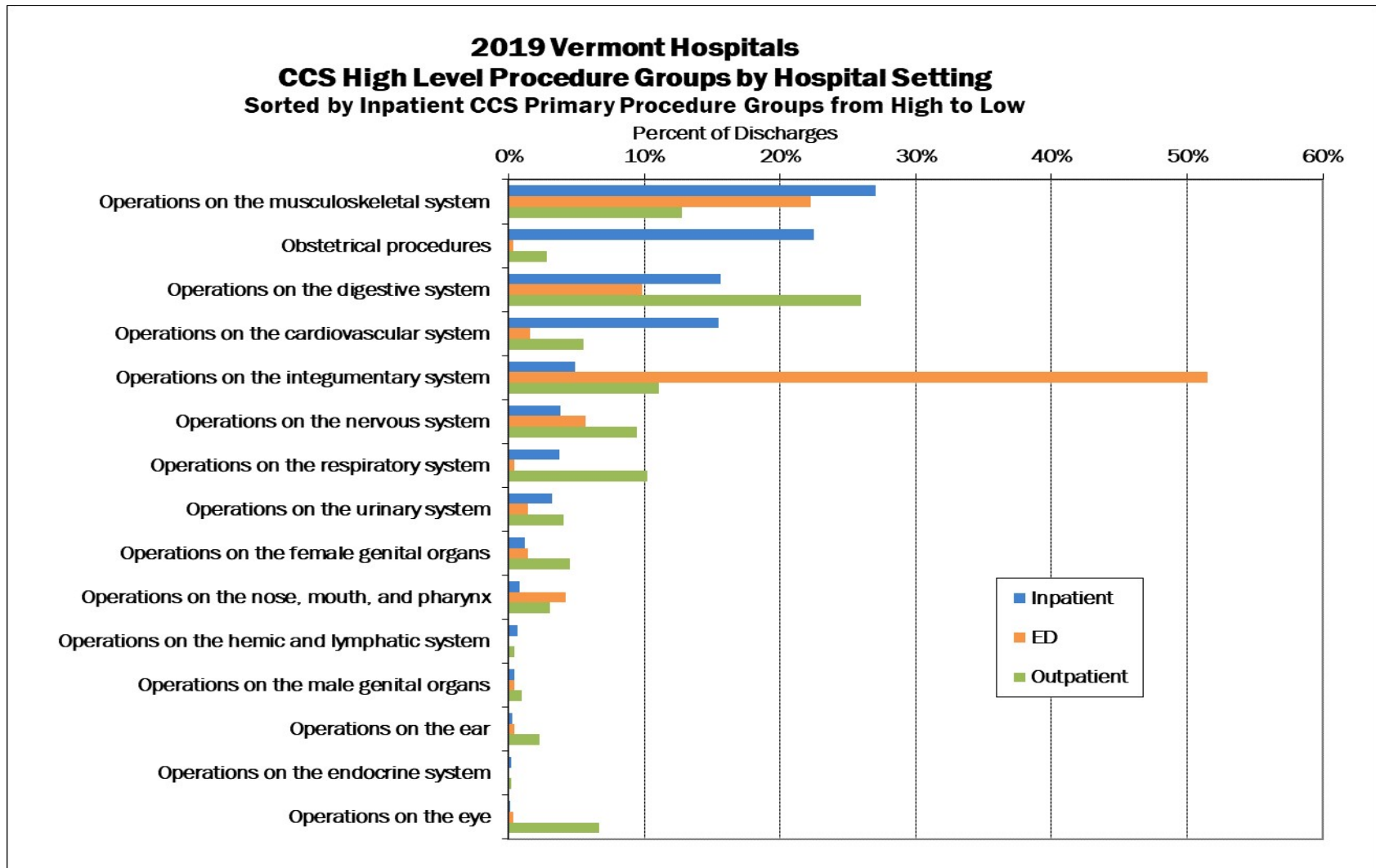


Highlights of Comparisons across Vermont Hospital Settings

- The most frequent CCS high level diagnosis groups differed across Vermont hospital settings in 2019. The most frequent diagnosis group (based on primary diagnosis) for inpatients was Diseases of the circulatory system. The most frequent diagnosis group for ED visits was Injury and poisoning, and for outpatients, Symptoms, signs, and ill-defined conditions. The frequencies of these CCS high level diagnosis groups have been consistent in recent years.



- The most frequent CCS high level procedure groups in range 1 through 15 differed across hospital settings in 2019. The most frequent procedure group for inpatients was Operations on the musculoskeletal system followed by Obstetrical procedures. The most frequent procedure group for ED visits was Operations on the integumentary system, followed by Operations on the musculoskeletal system. The most frequent outpatient group was Operations on the digestive system followed by Operations on the musculoskeletal system. The frequencies of these CCS high level procedure groups across settings have been consistent in recent years.



Inpatient Discharges

Table I-1
2019 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	640	34.4%	1,222	65.6%	1,862	3.9%
Central Vermont Medical Center	570	15.0%	3,230	85.0%	3,800	7.9%
Copley Hospital	876	51.9%	811	48.1%	1,687	3.5%
Gifford Medical Center	527	39.6%	805	60.4%	1,332	2.8%
Grace Cottage Family Health & Hospital	19	14.2%	115	85.8%	134	0.3%
Mt. Ascutney Hospital and Health Center	768	71.4%	308	28.6%	1,076	2.2%
North Country Hospital	399	30.7%	899	69.3%	1,298	2.7%
Northeastern Vermont Regional Hospital	455	35.2%	839	64.8%	1,294	2.7%
Northwestern Medical Center	616	26.9%	1,672	73.1%	2,288	4.7%
Porter Medical Center	494	38.8%	780	61.2%	1,274	2.6%
Rutland Regional Medical Center	1,409	21.9%	5,012	78.1%	6,421	13.3%
Southwestern Vermont Medical Center	676	19.8%	2,743	80.2%	3,419	7.1%
Springfield Hospital	335	25.4%	983	74.6%	1,318	2.7%
University of Vermont Medical Center	9,988	47.6%	11,004	52.4%	20,992	43.6%
Total	17,772	36.9%	30,423	63.1%	48,195	100.0%

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

Table I-2
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019

<u>Vermont Hospital</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Brattleboro Memorial Hospital	2,361	1,770	1,862	10,148	6,885	6,126	4.3	3.9	3.3
Central Vermont Medical Center	3,430	3,135	3,800	15,922	13,810	19,972	4.6	4.4	5.3
Copley Hospital	1,433	1,101	1,687	5,372	3,479	4,194	3.7	3.2	2.5
Gifford Medical Center	986	1,165	1,332	3,535	3,475	4,497	3.6	3.0	3.4
Grace Cottage Family Health & Hospital	181	216	134	550	628	474	3.0	2.9	3.5
Mt. Ascutney Hospital and Health Center	493	415	1,076	2,004	1,702	10,150	4.1	4.1	9.4
North Country Hospital	1,683	1,403	1,298	5,304	4,722	3,913	3.2	3.4	3.0
Northeastern Vermont Regional Hospital	1,473	1,514	1,294	5,149	4,686	4,724	3.5	3.1	3.7
Northwestern Medical Center	2,030	1,846	2,288	7,595	5,835	7,877	3.7	3.2	3.4
Porter Medical Center	1,488	1,532	1,274	6,166	4,893	3,812	4.1	3.2	3.0
Rutland Regional Medical Center	6,338	6,702	6,421	30,675	32,997	31,579	4.8	4.9	4.9
Southwestern Vermont Medical Center	4,255	4,079	3,419	16,680	14,727	11,495	3.9	3.6	3.4
Springfield Hospital	2,577	2,131	1,318	11,502	9,616	6,562	4.5	4.5	5.0
University of Vermont Medical Center	19,561	20,561	20,992	119,214	107,070	130,812	6.1	5.2	6.2
Total	48,289	47,570	48,195	239,816	214,525	246,187	5.0	4.5	5.1

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
All Vermont Hospitals									
Infectious & parasitic diseases	640	930	3,058	4,204	6,776	19,792	6.6	7.3	6.5
Neoplasms	3,006	2,432	1,776	17,437	12,763	11,523	5.8	5.2	6.5
Endocrine, nutritional, metabolic, immunity	1,435	1,759	1,951	7,433	8,567	9,942	5.2	4.9	5.1
Diseases of the blood & blood-forming organs	334	462	512	1,503	2,028	2,338	4.5	4.4	4.6
Mental disorders	2,898	2,989	3,114	22,470	22,908	33,110	7.8	7.7	10.6
Diseases of the nervous system and sense organs	913	986	1,419	4,647	3,997	8,216	5.1	4.1	5.8
Diseases of the circulatory system	10,445	7,714	8,431	46,485	30,297	41,077	4.5	3.9	4.9
Diseases of the respiratory system	5,004	5,496	4,828	27,427	26,151	21,893	5.5	4.8	4.5
Diseases of the digestive system	4,678	5,423	4,773	22,847	23,335	21,546	4.9	4.3	4.5
Diseases of the genitourinary system	2,244	2,073	1,895	8,056	7,323	8,459	3.6	3.5	4.5
Pregnancy, childbirth, and the puerperium	6,410	6,039	5,250	15,186	15,352	14,387	2.4	2.5	2.7
Diseases of the skin and subcutaneous tissue	610	937	845	3,474	4,258	3,687	5.7	4.5	4.4
Musculoskeletal system and connective tissue	2,383	3,573	4,144	10,931	12,918	12,345	4.6	3.6	3.0
Congenital anomalies	125	168	132	614	491	593	4.9	2.9	4.5
Conditions originating in the perinatal period	-	7	7	-	34	18	-	4.9	2.6
Injury & poisoning	4,574	4,598	4,642	27,313	21,289	27,625	6.0	4.6	6.0
Symptoms, signs & ill-defined conditions	2,516	1,820	1,259	19,440	15,560	8,967	7.7	8.5	7.1
Residual codes, unclassified, all Ecodes	74	164	159	349	478	669	4.7	2.9	4.2
Total	48,289	47,570	48,195	239,816	214,525	246,187	5.0	4.5	5.1

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
Brattleboro Memorial Hospital									
Infectious & parasitic diseases	29	29	120	210	151	482	7.2	5.2	4.0
Neoplasms	201	77	27	1,215	372	131	6.0	4.8	4.9
Endocrine, nutritional, metabolic, immunity	84	69	75	467	273	251	5.6	4.0	3.3
Diseases of the blood & blood-forming organs	19	22	25	44	88	73	2.3	4.0	2.9
Mental disorders	31	41	50	117	190	195	3.8	4.6	3.9
Diseases of the nervous system and sense organs	62	25	31	281	135	91	4.5	5.4	2.9
Diseases of the circulatory system	404	218	240	1,551	853	802	3.8	3.9	3.3
Diseases of the respiratory system	226	215	211	1,222	1,039	713	5.4	4.8	3.4
Diseases of the digestive system	288	265	196	1,369	1,251	693	4.8	4.7	3.5
Diseases of the genitourinary system	128	69	102	391	275	371	3.1	4.0	3.6
Pregnancy, childbirth, and the puerperium	329	368	324	793	903	887	2.4	2.5	2.7
Diseases of the skin and subcutaneous tissue	22	46	76	138	208	278	6.3	4.5	3.7
Musculoskeletal system and connective tissue	157	155	213	710	539	546	4.5	3.5	2.6
Congenital anomalies	2	3	-	10	17	-	5.0	5.7	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	299	133	146	1,400	497	548	4.7	3.7	3.8
Symptoms, signs & ill-defined conditions	76	31	23	219	78	59	2.9	2.5	2.6
Residual codes, unclassified, all Ecodes	4	4	3	11	16	6	2.8	4.0	2.0
Total	2,361	1,770	1,862	10,148	6,885	6,126	4.3	3.9	3.3

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Central Vermont Medical Center									
Infectious & parasitic diseases	47	46	644	225	227	3,614	4.8	4.9	5.6
Neoplasms	181	98	57	1,134	548	381	6.3	5.6	6.7
Endocrine, nutritional, metabolic, immunity	117	79	152	447	296	603	3.8	3.7	4.0
Diseases of the blood & blood-forming organs	20	15	38	73	63	260	3.7	4.2	6.8
Mental disorders	514	568	480	3,914	4,142	5,374	7.6	7.3	11.2
Diseases of the nervous system and sense organs	39	43	75	133	163	371	3.4	3.8	4.9
Diseases of the circulatory system	568	330	629	2,058	1,148	2,414	3.6	3.5	3.8
Diseases of the respiratory system	436	492	350	2,249	2,250	1,824	5.2	4.6	5.2
Diseases of the digestive system	349	426	355	1,803	1,855	1,515	5.2	4.4	4.3
Diseases of the genitourinary system	162	122	130	501	430	510	3.1	3.5	3.9
Pregnancy, childbirth, and the puerperium	502	421	269	1,090	981	703	2.2	2.3	2.6
Diseases of the skin and subcutaneous tissue	53	100	76	251	404	341	4.7	4.0	4.5
Musculoskeletal system and connective tissue	134	133	272	619	452	873	4.6	3.4	3.2
Congenital anomalies	3	1	1	13	2	2	4.3	2.0	2.0
Conditions originating in the perinatal period	-	1	-	-	2	-	-	2.0	-
Injury & poisoning	257	201	231	1,221	690	988	4.8	3.4	4.3
Symptoms, signs & ill-defined conditions	45	52	36	182	142	175	4.0	2.7	4.9
Residual codes, unclassified, all Ecodes	3	7	5	9	15	24	3.0	2.1	4.8
Total	3,430	3,135	3,800	15,922	13,810	19,972	4.6	4.4	5.3

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
Copley Hospital									
Infectious & parasitic diseases	20	11	23	121	47	86	6.1	4.3	3.7
Neoplasms	55	26	34	301	100	165	5.5	3.8	4.9
Endocrine, nutritional, metabolic, immunity	39	24	43	178	79	168	4.6	3.3	3.9
Diseases of the blood & blood-forming organs	5	5	4	33	8	8	6.6	1.6	2.0
Mental disorders	19	13	30	89	45	114	4.7	3.5	3.8
Diseases of the nervous system and sense organs	16	21	31	92	78	142	5.8	3.7	4.6
Diseases of the circulatory system	251	76	155	829	293	485	3.3	3.9	3.1
Diseases of the respiratory system	183	157	157	778	607	522	4.3	3.9	3.3
Diseases of the digestive system	179	186	130	742	627	434	4.1	3.4	3.3
Diseases of the genitourinary system	41	38	69	110	119	202	2.7	3.1	2.9
Pregnancy, childbirth, and the puerperium	243	245	186	479	479	339	2.0	2.0	1.8
Diseases of the skin and subcutaneous tissue	26	27	25	107	115	89	4.1	4.3	3.6
Musculoskeletal system and connective tissue	93	162	611	464	439	777	5.0	2.7	1.3
Congenital anomalies	1	-	1	6	-	15	6.0	-	15.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	187	98	159	837	405	587	4.5	4.1	3.7
Symptoms, signs & ill-defined conditions	72	9	23	197	22	50	2.7	2.4	2.2
Residual codes, unclassified, all Ecodes	3	3	6	9	16	11	3.0	5.3	1.8
Total	1,433	1,101	1,687	5,372	3,479	4,194	3.7	3.2	2.5

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Gifford Medical Center									
Infectious & parasitic diseases	11	12	36	67	51	167	6.1	4.3	4.6
Neoplasms	42	27	11	189	89	50	4.5	3.3	4.5
Endocrine, nutritional, metabolic, immunity	32	40	69	140	105	285	4.4	2.6	4.1
Diseases of the blood & blood-forming organs	5	7	20	35	26	49	7.0	3.7	2.5
Mental disorders	13	37	41	53	135	224	4.1	3.6	5.5
Diseases of the nervous system and sense organs	15	20	38	51	53	110	3.4	2.7	2.9
Diseases of the circulatory system	176	181	221	642	452	654	3.6	2.5	3.0
Diseases of the respiratory system	130	195	157	631	658	560	4.9	3.4	3.6
Diseases of the digestive system	108	138	157	460	449	452	4.3	3.3	2.9
Diseases of the genitourinary system	62	92	72	222	247	244	3.6	2.7	3.4
Pregnancy, childbirth, and the puerperium	252	207	214	436	524	545	1.7	2.5	2.5
Diseases of the skin and subcutaneous tissue	17	40	30	79	130	112	4.6	3.3	3.7
Musculoskeletal system and connective tissue	33	82	92	147	283	200	4.5	3.5	2.2
Congenital anomalies	-	1	-	-	3	-	-	3.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	69	49	121	317	170	610	4.6	3.5	5.0
Symptoms, signs & ill-defined conditions	18	29	49	59	68	209	3.3	2.3	4.3
Residual codes, unclassified, all Ecodes	3	8	4	7	32	26	2.3	4.0	6.5
Total	986	1,165	1,332	3,535	3,475	4,497	3.6	3.0	3.4

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Grace Cottage Family Health & Hospital									
Infectious & parasitic diseases	4	2	6	14	4	12	3.5	2.0	2.0
Neoplasms	12	5	4	51	13	5	4.3	2.6	1.3
Endocrine, nutritional, metabolic, immunity	11	12	14	31	35	49	2.8	2.9	3.5
Diseases of the blood & blood-forming organs	2	-	1	9	-	3	4.5	-	3.0
Mental disorders	7	4	1	22	14	1	3.1	3.5	1.0
Diseases of the nervous system and sense organs	1	13	2	5	35	6	5.0	2.7	3.0
Diseases of the circulatory system	39	31	15	122	83	47	3.1	2.7	3.1
Diseases of the respiratory system	41	48	36	118	147	119	2.9	3.1	3.3
Diseases of the digestive system	8	19	10	27	45	25	3.4	2.4	2.5
Diseases of the genitourinary system	4	15	13	10	47	43	2.5	3.1	3.3
Pregnancy, childbirth, and the puerperium	19	-	-	33	-	-	1.7	-	-
Diseases of the skin and subcutaneous tissue	11	5	4	32	17	13	2.9	3.4	3.3
Musculoskeletal system and connective tissue	10	13	4	35	47	11	3.5	3.6	2.8
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	8	30	8	28	96	25	3.5	3.2	3.1
Symptoms, signs & ill-defined conditions	4	14	14	13	34	111	3.3	2.4	7.9
Residual codes, unclassified, all Ecodes	-	5	2	-	11	4	-	2.2	2.0
Total	181	216	134	550	628	474	3.0	2.9	3.5

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
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>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Mt. Ascutney Hospital and Health Center									
Infectious & parasitic diseases	4	15	20	12	55	105	3.0	3.7	5.3
Neoplasms	22	7	17	102	35	144	4.6	5.0	8.5
Endocrine, nutritional, metabolic, immunity	5	14	23	25	57	96	5.0	4.1	4.2
Diseases of the blood & blood-forming organs	3	4	7	11	10	25	3.7	2.5	3.6
Mental disorders	3	8	9	7	159	221	2.3	19.9	24.6
Diseases of the nervous system and sense organs	7	12	22	24	35	214	3.4	2.9	9.7
Diseases of the circulatory system	125	72	191	427	293	1,877	3.4	4.1	9.8
Diseases of the respiratory system	93	84	101	440	262	479	4.7	3.1	4.7
Diseases of the digestive system	68	64	92	324	257	344	4.8	4.0	3.7
Diseases of the genitourinary system	35	27	56	106	95	273	3.0	3.5	4.9
Pregnancy, childbirth, and the puerperium	-	-	-	-	-	-	-	-	-
Diseases of the skin and subcutaneous tissue	12	22	21	82	145	83	6.8	6.6	4.0
Musculoskeletal system and connective tissue	41	36	32	164	131	390	4.0	3.6	12.2
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	61	24	193	237	87	2,311	3.9	3.6	12.0
Symptoms, signs & ill-defined conditions	14	24	287	43	75	3,577	3.1	3.1	12.5
Residual codes, unclassified, all Ecodes	-	2	5	-	6	11	-	3.0	2.2
Total	493	415	1,076	2,004	1,702	10,150	4.1	4.1	9.4

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
North Country Hospital									
Infectious & parasitic diseases	29	13	19	99	58	58	3.4	4.5	3.1
Neoplasms	62	68	35	243	302	125	3.9	4.4	3.6
Endocrine, nutritional, metabolic, immunity	58	88	61	185	312	188	3.2	3.5	3.1
Diseases of the blood & blood-forming organs	10	18	15	35	50	47	3.5	2.8	3.1
Mental disorders	61	20	13	196	72	50	3.2	3.6	3.8
Diseases of the nervous system and sense organs	36	15	12	108	41	27	3.0	2.7	2.3
Diseases of the circulatory system	392	237	199	1,130	678	482	2.9	2.9	2.4
Diseases of the respiratory system	282	221	213	1,015	888	763	3.6	4.0	3.6
Diseases of the digestive system	200	183	206	743	715	704	3.7	3.9	3.4
Diseases of the genitourinary system	94	58	94	265	157	295	2.8	2.7	3.1
Pregnancy, childbirth, and the puerperium	202	241	212	449	590	472	2.2	2.4	2.2
Diseases of the skin and subcutaneous tissue	29	36	31	103	158	102	3.6	4.4	3.3
Musculoskeletal system and connective tissue	61	64	71	229	224	195	3.8	3.5	2.7
Congenital anomalies	1	1	1	9	1	2	9.0	1.0	2.0
Conditions originating in the perinatal period	-	-	1	-	-	4	-	-	4.0
Injury & poisoning	141	118	69	436	418	269	3.1	3.5	3.9
Symptoms, signs & ill-defined conditions	24	15	21	55	40	52	2.3	2.7	2.5
Residual codes, unclassified, all Ecodes	1	7	25	4	18	78	4.0	2.6	3.1
Total	1,683	1,403	1,298	5,304	4,722	3,913	3.2	3.4	3.0

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
Northeastern Vermont Regional Hospital									
Infectious & parasitic diseases	42	40	56	146	140	313	3.5	3.5	5.6
Neoplasms	86	55	22	385	289	68	4.5	5.3	3.1
Endocrine, nutritional, metabolic, immunity	40	58	33	167	159	164	4.2	2.7	5.0
Diseases of the blood & blood-forming organs	6	20	12	16	64	38	2.7	3.2	3.2
Mental disorders	22	22	48	86	77	220	3.9	3.5	4.6
Diseases of the nervous system and sense organs	15	30	36	54	82	118	3.6	2.7	3.3
Diseases of the circulatory system	259	226	112	888	615	459	3.4	2.7	4.1
Diseases of the respiratory system	239	202	203	811	604	955	3.4	3.0	4.7
Diseases of the digestive system	194	241	155	794	817	599	4.1	3.4	3.9
Diseases of the genitourinary system	83	75	74	217	200	251	2.6	2.7	3.4
Pregnancy, childbirth, and the puerperium	233	218	202	518	470	483	2.2	2.2	2.4
Diseases of the skin and subcutaneous tissue	27	39	27	108	151	119	4.0	3.9	4.4
Musculoskeletal system and connective tissue	59	90	155	314	346	331	5.3	3.8	2.1
Congenital anomalies	1	2	-	3	6	-	3.0	3.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	139	145	116	564	542	444	4.1	3.7	3.8
Symptoms, signs & ill-defined conditions	26	49	33	73	121	128	2.8	2.5	3.9
Residual codes, unclassified, all Ecodes	2	2	10	5	3	34	2.5	1.5	3.4
Total	1,473	1,514	1,294	5,149	4,686	4,724	3.5	3.1	3.7

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
Northwestern Medical Center									
Infectious & parasitic diseases	19	20	57	69	72	270	3.6	3.6	4.7
Neoplasms	81	60	47	399	233	205	4.9	3.9	4.4
Endocrine, nutritional, metabolic, immunity	45	46	85	193	120	429	4.3	2.6	5.0
Diseases of the blood & blood-forming organs	6	11	17	28	38	34	4.7	3.5	2.0
Mental disorders	18	12	57	66	73	415	3.7	6.1	7.3
Diseases of the nervous system and sense organs	17	11	26	74	41	64	4.4	3.7	2.5
Diseases of the circulatory system	460	161	365	1,803	498	1,098	3.9	3.1	3.0
Diseases of the respiratory system	265	302	354	1,356	1,167	1,361	5.1	3.9	3.8
Diseases of the digestive system	231	251	305	1,044	916	1,012	4.5	3.6	3.3
Diseases of the genitourinary system	120	73	135	385	203	462	3.2	2.8	3.4
Pregnancy, childbirth, and the puerperium	486	404	340	943	862	737	1.9	2.1	2.2
Diseases of the skin and subcutaneous tissue	30	36	68	132	159	270	4.4	4.4	4.0
Musculoskeletal system and connective tissue	93	323	201	378	878	501	4.1	2.7	2.5
Congenital anomalies	2	3	-	6	5	-	3.0	1.7	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	130	124	185	627	522	806	4.8	4.2	4.4
Symptoms, signs & ill-defined conditions	24	6	37	72	33	184	3.0	5.5	5.0
Residual codes, unclassified, all Ecodes	3	3	9	20	15	29	6.7	5.0	3.2
Total	2,030	1,846	2,288	7,595	5,835	7,877	3.7	3.2	3.4

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
Porter Medical Center									
Infectious & parasitic diseases	10	17	114	71	65	513	7.1	3.8	4.5
Neoplasms	83	47	11	298	158	31	3.6	3.4	2.8
Endocrine, nutritional, metabolic, immunity	31	57	25	151	195	71	4.9	3.4	2.8
Diseases of the blood & blood-forming organs	6	16	15	28	66	41	4.7	4.1	2.7
Mental disorders	11	28	26	37	133	130	3.4	4.8	5.0
Diseases of the nervous system and sense organs	17	22	26	75	74	155	4.4	3.4	6.0
Diseases of the circulatory system	278	165	134	1,307	556	410	4.7	3.4	3.1
Diseases of the respiratory system	227	253	138	1,163	1,013	480	5.1	4.0	3.5
Diseases of the digestive system	164	220	140	867	683	443	5.3	3.1	3.2
Diseases of the genitourinary system	78	68	32	255	215	129	3.3	3.2	4.0
Pregnancy, childbirth, and the puerperium	371	314	321	758	653	691	2.0	2.1	2.2
Diseases of the skin and subcutaneous tissue	25	40	38	131	192	123	5.2	4.8	3.2
Musculoskeletal system and connective tissue	50	146	147	307	488	290	6.1	3.3	2.0
Congenital anomalies	-	2	-	-	2	-	-	1.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	115	104	68	644	314	196	5.6	3.0	2.9
Symptoms, signs & ill-defined conditions	20	24	38	70	69	108	3.5	2.9	2.8
Residual codes, unclassified, all Ecodes	2	9	1	4	17	1	2.0	1.9	1.0
Total	1,488	1,532	1,274	6,166	4,893	3,812	4.1	3.2	3.0

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Rutland Regional Medical Center									
Infectious & parasitic diseases	77	173	479	515	1,255	3,292	6.7	7.3	6.9
Neoplasms	350	259	201	2,001	1,538	1,214	5.7	5.9	6.0
Endocrine, nutritional, metabolic, immunity	225	227	243	1,210	1,093	1,165	5.4	4.8	4.8
Diseases of the blood & blood-forming organs	52	64	91	241	264	300	4.6	4.1	3.3
Mental disorders	692	812	896	3,460	5,548	8,655	5.0	6.8	9.7
Diseases of the nervous system and sense organs	117	122	115	396	472	431	3.4	3.9	3.7
Diseases of the circulatory system	1,094	940	878	4,520	3,670	3,117	4.1	3.9	3.6
Diseases of the respiratory system	721	885	721	4,016	4,793	3,256	5.6	5.4	4.5
Diseases of the digestive system	641	693	671	3,167	3,339	2,999	4.9	4.8	4.5
Diseases of the genitourinary system	323	359	349	947	1,292	1,443	2.9	3.6	4.1
Pregnancy, childbirth, and the puerperium	609	500	342	1,226	1,202	866	2.0	2.4	2.5
Diseases of the skin and subcutaneous tissue	74	143	119	454	664	554	6.1	4.6	4.7
Musculoskeletal system and connective tissue	420	516	696	1,749	1,599	1,601	4.2	3.1	2.3
Congenital anomalies	13	2	1	43	8	1	3.3	4.0	1.0
Conditions originating in the perinatal period	-	-	3	-	-	7	-	-	2.3
Injury & poisoning	502	614	500	2,823	2,707	2,327	5.6	4.4	4.7
Symptoms, signs & ill-defined conditions	413	378	112	3,852	3,486	329	9.3	9.2	2.9
Residual codes, unclassified, all Ecodes	15	15	4	55	67	22	3.7	4.5	5.5
Total	6,338	6,702	6,421	30,675	32,997	31,579	4.8	4.9	4.9

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
Southwestern Vermont Medical Center									
Infectious & parasitic diseases	50	158	363	266	726	1,480	5.3	4.6	4.1
Neoplasms	197	131	48	1,106	570	174	5.6	4.4	3.6
Endocrine, nutritional, metabolic, immunity	182	163	148	897	568	478	4.9	3.5	3.2
Diseases of the blood & blood-forming organs	31	58	24	135	188	68	4.4	3.2	2.8
Mental disorders	64	53	72	251	248	284	3.9	4.7	3.9
Diseases of the nervous system and sense organs	74	88	71	253	250	219	3.4	2.8	3.1
Diseases of the circulatory system	970	610	511	3,108	1,826	1,754	3.2	3.0	3.4
Diseases of the respiratory system	682	641	634	3,140	2,940	2,364	4.6	4.6	3.7
Diseases of the digestive system	464	626	370	2,186	2,507	1,265	4.7	4.0	3.4
Diseases of the genitourinary system	216	169	132	746	481	384	3.5	2.8	2.9
Pregnancy, childbirth, and the puerperium	436	501	418	997	1,240	987	2.3	2.5	2.4
Diseases of the skin and subcutaneous tissue	46	114	77	265	385	270	5.8	3.4	3.5
Musculoskeletal system and connective tissue	210	276	178	799	1,070	471	3.8	3.9	2.6
Congenital anomalies	3	6	1	10	14	7	3.3	2.3	7.0
Conditions originating in the perinatal period	-	2	-	-	9	-	-	4.5	-
Injury & poisoning	472	407	316	1,975	1,514	1,128	4.2	3.7	3.6
Symptoms, signs & ill-defined conditions	155	63	44	532	146	128	3.4	2.3	2.9
Residual codes, unclassified, all Ecodes	3	13	12	14	45	34	4.7	3.5	2.8
Total	4,255	4,079	3,419	16,680	14,727	11,495	3.9	3.6	3.4

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>	<u>1999</u>	<u>2009</u>	<u>2019</u>
Springfield Hospital									
Infectious & parasitic diseases	47	21	60	243	138	296	5.2	6.6	4.9
Neoplasms	67	30	10	392	125	51	5.9	4.2	5.1
Endocrine, nutritional, metabolic, immunity	37	55	37	136	208	172	3.7	3.8	4.6
Diseases of the blood & blood-forming organs	17	12	15	61	46	74	3.6	3.8	4.9
Mental disorders	602	385	358	4,408	3,236	2,698	7.3	8.4	7.5
Diseases of the nervous system and sense organs	28	24	26	78	66	88	2.8	2.8	3.4
Diseases of the circulatory system	526	298	164	1,859	924	618	3.5	3.1	3.8
Diseases of the respiratory system	292	410	221	1,265	1,745	996	4.3	4.3	4.5
Diseases of the digestive system	227	264	122	994	1,149	484	4.4	4.4	4.0
Diseases of the genitourinary system	129	81	53	344	295	194	2.7	3.6	3.7
Pregnancy, childbirth, and the puerperium	245	204	35	495	486	109	2.0	2.4	3.1
Diseases of the skin and subcutaneous tissue	25	44	27	114	192	146	4.6	4.4	5.4
Musculoskeletal system and connective tissue	89	93	74	321	310	208	3.6	3.3	2.8
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	1	-	-	3	-	-	3.0	-
Injury & poisoning	199	129	106	689	455	405	3.5	3.5	3.8
Symptoms, signs & ill-defined conditions	41	64	6	90	172	14	2.2	2.7	2.3
Residual codes, unclassified, all Ecodes	6	16	4	13	66	9	2.2	4.1	2.3
Total	2,577	2,131	1,318	11,502	9,616	6,562	4.5	4.5	5.0

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

Table I-3
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1999, 2009 and 2019
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1999	2009	2019	1999	2009	2019	1999	2009	2019
University of Vermont Medical Center									
Infectious & parasitic diseases	251	373	1,061	2,146	3,787	9,104	8.5	10.2	8.6
Neoplasms	1,567	1,542	1,252	9,621	8,391	8,779	6.1	5.4	7.0
Endocrine, nutritional, metabolic, immunity	529	827	943	3,206	5,067	5,823	6.1	6.1	6.2
Diseases of the blood & blood-forming organs	152	210	228	754	1,117	1,318	5.0	5.3	5.8
Mental disorders	841	986	1,033	9,764	8,836	14,529	11.6	9.0	14.1
Diseases of the nervous system and sense organs	469	540	908	3,023	2,472	6,180	6.4	4.6	6.8
Diseases of the circulatory system	4,903	4,169	4,617	26,241	18,408	26,860	5.4	4.4	5.8
Diseases of the respiratory system	1,187	1,391	1,332	9,223	8,038	7,501	7.8	5.8	5.6
Diseases of the digestive system	1,557	1,847	1,864	8,327	8,725	10,577	5.3	4.7	5.7
Diseases of the genitourinary system	769	827	584	3,557	3,267	3,658	4.6	4.0	6.3
Pregnancy, childbirth, and the puerperium	2,483	2,416	2,387	6,969	6,962	7,568	2.8	2.9	3.2
Diseases of the skin and subcutaneous tissue	213	245	226	1,478	1,338	1,187	6.9	5.5	5.3
Musculoskeletal system and connective tissue	933	1,484	1,398	4,695	6,112	5,951	5.0	4.1	4.3
Congenital anomalies	99	147	127	514	433	566	5.2	2.9	4.5
Conditions originating in the perinatal period	-	3	3	-	20	7	-	6.7	2.3
Injury & poisoning	1,995	2,422	2,424	15,515	12,872	16,981	7.8	5.3	7.0
Symptoms, signs & ill-defined conditions	1,584	1,062	536	13,983	11,074	3,843	8.8	10.4	7.2
Residual codes, unclassified, all Ecodes	29	70	69	198	151	380	6.8	2.2	5.5
Total	19,561	20,561	20,992	119,214	107,070	130,812	6.1	5.2	6.2

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

Table I-4
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals
Discharges, Patient Days and Average Length of Stay by Age Group

<u>Vermont Hospitals</u>	Discharges by Age Group									<u>Total</u>
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	
Brattleboro Memorial Hospital	1	498	449	171	210	161	372	948	914	1,862
Central Vermont Medical Center	15	762	991	359	387	358	928	1,768	2,032	3,800
Copley Hospital	5	280	450	231	214	183	324	735	952	1,687
Gifford Medical Center	2	294	251	117	155	143	370	547	785	1,332
Grace Cottage Family Health & Hospital	-	3	13	9	16	27	66	16	118	134
Mt. Ascutney Hospital and Health Center	-	59	226	123	141	172	355	285	791	1,076
North Country Hospital	30	309	251	115	142	160	291	590	708	1,298
Northeastern Vermont Regional Hospital	20	335	329	134	133	107	236	684	610	1,294
Northwestern Medical Center	18	545	561	174	225	219	546	1,124	1,164	2,288
Porter Medical Center	1	418	250	98	121	103	283	669	605	1,274
Rutland Regional Medical Center	157	1,257	1,857	607	693	622	1,228	3,271	3,150	6,421
Southwestern Vermont Medical Center	19	675	728	301	359	353	984	1,422	1,997	3,419
Springfield Hospital	1	314	357	116	120	117	293	672	646	1,318
University of Vermont Medical Center	863	5,265	5,651	2,187	2,110	1,751	3,165	11,779	9,213	20,992
Total	1,132	11,014	12,364	4,742	5,026	4,476	9,441	24,510	23,685	48,195

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

Table I-4
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals
Discharges, Patient Days and Average Length of Stay by Age Group

<u>Vermont Hospitals</u>	<u>Patient Days by Age Group</u>									<u>Total</u>
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	
Brattleboro Memorial Hospital	2	1400	1531	591	731	566	1305	2933	3193	6126
Central Vermont Medical Center	33	3,866	5,921	1,579	2,054	1,615	4,904	9,820	10,152	19,972
Copley Hospital	22	617	959	479	479	500	1,138	1,598	2,596	4,194
Gifford Medical Center	5	731	813	345	489	490	1,624	1,549	2,948	4,497
Grace Cottage Family Health & Hospital	-	46	41	32	46	78	231	87	387	474
Mt. Ascutney Hospital and Health Center	-	515	1,898	1,260	1,491	1,668	3,318	2,413	7,737	10,150
North Country Hospital	73	685	797	400	432	544	982	1,555	2,358	3,913
Northeastern Vermont Regional Hospital	45	949	1,228	505	540	408	1,049	2,222	2,502	4,724
Northwestern Medical Center	40	1,311	1,981	543	868	936	2,198	3,332	4,545	7,877
Porter Medical Center	1	950	731	286	336	338	1,170	1,682	2,130	3,812
Rutland Regional Medical Center	303	6,296	9,954	2,489	3,043	3,066	6,428	16,553	15,026	31,579
Southwestern Vermont Medical Center	32	1,760	2,470	1,038	1,364	1,331	3,500	4,262	7,233	11,495
Springfield Hospital	2	1,673	1,916	647	476	464	1,384	3,591	2,971	6,562
University of Vermont Medical Center	3,730	27,727	39,548	14,321	14,017	11,946	19,523	71,005	59,807	130,812
Total	4,288	48,526	69,788	24,515	26,366	23,950	48,754	122,602	123,585	246,187

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

**Table I-4
2019 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	2.0	2.8	3.4	3.5	3.5	3.5	3.5	3.1	3.5	3.3
Central Vermont Medical Center	2.2	5.1	6.0	4.4	5.3	4.5	5.3	5.6	5.0	5.3
Copley Hospital	4.4	2.2	2.1	2.1	2.2	2.7	3.5	2.2	2.7	2.5
Gifford Medical Center	2.5	2.5	3.2	2.9	3.2	3.4	4.4	2.8	3.8	3.4
Grace Cottage Family Health & Hospital	0.0	15.3	3.2	3.6	2.9	2.9	3.5	5.4	3.3	3.5
Mt. Ascutney Hospital and Health Center	0.0	8.7	8.4	10.2	10.6	9.7	9.3	8.5	9.8	9.4
North Country Hospital	2.4	2.2	3.2	3.5	3.0	3.4	3.4	2.6	3.3	3.0
Northeastern Vermont Regional Hospital	2.3	2.8	3.7	3.8	4.1	3.8	4.4	3.2	4.1	3.7
Northwestern Medical Center	2.2	2.4	3.5	3.1	3.9	4.3	4.0	3.0	3.9	3.4
Porter Medical Center	1.0	2.3	2.9	2.9	2.8	3.3	4.1	2.5	3.5	3.0
Rutland Regional Medical Center	1.9	5.0	5.4	4.1	4.4	4.9	5.2	5.1	4.8	4.9
Southwestern Vermont Medical Center	1.7	2.6	3.4	3.4	3.8	3.8	3.6	3.0	3.6	3.4
Springfield Hospital	2.0	5.3	5.4	5.6	4.0	4.0	4.7	5.3	4.6	5.0
University of Vermont Medical Center	4.3	5.3	7.0	6.5	6.6	6.8	6.2	6.0	6.5	6.2
Total	3.8	4.4	5.6	5.2	5.2	5.4	5.2	5.0	5.2	5.1

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

**Table I-5
2019 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	864	46.4%	344	18.5%	4	0.2%	5	0.3%	609	32.7%	36	1.9%	-	0.0%	1,862	3.9%
Central Vermont Medical Center	2,214	58.3%	640	16.8%	28	0.7%	4	0.1%	865	22.8%	49	1.3%	-	0.0%	3,800	7.9%
Copley Hospital	903	53.5%	226	13.4%	11	0.7%	9	0.5%	510	30.2%	28	1.7%	-	0.0%	1,687	3.5%
Gifford Medical Center	820	61.6%	207	15.5%	11	0.8%	5	0.4%	264	19.8%	25	1.9%	-	0.0%	1,332	2.8%
Grace Cottage Family Health & Hospital	108	80.6%	6	4.5%	-	0.0%	-	0.0%	19	14.2%	1	0.7%	-	0.0%	134	0.3%
Mt. Ascutney Hospital and Health Center	813	75.6%	74	6.9%	-	0.0%	9	0.8%	170	15.8%	10	0.9%	-	0.0%	1,076	2.2%
North Country Hospital	768	59.2%	271	20.9%	7	0.5%	2	0.2%	237	18.3%	6	0.5%	7	0.5%	1,298	2.7%
Northeastern Vermont Regional Hospital	610	47.1%	277	21.4%	12	0.9%	6	0.5%	368	28.4%	21	1.6%	-	0.0%	1,294	2.7%
Northwestern Medical Center	1,337	58.4%	402	17.6%	14	0.6%	16	0.7%	465	20.3%	54	2.4%	-	0.0%	2,288	4.7%
Porter Medical Center	627	49.2%	193	15.1%	5	0.4%	-	0.0%	428	33.6%	20	1.6%	1	0.1%	1,274	2.6%
Rutland Regional Medical Center	3,854	60.0%	1,184	18.4%	64	1.0%	25	0.4%	1,211	18.9%	82	1.3%	1	0.0%	6,421	13.3%
Southwestern Vermont Medical Center	2,148	62.8%	540	15.8%	53	1.6%	7	0.2%	634	18.5%	37	1.1%	-	0.0%	3,419	7.1%
Springfield Hospital	713	54.1%	279	21.2%	4	0.3%	1	0.1%	289	21.9%	32	2.4%	-	0.0%	1,318	2.7%
University of Vermont Medical Center	9,047	43.1%	3,111	14.8%	333	1.6%	93	0.4%	8,073	38.5%	290	1.4%	45	0.2%	20,992	43.6%
Total	24,826	51.5%	7,754	16.1%	546	1.1%	182	0.4%	14,142	29.3%	691	1.4%	54	0.1%	48,195	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
2019 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	2,036	66.6%	378	12.4%	36	1.2%	1	0.0%	567	18.5%	39	1.3%	1	0.0%	3,058	6.3%
Neoplasms	819	46.1%	208	11.7%	32	1.8%	-	0.0%	703	39.6%	14	0.8%	-	0.0%	1,776	3.7%
Endocrine, nutritional, metabolic, immunity	999	51.2%	385	19.7%	20	1.0%	1	0.1%	519	26.6%	27	1.4%	-	0.0%	1,951	4.0%
Diseases of the blood & blood-forming organs	301	58.8%	60	11.7%	8	1.6%	-	0.0%	140	27.3%	3	0.6%	-	0.0%	512	1.1%
Mental disorders	1,044	33.5%	1,224	39.3%	18	0.6%	-	0.0%	727	23.3%	101	3.2%	-	0.0%	3,114	6.5%
Diseases of the nervous system and sense organs	774	54.5%	222	15.6%	17	1.2%	1	0.1%	380	26.8%	23	1.6%	2	0.1%	1,419	2.9%
Diseases of the circulatory system	5,643	66.9%	473	5.6%	125	1.5%	3	0.0%	2,071	24.6%	107	1.3%	9	0.1%	8,431	17.5%
Diseases of the respiratory system	3,225	66.8%	691	14.3%	37	0.8%	2	0.0%	798	16.5%	71	1.5%	4	0.1%	4,828	10.0%
Diseases of the digestive system	2,434	51.0%	742	15.5%	48	1.0%	2	0.0%	1,448	30.3%	96	2.0%	3	0.1%	4,773	9.9%
Diseases of the genitourinary system	1,292	68.2%	177	9.3%	16	0.8%	-	0.0%	387	20.4%	20	1.1%	3	0.2%	1,895	3.9%
Pregnancy, childbirth, and the puerperium	49	0.9%	2,005	38.2%	75	1.4%	1	0.0%	3,055	58.2%	63	1.2%	2	0.0%	5,250	10.9%
Diseases of the skin and subcutaneous tissue	430	50.9%	200	23.7%	8	0.9%	5	0.6%	180	21.3%	20	2.4%	2	0.2%	845	1.8%
Musculoskeletal system and connective tissue	2,238	54.0%	320	7.7%	37	0.9%	61	1.5%	1,461	35.3%	23	0.6%	4	0.1%	4,144	8.6%
Congenital anomalies	18	13.6%	37	28.0%	-	0.0%	-	0.0%	77	58.3%	-	0.0%	-	0.0%	132	0.3%
Conditions originating in the perinatal period	-	0.0%	4	57.1%	-	0.0%	-	0.0%	3	42.9%	-	0.0%	-	0.0%	7	0.0%
Injury & poisoning	2,608	56.2%	472	10.2%	58	1.2%	101	2.2%	1,317	28.4%	62	1.3%	24	0.5%	4,642	9.6%
Symptoms, signs & ill-defined conditions	824	65.4%	140	11.1%	8	0.6%	4	0.3%	272	21.6%	11	0.9%	-	0.0%	1,259	2.6%
Residual codes, unclassified, all Ecodes	92	57.9%	16	10.1%	3	1.9%	-	0.0%	37	23.3%	11	6.9%	-	0.0%	159	0.3%
Total	24,826	51.5%	7,754	16.1%	546	1.1%	182	0.4%	14,142	29.3%	691	1.4%	54	0.1%	48,195	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
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Percent Readmitted within 30 days by Vermont Hospital and State of Residence
2015 - 2019

Vermont Hospital	2015				2016				2017				2018				2019			
	VT resident discharges		Non-Vermont resident discharges		VT resident discharges		Non-Vermont resident discharges		VT resident discharges		Non-Vermont resident discharges		VT resident discharges		Non-Vermont resident discharges		VT resident discharges		Non-Vermont resident discharges	
	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted	N	Pct readmitted
Brattleboro Memorial Hospital	1,231	5.4%	318	5.0%	1,344	6.8%	262	3.1%	1,444	6.0%	332	5.1%	1,356	6.9%	338	6.8%	1,494	7.8%	368	5.4%
Central Vermont Medical Center	3,846	11.3%	83	2.4%	4,128	11.8%	73	2.7%	3,936	11.9%	80	2.5%	3,717	11.4%	66	4.5%	3,721	11.0%	79	5.1%
Copley Hospital	1,629	10.1%	52	0.0%	1,686	8.0%	74	2.7%	1,710	7.3%	72	5.6%	1,685	5.8%	88	1.1%	1,625	4.9%	62	4.8%
Gifford Medical Center	1,425	9.9%	17	0.0%	1,438	10.6%	19	0.0%	1,302	9.1%	20	0.0%	1,290	9.1%	15	0.0%	1,311	8.2%	21	9.5%
Grace Cottage Family Health & Hospital	117	2.6%	8	0.0%	111	2.7%	8	0.0%	140	6.4%	11	0.0%	119	1.7%	4	0.0%	132	4.5%	2	0.0%
Mt. Ascutney Hospital and Health Center	767	8.2%	286	5.2%	698	6.7%	269	7.8%	777	6.9%	254	5.5%	699	7.3%	262	6.5%	778	8.2%	298	4.7%
North Country Hospital	1,588	9.1%	41	9.8%	1,559	9.7%	41	4.9%	1,488	9.3%	47	6.4%	1,476	7.6%	30	0.0%	1,282	8.7%	16	0.0%
Northeastern Vermont Regional Hospital	1,200	7.1%	54	3.7%	1,338	7.4%	39	5.1%	1,321	7.1%	54	9.3%	1,270	9.0%	57	5.3%	1,250	6.0%	44	0.0%
Northwestern Medical Center	2,558	9.9%	32	0.0%	2,587	9.1%	20	0.0%	2,327	8.2%	30	3.3%	2,227	7.8%	28	0.0%	2,258	9.2%	30	6.7%
Porter Medical Center	1,372	8.1%	115	1.7%	1,297	6.0%	105	1.0%	1,002	3.6%	102	2.9%	1,044	5.4%	115	1.7%	1,153	5.8%	121	3.3%
Rutland Regional Medical Center	5,663	11.1%	442	8.1%	5,895	11.5%	470	9.6%	6,162	11.3%	478	6.7%	6,406	11.5%	443	8.4%	5,988	12.1%	433	6.5%
Southwestern Vermont Medical Center	2,511	10.6%	910	7.7%	2,354	11.3%	965	9.5%	2,311	10.3%	1,094	7.2%	2,385	12.5%	1,007	7.7%	2,456	11.4%	963	7.7%
Springfield Hospital	1,634	10.8%	290	5.9%	1,499	10.4%	301	2.7%	1,581	8.7%	322	5.3%	1,525	8.2%	297	8.1%	1,119	6.5%	199	8.5%
University of Vermont Medical Center	15,244	10.4%	3,490	8.0%	15,842	11.0%	3,578	8.6%	16,168	10.7%	3,601	8.7%	16,681	11.1%	3,450	7.6%	17,431	11.3%	3,561	7.5%
Total	40,785	10.1%	6,138	7.2%	41,776	10.3%	6,224	7.9%	41,669	9.9%	6,497	7.5%	41,880	10.2%	6,200	7.3%	41,998	10.2%	6,197	7.0%

Total for All Discharges	Total N	Readmissions		Total N	Readmissions		Total N	Readmissions		Total N	Readmissions		Total N	Readmissions	
		N	Pct		N	Pct		N	Pct		N	Pct		N	Pct
	46,923	4,568	9.7%	48,000	4,805	10.0%	48,166	4,617	9.6%	48,080	4,707	9.8%	48,195	4,733	9.8%

Readmission is defined as inpatient admitted to the same hospital for any reason within 30 days of discharge, excluding same-day readmissions.
 Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes.

Table I-8
2019 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Median Charges for Readmissions within 30 days by Vermont Hospital and State of Residence
2015 - 2019

Vermont Hospital	2015				2016				2017				2018				2019			
	VT residents		Non-Vermonters		VT residents		Non-Vermonters		VT residents		Non-Vermonters		VT residents		Non-Vermonters		VT residents		Non-Vermonters	
	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges
Brattleboro Memorial Hospital	66	\$ 12,118	16	\$ 14,893	92	\$ 15,811	8	\$ 17,963	87	\$ 14,481	17	\$ 9,727	94	\$ 16,447	23	\$ 12,089	116	\$ 16,031	20	\$ 18,534
Central Vermont Medical Center	433	\$ 16,389	2	\$ 16,759	486	\$ 15,807	2	\$ 14,777	467	\$ 16,757	2	\$ 15,760	424	\$ 16,409	3	\$ 15,345	410	\$ 18,710	4	\$ 23,382
Copley Hospital	165	\$ 7,066	-	-	135	\$ 7,750	2	\$ 9,381	125	\$ 8,035	4	\$ 9,123	97	\$ 7,878	1	\$ 4,726	79	\$ 8,747	3	\$ 61,645
Gifford Medical Center	141	\$ 14,273	-	-	152	\$ 14,841	-	-	119	\$ 17,124	-	-	118	\$ 16,164	-	\$ 2,525	108	\$ 16,882	2	\$ 17,443
Grace Cottage Family Health & Hospital	3	\$ 12,156	-	-	3	\$ 7,187	-	-	9	\$ 9,980	-	-	2	\$ 13,286	-	-	6	\$ 16,369	-	-
Mt. Ascutney Hospital and Health Center	63	\$ 14,504	15	\$ 9,591	47	\$ 12,564	21	\$ 19,812	54	\$ 13,899	14	\$ 11,465	51	\$ 15,281	17	\$ 18,833	64	\$ 19,492	14	\$ 10,959
North Country Hospital	144	\$ 17,150	4	\$ 18,122	151	\$ 19,348	2	\$ 14,342	139	\$ 21,860	3	\$ 22,981	112	\$ 16,057	-	-	112	\$ 20,530	-	-
Northeastern Vermont Regional Hospital	85	\$ 15,342	2	\$ 29,749	99	\$ 15,523	2	\$ 28,636	94	\$ 17,383	5	\$ 36,089	114	\$ 26,036	3	\$ 20,768	75	\$ 30,241	-	-
Northwestern Medical Center	252	\$ 12,714	-	-	235	\$ 10,485	-	-	191	\$ 10,998	1	\$ 24,297	174	\$ 11,418	-	-	207	\$ 10,325	2	\$ 6,765
Porter Medical Center	111	\$ 15,799	2	\$ 2,885	78	\$ 14,930	1	\$ 6,425	36	\$ 18,021	3	\$ 37,944	56	\$ 14,405	2	\$ 15,475	67	\$ 13,169	4	\$ 17,442
Rutland Regional Medical Center	631	\$ 18,511	36	\$ 17,979	678	\$ 19,979	45	\$ 15,951	695	\$ 18,701	32	\$ 23,855	734	\$ 18,254	37	\$ 21,209	727	\$ 19,460	28	\$ 19,243
Southwestern Vermont Medical Center	265	\$ 14,513	70	\$ 12,480	267	\$ 13,646	92	\$ 14,421	238	\$ 14,326	79	\$ 15,327	297	\$ 15,288	78	\$ 14,887	279	\$ 16,241	74	\$ 15,189
Springfield Hospital	176	\$ 13,917	17	\$ 15,869	156	\$ 15,069	8	\$ 12,355	137	\$ 11,886	17	\$ 13,541	125	\$ 15,488	24	\$ 11,887	73	\$ 15,244	17	\$ 20,609
University of Vermont Medical Center	1,589	\$ 20,533	280	\$ 24,765	1,735	\$ 21,664	308	\$ 28,654	1,736	\$ 22,953	313	\$ 29,854	1,859	\$ 24,784	262	\$ 25,782	1,974	\$ 25,784	268	\$ 29,867
Total	4,124	\$ 16,845	444	\$ 18,487	4,314	\$ 17,171	491	\$ 19,493	4,127	\$ 18,202	490	\$ 22,981	4,257	\$ 19,065	450	\$ 20,374	4,297	\$ 20,371	436	\$ 21,858
Total Readmissions	Total N		Total N		Total N		Total N		Total N		Total N		Total N		Total N		Total N		Total N	
	4,568		4,805		4,617		4,707		4,733		4,733		4,733		4,733		4,733		4,733	
	\$16,990		\$17,392		\$18,536		\$19,192		\$20,429		\$20,429		\$20,429		\$20,429		\$20,429		\$20,429	

Readmission is defined as inpatient admitted to the same hospital for any reason within 30 days of discharge, excluding same-day readmissions.
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 Appendix A for details.

Table I-9
2019 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	1,494	\$ 30,715,457	368	\$ 8,153,640	1,862	\$ 38,869,096
Central Vermont Medical Center	3,721	\$ 86,796,330	79	\$ 1,417,040	3,800	\$ 88,213,370
Copley Hospital	1,625	\$ 37,713,615	62	\$ 1,635,344	1,687	\$ 39,348,959
Gifford Medical Center	1,311	\$ 25,545,798	21	\$ 567,584	1,332	\$ 26,113,383
Grace Cottage Family Health & Hospital	132	\$ 1,917,351	2	\$ 22,901	134	\$ 1,940,252
Mt. Ascutney Hospital and Health Center	778	\$ 20,554,199	298	\$ 7,838,288	1,076	\$ 28,392,487
North Country Hospital	1,282	\$ 32,912,061	16	\$ 397,763	1,298	\$ 33,309,824
Northeastern Vermont Regional Hospital	1,250	\$ 42,961,329	44	\$ 1,164,748	1,294	\$ 44,126,077
Northwestern Medical Center	2,258	\$ 36,845,069	30	\$ 392,069	2,288	\$ 37,237,138
Porter Medical Center	1,153	\$ 25,826,095	121	\$ 2,495,643	1,274	\$ 28,321,738
Rutland Regional Medical Center	5,988	\$ 172,871,276	433	\$ 12,876,080	6,421	\$ 185,747,356
Southwestern Vermont Medical Center	2,456	\$ 45,924,985	963	\$ 17,995,509	3,419	\$ 63,920,494
Springfield Hospital	1,119	\$ 21,098,731	199	\$ 3,815,953	1,318	\$ 24,914,684
University of Vermont Medical Center	17,431	\$ 779,767,321	3,561	\$ 218,251,458	20,992	\$ 998,018,779
Total for 2019	41,998	\$ 1,361,449,617	6,197	\$ 277,024,019	48,195	\$ 1,638,473,637
Total for 2018	41,880	\$ 1,275,201,638	6,200	\$ 266,051,889	48,080	\$ 1,541,253,527
Total for 2017	41,669	\$ 1,200,858,983	6,497	\$ 267,126,748	48,166	\$ 1,467,985,731
Total for 2016	41,776	\$ 1,161,867,748	6,224	\$ 247,210,892	48,000	\$ 1,409,078,640
Total for 2015	40,785	\$ 1,106,926,207	6,138	\$ 235,812,192	46,923	\$ 1,342,738,400

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 Appendix A for details.

Emergency Department Visits

Table E-1
2019 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	1,222	8.8%	12,658	91.2%	13,880	5.2%
Central Vermont Medical Center	3,230	12.9%	21,872	87.1%	25,102	9.4%
Copley Hospital	811	6.3%	12,051	93.7%	12,862	4.8%
Gifford Medical Center	805	12.2%	5,797	87.8%	6,602	2.5%
Grace Cottage Family Health & Hospital	115	3.8%	2,927	96.2%	3,042	1.1%
Mt. Ascutney Hospital and Health Center	308	6.2%	4,684	93.8%	4,992	1.9%
North Country Hospital	899	5.9%	14,456	94.1%	15,355	5.8%
Northeastern Vermont Regional Hospital	839	5.8%	13,530	94.2%	14,369	5.4%
Northwestern Medical Center	1,672	6.9%	22,487	93.1%	24,159	9.1%
Porter Medical Center	780	3.9%	19,169	96.1%	19,949	7.5%
Rutland Regional Medical Center	5,012	16.5%	25,380	83.5%	30,392	11.4%
Southwestern Vermont Medical Center	2,743	11.6%	20,867	88.4%	23,610	8.8%
Springfield Hospital	983	6.9%	13,196	93.1%	14,179	5.3%
University of Vermont Medical Center	11,004	18.8%	47,390	81.2%	58,394	21.9%
Total	30,423	11.4%	236,464	88.6%	266,887	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.
 ED visits exclude any records with missing or invalid diagnosis codes.

Table E-2
2019 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Five-year Comparison

Inpatient Discharges Originating in ED	2015	2016	2017	2018	2019
Brattleboro Memorial Hospital	811	930	1,087	1,135	1,222
Central Vermont Medical Center	3,218	3,478	3,302	3,148	3,230
Copley Hospital	885	962	997	965	811
Gifford Medical Center	950	970	888	810	805
Grace Cottage Family Health & Hospital	104	101	120	99	115
Mt. Ascutney Hospital and Health Center	275	244	265	247	308
North Country Hospital	1,017	1,032	979	967	899
Northeastern Vermont Regional Hospital	496	918	943	901	839
Northwestern Medical Center	1,735	1,776	1,619	1,588	1,672
Porter Medical Center	888	803	596	631	780
Rutland Regional Medical Center	4,471	4,750	5,015	5,225	5,012
Southwestern Vermont Medical Center	2,620	2,586	2,565	2,671	2,743
Springfield Hospital	1,421	1,324	1,449	1,353	983
University of Vermont Medical Center	8,766	9,471	9,665	10,204	11,004
Total	27,657	29,345	29,490	29,944	30,423
ED Visits Not Admitted	2015	2016	2017	2018	2019
Brattleboro Memorial Hospital	12,488	12,696	12,576	12,477	12,658
Central Vermont Medical Center	21,723	21,788	21,325	21,687	21,872
Copley Hospital	12,185	12,545	11,496	12,150	12,051
Gifford Medical Center	6,611	6,559	5,962	5,991	5,797
Grace Cottage Family Health & Hospital	2,731	2,817	2,807	2,916	2,927
Mt. Ascutney Hospital and Health Center	4,387	4,346	4,506	4,321	4,684
North Country Hospital	15,665	14,473	14,534	14,032	14,456
Northeastern Vermont Regional Hospital	13,110	12,975	12,980	13,616	13,530
Northwestern Medical Center	23,583	23,083	21,954	22,167	22,487
Porter Medical Center	14,522	13,424	13,930	17,488	19,169
Rutland Regional Medical Center	28,923	28,647	27,868	26,772	25,380
Southwestern Vermont Medical Center	20,700	20,519	20,297	20,510	20,867
Springfield Hospital	15,611	15,426	14,629	15,001	13,196
University of Vermont Medical Center	48,117	47,168	46,860	46,571	47,390
Total	240,356	236,466	231,724	235,699	236,464

Table E-2
2019 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Five-year Comparison

All ED Visits, Including Those Admitted	2015	2016	2017	2018	2019
Brattleboro Memorial Hospital	13,299	13,626	13,663	13,612	13,880
Central Vermont Medical Center	24,941	25,266	24,627	24,835	25,102
Copley Hospital	13,070	13,507	12,493	13,115	12,862
Gifford Medical Center	7,561	7,529	6,850	6,801	6,602
Grace Cottage Family Health & Hospital	2,835	2,918	2,927	3,015	3,042
Mt. Ascutney Hospital and Health Center	4,662	4,590	4,771	4,568	4,992
North Country Hospital	16,682	15,505	15,513	14,999	15,355
Northeastern Vermont Regional Hospital	13,606	13,893	13,923	14,517	14,369
Northwestern Medical Center	25,318	24,859	23,573	23,755	24,159
Porter Medical Center	15,410	14,227	14,526	18,119	19,949
Rutland Regional Medical Center	33,394	33,397	32,883	31,997	30,392
Southwestern Vermont Medical Center	23,320	23,105	22,862	23,181	23,610
Springfield Hospital	17,032	16,750	16,078	16,354	14,179
University of Vermont Medical Center	56,883	56,639	56,525	56,775	58,394
Total	268,013	265,811	261,214	265,643	266,887

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

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

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-3
2019 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	2,765	42.0%	3,811	58.0%	6,576	2.5%
Neoplasms	706	61.7%	438	38.3%	1,144	0.4%
Endocrine, nutritional, metabolic, immunity	1,381	26.6%	3,815	73.4%	5,196	1.9%
Diseases of the blood & blood-forming organs	430	39.4%	660	60.6%	1,090	0.4%
Mental disorders	2,497	15.5%	13,620	84.5%	16,117	6.0%
Diseases of the nervous system and sense organs	1,024	5.0%	19,504	95.0%	20,528	7.7%
Diseases of the circulatory system	5,920	23.0%	19,875	77.0%	25,795	9.7%
Diseases of the respiratory system	4,326	13.2%	28,494	86.8%	32,820	12.3%
Diseases of the digestive system	3,992	19.2%	16,765	80.8%	20,757	7.8%
Diseases of the genitourinary system	1,554	11.1%	12,418	88.9%	13,972	5.2%
Pregnancy, childbirth, and the puerperium	102	3.8%	2,613	96.2%	2,715	1.0%
Diseases of the skin and subcutaneous tissue	727	8.1%	8,280	91.9%	9,007	3.4%
Musculoskeletal system and connective tissue	796	4.3%	17,726	95.7%	18,522	6.9%
Congenital anomalies	20	29.9%	47	70.1%	67	0.0%
Conditions originating in the perinatal period	2	0.8%	246	99.2%	248	0.1%
Injury & poisoning	3,428	5.6%	57,494	94.4%	60,922	22.8%
Symptoms, signs & ill-defined conditions	640	2.2%	28,129	97.8%	28,769	10.8%
Residual codes, unclassified, all Ecodes	113	4.3%	2,529	95.7%	2,642	1.0%
Total	30,423	11.4%	236,464	88.6%	266,887	100.0%

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-3
2019 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	116	34.9%	216	65.1%	332	2.4%
Neoplasms	12	25.0%	36	75.0%	48	0.3%
Endocrine, nutritional, metabolic, immunity	64	24.2%	200	75.8%	264	1.9%
Diseases of the blood & blood-forming organs	24	39.3%	37	60.7%	61	0.4%
Mental disorders	50	3.9%	1,217	96.1%	1,267	9.1%
Diseases of the nervous system and sense organs	30	3.0%	959	97.0%	989	7.1%
Diseases of the circulatory system	226	16.0%	1,186	84.0%	1,412	10.2%
Diseases of the respiratory system	206	14.4%	1,221	85.6%	1,427	10.3%
Diseases of the digestive system	159	16.3%	818	83.7%	977	7.0%
Diseases of the genitourinary system	88	13.0%	587	87.0%	675	4.9%
Pregnancy, childbirth, and the puerperium	5	2.9%	168	97.1%	173	1.2%
Diseases of the skin and subcutaneous tissue	71	14.2%	429	85.8%	500	3.6%
Musculoskeletal system and connective tissue	23	2.5%	885	97.5%	908	6.5%
Congenital anomalies	0	0.0%	3	100.0%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	13	100.0%	13	0.1%
Injury & poisoning	127	4.0%	3,028	96.0%	3,155	22.7%
Symptoms, signs & ill-defined conditions	18	1.2%	1,435	98.8%	1,453	10.5%
Residual codes, unclassified, all Ecodes	3	1.3%	220	98.7%	223	1.6%
Total	1,222	8.8%	12,658	91.2%	13,880	100.0%

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-3
2019 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	637	65.6%	334	34.4%	971	3.9%
Neoplasms	48	44.9%	59	55.1%	107	0.4%
Endocrine, nutritional, metabolic, immunity	146	28.9%	359	71.1%	505	2.0%
Diseases of the blood & blood-forming organs	37	43.5%	48	56.5%	85	0.3%
Mental disorders	438	23.6%	1,418	76.4%	1,856	7.5%
Diseases of the nervous system and sense organs	71	3.9%	1,735	96.1%	1,806	7.3%
Diseases of the circulatory system	600	21.1%	2,245	78.9%	2,845	11.5%
Diseases of the respiratory system	345	12.2%	2,479	87.8%	2,824	11.4%
Diseases of the digestive system	346	17.4%	1,646	82.6%	1,992	8.0%
Diseases of the genitourinary system	126	9.7%	1,171	90.3%	1,297	5.2%
Pregnancy, childbirth, and the puerperium	9	3.8%	226	96.2%	235	0.9%
Diseases of the skin and subcutaneous tissue	74	8.2%	829	91.8%	903	3.6%
Musculoskeletal system and connective tissue	107	5.6%	1,796	94.4%	1,903	7.7%
Congenital anomalies	1	12.5%	7	87.5%	8	0.0%
Conditions originating in the perinatal period	0	0.0%	16	100.0%	16	0.1%
Injury & poisoning	206	4.4%	4,444	95.6%	4,650	18.7%
Symptoms, signs & ill-defined conditions	34	1.2%	2,787	98.8%	2,821	11.4%
Residual codes, unclassified, all Ecodes	5	1.8%	273	98.2%	278	1.1%
Total	3,148	12.7%	21,687	87.3%	24,835	100.0%

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-3
2019 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	22	8.5%	238	91.5%	260	2.0%
Neoplasms	24	63.2%	14	36.8%	38	0.3%
Endocrine, nutritional, metabolic, immunity	36	21.8%	129	78.2%	165	1.3%
Diseases of the blood & blood-forming organs	2	8.7%	21	91.3%	23	0.2%
Mental disorders	30	6.0%	469	94.0%	499	3.9%
Diseases of the nervous system and sense organs	29	3.1%	914	96.9%	943	7.3%
Diseases of the circulatory system	147	13.7%	924	86.3%	1,071	8.3%
Diseases of the respiratory system	157	10.2%	1,385	89.8%	1,542	12.0%
Diseases of the digestive system	122	12.3%	873	87.7%	995	7.7%
Diseases of the genitourinary system	60	9.0%	605	91.0%	665	5.2%
Pregnancy, childbirth, and the puerperium	3	2.1%	137	97.9%	140	1.1%
Diseases of the skin and subcutaneous tissue	21	4.5%	447	95.5%	468	3.6%
Musculoskeletal system and connective tissue	22	2.2%	962	97.8%	984	7.7%
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	111	3.0%	3,619	97.0%	3,730	29.0%
Symptoms, signs & ill-defined conditions	20	1.6%	1,212	98.4%	1,232	9.6%
Residual codes, unclassified, all Ecodes	5	5.2%	91	94.8%	96	0.7%
Total	811	6.3%	12,051	93.7%	12,862	100.0%

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-3
2019 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	30	33.7%	59	66.3%	89	1.3%
Neoplasms	7	41.2%	10	58.8%	17	0.3%
Endocrine, nutritional, metabolic, immunity	42	35.0%	78	65.0%	120	1.8%
Diseases of the blood & blood-forming organs	15	62.5%	9	37.5%	24	0.4%
Mental disorders	26	10.9%	213	89.1%	239	3.6%
Diseases of the nervous system and sense organs	34	6.6%	480	93.4%	514	7.8%
Diseases of the circulatory system	177	30.4%	406	69.6%	583	8.8%
Diseases of the respiratory system	124	14.0%	761	86.0%	885	13.4%
Diseases of the digestive system	138	23.4%	452	76.6%	590	8.9%
Diseases of the genitourinary system	54	17.6%	252	82.4%	306	4.6%
Pregnancy, childbirth, and the puerperium	1	1.7%	58	98.3%	59	0.9%
Diseases of the skin and subcutaneous tissue	18	9.3%	176	90.7%	194	2.9%
Musculoskeletal system and connective tissue	22	6.0%	344	94.0%	366	5.5%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	7	100.0%	7	0.1%
Injury & poisoning	77	4.0%	1,837	96.0%	1,914	29.0%
Symptoms, signs & ill-defined conditions	37	6.1%	572	93.9%	609	9.2%
Residual codes, unclassified, all Ecodes	3	3.5%	83	96.5%	86	1.3%
Total	805	12.2%	5,797	87.8%	6,602	100.0%

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-3
2019 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 Family Health & Hospital						
Infectious & parasitic diseases	5	9.1%	50	90.9%	55	1.8%
Neoplasms	2	50.0%	2	50.0%	4	0.1%
Endocrine, nutritional, metabolic, immunity	14	17.9%	64	82.1%	78	2.6%
Diseases of the blood & blood-forming organs	1	7.7%	12	92.3%	13	0.4%
Mental disorders	0	0.0%	99	100.0%	99	3.3%
Diseases of the nervous system and sense organs	2	1.0%	202	99.0%	204	6.7%
Diseases of the circulatory system	12	4.8%	236	95.2%	248	8.2%
Diseases of the respiratory system	33	9.0%	333	91.0%	366	12.0%
Diseases of the digestive system	8	4.3%	176	95.7%	184	6.0%
Diseases of the genitourinary system	12	8.1%	137	91.9%	149	4.9%
Pregnancy, childbirth, and the puerperium	0	0.0%	9	100.0%	9	0.3%
Diseases of the skin and subcutaneous tissue	3	3.4%	85	96.6%	88	2.9%
Musculoskeletal system and connective tissue	4	2.3%	171	97.7%	175	5.8%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	0	0.0%	0	0.0%
Injury & poisoning	7	0.7%	1,002	99.3%	1,009	33.2%
Symptoms, signs & ill-defined conditions	10	3.0%	321	97.0%	331	10.9%
Residual codes, unclassified, all Ecodes	2	6.7%	28	93.3%	30	1.0%
Total	115	3.8%	2,927	96.2%	3,042	100.0%

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-3
2019 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	6	5.4%	106	94.6%	112	2.2%
Neoplasms	4	20.0%	16	80.0%	20	0.4%
Endocrine, nutritional, metabolic, immunity	11	9.8%	101	90.2%	112	2.2%
Diseases of the blood & blood-forming organs	4	21.1%	15	78.9%	19	0.4%
Mental disorders	4	2.0%	193	98.0%	197	3.9%
Diseases of the nervous system and sense organs	4	1.2%	331	98.8%	335	6.7%
Diseases of the circulatory system	66	16.9%	325	83.1%	391	7.8%
Diseases of the respiratory system	63	9.3%	613	90.7%	676	13.5%
Diseases of the digestive system	57	12.1%	413	87.9%	470	9.4%
Diseases of the genitourinary system	32	12.4%	227	87.6%	259	5.2%
Pregnancy, childbirth, and the puerperium	0	0.0%	13	100.0%	13	0.3%
Diseases of the skin and subcutaneous tissue	7	4.2%	161	95.8%	168	3.4%
Musculoskeletal system and connective tissue	10	3.3%	296	96.7%	306	6.1%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	2	100.0%	2	0.0%
Injury & poisoning	21	1.5%	1,388	98.5%	1,409	28.2%
Symptoms, signs & ill-defined conditions	16	3.5%	443	96.5%	459	9.2%
Residual codes, unclassified, all Ecodes	3	6.8%	41	93.2%	44	0.9%
Total	308	6.2%	4,684	93.8%	4,992	100.0%

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-3
2019 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	17	5.2%	308	94.8%	325	2.1%
Neoplasms	20	43.5%	26	56.5%	46	0.3%
Endocrine, nutritional, metabolic, immunity	54	16.4%	276	83.6%	330	2.1%
Diseases of the blood & blood-forming organs	13	28.3%	33	71.7%	46	0.3%
Mental disorders	12	2.6%	458	97.4%	470	3.1%
Diseases of the nervous system and sense organs	10	0.8%	1,219	99.2%	1,229	8.0%
Diseases of the circulatory system	188	16.0%	989	84.0%	1,177	7.7%
Diseases of the respiratory system	194	8.3%	2,156	91.7%	2,350	15.3%
Diseases of the digestive system	168	13.2%	1,106	86.8%	1,274	8.3%
Diseases of the genitourinary system	85	9.1%	852	90.9%	937	6.1%
Pregnancy, childbirth, and the puerperium	1	1.1%	93	98.9%	94	0.6%
Diseases of the skin and subcutaneous tissue	23	3.7%	591	96.3%	614	4.0%
Musculoskeletal system and connective tissue	15	1.3%	1,115	98.7%	1,130	7.4%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	12	100.0%	12	0.1%
Injury & poisoning	57	1.6%	3,555	98.4%	3,612	23.5%
Symptoms, signs & ill-defined conditions	18	1.2%	1,498	98.8%	1,516	9.9%
Residual codes, unclassified, all Ecodes	24	12.5%	168	87.5%	192	1.3%
Total	899	5.9%	14,456	94.1%	15,355	100.0%

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-3
2019 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	53	20.9%	200	79.1%	253	1.8%
Neoplasms	12	44.4%	15	55.6%	27	0.2%
Endocrine, nutritional, metabolic, immunity	28	11.7%	212	88.3%	240	1.7%
Diseases of the blood & blood-forming organs	10	33.3%	20	66.7%	30	0.2%
Mental disorders	39	6.5%	562	93.5%	601	4.2%
Diseases of the nervous system and sense organs	31	2.7%	1,117	97.3%	1,148	8.0%
Diseases of the circulatory system	108	10.3%	936	89.7%	1,044	7.3%
Diseases of the respiratory system	192	8.3%	2,130	91.7%	2,322	16.2%
Diseases of the digestive system	140	12.6%	970	87.4%	1,110	7.7%
Diseases of the genitourinary system	52	6.8%	708	93.2%	760	5.3%
Pregnancy, childbirth, and the puerperium	7	4.3%	155	95.7%	162	1.1%
Diseases of the skin and subcutaneous tissue	24	4.2%	550	95.8%	574	4.0%
Musculoskeletal system and connective tissue	16	1.7%	947	98.3%	963	6.7%
Congenital anomalies	0	0.0%	5	100.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	8	100.0%	8	0.1%
Injury & poisoning	89	2.4%	3,596	97.6%	3,685	25.6%
Symptoms, signs & ill-defined conditions	30	2.3%	1,293	97.7%	1,323	9.2%
Residual codes, unclassified, all Ecodes	8	7.0%	106	93.0%	114	0.8%
Total	839	5.8%	13,530	94.2%	14,369	100.0%

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-3
2019 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	54	15.3%	300	84.7%	354	1.5%
Neoplasms	26	40.0%	39	60.0%	65	0.3%
Endocrine, nutritional, metabolic, immunity	79	16.6%	397	83.4%	476	2.0%
Diseases of the blood & blood-forming organs	17	16.2%	88	83.8%	105	0.4%
Mental disorders	48	5.3%	851	94.7%	899	3.7%
Diseases of the nervous system and sense organs	26	1.3%	1,929	98.7%	1,955	8.1%
Diseases of the circulatory system	360	16.3%	1,846	83.7%	2,206	9.1%
Diseases of the respiratory system	342	11.3%	2,686	88.7%	3,028	12.5%
Diseases of the digestive system	287	13.1%	1,902	86.9%	2,189	9.1%
Diseases of the genitourinary system	126	8.9%	1,285	91.1%	1,411	5.8%
Pregnancy, childbirth, and the puerperium	1	0.3%	303	99.7%	304	1.3%
Diseases of the skin and subcutaneous tissue	65	7.8%	769	92.2%	834	3.5%
Musculoskeletal system and connective tissue	34	1.7%	1,971	98.3%	2,005	8.3%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	31	100.0%	31	0.1%
Injury & poisoning	163	3.1%	5,087	96.9%	5,250	21.7%
Symptoms, signs & ill-defined conditions	35	1.2%	2,805	98.8%	2,840	11.8%
Residual codes, unclassified, all Ecodes	9	4.4%	197	95.6%	206	0.9%
Total	1,672	6.9%	22,487	93.1%	24,159	100.0%

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-3
2019 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	108	25.5%	316	74.5%	424	2.1%
Neoplasms	5	50.0%	5	50.0%	10	0.1%
Endocrine, nutritional, metabolic, immunity	21	9.5%	199	90.5%	220	1.1%
Diseases of the blood & blood-forming organs	15	34.9%	28	65.1%	43	0.2%
Mental disorders	26	4.9%	509	95.1%	535	2.7%
Diseases of the nervous system and sense organs	26	1.4%	1,803	98.6%	1,829	9.2%
Diseases of the circulatory system	129	11.3%	1,009	88.7%	1,138	5.7%
Diseases of the respiratory system	136	3.3%	4,002	96.7%	4,138	20.7%
Diseases of the digestive system	136	11.0%	1,098	89.0%	1,234	6.2%
Diseases of the genitourinary system	30	2.7%	1,101	97.3%	1,131	5.7%
Pregnancy, childbirth, and the puerperium	0	0.0%	84	100.0%	84	0.4%
Diseases of the skin and subcutaneous tissue	37	3.7%	959	96.3%	996	5.0%
Musculoskeletal system and connective tissue	26	1.7%	1,468	98.3%	1,494	7.5%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	5	100.0%	5	0.0%
Injury & poisoning	49	1.1%	4,536	98.9%	4,585	23.0%
Symptoms, signs & ill-defined conditions	35	1.8%	1,932	98.2%	1,967	9.9%
Residual codes, unclassified, all Ecodes	1	0.9%	114	99.1%	115	0.6%
Total	780	3.9%	19,169	96.1%	19,949	100.0%

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-3
2019 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	474	48.7%	499	51.3%	973	3.2%
Neoplasms	137	66.8%	68	33.2%	205	0.7%
Endocrine, nutritional, metabolic, immunity	215	29.7%	509	70.3%	724	2.4%
Diseases of the blood & blood-forming organs	85	53.8%	73	46.2%	158	0.5%
Mental disorders	793	32.0%	1,685	68.0%	2,478	8.2%
Diseases of the nervous system and sense organs	107	5.0%	2,014	95.0%	2,121	7.0%
Diseases of the circulatory system	845	27.0%	2,286	73.0%	3,131	10.3%
Diseases of the respiratory system	676	21.0%	2,536	79.0%	3,212	10.6%
Diseases of the digestive system	590	25.0%	1,770	75.0%	2,360	7.8%
Diseases of the genitourinary system	320	19.7%	1,307	80.3%	1,627	5.4%
Pregnancy, childbirth, and the puerperium	15	4.1%	353	95.9%	368	1.2%
Diseases of the skin and subcutaneous tissue	106	11.2%	838	88.8%	944	3.1%
Musculoskeletal system and connective tissue	119	6.1%	1,845	93.9%	1,964	6.5%
Congenital anomalies	0	0.0%	3	100.0%	3	0.0%
Conditions originating in the perinatal period	1	3.7%	26	96.3%	27	0.1%
Injury & poisoning	420	6.2%	6,373	93.8%	6,793	22.4%
Symptoms, signs & ill-defined conditions	105	3.5%	2,921	96.5%	3,026	10.0%
Residual codes, unclassified, all Ecodes	4	1.4%	274	98.6%	278	0.9%
Total	5,012	16.5%	25,380	83.5%	30,392	100.0%

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

Table E-3
2019 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	355	51.7%	332	48.3%	687	2.9%
Neoplasms	28	43.1%	37	56.9%	65	0.3%
Endocrine, nutritional, metabolic, immunity	143	28.9%	352	71.1%	495	2.1%
Diseases of the blood & blood-forming organs	24	26.1%	68	73.9%	92	0.4%
Mental disorders	65	5.2%	1,191	94.8%	1,256	5.3%
Diseases of the nervous system and sense organs	68	4.0%	1,625	96.0%	1,693	7.2%
Diseases of the circulatory system	487	19.2%	2,053	80.8%	2,540	10.8%
Diseases of the respiratory system	628	21.5%	2,287	78.5%	2,915	12.3%
Diseases of the digestive system	345	18.0%	1,574	82.0%	1,919	8.1%
Diseases of the genitourinary system	125	11.2%	993	88.8%	1,118	4.7%
Pregnancy, childbirth, and the puerperium	2	0.5%	372	99.5%	374	1.6%
Diseases of the skin and subcutaneous tissue	71	11.3%	555	88.7%	626	2.7%
Musculoskeletal system and connective tissue	50	3.0%	1,639	97.0%	1,689	7.2%
Congenital anomalies	1	12.5%	7	87.5%	8	0.0%
Conditions originating in the perinatal period	0	0.0%	23	100.0%	23	0.1%
Injury & poisoning	297	5.7%	4,874	94.3%	5,171	21.9%
Symptoms, signs & ill-defined conditions	42	1.6%	2,644	98.4%	2,686	11.4%
Residual codes, unclassified, all Ecodes	12	4.7%	241	95.3%	253	1.1%
Total	2,743	11.6%	20,867	88.4%	23,610	100.0%

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-3
2019 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	60	18.5%	264	81.5%	324	2.3%
Neoplasms	7	30.4%	16	69.6%	23	0.2%
Endocrine, nutritional, metabolic, immunity	34	14.2%	205	85.8%	239	1.7%
Diseases of the blood & blood-forming organs	13	27.7%	34	72.3%	47	0.3%
Mental disorders	149	18.7%	646	81.3%	795	5.6%
Diseases of the nervous system and sense organs	26	2.7%	940	97.3%	966	6.8%
Diseases of the circulatory system	159	13.1%	1,053	86.9%	1,212	8.5%
Diseases of the respiratory system	217	11.7%	1,635	88.3%	1,852	13.1%
Diseases of the digestive system	116	10.3%	1,013	89.7%	1,129	8.0%
Diseases of the genitourinary system	49	7.9%	568	92.1%	617	4.4%
Pregnancy, childbirth, and the puerperium	2	1.2%	171	98.8%	173	1.2%
Diseases of the skin and subcutaneous tissue	23	4.2%	529	95.8%	552	3.9%
Musculoskeletal system and connective tissue	19	2.9%	633	97.1%	652	4.6%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	25	100.0%	25	0.2%
Injury & poisoning	99	2.7%	3,606	97.3%	3,705	26.1%
Symptoms, signs & ill-defined conditions	6	0.3%	1,731	99.7%	1,737	12.3%
Residual codes, unclassified, all Ecodes	4	3.1%	126	96.9%	130	0.9%
Total	983	6.9%	13,196	93.1%	14,179	100.0%

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-3
2019 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%
University of Vermont Medical Center						
Infectious & parasitic diseases	828	58.4%	589	41.6%	1,417	2.4%
Neoplasms	374	79.7%	95	20.3%	469	0.8%
Endocrine, nutritional, metabolic, immunity	494	40.2%	734	59.8%	1,228	2.1%
Diseases of the blood & blood-forming organs	170	49.4%	174	50.6%	344	0.6%
Mental disorders	817	16.6%	4,109	83.4%	4,926	8.4%
Diseases of the nervous system and sense organs	560	11.7%	4,236	88.3%	4,796	8.2%
Diseases of the circulatory system	2,416	35.5%	4,381	64.5%	6,797	11.6%
Diseases of the respiratory system	1,013	19.2%	4,270	80.8%	5,283	9.0%
Diseases of the digestive system	1,380	31.8%	2,954	68.2%	4,334	7.4%
Diseases of the genitourinary system	395	13.1%	2,625	86.9%	3,020	5.2%
Pregnancy, childbirth, and the puerperium	56	10.6%	471	89.4%	527	0.9%
Diseases of the skin and subcutaneous tissue	184	11.9%	1,362	88.1%	1,546	2.6%
Musculoskeletal system and connective tissue	329	8.3%	3,654	91.7%	3,983	6.8%
Congenital anomalies	18	52.9%	16	47.1%	34	0.1%
Conditions originating in the perinatal period	1	1.4%	69	98.6%	70	0.1%
Injury & poisoning	1,705	13.9%	10,549	86.1%	12,254	21.0%
Symptoms, signs & ill-defined conditions	234	3.5%	6,535	96.5%	6,769	11.6%
Residual codes, unclassified, all Ecodes	30	5.0%	567	95.0%	597	1.0%
Total	11,004	18.8%	47,390	81.2%	58,394	100.0%

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-4
2019 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	1,326	5,394	3,216	729	605	482	906	9,936	2,722	12,658
Central Vermont Medical Center	2,756	8,527	5,580	1,229	1,120	919	1,741	16,863	5,009	21,872
Copley Hospital	1,916	4,851	2,783	655	554	501	791	9,550	2,501	12,051
Gifford Medical Center	884	2,339	1,346	268	329	234	397	4,569	1,228	5,797
Grace Cottage Family Health & Hospital	397	872	661	245	205	205	342	1,930	997	2,927
Mt. Ascutney Hospital and Health Center	662	1,515	1,124	348	324	279	432	3,301	1,383	4,684
North Country Hospital	2,387	5,537	3,268	797	680	701	1,086	11,192	3,264	14,456
Northeastern Vermont Regional Hospital	1,880	5,593	3,288	727	688	528	826	10,761	2,769	13,530
Northwestern Medical Center	2,970	9,026	5,768	1,190	1,101	929	1,503	17,764	4,723	22,487
Porter Medical Center	2,444	7,892	4,930	1,003	942	712	1,246	15,266	3,903	19,169
Rutland Regional Medical Center	2,998	9,895	6,938	1,450	1,256	1,047	1,796	19,831	5,549	25,380
Southwestern Vermont Medical Center	2,751	7,618	5,020	1,216	1,192	1,000	2,070	15,389	5,478	20,867
Springfield Hospital	1,977	5,194	3,129	721	626	606	943	10,300	2,896	13,196
University of Vermont Medical Center	5,434	21,081	11,489	2,435	2,074	1,700	3,177	38,004	9,386	47,390
Total	30,782	95,334	58,540	13,013	11,696	9,843	17,256	184,656	51,808	236,464

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-5
2019 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	3,243	25.6%	4,343	34.3%	79	0.6%	190	1.5%	3,751	29.6%	1,022	8.1%	30	0.2%	12,658	5.4%
Central Vermont Medical Center	5,780	26.4%	6,575	30.1%	355	1.6%	404	1.8%	7,552	34.5%	1,206	5.5%	-	0.0%	21,872	9.2%
Copley Hospital	2,882	23.9%	4,092	34.0%	172	1.4%	109	0.9%	3,932	32.6%	859	7.1%	5	0.0%	12,051	5.1%
Gifford Medical Center	1,472	25.4%	1,971	34.0%	57	1.0%	123	2.1%	1,755	30.3%	419	7.2%	-	0.0%	5,797	2.5%
Grace Cottage Family Health & Hospital	933	31.9%	707	24.2%	30	1.0%	50	1.7%	1,023	35.0%	184	6.3%	-	0.0%	2,927	1.2%
Mt. Ascutney Hospital and Health Center	1,626	34.7%	1,168	24.9%	-	0.0%	105	2.2%	1,458	31.1%	327	7.0%	-	0.0%	4,684	2.0%
North Country Hospital	3,992	27.6%	5,968	41.3%	194	1.3%	289	2.0%	3,294	22.8%	546	3.8%	173	1.2%	14,456	6.1%
Northeastern Vermont Regional Hospital	3,334	24.6%	5,099	37.7%	148	1.1%	233	1.7%	3,895	28.8%	821	6.1%	-	0.0%	13,530	5.7%
Northwestern Medical Center	6,308	28.1%	7,608	33.8%	239	1.1%	372	1.7%	6,110	27.2%	1,850	8.2%	-	0.0%	22,487	9.5%
Porter Medical Center	4,388	22.9%	4,991	26.0%	113	0.6%	88	0.5%	8,345	43.5%	1,170	6.1%	74	0.4%	19,169	8.1%
Rutland Regional Medical Center	7,543	29.7%	8,211	32.4%	332	1.3%	653	2.6%	7,167	28.2%	1,467	5.8%	7	0.0%	25,380	10.7%
Southwestern Vermont Medical Center	6,896	33.0%	6,869	32.9%	322	1.5%	349	1.7%	5,451	26.1%	980	4.7%	-	0.0%	20,867	8.8%
Springfield Hospital	3,889	29.5%	4,668	35.4%	110	0.8%	185	1.4%	3,176	24.1%	1,165	8.8%	3	0.0%	13,196	5.6%
University of Vermont Medical Center	10,355	21.9%	12,229	25.8%	816	1.7%	788	1.7%	19,894	42.0%	3,112	6.6%	196	0.4%	47,390	20.0%
Total	62,641	26.5%	74,499	31.5%	2,967	1.3%	3,938	1.7%	76,803	32.5%	15,128	6.4%	488	0.2%	236,464	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
2019 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	685	16.3%	1,526	36.3%	50	1.2%	44	1.0%	1,211	28.8%	293	7.0%	2	0.0%	3,811	1.6%
Neoplasms	232	54.6%	60	14.1%	6	1.4%	-	0.0%	133	31.3%	7	1.6%	-	0.0%	438	0.2%
Endocrine, nutritional, metabolic, immunity	1,740	43.9%	897	22.7%	44	1.1%	5	0.1%	966	24.4%	158	4.0%	5	0.1%	3,815	1.6%
Diseases of the blood & blood-forming organs	341	50.8%	105	15.6%	9	1.3%	-	0.0%	184	27.4%	20	3.0%	1	0.1%	660	0.3%
Mental disorders	2,904	22.6%	6,458	50.2%	113	0.9%	23	0.2%	2,932	22.8%	1,177	9.1%	13	0.1%	13,620	5.8%
Diseases of the nervous system and sense organs	4,882	25.6%	6,743	35.4%	260	1.4%	104	0.5%	6,400	33.6%	1,086	5.7%	29	0.2%	19,504	8.2%
Diseases of the circulatory system	8,525	43.1%	3,343	16.9%	283	1.4%	28	0.1%	6,761	34.2%	909	4.6%	26	0.1%	19,875	8.4%
Diseases of the respiratory system	7,198	24.7%	10,581	36.3%	361	1.2%	28	0.1%	8,518	29.2%	1,787	6.1%	21	0.1%	28,494	12.1%
Diseases of the digestive system	4,337	26.0%	5,433	32.6%	197	1.2%	19	0.1%	5,399	32.4%	1,369	8.2%	11	0.1%	16,765	7.1%
Diseases of the genitourinary system	3,885	31.9%	3,227	26.5%	169	1.4%	8	0.1%	4,379	35.9%	745	6.1%	5	0.0%	12,418	5.3%
Pregnancy, childbirth, and the puerperium	50	2.0%	1,483	57.9%	41	1.6%	11	0.4%	848	33.1%	179	7.0%	1	0.0%	2,613	1.1%
Diseases of the skin and subcutaneous tissue	2,058	24.6%	2,955	35.4%	93	1.1%	50	0.6%	2,453	29.4%	666	8.0%	5	0.1%	8,280	3.5%
Musculoskeletal system and connective tissue	5,603	32.8%	4,611	27.0%	241	1.4%	468	2.7%	5,658	33.1%	1,082	6.3%	63	0.4%	17,726	7.5%
Congenital anomalies	8	13.8%	17	29.3%	-	0.0%	-	0.0%	21	36.2%	1	1.7%	-	0.0%	47	0.0%
Conditions originating in the perinatal period	1	0.4%	154	63.6%	2	0.8%	-	0.0%	57	23.6%	31	12.8%	1	0.4%	246	0.1%
Injury & poisoning	12,644	21.6%	16,522	28.2%	766	1.3%	2,946	5.0%	20,621	35.2%	3,732	6.4%	263	0.4%	57,494	24.3%
Symptoms, signs & ill-defined conditions	6,483	23.9%	9,685	35.7%	306	1.1%	120	0.4%	9,731	35.8%	1,767	6.5%	37	0.1%	28,129	11.9%
Residual codes, unclassified, all Ecodes	1,065	41.2%	699	27.0%	26	1.0%	84	3.2%	531	20.5%	119	4.6%	5	0.2%	2,529	1.1%
Total	62,641	26.6%	74,499	31.6%	2,967	1.3%	3,938	1.7%	76,803	32.6%	15,128	6.4%	488	0.2%	236,464	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
2019 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	9,870	\$ 30,444,826	2,788	\$ 8,710,929	12,658	\$ 39,155,755
Central Vermont Medical Center	20,899	\$ 47,082,403	973	\$ 2,089,758	21,872	\$ 49,172,162
Copley Hospital	10,855	\$ 13,082,973	1,196	\$ 1,393,588	12,051	\$ 14,476,561
Gifford Medical Center	5,546	\$ 12,714,885	251	\$ 617,330	5,797	\$ 13,332,215
Grace Cottage Family Health & Hospital	2,427	\$ 5,727,365	500	\$ 1,156,881	2,927	\$ 6,884,247
Mt. Ascutney Hospital and Health Center	3,791	\$ 9,143,356	893	\$ 2,439,536	4,684	\$ 11,582,892
North Country Hospital	13,736	\$ 32,992,896	720	\$ 1,622,233	14,456	\$ 34,615,130
Northeastern Vermont Regional Hospital	12,690	\$ 28,584,678	840	\$ 1,935,356	13,530	\$ 30,520,034
Northwestern Medical Center	22,012	\$ 37,036,715	475	\$ 824,041	22,487	\$ 37,860,757
Porter Medical Center	17,385	\$ 23,062,074	1,784	\$ 1,862,202	19,169	\$ 24,924,277
Rutland Regional Medical Center	22,872	\$ 53,568,698	2,508	\$ 6,424,665	25,380	\$ 59,993,363
Southwestern Vermont Medical Center	15,162	\$ 37,548,967	5,705	\$ 15,039,552	20,867	\$ 52,588,519
Springfield Hospital	10,889	\$ 24,567,516	2,307	\$ 5,790,787	13,196	\$ 30,358,303
University of Vermont Medical Center	43,808	\$ 165,498,465	3,582	\$ 16,307,396	47,390	\$ 181,805,861
Total for 2019	211,942	\$ 521,055,819	24,522	\$ 66,214,255	236,464	\$ 587,270,074
Total for 2018	211,320	\$ 488,126,454	24,379	\$ 62,252,179	235,699	\$ 550,378,633
Total for 2017	207,403	\$ 459,952,510	24,321	\$ 57,418,969	231,724	\$ 517,371,478
Total for 2016	211,935	\$ 448,815,498	24,531	\$ 55,429,463	236,466	\$ 504,244,961
Total for 2015	215,864	\$ 438,750,014	24,492	\$ 53,398,124	240,356	\$ 492,148,138

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 Appendix A for details.

Outpatient Procedures and Services

Table O-1
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Vermont Hospitals by State of Residence

Vermont Hospital	Vermont Residents		Non-residents		All Outpatient Procedures	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	3,952	83.5%	781	16.5%	4,733	3.5%
Central Vermont Medical Center	8,987	99.2%	74	0.8%	9,061	6.7%
Copley Hospital	4,535	99.2%	37	0.8%	4,572	3.4%
Gifford Medical Center	1,876	97.7%	44	2.3%	1,920	1.4%
Grace Cottage Family Health & Hospital	2	100.0%	-	0.0%	2	0.0%
Mt. Ascutney Hospital and Health Center	1,045	63.1%	612	36.9%	1,657	1.2%
North Country Hospital	3,281	99.3%	22	0.7%	3,303	2.4%
Northeastern Vermont Regional Hospital	3,571	90.6%	370	9.4%	3,941	2.9%
Northwestern Medical Center	6,019	98.6%	87	1.4%	6,106	4.5%
Porter Medical Center	3,179	90.9%	318	9.1%	3,497	2.6%
Rutland Regional Medical Center	20,348	95.1%	1,039	4.9%	21,387	15.7%
Southwestern Vermont Medical Center	6,460	72.7%	2,420	27.3%	8,880	6.5%
Springfield Hospital	1,756	82.1%	383	17.9%	2,139	1.6%
University of Vermont Medical Center	56,764	87.4%	8,204	12.6%	64,968	47.7%
Total	121,775	89.4%	14,391	10.6%	136,166	100.0%

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

Table O-2
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Vermont Hospitals by Data Year: Five-year Comparison

Vermont Hospital	2015	2016	2017	2018	2019
Brattleboro Memorial Hospital	4,237	6,471	4,958	4,113	4,733
Central Vermont Medical Center	8,800	9,271	9,526	9,307	9,061
Copley Hospital	4,442	4,483	4,475	4,375	4,572
Gifford Medical Center	1,845	1,994	1,905	1,612	1,920
Grace Cottage Family Health & Hospital	-	2	8	1	2
Mt. Ascutney Hospital and Health Center	1,827	1,822	1,522	1,644	1,657
North Country Hospital	3,963	4,286	4,059	3,548	3,303
Northeastern Vermont Regional Hospital	3,761	4,437	4,574	4,693	3,941
Northwestern Medical Center	6,190	5,980	6,055	6,419	6,106
Porter Medical Center	3,486	3,223	2,945	2,840	3,497
Rutland Regional Medical Center	15,695	17,100	18,098	19,268	21,387
Southwestern Vermont Medical Center	9,168	9,443	9,566	9,502	8,880
Springfield Hospital	2,493	2,653	2,605	2,577	2,139
University of Vermont Medical Center	62,527	61,530	60,738	60,203	64,968
Total	128,434	132,695	131,034	130,102	136,166

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

Table O-3
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Vermont Hospitals

CCS Diagnosis Groups

	BRAT	CVMC	COPL	GIFF	GRAC	MT.A.	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
Infectious & parasitic diseases	2	23	2	13	-	2	3	4	13	1	178	29	-	657	927
Neoplasms	252	387	165	54	-	239	472	737	314	283	1,286	1,799	252	8,747	14,987
Endocrine, nutritional, metabolic, immunity	138	29	8	37	-	4	20	15	35	15	167	40	18	1,603	2,129
Diseases of the blood & blood-forming organs	34	70	23	6	1	23	12	40	64	4	133	72	21	293	796
Mental disorders	2	8	3	4	-	3	5	10	24	2	81	26	13	156	337
Diseases of the nervous system and sense organs	585	1,144	227	274	-	365	499	330	616	564	3,453	103	89	9,030	17,279
Diseases of the circulatory system	137	143	39	39	-	12	46	37	59	41	385	312	32	2,929	4,211
Diseases of the respiratory system	199	613	83	107	-	102	552	318	800	141	2,710	1,520	208	5,879	13,232
Diseases of the digestive system	594	932	278	244	1	320	474	272	1,039	386	1,388	890	268	4,762	11,848
Diseases of the genitourinary system	198	345	142	178	-	8	144	173	408	263	1,594	548	251	7,658	11,910
Pregnancy, childbirth, and the puerperium	713	523	352	234	-	-	189	363	68	150	806	290	54	1,219	4,961
Diseases of the skin and subcutaneous tissue	66	86	27	30	-	11	26	199	169	49	317	50	21	3,387	4,438
Musculoskeletal system and connective tissue	359	1,221	585	247	-	181	316	564	526	144	5,567	731	115	9,743	20,299
Congenital anomalies	2	9	4	5	-	1	2	3	21	5	41	7	-	295	395
Conditions originating in the perinatal period	2	67	1	-	-	-	11	10	5	43	1	6	2	34	182
Injury & poisoning	245	447	360	83	-	4	148	219	298	151	887	313	103	2,236	5,494
Symptoms, signs & ill-defined conditions	1,195	3,006	2,253	363	-	381	354	644	1,617	1,253	2,342	1,747	680	5,843	21,678
Residual codes, unclassified, all Ecodes	10	8	20	2	-	1	30	3	30	2	51	397	12	497	1,063
Total	4,733	9,061	4,572	1,920	2	1,657	3,303	3,941	6,106	3,497	21,387	8,880	2,139	64,968	136,166

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

CCS Diagnosis Groups are based on the first listed diagnosis code.

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

Table O-4
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-residents
Clinical Classifications Software (CCS) High Level Procedure Groups by Vermont Hospitals

CCS Procedure Groups

	BRAT	CVMC	COPL	GIFF	GRAC	MT.A.	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
Operations on the nervous system	102	816	284	177	-	159	271	391	230	50	1,872	488	69	7,916	12,825
Operations on the endocrine system	1	8	2	-	-	-	-	2	3	2	76	21	-	189	304
Operations on the eye	477	921	84	186	-	358	358	193	410	413	632	2	3	5,099	9,136
Operations on the ear	-	43	-	-	-	-	14	21	63	103	1,486	23	22	1,382	3,157
Operations on the nose, mouth, and pharynx	33	94	3	61	1	4	94	70	223	129	1,544	62	30	1,772	4,120
Operations on the respiratory system	230	637	87	135	-	109	534	308	662	55	2,167	1,872	211	6,921	13,928
Operations on the cardiovascular system	142	268	94	51	-	9	75	717	199	122	737	540	185	4,330	7,469
Operations on the hemic and lymphatic system	24	10	2	3	-	2	10	7	3	2	64	46	1	402	576
Operations on the digestive system	1,792	3,479	1,308	556	-	914	1,175	914	2,764	1,685	3,230	3,127	999	13,369	35,312
Operations on the urinary system	104	193	85	112	-	-	41	120	77	128	1,230	170	161	3,085	5,506
Operations on the male genital organs	40	116	11	19	-	-	26	33	18	92	159	48	36	772	1,370
Operations on the female genital organs	152	678	98	81	-	1	176	109	352	121	1,160	1,346	116	1,755	6,145
Obstetrical procedures	708	444	330	222	-	-	141	334	3	140	466	170	30	877	3,865
Operations on the musculoskeletal system	542	1,005	780	218	-	50	295	462	698	281	5,411	585	206	6,873	17,406
Operations on the integumentary system	386	349	1,404	99	1	51	93	260	401	174	1,153	380	70	10,226	15,047
Total	4,733	9,061	4,572	1,920	2	1,657	3,303	3,941	6,106	3,497	21,387	8,880	2,139	64,968	136,166

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

CCS procedure groups are based on primary CPT.

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

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group CCS Single Level Procedure Group	2015	2016	2017	2018	2019
1 Operations on the nervous system					
1 Incision & excision of CNS	-	-	-	-	1
2 Insertion, replacem, rem of extracranial ventricular shunt	16	8	13	18	40
3 Laminectomy, excision intervertebral disc	443	367	323	325	341
4 Diagnostic spinal tap	37	59	58	53	144
5 Insert cath, spinal stimulator, inject into spinal canal	4,523	4,386	4,181	4,088	3,893
6 Decompression peripheral nerve	1,585	1,618	1,636	1,532	1,570
7 Other diagnostic nervous system procedures	2,676	2,704	2,454	2,499	2,587
8 Other non-OR or closed therapeutic nerv syst procs	2,413	2,341	2,299	2,168	2,382
9 Other OR therapeutic nervous system procedures	1,765	1,842	1,824	1,650	1,867
Total	13,458	13,325	12,788	12,333	12,825
2 Operations on the endocrine system					
10 Thyroidectomy, partial or complete	160	211	174	150	158
11 Diagnostic endocrine procedures	28	27	49	69	64
12 Other therapeutic endocrine procedures	81	93	101	93	82
Total	269	331	324	312	304
3 Operations on the eye					
13 Corneal transplant	10	9	4	4	12
14 Glaucoma procedures	307	352	344	408	513
15 Lens & cataract procedures	4,320	4,280	4,404	4,795	4,479
16 Repair of retinal tear, detachment	246	182	185	278	251
17 Destruction of lesion of retina & choroid	109	87	52	82	139
18 Diagnostic procedures on eye	37	23	45	54	32
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	391	403	395	494	497
20 Other intraocular therapeutic procedures	2,195	2,418	2,463	2,585	3,085
21 Other extraocular muscle & orbit therapeutic procedures	112	104	108	128	128
Total	7,727	7,858	8,000	8,828	9,136
4 Operations on the ear					
22 Tympanoplasty	69	76	77	97	81
23 Myringotomy	911	873	834	827	798

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group CCS Single Level Procedure Group	2015	2016	2017	2018	2019
24 Mastoidectomy	19	30	16	24	17
25 Diagnostic procedures on ear	1	3	-	6	36
26 Other therapeutic ear procedures	1,971	2,231	2,117	2,213	2,225
Total	2,971	3,213	3,044	3,167	3,157
5 Operations on the nose, mouth, and pharynx					
27 Control of epistaxis	145	154	173	175	204
28 Plastic procedures on nose	198	140	160	267	332
29 Dental procedures	55	37	41	37	50
30 Tonsillectomy and/or adenoidectomy	629	571	566	595	743
31 Diagnostic procedures on nose, mouth & pharynx	1,751	1,955	1,917	2,018	2,364
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	26	44	23	28	28
33 Other OR therapeutic procedures on nose, mouth & pharynx	371	345	336	370	399
Total	3,175	3,246	3,216	3,490	4,120
6 Operations on the respiratory system					
34 Tracheostomy, temporary & permanent	2	5	10	4	3
35 Tracheoscopy & laryngoscopy with biopsy	1,747	1,643	1,557	1,924	1,870
36 Lobectomy or pneumonectomy	-	1	-	-	-
37 Diagnostic bronchoscopy & biopsy of bronchus	295	369	311	361	391
38 Other diagnostic procedures on lung & bronchus	9,740	9,660	9,820	10,199	11,133
39 Incision of pleura, thoracentesis, chest drainage	227	236	234	186	208
40 Other diagnostic proc of respiratory tract & mediastinum	13	15	9	96	150
41 Other non-OR therapeutic procedures on respiratory system	11	11	11	21	16
42 Other OR therapeutic procedures on respiratory system	141	153	114	143	157
Total	12,176	12,093	12,066	12,934	13,928
7 Operations on the cardiovascular system					
43 Heart valve procedures	-	1	1	1	2
45 Percutaneous transluminal coronary angioplasty (PTCA)	23	10	19	14	30
47 Diagnostic cardiac catheterization, coronary arteriography	1,081	1,141	1,062	1,082	1,012
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	483	1,474	2,047	293	267
49 Other OR heart procedures	7	4	13	13	11

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group CCS Single Level Procedure Group	2015	2016	2017	2018	2019
51 Endarterectomy, vessel of head & neck	-	2	-	-	-
52 Aortic resection, replacement or anastomosis	1	-	-	-	2
53 Varicose vein stripping, lower limb	205	209	219	215	246
54 Other vascular catheterization, not heart	1,098	1,026	1,072	1,085	1,098
56 Other vascular bypass & shunt, not heart	6	6	5	3	4
57 Creat, revis, rem of arteriovenous fistula or cannula for dialysis	148	165	280	290	278
58 Hemodialysis	12	56	25	30	47
59 Other OR procedures on vessels of head & neck	97	100	95	88	97
60 Embolectomy & endarterectomy of lower limbs	-	1	1	3	-
61 Other OR procedures on vessels other than head & neck	397	403	267	314	302
62 Other diagnostic cardiovascular procedures	677	663	550	696	750
63 Other non-OR therapeutic cardiovascular procedures	3,036	3,275	3,193	3,478	3,323
Total	7,271	8,536	8,849	7,605	7,469
8 Operations on the hemic and lymphatic system					
64 Bone marrow transplant	38	23	38	35	47
65 Bone marrow biopsy	41	75	67	107	303
66 Procedures on spleen	1	1	-	1	-
67 Other therapeutic procedures, hemic & lymphatic system	175	149	166	190	226
Total	255	248	271	333	576
9 Operations on the digestive system					
68 Injection or ligation of esophageal varices	47	46	39	55	49
69 Esophageal dilatation	484	509	473	436	400
70 Upper gastrointestinal endoscopy, biopsy	5,109	5,434	5,376	5,175	5,419
71 Gastrostomy, temporary & permanent	152	114	97	105	110
72 Colostomy, temporary & permanent	2	2	1	1	1
73 Ileostomy & other enterostomy	14	16	15	19	20
75 Small bowel resection	1	-	-	-	-
76 Colonoscopy & biopsy	23,156	24,716	24,036	21,953	20,956
77 Proctoscopy & anorectal biopsy	615	664	621	589	602
78 Colorectal resection	17	14	9	7	8

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2015	2016	2017	2018	2019
79 Local excision of large intestine lesion (not endoscopic)	2	-	1	-	-
80 Appendectomy	57	59	62	71	98
81 Hemorrhoid procedures	226	203	198	229	212
82 Endoscopic retrograde cannulation of pancreas (ERCP)	146	159	148	136	136
83 Biopsy of liver	2	1	-	-	4
84 Cholecystectomy & common duct exploration	1,052	1,024	925	919	886
85 Inguinal & femoral hernia repair	1,118	1,062	1,089	1,073	1,136
86 Other hernia repair	865	846	882	791	741
87 Laparoscopy	86	82	45	77	84
88 Abdominal paracentesis	258	309	352	382	402
89 Exploratory laparotomy	4	-	3	1	3
90 Excision, lysis peritoneal adhesions	2	1	-	-	-
91 Peritoneal dialysis	2,683	2,769	2,658	2,531	3,038
92 Other bowel diagnostic procedures	-	-	1	-	-
93 Other non-OR upper GI therapeutic procedures	36	21	26	22	17
94 Other OR upper GI therapeutic procedures	33	33	47	55	34
95 Other non-OR lower GI therapeutic procedures	58	64	62	34	48
96 Other OR lower GI therapeutic procedures	173	198	189	181	200
97 Other gastrointestinal diagnostic procedures	220	280	290	220	452
98 Other non-OR gastrointestinal therapeutic procedures	15	66	67	97	129
99 Other OR gastrointestinal therapeutic procedures	87	127	133	128	127
Total	36,720	38,819	37,845	35,287	35,312
10 Operations on the urinary system					
100 Endoscopy & endoscopic biopsy of the urinary tract	1,667	1,655	1,309	1,198	1,237
101 Transurethral excision, drainage, rem urinary obstruction	655	614	622	691	768
102 Ureteral catheterization	269	254	282	303	282
103 Nephrotomy & nephrostomy	10	72	103	114	129
104 Nephrectomy, partial or complete	2	4	1	9	20
106 Genitourinary incontinence procedures	159	209	197	183	207
107 Extracorporeal lithotripsy, urinary	780	842	855	901	841

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2015	2016	2017	2018	2019
108 Indwelling catheter	518	574	438	575	755
109 Procedures on the urethra	191	218	201	176	210
110 Other diagnostic procedures of urinary tract	9	11	13	28	66
111 Other non-OR therapeutic procedures of urinary tract	739	803	784	724	676
112 Other OR therapeutic procedures of urinary tract	275	265	326	326	315
Total	5,274	5,521	5,131	5,228	5,506
11 Operations on the male genital organs					
113 Transurethral resection of prostate (TURP)	87	144	145	156	141
114 Open prostatectomy	1	3	6	104	118
115 Circumcision	249	286	282	272	272
116 Diagnostic procedures, male genital	223	209	237	379	292
117 Other non-OR therapeutic procedures, male genital	164	162	158	145	152
118 Other OR therapeutic procedures, male genital	476	504	490	432	395
Total	1,200	1,308	1,318	1,488	1,370
12 Operations on the female genital organs					
119 Oophorectomy, unilateral & bilateral	303	327	387	386	400
120 Other operations on ovary	2	35	64	84	78
121 Ligation of fallopian tubes	216	139	136	118	65
123 Other operations on fallopian tubes	28	27	4	2	5
124 Hysterectomy, abdominal & vaginal	554	633	612	670	625
125 Other excision of cervix & uterus	363	401	402	333	422
126 Abortion (termination of pregnancy)	33	47	32	73	72
127 D&C, aspiration after delivery or abortion	210	185	179	184	186
128 Diagnostic dilatation & curettage (D&C)	45	38	34	34	33
129 Repair cystocele & rectocele, oblit of vaginal vault	98	120	112	102	135
130 Other diagnostic procedures, female organs	3,478	3,182	3,061	3,026	2,990
131 Other non-OR therapeutic procedures, female organs	572	538	650	575	712
132 Other OR therapeutic procedures, female organs	316	336	375	400	422
Total	6,218	6,008	6,048	5,987	6,145

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group CCS Single Level Procedure Group	2015	2016	2017	2018	2019
13 Obstetrical procedures					
122 Removal of ectopic pregnancy	5	13	10	11	13
134 Cesarean section	-	-	-	2	-
135 Forceps, vacuum & breech delivery	2	1	4	1	1
137 Other procedures to assist delivery	43	42	48	55	46
138 Diagnostic amniocentesis	-	1	1	-	1
139 Fetal monitoring	3,833	3,826	4,038	4,005	3,767
140 Repair of current obstetric laceration	1	-	5	2	-
141 Other therapeutic obstetrical procedures	22	24	26	22	37
Total	3,906	3,907	4,132	4,098	3,865
14 Operations on the musculoskeletal system					
142 Partial excision bone	444	449	467	447	421
143 Bunionectomy or repair of toe deformities	505	495	499	484	514
144 Treatment, facial fracture or dislocation	76	78	50	55	64
145 Treatment, fracture or disloc of radius & ulna	416	464	450	434	576
146 Treatment, fracture or disloc of hip & femur	17	13	15	14	8
147 Treatment, fracture or disloc of lower extremity	460	474	466	535	596
148 Other fracture & dislocation procedure	538	507	502	516	503
149 Arthroscopy	395	353	374	363	345
150 Division of joint capsule, ligament or cartilage	93	90	77	62	50
151 Excision of semilunar cartilage of knee	1,284	1,227	1,071	967	870
152 Arthroplasty knee	47	56	36	207	340
153 Hip replacement, total & partial	45	31	23	34	55
154 Arthroplasty other than hip or knee	274	222	244	216	186
155 Arthrocentesis	3,932	5,229	5,307	5,898	6,637
156 Injections & aspirations of muscles, tendons, etc.	1,284	1,277	1,290	1,394	1,747
157 Amputation of lower extremity	134	131	139	125	154
158 Spinal fusion	31	30	47	119	127
159 Other diagnostic procedures on musculoskeletal system	87	78	68	60	91
160 Other therapeutic procedures on muscles & tendons	2,450	2,614	2,586	2,625	2,460

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-5
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2015 - 2019

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2015	2016	2017	2018	2019
161 Other OR therapeutic procedures on bone	650	601	637	593	564
162 Other OR therapeutic procedures on joints	1,051	1,160	1,044	1,058	1,028
163 Other non-OR therapeutic procedures on musc system	16	25	40	29	24
164 Other OR therapeutic procedures on musc system	80	62	74	61	46
Total	14,309	15,666	15,506	16,296	17,406
15 Operations on the integumentary system					
165 Breast biopsy & other diagnostic procedures on breast	1,056	1,029	1,052	1,369	1,501
166 Lumpectomy, quadrantectomy of breast	502	455	382	538	639
167 Mastectomy	64	68	72	120	158
168 Incision & drainage, skin & subcutaneous tissue	280	261	172	172	192
169 Debridement of wound, infection or burn	665	660	337	346	496
170 Excision of skin lesion	4,968	4,720	4,624	4,663	5,509
171 Suture of skin & subcutaneous tissue	972	721	664	580	592
172 Skin graft	493	561	673	629	642
173 Other diagnostic proc on skin & subcutaneous tissue	96	160	280	267	1,533
174 Other non-OR therapeutic procedures on skin & breast	4,011	3,604	3,782	3,618	3,344
175 Other OR therapeutic procedures on skin & breast	398	377	458	414	441
Total	13,505	12,616	12,496	12,716	15,047
Yearly Total	128,434	128,434	132,695	131,034	130,102

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary procedure code (ICD-9-CM or CPT, depending on date) in CCS high-level groups 1 through 15.

Table O-6
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
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	40	1,154	1,549	666	569	401	354	2,743	1,990	4,733
Central Vermont Medical Center	152	1,903	3,549	1,122	1,058	668	609	5,604	3,457	9,061
Copley Hospital	22	863	1,514	540	456	486	691	2,399	2,173	4,572
Gifford Medical Center	27	499	733	221	204	130	106	1,259	661	1,920
Grace Cottage Family Health & Hospital	-	-	1	-	-	-	1	1	1	2
Mt. Ascutney Hospital and Health Center	1	166	613	252	252	214	159	780	877	1,657
North Country Hospital	68	636	1,153	489	394	317	246	1,857	1,446	3,303
Northeastern Vermont Regional Hospital	100	803	1,524	470	420	294	330	2,427	1,514	3,941
Northwestern Medical Center	166	1,241	2,578	719	608	430	364	3,985	2,121	6,106
Porter Medical Center	183	573	1,446	417	398	280	200	2,202	1,295	3,497
Rutland Regional Medical Center	403	3,748	7,375	2,813	2,673	2,052	2,323	11,526	9,861	21,387
Southwestern Vermont Medical Center	72	1,723	3,222	1,111	1,072	912	768	5,017	3,863	8,880
Springfield Hospital	54	399	901	253	297	131	104	1,354	785	2,139
University of Vermont Medical Center	2,675	8,967	18,295	9,397	9,124	7,101	9,409	29,937	35,031	64,968
Total	3,963	22,675	44,453	18,470	17,525	13,416	15,664	71,091	65,075	136,166

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

Table O-7
2019 Vermont Hospital Outpatient 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	1,747	36.9%	741	15.7%	28	0.6%	49	1.0%	2,150	45.4%	18	0.4%	-	0.0%	4,733	3.5%
Central Vermont Medical Center	3,423	37.8%	1,134	12.5%	156	1.7%	85	0.9%	4,198	46.3%	65	0.7%	-	0.0%	9,061	6.7%
Copley Hospital	1,069	23.4%	519	11.4%	34	0.7%	111	2.4%	1,510	33.0%	1,329	29.1%	-	0.0%	4,572	3.4%
Gifford Medical Center	706	36.8%	317	16.5%	22	1.1%	12	0.6%	841	43.8%	22	1.1%	-	0.0%	1,920	1.4%
Grace Cottage Family Health & Hospital	1	50.0%	-	0.0%	-	0.0%	-	0.0%	1	50.0%	-	0.0%	-	0.0%	2	0.0%
Mt. Ascutney Hospital and Health Center	830	50.1%	130	7.8%	-	0.0%	10	0.6%	672	40.6%	15	0.9%	-	0.0%	1,657	1.2%
North Country Hospital	1,511	45.7%	588	17.8%	26	0.8%	32	1.0%	1,107	33.5%	8	0.2%	31	0.9%	3,303	2.4%
Northeastern Vermont Regional Hospital	1,394	35.4%	762	19.3%	69	1.8%	38	1.0%	1,645	41.7%	33	0.8%	-	0.0%	3,941	2.9%
Northwestern Medical Center	2,333	38.2%	826	13.5%	77	1.3%	82	1.3%	2,721	44.6%	67	1.1%	-	0.0%	6,106	4.5%
Porter Medical Center	1,243	35.5%	431	12.3%	16	0.5%	1	0.0%	1,776	50.8%	25	0.7%	5	0.1%	3,497	2.6%
Rutland Regional Medical Center	10,869	50.8%	3,131	14.6%	276	1.3%	208	1.0%	6,777	31.7%	126	0.6%	-	0.0%	21,387	15.7%
Southwestern Vermont Medical Center	4,276	48.2%	1,182	13.3%	79	0.9%	61	0.7%	3,247	36.6%	35	0.4%	-	0.0%	8,880	6.5%
Springfield Hospital	861	40.3%	312	14.6%	25	1.2%	20	0.9%	882	41.2%	39	1.8%	-	0.0%	2,139	1.6%
University of Vermont Medical Center	36,646	56.4%	4,858	7.5%	931	1.4%	591	0.9%	21,129	32.5%	562	0.9%	251	0.4%	64,968	47.7%
Total	66,909	49.1%	14,931	11.0%	1,739	1.3%	1,300	1.0%	48,656	35.7%	2,344	1.7%	287	0.2%	136,166	100.0%

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

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

Table O-8
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups by Principal Payer

CCS Diagnosis Groups	Principal Payer															
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		Total	
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Infectious & parasitic diseases	694	74.9%	71	7.7%	13	1.4%	-	0.0%	144	15.5%	5	0.5%	-	0.0%	927	0.7%
Neoplasms	9,787	65.3%	961	6.4%	160	1.1%	4	0.0%	4,016	26.8%	55	0.4%	4	0.0%	14,987	11.0%
Endocrine, nutritional, metabolic, immunity	1,340	62.9%	214	10.1%	18	0.8%	-	0.0%	549	25.8%	5	0.2%	3	0.1%	2,129	1.6%
Diseases of the blood & blood-forming organs	467	58.7%	69	8.7%	9	1.1%	-	0.0%	246	30.9%	4	0.5%	1	0.1%	796	0.6%
Mental disorders	155	46.0%	67	19.9%	4	1.2%	-	0.0%	107	31.8%	4	1.2%	-	0.0%	337	0.2%
Diseases of the nervous system and sense organs	11,336	65.6%	1,492	8.6%	229	1.3%	134	0.8%	4,015	23.2%	65	0.4%	8	0.0%	17,279	12.7%
Diseases of the circulatory system	2,486	59.0%	284	6.7%	49	1.2%	7	0.2%	1,350	32.1%	24	0.6%	11	0.3%	4,211	3.1%
Diseases of the respiratory system	6,974	52.7%	1,708	12.9%	215	1.6%	12	0.1%	4,249	32.1%	66	0.5%	8	0.1%	13,232	9.7%
Diseases of the digestive system	4,514	38.1%	1,615	13.6%	169	1.4%	63	0.5%	5,379	45.4%	95	0.8%	13	0.1%	11,848	8.7%
Diseases of the genitourinary system	6,253	52.5%	1,137	9.5%	123	1.0%	3	0.0%	3,895	32.7%	309	2.6%	190	1.6%	11,910	8.7%
Pregnancy, childbirth, and the puerperium	85	1.7%	2,130	42.9%	56	1.1%	-	0.0%	2,632	53.1%	55	1.1%	3	0.1%	4,961	3.6%
Diseases of the skin and subcutaneous tissue	3,595	81.0%	264	5.9%	19	0.4%	11	0.2%	529	11.9%	19	0.4%	1	0.0%	4,438	3.3%
Musculoskeletal system and connective tissue	11,094	54.7%	1,940	9.6%	278	1.4%	634	3.1%	6,269	30.9%	69	0.3%	15	0.1%	20,299	14.9%
Congenital anomalies	54	13.7%	93	23.5%	8	2.0%	-	0.0%	234	59.2%	6	1.5%	-	0.0%	395	0.3%
Conditions originating in the perinatal period	1	0.5%	75	41.2%	1	0.5%	-	0.0%	91	50.0%	14	7.7%	-	0.0%	182	0.1%
Injury & poisoning	1,484	27.0%	825	15.0%	102	1.9%	427	7.8%	2,553	46.5%	84	1.5%	19	0.3%	5,494	4.0%
Symptoms, signs & ill-defined conditions	6,090	28.1%	1,885	8.7%	279	1.3%	5	0.0%	12,017	55.4%	1,391	6.4%	11	0.1%	21,678	15.9%
Residual codes, unclassified, all Ecodes	500	47.0%	101	9.5%	7	0.7%	-	0.0%	381	35.8%	74	7.0%	-	0.0%	1,063	0.8%
Total	66,909	49.1%	14,931	11.0%	1,739	1.3%	1,300	1.0%	48,656	35.7%	2,344	1.7%	287	0.2%	136,166	100.0%

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

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

CCS Diagnosis Groups are based on the first listed diagnosis code.

Table O-9
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Procedure Groups by Principal Payer

CCS High Level Procedure Groups	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		
Operations on the nervous system	5,997	46.8%	1,466	11.4%	231	1.8%	447	3.5%	4,613	36.0%	61	0.5%	10	0.1%	12,825	9.4%
Operations on the endocrine system	108	35.5%	28	9.2%	4	1.3%	-	0.0%	161	53.0%	3	1.0%	-	0.0%	304	0.2%
Operations on the eye	7,135	78.1%	332	3.6%	114	1.2%	6	0.1%	1,513	16.6%	34	0.4%	2	0.0%	9,136	6.7%
Operations on the ear	1,867	59.1%	491	15.6%	33	1.0%	-	0.0%	750	23.8%	16	0.5%	-	0.0%	3,157	2.3%
Operations on the nose, mouth, and pharynx	1,660	40.3%	806	19.6%	70	1.7%	7	0.2%	1,553	37.7%	22	0.5%	2	0.0%	4,120	3.0%
Operations on the respiratory system	7,948	57.1%	1,540	11.1%	222	1.6%	12	0.1%	4,125	29.6%	72	0.5%	9	0.1%	13,928	10.2%
Operations on the cardiovascular system	4,115	55.1%	691	9.3%	101	1.4%	6	0.1%	2,483	33.2%	33	0.4%	40	0.5%	7,469	5.5%
Operations on the hemic and lymphatic system	264	45.8%	45	7.8%	10	1.7%	-	0.0%	254	44.1%	2	0.3%	1	0.2%	576	0.4%
Operations on the digestive system	13,776	39.0%	3,229	9.1%	460	1.3%	63	0.2%	17,154	48.6%	438	1.2%	192	0.5%	35,312	25.9%
Operations on the urinary system	3,769	68.5%	395	7.2%	60	1.1%	2	0.0%	1,246	22.6%	31	0.6%	3	0.1%	5,506	4.0%
Operations on the male genital organs	510	37.2%	182	13.3%	32	2.3%	-	0.0%	625	45.6%	21	1.5%	-	0.0%	1,370	1.0%
Operations on the female genital organs	977	15.9%	1,299	21.1%	64	1.0%	-	0.0%	3,746	61.0%	56	0.9%	3	0.0%	6,145	4.5%
Obstetrical procedures	48	1.2%	1,807	46.8%	33	0.9%	-	0.0%	1,931	50.0%	45	1.2%	1	0.0%	3,865	2.8%
Operations on the musculoskeletal system	8,684	49.9%	1,821	10.5%	217	1.2%	733	4.2%	5,821	33.4%	111	0.6%	19	0.1%	17,406	12.8%
Operations on the integumentary system	10,051	66.8%	799	5.3%	88	0.6%	24	0.2%	2,681	17.8%	1,399	9.3%	5	0.0%	15,047	11.1%
Total	66,909	49.1%	14,931	11.0%	1,739	1.3%	1,300	1.0%	48,656	35.7%	2,344	1.7%	287	0.2%	136,166	100.0%

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

Outpatient procedures are outpatient visits that did not originate in the ED and that have a primary CPT code in CCS high-level groups 1 through 15.

CCS procedure groups are based on primary CPT.

Table O-10
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-residents
Outpatient Visits and Average Charges by Vermont Hospitals
 Procedure Categories defined by Clinical Classifications Software for Services and Procedures

CCS Single Level Procedure Categories

	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
1 Incision & excision of CNS															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 26,593	\$ 26,593
2 Insertion, replacem, rem of extracranial ventricular shunt															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	40	40
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 6,041	\$ 6,041
3 Laminectomy, excision intervertebral disc															
N	-	-	-	11	-	-	-	-	17	-	71	-	-	242	341
Avg\$	-	-	-	\$ 26,928	-	-	-	-	\$ 16,364	-	\$ 17,687	-	-	\$ 16,377	\$ 16,989
4 Diagnostic spinal tap															
N	1	19	2	4	-	-	5	-	3	-	5	10	-	95	144
Avg\$	\$ 1,530	\$ 2,285	\$ 1,668	\$ 5,452	-	-	\$ 4,880	-	\$ 1,556	-	\$ 2,376	\$ 3,062	-	\$ 5,044	\$ 4,311
5 Insert cath, spinal stimulator, inject into spinal canal															
N	-	411	107	70	-	50	127	146	67	-	644	396	1	1,874	3,893
Avg\$	-	\$ 910	\$ 1,460	\$ 2,041	-	\$ 2,229	\$ 3,171	\$ 1,619	\$ 452	-	\$ 1,796	\$ 2,957	\$ 4,107	\$ 3,463	\$ 2,639
6 Decompression peripheral nerve															
N	96	146	132	61	-	-	110	95	119	48	173	39	65	486	1,570
Avg\$	\$ 5,149	\$ 6,755	\$ 4,017	\$ 10,686	-	-	\$ 8,847	\$ 8,576	\$ 3,746	\$ 5,371	\$ 4,882	\$ 3,852	\$ 2,358	\$ 4,526	\$ 5,415
7 Other diagnostic nervous system procedures															
N	3	4	-	-	-	10	1	1	13	-	602	1	-	1,952	2,587
Avg\$	\$ 4,597	\$ 9,041	-	-	-	\$ 8,640	\$ 2,173	\$ 212	\$ 422	-	\$ 1,232	\$ 3,458	-	\$ 1,805	\$ 1,705
8 Other non-OR or closed therapeutic nerv syst procs															
N	1	223	37	25	-	74	27	82	2	1	142	37	-	1,731	2,382
Avg\$	\$ 6,142	\$ 2,127	\$ 1,437	\$ 2,302	-	\$ 3,961	\$ 3,053	\$ 2,745	\$ 439	\$ 353	\$ 1,312	\$ 3,899	-	\$ 4,931	\$ 4,223
9 Other OR therapeutic nervous system procedures															
N	1	13	6	6	-	25	1	67	9	1	235	5	3	1,495	1,867
Avg\$	\$ 6,765	\$ 19,220	\$ 15,216	\$ 23,933	-	\$ 6,855	\$ 3,096	\$ 8,744	\$ 6,806	\$ 10,118	\$ 4,954	\$ 8,280	\$ 15,259	\$ 7,566	\$ 7,438
10 Thyroidectomy, partial or complete															
N	-	6	2	-	-	-	-	-	3	1	20	10	-	116	158
Avg\$	-	\$ 15,265	\$ 23,946	-	-	-	-	-	\$ 17,142	\$ 28,698	\$ 16,690	\$ 20,165	-	\$ 18,034	\$ 18,019
11 Diagnostic endocrine procedures															
N	-	-	-	-	-	-	-	2	-	-	50	-	-	12	64
Avg\$	-	-	-	-	-	-	-	\$ 433	-	-	\$ 980	-	-	\$ 1,019	\$ 970
12 Other therapeutic endocrine procedures															
N	1	2	-	-	-	-	-	-	-	1	6	11	-	61	82
Avg\$	\$ 10,053	\$ 13,379	-	-	-	-	-	-	-	\$ 21,093	\$ 9,670	\$ 27,998	-	\$ 15,303	\$ 16,554

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).
 Column headers denote hospitals: see Appendix K.
 Use charge data with caution. See Appendix A for details.

Table O-10
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-residents
Outpatient Visits and Average Charges by Vermont Hospitals
 Procedure Categories defined by Clinical Classifications Software for Services and Procedures

CCS Single Level Procedure Categories

	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
13 Corneal transplant															
N	-	-	-	-	-	-	-	-	-	-	1	-	-	11	12
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 4,644	-	-	\$ 25,635	\$ 23,885
14 Glaucoma procedures															
N	-	39	-	-	-	-	4	9	-	-	67	-	-	394	513
Avg\$	-	\$ 841	-	-	-	-	\$ 18,945	\$ 24,549	-	-	\$ 1,387	-	-	\$ 2,953	\$ 3,092
15 Lens & cataract procedures															
N	475	876	84	142	-	358	350	184	404	382	378	-	-	846	4,479
Avg\$	\$ 6,680	\$ 5,436	\$ 6,011	\$ 7,835	-	\$ 4,526	\$ 7,539	\$ 12,441	\$ 5,375	\$ 4,193	\$ 5,430	-	-	\$ 4,707	\$ 5,784
16 Repair of retinal tear, detachment															
N	-	1	-	-	-	-	-	-	-	-	-	-	-	250	251
Avg\$	-	\$ 1,050	-	-	-	-	-	-	-	-	-	-	-	\$ 8,564	\$ 8,534
17 Destruction of lesion of retina & choroid															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	139	139
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 2,222	\$ 2,222
18 Diagnostic procedures on eye															
N	-	-	-	-	-	-	-	-	-	-	5	-	-	27	32
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 3,694	-	-	\$ 2,626	\$ 2,793
19 Other therapeutic procedures on eyelids, conjunctiva, cornea															
N	-	2	-	-	-	-	4	-	5	31	180	2	3	270	497
Avg\$	-	\$ 10,638	-	-	-	-	\$ 6,460	-	\$ 4,190	\$ 5,123	\$ 2,640	\$ 4,379	\$ 4,937	\$ 5,573	\$ 4,487
20 Other intraocular therapeutic procedures															
N	2	1	-	-	-	-	-	-	1	-	1	-	-	3,080	3,085
Avg\$	\$ 11,813	\$ 691	-	-	-	-	-	-	\$ 6,454	-	\$ 4,597	-	-	\$ 5,213	\$ 5,216
21 Other extraocular muscle & orbit therapeutic procedures															
N	-	2	-	44	-	-	-	-	-	-	-	-	-	82	128
Avg\$	-	\$ 9,784	-	\$ 12,644	-	-	-	-	-	-	-	-	-	\$ 7,193	\$ 9,107
22 Tympanoplasty															
N	-	8	-	-	-	-	-	-	3	17	7	5	-	41	81
Avg\$	-	\$ 10,022	-	-	-	-	-	-	\$ 4,532	\$ 8,083	\$ 10,569	\$ 7,547	-	\$ 17,291	\$ 12,986
23 Myringotomy															
N	-	30	-	-	-	-	12	20	51	83	104	14	17	467	798
Avg\$	-	\$ 5,225	-	-	-	-	\$ 7,273	\$ 8,526	\$ 4,019	\$ 5,111	\$ 2,049	\$ 3,215	\$ 2,890	\$ 3,573	\$ 3,784
24 Mastoidectomy															
N	-	-	-	-	-	-	-	-	-	-	2	-	-	15	17
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 22,049	-	-	\$ 30,125	\$ 29,175

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).
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CCS Single Level Procedure Categories

	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
25 Diagnostic procedures on ear															
N	-	-	-	-	-	-	-	-	-	-	12	-	-	24	36
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 1,317	-	-	\$ 607	\$ 844
26 Other therapeutic ear procedures															
N	-	5	-	-	-	-	2	1	9	3	1,361	4	5	835	2,225
Avg\$	-	\$ 4,415	-	-	-	-	\$ 7,578	\$ 6,584	\$ 5,173	\$ 11,614	\$ 244	\$ 3,927	\$ 2,233	\$ 4,416	\$ 1,875
27 Control of epistaxis															
N	-	-	-	-	-	-	2	1	-	-	158	1	1	41	204
Avg\$	-	-	-	-	-	-	\$ 7,270	\$ 6,123	-	-	\$ 574	\$ 6,088	\$ 4,419	\$ 1,098	\$ 818
28 Plastic procedures on nose															
N	-	5	-	-	-	-	8	3	89	29	54	10	3	131	332
Avg\$	-	\$ 12,925	-	-	-	-	\$ 11,093	\$ 20,563	\$ 7,818	\$ 13,147	\$ 10,128	\$ 10,167	\$ 13,654	\$ 15,926	\$ 12,253
29 Dental procedures															
N	30	-	-	-	-	-	-	-	-	-	2	-	-	18	50
Avg\$	\$ 13,369	-	-	-	-	-	-	-	-	-	\$ 624	-	-	\$ 13,133	\$ 12,774
30 Tonsillectomy and/or adenoidectomy															
N	-	59	-	-	-	-	42	48	107	50	118	19	21	279	743
Avg\$	-	\$ 9,143	-	-	-	-	\$ 8,928	\$ 15,305	\$ 5,063	\$ 8,653	\$ 6,798	\$ 5,678	\$ 6,887	\$ 6,644	\$ 7,445
31 Diagnostic procedures on nose, mouth & pharynx															
N	3	7	3	61	1	4	28	17	5	15	1,121	28	1	1,070	2,364
Avg\$	\$ 231	\$ 1,856	\$ 299	\$ 576	\$ 576	\$ 291	\$ 567	\$ 210	\$ 1,373	\$ 2,051	\$ 495	\$ 541	\$ 7,194	\$ 875	\$ 686
32 Other non-OR therapeutic procedures on nose, mouth & pharynx															
N	-	3	-	-	-	-	-	1	7	-	16	-	1	-	28
Avg\$	-	\$ 3,657	-	-	-	-	-	\$ 5,433	\$ 2,187	-	\$ 2,517	-	\$ 6,220	-	\$ 2,793
33 Other OR therapeutic procedures on nose, mouth & pharynx															
N	-	20	-	-	-	-	14	-	15	35	75	4	3	233	399
Avg\$	-	\$ 12,030	-	-	-	-	\$ 8,475	-	\$ 10,998	\$ 10,811	\$ 6,246	\$ 7,880	\$ 4,771	\$ 16,906	\$ 13,424
34 Tracheostomy, temporary & permanent															
N	-	-	-	-	-	-	-	-	-	-	1	-	-	2	3
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 11,642	-	-	\$ 12,456	\$ 12,185
35 Tracheoscopy & laryngoscopy with biopsy															
N	-	43	-	-	-	-	-	-	6	3	1,008	1	-	809	1,870
Avg\$	-	\$ 1,912	-	-	-	-	-	-	\$ 6,945	\$ 7,787	\$ 479	\$ 10,117	-	\$ 1,147	\$ 838
37 Diagnostic bronchoscopy & biopsy of bronchus															
N	-	6	-	-	-	-	11	-	33	-	46	13	-	282	391
Avg\$	-	\$ 6,065	-	-	-	-	\$ 16,259	-	\$ 2,535	-	\$ 7,269	\$ 6,906	-	\$ 10,525	\$ 9,440

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CCS Single Level Procedure Categories

	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
38 Other diagnostic procedures on lung & bronchus															
N	227	573	83	135	-	109	493	294	607	47	958	1,841	209	5,557	11,133
Avg\$	\$ 504	\$ 745	\$ 626	\$ 1,645	-	\$ 921	\$ 1,386	\$ 1,376	\$ 333	\$ 600	\$ 1,290	\$ 364	\$ 593	\$ 1,176	\$ 970
39 Incision of pleura, thoracentesis, chest drainage															
N	3	5	4	-	-	-	4	13	7	-	21	13	-	138	208
Avg\$	\$ 4,434	\$ 7,658	\$ 1,573	-	-	-	\$ 4,656	\$ 7,735	\$ 1,349	-	\$ 3,569	\$ 3,069	-	\$ 4,139	\$ 4,195
40 Other diagnostic proc of respiratory tract & mediastinum															
N	-	-	-	-	-	-	23	-	-	-	124	-	-	3	150
Avg\$	-	-	-	-	-	-	\$ 485	-	-	-	\$ 414	-	-	\$ 5,550	\$ 528
41 Other non-OR therapeutic procedures on respiratory system															
N	-	1	-	-	-	-	-	-	-	-	-	-	-	15	16
Avg\$	-	\$ 1,694	-	-	-	-	-	-	-	-	-	-	-	\$ 6,561	\$ 6,256
42 Other OR therapeutic procedures on respiratory system															
N	-	9	-	-	-	-	3	1	9	5	9	4	2	115	157
Avg\$	-	\$ 8,712	-	-	-	-	\$ 3,848	\$ 10,828	\$ 6,203	\$ 7,874	\$ 8,354	\$ 9,336	\$ 5,655	\$ 12,204	\$ 10,976
43 Heart valve procedures															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 81,457	\$ 81,457
45 Percutaneous transluminal coronary angioplasty (PTCA)															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	30	30
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 42,245	\$ 42,245
47 Diagnostic cardiac catheterization, coronary arteriography															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1,012	1,012
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 22,666	\$ 22,666
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib															
N	-	19	-	-	-	-	-	-	-	-	12	19	-	217	267
Avg\$	-	\$ 25,732	-	-	-	-	-	-	-	-	\$ 43,707	\$ 18,972	-	\$ 53,313	\$ 48,475
49 Other OR heart procedures															
N	-	-	-	-	-	-	-	-	-	-	1	-	-	10	11
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 415	-	-	\$ 39,933	\$ 36,340
52 Aortic resection, replacement or anastomosis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 14,802	\$ 14,802
53 Varicose vein stripping, lower limb															
N	4	8	-	-	-	1	5	-	-	-	-	-	-	228	246
Avg\$	\$ 8,219	\$ 11,897	-	-	-	\$ 22,209	\$ 12,867	-	-	-	-	-	-	\$ 11,549	\$ 11,576

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
54 Other vascular catheterization, not heart															
N	19	97	12	1	-	5	13	15	5	2	146	93	4	686	1,098
Avg\$	\$ 8,711	\$ 8,822	\$ 9,011	\$ 19,129	-	\$ 12,090	\$ 14,378	\$ 14,605	\$ 5,272	\$ 7,764	\$ 8,499	\$ 7,475	\$ 8,137	\$ 14,162	\$ 12,150
56 Other vascular bypass & shunt, not heart															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	4	4
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 8,624	\$ 8,624
57 Creat, revis, rem of arteriovenous fistula or cannula for dialysis															
N	-	-	-	-	-	-	-	-	-	-	21	-	-	257	278
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 12,500	-	-	\$ 14,482	\$ 14,333
58 Hemodialysis															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	46	47
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 4,638	-	\$ 9,913	\$ 9,801
59 Other OR procedures on vessels of head & neck															
N	-	15	1	8	-	-	3	2	6	2	10	12	4	34	97
Avg\$	-	\$ 2,692	\$ 1,332	\$ 14,060	-	-	\$ 7,273	\$ 7,894	\$ 3,785	\$ 5,774	\$ 5,247	\$ 1,292	\$ 7,360	\$ 6,678	\$ 5,675
61 Other OR procedures on vessels other than head & neck															
N	-	1	-	-	-	-	1	2	1	65	-	-	-	232	302
Avg\$	-	\$ 17,439	-	-	-	-	\$ 11,869	\$ 5,524	\$ 8,238	\$ 12,916	-	-	-	\$ 35,162	\$ 29,952
62 Other diagnostic cardiovascular procedures															
N	92	59	-	36	-	-	3	-	-	-	152	64	-	344	750
Avg\$	\$ 702	\$ 3,119	-	\$ 667	-	-	\$ 355	-	-	-	\$ 3,459	\$ 169	-	\$ 9,472	\$ 5,425
63 Other non-OR therapeutic cardiovascular procedures															
N	27	69	81	6	-	3	51	699	186	117	330	351	177	1,226	3,323
Avg\$	\$ 5,945	\$ 2,922	\$ 681	\$ 2,496	-	\$ 4,659	\$ 4,683	\$ 1,475	\$ 473	\$ 803	\$ 1,738	\$ 837	\$ 736	\$ 2,091	\$ 1,642
64 Bone marrow transplant															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	47	47
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 12,963	\$ 12,963
65 Bone marrow biopsy															
N	16	2	-	-	-	-	-	-	-	-	35	31	-	219	303
Avg\$	\$ 2,196	\$ 2,678	-	-	-	-	-	-	-	-	\$ 11,019	\$ 4,976	-	\$ 5,041	\$ 5,559
67 Other therap procedures, hemic & lymphatic system															
N	8	8	2	3	-	2	10	7	3	2	29	15	1	136	226
Avg\$	\$ 11,433	\$ 11,268	\$ 10,990	\$ 20,031	-	\$ 14,429	\$ 11,158	\$ 21,392	\$ 4,919	\$ 15,993	\$ 8,896	\$ 8,846	\$ 8,873	\$ 14,132	\$ 12,930
68 Injection or ligation of esophageal varices															
N	8	6	1	-	-	-	-	-	-	-	15	4	-	15	49
Avg\$	\$ 5,031	\$ 4,051	\$ 1,764	-	-	-	-	-	-	-	\$ 4,638	\$ 2,255	-	\$ 3,897	\$ 4,150

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
69 Esophageal dilatation															
N	61	41	11	-	-	9	16	12	31	4	39	28	3	145	400
Avg\$	\$ 4,372	\$ 5,069	\$ 3,200	-	-	\$ 2,804	\$ 5,957	\$ 6,102	\$ 3,516	\$ 5,052	\$ 5,455	\$ 2,920	\$ 5,927	\$ 5,590	\$ 4,889
70 Upper gastrointestinal endoscopy, biopsy															
N	291	474	167	68	-	175	185	132	572	160	605	416	190	1,984	5,419
Avg\$	\$ 4,479	\$ 4,030	\$ 2,694	\$ 5,859	-	\$ 3,638	\$ 6,374	\$ 5,911	\$ 2,293	\$ 4,419	\$ 5,242	\$ 2,517	\$ 2,799	\$ 4,034	\$ 3,955
71 Gastrotomy, temporary & permanent															
N	3	9	1	-	-	1	2	2	12	-	8	2	1	69	110
Avg\$	\$ 10,604	\$ 3,805	\$ 4,262	-	-	\$ 2,542	\$ 26,454	\$ 11,062	\$ 426	-	\$ 3,921	\$ 8,625	\$ 3,800	\$ 3,119	\$ 3,824
72 Colostomy, temporary & permanent															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 14,035	\$ 14,035
73 Ileostomy & other enterostomy															
N	-	-	-	-	-	-	-	-	1	-	7	-	-	12	20
Avg\$	-	-	-	-	-	-	-	-	\$ 4,365	-	\$ 2,521	-	-	\$ 4,501	\$ 3,802
76 Colonoscopy & biopsy															
N	1,203	2,551	993	403	-	613	777	627	1,681	1,348	2,062	2,166	678	5,854	20,956
Avg\$	\$ 4,247	\$ 4,907	\$ 2,660	\$ 5,712	-	\$ 2,963	\$ 6,285	\$ 6,615	\$ 1,765	\$ 3,755	\$ 5,121	\$ 3,069	\$ 2,744	\$ 4,838	\$ 4,239
77 Proctoscopy & anorectal biopsy															
N	23	32	14	2	-	11	11	8	47	7	31	29	16	371	602
Avg\$	\$ 2,709	\$ 2,326	\$ 1,533	\$ 18,748	-	\$ 1,458	\$ 6,364	\$ 6,462	\$ 1,506	\$ 2,643	\$ 1,334	\$ 2,455	\$ 2,351	\$ 1,801	\$ 2,062
78 Colorectal resection															
N	1	-	-	-	-	-	-	-	-	-	-	2	-	5	8
Avg\$	\$ 5,623	-	-	-	-	-	-	-	-	-	-	\$ 7,241	-	\$ 8,402	\$ 7,764
80 Appendectomy															
N	6	7	5	1	-	8	4	-	3	3	21	7	-	33	98
Avg\$	\$ 12,704	\$ 15,285	\$ 16,620	\$ 21,246	-	\$ 16,318	\$ 22,061	-	\$ 11,103	\$ 15,637	\$ 7,469	\$ 13,808	-	\$ 16,135	\$ 14,005
81 Hemorrhoid procedures															
N	5	10	6	8	-	3	12	9	37	7	31	22	10	52	212
Avg\$	\$ 7,367	\$ 6,550	\$ 11,446	\$ 15,467	-	\$ 11,030	\$ 8,417	\$ 8,906	\$ 3,693	\$ 9,419	\$ 6,083	\$ 7,320	\$ 10,015	\$ 3,212	\$ 6,266
82 Endoscopic retrograde cannulation of pancreas (ERCP)															
N	-	-	-	-	-	-	-	-	-	-	1	13	-	122	136
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 432	\$ 14,357	-	\$ 15,623	\$ 15,390
83 Biopsy of liver															
N	2	-	-	-	-	1	-	-	-	-	-	1	-	-	4
Avg\$	\$ 10,298	-	-	-	-	\$ 3,664	-	-	-	-	-	\$ 3,573	-	-	\$ 6,958

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84 Cholecystectomy & common duct exploration															
N	45	102	30	23	-	38	48	37	147	59	91	73	30	163	886
Avg\$	\$ 12,890	\$ 15,029	\$ 14,339	\$ 24,507	-	\$ 20,476	\$ 23,451	\$ 26,344	\$ 10,560	\$ 22,736	\$ 10,571	\$ 11,451	\$ 10,068	\$ 13,123	\$ 14,806
85 Inguinal & femoral hernia repair															
N	68	130	48	25	-	31	56	49	100	55	119	105	39	311	1,136
Avg\$	\$ 9,681	\$ 12,337	\$ 14,307	\$ 27,019	-	\$ 17,826	\$ 27,462	\$ 24,440	\$ 9,803	\$ 19,974	\$ 12,244	\$ 13,232	\$ 9,243	\$ 11,450	\$ 13,872
86 Other hernia repair															
N	27	76	19	21	-	17	34	26	89	34	89	92	24	193	741
Avg\$	\$ 9,062	\$ 11,473	\$ 15,255	\$ 20,899	-	\$ 17,706	\$ 19,747	\$ 20,214	\$ 9,204	\$ 14,810	\$ 12,912	\$ 10,144	\$ 9,944	\$ 13,395	\$ 12,918
87 Laparoscopy															
N	1	4	2	2	-	3	7	2	6	5	11	7	2	32	84
Avg\$	\$ 12,835	\$ 10,890	\$ 11,472	\$ 14,134	-	\$ 15,525	\$ 11,354	\$ 27,111	\$ 7,520	\$ 11,846	\$ 10,533	\$ 11,067	\$ 7,305	\$ 13,938	\$ 12,455
88 Abdominal paracentesis															
N	32	9	8	1	-	-	9	1	10	-	49	53	-	230	402
Avg\$	\$ 4,616	\$ 1,873	\$ 842	\$ 2,940	-	-	\$ 1,612	\$ 11,350	\$ 875	-	\$ 2,687	\$ 2,643	-	\$ 1,713	\$ 2,176
89 Exploratory laparotomy															
N	-	-	-	-	-	-	-	-	-	-	1	-	-	2	3
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 4,962	-	-	\$ 10,964	\$ 8,963
91 Peritoneal dialysis															
N	-	-	-	-	-	-	-	-	-	-	-	85	-	2,953	3,038
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 35,605	-	\$ 10,792	\$ 11,486
93 Other non-OR upper GI therapeutic procedures															
N	-	-	1	-	-	-	-	-	-	-	5	5	1	5	17
Avg\$	-	-	\$ 2,568	-	-	-	-	-	-	-	\$ 5,753	\$ 2,685	\$ 5,480	\$ 4,410	\$ 4,253
94 Other OR upper GI therapeutic procedures															
N	-	4	-	-	-	1	-	-	-	-	7	-	-	22	34
Avg\$	-	\$ 1,239	-	-	-	\$ 32,850	-	-	-	-	\$ 14,738	-	-	\$ 19,711	\$ 16,900
95 Other non-OR lower GI therapeutic procedures															
N	-	-	1	-	-	1	-	4	2	1	11	2	2	24	48
Avg\$	-	-	\$ 9,523	-	-	\$ 12,439	-	\$ 15,447	\$ 3,579	\$ 7,291	\$ 5,690	\$ 5,809	\$ 7,734	\$ 4,584	\$ 6,206
96 Other OR lower GI therapeutic procedures															
N	16	5	1	1	-	2	10	4	26	1	13	4	2	115	200
Avg\$	\$ 6,116	\$ 7,970	\$ 10,041	\$ 9,100	-	\$ 6,941	\$ 11,445	\$ 18,019	\$ 4,733	\$ 5,788	\$ 7,118	\$ 5,897	\$ 6,738	\$ 5,806	\$ 6,417
97 Other gastrointestinal diagnostic procedures															
N	-	8	-	1	-	-	1	-	-	1	9	7	-	425	452
Avg\$	-	\$ 1,621	-	\$ 15,098	-	-	\$ 4,473	-	-	\$ 3,695	\$ 4,843	\$ 5,490	-	\$ 3,315	\$ 3,378

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).
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CCS Single Level Procedure Categories

	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
98 Other non-OR gastrointestinal therapeutic procedures															
N	-	8	-	-	-	-	-	-	-	-	-	-	-	121	129
Avg\$	-	\$ 4,472	-	-	-	-	-	-	-	-	-	-	-	\$ 4,477	\$ 4,477
99 Other OR gastrointestinal therapeutic procedures															
N	-	3	-	-	-	-	3	1	-	-	5	4	1	110	127
Avg\$	-	\$ 9,696	-	-	-	-	\$ 20,085	\$ 10,351	-	-	\$ 9,587	\$ 6,695	\$ 6,576	\$ 8,189	\$ 8,518
100 Endoscopy & endoscopic biopsy of the urinary tract															
N	16	21	10	19	-	-	1	19	7	8	302	21	18	795	1,237
Avg\$	\$ 10,617	\$ 5,811	\$ 6,971	\$ 10,999	-	-	\$ 13,264	\$ 11,017	\$ 6,084	\$ 13,140	\$ 2,017	\$ 7,003	\$ 8,645	\$ 1,922	\$ 2,733
101 Transurethral excision, drainage, rem urinary obstruction															
N	31	40	17	15	-	-	5	50	12	25	131	37	29	376	768
Avg\$	\$ 10,342	\$ 10,221	\$ 9,384	\$ 16,054	-	-	\$ 11,964	\$ 15,998	\$ 6,191	\$ 14,713	\$ 5,998	\$ 7,502	\$ 7,921	\$ 5,977	\$ 7,776
102 Ureteral catheterization															
N	12	40	8	10	-	-	6	17	14	11	12	8	11	133	282
Avg\$	\$ 10,058	\$ 7,127	\$ 9,122	\$ 14,724	-	-	\$ 15,502	\$ 11,635	\$ 7,157	\$ 9,691	\$ 7,213	\$ 6,868	\$ 8,099	\$ 8,749	\$ 8,928
103 Nephrotomy & nephrostomy															
N	1	-	-	-	-	-	-	-	-	-	5	-	-	123	129
Avg\$	\$ 36,164	-	-	-	-	-	-	-	-	-	\$ 2,436	-	-	\$ 11,436	\$ 11,279
104 Nephrectomy, partial or complete															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	20	20
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 27,632	\$ 27,632
106 Genitourinary incontinence procedures															
N	1	1	1	19	-	-	14	3	6	2	11	5	5	139	207
Avg\$	\$ 22,746	\$ 21,126	\$ 1,630	\$ 13,568	-	-	\$ 14,446	\$ 16,461	\$ 9,700	\$ 11,693	\$ 12,969	\$ 12,783	\$ 11,447	\$ 18,219	\$ 16,583
107 Extracorporeal lithotripsy, urinary															
N	35	71	42	25	-	-	8	24	37	40	150	80	58	271	841
Avg\$	\$ 13,379	\$ 11,895	\$ 8,621	\$ 10,389	-	-	\$ 23,029	\$ 22,155	\$ 8,027	\$ 17,199	\$ 17,720	\$ 18,308	\$ 13,939	\$ 14,510	\$ 14,862
108 Indwelling catheter															
N	-	1	-	-	-	-	1	-	-	-	429	-	-	324	755
Avg\$	-	\$ 6,064	-	-	-	-	\$ 644	-	-	-	\$ 431	-	-	\$ 415	\$ 432
109 Procedures on the urethra															
N	-	5	1	2	-	-	1	-	1	30	55	2	6	107	210
Avg\$	-	\$ 5,613	\$ 11,469	\$ 4,363	-	-	\$ 9,280	-	\$ 5,531	\$ 10,269	\$ 1,312	\$ 7,143	\$ 6,447	\$ 10,537	\$ 7,732
110 Other diagnostic procedures of urinary tract															
N	-	-	-	-	-	-	-	-	-	-	8	3	-	55	66
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 5,621	\$ 3,797	-	\$ 5,021	\$ 5,038

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
111 Other non-OR therapeutic procedures of urinary tract															
N	1	-	3	1	-	-	-	-	-	-	82	-	1	588	676
Avg\$	\$ 10,044	-	\$ 97	\$ 6,794	-	-	-	-	-	-	\$ 1,074	-	\$ 7,091	\$ 1,000	\$ 1,036
112 Other OR therapeutic procedures of urinary tract															
N	7	14	3	21	-	-	5	7	-	12	45	14	33	154	315
Avg\$	\$ 12,622	\$ 8,414	\$ 7,111	\$ 12,562	-	-	\$ 11,111	\$ 11,390	-	\$ 6,608	\$ 8,968	\$ 8,711	\$ 5,931	\$ 11,866	\$ 10,332
113 Transurethral resection of prostate (TURP)															
N	-	5	2	4	-	-	-	3	-	23	17	27	-	60	141
Avg\$	-	\$ 14,034	\$ 16,870	\$ 23,583	-	-	-	\$ 27,858	-	\$ 19,949	\$ 9,617	\$ 10,347	-	\$ 11,183	\$ 13,153
114 Open prostatectomy															
N	-	-	-	1	-	-	-	-	-	1	3	-	-	113	118
Avg\$	-	-	-	\$ 31,315	-	-	-	-	-	\$ 30,285	\$ 4,274	-	-	\$ 27,279	\$ 26,753
115 Circumcision															
N	1	67	1	1	-	-	13	15	9	48	8	7	6	96	272
Avg\$	\$ 99,903	\$ 1,302	\$ 692	\$ 18,985	-	-	\$ 2,668	\$ 4,917	\$ 2,837	\$ 357	\$ 8,613	\$ 1,557	\$ 5,059	\$ 7,933	\$ 4,521
116 Diagnostic procedures, male genital															
N	30	10	-	3	-	-	5	-	-	-	58	1	2	183	292
Avg\$	\$ 1,516	\$ 7,882	-	\$ 12,199	-	-	\$ 4,699	-	-	-	\$ 5,777	\$ 4,907	\$ 5,894	\$ 2,936	\$ 3,677
117 Other non-OR therapeutic procedures, male genital															
N	1	25	1	3	-	-	3	4	1	-	43	-	12	59	152
Avg\$	\$ 6,721	\$ 6,100	\$ 3,585	\$ 12,223	-	-	\$ 8,860	\$ 7,239	\$ 4,773	-	\$ 3,532	-	\$ 6,832	\$ 9,310	\$ 6,861
118 Other OR therapeutic procedures, male genital															
N	8	9	7	7	-	-	5	11	8	20	30	13	16	261	395
Avg\$	\$ 9,614	\$ 10,934	\$ 8,720	\$ 13,909	-	-	\$ 15,886	\$ 15,381	\$ 7,576	\$ 13,331	\$ 12,933	\$ 8,363	\$ 15,273	\$ 11,977	\$ 12,093
119 Oophorectomy, unilateral & bilateral															
N	19	14	28	12	-	-	36	20	38	24	33	29	12	135	400
Avg\$	\$ 14,292	\$ 12,926	\$ 13,750	\$ 19,683	-	-	\$ 13,830	\$ 24,566	\$ 7,972	\$ 16,846	\$ 10,844	\$ 14,122	\$ 12,960	\$ 13,804	\$ 13,892
120 Other operations on ovary															
N	-	-	-	1	-	-	2	-	-	-	-	-	-	75	78
Avg\$	-	-	-	\$ 43,032	-	-	\$ 18,463	-	-	-	-	-	-	\$ 5,124	\$ 5,952
121 Ligation of fallopian tubes															
N	14	7	-	-	-	-	-	2	14	-	2	26	-	-	65
Avg\$	\$ 9,672	\$ 10,711	-	-	-	-	-	\$ 21,942	\$ 7,617	-	\$ 9,341	\$ 8,637	-	-	\$ 9,295
122 Removal of ectopic pregnancy															
N	1	-	-	-	-	-	-	-	2	2	2	1	-	5	13
Avg\$	\$ 15,353	-	-	-	-	-	-	-	\$ 7,475	\$ 15,367	\$ 14,032	\$ 22,622	-	\$ 11,300	\$ 12,940

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
123 Other operations on fallopian tubes															
N	-	-	-	1	-	-	-	-	-	2	-	-	1	1	5
Avg\$	-	-	-	\$ 17,448	-	-	-	-	-	\$ 18,640	-	-	\$ 10,508	\$ 8,321	\$ 14,711
124 Hysterectomy, abdominal & vaginal															
N	30	11	11	9	-	-	34	21	73	26	55	39	25	291	625
Avg\$	\$ 18,362	\$ 22,955	\$ 22,544	\$ 40,032	-	-	\$ 29,913	\$ 46,340	\$ 14,210	\$ 28,356	\$ 19,484	\$ 20,149	\$ 23,616	\$ 27,006	\$ 24,773
125 Other excision of cervix & uterus															
N	17	12	35	7	-	-	3	9	98	29	37	55	20	100	422
Avg\$	\$ 11,231	\$ 8,822	\$ 10,624	\$ 9,064	-	-	\$ 14,467	\$ 19,272	\$ 4,883	\$ 7,831	\$ 7,764	\$ 8,704	\$ 8,311	\$ 12,428	\$ 9,075
126 Abortion (termination of pregnancy)															
N	-	-	-	-	-	-	1	-	-	-	-	1	-	70	72
Avg\$	-	-	-	-	-	-	\$ 14,351	-	-	-	-	\$ 10,821	-	\$ 8,348	\$ 8,466
127 D&C, aspiration after delivery or abortion															
N	9	19	9	5	-	-	11	16	29	7	13	17	1	50	186
Avg\$	\$ 7,113	\$ 7,355	\$ 6,995	\$ 8,183	-	-	\$ 9,802	\$ 10,532	\$ 4,413	\$ 5,593	\$ 8,814	\$ 4,818	\$ 12,501	\$ 7,139	\$ 7,081
128 Diagnostic dilatation & curettage (D&C)															
N	2	-	3	2	-	-	3	2	6	-	3	-	4	8	33
Avg\$	\$ 7,770	-	\$ 7,770	\$ 8,784	-	-	\$ 8,970	\$ 27,586	\$ 4,292	-	\$ 8,197	-	\$ 6,284	\$ 8,101	\$ 8,448
129 Repair cystocele & rectocele, oblit of vaginal vault															
N	2	-	-	15	-	-	9	5	10	-	-	3	8	83	135
Avg\$	\$ 15,480	-	-	\$ 18,640	-	-	\$ 16,470	\$ 22,605	\$ 9,807	-	-	\$ 13,433	\$ 12,388	\$ 14,856	\$ 15,128
130 Other diagnostic procedures, female organs															
N	43	605	5	16	-	1	34	25	57	25	614	1,151	29	385	2,990
Avg\$	\$ 9,051	\$ 1,300	\$ 7,155	\$ 10,237	-	\$ 333	\$ 9,374	\$ 10,969	\$ 4,886	\$ 7,137	\$ 1,383	\$ 981	\$ 6,180	\$ 5,600	\$ 2,254
131 Other non-OR therapeutic procedures, female organs															
N	1	2	3	3	-	-	-	-	4	2	353	3	2	339	712
Avg\$	\$ 6,815	\$ 5,260	\$ 4,606	\$ 7,439	-	-	-	-	\$ 2,851	\$ 6,761	\$ 2,874	\$ 5,342	\$ 2,323	\$ 702	\$ 1,898
132 Other OR therapeutic procedures, female organs															
N	15	8	4	10	-	-	43	9	23	6	50	22	14	218	422
Avg\$	\$ 10,989	\$ 12,567	\$ 10,620	\$ 13,572	-	-	\$ 22,842	\$ 26,023	\$ 7,073	\$ 18,243	\$ 8,419	\$ 9,721	\$ 11,023	\$ 14,012	\$ 13,687
135 Forceps, vacuum & breech delivery															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 6,878	\$ 6,878
137 Other procedures to assist delivery															
N	-	-	-	-	-	-	3	1	1	3	1	4	-	33	46
Avg\$	-	-	-	-	-	-	\$ 716	\$ 3,034	\$ 3,292	\$ 1,949	\$ 8,866	\$ 4,856	-	\$ 3,498	\$ 3,436

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138 Diagnostic amniocentesis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 3,587	\$ 3,587
139 Fetal monitoring															
N	707	444	330	222	-	-	138	333	-	135	463	164	30	801	3,767
Avg\$	\$ 457	\$ 678	\$ 521	\$ 718	-	-	\$ 722	\$ 772	-	\$ 927	\$ 1,226	\$ 955	\$ 690	\$ 985	\$ 789
141 Other therapeutic obstetrical procedures															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	36	37
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 4,851	-	\$ 4,893	\$ 4,892
142 Partial excision bone															
N	6	24	11	20	-	2	5	36	33	3	100	25	5	151	421
Avg\$	\$ 8,750	\$ 9,888	\$ 12,737	\$ 18,631	-	\$ 10,709	\$ 13,485	\$ 15,437	\$ 4,883	\$ 18,255	\$ 9,462	\$ 8,604	\$ 6,995	\$ 9,914	\$ 10,348
143 Bunionectomy or repair of toe deformities															
N	7	37	33	57	-	10	1	36	45	19	32	53	2	182	514
Avg\$	\$ 13,274	\$ 15,233	\$ 14,955	\$ 20,743	-	\$ 9,979	\$ 26,091	\$ 16,044	\$ 6,913	\$ 13,132	\$ 20,022	\$ 15,087	\$ 5,719	\$ 9,764	\$ 13,279
144 Treatment, facial fracture or dislocation															
N	-	-	-	-	-	-	2	-	3	6	15	-	1	37	64
Avg\$	-	-	-	-	-	-	\$ 7,141	-	\$ 4,786	\$ 4,659	\$ 4,507	-	\$ 3,486	\$ 16,486	\$ 11,526
145 Treatment, fracture or disloc of radius & ulna															
N	15	51	35	7	-	-	39	30	37	24	145	37	17	139	576
Avg\$	\$ 16,349	\$ 17,086	\$ 17,642	\$ 31,884	-	-	\$ 26,436	\$ 25,847	\$ 10,599	\$ 18,016	\$ 5,667	\$ 15,399	\$ 21,093	\$ 13,074	\$ 14,159
146 Treatment, fracture or disloc of hip & femur															
N	1	-	-	-	-	-	-	-	-	-	1	1	-	5	8
Avg\$	\$ 14,405	-	-	-	-	-	-	-	-	-	\$ 728	\$ 12,817	-	\$ 12,573	\$ 11,352
147 Treatment, fracture or disloc of lower extremity															
N	28	44	47	15	-	-	28	18	48	16	77	42	18	215	596
Avg\$	\$ 15,852	\$ 19,784	\$ 16,345	\$ 28,738	-	-	\$ 30,486	\$ 31,127	\$ 12,219	\$ 27,499	\$ 6,507	\$ 13,270	\$ 10,245	\$ 15,320	\$ 15,924
148 Other fracture & dislocation procedure															
N	9	63	38	7	-	-	17	23	24	14	81	32	7	188	503
Avg\$	\$ 11,341	\$ 15,884	\$ 21,722	\$ 35,976	-	-	\$ 36,740	\$ 26,243	\$ 15,481	\$ 28,431	\$ 8,694	\$ 13,541	\$ 10,151	\$ 14,666	\$ 16,190
149 Arthroscopy															
N	15	32	25	3	-	-	2	3	18	10	49	18	8	162	345
Avg\$	\$ 20,537	\$ 23,422	\$ 23,220	\$ 52,821	-	-	\$ 13,316	\$ 28,375	\$ 29,740	\$ 37,969	\$ 16,863	\$ 21,667	\$ 20,490	\$ 24,065	\$ 23,484
150 Division of joint capsule, ligament or cartilage															
N	-	4	9	-	-	-	1	1	7	-	12	-	-	16	50
Avg\$	-	\$ 12,661	\$ 11,851	-	-	-	\$ 16,966	\$ 23,673	\$ 7,280	-	\$ 9,526	-	-	\$ 9,245	\$ 10,223

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151 Excision of semilunar cartilage of knee																
N	70	76	67	16	-	-	25	34	66	35	104	53	15	309	870	
Avg\$	\$ 6,311	\$ 10,577	\$ 10,966	\$ 18,599	-	-	\$ 15,942	\$ 20,890	\$ 7,364	\$ 17,924	\$ 8,132	\$ 7,321	\$ 7,433	\$ 7,710	\$ 9,457	
152 Arthroplasty knee																
N	14	5	17	-	-	-	-	10	62	1	171	19	8	33	340	
Avg\$	\$ 26,840	\$ 30,316	\$ 38,065	-	-	-	-	\$ 48,109	\$ 38,805	\$ 24,394	\$ 31,886	\$ 33,356	\$ 39,050	\$ 24,448	\$ 33,210	
153 Hip replacement, total & partial																
N	5	28	-	-	-	-	-	-	3	-	19	-	-	-	55	
Avg\$	\$ 23,478	\$ 25,410	-	-	-	-	-	-	\$ 25,206	-	\$ 22,699	-	-	-	\$ 24,287	
154 Arthroplasty other than hip or knee																
N	11	30	20	-	-	-	14	3	10	-	9	5	9	75	186	
Avg\$	\$ 12,858	\$ 11,874	\$ 27,795	-	-	-	\$ 17,072	\$ 23,200	\$ 9,025	-	\$ 16,928	\$ 7,661	\$ 6,648	\$ 12,501	\$ 14,196	
155 Arthrocentesis																
N	146	27	6	1	-	-	5	31	14	-	44	3,503	13	1	2,846	6,637
Avg\$	\$ 1,665	\$ 584	\$ 579	\$ 8,472	-	-	\$ 1,237	\$ 1,343	\$ 2,977	-	\$ 204	\$ 863	\$ 1,473	\$ 885	\$ 717	\$ 822
156 Injections & aspirations of muscles, tendons, etc.																
N	-	200	28	1	-	-	21	3	7	1	-	635	18	-	833	1,747
Avg\$	-	\$ 1,598	\$ 865	\$ 2,529	-	-	\$ 2,346	\$ 3,006	\$ 629	\$ 183	-	\$ 752	\$ 2,162	-	\$ 1,280	\$ 1,140
157 Amputation of lower extremity																
N	1	33	3	15	-	-	3	8	9	9	2	12	8	-	51	154
Avg\$	\$ 5,363	\$ 6,493	\$ 8,054	\$ 8,996	-	-	\$ 7,466	\$ 5,442	\$ 8,317	\$ 5,264	\$ 7,929	\$ 9,938	\$ 5,587	-	\$ 5,878	\$ 6,795
158 Spinal fusion																
N	-	-	-	1	-	-	-	-	18	-	-	-	-	-	108	127
Avg\$	-	-	-	\$ 54,997	-	-	-	-	\$ 27,684	-	-	-	-	-	\$ 36,461	\$ 35,363
159 Other diagnostic procedures on musculoskeletal system																
N	-	6	2	1	-	-	-	4	1	1	-	8	12	1	55	91
Avg\$	-	\$ 7,887	\$ 12,181	\$ 41,817	-	-	-	\$ 5,583	\$ 20,686	\$ 1,304	-	\$ 5,655	\$ 4,911	\$ 4,500	\$ 7,624	\$ 7,537
160 Other therapeutic procedures on muscles & tendons																
N	132	240	307	29	-	-	5	86	161	237	64	254	135	74	736	2,460
Avg\$	\$ 9,136	\$ 10,827	\$ 16,253	\$ 26,060	-	-	\$ 8,912	\$ 11,188	\$ 19,801	\$ 7,642	\$ 18,939	\$ 8,840	\$ 12,220	\$ 4,740	\$ 11,843	\$ 12,085
161 Other OR therapeutic procedures on bone																
N	29	50	27	18	-	-	2	7	19	26	16	38	57	7	268	564
Avg\$	\$ 7,540	\$ 10,627	\$ 11,747	\$ 17,916	-	-	\$ 13,903	\$ 19,458	\$ 14,451	\$ 5,407	\$ 10,424	\$ 12,069	\$ 10,979	\$ 4,691	\$ 12,956	\$ 11,924
162 Other OR therapeutic procedures on joints																
N	51	53	105	26	-	-	2	21	56	43	27	135	56	33	420	1,028
Avg\$	\$ 9,308	\$ 15,909	\$ 19,238	\$ 31,419	-	-	\$ 17,566	\$ 16,322	\$ 26,057	\$ 15,847	\$ 19,894	\$ 14,074	\$ 10,785	\$ 10,874	\$ 15,472	\$ 16,120

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163 Other non-OR therapeutic procedures on musc system															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	24	24
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 4,971	\$ 4,971
164 Other OR therapeutic procedures on musc system															
N	2	2	-	1	-	-	1	1	7	-	11	1	-	20	46
Avg\$	\$ 5,247	\$ 6,344	-	\$ 12,956	-	-	\$ 9,754	\$ 16,029	\$ 9,382	-	\$ 7,501	\$ 6,898	-	\$ 9,369	\$ 8,791
165 Breast biopsy & other diagnostic procedures on breast															
N	63	116	27	13	-	18	21	-	88	50	192	182	11	720	1,501
Avg\$	\$ 9,491	\$ 4,680	\$ 3,529	\$ 7,931	-	\$ 5,910	\$ 6,274	-	\$ 1,593	\$ 1,902	\$ 3,253	\$ 3,415	\$ 4,726	\$ 5,513	\$ 4,717
166 Lumpectomy, quadrantectomy of breast															
N	23	71	7	4	-	5	6	3	17	18	84	57	2	342	639
Avg\$	\$ 15,545	\$ 14,070	\$ 15,915	\$ 37,009	-	\$ 15,317	\$ 15,208	\$ 11,933	\$ 6,806	\$ 13,283	\$ 13,499	\$ 9,590	\$ 10,829	\$ 11,526	\$ 12,236
167 Mastectomy															
N	11	5	-	-	-	1	2	2	10	5	10	4	1	107	158
Avg\$	\$ 18,761	\$ 23,784	-	-	-	\$ 18,234	\$ 44,858	\$ 38,286	\$ 12,654	\$ 20,254	\$ 17,402	\$ 15,825	\$ 15,987	\$ 21,615	\$ 20,909
168 Incision & drainage, skin & subcutaneous tissue															
N	10	7	1	4	-	-	3	3	8	4	38	2	3	109	192
Avg\$	\$ 5,886	\$ 6,277	\$ 10,591	\$ 4,983	-	-	\$ 10,153	\$ 8,114	\$ 3,994	\$ 5,980	\$ 1,643	\$ 4,807	\$ 7,338	\$ 1,408	\$ 2,560
169 Debridement of wound, infection or burn															
N	219	7	8	4	-	2	1	9	5	2	85	3	2	149	496
Avg\$	\$ 947	\$ 8,634	\$ 8,688	\$ 8,574	-	\$ 9,178	\$ 9,547	\$ 11,029	\$ 2,456	\$ 9,179	\$ 2,272	\$ 10,049	\$ 15,304	\$ 1,317	\$ 1,975
170 Excision of skin lesion															
N	33	56	44	49	-	19	28	61	168	53	280	84	26	4,608	5,509
Avg\$	\$ 5,552	\$ 5,008	\$ 3,358	\$ 9,487	-	\$ 8,300	\$ 8,335	\$ 9,449	\$ 1,809	\$ 6,705	\$ 3,987	\$ 5,377	\$ 6,207	\$ 1,761	\$ 2,277
171 Suture of skin & subcutaneous tissue															
N	3	20	-	4	-	1	2	1	10	28	103	10	1	409	592
Avg\$	\$ 6,988	\$ 4,785	-	\$ 7,857	-	\$ 10,628	\$ 9,028	\$ 17,449	\$ 3,186	\$ 4,398	\$ 3,869	\$ 5,824	\$ 5,375	\$ 2,836	\$ 3,330
172 Skin graft															
N	16	12	1	8	-	-	8	4	6	4	36	8	1	538	642
Avg\$	\$ 3,747	\$ 11,834	\$ 12,939	\$ 14,646	-	-	\$ 7,961	\$ 15,441	\$ 6,868	\$ 9,729	\$ 11,317	\$ 8,888	\$ 5,891	\$ 7,978	\$ 8,278
173 Other diagnostic proc on skin & subcutaneous tissue															
N	1	17	2	1	1	-	13	1	4	-	220	11	4	1,258	1,533
Avg\$	\$ 1,010	\$ 990	\$ 805	\$ 884	\$ 2,442	-	\$ 1,860	\$ 6,905	\$ 1,342	-	\$ 1,431	\$ 854	\$ 3,144	\$ 827	\$ 937
174 Other non-OR therapeutic procedures on skin & breast															
N	1	17	1,304	8	-	1	1	173	12	7	91	3	5	1,721	3,344
Avg\$	\$ 5,904	\$ 6,194	\$ 50	\$ 7,613	-	\$ 5,375	\$ 13,025	\$ 221	\$ 2,286	\$ 3,507	\$ 1,096	\$ 3,945	\$ 4,013	\$ 1,030	\$ 673

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).
 Column headers denote hospitals: see Appendix K.
 Use charge data with caution. See Appendix A for details.

Table O-10
2019 Vermont Hospital Outpatient Visits, including VT Residents and Non-residents
Outpatient Visits and Average Charges by Vermont Hospitals
 Procedure Categories defined by Clinical Classifications Software for Services and Procedures

CCS Single Level Procedure Categories

	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
175 Other OR therapeutic procedures on skin & breast															
N	6	21	10	4	-	4	8	3	73	3	14	16	14	265	441
Avg\$	\$ 9,523	\$ 7,305	\$ 10,128	\$ 13,617	-	\$ 12,615	\$ 14,771	\$ 10,652	\$ 11,161	\$ 7,583	\$ 9,437	\$ 7,371	\$ 14,997	\$ 23,139	\$ 18,132
Total															
N	4,733	9,061	4,572	1,920	2	1,657	3,303	3,941	6,106	3,497	21,387	8,880	2,139	64,968	136,166
Avg\$	\$ 4,939	\$ 5,276	\$ 4,820	\$ 9,083	\$ 1,509	\$ 4,624	\$ 7,967	\$ 7,833	\$ 4,453	\$ 6,596	\$ 3,399	\$ 3,944	\$ 4,828	\$ 5,800	\$ 5,292

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).

Column headers denote hospitals: see Appendix K.

Use charge data with caution. See Appendix A for details.

Table O-11
2019 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	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
3390 Laboratory - Clinical	32,434	81,339	20,419	8,175	8,317	13,065	30,470	28,347	43,560	31,059	75,727	46,669	31,979	223,741	675,301
5400 Radiology - Diagnostic	8,793	18,082	10,031	1,186	1,475	2,492	4,098	5,311	11,380	6,995	14,926	13,435	1,095	57,017	156,316
7300 Drugs Charged to Patients	3,181	11,113	5,243	936	86	580	2,011	1,545	4,664	1,767	6,516	12,624	2,284	49,617	102,167
3440 Mammography	4,490	7,944	1,756	1,769	-	1,193	3,057	2,580	4,747	3,646	8,641	6,378	2,425	26,918	75,544
Diagnostic	278	1,079	357	172	-	168	249	162	616	458	1,019	1,186	231	4,066	10,041
Screening	4,212	6,866	1,400	1,598	-	1,025	2,808	2,418	4,131	3,189	7,629	5,192	2,194	22,971	65,633
3180 Chemistry	-	-	-	-	5,269	2,733	4	20,154	22	-	-	45,374	-	10	73,566
3630 Ultra Sound	3,143	5,873	1,961	1,102	407	669	2,366	1,117	5,254	2,549	6,013	6,673	1,507	16,631	55,265
6600 Physical Therapy	1,338	5,259	1,103	2,568	819	1,421	445	-	919	2,036	1,084	1,749	1,026	16,539	36,306
5700 CT Scan	1,313	3,311	1,238	688	244	475	1,645	802	2,747	1,214	3,038	3,463	1,079	14,039	35,296
3420 Laboratory - Pathological	1,605	1,363	501	52	-	404	600	836	3,081	2,161	593	3,052	1,486	18,986	34,720
3350 Hematology	-	-	-	-	3,300	-	-	509	13	-	-	30,143	-	-	33,965
5800 Magnetic Resonance Imaging (MRI)	1,784	2,784	1,002	902	-	410	1,108	966	2,076	956	3,137	2,536	948	13,497	32,106
3280 EKG and EEG	1,183	2,481	1,320	281	399	57	1,254	595	1,111	140	6,965	1,098	159	7,498	24,541
EKG	1,183	2,340	1,158	164	399	57	738	557	1,111	140	6,013	694	159	5,474	20,187
EEG	-	141	163	117	-	-	517	38	-	-	953	404	-	2,024	4,357
3050 Bacteriology & Microbiology	-	-	-	-	179	-	-	5,480	1,025	-	-	14,882	-	15	21,581
3240 Cytology	-	2,267	-	-	-	3	917	1,760	190	-	3,452	2,218	-	10,218	21,025
3190 Chemotherapy	428	2,058	336	23	-	141	1	-	-	194	770	2,603	254	12,180	18,988
3260 Echocardiography	950	1,622	661	364	-	211	684	338	992	843	2,022	1,970	408	6,645	17,710
6400 Intravenous Therapy	798	3,293	840	75	87	-	788	532	1,273	830	635	5,031	816	2,309	17,307
7100 Medical Supplies Charged to Patients	4,065	270	870	774	-	-	21	-	1,292	1,052	806	2,096	1,802	734	13,782
3140 Cardiology	101	646	41	38	-	41	9	809	57	227	2,251	1,174	2	7,013	12,409
3380 Immunology	-	49	-	-	32	1	-	779	141	-	-	10,202	-	14	11,218
3450 Nuclear Medicine - Diagnostic	454	1,171	160	176	-	-	196	329	625	361	1,115	1,047	215	3,844	9,693
PET Scan	-	218	-	-	-	-	-	-	-	-	151	395	-	399	1,163
All other	454	1,171	160	176	-	-	196	329	625	361	1,115	652	215	3,841	9,295

Table O-11
2019 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	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMMC	Total
5000 Operating Room	34	313	53	17	-	75	20	86	20	8	317	427	99	7,815	9,284
3650 Vascular Lab	466	661	250	127	24	186	388	174	-	56	932	668	247	4,568	8,747
6700 Occupational Therapy	407	1,060	206	250	85	147	128	-	28	172	256	358	74	5,481	8,652
3620 Stress Test	498	906	290	206	-	-	115	385	942	333	1,141	679	190	2,253	7,938
3370 Holter Monitor	203	772	114	107	-	29	177	659	108	8	463	-	81	2,449	5,170
3480 Oncology	1,036	-	-	143	-	-	-	-	-	-	3,781	-	-	-	4,960
3550 Psychiatric/Psychological Services	-	-	-	-	-	-	-	-	156	-	961	-	-	3,430	4,547
5100 Recovery Room	34	56	25	2	-	-	9	16	25	1	85	192	89	3,678	4,212
3040 Audiology	16	34	21	4	-	-	13	15	107	37	2,495	-	2	807	3,551
3540 Prosthetic Devices	-	303	88	-	-	-	38	-	16	-	-	14	5	2,670	3,134
5300 Anesthesiology	19	35	14	14	-	-	-	18	18	13	85	38	51	2,795	3,100
5500 Radiology - Therapeutic	-	386	-	-	-	-	-	-	-	-	227	178	-	1,918	2,709
6800 Speech Pathology	84	198	11	50	-	49	36	22	72	56	289	176	11	1,308	2,362
6300 Blood Storing, Processing, & Trans.	72	166	30	3	4	11	57	68	188	59	181	253	168	1,072	2,332
Total (not including subcategories)	68,929	155,815	48,584	20,032	20,548	24,393	50,655	68,752	85,824	56,773	148,904	202,518	48,502	527,694	1,527,923

Only Expanded Outpatient Records are included in this table.

Expanded Outpatient records are outpatient records with no primary CPT code in CCS high-level groups 1 through 15, and no associated ED or ObsBed revenue record.

The Primary Cost Centers reported here are just a partial list of all possible cost centers. See Appendix J 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.

There is variation in how hospitals code certain cost centers.

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 K.

Table O-12
2019 Vermont Hospital Discharges, 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	147	\$ 16,667	483	\$ 12,071	57	\$ 18,047	134	\$ 16,865	57	\$ 2,596	878	\$ 13,345
Central Vermont Medical Center	251	\$ 23,828	685	\$ 8,765	35	\$ 18,099	23	\$ 19,005	21	\$ 3,710	1,015	\$ 12,939
Copley Hospital	27	\$ 19,757	293	\$ 4,417	15	\$ 20,544	15	\$ 32,447	11	\$ 5,036	361	\$ 7,418
Gifford Medical Center	52	\$ 20,130	192	\$ 13,137	7	\$ 39,249	39	\$ 25,118	53	\$ 4,700	343	\$ 14,788
Grace Cottage Family Health & Hospital	-	\$ -	54	\$ 7,507	-	\$ -	-	\$ -	5	\$ 6,366	59	\$ 7,411
Mt. Ascutney Hospital and Health Center	2	\$ 11,953	1	\$ 7,376	-	\$ -	14	\$ 25,691	160	\$ 5,666	177	\$ 7,330
North Country Hospital	23	\$ 21,096	247	\$ 11,578	28	\$ 29,209	83	\$ 30,891	29	\$ 5,499	410	\$ 16,796
Northeastern Vermont Regional Hospital	124	\$ 33,029	362	\$ 10,672	40	\$ 29,422	59	\$ 37,279	17	\$ 10,495	602	\$ 19,126
Northwestern Medical Center	266	\$ 12,337	402	\$ 5,922	54	\$ 14,047	203	\$ 23,593	61	\$ 1,496	986	\$ 11,462
Porter Medical Center	68	\$ 19,401	257	\$ 9,631	39	\$ 30,030	50	\$ 24,278	11	\$ 2,292	425	\$ 14,599
Rutland Regional Medical Center	329	\$ 24,706	684	\$ 10,049	50	\$ 18,080	26	\$ 18,742	52	\$ 4,018	1,141	\$ 14,550
Southwestern Vermont Medical Center	183	\$ 16,437	545	\$ 10,990	55	\$ 19,566	26	\$ 22,515	12	\$ 7,677	821	\$ 13,095
Springfield Hospital	17	\$ 19,052	208	\$ 10,796	18	\$ 18,738	63	\$ 23,017	12	\$ 5,995	318	\$ 13,927
University of Vermont Medical Center	1,304	\$ 33,444	1,536	\$ 11,485	301	\$ 23,271	164	\$ 23,912	158	\$ 10,751	3,463	\$ 21,340
Total for 2019	2,793	\$ 26,603	5,949	\$ 10,152	699	\$ 22,162	899	\$ 24,176	659	\$ 6,062	10,999	\$ 15,996
Total for 2018	3,108	\$ 25,501	6,495	\$ 9,283	667	\$ 20,901	962	\$ 23,293	718	\$ 5,916	11,950	\$ 15,080
Total for 2017	3,280	\$ 25,652	6,707	\$ 9,071	755	\$ 22,127	1,176	\$ 16,762	1,031	\$ 4,566	12,949	\$ 14,383
Total for 2016	3,163	\$ 25,347	6,837	\$ 8,704	742	\$ 21,589	1,094	\$ 17,394	1,372	\$ 3,561	13,208	\$ 13,606
Total for 2015	2,946	\$ 23,383	7,347	\$ 8,526	771	\$ 20,722	1,195	\$ 19,078	1,422	\$ 3,789	13,681	\$ 12,854

Observation Bed records are defined by 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 visits that have no associated revenue code of 45x and that have a primary CPT code in CCS high-level groups 1 through 15.

Charge data should be used with caution. See discussion in Appendix A for details.

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

Table O-13

2019 Vermont Hospital Outpatient Visits and Expanded Outpatient Services, including VT Residents and Non-residents
In-migration by Vermont Hospital

Outpatient Procedures

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-residents</u>		<u>Total</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	3,952	\$ 19,859,325	781	\$ 3,511,882	4,733	\$ 23,371,207
Central Vermont Medical Center	8,987	\$ 47,344,105	74	\$ 460,696	9,061	\$ 47,804,801
Copley Hospital	4,535	\$ 21,503,297	37	\$ 534,938	4,572	\$ 22,038,235
Gifford Medical Center	1,876	\$ 16,737,755	44	\$ 701,084	1,920	\$ 17,438,839
Grace Cottage Family Health & Hospital	2	\$ 3,018	-	\$ -	2	\$ 3,018
Mt. Ascutney Hospital and Health Center	1,045	\$ 4,873,017	612	\$ 2,788,481	1,657	\$ 7,661,498
North Country Hospital	3,281	\$ 26,126,611	22	\$ 189,164	3,303	\$ 26,315,775
Northeastern Vermont Regional Hospital	3,571	\$ 29,497,166	370	\$ 1,371,939	3,941	\$ 30,869,105
Northwestern Medical Center	6,019	\$ 26,637,626	87	\$ 553,379	6,106	\$ 27,191,005
Porter Medical Center	3,179	\$ 21,039,504	318	\$ 2,027,848	3,497	\$ 23,067,351
Rutland Regional Medical Center	20,348	\$ 68,772,956	1,039	\$ 3,926,022	21,387	\$ 72,698,978
Southwestern Vermont Medical Center	6,460	\$ 24,698,690	2,420	\$ 10,320,107	8,880	\$ 35,018,797
Springfield Hospital	1,756	\$ 8,565,904	383	\$ 1,760,337	2,139	\$ 10,326,241
University of Vermont Medical Center	56,764	\$ 319,777,070	8,204	\$ 57,029,665	64,968	\$ 376,806,735
Total for 2019	121,775	\$ 635,436,046	14,391	\$ 85,175,542	136,166	\$ 720,611,587
Total for 2018	116,530	\$ 594,150,261	13,572	\$ 81,122,629	130,102	\$ 675,272,890
Total for 2017	117,927	\$ 568,536,227	13,107	\$ 73,591,337	131,034	\$ 642,127,564
Total for 2016	119,829	\$ 565,045,625	12,866	\$ 69,924,572	132,695	\$ 634,970,197
Total for 2015	116,134	\$ 545,650,951	12,300	\$ 67,449,779	128,434	\$ 613,100,730

Table O-13

2019 Vermont Hospital Outpatient Visits and Expanded Outpatient Services, including VT Residents and Non-residents
In-migration by Vermont Hospital

Expanded Outpatient Procedures

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-residents</u>		<u>Total</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	49,591	\$ 57,764,970	9,419	\$ 8,675,577	59,010	\$ 66,440,547
Central Vermont Medical Center	162,284	\$ 142,263,816	2,534	\$ 1,274,380	164,818	\$ 143,538,196
Copley Hospital	53,117	\$ 23,065,444	682	\$ 373,420	53,799	\$ 23,438,863
Gifford Medical Center	17,543	\$ 25,131,518	190	\$ 331,969	17,733	\$ 25,463,488
Grace Cottage Family Health & Hospital	10,830	\$ 7,541,896	250	\$ 171,092	11,080	\$ 7,712,987
Mt. Ascutney Hospital and Health Center	15,185	\$ 19,531,934	4,465	\$ 6,223,073	19,650	\$ 25,755,007
North Country Hospital	44,813	\$ 44,833,044	330	\$ 286,803	45,143	\$ 45,119,847
Northeastern Vermont Regional Hospital	47,163	\$ 33,901,054	1,546	\$ 1,390,607	48,709	\$ 35,291,661
Northwestern Medical Center	83,398	\$ 34,725,410	808	\$ 315,555	84,206	\$ 35,040,965
Porter Medical Center	47,049	\$ 33,879,678	3,297	\$ 2,463,400	50,346	\$ 36,343,077
Rutland Regional Medical Center	146,435	\$ 113,528,343	7,329	\$ 5,519,893	153,764	\$ 119,048,235
Southwestern Vermont Medical Center	110,923	\$ 111,959,687	32,600	\$ 39,112,366	143,523	\$ 151,072,054
Springfield Hospital	38,038	\$ 22,212,235	6,171	\$ 3,783,031	44,209	\$ 25,995,266
University of Vermont Medical Center	493,922	\$ 629,651,308	37,182	\$ 85,428,952	531,104	\$ 715,080,260
Total for 2019	1,320,291	\$ 1,299,990,338	106,803	\$ 155,350,115	1,427,094	\$ 1,455,340,453
Total for 2018	1,366,057	\$ 1,232,305,747	106,551	\$ 140,482,723	1,472,608	\$ 1,372,788,470
Total for 2017	1,379,673	\$ 1,158,513,625	106,532	\$ 133,617,606	1,486,205	\$ 1,292,131,232
Total for 2016	1,451,203	\$ 1,145,228,292	105,865	\$ 118,256,126	1,557,068	\$ 1,263,484,418
Total for 2015	1,458,663	\$ 1,113,383,420	100,188	\$ 110,008,920	1,558,851	\$ 1,223,392,341

Table O-13

**2019 Vermont Hospital Outpatient Visits and Expanded Outpatient Services, including VT Residents and Non-residents
In-migration by Vermont Hospital**

All Outpatient Procedures

<u>Vermont Hospital</u>	<u>Vermont Residents</u>		<u>Non-residents</u>		<u>Total</u>	
	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>	<u>Discharges</u>	<u>Total Charges</u>
Brattleboro Memorial Hospital	53,543	77,624,295	10,200	12,187,459	63,743	\$ 89,811,754
Central Vermont Medical Center	171,271	\$ 189,607,921	2,608	\$ 1,735,076	173,879	\$ 191,342,997
Copley Hospital	57,652	\$ 44,568,741	719	\$ 908,357	58,371	\$ 45,477,099
Gifford Medical Center	19,419	\$ 41,869,273	234	\$ 1,033,054	19,653	\$ 42,902,327
Grace Cottage Family Health & Hospital	10,832	\$ 7,544,914	250	\$ 171,092	11,082	\$ 7,716,005
Mt. Ascutney Hospital and Health Center	16,230	\$ 24,404,952	5,077	\$ 9,011,553	21,307	\$ 33,416,505
North Country Hospital	48,094	\$ 70,959,655	352	\$ 475,968	48,446	\$ 71,435,623
Northeastern Vermont Regional Hospital	50,734	\$ 63,398,221	1,916	\$ 2,762,546	52,650	\$ 66,160,766
Northwestern Medical Center	89,417	\$ 61,363,037	895	\$ 868,933	90,312	\$ 62,231,970
Porter Medical Center	50,228	\$ 54,919,182	3,615	\$ 4,491,247	53,843	\$ 59,410,429
Rutland Regional Medical Center	166,783	\$ 182,301,299	8,368	\$ 9,445,914	175,151	\$ 191,747,213
Southwestern Vermont Medical Center	117,383	\$ 136,658,377	35,020	\$ 49,432,474	152,403	\$ 186,090,851
Springfield Hospital	39,794	\$ 30,778,140	6,554	\$ 5,543,368	46,348	\$ 36,321,507
University of Vermont Medical Center	550,686	\$ 949,428,379	45,386	\$ 142,458,616	596,072	\$ 1,091,886,995
Total for 2019	1,442,066	\$ 1,935,426,384	121,194	\$ 240,525,657	1,563,260	\$ 2,175,952,041
Total for 2018	1,482,587	\$ 1,826,456,008	120,123	\$ 221,605,352	1,602,710	\$ 2,048,061,360
Total for 2017	1,497,600	\$ 1,727,049,853	119,639	\$ 207,208,943	1,617,239	\$ 1,934,258,795
Total for 2016	1,571,032	\$ 1,710,273,917	118,731	\$ 188,180,698	1,689,763	\$ 1,898,454,615
Total for 2015	1,574,797	\$ 1,659,034,371	112,488	\$ 177,458,699	1,687,285	\$ 1,836,493,070

Outpatient procedures are outpatient visits that did not originate in the ED, and that have a primary CPT code in CCS high-level groups 1 through 15. Expanded Outpatient records include all outpatient records with no primary CPT code in CCS high-level groups 1 through 15, and no associated ED or ObsBed revenue record.

Charge data should be used with caution. See discussion in Appendix A for details.

Comparisons across Hospital Settings

Table C-1
2019 Vermont Hospital Data, including VT Residents and Non-residents
Summary of Discharges from 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	1,862	3.9%	4,733	3.5%	12,658	5.4%	59,010	4.1%	78,263	4.2%
Central Vermont Medical Center	3,800	7.9%	9,061	6.7%	21,872	9.2%	164,818	11.5%	199,551	10.8%
Copley Hospital	1,687	3.5%	4,572	3.4%	12,051	5.1%	53,799	3.8%	72,109	3.9%
Gifford Medical Center	1,332	2.8%	1,920	1.4%	5,797	2.5%	17,733	1.2%	26,782	1.4%
Grace Cottage Family Health & Hospital	134	0.3%	2	0.0%	2,927	1.2%	11,080	0.8%	14,143	0.8%
Mt. Ascutney Hospital and Health Center	1,076	2.2%	1,657	1.2%	4,684	2.0%	19,650	1.4%	27,067	1.5%
North Country Hospital	1,298	2.7%	3,303	2.4%	14,456	6.1%	45,143	3.2%	64,200	3.5%
Northeastern Vermont Regional Hospital	1,294	2.7%	3,941	2.9%	13,530	5.7%	48,709	3.4%	67,474	3.7%
Northwestern Medical Center	2,288	4.7%	6,106	4.5%	22,487	9.5%	84,206	5.9%	115,087	6.2%
Porter Medical Center	1,274	2.6%	3,497	2.6%	19,169	8.1%	50,346	3.5%	74,286	4.0%
Rutland Regional Medical Center	6,421	13.3%	21,387	15.7%	25,380	10.7%	153,764	10.8%	206,952	11.2%
Southwestern Vermont Medical Center	3,419	7.1%	8,880	6.5%	20,867	8.8%	143,523	10.1%	176,689	9.6%
Springfield Hospital	1,318	2.7%	2,139	1.6%	13,196	5.6%	44,209	3.1%	60,862	3.3%
University of Vermont Medical Center	20,992	43.6%	64,968	47.7%	47,390	20.0%	531,104	37.2%	664,454	36.0%
Total	48,195	100.0%	136,166	100.0%	236,464	100.0%	1,427,094	100.0%	1,847,919	100.0%

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

Outpatient procedures are outpatient visits that did not originate in the ED, and that have a primary CPT code in CCS high-level groups 1 through 15, or that have an observation bed revenue code of 760 or 762.

ED visits are outpatient visits that originated in the ED and did not result in an inpatient stay, excluding any visit with missing or invalid diagnosis codes.

Expanded Outpatient records are outpatient records with no primary CPT code in CCS high-level groups 1 through 15, and no associated ED or ObsBed revenue record.

Table C-2
2019 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 & parasitic diseases	3,058	\$36,000	927	\$1,053	3,811	\$1,759	35,790	\$420	43,586	\$3,072
Neoplasms	1,776	\$51,535	14,987	\$5,537	438	\$7,357	96,627	\$4,217	113,828	\$5,171
Endocrine, nutritional, metabolic, immunity	1,951	\$27,726	2,129	\$3,611	3,815	\$3,005	153,948	\$467	161,843	\$900
Diseases of the blood & blood-forming organs	512	\$31,891	796	\$4,405	660	\$4,730	28,468	\$799	30,436	\$1,506
Mental disorders	3,114	\$29,261	337	\$3,847	13,620	\$2,099	33,195	\$574	50,266	\$2,802
Diseases of the nervous system and sense organs	1,419	\$33,541	17,279	\$4,453	19,504	\$2,480	67,642	\$1,588	105,844	\$2,656
Diseases of the circulatory system	8,431	\$40,838	4,211	\$14,105	19,875	\$3,964	171,193	\$838	203,710	\$3,098
Diseases of the respiratory system	4,828	\$24,075	13,232	\$1,958	28,494	\$1,822	64,017	\$809	110,571	\$2,229
Diseases of the digestive system	4,773	\$27,641	11,848	\$6,437	16,765	\$3,477	45,990	\$1,791	79,376	\$4,418
Diseases of the genitourinary system	1,895	\$23,442	11,910	\$8,746	12,418	\$3,090	112,271	\$635	138,494	\$1,883
Pregnancy, childbirth, and the puerperium	5,250	\$13,451	4,961	\$2,146	2,613	\$2,528	36,149	\$516	48,973	\$2,242
Diseases of the skin and subcutaneous tissue	845	\$18,688	4,438	\$1,571	8,280	\$1,245	32,219	\$687	45,782	\$1,211
Musculoskeletal system and connective tissue	4,144	\$44,513	20,299	\$5,048	17,726	\$1,927	192,611	\$1,119	234,780	\$2,305
Congenital anomalies	132	\$59,165	395	\$9,822	47	\$3,662	3,715	\$1,582	4,289	\$4,164
Conditions originating in the perinatal period	7	\$13,531	182	\$1,598	246	\$1,316	1,218	\$382	1,653	\$10,471
Injury & poisoning	4,642	\$43,535	5,494	\$12,910	57,494	\$2,076	58,167	\$832	125,797	\$3,539
Symptoms, signs & ill-defined conditions	1,259	\$27,643	21,678	\$3,722	28,129	\$2,857	267,433	\$574	318,499	\$1,108
Residual codes, unclassified, all Ecodes	159	\$29,408	1,063	\$5,290	2,529	\$2,834	26,441	\$1,301	30,192	\$1,748
Total Discharges and Average Charges	48,195	\$30,680	136,166	\$5,292	236,464	\$2,484	1,427,094	\$1,041	1,847,919	\$2,413
Total Charges	\$1,638,473,637		\$720,611,587		\$587,270,074		\$1,455,340,453		\$4,401,695,752	

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes, but average and total charges include newborns.

Outpatient procedures are outpatient visits that did not originate in the ED, and that have a primary CPT code in CCS high-level groups 1 through 15, or that have an observation bed revenue code of 760 or 762.

ED visits are outpatient visits that originated in the ED and did not result in an inpatient stay, excluding any visit with missing or invalid diagnosis codes.

Expanded Outpatient records are outpatient records with no primary CPT code in CCS high-level groups 1 through 15, and no associated ED or ObsBed revenue record.

Charge data should be used with caution. See discussion in Appendix A 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
2019 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	791	\$ 68,928	12,825	\$ 4,196	572	\$ 1,555	-	\$ -	14,188	\$ 7,862
Operations on the endocrine system	44	\$ 67,837	304	\$ 14,035	-	\$ -	-	\$ -	348	\$ 20,837
Operations on the eye	19	\$ 53,716	9,136	\$ 5,452	32	\$ 9,821	-	\$ -	9,187	\$ 5,567
Operations on the ear	64	\$ 48,824	3,157	\$ 2,778	45	\$ 1,216	-	\$ -	3,266	\$ 3,686
Operations on the nose, mouth, and pharynx	167	\$ 36,805	4,120	\$ 4,238	426	\$ 2,268	-	\$ -	4,713	\$ 5,618
Operations on the respiratory system	782	\$ 57,145	13,928	\$ 1,355	41	\$ 4,130	-	\$ -	14,751	\$ 4,342
Operations on the cardiovascular system	3,223	\$ 79,514	7,469	\$ 10,381	163	\$ 17,016	-	\$ -	10,855	\$ 31,351
Operations on the hemic and lymphatic system	142	\$ 78,762	576	\$ 9,055	-	\$ -	-	\$ -	718	\$ 22,841
Operations on the digestive system	3,251	\$ 44,729	35,312	\$ 5,657	999	\$ 17,198	-	\$ -	39,562	\$ 9,179
Operations on the urinary system	674	\$ 44,796	5,506	\$ 6,547	146	\$ 11,641	-	\$ -	6,326	\$ 10,740
Operations on the male genital organs	83	\$ 10,230	1,370	\$ 9,587	44	\$ 10,115	-	\$ -	1,497	\$ 9,944
Operations on the female genital organs	245	\$ 33,592	6,145	\$ 7,181	148	\$ 11,133	-	\$ -	6,538	\$ 8,260
Obstetrical procedures	4,691	\$ 13,653	3,865	\$ 903	37	\$ 18,432	-	\$ -	8,593	\$ 7,939
Operations on the musculoskeletal system	5,637	\$ 50,076	17,406	\$ 7,878	2,257	\$ 4,893	-	\$ -	25,300	\$ 17,014
Operations on the integumentary system	1,028	\$ 43,558	15,047	\$ 3,402	5,214	\$ 1,299	-	\$ -	21,289	\$ 4,830
Miscellaneous diagnostic and therapeutic procs	570	\$ 76,565	-	\$ -	226,197	\$ 2,398	686,672	\$ 1,780	913,439	\$ 1,985
New Categories specific to CPT/HCPCS	-	\$ -	-	\$ -	142	\$ 975	480,596	\$ 374	480,738	\$ 374
Total Discharges and Average Charges	21,411	\$ 44,382	136,166	\$ 5,292	236,463	\$ 2,484	1,167,268	\$ 1,201	1,561,308	\$ 2,394
Total charges		\$1,033,425,878		\$720,611,587		\$587,270,074		\$1,401,576,752		\$3,742,884,291

Numbers of inpatient discharges exclude newborns (MDC 15) and any records with missing or invalid diagnosis codes, but average and total charges include newborns.

Outpatient procedures are outpatient visits that did not originate in the ED, and that have a primary CPT code in CCS high-level groups 1 through 15, or that have an observation bed revenue code of 760 or 762.

ED visits are outpatient visits that originated in the ED and did not result in an inpatient stay, excluding any visit with missing or invalid diagnosis codes.

Expanded Outpatient records are outpatient records with no primary CPT code in CCS high-level groups 1 through 15, and no associated ED or ObsBed revenue record. Many of these records have no procedure code.

Charge data should be used with caution. See discussion in Appendix A 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 was developed at the Agency for Healthcare Research and Quality (AHRQ). CCS groups ICD-10-CM principal diagnosis codes into the same meaningful categories. CCS aggregates diagnoses of illnesses and conditions into more than 260 single-level diagnosis categories. CCS further collapses these single-level diagnosis groups into high-level categories, broad groups based on body systems or condition categories.

Similarly, CCS provides software versions for grouping ICD-10-PCS procedure codes, and HCPCS/CPT codes into the same single- and high-level procedure categories. These versions and other software tools are available at https://www.hcup-us.ahrq.gov/tools_software.jsp

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 and charges on the newborn record are included in summary calculations of charges.

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 primary CPT code in CCS CPT high level procedure groups 1 through 15, or an associated ED (45x) or Observation Bed (760 or 762) 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, including those with an associated ED revenue code. Maternal records are included in counts, 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 hours and 59 minutes or more, depending on the 3rd party, with either a specific 'rule/out' diagnostic consideration - e.g., appendicitis, angina, pneumonia, or MI; 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 primary CPT code in CCS CPT high level procedure groups 1 through 15 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

Reporting of Diagnosis and Procedures

Vermont Hospitals' Reporting of Outpatient Procedures.

As of July 1, 2014, Vermont hospitals are required to report outpatient procedures using the HCPCS/CPT coding system: these codes are included on each of one-to-many revenue records per visit, and there is no determination by the reporting hospital of which CPT code is considered to be primary. Therefore, a primary CPT has been calculated for each outpatient visit using an algorithm that includes Relative Value Units (RVU), hospital facility charges, and whether the CPT code is for an ambulatory surgical procedure.

Relative Value Units. Relative value units (RVUs) are a measure of value used in the United States Medicare reimbursement formula for physician services. Medicare pays physicians for services based on submission of a claim using one or more specific CPT codes. For each service, a payment formula contains three RVUs, one for physician work (including factors such as the physician's time, mental effort or intensity, technical skill, and judgment), one for practice expense (including factors such as the direct expenses of supplies and non-physician labor), and one for malpractice expense. The three RVUs for a given service are each multiplied by a unique geographic practice cost index, referred to as the GPCI adjustment, to account for differences in wages and overhead costs across regions of the country. The sum of the three geographically weighted RVU values is then multiplied by the Medicare conversion factor to determine the amount of payment.

Based on the above, the RVUs can be used as an estimate of the value of physician services. A CPT code with a higher RVU indicates a procedure that takes more time, intensity, skill, and/or resources than a CPT with a lower RVU.

Calculation of Primary CPT. For each outpatient visit, the CPT code with the highest RVU is considered to be the primary CPT code. For discharges where there is more than one CPT code with the same RVU, the one with the higher charges is selected as Primary. For discharges with more than one CPT code with the same RVU and the same charges, the next comparison is whether one CPT code is considered to be ambulatory surgery (CPT range 10021-69990) and one is not: in this instance, the CPT code for ambulatory surgery is selected as primary. If the CPT codes are both for ambulatory surgery (or both not), selection as primary CPT is based on service date or on record number.

CCS Grouping of Procedures into Categories.

Clinical Classification Software (CCS) groups HCPCS/CPT codes into the same single- and high-level categories based on body systems. The single-level procedure CCS aggregates procedures into 244 mutually exclusive categories, most representing single types of procedures. High-level CCS groups further collapse single-level groups into broad categories based on body systems or condition. CCS groupings for outpatient procedures are first based on the presence of a primary CPT code in CCS range.

Federal Requirements for Reporting of All Diagnoses and Inpatient Procedures.

As of October 1, 2015, federal requirements mandated that hospitals use the ICD-10- CM/PCS system for reporting all diagnoses and inpatient procedures in all hospital settings. For all diagnoses, Clinical Classification Software (CCS) groups ICD-10-CM diagnosis codes into the same single- and high-level diagnosis categories based on body systems.

For inpatient procedures, Clinical Classification Software (CCS) groups ICD-10-PCS procedure codes into the same single- and high-level procedure categories based on body systems.

CCS groups ICD-10-PCS and HCPCS/CPT codes into the same single- and high-level procedure categories based on body systems, which allows for analyses of procedure groups within and across hospital settings, and across time.

APPENDIX C

Clinical Classifications Software (CCS) High Level Diagnosis 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 Ecodes (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
- 17 New categories specific to CPT/HCPCS

APPENDIX D

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

CCS High Level Diagnosis Group 6:

Diseases of the Nervous System and Sense Organs

- 76 Meningitis (except that caused by tuberculosis or STD)
- 77 Encephalitis (except that caused by tuberculosis or STD)
- 78 Other CNS infection & poliomyelitis
- 79 Parkinson's disease
- 80 Multiple sclerosis

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

CCS High Level Diagnosis Group 7:

Diseases of the Circulatory System

- 96 Heart valve disorders
- 97 Peri-, endo- & myocarditis, cardiomyopathy (except that caused by tuberculosis or STD)
- 98 Essential hypertension
- 99 Hypertension with complications & secondary hypertension
- 100 Acute myocardial infarction
- 101 Coronary atherosclerosis & other heart disease
- 102 Nonspecific chest pain
- 103 Pulmonary heart disease
- 104 Other & ill-defined heart disease
- 105 Conduction disorders
- 106 Cardiac dysrhythmias
- 107 Cardiac arrest & ventricular fibrillation
- 108 Congestive heart failure, nonhypertensive
- 109 Acute cerebrovascular disease
- 110 Occlusion or stenosis of precerebral arteries
- 111 Other & ill-defined cerebrovascular disease

- 112 Transient cerebral ischemia
- 113 Late effects of cerebrovascular disease
- 114 Peripheral & visceral atherosclerosis
- 115 Aortic, peripheral & visceral artery aneurysms
- 116 Aortic & peripheral arterial embolism or thrombosis
- 117 Other circulatory disease
- 118 Phlebitis, thrombophlebitis & thromboembolism
- 119 Varicose veins of lower extremity
- 120 Hemorrhoids
- 121 Other diseases of veins & lymphatics

CCS High Level Diagnosis Group 8:

Diseases of the Respiratory System

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

CCS High Level Diagnosis Group 9:

Diseases of the Digestive System

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

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

CCS High Level Diagnosis Group 10:

Diseases of the Genitourinary System

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

CCS High Level Diagnosis Group 11:

Contraception and Complications of Pregnancy and Childbirth

- 176 Contraceptive & procreative management
- 177 Spontaneous abortion
- 178 Induced abortion
- 179 Post-abortion 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:

Certain 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 and Factors
Influencing Health Status

- 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 (259. and 260.)

- 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 E

Primary Diagnoses of Inpatients in Vermont Hospitals

CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
1 Infectious & parasitic diseases				
1 Tuberculosis	2	2	1	1
2 Septicemia (except in labor)	2,435	2,412	2,655	2,732
3 Bacterial infection; unspecified site	72	82	89	101
4 Mycoses	13	16	19	19
5 HIV infection	7	9	10	10
6 Hepatitis	30	20	18	32
7 Viral infection	92	91	59	78
8 Other infections; including parasitic	50	85	63	78
9 Sexually transmitted infections (not HIV or hepatitis)	2	5	3	7
10 Immunizations and screening for infectious disease	-	-	3	-
Total	2,703	2,722	2,920	3,058
2 Neoplasms				
11 Cancer of head and neck	38	35	42	45
12 Cancer of esophagus	36	31	19	30
13 Cancer of stomach	23	23	28	29
14 Cancer of colon	160	164	182	132
15 Cancer of rectum and anus	56	53	59	38
16 Cancer of liver and intrahepatic bile duct	22	29	27	19
17 Cancer of pancreas	49	50	46	39
18 Cancer of other GI organs; peritoneum	29	34	35	32
19 Cancer of bronchus; lung	215	184	146	154
20 Cancer; other respiratory and intrathoracic	1	4	5	1
21 Cancer of bone and connective tissue	19	12	15	13
22 Melanomas of skin	1	-	4	1
23 Other non-epithelial cancer of skin	5	5	3	5
24 Cancer of breast	54	37	50	49
25 Cancer of uterus	31	21	28	17
26 Cancer of cervix	14	4	17	8
27 Cancer of ovary	36	24	34	22
28 Cancer of other female genital organs	12	19	8	16
29 Cancer of prostate	139	123	34	39
30 Cancer of testis	1	4	1	2
31 Cancer of other male genital organs	4	1	1	3
32 Cancer of bladder	43	48	46	45
33 Cancer of kidney and renal pelvis	84	90	96	74
34 Cancer of other urinary organs	8	8	13	12
35 Cancer of brain and nervous system	62	65	61	71
36 Cancer of thyroid	13	16	5	6
37 Hodgkin`s disease	3	4	3	2
38 Non-Hodgkin`s lymphoma	72	70	53	58
39 Leukemias	40	46	59	57
40 Multiple myeloma	20	23	32	26
41 Cancer; other and unspecified primary	8	10	9	7
42 Secondary malignancies	263	298	286	292
43 Malignant neoplasm without specification of site	31	30	27	27
44 Neoplasms of unspecified nature or uncertain behavior	51	52	53	40
45 Maintenance chemotherapy; radiotherapy	188	176	191	172
46 Benign neoplasm of uterus	74	68	61	55

Appendix E

Primary Diagnoses of Inpatients in Vermont Hospitals CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
47 Other and unspecified benign neoplasm	156	131	128	138
Total	2,061	1,992	1,907	1,776
3 Endocrine, nutritional, metabolic, immunity				
48 Thyroid disorders	17	32	30	31
49 Diabetes mellitus without complication	4	6	11	6
50 Diabetes mellitus with complications	648	713	732	827
51 Other endocrine disorders	88	96	62	90
52 Nutritional deficiencies	37	37	27	34
53 Disorders of lipid metabolism	2	1	3	2
54 Gout and other crystal arthropathies	46	32	42	35
55 Fluid and electrolyte disorders	426	426	447	475
56 Cystic fibrosis	163	167	139	121
57 Immunity disorders	5	8	8	7
58 Other nutritional; endocrine; and metabolic disorders	305	282	300	323
Total	1,741	1,800	1,801	1,951
4 Diseases of the blood & blood-forming organs				
59 Deficiency and other anemia	186	189	190	203
60 Acute posthemorrhagic anemia	103	82	89	93
61 Sickle cell anemia	24	31	24	12
62 Coagulation and hemorrhagic disorders	59	71	85	82
63 Diseases of white blood cells	130	128	110	109
64 Other hematologic conditions	15	8	11	13
Total	517	509	509	512
5 Mental disorders				
650 Adjustment disorders	67	77	127	155
651 Anxiety disorders	107	107	126	147
652 Attention-deficit conduct and disruptive behavior disorders	2	4	8	6
653 Delirium dementia and amnesic and other cognitive disorders	144	166	154	176
654 Developmental disorders	-	-	1	1
655 Disorders usually diagnosed in infancy childhood or adolescence	5	4	5	4
656 Impulse control disorders NEC	2	4	-	8
657 Mood disorders	1,109	1,150	1,238	1,040
658 Personality disorders	66	77	83	83
659 Schizophrenia and other psychotic disorders	284	303	329	355
660 Alcohol-related disorders	658	698	825	777
661 Substance-related disorders	160	169	128	156
662 Suicide and intentional self-inflicted injury	216	226	200	170
663 Screening and history of mental health and substance abuse codes	-	-	-	-
670 Miscellaneous disorders	31	52	44	36
Total	2,851	3,037	3,268	3,114
6 Diseases of the nervous system and sense organs				
76 Meningitis (except that caused by TB or STD)	47	52	42	37
77 Encephalitis (except that caused by TB or STD)	31	24	20	24
78 Other CNS infection and poliomyelitis	18	20	21	31
79 Parkinson's disease	38	36	30	33
80 Multiple sclerosis	27	32	26	23
81 Other hereditary and degenerative nervous system conditions	50	43	60	53
82 Paralysis	37	41	42	27
83 Epilepsy; convulsions	373	359	320	313
84 Headache; including migraine	128	109	130	123

Appendix E

Primary Diagnoses of Inpatients in Vermont Hospitals

CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
85 Coma; stupor; and brain damage	29	14	13	17
87 Retinal detachments; defects; vascular occlusion; and retinopathy	1	3	3	8
88 Glaucoma	-	1	2	3
89 Blindness and vision defects	7	3	11	9
90 Inflammation; infection of eye (except that caused by TB or sexually transmitted disease)	22	10	18	20
91 Other eye disorders	7	11	7	4
92 Otitis media and related conditions	10	15	11	16
93 Conditions associated with dizziness or vertigo	69	80	59	84
94 Other ear and sense organ disorders	9	10	14	13
95 Other nervous system disorders	502	586	614	581
Total	1,405	1,449	1,443	1,419
7 Diseases of the circulatory system				
96 Heart valve disorders	266	330	331	416
97 Peri-, endo-, and myocarditis; cardiomyopathy (except that caused by TB or STD)	131	157	153	133
98 Essential hypertension	40	3	8	6
99 Hypertension with complications and secondary hypertension	327	1,109	1,332	1,586
100 Acute myocardial infarction	1,262	1,279	1,246	1,304
101 Coronary atherosclerosis and other heart disease	422	447	399	415
102 Nonspecific chest pain	206	184	195	165
103 Pulmonary heart disease	399	336	345	333
104 Other and ill-defined heart disease	35	27	38	39
105 Conduction disorders	94	123	129	134
106 Cardiac dysrhythmias	1,229	1,239	1,344	1,254
107 Cardiac arrest and ventricular fibrillation	37	44	33	22
108 Congestive heart failure; nonhypertensive	1,313	759	572	451
109 Acute cerebrovascular disease	981	894	975	1,077
110 Occlusion or stenosis of precerebral arteries	109	113	100	120
111 Other and ill-defined cerebrovascular disease	34	55	47	41
112 Transient cerebral ischemia	110	139	81	89
113 Late effects of cerebrovascular disease	234	240	265	257
114 Peripheral and visceral atherosclerosis	226	162	182	161
115 Aortic; peripheral; and visceral artery aneurysms	118	109	112	106
116 Aortic and peripheral arterial embolism or thrombosis	23	30	21	23
117 Other circulatory disease	112	97	120	151
118 Phlebitis; thrombophlebitis and thromboembolism	136	109	99	87
119 Varicose veins of lower extremity	12	5	13	9
120 Hemorrhoids	20	31	15	23
121 Other diseases of veins and lymphatics	18	32	26	29
Total	7,894	8,053	8,181	8,431
8 Diseases of the respiratory system				
122 Pneumonia (except that caused by TB or STD)	1,490	1,380	1,441	1,451
123 Influenza	133	253	434	293
124 Acute and chronic tonsillitis	15	9	13	13
125 Acute bronchitis	201	145	199	190
126 Other upper respiratory infections	72	81	58	79
127 Chronic obstructive pulmonary disease and bronchiectasis	1,246	1,480	1,179	1,102
128 Asthma	165	164	171	189
129 Aspiration pneumonitis; food/vomitus	307	268	258	268
130 Pleurisy; pneumothorax; pulmonary collapse	191	177	169	150
131 Respiratory failure; insufficiency; arrest (adult)	801	699	717	883

Appendix E

Primary Diagnoses of Inpatients in Vermont Hospitals

CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
132 Lung disease due to external agents	18	21	8	11
133 Other lower respiratory disease	156	156	186	151
134 Other upper respiratory disease	53	49	45	48
Total	4,848	4,882	4,878	4,828
9 Diseases of the digestive system				
135 Intestinal infection	324	329	342	332
136 Disorders of teeth and jaw	43	38	38	24
137 Diseases of mouth; excluding dental	27	31	42	35
138 Esophageal disorders	94	111	100	97
139 Gastroduodenal ulcer (except hemorrhage)	23	48	36	26
140 Gastritis and duodenitis	48	58	50	52
141 Other disorders of stomach and duodenum	53	54	49	61
142 Appendicitis and other appendiceal conditions	316	312	234	295
143 Abdominal hernia	236	233	199	202
144 Regional enteritis and ulcerative colitis	135	171	156	163
145 Intestinal obstruction without hernia	702	620	589	594
146 Diverticulosis and diverticulitis	573	532	563	571
147 Anal and rectal conditions	46	54	48	46
148 Peritonitis and intestinal abscess	37	52	52	52
149 Biliary tract disease	505	452	460	537
151 Other liver diseases	164	154	166	166
152 Pancreatic disorders (not diabetes)	629	546	548	526
153 Gastrointestinal hemorrhage	595	561	549	537
154 Noninfectious gastroenteritis	162	151	137	154
155 Other gastrointestinal disorders	342	321	291	303
Total	5,054	4,828	4,649	4,773
10 Diseases of the genitourinary system				
156 Nephritis; nephrosis; renal sclerosis	25	20	16	17
157 Acute and unspecified renal failure	629	589	590	618
158 Chronic kidney disease	22	15	15	20
159 Urinary tract infections	669	733	718	743
160 Calculus of urinary tract	43	42	57	56
161 Other diseases of kidney and ureters	184	171	164	155
162 Other diseases of bladder and urethra	43	32	25	30
163 Genitourinary symptoms and ill-defined conditions	48	45	55	63
164 Hyperplasia of prostate	57	47	42	31
165 Inflammatory conditions of male genital organs	25	29	49	31
166 Other male genital disorders	6	5	8	10
167 Nonmalignant breast conditions	11	14	21	10
168 Inflammatory diseases of female pelvic organs	33	23	32	23
169 Endometriosis	11	14	16	11
170 Prolapse of female genital organs	7	10	8	14
171 Menstrual disorders	12	6	10	16
172 Ovarian cyst	15	13	13	12
173 Menopausal disorders	-	4	3	6
175 Other female genital disorders	25	39	38	29
Total	1,865	1,851	1,880	1,895

Appendix E

Primary Diagnoses of Inpatients in Vermont Hospitals

CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
11 Pregnancy, childbirth, and the puerperium				
176 Contraceptive and procreative management	-	1	-	-
177 Spontaneous abortion	9	4	1	7
178 Induced abortion	7	8	6	5
179 Postabortion complications	-	-	-	1
180 Ectopic pregnancy	3	7	7	4
181 Other complications of pregnancy	378	326	325	364
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa	83	74	61	74
183 Hypertension complicating pregnancy; childbirth and the puerperium	475	524	563	564
184 Early or threatened labor	164	147	163	140
185 Prolonged pregnancy	738	689	716	684
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium	117	191	198	196
187 Malposition; malpresentation	248	218	217	170
188 Fetopelvic disproportion; obstruction	72	68	66	66
189 Previous C-section	452	426	422	460
190 Fetal distress and abnormal forces of labor	260	222	148	181
191 Polyhydramnios and other problems of amniotic cavity	622	582	538	576
192 Umbilical cord complication	257	208	178	164
193 OB-related trauma to perineum and vulva	585	554	591	480
194 Forceps delivery	1	-	-	2
195 Other complications of birth; puerperium affecting management of mother	1,028	1,089	1,012	971
196 Normal pregnancy and/or delivery	112	154	164	141
Total	5,611	5,492	5,376	5,250
12 Diseases of the skin and subcutaneous tissue				
197 Skin and subcutaneous tissue infections	825	796	720	745
198 Other inflammatory condition of skin	13	13	15	27
199 Chronic ulcer of skin	60	61	52	65
200 Other skin disorders	11	10	17	8
Total	909	880	804	845
13 Musculoskeletal system and connective tissue				
201 Infective arthritis and osteomyelitis (except that caused by TB or STD)	203	178	197	191
202 Rheumatoid arthritis and related disease	16	18	25	23
203 Osteoarthritis	2,567	2,775	2,649	2,673
204 Other non-traumatic joint disorders	79	75	67	65
205 Spondylosis; intervertebral disc disorders; other back problems	668	583	633	564
206 Osteoporosis	-	-	1	-
207 Pathological fracture	135	136	164	188
208 Acquired foot deformities	1	2	5	5
209 Other acquired deformities	168	148	106	95
210 Systemic lupus erythematosus and connective tissue disorders	32	26	26	27
211 Other connective tissue disease	208	202	226	238
212 Other bone disease and musculoskeletal deformities	66	72	83	75
Total	4,143	4,215	4,182	4,144

Appendix E

Primary Diagnoses of Inpatients in Vermont Hospitals

CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
14 Congenital anomalies				
213 Cardiac and circulatory congenital anomalies	56	52	36	29
214 Digestive congenital anomalies	23	28	25	19
215 Genitourinary congenital anomalies	20	25	23	25
216 Nervous system congenital anomalies	11	12	14	16
217 Other congenital anomalies	26	30	29	43
Total	136	147	127	132
15 Conditions originating in the perinatal period				
218 Liveborn	-	-	-	-
224 Other perinatal conditions	10	6	9	7
Total	10	6	9	7
16 Injury & poisoning				
225 Joint disorders and dislocations; trauma-related	20	38	26	30
226 Fracture of neck of femur (hip)	729	780	742	782
227 Spinal cord injury	34	30	22	37
228 Skull and face fractures	82	66	66	66
229 Fracture of upper limb	212	214	210	197
230 Fracture of lower limb	594	581	572	559
231 Other fractures	559	539	554	552
232 Sprains and strains	33	40	40	41
233 Intracranial injury	312	349	384	338
234 Crushing injury or internal injury	161	179	159	197
235 Open wounds of head; neck; and trunk	27	29	30	25
236 Open wounds of extremities	47	61	48	44
237 Complication of device; implant or graft	684	646	718	712
238 Complications of surgical procedures or medical care	705	701	590	705
239 Superficial injury; contusion	67	77	83	58
240 Burns	40	37	35	34
241 Poisoning by psychotropic agents	44	29	36	27
242 Poisoning by other medications and drugs	103	114	102	99
243 Poisoning by nonmedicinal substances	19	27	25	12
244 Other injuries and conditions due to external causes	137	151	144	127
Total	4,609	4,688	4,586	4,642

Appendix E

Primary Diagnoses of Inpatients in Vermont Hospitals

CCS Single Level Categories by Discharge Year

* omits newborns

CCS High Level Diagnosis Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Diagnosis Category				
17 Symptoms, signs & ill-defined conditions				
245 Syncope	184	196	152	180
246 Fever of unknown origin	79	93	75	67
247 Lymphadenitis	15	10	11	7
248 Gangrene	28	47	27	36
249 Shock	19	11	17	25
250 Nausea and vomiting	97	71	68	65
251 Abdominal pain	135	110	106	95
252 Malaise and fatigue	76	103	117	103
253 Allergic reactions	31	26	29	31
254 Rehabilitation care; fitting of prostheses; and adjustment of devices	1	2	3	3
255 Administrative/social admission	8	6	1	2
256 Medical examination/evaluation	-	-	1	-
257 Other aftercare	747	741	768	620
258 Other screening for suspected conditions (not mental disorders or infectious disease)	18	16	26	25
Total	1,438	1,432	1,401	1,259
18 Residual codes, unclassified, all Ecodes				
259 Residual codes; unclassified	184	169	146	147
2617 Adverse effects of medical drugs	21	11	13	12
Total	205	180	159	159
Totals by Year	48,000	48,163	48,080	48,195

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
1 Infectious & parasitic diseases				
1 Tuberculosis	1	-	1	-
2 Septicemia (except in labor)	-	5	3	1
3 Bacterial infection; unspecified site	34	35	25	29
4 Mycoses	225	289	307	481
5 HIV infection	1	3	2	2
6 Hepatitis	62	49	53	31
7 Viral infection	210	145	145	156
8 Other infections; including parasitic	28	22	17	20
9 Sexually transmitted infections (not HIV or hepatitis)	26	57	64	74
10 Immunizations and screening for infectious disease	84	137	130	133
Total	671	742	747	927
2 Neoplasms				
11 Cancer of head and neck	242	262	267	302
12 Cancer of esophagus	129	120	142	150
13 Cancer of stomach	45	62	64	54
14 Cancer of colon	455	496	419	395
15 Cancer of rectum and anus	345	299	358	358
16 Cancer of liver and intrahepatic bile duct	52	55	47	38
17 Cancer of pancreas	186	173	181	177
18 Cancer of other GI organs; peritoneum	36	46	57	69
19 Cancer of bronchus; lung	549	471	440	471
20 Cancer; other respiratory and intrathoracic	3	4	4	10
21 Cancer of bone and connective tissue	34	24	27	52
22 Melanomas of skin	296	253	285	284
23 Other non-epithelial cancer of skin	1,960	1,922	1,995	2,216
24 Cancer of breast	859	866	995	1,097
25 Cancer of uterus	202	242	220	185
26 Cancer of cervix	125	205	195	228
27 Cancer of ovary	158	163	112	134
28 Cancer of other female genital organs	73	63	54	58
29 Cancer of prostate	228	242	363	396
30 Cancer of testis	21	29	37	29
31 Cancer of other male genital organs	9	5	5	6
32 Cancer of bladder	803	740	663	653
33 Cancer of kidney and renal pelvis	43	42	56	79
34 Cancer of other urinary organs	32	46	41	101
35 Cancer of brain and nervous system	16	11	19	19
36 Cancer of thyroid	106	75	78	66
37 Hodgkin's disease	47	63	63	52
38 Non-Hodgkin's lymphoma	610	561	576	519
39 Leukemias	227	214	270	316
40 Multiple myeloma	138	130	148	182

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
41 Cancer; other and unspecified primary	97	61	96	87
42 Secondary malignancies	144	174	179	158
43 Malignant neoplasm without specification of site	65	76	44	51
44 Neoplasms of unspecified nature or uncertain behavior	363	422	586	1,697
45 Maintenance chemotherapy; radiotherapy	23	8	7	41
46 Benign neoplasm of uterus	199	184	177	186
47 Other and unspecified benign neoplasm	5,669	4,332	3,857	4,071
Total	14,589	13,141	13,127	14,987
3 Endocrine, nutritional, metabolic, immunity				
48 Thyroid disorders	188	208	157	164
49 Diabetes mellitus without complication	89	110	95	80
50 Diabetes mellitus with complications	1,043	912	855	1,074
51 Other endocrine disorders	63	78	80	68
52 Nutritional deficiencies	24	13	20	26
53 Disorders of lipid metabolism	32	38	34	28
54 Gout and other crystal arthropathies	41	45	51	44
55 Fluid and electrolyte disorders	23	10	18	18
56 Cystic fibrosis	274	159	199	240
57 Immunity disorders	163	197	226	236
58 Other nutritional; endocrine; and metabolic disorders	171	137	161	151
Total	2,111	1,907	1,896	2,129
4 Diseases of the blood & blood-forming organs				
59 Deficiency and other anemia	572	559	620	679
60 Acute posthemorrhagic anemia	2	2	5	3
61 Sickle cell anemia	3	8	7	10
62 Coagulation and hemorrhagic disorders	57	43	48	38
63 Diseases of white blood cells	22	24	37	28
64 Other hematologic conditions	6	7	12	38
Total	662	643	729	796
5 Mental disorders				
650 Adjustment disorders	3	3	-	3
651 Anxiety disorders	24	11	9	10
652 Attention-deficit conduct and disruptive behavior disorders	14	-	1	2
653 Delirium dementia and amnesic and other cognitive disorders	7	9	5	10
654 Developmental disorders	6	-	2	6
655 Disorders usually diagnosed in infancy childhood or adolescence	1	4	-	1
656 Impulse control disorders NEC	-	-	-	-
657 Mood disorders	17	36	33	45
658 Personality disorders	-	-	1	1
659 Schizophrenia and other psychotic disorders	10	11	13	7
660 Alcohol-related disorders	56	46	29	62
661 Substance-related disorders	124	270	50	53
662 Suicide and intentional self-inflicted injury	-	-	-	-
663 Screening and history of mental health and substance abuse codes	438	440	23	26
670 Miscellaneous disorders	82	84	86	111
Total	782	914	252	337

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
6 Diseases of the nervous system and sense organs				
76 Meningitis (except that caused by TB or STD)	1	-	1	2
77 Encephalitis (except that caused by TB or STD)	5	2	1	3
78 Other CNS infection and poliomyelitis	1	2	4	5
79 Parkinson's disease	53	78	103	108
80 Multiple sclerosis	51	42	29	40
81 Other hereditary and degenerative nervous system conditions	302	289	345	384
82 Paralysis	243	157	107	105
83 Epilepsy; convulsions	27	34	30	42
84 Headache; including migraine	436	514	544	509
85 Coma; stupor; and brain damage	7	10	12	10
86 Cataract	4,246	4,331	4,782	4,474
87 Retinal detachments; defects; vascular occlusion; and retinopathy	2,042	2,265	2,470	2,803
88 Glaucoma	394	378	431	536
89 Blindness and vision defects	58	47	42	44
90 Inflammation; infection of eye (except that caused by TB or sexually transmitted disease)	54	29	45	50
91 Other eye disorders	486	480	563	606
92 Otitis media and related conditions	1,100	1,074	1,151	1,161
93 Conditions associated with dizziness or vertigo	98	184	193	190
94 Other ear and sense organ disorders	2,282	2,281	2,382	2,477
95 Other nervous system disorders	3,396	3,447	3,415	3,730
Total	15,282	15,644	16,650	17,279
7 Diseases of the circulatory system				
96 Heart valve disorders	110	74	67	87
97 Peri-, endo-, and myocarditis; cardiomyopathy (except that caused by TB or STD)	82	68	64	66
98 Essential hypertension	96	100	103	84
99 Hypertension with complications and secondary hypertension	81	101	151	115
100 Acute myocardial infarction	48	39	24	49
101 Coronary atherosclerosis and other heart disease	1,030	975	922	908
102 Nonspecific chest pain	152	129	116	95
103 Pulmonary heart disease	93	78	87	134
104 Other and ill-defined heart disease	19	34	28	19
105 Conduction disorders	173	138	152	143
106 Cardiac dysrhythmias	650	636	695	698
107 Cardiac arrest and ventricular fibrillation	6	4	2	4
108 Congestive heart failure; nonhypertensive	63	64	38	53
109 Acute cerebrovascular disease	44	75	106	99
110 Occlusion or stenosis of precerebral arteries	8	5	9	7
111 Other and ill-defined cerebrovascular disease	59	51	66	50
112 Transient cerebral ischemia	7	4	6	5
113 Late effects of cerebrovascular disease	20	23	33	46
114 Peripheral and visceral atherosclerosis	420	358	415	440
115 Aortic; peripheral; and visceral artery aneurysms	28	25	20	28
116 Aortic and peripheral arterial embolism or thrombosis	7	3	5	8
117 Other circulatory disease	119	127	148	176
118 Phlebitis; thrombophlebitis and thromboembolism	52	19	32	20
119 Varicose veins of lower extremity	146	179	138	207
120 Hemorrhoids	359	332	348	301
121 Other diseases of veins and lymphatics	354	346	337	369
Total	4,226	3,987	4,112	4,211

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
8 Diseases of the respiratory system				
122 Pneumonia (except that caused by TB or STD)	128	127	155	154
123 Influenza	1	-	2	-
124 Acute and chronic tonsillitis	520	517	532	533
125 Acute bronchitis	26	35	48	47
126 Other upper respiratory infections	723	585	637	728
127 Chronic obstructive pulmonary disease and bronchiectasis	2,352	2,395	2,543	2,691
128 Asthma	1,484	1,822	1,983	2,243
129 Aspiration pneumonitis; food/vomitus	11	5	2	3
130 Pleurisy; pneumothorax; pulmonary collapse	220	238	218	209
131 Respiratory failure; insufficiency; arrest (adult)	30	30	28	50
132 Lung disease due to external agents	26	31	27	38
133 Other lower respiratory disease	3,828	3,840	4,006	4,441
134 Other upper respiratory disease	1,920	1,960	2,028	2,095
Total	11,269	11,585	12,209	13,232
9 Diseases of the digestive system				
135 Intestinal infection	33	29	16	14
136 Disorders of teeth and jaw	87	80	84	98
137 Diseases of mouth; excluding dental	116	111	156	172
138 Esophageal disorders	2,827	2,710	2,585	2,491
139 Gastroduodenal ulcer (except hemorrhage)	135	151	108	120
140 Gastritis and duodenitis	677	583	439	353
141 Other disorders of stomach and duodenum	371	490	283	294
142 Appendicitis and other appendiceal conditions	54	61	55	74
143 Abdominal hernia	2,136	2,212	2,018	2,008
144 Regional enteritis and ulcerative colitis	448	423	242	300
145 Intestinal obstruction without hernia	17	19	22	16
146 Diverticulosis and diverticulitis	368	374	272	261
147 Anal and rectal conditions	404	383	385	370
148 Peritonitis and intestinal abscess	18	17	17	77
149 Biliary tract disease	1,190	1,063	1,068	1,050
151 Other liver diseases	145	130	131	156
152 Pancreatic disorders (not diabetes)	92	103	86	76
153 Gastrointestinal hemorrhage	1,035	952	878	864
154 Noninfectious gastroenteritis	349	364	281	224
155 Other gastrointestinal disorders	2,286	2,492	2,712	2,830
Total	12,788	12,747	11,838	11,848

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
10 Diseases of the genitourinary system				
156 Nephritis; nephrosis; renal sclerosis	1	7	12	8
157 Acute and unspecified renal failure	83	42	52	63
158 Chronic kidney disease	3,049	2,901	2,691	3,223
159 Urinary tract infections	354	346	310	400
160 Calculus of urinary tract	1,231	1,184	1,303	1,221
161 Other diseases of kidney and ureters	366	403	384	427
162 Other diseases of bladder and urethra	631	601	541	602
163 Genitourinary symptoms and ill-defined conditions	1,556	1,275	1,417	1,402
164 Hyperplasia of prostate	406	377	358	385
165 Inflammatory conditions of male genital organs	17	25	28	28
166 Other male genital disorders	369	356	363	346
167 Nonmalignant breast conditions	987	975	1,152	1,241
168 Inflammatory diseases of female pelvic organs	93	85	97	102
169 Endometriosis	173	142	157	176
170 Prolapse of female genital organs	294	284	298	376
171 Menstrual disorders	402	407	353	303
172 Ovarian cyst	93	97	101	97
173 Menopausal disorders	340	356	351	324
174 Female infertility	180	175	214	190
175 Other female genital disorders	1,018	984	849	996
Total	11,643	11,022	11,031	11,910
11 Pregnancy, childbirth, and the puerperium				
176 Contraceptive and procreative management	660	818	749	857
177 Spontaneous abortion	36	37	44	36
178 Induced abortion	43	32	70	72
179 Postabortion complications	-	-	-	-
180 Ectopic pregnancy	14	10	12	15
181 Other complications of pregnancy	1,653	1,791	1,899	1,785
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa	74	77	71	59
183 Hypertension complicating pregnancy; childbirth and the puerperium	194	342	271	351
184 Early or threatened labor	745	682	502	397
185 Prolonged pregnancy	162	169	128	150
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium	419	527	467	560
187 Malposition; malpresentation	48	56	70	51
188 Fetopelvic disproportion; obstruction	-	2	-	-
189 Previous C-section	5	3	2	6
190 Fetal distress and abnormal forces of labor	26	11	20	9
191 Polyhydramnios and other problems of amniotic cavity	109	103	101	48
192 Umbilical cord complication	2	15	2	4
193 OB-related trauma to perineum and vulva	-	2	-	2
195 Other complications of birth; puerperium affecting management of mother	72	73	39	39
196 Normal pregnancy and/or delivery	570	431	672	520
Total	4,832	5,181	5,119	4,961

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
12 Diseases of the skin and subcutaneous tissue				
197 Skin and subcutaneous tissue infections	370	273	251	300
198 Other inflammatory condition of skin	946	763	934	496
199 Chronic ulcer of skin	325	134	186	195
200 Other skin disorders	2,771	2,952	2,981	3,447
Total	4,412	4,122	4,352	4,438
13 Musculoskeletal system and connective tissue				
201 Infective arthritis and osteomyelitis (except that caused by TB or STD)	142	134	144	151
202 Rheumatoid arthritis and related disease	81	99	80	73
203 Osteoarthritis	3,593	3,871	4,554	5,054
204 Other non-traumatic joint disorders	1,683	1,504	1,353	1,443
205 Spondylosis; intervertebral disc disorders; other back problems	7,985	7,685	7,434	7,546
206 Osteoporosis	12	8	7	15
207 Pathological fracture	48	58	34	39
208 Acquired foot deformities	727	737	687	771
209 Other acquired deformities	208	177	139	158
210 Systemic lupus erythematosus and connective tissue disorders	121	118	118	125
211 Other connective tissue disease	4,303	4,275	4,487	4,765
212 Other bone disease and musculoskeletal deformities	174	140	160	159
Total	19,077	18,806	19,197	20,299
14 Congenital anomalies				
213 Cardiac and circulatory congenital anomalies	31	48	46	31
214 Digestive congenital anomalies	27	22	34	31
215 Genitourinary congenital anomalies	113	124	142	143
216 Nervous system congenital anomalies	7	4	5	13
217 Other congenital anomalies	192	163	180	177
Total	370	361	407	395
15 Conditions originating in the perinatal period				
218 Liveborn				
219 Short gestation; low birth weight; and fetal growth retardation	1	6	-	11
220 Intrauterine hypoxia and birth asphyxia	-	-	-	1
222 Hemolytic jaundice and perinatal jaundice	6	6	3	7
223 Birth trauma	-	1	-	-
224 Other perinatal conditions	171	155	162	163
Total	178	168	165	182

APPENDIX F

Primary Diagnoses of Outpatients in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Group	ICD-10-CM			
	2016	2017	2018	2019
CCS Single Level Group				
16 Injury & poisoning				
225 Joint disorders and dislocations; trauma-related	1,544	1,347	1,253	1,162
226 Fracture of neck of femur (hip)	13	8	7	6
227 Spinal cord injury	1	1	3	6
228 Skull and face fractures	92	53	59	75
229 Fracture of upper limb	961	912	956	1,041
230 Fracture of lower limb	523	512	580	621
231 Other fractures	41	39	31	26
232 Sprains and strains	889	891	851	886
233 Intracranial injury	5	-	4	10
234 Crushing injury or internal injury	19	21	17	17
235 Open wounds of head; neck; and trunk	50	31	39	41
236 Open wounds of extremities	291	229	220	213
237 Complication of device; implant or graft	673	711	753	729
238 Complications of surgical procedures or medical care	271	239	299	341
239 Superficial injury; contusion	71	63	62	82
240 Burns	39	6	10	24
242 Poisoning by other medications and drugs	-	1	1	-
243 Poisoning by nonmedicinal substances	5	1	5	1
244 Other injuries and conditions due to external causes	185	165	171	213
Total	5,673	5,230	5,321	5,494
17 Symptoms, signs & ill-defined conditions				
245 Syncope	58	60	78	60
246 Fever of unknown origin	2	4	4	5
247 Lymphadenitis	104	116	131	164
248 Gangrene	25	27	23	22
249 Shock	1	-	-	-
250 Nausea and vomiting	140	128	138	144
251 Abdominal pain	1,197	1,074	1,231	1,193
252 Malaise and fatigue	60	70	52	106
253 Allergic reactions	266	479	286	311
254 Rehabilitation care; fitting of prostheses; and adjustment of devices	38	49	34	51
255 Administrative/social admission	73	82	60	69
256 Medical examination/evaluation	2,221	1,728	1,621	1,494
257 Other aftercare	2,325	2,519	2,139	2,322
258 Other screening for suspected conditions (not mental disorders or infectious disease)	15,941	17,255	15,985	15,737
Total	22,451	23,591	21,782	21,678
18 Residual codes, unclassified, all Ecodes				
259 Residual codes; unclassified	1,676	1,243	1,165	1,062
2601 External cause codes: Cut/pierce	1	-	-	-
2603 External cause codes: Fall	-	-	-	1
2617 Adverse effects of medical drugs	2	-	3	-
Total	1,679	1,243	1,168	1,063
Totals by Year	132,695	131,034	130,102	136,166

APPENDIX G

Clinical Classifications Software (CCS) High-Level and Single-Level Procedural 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 Colostomy, temporary and permanent
- 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 Inguinal and femoral hernia repair
- 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 Tract

- 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 tube
- 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: Operation of the Musculoskeletal System

- 142 Removal of ectopic Pregnancy
- 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 of 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

CCS High Level Procedure Group 17: New Categories specific to CPT/HCPCS

- 232 Anesthesia
- 233 Laboratory - Chemistry and Hematology
- 234 Pathology
- 235 Other Laboratory
- 236 Home Health Services
- 237 Ancillary Services
- 238 Infertility Services
- 239 Transportation - patient, provider, equipment
- 240 Medications (Injections, infusions and other forms)
- 241 Visual aids and other optical supplies
- 242 Hearing devices and audiology supplies
- 243 DME and supplies
- 244 Gastric bypass and volume reduction
- 245

APPENDIX H

Inpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

* omits newborns

CCS High Level Procedure Group	ICD-10-PCS			
	2015	2016	2017	2018
CCS Single Level Procedure Category				
1 Operations on the nervous system				
1 Incision & excision of CNS	121	131	139	152
2 Insertion, replacem, rem of extracranial ventricular shunt	25	39	36	40
3 Laminectomy, excision intervertebral disc	74	43	29	31
4 Diagnostic spinal tap	334	314	318	287
5 Insert cath, spinal stimulator, inject into spinal canal	154	5	6	8
6 Decompression peripheral nerve	68	35	30	48
7 Other diagnostic nervous system procedures	45	72	70	81
8 Other non-OR or closed therapeutic nerv syst procs	19	41	37	23
9 Other OR therapeutic nervous system procedures	99	107	108	121
Total	939	787	773	791
2 Operations on the endocrine system				
10 Thyroidectomy, partial or complete	15	20	8	11
11 Diagnostic endocrine procedures	10	3	7	6
12 Other therapeutic endocrine procedures	18	38	27	27
Total	43	61	42	44
3 Operations on the eye				
14 Glaucoma procedures	-	1	-	-
15 Lens & cataract procedures	1	-	1	2
16 Repair of retinal tear, detachment	-	1	-	1
17 Destruction of lesion of retina & choroid	-	-	-	1
18 Diagnostic procedures on eye	4	3	2	4
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	5	3	9	7
20 Other intraocular therapeutic procedures	3	-	-	2
21 Other extraocular muscle & orbit therapeutic procedures	2	4	-	2
Total	15	12	12	19
4 Operations on the ear				
22 Tympanoplasty	-	-	-	1
23 Myringotomy	6	5	5	6
24 Mastoidectomy	-	1	-	-
25 Diagnostic procedures on ear	18	17	19	16
26 Other therapeutic ear procedures	39	29	24	41
Total	63	52	48	64

APPENDIX H

Inpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

* omits newborns

CCS High Level Procedure Group	ICD-10-PCS			
	2015	2016	2017	2018
5 Operations on the nose, mouth, and pharynx				
28 Plastic procedures on nose	-	-	1	-
29 Dental procedures	8	9	10	6
30 Tonsillectomy and/or adenoidectomy	7	3	3	5
31 Diagnostic procedures on nose, mouth & pharynx	74	75	80	70
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	8	11	11	20
33 Other OR therapeutic procedures on nose, mouth & pharynx	51	45	46	66
Total	148	143	151	167
6 Operations on the respiratory system				
34 Tracheostomy, temporary & permanent	39	25	24	32
35 Tracheoscopy & laryngoscopy with biopsy	9	12	8	11
36 Lobectomy or pneumonectomy	100	90	62	66
37 Diagnostic bronchoscopy & biopsy of bronchus	186	159	150	141
38 Other diagnostic procedures on lung & bronchus	2	1	5	2
39 Incision of pleura, thoracentesis, chest drainage	375	401	383	427
40 Other diagnostic proc of respiratory tract & mediastinum	20	16	15	22
41 Other non-OR therapeutic procedures on respiratory system	39	27	34	37
42 Other OR therapeutic procedures on respiratory system	54	59	49	44
Total	824	790	730	782
7 Operations on the cardiovascular system				
43 Heart valve procedures	304	367	370	416
44 Coronary artery bypass graft (CABG)	280	273	230	251
45 Percutaneous transluminal coronary angioplasty (PTCA)	597	708	681	704
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	217	240	252	234
49 Other OR heart procedures	103	78	99	89
51 Endarterectomy, vessel of head & neck	102	116	104	141
52 Aortic resection, replacement or anastomosis	13	11	8	6
54 Other vascular catheterization, not heart	558	779	852	769
55 Peripheral vascular bypass	70	68	43	77
56 Other vascular bypass & shunt, not heart	18	7	16	10
59 Other OR procedures on vessels of head & neck	62	79	64	75
60 Embolectomy & endarterectomy of lower limbs	52	49	51	70
61 Other OR procedures on vessels other than head & neck	241	238	227	221
62 Other diagnostic cardiovascular procedures	20	47	43	39
63 Other non-OR therapeutic cardiovascular procedures	36	136	113	121
Total	2,673	3,196	3,153	3,223

APPENDIX H

Inpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

* omits newborns

CCS High Level Procedure Group	ICD-10-PCS			
	2015	2016	2017	2018
8 Operations on the hemic and lymphatic system				
65 Bone marrow biopsy	56	67	87	63
66 Procedures on spleen	17	9	11	10
67 Other therap procedures, hemic & lymphatic system	67	75	84	69
Total	140	151	182	142
9 Operations on the digestive system				
69 Esophageal dilatation	20	23	15	21
70 Upper gastrointestinal endoscopy, biopsy	569	560	526	511
71 Gastrostomy, temporary & permanent	63	62	53	53
72 Colostomy, temporary & permanent	26	27	32	30
73 Ileostomy & other enterostomy	16	35	35	24
74 Gastrectomy, partial & total	165	142	165	147
75 Small bowel resection	9	2	13	7
76 Colonoscopy & biopsy	109	102	89	113
77 Proctoscopy & anorectal biopsy	12	30	25	21
78 Colorectal resection	283	275	313	266
79 Local excision of large intestine lesion (not endoscopic)	91	96	101	60
80 Appendectomy	260	242	174	211
81 Hemorrhoid procedures	4	2	4	4
83 Biopsy of liver	41	36	38	24
84 Cholecystectomy & common duct exploration	347	307	301	359
85 Inguinal & femoral hernia repair	38	28	28	26
86 Other hernia repair	75	82	69	66
87 Laparoscopy	12	10	18	15
88 Abdominal paracentesis	216	206	221	189
89 Exploratory laparotomy	5	5	8	14
90 Excision, lysis peritoneal adhesions	73	60	55	81
92 Other bowel diagnostic procedures	146	116	100	110
93 Other non-OR upper GI therapeutic procedures	39	44	39	52
94 Other OR upper GI therapeutic procedures	138	77	80	65
95 Other non-OR lower GI therapeutic procedures	57	41	48	50
96 Other OR lower GI therapeutic procedures	319	275	257	253
97 Other gastrointestinal diagnostic procedures	120	125	112	129
98 Other non-OR gastrointestinal therapeutic procedures	176	279	258	245
99 Other OR gastrointestinal therapeutic procedures	201	143	114	105
Total	3,630	3,432	3,291	3,251

APPENDIX H

Inpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

* omits newborns

CCS High Level Procedure Group	ICD-10-PCS			
	2015	2016	2017	2018
10 Operations on the urinary system				
100 Endoscopy & endoscopic biopsy of the urinary tract	41	27	28	27
101 Transurethral excision, drainage, rem urinary obstruction	112	86	81	110
102 Ureteral catheterization	109	112	122	6
103 Nephrotomy & nephrostomy	12	18	20	18
104 Nephrectomy, partial or complete	108	116	110	86
105 Kidney transplant	24	20	11	21
107 Extracorporeal lithotripsy, urinary	12	13	21	9
108 Indwelling catheter	127	65	41	32
109 Procedures on the urethra	8	21	7	10
110 Other diagnostic procedures of urinary tract	32	33	31	34
111 Other non-OR therapeutic procedures of urinary tract	29	78	67	90
112 Other OR therapeutic procedures of urinary tract	148	74	80	231
Total	762	663	619	674
11 Operations on the male genital organs				
113 Transurethral resection of prostate (TURP)	48	38	36	21
114 Open prostatectomy	130	117	24	28
115 Circumcision	3	2	5	2
116 Diagnostic procedures, male genital	6	2	3	1
117 Other non-OR therapeutic procedures, male genital	7	4	9	5
118 Other OR therapeutic procedures, male genital	10	9	7	26
Total	204	172	84	83
12 Operations on the female genital organs				
119 Oophorectomy, unilateral & bilateral	31	9	15	12
120 Other operations on ovary	21	8	9	8
121 Ligation of fallopian tubes	130	2	3	-
123 Other operations on fallopian tubes	180	27	21	18
124 Hysterectomy, abdominal & vaginal	163	148	152	120
125 Other excision of cervix & uterus	19	15	12	12
126 Abortion (termination of pregnancy)	-	8	4	8
127 D&C, aspiration after delivery or abortion	-	11	4	5
128 Diagnostic dilatation & curettage (D&C)	5	6	5	7
129 Repair cystocele & rectocele, oblit of vaginal vault	1	-	-	1
130 Other diagnostic procedures, female organs	13	5	13	10
131 Other non-OR therapeutic procedures, female organs	283	27	29	28
132 Other OR therapeutic procedures, female organs	443	22	19	16
Total	1,289	288	286	245
13 Obstetrical procedures				
122 Removal of ectopic pregnancy	-	3	5	3
133 Episiotomy	99	9	4	3
134 Cesarean section	-	1,349	1,282	1,247
135 Forceps, vacuum & breech delivery	-	216	206	203
136 Artificial rupture of membranes to assist delivery	-	86	71	29
137 Other procedures to assist delivery	-	3,323	3,347	3,196
141 Other therapeutic obstetrical procedures	3	-	16	10
Total	102	4,986	4,931	4,691

APPENDIX H

Inpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

* omits newborns

CCS High Level Procedure Group	ICD-10-PCS			
	2015	2016	2017	2018
14 Operations on the musculoskeletal system				
142 Partial excision bone	84	94	63	75
144 Treatment, facial fracture or dislocation	31	27	33	26
145 Treatment, fracture or disloc of radius & ulna	58	62	46	43
146 Treatment, fracture or disloc of hip & femur	602	597	603	640
147 Treatment, fracture or disloc of lower extremity	343	332	279	302
148 Other fracture & dislocation procedure	116	121	135	107
149 Arthroscopy	4	-	4	1
150 Division of joint capsule, ligament or cartilage	7	-	-	-
152 Arthroplasty knee	1,494	1,582	1,434	1,326
153 Hip replacement, total & partial	1,168	1,301	1,304	1,395
154 Arthroplasty other than hip or knee	229	261	284	311
155 Arthrocentesis	35	38	41	34
156 Injections & aspirations of muscles, tendons, etc.	24	27	21	22
157 Amputation of lower extremity	144	163	219	241
158 Spinal fusion	626	569	567	512
159 Other diagnostic procedures on musculoskeletal system	179	186	208	171
160 Other therapeutic procedures on muscles & tendons	1,132	207	159	145
161 Other OR therapeutic procedures on bone	57	55	54	56
162 Other OR therapeutic procedures on joints	137	159	179	176
163 Other non-OR therapeutic procedures on musc system	43	23	24	26
164 Other OR therapeutic procedures on musc system	29	28	27	28
Total	6,542	5,832	5,684	5,637
15 Operations on the integumentary system				
165 Breast biopsy & other diagnostic procedures on breast	8	1	6	8
166 Lumpectomy, quadrantectomy of breast	9	6	4	2
167 Mastectomy	29	20	19	33
168 Incision & drainage, skin & subcutaneous tissue	181	195	196	180
170 Excision of skin lesion	57	34	56	45
171 Suture of skin & subcutaneous tissue	654	200	165	181
172 Skin graft	25	24	27	33
173 Other diagnostic proc on skin & subcutaneous tissue	79	85	99	112
174 Other non-OR therapeutic procedures on skin & breast	144	188	183	177
175 Other OR therapeutic procedures on skin & breast	184	181	184	257
Total	1,370	934	939	1,028
Totals by Year	18,744	21,499	20,925	20,841

APPENDIX I

Outpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Procedure Groups				
CCS Single Level Procedure Categories	2016	2017	2018	2019
1 Operations on the nervous system				
1 Incision & excision of CNS	-	-	-	1
2 Insertion, replacem, rem of extracranial ventricular shunt	8	13	18	40
3 Laminectomy, excision intervertebral disc	367	323	325	341
4 Diagnostic spinal tap	59	58	53	144
5 Insert cath, spinal stimulator, inject into spinal canal	4,386	4,181	4,088	3,893
6 Decompression peripheral nerve	1,618	1,636	1,532	1,570
7 Other diagnostic nervous system procedures	2,704	2,454	2,499	2,587
8 Other non-OR or closed therapeutic nerv syst procs	2,341	2,299	2,168	2,382
9 Other OR therapeutic nervous system procedures	1,842	1,824	1,650	1,867
Total	13,325	12,788	12,333	12,825
2 Operations on the endocrine system				
10 Thyroidectomy, partial or complete	211	174	150	158
11 Diagnostic endocrine procedures	27	49	69	64
12 Other therapeutic endocrine procedures	93	101	93	82
Total	331	324	312	304
3 Operations on the eye				
13 Corneal transplant	9	4	4	12
14 Glaucoma procedures	352	344	408	513
15 Lens & cataract procedures	4,280	4,404	4,795	4,479
16 Repair of retinal tear, detachment	182	185	278	251
17 Destruction of lesion of retina & choroid	87	52	82	139
18 Diagnostic procedures on eye	23	45	54	32
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	403	395	494	497
20 Other intraocular therapeutic procedures	2,418	2,463	2,585	3,085
21 Other extraocular muscle & orbit therapeutic procedures	104	108	128	128
Total	7,858	8,000	8,828	9,136
4 Operations on the ear				
22 Tympanoplasty	76	77	97	81
23 Myringotomy	873	834	827	798
24 Mastoidectomy	30	16	24	17
25 Diagnostic procedures on ear	3	-	6	36
26 Other therapeutic ear procedures	2,231	2,117	2,213	2,225
Total	3,213	3,044	3,167	3,157
5 Operations on the nose, mouth, and pharynx				
27 Control of epistaxis	154	173	175	204
28 Plastic procedures on nose	140	160	267	332
29 Dental procedures	37	41	37	50
30 Tonsillectomy and/or adenoidectomy	571	566	595	743
31 Diagnostic procedures on nose, mouth & pharynx	1,955	1,917	2,018	2,364
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	44	23	28	28
33 Other OR therapeutic procedures on nose, mouth & pharynx	345	336	370	399
Total	3,246	3,216	3,490	4,120

APPENDIX I

Outpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Procedure Groups				
CCS Single Level Procedure Categories	2016	2017	2018	2019
6 Operations on the respiratory system				
34 Tracheostomy, temporary & permanent	5	10	4	3
35 Tracheoscopy & laryngoscopy with biopsy	1,643	1,557	1,924	1,870
36 Lobectomy or pneumonectomy	1	-	-	-
37 Diagnostic bronchoscopy & biopsy of bronchus	369	311	361	391
38 Other diagnostic procedures on lung & bronchus	9,660	9,820	10,199	11,133
39 Incision of pleura, thoracentesis, chest drainage	236	234	186	208
40 Other diagnostic proc of respiratory tract & mediastinum	15	9	96	150
41 Other non-OR therapeutic procedures on respiratory system	11	11	21	16
42 Other OR therapeutic procedures on respiratory system	153	114	143	157
Total	12,093	12,066	12,934	13,928
7 Operations on the cardiovascular system				
43 Heart valve procedures	1	1	1	2
45 Percutaneous transluminal coronary angioplasty (PTCA)	10	19	14	30
47 Diagnostic cardiac catheterization, coronary arteriography	1,141	1,062	1,082	1,012
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	1,474	2,047	293	267
49 Other OR heart procedures	4	13	13	11
51 Endarterectomy, vessel of head & neck	2	-	-	-
52 Aortic resection, replacement or anastomosis	-	-	-	2
53 Varicose vein stripping, lower limb	209	219	215	246
54 Other vascular catheterization, not heart	1,026	1,072	1,085	1,098
55 Peripheral vascular bypass	-	-	-	-
56 Other vascular bypass & shunt, not heart	6	5	3	4
57 Creat, revis, rem of arteriov fistula or cannula for dialys	165	280	290	278
58 Hemodialysis	56	25	30	47
59 Other OR procedures on vessels of head & neck	100	95	88	97
60 Embolectomy & endarterectomy of lower limbs	1	1	3	-
61 Other OR procedures on vessels other than head & neck	403	267	314	302
62 Other diagnostic cardiovascular procedures	663	550	696	750
63 Other non-OR therapeutic cardiovascular procedures	3,275	3,193	3,478	3,323
Total	8,536	8,849	7,605	7,469
8 Operations on the hemic and lymphatic system				
64 Bone marrow transplant	23	38	35	47
65 Bone marrow biopsy	75	67	107	303
66 Procedures on spleen	1	-	1	-
67 Other therap procedures, hemic & lymphatic system	149	166	190	226
Total	248	271	333	576

APPENDIX I

Outpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Procedure Groups				
CCS Single Level Procedure Categories	2016	2017	2018	2019
9 Operations on the digestive system				
68 Injection or ligation of esophageal varices	46	39	55	49
69 Esophageal dilatation	509	473	436	400
70 Upper gastrointestinal endoscopy, biopsy	5,434	5,376	5,175	5,419
71 Gastrostomy, temporary & permanent	114	97	105	110
72 Colostomy, temporary & permanent	2	1	1	1
73 Ileostomy & other enterostomy	16	15	19	20
75 Small bowel resection	-	-	-	-
76 Colonoscopy & biopsy	24,716	24,036	21,953	20,956
77 Proctoscopy & anorectal biopsy	664	621	589	602
78 Colorectal resection	14	9	7	8
79 Local excision of large intestine lesion (not endoscopic)	-	1	-	-
80 Appendectomy	59	62	71	98
81 Hemorrhoid procedures	203	198	229	212
82 Endoscopic retrograde cannulation of pancreas (ERCP)	159	148	136	136
83 Biopsy of liver	1	-	-	4
84 Cholecystectomy & common duct exploration	1,024	925	919	886
85 Inguinal & femoral hernia repair	1,062	1,089	1,073	1,136
86 Other hernia repair	846	882	791	741
87 Laparoscopy	82	45	77	84
88 Abdominal paracentesis	309	352	382	402
89 Exploratory laparotomy	-	3	1	3
90 Excision, lysis peritoneal adhesions	1	-	-	-
91 Peritoneal dialysis	2,769	2,658	2,531	3,038
92 Other bowel diagnostic procedures	-	1	-	-
93 Other non-OR upper GI therapeutic procedures	21	26	22	17
94 Other OR upper GI therapeutic procedures	33	47	55	34
95 Other non-OR lower GI therapeutic procedures	64	62	34	48
96 Other OR lower GI therapeutic procedures	198	189	181	200
97 Other gastrointestinal diagnostic procedures	280	290	220	452
98 Other non-OR gastrointestinal therapeutic procedures	66	67	97	129
99 Other OR gastrointestinal therapeutic procedures	127	133	128	127
Total	38,819	37,845	35,287	35,312
10 Operations on the urinary system				
100 Endoscopy & endoscopic biopsy of the urinary tract	1,655	1,309	1,198	1,237
101 Transurethral excision, drainage, rem urinary obstruction	614	622	691	768
102 Ureteral catheterization	254	282	303	282
103 Nephrotomy & nephrostomy	72	103	114	129
104 Nephrectomy, partial or complete	4	1	9	20
106 Genitourinary incontinence procedures	209	197	183	207
107 Extracorporeal lithotripsy, urinary	842	855	901	841
108 Indwelling catheter	574	438	575	755
109 Procedures on the urethra	218	201	176	210
110 Other diagnostic procedures of urinary tract	11	13	28	66
111 Other non-OR therapeutic procedures of urinary tract	803	784	724	676
112 Other OR therapeutic procedures of urinary tract	265	326	326	315
Total	5,521	5,131	5,228	5,506

APPENDIX I

Outpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Procedure Groups				
CCS Single Level Procedure Categories	2016	2017	2018	2019
11 Operations on the male genital organs				
113 Transurethral resection of prostate (TURP)	144	145	156	141
114 Open prostatectomy	3	6	104	118
115 Circumcision	286	282	272	272
116 Diagnostic procedures, male genital	209	237	379	292
117 Other non-OR therapeutic procedures, male genital	162	158	145	152
118 Other OR therapeutic procedures, male genital	504	490	432	395
Total	1,308	1,318	1,488	1,370
12 Operations on the female genital organs				
119 Oophorectomy, unilateral & bilateral	327	387	386	400
120 Other operations on ovary	35	64	84	78
121 Ligation of fallopian tubes	139	136	118	65
123 Other operations on fallopian tubes	27	4	2	5
124 Hysterectomy, abdominal & vaginal	633	612	670	625
125 Other excision of cervix & uterus	401	402	333	422
126 Abortion (termination of pregnancy)	47	32	73	72
127 D&C, aspiration after delivery or abortion	185	179	184	186
128 Diagnostic dilatation & curettage (D&C)	38	34	34	33
129 Repair cystocele & rectocele, oblit of vaginal vault	120	112	102	135
130 Other diagnostic procedures, female organs	3,182	3,061	3,026	2,990
131 Other non-OR therapeutic procedures, female organs	538	650	575	712
132 Other OR therapeutic procedures, female organs	336	375	400	422
Total	6,008	6,048	5,987	6,145
13 Obstetrical procedures				
122 Removal of ectopic pregnancy	13	10	11	13
134 Cesarean section	-	-	2	-
135 Forceps, vacuum & breech delivery	1	4	1	1
137 Other procedures to assist delivery	42	48	55	46
138 Diagnostic amniocentesis	1	1	-	1
139 Fetal monitoring	3,826	4,038	4,005	3,767
140 Repair of current obstetric laceration	-	5	2	-
141 Other therapeutic obstetrical procedures	24	26	22	37
Total	3,907	4,132	4,098	3,865

APPENDIX I

Outpatient Procedures in Vermont Hospitals CCS Single and High Level Groups by Discharge Year

CCS High Level Procedure Groups				
CCS Single Level Procedure Categories	2016	2017	2018	2019
14 Operations on the musculoskeletal system				
142 Partial excision bone	449	467	447	421
143 Bunionectomy or repair of toe deformities	495	499	484	514
144 Treatment, facial fracture or dislocation	78	50	55	64
145 Treatment, fracture or disloc of radius & ulna	464	450	434	576
146 Treatment, fracture or disloc of hip & femur	13	15	14	8
147 Treatment, fracture or disloc of lower extremity	474	466	535	596
148 Other fracture & dislocation procedure	507	502	516	503
149 Arthroscopy	353	374	363	345
150 Division of joint capsule, ligament or cartilage	90	77	62	50
151 Excision of semilunar cartilage of knee	1,227	1,071	967	870
152 Arthroplasty knee	56	36	207	340
153 Hip replacement, total & partial	31	23	34	55
154 Arthroplasty other than hip or knee	222	244	216	186
155 Arthrocentesis	5,229	5,307	5,898	6,637
156 Injections & aspirations of muscles, tendons, etc.	1,277	1,290	1,394	1,747
157 Amputation of lower extremity	131	139	125	154
158 Spinal fusion	30	47	119	127
159 Other diagnostic procedures on musculoskeletal system	78	68	60	91
160 Other therapeutic procedures on muscles & tendons	2,614	2,586	2,625	2,460
161 Other OR therapeutic procedures on bone	601	637	593	564
162 Other OR therapeutic procedures on joints	1,160	1,044	1,058	1,028
163 Other non-OR therapeutic procedures on musc system	25	40	29	24
164 Other OR therapeutic procedures on musc system	62	74	61	46
Total	15,666	15,506	16,296	17,406
15 Operations on the integumentary system				
165 Breast biopsy & other diagnostic procedures on breast	1,029	1,052	1,369	1,501
166 Lumpectomy, quadrantectomy of breast	455	382	538	639
167 Mastectomy	68	72	120	158
168 Incision & drainage, skin & subcutaneous tissue	261	172	172	192
169 Debridement of wound, infection or burn	660	337	346	496
170 Excision of skin lesion	4,720	4,624	4,663	5,509
171 Suture of skin & subcutaneous tissue	721	664	580	592
172 Skin graft	561	673	629	642
173 Other diagnostic proc on skin & subcutaneous tissue	160	280	267	1,533
174 Other non-OR therapeutic procedures on skin & breast	3,604	3,782	3,618	3,344
175 Other OR therapeutic procedures on skin & breast	377	458	414	441
Total	12,616	12,496	12,716	15,047
Total of Groups 1 - 15	132,695	131,034	130,102	136,166

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
250	Pharmacy	7300	Drugs Charged to Patients
251	Pharmacy: Generic	7300	Drugs Charged to Patients
252	Pharmacy: Nongeneric	7300	Drugs Charged to Patients
254	Pharmacy: Incident to other diagnostic services	7300	Drugs Charged to Patients
255	Pharmacy: Incident to radiology	7300	Drugs Charged to Patients
256	Pharmacy: Experimental drugs	7300	Drugs Charged to Patients
257	Pharmacy: Non-prescription	7300	Drugs Charged to Patients
258	Pharmacy: IV solutions	7300	Drugs Charged to Patients
259	Pharmacy: Other	7300	Drugs Charged to Patients
260	IV Therapy	6400	Intravenous Therapy
261	IV Therapy: Infusion pump	6400	Intravenous Therapy
262	IV Therapy: IV Therapy, pharm services	6400	Intravenous Therapy
263	IV Therapy: IV Therapy/drug/supp/delivery	6400	Intravenous Therapy
264	IV Therapy: supplies	6400	Intravenous Therapy
269	IV Therapy: Other IV therapy	6400	Intravenous Therapy
270	Medical/Surgical Supplies	7100	Medical Supplies Charged to Patients
271	Medical/Surgical Supplies: Nonsterile supplies	7100	Medical Supplies Charged to Patients
272	Medical/Surgical Supplies: Sterile supplies	7100	Medical Supplies Charged to Patients
273	Medical/Surgical Supplies: Take home supplies	7100	Medical Supplies Charged to Patients
274	Medical/Surgical Supplies: Prosthetic/Orthotic devices	3540	Prosthetic Devices
275	Medical/Surgical Supplies: Pacemaker	7200	Impl. Dev. Charged to Patient
276	Medical/Surgical Supplies: Intraocular lens	7200	Impl. Dev. Charged to Patient
278	Medical/Surgical Supplies: Other implants	7200	Impl. Dev. Charged to Patient
279	Medical/Surgical Supplies: Other supplies/devices	7100	Medical Supplies Charged to Patients
280	Oncology	3480	Oncology
289	Oncology: Other oncology	3480	Oncology

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
299	Durable Medical Equipment: Other equipment	9700	Durable Medical Equip. - Sold
300	Laboratory - Clinical Diagnostic	3390	Laboratory - Clinical
301	Laboratory - Clinical Diagnostic: Chemistry	3180	Chemistry
302	Laboratory - Clinical Diagnostic: Immunology	3380	Immunology
303	Laboratory - Clinical Diagnostic: Renal patient (home)	3390	Laboratory - Clinical
304	Laboratory - Clinical Diagnostic: Nonroutine dialysis	3390	Laboratory - Clinical
305	Laboratory - Clinical Diagnostic: Hematology	3350	Hematology
306	Laboratory - Clinical Diagnostic: Bacteriology/microbiology	3050	Bacteriology & Microbiology
307	Laboratory - Clinical Diagnostic: Urology	3390	Laboratory - Clinical
309	Laboratory - Clinical Diagnostic: Other laboratory	3390	Laboratory - Clinical
310	Laboratory - Pathology	3420	Laboratory - Pathological
311	Laboratory - Pathology: Cytology	3240	Cytology
312	Laboratory - Pathology: Histology	3360	Histology
314	Laboratory - Pathology: Biopsy	3060	Biopsy
319	Laboratory - Pathology: Other	3420	Laboratory - Pathological
320	Radiology - Diagnostic	5400	Radiology - Diagnostic
321	Radiology - Diagnostic: Angiocardigraphy	3030	Angiocardigraphy
322	Radiology - Diagnostic: Arthrography	5400	Radiology - Diagnostic
323	Radiology - Diagnostic: Arteriography	3650	Vascular Lab
324	Radiology - Diagnostic: Chest X-ray	5400	Radiology - Diagnostic
329	Radiology - Diagnostic: Other	5400	Radiology - Diagnostic
330	Radiology - Therapeutic	5500	Radiology - Therapeutic
331	Radiology - Therapeutic: Chemotherapy - injected	3190	Chemotherapy
332	Radiology - Therapeutic: Chemotherapy - oral	3190	Chemotherapy
333	Radiology - Therapeutic: Radiation therapy	5500	Radiology - Therapeutic

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
335	Radiology - Therapeutic: Chemotherapy - IV	3190	Chemotherapy
339	Radiology - Therapeutic: Other	5500	Radiology - Therapeutic
340	Nuclear Medicine	3450	Nuclear Medicine - Diagnostic
341	Nuclear Medicine: Diagnostic	3450	Nuclear Medicine - Diagnostic
342	Nuclear Medicine: Therapeutic	3470	Nuclear Medicine - Therapeutic
343	Diagnostic Radiopharms	3450	Nuclear Medicine - Diagnostic
344	Therapeutic Radiopharms	3470	Nuclear Medicine - Therapeutic
349	Nuclear Medicine: Other	3450	Nuclear Medicine - Diagnostic
350	CT Scan	5700	CT Scan
351	CT Scan: Head	5700	CT Scan
352	CT Scan: Body	5700	CT Scan
359	CT Scan: Other CT scans	5700	CT Scan
360	Operating Room Services	5000	Operating Room
361	Operating Room Services: Minor surgery	5000	Operating Room
362	Operating Room Services: Organ transplant, not kidney	5000	Operating Room
367	Operating Room Services: Kidney transplant	5000	Operating Room
369	Operating Room Services: Other operating room services	5000	Operating Room
370	Anesthesia	5300	Anesthesiology
371	Anesthesia: Incident to radiology	5300	Anesthesiology
372	Anesthesia: Incident to other diag services	5300	Anesthesiology
379	Anesthesia: Other anesthesia	5300	Anesthesiology
380	Blood	6200	Whole Blood & Packed Red Blood Cells
381	Blood: Packed red cells	6200	Whole Blood & Packed Red Blood Cells
382	Blood: Whole blood	6200	Whole Blood & Packed Red Blood Cells
383	Blood: Plasma	6200	Whole Blood & Packed Red Blood Cells

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
384	Blood: Platelets	6200	Whole Blood & Packed Red Blood Cells
385	Blood: Leukocytes	6200	Whole Blood & Packed Red Blood Cells
386	Blood: Other components	6200	Whole Blood & Packed Red Blood Cells
387	Blood: Other derivatives	6200	Whole Blood & Packed Red Blood Cells
389	Blood: Other blood	6200	Whole Blood & Packed Red Blood Cells
390	Blood Storage/Processing	6300	Blood Storing, Processing, & Trans
391	Blood: Administration (e.g. Transfusion)	6300	Blood Storing, Processing, & Trans
392	Blood: Processing and Storage	6300	Blood Storing, Processing, & Trans
399	Other blood handling	6300	Blood Storing, Processing, & Trans
400	Other Imaging Services	5400	Radiology - Diagnostic
401	Other Imaging Services: Diagnostic mammography	3440	Mammography
402	Other Imaging Services: Ultrasound	3630	Ultra Sound
403	Other Imaging Services: Screening mammography	3440	Mammography
404	Other Imaging Services: PET scan	3450	Nuclear Medicine - Diagnostic
409	Other Imaging Services: Other imaging services	5400	Radiology - Diagnostic
410	Respiratory Services	6500	Respiratory Therapy
412	Respiratory Services: Inhalation services	6500	Respiratory Therapy
413	Respiratory Services: Hyperbaric oxygen therapy	6500	Respiratory Therapy
419	Respiratory Services: Other respiratory services	6500	Respiratory Therapy
420	Physical Therapy	6600	Physical Therapy
421	Physical Therapy: Visit charge	6600	Physical Therapy
422	Physical Therapy: Hourly charge	6600	Physical Therapy
423	Physical Therapy: Group rate	6600	Physical Therapy
424	Physical Therapy: Evaluation/re-evaluation	6600	Physical Therapy
429	Physical Therapy: Other physical therapy	6600	Physical Therapy

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
430	Occupational Therapy	6700	Occupational Therapy
431	Occupational Therapy: Visit charge	6700	Occupational Therapy
432	Occupational Therapy: Hourly charge	6700	Occupational Therapy
433	Occupational Therapy: Group rate	6700	Occupational Therapy
434	Occupational Therapy: Evaluation/re-evaluation	6700	Occupational Therapy
439	Occupational Therapy: Other occupational therapy	6700	Occupational Therapy
440	Speech-Language Pathology	6800	Speech Pathology
441	Speech-Language Pathology: Visit charge	6800	Speech Pathology
442	Speech-Language Pathology: Hourly charge	6800	Speech Pathology
443	Speech-Language Pathology: Group rate	6800	Speech Pathology
444	Speech-Language Pathology: Evaluation/ re-evaluation	6800	Speech Pathology
449	Speech-Language Pathology: Other speech language pathology	6800	Speech Pathology
450	Emergency Room	9100	Emergency
451	Emergency Room: EM/EMTALA	9100	Emergency
452	Emergency Room: ER/ Beyond EMTALA	9100	Emergency
456	Emergency Room: Urgent care	9100	Emergency
459	Emergency Room: Other emergency room	9100	Emergency
460	Pulmonary Function	3560	Pulmonary Function Testing
469	Pulmonary Function: Other	3560	Pulmonary Function Testing
470	Audiology	3040	Audiology
471	Audiology: Diagnostic	3040	Audiology
472	Audiology: Treatment	3040	Audiology
479	Audiology: Other audiology	3040	Audiology
480	Cardiology	3140	Cardiology
481	Cardiology: Cardiac catheter lab	5900	Cardiac Catheterization

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
482	Cardiology: Stress test	3620	Stress Test
483	Cardiology: Echocardiology	3260	Echocardiography
489	Cardiology: Other cardiology	3140	Cardiology
490	Ambulatory Surgery	7500	ASC (Non-Distinct Part)
499	Ambulatory Surgery: Other ambulatory surgical care	7500	ASC (Non-Distinct Part)
510	Clinic	9000	Clinic
511	Clinic: Chronic pain center	9000	Clinic
512	Clinic: Dental clinic	3250	Dental Services
513	Clinic: Psychiatric clinic	3550	Psychiatric/Psychological Services
514	Clinic: OB/GYN clinic	9000	Clinic
515	Clinic: Pediatric clinic	9000	Clinic
516	Clinic: Urgent care clinic	9000	Clinic
517	Clinic: Family clinic	4040	Family Practice
519	Clinic: Other clinic	9000	Clinic
530	Osteopathic Services	3530	Osteopathic Therapy
531	Osteopathic Services: Osteopathic therapy	3530	Osteopathic Therapy
539	Osteopathic Services: Other osteopathic services	3530	Osteopathic Therapy
610	Magnetic Resonance Tech. (MRT)	5800	Magnetic Resonance Imaging (MRI)
611	Magnetic Resonance Tech. (MRT): Brain (incl. Brainstem)	5800	Magnetic Resonance Imaging (MRI)
612	Magnetic Resonance Tech. (MRT): Spinal cord (incl. spine)	5800	Magnetic Resonance Imaging (MRI)
614	Magnetic Resonance Tech. (MRT): MRI - Other	5800	Magnetic Resonance Imaging (MRI)
615	Magnetic Resonance Tech. (MRT): MRA - Head and Neck	5800	Magnetic Resonance Imaging (MRI)
616	Magnetic Resonance Tech. (MRT): MRA - Lower Ext	5800	Magnetic Resonance Imaging (MRI)
618	Magnetic Resonance Tech. (MRT): MRA - Other	5800	Magnetic Resonance Imaging (MRI)
619	Magnetic Resonance Tech. (MRT): Other MRT	5800	Magnetic Resonance Imaging (MRI)

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
621	Med - Surg Supplies Ext. of 270: Incident to radiology	7100	Medical Supplies Charged to Patients
622	Med - Surg Supplies Ext. of 270: Incident to other diag.	7100	Medical Supplies Charged to Patients
623	Surgical dressings	7100	Medical Supplies Charged to Patients
624	Med - Surg Supplies Ext. of 270: Investigational Device (IDE)	7200	Impl. Dev. Charged to Patient
631	Drugs Require Specific ID: Single source drug	7300	Drugs Charged to Patients
632	Drugs Require Specific ID: Multiple source drug	7300	Drugs Charged to Patients
633	Drugs Require Specific ID: Restrictive prescription	7300	Drugs Charged to Patients
634	Drugs Require Specific ID: EPO under 10,000 units	7300	Drugs Charged to Patients
635	Drugs Require Specific ID: EPO over 10,000 units	7300	Drugs Charged to Patients
636	Drugs Require Specific ID: Drugs requiring detail coding	7300	Drugs Charged to Patients
637	Drugs Require Specific ID: Self admin drugs (insulin admin in emergency-diabetes coma)	7300	Drugs Charged to Patients
681	Trauma Response: Level I	9100	Emergency
682	Trauma Response: Level II	9100	Emergency
683	Trauma Response: Level III	9100	Emergency
684	Trauma Response: Level IV	9100	Emergency
689	Trauma Response: Other	9100	Emergency
700	Cast Room	9000	Clinic
710	Recovery Room	5100	Recovery Room
720	Labor Room	5200	Delivery Room & Labor Room
721	Labor Room: Labor	5200	Delivery Room & Labor Room
722	Labor Room: Delivery	5200	Delivery Room & Labor Room
723	Labor Room: Circumcision	3220	Circumcision
724	Labor Room: Birthing center	3070	Birthing Center
729	Labor Room: Other labor room/delivery	5200	Delivery Room & Labor Room

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
730	EKG/ECG	3280	EKG and EEG
731	EKG/ECG: Holter monitor	3370	Holter Monitor
732	EKG/ECG: Telemetry	3280	EKG and EEG
739	EKG/ECG: Other EKG/ECG	3280	EKG and EEG
740	EEG	3280	EKG and EEG
750	Gastrointestinal	3340	Gastro Intestinal Services
760	Treatment/Observation Room	9000	Clinic
761	Treatment/Observation Room: Treatment room	9000	Clinic
762	Treatment/Observation Room: Observation room	9201	Observation Beds (Distinct Part)
769	Treatment/Observation Room: Other treatment room	9000	Clinic
770	Preventive Care Services	9000	Clinic
771	Preventive Care Services: Admin. of vaccine	9000	Clinic
790	Extra-Corp Shock Wave Therapy	3640	Urology
800	Inpatient Dialysis	7400	Renal Dialysis
801	Inpatient Hemodialysis	7400	Renal Dialysis
802	Inpatient peritoneal dialysis	7400	Renal Dialysis
803	inpatient dialysis CAPD	7400	Renal Dialysis
804	Inpatient dialysis CCPD	7400	Renal Dialysis
809	Other inp dialysis	7400	Renal Dialysis
810	Organ Acquisition	8600	Other Organ Acquisition (specify)
811	Organ Acquisition: Living donor	8600	Other Organ Acquisition (specify)
812	Organ Acquisition: Cadaver donor	8600	Other Organ Acquisition (specify)
813	Organ Acquisition: Unknown donor	8600	Other Organ Acquisition (specify)
814	Organ Acquisition: Unsuccessful Organ Search Donor Bank Charges	8600	Other Organ Acquisition (specify)
819	Organ Acquisition: Other donor	8600	Other Organ Acquisition (specify)

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
820	Hemo OPD/Home	7400	Renal Dialysis
821	Hemo OPD/Home: Hemodialysis comp or other rate	7400	Renal Dialysis
822	Hemo OPD/Home supplies	7400	Renal Dialysis
823	Hemo OPD/home equipment	7400	Renal Dialysis
824	Hemo OPD/Home Maintenance 100%	7400	Renal Dialysis
825	Hemo OPD/Home Support Services	7400	Renal Dialysis
829	Hemo OPD/Home: Other HEMO outpatient	7400	Renal Dialysis
830	Peritoneal OPD/Home	7400	Renal Dialysis
831	Peritoneal OPD/Home: Peritoneal comp or other rate	7400	Renal Dialysis
839	Peritoneal OPD/Home: Other peritoneal dialysis	7400	Renal Dialysis
840	CAPD OPD/Home	7400	Renal Dialysis
841	CAPD OPD/Home: CAPD comp or other rate	7400	Renal Dialysis
849	CAPD OPD/Home: Other CAPD dialysis	7400	Renal Dialysis
850	CCPD OPD/Home	7400	Renal Dialysis
851	CCPD OPD/Home: CCPD comp or other rate	7400	Renal Dialysis
859	CCPD OPD/Home: Other CCPD dialysis	7400	Renal Dialysis
860	Magnetoencephalography (MEG)	3280	EKG and EEG
861	MEG	3280	EKG and EEG
880	Miscellaneous Dialysis	7400	Renal Dialysis
881	Miscellaneous Dialysis: Ultrafiltration	7400	Renal Dialysis
889	Miscellaneous Dialysis: Other misc dialysis	7400	Renal Dialysis
900	Psychiatric/Psychological Trt	3550	Psychiatric/Psychological Services
901	Psychiatric/Psychological Trt: Electroshock treatment	3320	Electroshock Therapy
902	Psychiatric/Psychological Trt: Milieu therapy	3550	Psychiatric/Psychological Services
903	Psychiatric/Psychological Trt: Play therapy	3550	Psychiatric/Psychological Services

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
904	Psychiatric/Psychological Trt: Activity therapy	3580	Recreational Therapy
905	Psychiatric/Psychological Trt: Intensive Outpatient serv-sych	3550	Psychiatric/Psychological Services
906	Psychiatric/Psychological Trt: Intensive out serv -chem dep	3550	Psychiatric/Psychological Services
907	Psychiatric/Psychological Trt: Comm behavioral program	3550	Psychiatric/Psychological Services
911	Psychiatric/Psychological Svcs: Rehabilitation	3550	Psychiatric/Psychological Services
912	Psychiatric/Psychological Svcs: Partial Hosp - less intensive	3550	Psychiatric/Psychological Services
913	Psychiatric/Psychological Svcs: Partial Hosp - Intensive	3550	Psychiatric/Psychological Services
914	Psychiatric/Psychological Svcs: Individual therapy	3550	Psychiatric/Psychological Services
915	Psychiatric/Psychological Svcs: Group therapy	3550	Psychiatric/Psychological Services
916	Psychiatric/Psychological Svcs: Family therapy	3550	Psychiatric/Psychological Services
917	Psychiatric/Psychological Svcs: Biofeedback	3550	Psychiatric/Psychological Services
918	Psychiatric/Psychological Svcs: Testing	3550	Psychiatric/Psychological Services
919	Psychiatric/Psychological Svcs: Other behavioral treat/serv	3550	Psychiatric/Psychological Services
921	Other Diagnostic Services: Peripheral vascular lab	3650	Vascular Lab
922	Other Diagnostic Services: Electromyelogram	3290	Electromyography
923	Other Diagnostic Services: Pap smear	3240	Cytology
924	Other Diagnostic Services: Allergy test	3380	Immunology
925	Other Diagnostic Services: Pregnancy test	3390	Laboratory - Clinical
941	Other Therapeutic Serv: Recreation Rx	9000	Clinic
942	Other Therapeutic Serv: Educ/training	9000	Clinic
943	Other Therapeutic Serv: Cardiac rehab	3140	Cardiology
944	Other Therapeutic Serv: Drug rehab	3550	Psychiatric/Psychological Services
945	Other Therapeutic Serv: Alcohol rehab	3550	Psychiatric/Psychological Services
948	Pulmonary Rehabilitation	6500	Respiratory Therapy

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
1	Total Charge	N/A	
22	HIPPS	N/A	
23	HIPPS	N/A	
24	HIPPS	N/A	
100	All Inclusive Rate	N/A	
101	All Inclusive Rate	N/A	
110	Room & Board (Private)	N/A	
111	Medical/Surgical/Gyn	N/A	
112	OB	N/A	
113	Pediatric	N/A	
114	Psychiatric	N/A	
115	Hospice	N/A	
116	Detoxification	N/A	
117	Oncology	N/A	
118	Rehab	N/A	
119	Other	N/A	
120	Room & Board (Semi-Private 2 beds)	N/A	
121	Medical/Surgical/Gyn	N/A	
122	OB	N/A	
123	Pediatric	N/A	
124	Psychiatric	N/A	
125	Hospice	N/A	
126	Detoxification	N/A	
127	Oncology	N/A	
128	Rehab	N/A	
129	Other	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
130	Room & Board (Semi private 3-4 beds)	N/A	
131	Medical/Surgical/Gyn	N/A	
132	OB	N/A	
133	Pediatric	N/A	
134	Psychiatric	N/A	
135	Hospice	N/A	
136	Detoxification	N/A	
137	Oncology	N/A	
138	Rehab	N/A	
139	Other	N/A	
140	Room & Board (Private Deluxe)	N/A	
141	Medical/Surgical/Gyn	N/A	
142	OB	N/A	
143	Pediatric	N/A	
144	Psychiatric	N/A	
145	Hospice	N/A	
146	Detoxification	N/A	
147	Oncology	N/A	
148	Rehab	N/A	
149	Other	N/A	
150	Room & Board (Ward)	N/A	
151	Medical/Surgical/Gyn	N/A	
152	OB	N/A	
153	Pediatric	N/A	
154	Psychiatric	N/A	
155	Hospice	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
156	Detoxification	N/A	
157	Oncology	N/A	
158	Rehab	N/A	
159	Other	N/A	
160	Room & Board (other)	N/A	
164	Sterile Environment	N/A	
167	Self care	N/A	
169	Other	N/A	
170	Nursery	N/A	
171	Newborn-Level I	N/A	
172	Newborn-Level II	N/A	
173	Newborn-Level III	N/A	
174	Newborn-Level IV	N/A	
179	Other Nursery	N/A	
180	Leave of Absence	N/A	
182	Patient Convenience	N/A	
183	Therapeutic Leave	N/A	
185	Hospitalization	N/A	
189	Other leave of absence	N/A	
190	Subacute care	N/A	
191	Subacute care-Level I	N/A	
192	Subacute care-Level II	N/A	
193	Subacute care-Level III	N/A	
194	Subacute care-Level IV	N/A	
199	Other subacute care	N/A	
200	Intensive care	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
201	Surgical	N/A	
202	Medical	N/A	
203	Pediatric	N/A	
204	Psychiatric	N/A	
206	Intermediate ICU	N/A	
207	Burn care	N/A	
208	Trauma	N/A	
209	Other intensive care	N/A	
210	Coronary care	N/A	
211	Myocardial Infarction	N/A	
212	Pulmonary Care	N/A	
213	Heart Transplant	N/A	
214	Intermediate CCU	N/A	
219	Other Coronary Care	N/A	
220	Special charges	N/A	
221	Admission charge	N/A	
222	Technical support charge	N/A	
223	U.R. service charge	N/A	
224	Late discharge, medically necessary	N/A	
229	Other special charges	N/A	
230	Incremental nursing charge rate	N/A	
231	Nursery	N/A	
232	OB	N/A	
233	ICU	N/A	
234	CCU	N/A	
235	Hospice	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
239	Other	N/A	
240	All inclusive Ancillary	N/A	
241	Basic	N/A	
242	Comprehensive	N/A	
243	Specialty	N/A	
249	Other all inclusive ancillary	N/A	
253	Take home drugs	N/A	
277	Oxygen-Take home	N/A	
290	Durable Medical Equipment	N/A	
291	DME Rental	N/A	
292	Durable Medical Equipment: Purchase - new equipment	N/A	
293	Purchase of used DME	N/A	
294	Supplies/Drugs for DME effectiveness (HHA only)	N/A	
374	Acupuncture	N/A	
500	Outpatient services	N/A	
509	Other Outpatient	N/A	
520	Free-Standing Clinic	N/A	
521	Rural health-clinic	N/A	
522	Rural health-home	N/A	
523	Family Practice Clinic	N/A	
524	RHC/FQHC visit in Part A covered SNF	N/A	
525	RHC/FQHC visit in noncovered SNF, NF, ICFMR or other	N/A	
526	Urgent Care Clinic	N/A	
527	Nurse visit to home in a HH shortage area	N/A	
528	RHC/FQHC visit to other non RHC/FQHC site	N/A	
529	Free-Standing Clinic: Other	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
540	Ambulance	N/A	
541	Supplies	N/A	
542	Medical Transport	N/A	
543	Heart Mobile	N/A	
544	Oxygen	N/A	
545	Air ambulance	N/A	
546	Neonatal ambulance services	N/A	
547	Pharmacy	N/A	
548	Telephone Transmission EKG	N/A	
549	Other ambulance	N/A	
550	Skilled nursing	N/A	
551	Visit charge	N/A	
552	Hourly charge	N/A	
559	Other skilled nursing	N/A	
560	Home Health (HH) -- Medical Social Services	N/A	
561	Home Health (HH) Medical Social Services: Visit charge	N/A	
562	Home Health (HH) Medical Social Services: Hourly charge	N/A	
569	Home Health (HH) Medical Social Services: Other Medical Social Services	N/A	
570	Home health-Home health aide	N/A	
571	Visit charge	N/A	
572	Hourly charge	N/A	
579	Other home health aide	N/A	
580	Home health-other visits	N/A	
581	Visit charge	N/A	
582	Hourly charge	N/A	
583	Assessment	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
589	Other home health visit	N/A	
590	Home health-units of service	N/A	
600	Home health-oxygen	N/A	
601	Oxygen-state/equip/suppl/ or cont	N/A	
602	Oxygen-state/equip/suppl/ or under 1 LPM	N/A	
603	Oxygen-state/equip/over 4 LPM	N/A	
604	Oxygen-Portable Add-on	N/A	
609	Other oxygen	N/A	
640	Home IV Therapy Services	N/A	
641	Nonroutine nursing, central line	N/A	
642	IV site care, Central line	N/A	
643	IV start/change, peripheral line	N/A	
644	Nonroutine nursing, peripheral line	N/A	
645	Training patient/caregiver, central line	N/A	
646	Training, Disabled patient, central line	N/A	
647	Training, patient/caregiver, peripheral line	N/A	
648	Training, disabled patient, peripheral line	N/A	
649	Other IV therapy services	N/A	
650	Hospice service	N/A	
651	Routine home care	N/A	
652	Continuous home care	N/A	
655	Inpatient respite care	N/A	
656	General inpatient care (non-respite)	N/A	
657	Physician services	N/A	
658	Hospice Room & Board-Nursing facility	N/A	
659	Other hospice service	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
660	Respite Care	N/A	
661	Hourly Respite Care Charge Nursing	N/A	
662	Hourly Respite Care Charge Aide/Homemaker/Companion	N/A	
663	Daily Respite Charge	N/A	
669	Other respite care	N/A	
670	Outpatient Special Residence Charges	N/A	
671	Hospital based	N/A	
672	Contracted	N/A	
679	Other special residence charge	N/A	
680	Not Used	N/A	
780	Telemedicine	N/A	
832	Home supplies	N/A	
833	Home equipment	N/A	
834	Maintenance/100%	N/A	
835	Support services	N/A	
842	Home supplies	N/A	
843	Home equipment	N/A	
844	Maintenance/100%	N/A	
845	Support services	N/A	
852	Home supplies	N/A	
853	Home equipment	N/A	
854	Maintenance/100%	N/A	
855	Support services	N/A	
882	Home dialysis aid visit	N/A	
920	Other Diagnostic Services	N/A	
929	Other Diagnostic Services: Other diagnostic services	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
931	Medical rehab; half day	N/A	
932	Medical rehab; full day	N/A	
940	Other Therapeutic Serv	N/A	
946	Complex medical equipment-Routine	N/A	
947	Complex medical equipment-Ancillary	N/A	
949	Other Therapeutic Serv: Additional RX SVS	N/A	
951	Other therapeutic services-(940x) Athletic training	N/A	
952	Other therapeutic services-(940x) Kinesiotherapy	N/A	
960	Professional fees	N/A	
961	Psychiatric	N/A	
962	Ophthalmology	N/A	
963	Anesthesiologist (MD)	N/A	
964	Anesthetist (CRNA)	N/A	
969	Other professional fee	N/A	
971	Professional fees (096x) Laboratory	N/A	
972	Professional fees (096x) Radiology-Diagnostic	N/A	
973	Professional fees (096x) Radiology-Therapeutic	N/A	
974	Professional fees (096x) Radiology-nuclear medicine	N/A	
975	Professional fees (096x) Operating room	N/A	
976	Professional fees (096x) Respiratory Therapy	N/A	
977	Professional fees (096x) Physical therapy	N/A	
978	Professional fees (096x) Occupational therapy	N/A	
979	Professional fees (096x) Speech pathology	N/A	
981	Professional fees (096x) Emergency room	N/A	
982	Professional fees (096x) Outpatient services	N/A	
983	Professional fees (096x) clinic	N/A	

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Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
984	Professional fees (096x) medical social services	N/A	
985	Professional fees (096x) EKG	N/A	
986	Professional fees (096x) EEK	N/A	
987	Professional fees (096x) Hospital visit	N/A	
988	Professional fees (096x) Consultation	N/A	
989	Private duty nurse	N/A	
990	Patient convenience items	N/A	
991	Cafeteria/guest tray	N/A	
992	Private linen service	N/A	
993	Telephone/telegraph	N/A	
994	TV/radio	N/A	
995	Nonpatient room rentals	N/A	
996	Late discharge charge	N/A	
997	Admission kits	N/A	
998	Beauty shop/barber	N/A	
999	Other patient convenience item	N/A	
1000	Behavioral health accommodations	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	

Appendix J

Crosswalk for Revenue Code to Primary Cost

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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 K

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

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

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

Mt. Ascutney Hospital and Health
Center
(MTA)
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 University of Vermont Medical
Center
(UVMHC)
111 Colchester Avenue
Burlington, Vermont 05401
(Formerly Fletcher Allen Health Care)

New Hampshire Hospitals Most Frequently Used by Vermont Residents

Alice Peck Day Memorial Hospital (NH-Alice Day) Lebanon, New Hampshire	Exeter Hospital (NH-Exeter) Exeter, New Hampshire	Parkland Medical Center (NH-Parkland) Derry, New Hampshire
Androscoggin Valley Hospital (NH-Androscoggin) Berlin, New Hampshire	Franklin Regional Hospital (NH-Franklin) Franklin, New Hampshire	Portsmouth Regional Hospital (NH-Portsmouth) Portsmouth, New Hampshire
Catholic Medical Center (NH-Catholic) Manchester, New Hampshire	Frisbie Memorial Hospital (NH-Frisbie) Rochester, New Hampshire	Southern New Hampshire Medical Center (NH-Southern NH) Nashua, New Hampshire
Cheshire Medical Center (NH-Cheshire) Keene, New Hampshire	Huggins Hospital (NH-Huggins) Wolfeboro, New Hampshire	St. Joseph's Hospital (NH-St. Joseph's) Nashua, New Hampshire
Concord Hospital (NH-Concord) Concord, New Hampshire	Lakes Region General Hospital (NH-Lakes Region) Laconia, New Hampshire	Speare Memorial Hospital (NH-Speare) Plymouth, New Hampshire
Cottage Hospital (NH-Cottage) Woodsville, New Hampshire	Littleton Hospital (NH-Littleton) Littleton, New Hampshire	Upper Connecticut Valley Hospital (NH-Upper CT Val) Colebrook, New Hampshire
Dartmouth Hitchcock Medical Center (NH-Hitchcock) Lebanon, New Hampshire	Memorial Hospital (NH-Memorial) North Conway, New Hampshire	Valley Regional Hospital (NH-Valley Reg.) Claremont, New Hampshire
Dartmouth Hitchcock Psychiatric Unit*(NH-Hitch. Psych) Lebanon, New Hampshire	Monadnock Community Hospital (NH-Monadnock) Peterborough, New Hampshire	Weeks Medical Center Hospital (NH-Weeks) Lancaster, New Hampshire
Elliot Hospital (NH-Elliot) Manchester, New Hampshire	New London Hospital (NH-New London) New London, 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 L

Public / Non-Public Data Elements and Availability of Data Elements in Datasets

Public use data for resident and non-resident discharges from Vermont hospitals are available online by calendar year.
<http://www.healthvermont.gov/health-statistics-vital-records/health-care-systems-reporting/hospital-discharge-data>

Non-public data elements are available for research purposes only.

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

To request non-public data elements, contact:

Analytical Team
Green Mountain Care Board
144 State Street
Montpelier, VT 05620-1701
GMCB.DATA@vermont.gov
(802) 828-2906

(See next page for data elements)

Vermont Hospital Discharge Data Elements

Inpatient, Outpatient and Emergency Department Datasets

Attribute	Description	Public Use Data Element	Full Datasets		
			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 Year	--	N	Y	Y	Y
Admission Source	Transfer, referral, newborn and court/law enforcement categories.	Y	Y	Y	Y
Admission Type	Emergency, urgent, elective, newborns, trauma.	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
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 (inpatient only).	N	Y	N	N
Charges	Total facility charges.	Y	Y	Y	Y
CCS Single Level Diagnosis Groups	Principal diagnosis collapsed into more than 260 categories.	Y	Y	Y	Y

Attribute	Description	Public Use Data Element	Full Datasets		
			Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
CCS High Level Diagnosis Groups	CCS single level diagnosis groups collapsed into 18 high level categories.	Y	Y	Y	Y
CCS Single Level Procedure Groups	Principal procedure collapsed into 231 categories.	Y	Y	Y	Y
CCS High Level Procedure Groups	CCS single level procedure groups collapsed into 17 high level categories.	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 at Admission	ICD-9-CM or ICD-10-CM diagnosis code.	Y	Y	Y	Y
Diagnosis Related Group (DRG)	Medicare classification system that groups inpatient discharges into more than 700 categories based on diagnosis, type of treatment, age and other relevant criteria.	Y	Y	N	N
Discharge Date	--	N	Y	Y	Y
Discharge Quarter	--	Y	Y	Y	Y
Discharge Year	--	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
Ecode1 – Ecode3	Code for external causes of injury and poisoning; primary Ecode and two secondary Ecodes appear in these fields, and additional secondary Ecodes may be entered as secondary diagnoses.	Y	Y	Y	Y

Attribute	Description	Public Use Data Element	Full Datasets		
			Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Emergency Department Flag	Set to 1 if record has an associated revenue code of 45x, Emergency Room.	Y	Y	Y	Y
Groupers	Groupers version used to assign DRG and MDC.	Y	Y	N	N
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.	Y	Y	Y	Y
Major Diagnostic Category (MDC)	An aggregation of inpatient DRGs (see definition of DRGs above) into 25 groups that define major body systems.	Y	Y	N	N
Observation Bed Flag	Set to 1 if record has an associated revenue code of 760 or 762, Observation Bed.	Y	Y	Y	Y
Other Physician 1 & 2	Hospital-specific code for other physicians performing procedures.	N	Y	Y	Y
Patient Days	Length of stay.	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 (prior to 10/1/2015) or ICD-10-CM diagnosis code.	Y	Y	Y	Y
Principal Procedure and Up to 19 Secondary Procedures	ICD-9-CM or ICD-10-PCS procedure code (all inpatients, and outpatients prior to 7/1/2014).	Y	Y	Y	Y

Attribute	Description	Public Use Data Element	Full Datasets		
			Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Race	--	N	Y	Y	Y
Readmission indicator	Any patient readmitted to the same hospital within 30 days.	N	Y	N	N
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
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 population over 10,000 in Vermont and combined zips in other states.	Y	Y	Y	Y
Zip Town Code	Groups of towns that share ZIP code(s)	N	Y	Y	Y
Unique ID	Unique number assigned to an event to link the event to its associated revenue records.	Y	Y	Y	Y

Revenue Dataset

Field	Description	Public Use Files	Revenue Files
Bill Type	Bill type as designated by the hospital.	Y	Y
CCS HCPCS/CPT Single Level Group	HCPCS/CPT code on this record collapsed into 231 categories.	Y	Y
CCS HCPCS/CPT High Level Group	CCS HCPCS/CPT code on this record single level group collapsed into 17 high level categories.	Y	Y
Discharge Date	--	N	Y
Discharge Quarter	--	Y	Y
Discharge Year	--	Y	Y
ERFLAG	Set to 1 if record has revenue code of 45x, Emergency Room.	N	Y
HCPCS/CPT	HCPCS/CPT code on this revenue record.	Y	Y
HCPCS Modifier 1	Modifier 1 for this revenue record's HCPCS/CPT code.	N	Y
HCPCS Modifier 2	Modifier 2 for this revenue record's HCPCS/CPT code.	N	Y
HCPCS Modifier 3	Modifier 3 for this revenue record's HCPCS/CPT code.	N	Y
HCPCS Modifier 4	Modifier 4 for this revenue record's HCPCS/CPT code.	N	Y
HCPCS Modifier 5	Modifier 5 for this revenue record's HCPCS/CPT code.	N	Y
Hospital	--	Y	Y
OBSFLAG	Set to 1 if record has revenue code of 760, Observation Bed.	N	Y
PCCR	Primary Cost Center for this record's revenue code.	Y	Y
Primary CPT Flag	Flag to indicate that this record's HCPCS/CPT code is the event's primary CPT (as of 7/1/2014).	Y	Y

Revenue Charge	Charge for this record's revenue code.	Y	Y
Revenue Code	This record's revenue code.	Y	Y
Revenue Date	The date for this record's revenue code.	N	Y
Revenue Units	Number of revenue units for this record's revenue code.	Y	Y
RVU value	Relative Value Units assigned to this record's HCPCS/CPT code, used to calculate the event's primary HCPCS/CPT.	N	Y
Unique ID	Unique number assigned to an event to link the event to its associated revenue records.	Y	Y