

**2017**

**Vermont Hospitals Report**

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**Vermont Green Mountain Care Board**

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

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The production of this document would not be possible without the assistance of many individuals and the cooperation of the hospitals. The Vermont Green Mountain Care Board (GMCB) thanks the Vermont Association of Hospitals and Health Systems - Network Services Organization (VAHHS-NSO) for providing assistance under a contract with GMCB and for working with the Vermont hospitals to ensure timely and accurate reporting of the data. GMCB also thanks the participating hospitals for their efforts in submitting the data and responding to requests for clarification and corrections.

### 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.

**Note:** Changes in coding systems used by the hospitals occurred in 2014 and 2015. Discussion of these changes can be found in the User's Guide and in Appendix B.

# 2017 Vermont Hospitals Report

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Note: Reporting is limited to Vermont hospitals until the 2017 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.



# 2017 Vermont Hospitals Report

## User's Guide

### Introduction

*The Vermont Hospitals Report* presents information about patient health issues and hospital services provided in fourteen Vermont acute care hospitals within inpatient, outpatient and emergency department settings.

Hospital-based analyses are useful for understanding overall hospital utilization, and have applications for health system planning, cost containment, and resource development. Vermont hospitals near Vermont's borders may provide care to people in neighboring, non-Vermont towns. Hospital-based analyses include all people served by each hospital, regardless of their state of residency. This report focuses only on data from Vermont hospitals, and includes all patients who received services regardless of whether they were Vermont residents or residents of other states.

Analyses by hospital service area (HSA) can be used to compare data for residents of geographic regions of Vermont who were provided services in any Vermont, New Hampshire, New York, or Massachusetts hospital. With some caveats, 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 2017.

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-9-CM 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. CPT codes reported prior to July 1, 2014 may be incomplete, as may be ICD-9-CM procedure codes reported on or after that date.

**Clinical Classifications Software (CCS).** 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.

The changes in required reporting have resulted in some discontinuities across 2014 and 2015 in several specific single- and high-level CCS procedure groupings: these discontinuities may be due in part to differences between the various coding systems. See Appendix B for further information about these changes in reporting. Appendices C

through I provide more details about inpatient and outpatient CCS diagnosis and procedure groupings in 2013 through 2017 by discharge quarter.

**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 sixty 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 3.4% from 2016 to 2017. Charges for non-resident inpatient discharges increased by 8.1%. The *number* of inpatient discharges for Vermont residents in 2017 decreased by 0.3% over 2016, and the number of non-resident inpatient discharges increased by 4.4%.
- **Total charges for Vermont residents with ED visits to Vermont hospitals** increased by 2.5% from 2016 to 2017, a smaller increase than that for non-residents (3.6%). Total charges have fluctuated in recent years, with the smallest increases occurring from 2012 to 2013 (5.2% and 8.8% 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 2016 to 2017 (-2.1% and -0.9% respectively).
- **Total charges for Vermont residents with outpatient procedures in CCS high-level procedure groups 1 through 15 at Vermont hospitals** increased 0.6% from 2016 to 2017 compared to the increase of 5.2% in total charges for non-residents. The increase for Vermont resident charges is lower than the change from 2015 to 2016 (3.6%), and the increase in total charges for non-residents is higher than the increase from 2015 to 2016 (3.7%). The *number* of outpatient procedures for Vermont residents and non-residents changed slightly from 2016 to 2017 (-1.6% and 1.9% respectively). The increase in number of outpatient procedures compared to 2013 is due in large part to changes in requirements for Vermont hospitals' coding of outpatient procedures from ICD-9-CM codes to CPT codes as of July 1, 2014. See the User's Guide for detailed information about this change.

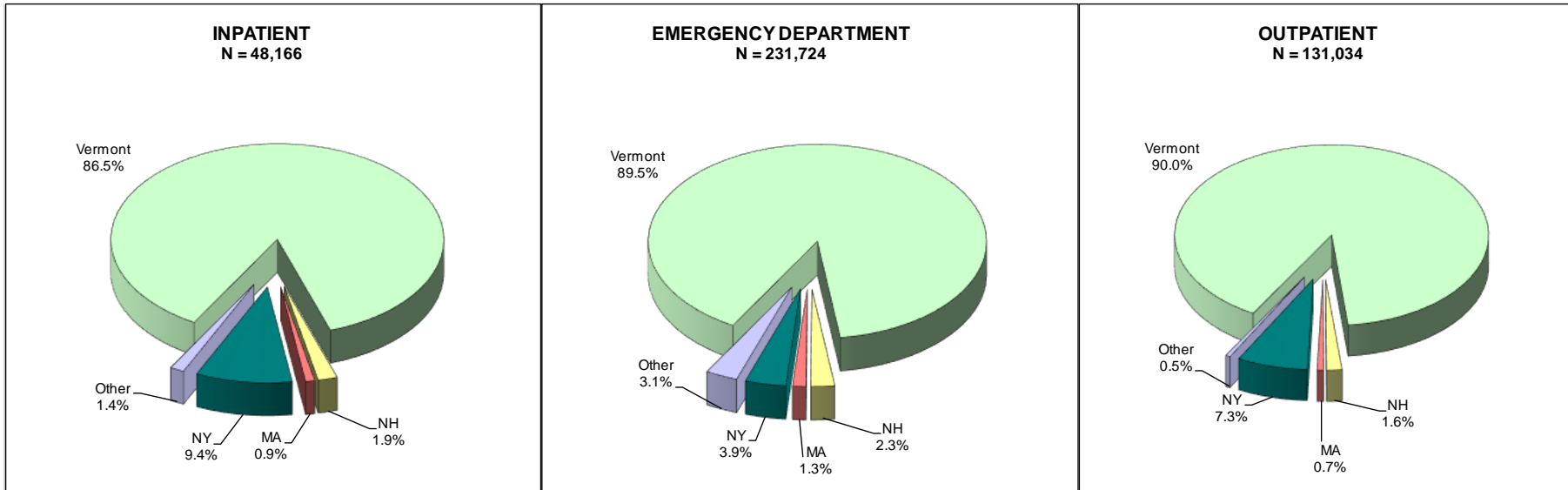
### In-migration

- Most in-migration to Vermont hospitals in 2017 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 (3.9% of ED visits, compared to 9.4% of inpatient discharges and 7.3% of outpatient procedures in range).
- In 2017, New York residents accounted for a higher percent of total charges than of total discharges in all three settings (4.5% of ED charges, 14.7% of inpatient charges and 8.8% of outpatient charges), as in recent years.

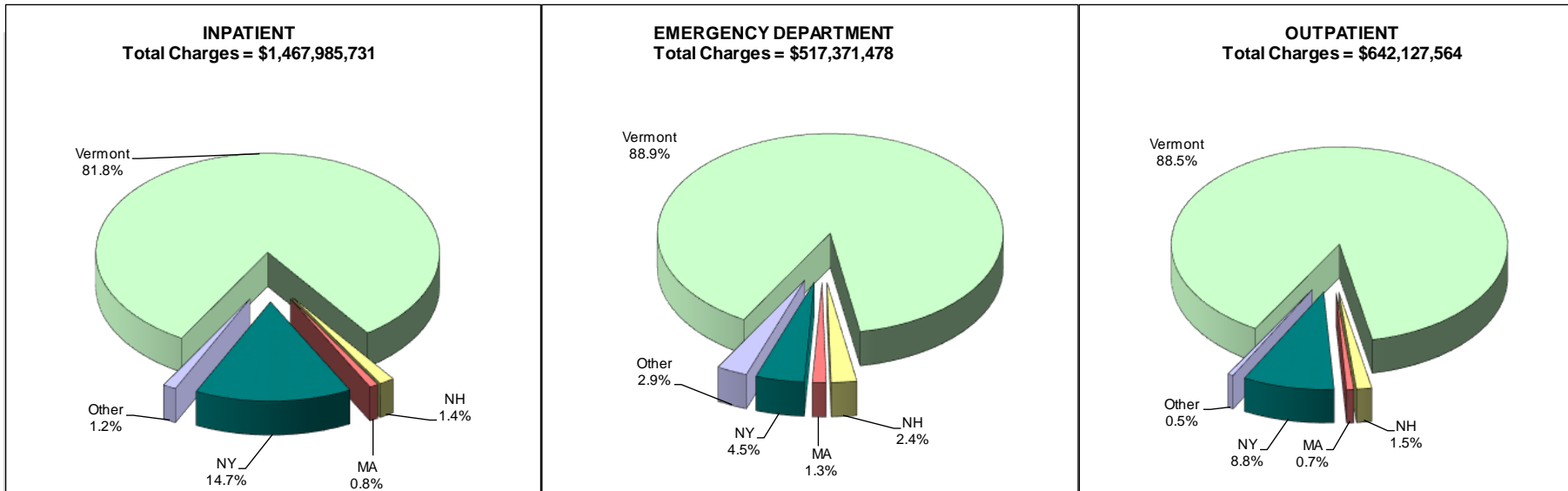
Note: Reporting is limited to Vermont hospitals until the 2017 data are available for Vermont residents served in New Hampshire, Massachusetts and New York hospitals. The timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's 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.

## 2017 Vermont Hospitals Summary of Patients' State of Residence by Hospital Setting

### Percent of Total Discharges



### Percent of Total Charges



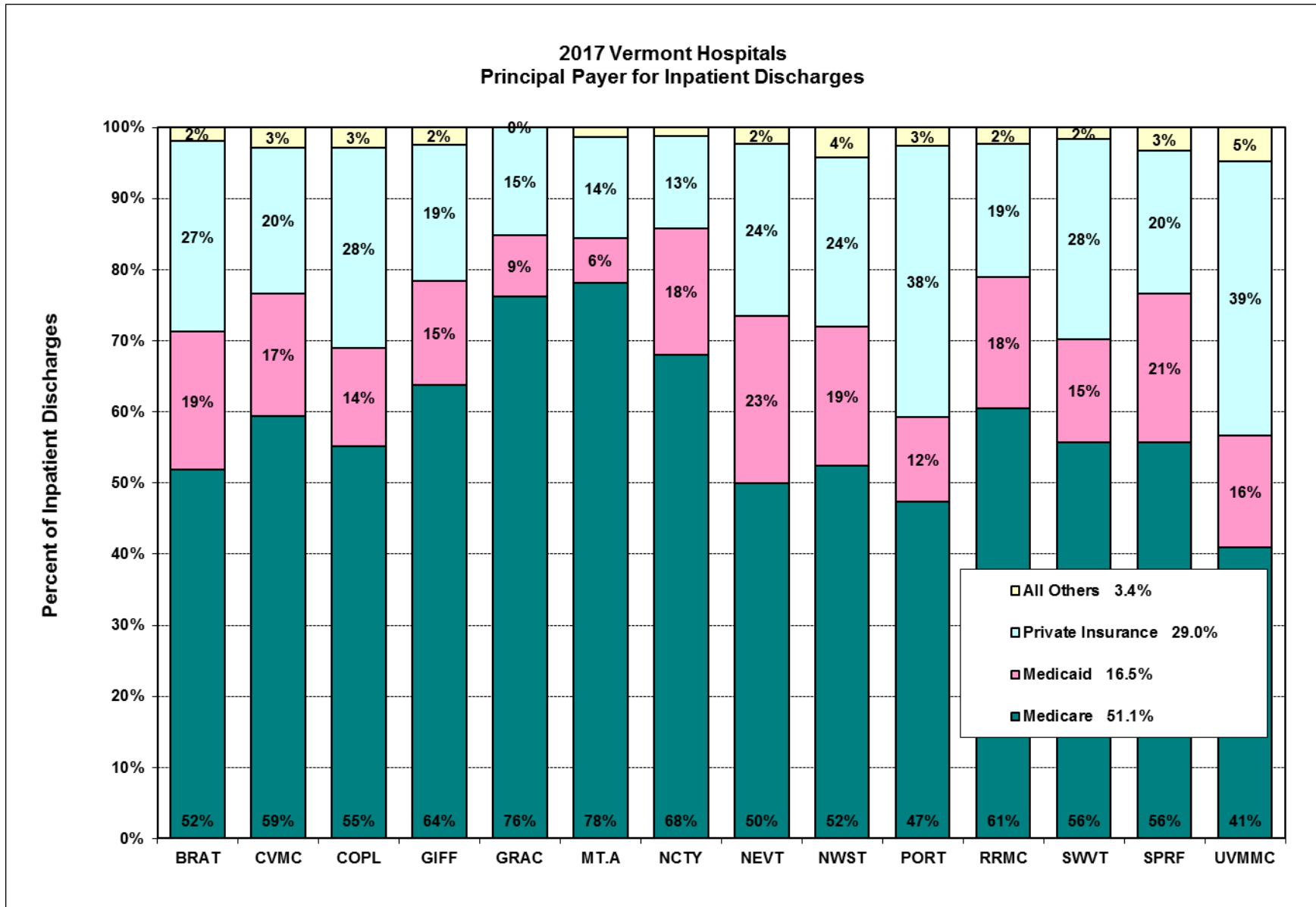
Numbers of discharges exclude newborns. Total charges include charges for newborns.



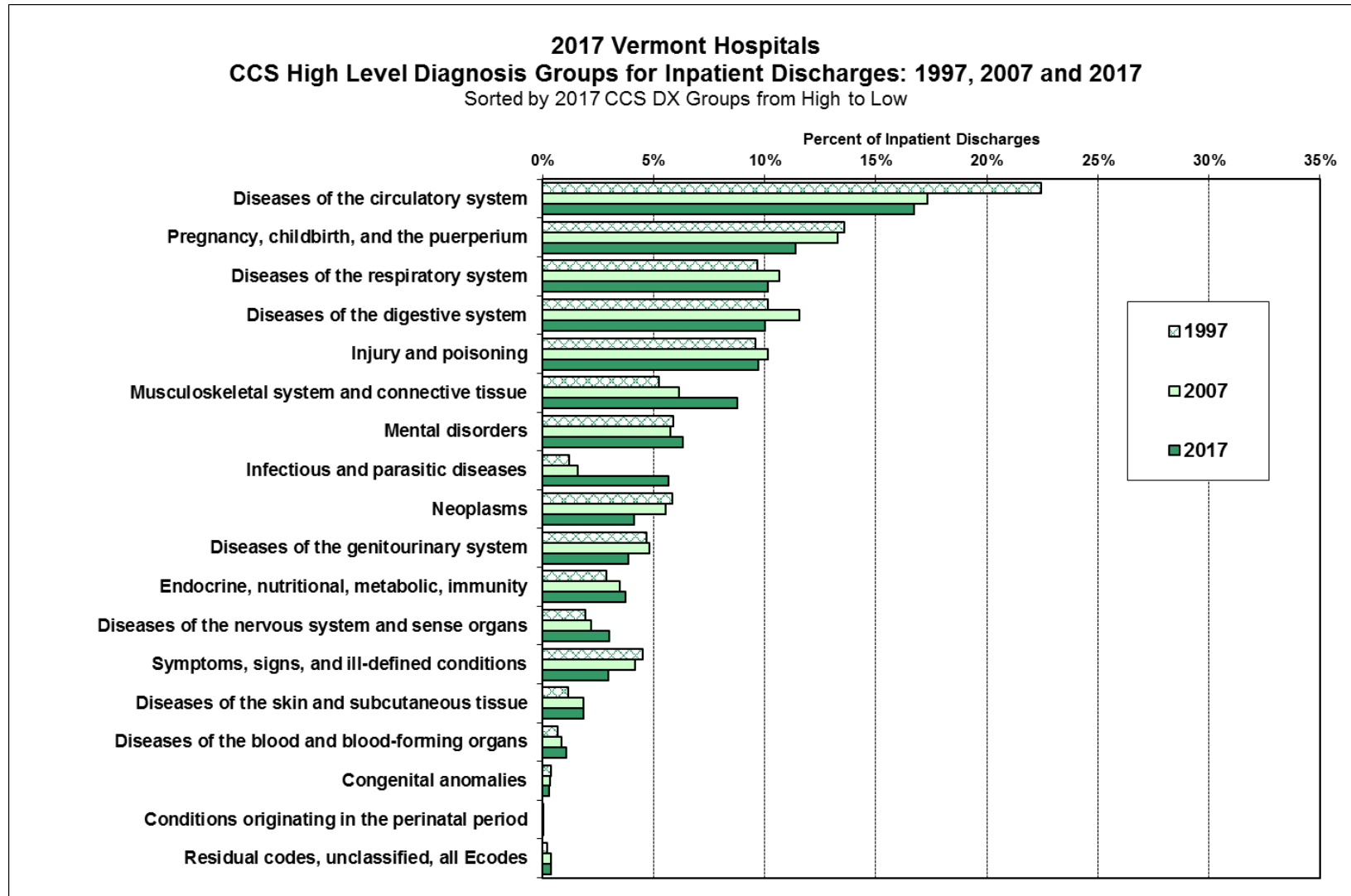
## Highlights of Inpatient Discharges from Vermont Hospitals

- **In 2017, there were 48,166 inpatient discharges from Vermont hospitals**, including maternal records but excluding newborns. Of these, 86.5% were Vermont residents, and 13.5% were residents of New Hampshire, Massachusetts, New York or elsewhere.
- **The number of inpatient discharges from Vermont hospitals has declined** 2.0% from 1997, and increased 0.2% from 2007, including both Vermont residents and non-residents. The average length of stay for these discharges changed very little overall, from 4.8 days per discharge in 1997 to 4.6 in 2007, and to 4.9 in 2017.
- **Similar to findings in recent years**, more than half of the total inpatient discharges from Vermont hospitals in 2017 originated in the Emergency Department (61.2%).
- **The University of Vermont Medical Center** continued to have the highest number of inpatient discharges at 19,769 in 2017 (41.0% of all inpatient discharges, compared to 38.9% in 1997 and 41.1% in 2007). Rutland followed with 6,640 discharges (13.8%). Grace Cottage Hospital and Mt. Ascutney Hospital and Health Center had the lowest total numbers of inpatient discharges (151 and 1,031 respectively).
- **The University of Vermont Medical Center** continued to have the highest total number of patient days at 120,578 in 2017 (51.2% of 235,382 patient days), followed by Rutland Regional Medical Center with 29,673 (12.6%). Grace Cottage Hospital had the lowest total number of patient days (423).
- **In 2017, average length of stay in Vermont hospitals varied** from 2.7 days per discharge at Copley Hospital to 6.1 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 2017 was 9.7. 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 2017, Medicare continued to be the leading principal payer** for inpatient discharges from Vermont hospitals at 51.1% of total discharges, followed by private insurance at 29.0% and Medicaid at 16.5%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.

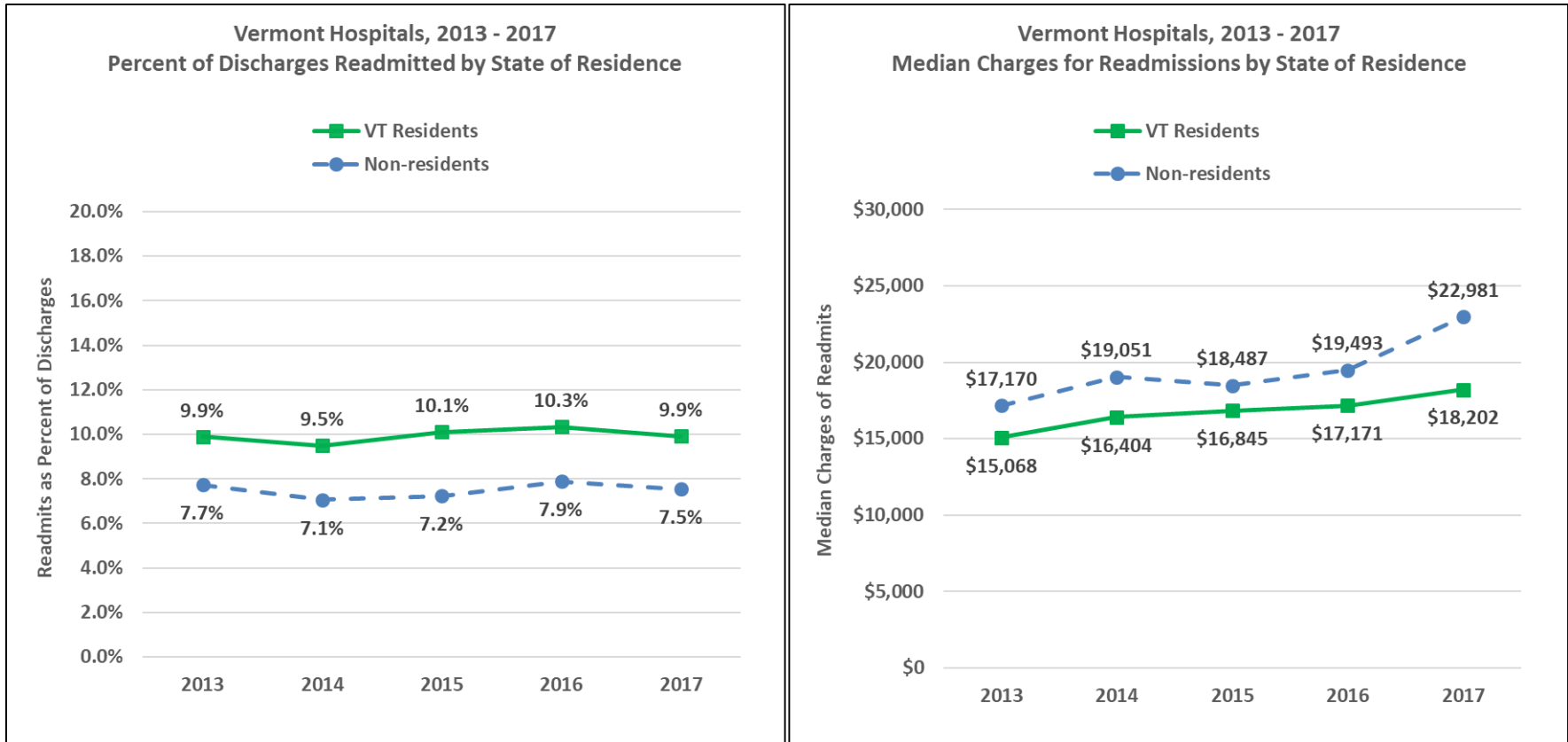


- The most frequent reasons for hospitalization in 2017** were Diseases of the circulatory system; Pregnancy, childbirth and the puerperium; Diseases of the respiratory system; Diseases of the digestive system; and Injury and poisoning, consistent with recent years. Of note are the continued decreases in percent of hospitalizations with diagnoses for Diseases of the circulatory system, Pregnancy, childbirth and the puerperium, and Symptoms, signs, and ill-defined conditions, and the substantial 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 2013 through 2017. In contrast, out-of-state residents have higher median charges than Vermont residents when readmitted to Vermont hospitals.
 

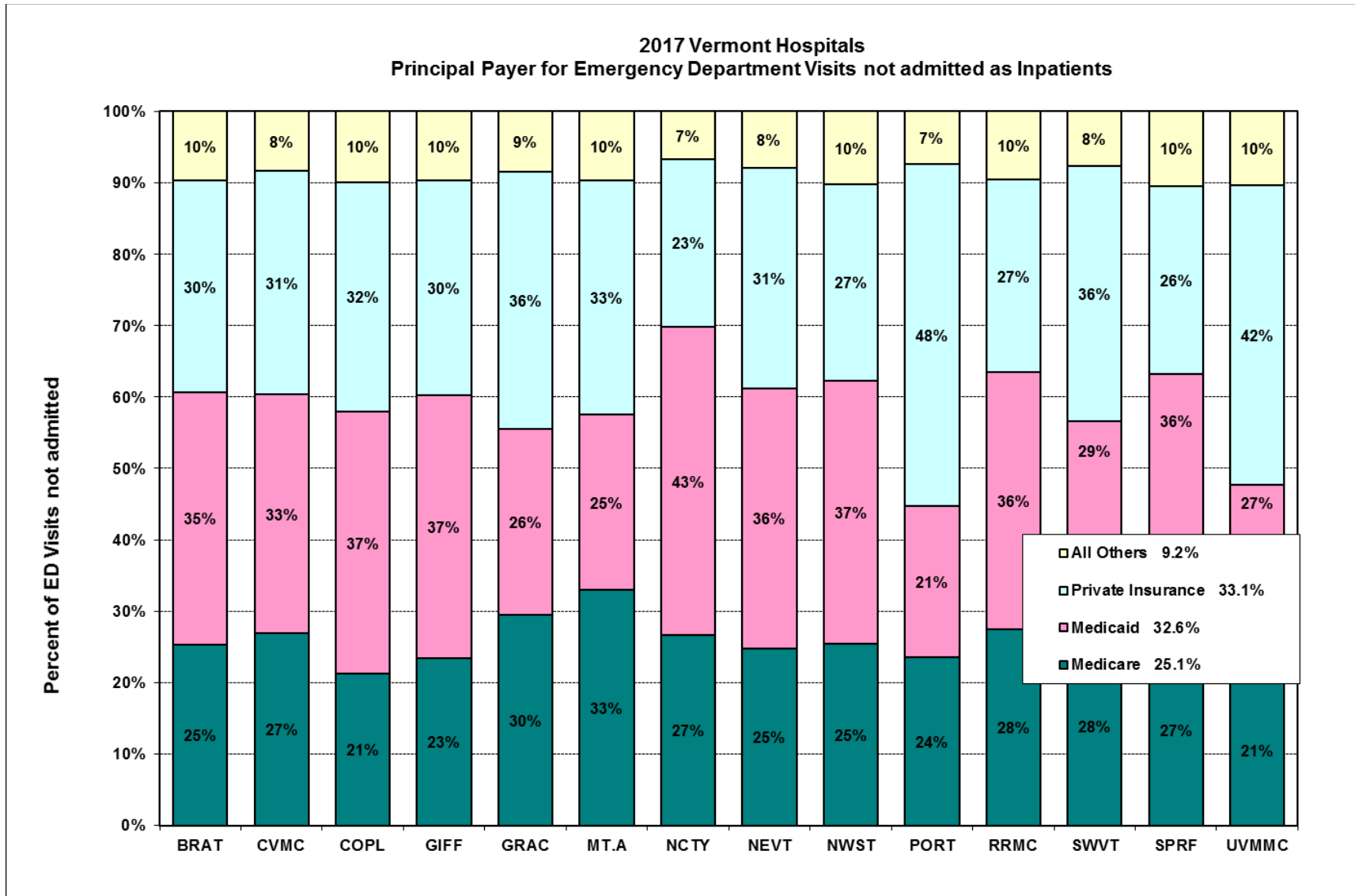
Note: ‘Readmission’ is defined in this report as readmitted to the same hospital for any reason within 30 days of discharge, excluding readmission on the same day as discharge.



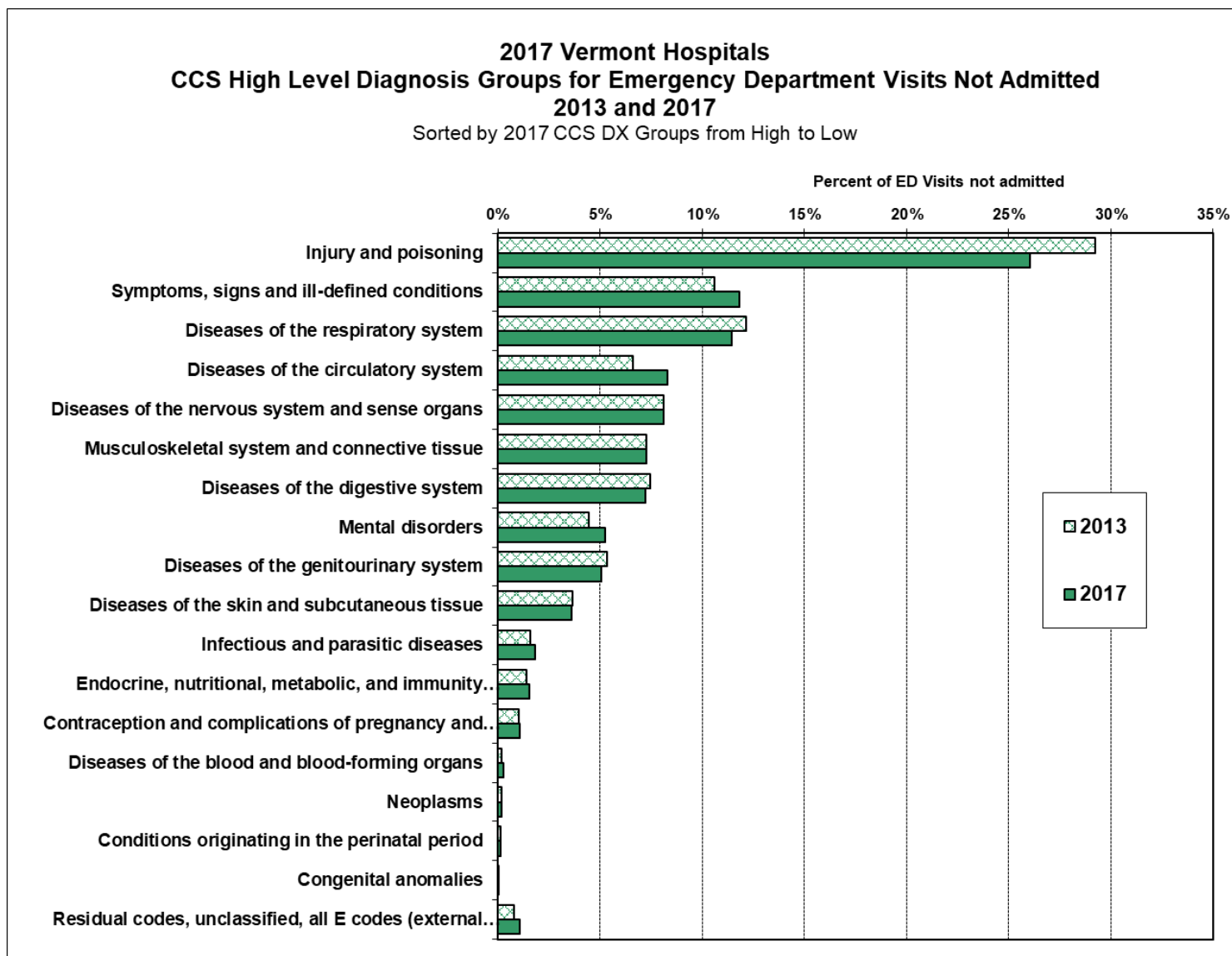
## Highlights of Visits to Vermont Hospital Emergency Departments

- **In 2017, there were a total of 261,214 visits to Vermont hospital Emergency Departments**, including both Vermont residents and non-residents, a small decrease from 2016. Similar to recent years, 88.7% (231,724) of these ED visits were not admitted, while the remaining 11.3% (29,490) of ED visits were admitted and categorized as inpatient discharges.
- **Overall, the number of ED visits decreased** from 2013 to 2017 by 2.3% (-4.5% for ED visits not admitted, and an increase of 18.7% for those admitted as inpatients).
- **In 2017, as in previous years, the percent of ED visits that were admitted as inpatients increased with increasing age.** About 2% of ED visits by children under age 15 were admitted, as were 4.2% of visits by individuals age 15-44, 12.2% of those aged 45-64, 19.6% of those aged 65-69, 22.7% of those aged 70-74, 25.7% of those aged 75-79, and 32.8% of those aged 80 and older.
- **The University of Vermont Medical Center** continued to have the highest percent of visits to the ED in 2017, leading all Vermont hospitals with 21.6% of all ED visits. Of all ED visits to The University of Vermont Medical Center, 17.1% were admitted as inpatients, consistent with previous years.
- **The percent of ED visits that were admitted in 2017** ranged from highs of 17.1% at The University of Vermont Medical Center, 15.3% at Rutland Regional Medical Center, and 13.4% at Central Vermont Medical Center, to a low of 4.1% at both Grace Cottage Hospital and Porter Medical Center.
- **Of all ED visits, those with a primary diagnosis of neoplasms were the most likely to be admitted (62.2%),** followed by those with diseases of the blood and blood-forming organs (42.6%), those with congenital anomalies (39.1%), and those with infectious and parasitic diseases (37.0%). Least likely to be admitted were ED visits for Conditions originating in the perinatal period (1.1%) and for Symptoms, signs and ill-defined conditions (2.2%).

In 2017, Private Insurance was the leading principal payer for ED visits not admitted at 33.1% of these visits, followed by Medicaid at 32.6% and Medicare at 25.1%. 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 ED visits not admitted in 2017** were Injury and poisoning; Symptoms, signs and ill-defined conditions; Diseases of the respiratory system; Diseases of the circulatory system; Diseases of the nervous system and sense organs; and Musculoskeletal system and connective tissue, consistent with recent years. Of note is the substantial decrease in percent of ED visits not admitted for Injury and poisoning, and increases in Symptoms, signs and ill-defined conditions, Diseases of the circulatory system and Mental disorders.

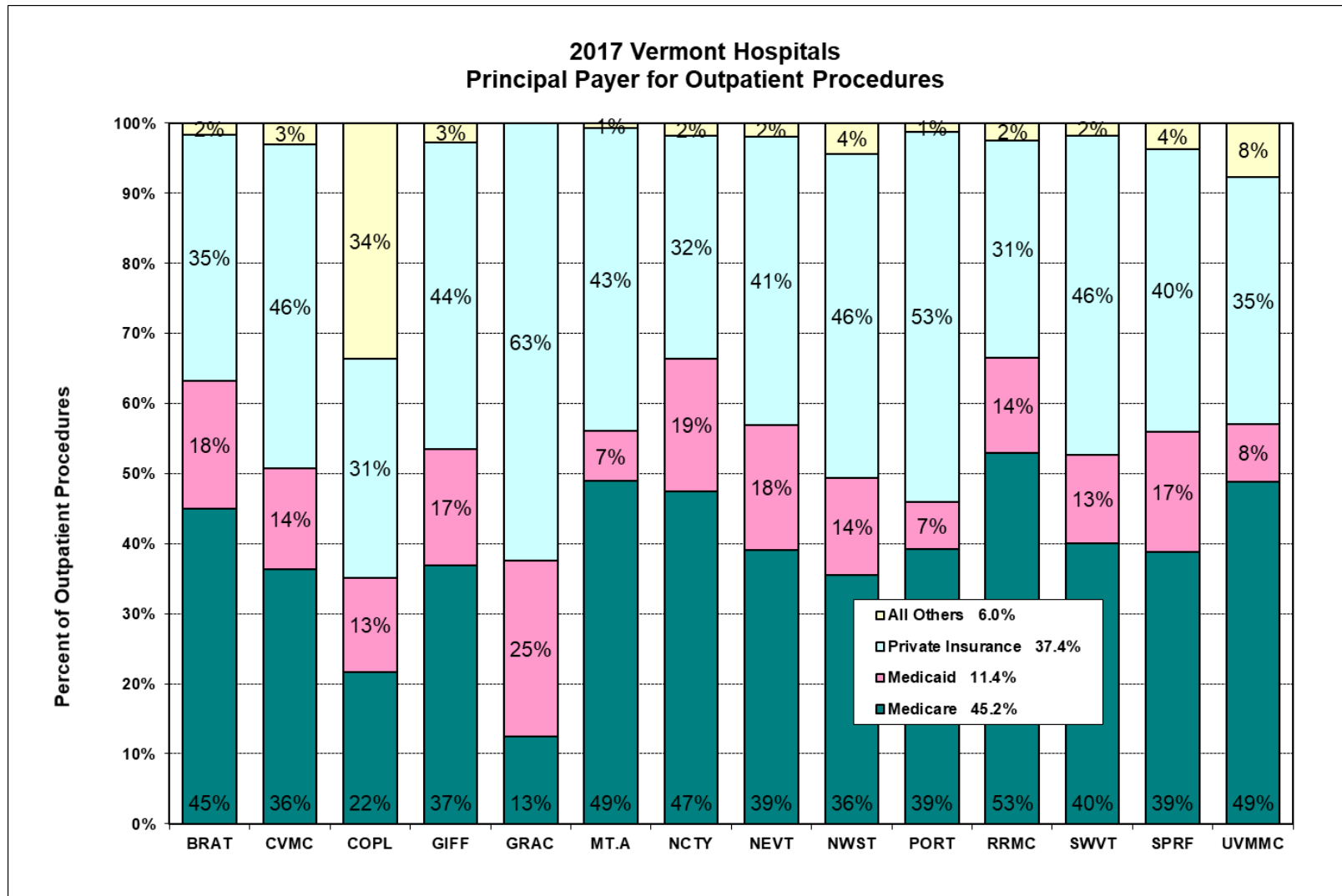


## Highlights of Outpatient Procedures and Services in Vermont Hospitals

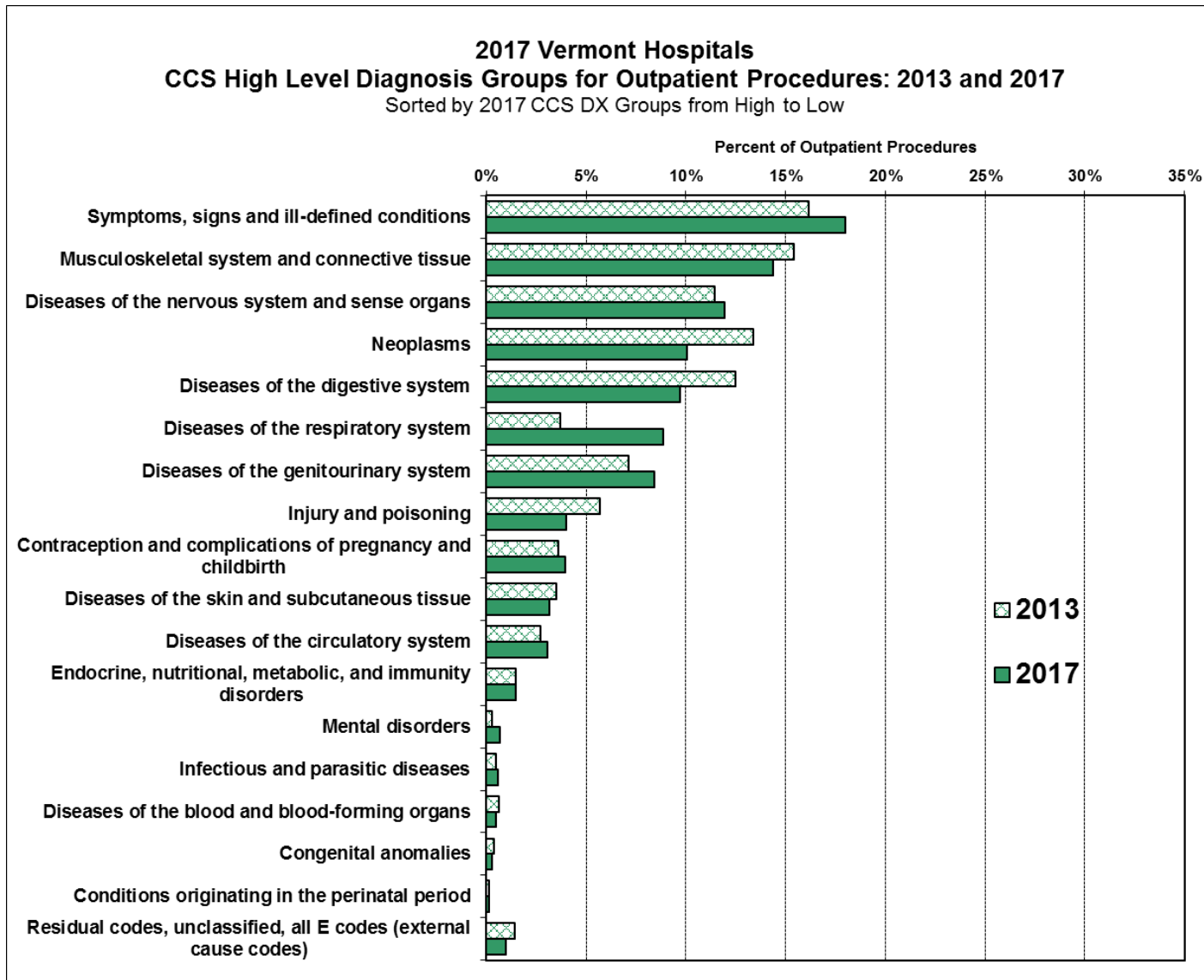
- **In 2017, there were 131,034 visits to Vermont hospitals for outpatient procedures** with a high-level procedure code in CCS procedure groups 1 through 15, representing both Vermont residents and non-residents. These outpatient visits did not originate in the Emergency Department. Grace Cottage Hospital had eight visits for outpatient procedures in this range of CCS procedure groups.
- **The number of outpatient procedures in Vermont hospitals decreased slightly** by 1.3% from 2016 after a 3.3% increase from 2015 to 2016. The continued substantial increase in number from 2013 is due in part to the required change in Vermont hospitals' coding of outpatient procedures from the ICD-9-CM system to the CPT system in 2014. See the User's Guide for more detailed information.
- **Overall, non-residents accounted for 10.0% of all visits to Vermont hospitals for outpatient procedures** in 2017. As in previous years, there was wide variation in the percent of non-residents at Vermont hospitals, with non-residents comprising 35.9% of Mt. Ascutney Hospital and Health Center's outpatient visits and 26.2% of Southwestern Vermont Medical Center's outpatient visits, compared to 1% or less of outpatient visits to Central Vermont Medical Center, Copley Hospital, North Country Hospital and Northwestern Medical Center.
- **Medicare was the primary payer** for 45.2% of all visits to Vermont hospitals for outpatient procedures in 2017. Rutland Regional Medical Center reported 52.9 % of outpatient visits with Medicare as the primary payer, while Copley reported the lowest percent with 21.7%. Consistent with recent years, there was substantial variation by CCS diagnosis group, with Diseases of the skin and subcutaneous tissue (74.1%), Infectious and parasitic diseases (69.7%), and Diseases of the nervous system and sense organs (66.2%) having the highest percent of visits with Medicare as the primary payer.
- **North Country Hospital and Brattleboro Memorial Hospital reported the highest percent of outpatient procedures with Medicaid as primary payer** (19.0% and 18.3% respectively), while Porter Medical Center, Mt. Ascutney Hospital and Health Center, and University of Vermont Medical Center reported the lowest percents with Medicaid as primary payer (6.8%, 7.2%, and 8.2% respectively).
- **The services most frequently provided in expanded outpatient visits** in 2017 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 Clinic, 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 year, and 34.9% higher in 2017 than in 2013. The number of these beds has fluctuated somewhat over time but changed much less since 2013 (9.7%). The University of Vermont Medical Center had 35.1% of all observation beds in 2017, followed by Rutland Regional Medical Center (9.9%), and Brattleboro Memorial Hospital (8.1%). The same hospitals consistently have the highest percents of observation beds, but the rank order may change from one year to another.



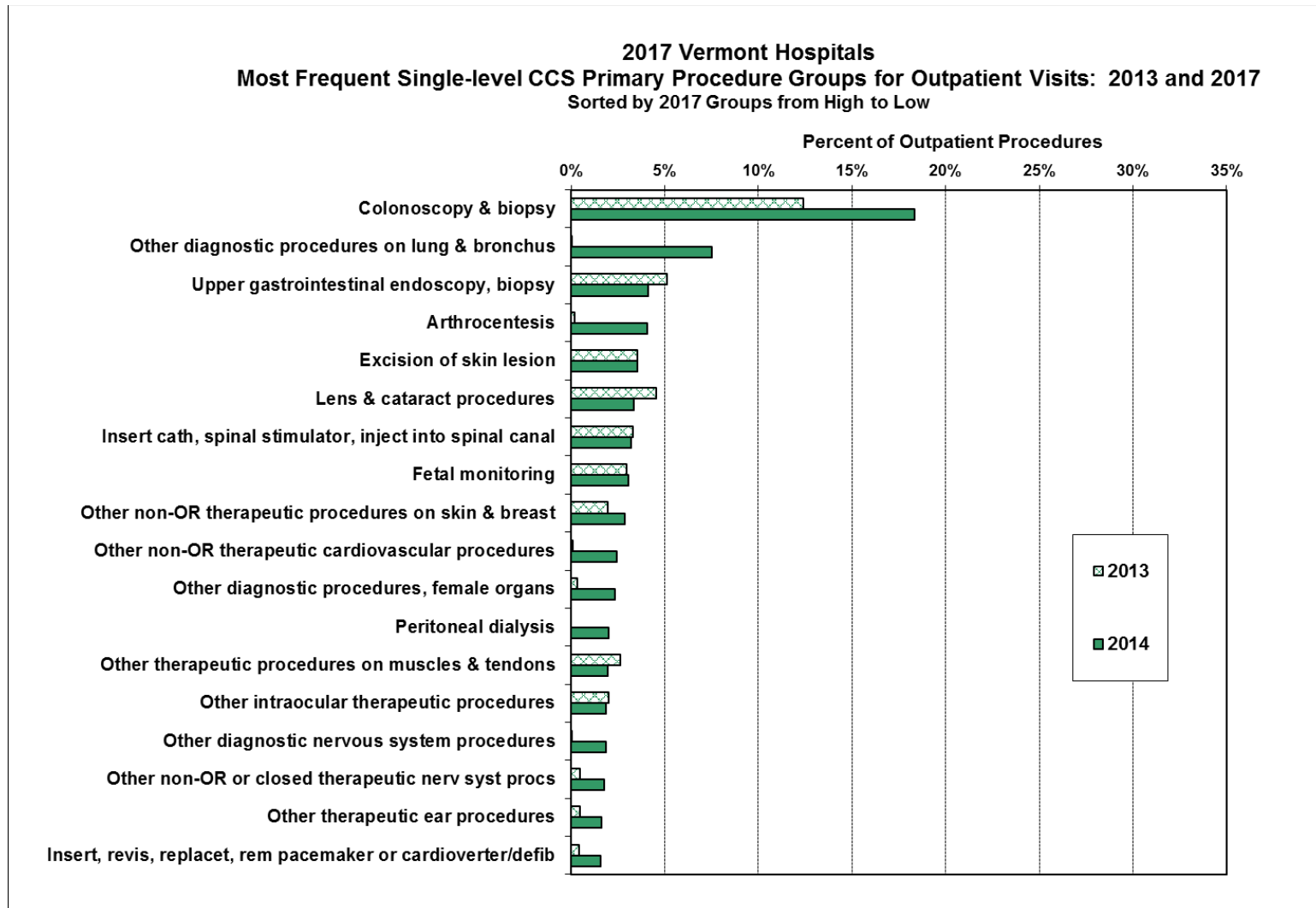
- **In 2017, Medicare was the leading principal payer** for 45.2% of outpatient procedures in range, followed by Private Insurance at 37.4% and Medicaid at 11.4%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix. (Grace Cottage Hospital had only eight outpatients.)



- The most frequent reasons for outpatient procedures in range** in 2017 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 digestive system. The most frequent reasons in 2017 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 Symptoms, signs and ill-defined conditions, Diseases of the respiratory system, and Diseases of the genitourinary system, and decreases in the percent of outpatients diagnosed with Neoplasms and Diseases of the digestive system, compared to 2013.

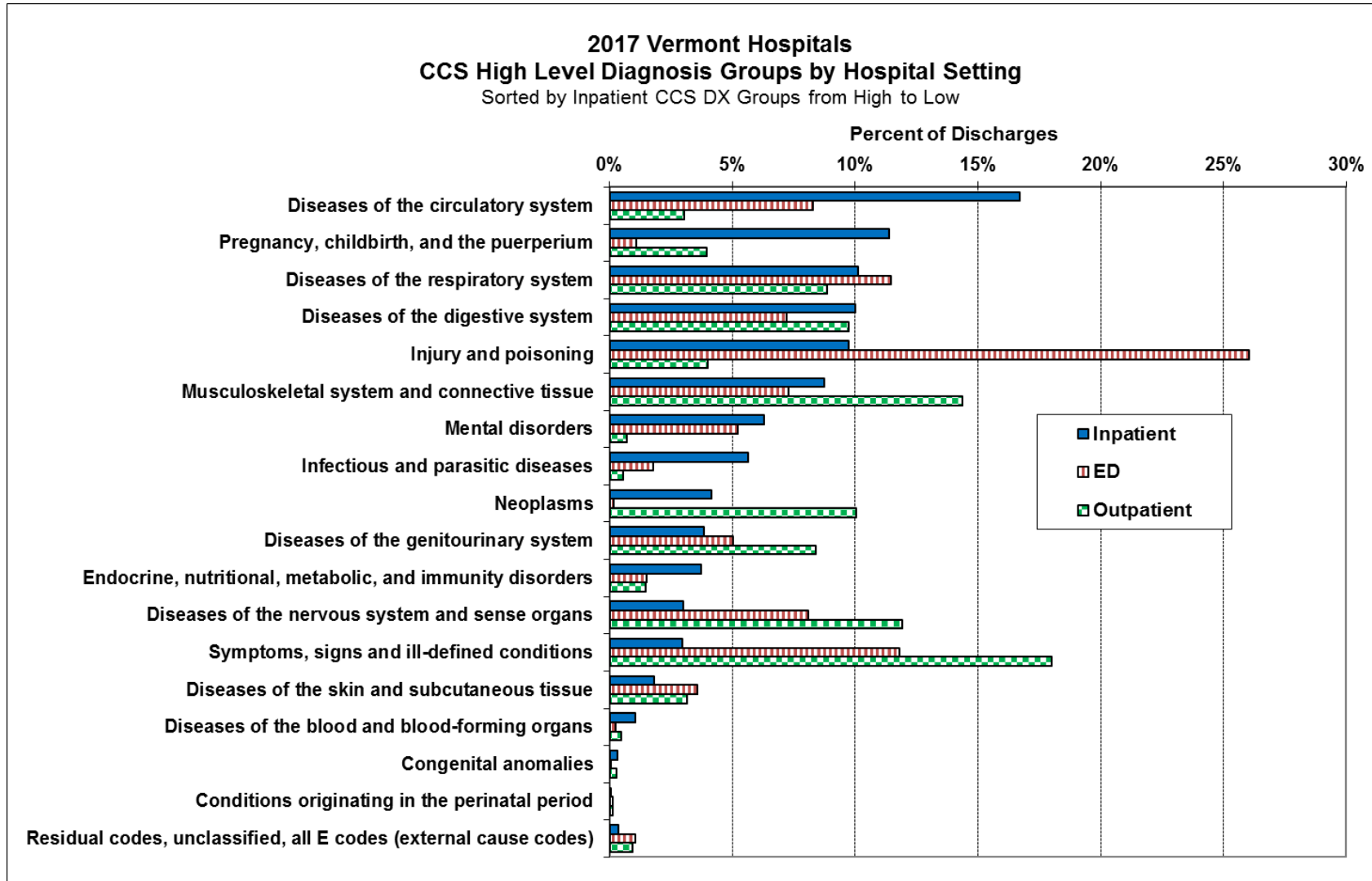


- **The leading single-level group of outpatient procedures in high-level CCS procedure groups 1 through 15 in both 2013 and 2017 was Colonoscopy & biopsy.** Following this procedure group in 2017 were Other diagnostic procedures on lung & bronchus, and Upper gastrointestinal endoscopy, biopsy. These most frequent procedure groups in 2017 are inconsistent with those in recent years, due in large part to Vermont’s change in the coding of outpatient procedures from the ICD-9-CM system to the CPT system in 2014.

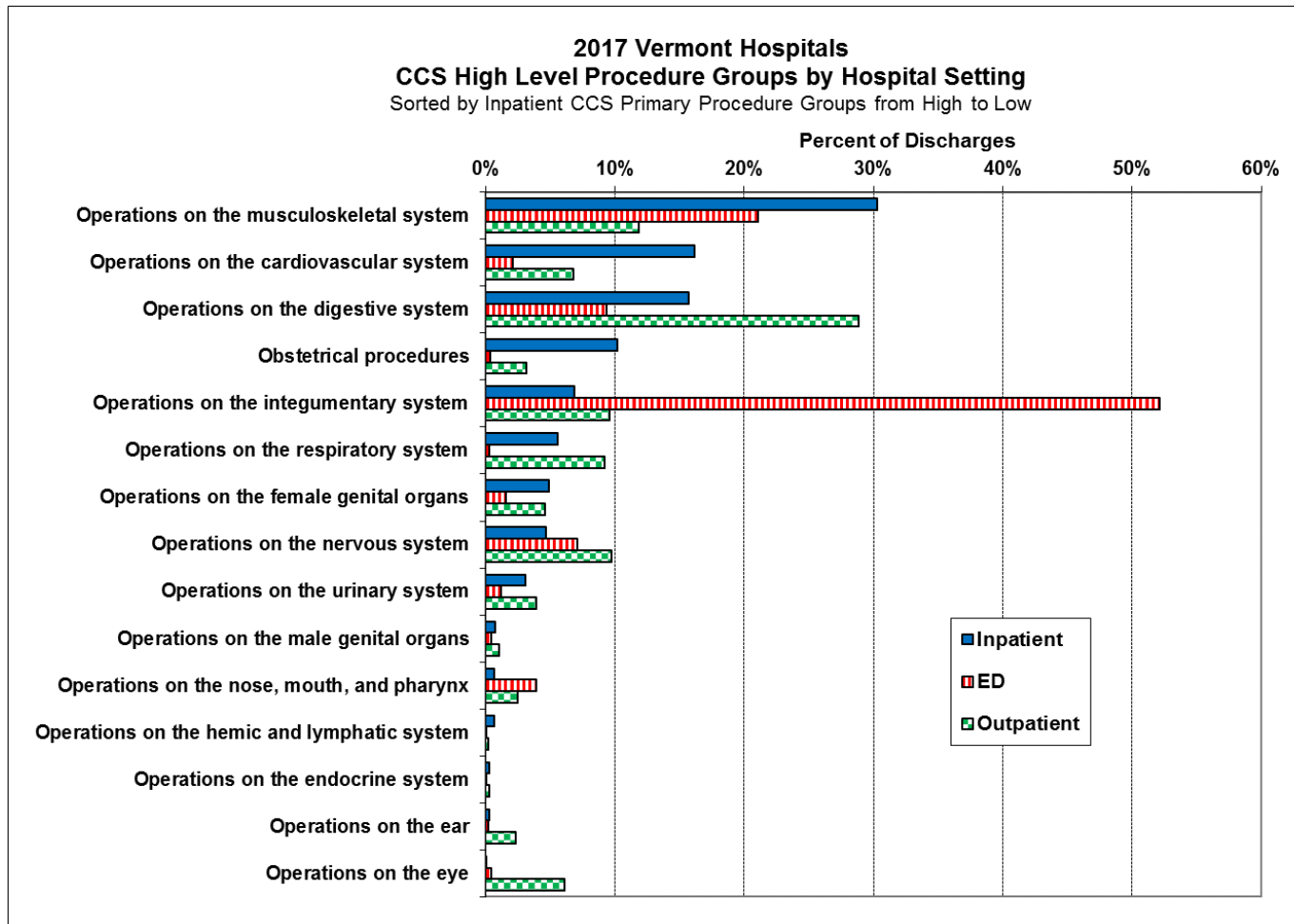


## Highlights of Comparisons across Vermont Hospital Settings

- The most frequent CCS high level diagnosis groups differed across Vermont hospital settings in 2017.** 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 2017.** The most frequent procedure group for inpatients was Operations on the musculoskeletal system, followed by Operations on the cardiovascular system. The most frequent procedure group for ED visits was Operations on the integumentary system, followed by Operations on the musculoskeletal system, and for outpatients, Operations on the digestive system followed by Operations on the musculoskeletal system. The frequencies of these CCS high level procedure groups have been consistent in recent years.





# **Inpatient Discharges**





**Table I-1**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Vermont Hospitals by Setting**

<b>Vermont Hospital</b>	<b>Inpatient Discharges NOT Originating in ED</b>		<b>Inpatient Discharges Originating in ED</b>		<b>All Inpatient Discharges</b>	
	<b>N</b>	<b>Row %</b>	<b>N</b>	<b>Row %</b>	<b>N</b>	<b>Col %</b>
Brattleboro Memorial Hospital	689	38.8%	1,087	61.2%	1,776	3.7%
Central Vermont Medical Center	714	17.8%	3,302	82.2%	4,016	8.3%
Copley Hospital	785	44.1%	997	55.9%	1,782	3.7%
Gifford Medical Center	434	32.8%	888	67.2%	1,322	2.7%
Grace Cottage Hospital	31	20.5%	120	79.5%	151	0.3%
Mt. Ascutney Hospital and Health Center	766	74.3%	265	25.7%	1,031	2.1%
North Country Hospital	556	36.2%	979	63.8%	1,535	3.2%
Northeastern Vermont Regional Hospital	432	31.4%	943	68.6%	1,375	2.9%
Northwestern Medical Center	738	31.3%	1,619	68.7%	2,357	4.9%
Porter Medical Center	508	46.0%	596	54.0%	1,104	2.3%
Rutland Regional Medical Center	1,625	24.5%	5,015	75.5%	6,640	13.8%
Southwestern Vermont Medical Center	840	24.7%	2,565	75.3%	3,405	7.1%
Springfield Hospital	454	23.9%	1,449	76.1%	1,903	4.0%
University of Vermont Medical Center	10,104	51.1%	9,665	48.9%	19,769	41.0%
Total	18,676	38.8%	29,490	61.2%	48,166	100.0%

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

**Table I-2**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016**

<u>Vermont Hospital</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1997</u>	<u>2007</u>	<u>2017</u>	<u>1997</u>	<u>2007</u>	<u>2017</u>	<u>1997</u>	<u>2007</u>	<u>2017</u>
Brattleboro Memorial Hospital	2,522	2,045	1,776	10,610	7,756	5,743	4.2	3.8	3.2
Central Vermont Medical Center	3,900	3,232	4,016	18,943	14,282	18,616	4.9	4.4	4.6
Copley Hospital	1,492	1,127	1,782	5,492	3,930	4,846	3.7	3.5	2.7
Gifford Medical Center	991	1,242	1,322	3,670	3,732	5,130	3.7	3.0	3.9
Grace Cottage Hospital	178	170	151	530	510	423	3.0	3.0	2.8
Mt. Ascutney Hospital and Health Center	522	460	1,031	2,125	1,474	9,954	4.1	3.2	9.7
North Country Hospital	1,631	1,503	1,535	4,813	4,984	5,362	3.0	3.3	3.5
Northeastern Vermont Regional Hospital	1,659	1,552	1,375	5,726	4,850	4,299	3.5	3.1	3.1
Northwestern Medical Center	2,206	2,141	2,357	7,964	7,303	7,840	3.6	3.4	3.3
Porter Medical Center	1,415	1,359	1,104	6,448	4,693	3,432	4.6	3.5	3.1
Rutland Regional Medical Center	6,664	6,467	6,640	32,570	31,521	29,673	4.9	4.9	4.5
Southwestern Vermont Medical Center	4,453	4,725	3,405	17,215	17,431	11,608	3.9	3.7	3.4
Springfield Hospital	2,403	2,279	1,903	10,001	9,750	7,878	4.2	4.3	4.1
University of Vermont Medical Center	19,101	19,772	19,769	110,652	109,929	120,578	5.8	5.6	6.1
Total	49,137	48,074	48,166	236,759	222,145	235,382	4.8	4.6	4.9

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>All Vermont Hospitals</b>									
Infectious & parasitic diseases	588	769	2,722	3,674	5,652	16,678	6.2	7.3	6.1
Neoplasms	2,879	2,664	1,992	15,991	14,019	11,491	5.6	5.3	5.8
Endocrine, nutritional, metabolic, immunity	1,417	1,689	1,800	7,306	8,106	8,991	5.2	4.8	5.0
Diseases of the blood & blood-forming organs	327	409	509	1,601	1,774	2,041	4.9	4.3	4.0
Mental disorders	2,901	2,771	3,037	22,009	20,459	31,237	7.6	7.4	10.3
Diseases of the nervous system and sense organs	939	1,043	1,449	3,833	4,366	8,048	4.1	4.2	5.6
Diseases of the circulatory system	11,031	8,333	8,055	50,536	34,694	36,163	4.6	4.2	4.5
Diseases of the respiratory system	4,752	5,123	4,882	26,349	25,044	20,860	5.5	4.9	4.3
Diseases of the digestive system	4,977	5,555	4,828	24,291	25,107	21,150	4.9	4.5	4.4
Diseases of the genitourinary system	2,308	2,307	1,851	7,639	8,549	7,159	3.3	3.7	3.9
Pregnancy, childbirth, and the puerperium	6,674	6,380	5,492	14,365	16,083	14,739	2.2	2.5	2.7
Diseases of the skin and subcutaneous tissue	573	880	880	3,297	4,031	3,913	5.8	4.6	4.4
Musculoskeletal system and connective tissue	2,570	2,957	4,215	10,590	11,727	13,035	4.1	4.0	3.1
Congenital anomalies	177	155	147	679	630	751	3.8	4.1	5.1
Conditions originating in the perinatal period	5	1	7	5	4	55	1.0	4.0	7.9
Injury & poisoning	4,712	4,852	4,688	24,937	25,144	27,161	5.3	5.2	5.8
Symptoms, signs & ill-defined conditions	2,213	2,005	1,432	19,300	16,137	11,233	8.7	8.0	7.8
Residual codes, unclassified, all Ecodes	94	181	180	357	619	677	3.8	3.4	3.8
Total	49,137	48,074	48,166	236,759	222,145	235,382	4.8	4.6	4.9

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Brattleboro Memorial Hospital</b>									
Infectious & parasitic diseases	32	24	92	277	179	445	8.7	7.5	4.8
Neoplasms	156	98	44	756	544	183	4.8	5.6	4.2
Endocrine, nutritional, metabolic, immunity	86	68	53	451	289	165	5.2	4.3	3.1
Diseases of the blood & blood-forming organs	33	14	13	116	33	39	3.5	2.4	3.0
Mental disorders	43	44	52	218	183	193	5.1	4.2	3.7
Diseases of the nervous system and sense organs	41	60	23	207	265	59	5.0	4.4	2.6
Diseases of the circulatory system	467	278	207	2,018	947	652	4.3	3.4	3.1
Diseases of the respiratory system	217	235	231	1,333	1,207	806	6.1	5.1	3.5
Diseases of the digestive system	334	237	185	1,329	1,008	641	4.0	4.3	3.5
Diseases of the genitourinary system	133	102	78	449	352	269	3.4	3.5	3.4
Pregnancy, childbirth, and the puerperium	352	395	317	753	958	791	2.1	2.4	2.5
Diseases of the skin and subcutaneous tissue	28	34	68	153	168	261	5.5	4.9	3.8
Musculoskeletal system and connective tissue	189	162	241	862	602	705	4.6	3.7	2.9
Congenital anomalies	2	1	-	27	5	-	13.5	5.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	338	241	152	1,363	817	480	4.0	3.4	3.2
Symptoms, signs & ill-defined conditions	66	41	16	264	153	45	4.0	3.7	2.8
Residual codes, unclassified, all Ecodes	5	11	4	34	46	9	6.8	4.2	2.3
Total	2,522	2,045	1,776	10,610	7,756	5,743	4.2	3.8	3.2

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b>CCS Diagnosis Groups</b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Central Vermont Medical Center</b>									
Infectious & parasitic diseases	59	46	414	278	288	2,097	4.7	6.3	5.1
Neoplasms	205	117	67	1,196	518	419	5.8	4.4	6.3
Endocrine, nutritional, metabolic, immunity	93	112	161	394	397	641	4.2	3.5	4.0
Diseases of the blood & blood-forming organs	20	25	37	74	121	83	3.7	4.8	2.2
Mental disorders	674	617	538	5,819	4,072	5,158	8.6	6.6	9.6
Diseases of the nervous system and sense organs	46	44	101	126	145	418	2.7	3.3	4.1
Diseases of the circulatory system	705	397	677	2,648	1,337	2,288	3.8	3.4	3.4
Diseases of the respiratory system	429	372	461	2,295	1,930	2,033	5.3	5.2	4.4
Diseases of the digestive system	452	414	408	2,125	2,012	1,514	4.7	4.9	3.7
Diseases of the genitourinary system	193	138	169	616	490	566	3.2	3.6	3.3
Pregnancy, childbirth, and the puerperium	479	449	330	1,006	979	840	2.1	2.2	2.5
Diseases of the skin and subcutaneous tissue	42	66	93	194	286	378	4.6	4.3	4.1
Musculoskeletal system and connective tissue	154	131	260	665	557	1,033	4.3	4.3	4.0
Congenital anomalies	2	1	1	6	6	2	3.0	6.0	2.0
Conditions originating in the perinatal period	1	1	-	1	4	-	1.0	4.0	-
Injury & poisoning	289	236	247	1,327	953	999	4.6	4.0	4.0
Symptoms, signs & ill-defined conditions	55	56	46	168	148	132	3.1	2.6	2.9
Residual codes, unclassified, all Ecodes	2	10	6	5	39	15	2.5	3.9	2.5
Total	3,900	3,232	4,016	18,943	14,282	18,616	4.9	4.4	4.6

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Copley Hospital</b>									
Infectious & parasitic diseases	17	18	23	106	78	111	6.2	4.3	4.8
Neoplasms	58	42	27	265	186	74	4.6	4.4	2.7
Endocrine, nutritional, metabolic, immunity	51	40	50	247	151	128	4.8	3.8	2.6
Diseases of the blood & blood-forming organs	5	2	10	12	6	24	2.4	3.0	2.4
Mental disorders	20	12	34	80	47	91	4.0	3.9	2.7
Diseases of the nervous system and sense organs	30	21	32	98	80	64	3.3	3.8	2.0
Diseases of the circulatory system	277	105	177	1,065	442	494	3.8	4.2	2.8
Diseases of the respiratory system	170	120	211	826	481	752	4.9	4.0	3.6
Diseases of the digestive system	200	123	189	800	460	639	4.0	3.7	3.4
Diseases of the genitourinary system	60	50	95	180	164	274	3.0	3.3	2.9
Pregnancy, childbirth, and the puerperium	292	293	191	546	589	348	1.9	2.0	1.8
Diseases of the skin and subcutaneous tissue	26	22	44	134	101	155	5.2	4.6	3.5
Musculoskeletal system and connective tissue	59	121	468	277	433	956	4.7	3.6	2.0
Congenital anomalies	1	-	-	1	-	-	1.0	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	169	131	179	678	631	603	4.0	4.8	3.4
Symptoms, signs & ill-defined conditions	55	26	39	173	77	97	3.1	3.0	2.5
Residual codes, unclassified, all Ecodes	2	1	13	4	4	36	2.0	4.0	2.8
Total	1,492	1,127	1,782	5,492	3,930	4,846	3.7	3.5	2.7

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Gifford Medical Center</b>									
Infectious & parasitic diseases	7	23	20	32	103	75	4.6	4.5	3.8
Neoplasms	57	34	33	319	105	169	5.6	3.1	5.1
Endocrine, nutritional, metabolic, immunity	29	40	54	135	120	194	4.7	3.0	3.6
Diseases of the blood & blood-forming organs	4	11	19	18	29	70	4.5	2.6	3.7
Mental disorders	16	17	46	50	71	245	3.1	4.2	5.3
Diseases of the nervous system and sense organs	21	21	38	89	72	141	4.2	3.4	3.7
Diseases of the circulatory system	183	189	246	681	533	909	3.7	2.8	3.7
Diseases of the respiratory system	132	155	194	544	518	769	4.1	3.3	4.0
Diseases of the digestive system	119	151	131	575	498	546	4.8	3.3	4.2
Diseases of the genitourinary system	54	69	83	199	197	293	3.7	2.9	3.5
Pregnancy, childbirth, and the puerperium	237	261	170	472	603	455	2.0	2.3	2.7
Diseases of the skin and subcutaneous tissue	25	54	41	101	187	184	4.0	3.5	4.5
Musculoskeletal system and connective tissue	27	107	88	92	344	387	3.4	3.2	4.4
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	67	72	118	326	235	574	4.9	3.3	4.9
Symptoms, signs & ill-defined conditions	13	35	36	37	105	107	2.8	3.0	3.0
Residual codes, unclassified, all Ecodes	-	3	5	-	12	12	-	4.0	2.4
Total	991	1,242	1,322	3,670	3,732	5,130	3.7	3.0	3.9

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
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**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Grace Cottage Hospital</b>									
Infectious & parasitic diseases	3	3	4	11	9	13	3.7	3.0	3.3
Neoplasms	1	11	1	4	34	1	4.0	3.1	1.0
Endocrine, nutritional, metabolic, immunity	14	12	11	42	38	29	3.0	3.2	2.6
Diseases of the blood & blood-forming organs	2	2	3	2	6	6	1.0	3.0	2.0
Mental disorders	16	6	2	46	23	7	2.9	3.8	3.5
Diseases of the nervous system and sense organs	4	3	4	10	6	12	2.5	2.0	3.0
Diseases of the circulatory system	44	27	15	129	72	38	2.9	2.7	2.5
Diseases of the respiratory system	38	46	42	131	136	126	3.4	3.0	3.0
Diseases of the digestive system	13	15	19	39	44	46	3.0	2.9	2.4
Diseases of the genitourinary system	7	16	10	23	42	28	3.3	2.6	2.8
Pregnancy, childbirth, and the puerperium	14	-	-	22	-	-	1.6	-	-
Diseases of the skin and subcutaneous tissue	5	2	14	17	7	48	3.4	3.5	3.4
Musculoskeletal system and connective tissue	3	9	-	9	30	-	3.0	3.3	-
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	8	10	12	25	35	30	3.1	3.5	2.5
Symptoms, signs & ill-defined conditions	5	5	8	19	15	19	3.8	3.0	2.4
Residual codes, unclassified, all Ecodes	1	3	6	1	13	20	1.0	4.3	3.3
Total	178	170	151	530	510	423	3.0	3.0	2.8

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



**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Mt. Ascutney Hospital and Health Center</b>									
Infectious & parasitic diseases	14	14	11	83	38	74	5.9	2.7	6.7
Neoplasms	25	15	16	143	61	104	5.7	4.1	6.5
Endocrine, nutritional, metabolic, immunity	24	27	17	87	70	66	3.6	2.6	3.9
Diseases of the blood & blood-forming organs	3	7	5	11	24	12	3.7	3.4	2.4
Mental disorders	5	6	6	11	20	46	2.2	3.3	7.7
Diseases of the nervous system and sense organs	13	11	11	35	26	50	2.7	2.4	4.5
Diseases of the circulatory system	124	80	77	413	233	382	3.3	2.9	5.0
Diseases of the respiratory system	82	73	79	378	258	333	4.6	3.5	4.2
Diseases of the digestive system	71	76	85	344	252	338	4.8	3.3	4.0
Diseases of the genitourinary system	43	27	20	133	81	67	3.1	3.0	3.4
Pregnancy, childbirth, and the puerperium	-	-	-	-	-	-	-	-	-
Diseases of the skin and subcutaneous tissue	12	23	18	59	76	72	4.9	3.3	4.0
Musculoskeletal system and connective tissue	29	50	10	135	189	61	4.7	3.8	6.1
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	60	36	152	247	116	1,672	4.1	3.2	11.0
Symptoms, signs & ill-defined conditions	17	15	520	46	30	6,662	2.7	2.0	12.8
Residual codes, unclassified, all Ecodes	-	-	4	-	-	15	-	-	3.8
Total	522	460	1,031	2,125	1,474	9,954	4.1	3.2	9.7

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>North Country Hospital</b>									
Infectious & parasitic diseases	19	22	14	77	132	56	4.1	6.0	4.0
Neoplasms	63	67	44	258	298	185	4.1	4.4	4.2
Endocrine, nutritional, metabolic, immunity	68	73	72	265	226	283	3.9	3.1	3.9
Diseases of the blood & blood-forming organs	22	13	14	71	36	33	3.2	2.8	2.4
Mental disorders	53	24	23	144	56	104	2.7	2.3	4.5
Diseases of the nervous system and sense organs	36	32	26	108	101	86	3.0	3.2	3.3
Diseases of the circulatory system	412	260	190	1,018	763	648	2.5	2.9	3.4
Diseases of the respiratory system	236	227	391	785	864	1,376	3.3	3.8	3.5
Diseases of the digestive system	167	209	204	611	780	893	3.7	3.7	4.4
Diseases of the genitourinary system	82	93	124	196	277	398	2.4	3.0	3.2
Pregnancy, childbirth, and the puerperium	240	227	199	512	531	480	2.1	2.3	2.4
Diseases of the skin and subcutaneous tissue	18	33	45	47	147	181	2.6	4.5	4.0
Musculoskeletal system and connective tissue	46	53	56	194	182	181	4.2	3.4	3.2
Congenital anomalies	3	1	1	5	6	4	1.7	6.0	4.0
Conditions originating in the perinatal period	-	-	2	-	-	5	-	-	2.5
Injury & poisoning	132	117	63	439	429	226	3.3	3.7	3.6
Symptoms, signs & ill-defined conditions	31	39	39	76	123	117	2.5	3.2	3.0
Residual codes, unclassified, all Ecodes	3	13	28	7	33	106	2.3	2.5	3.8
Total	1,631	1,503	1,535	4,813	4,984	5,362	3.0	3.3	3.5

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b>CCS Diagnosis Groups</b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Northeastern Vermont Regional Hospital</b>									
Infectious & parasitic diseases	26	33	26	101	117	79	3.9	3.5	3.0
Neoplasms	75	47	23	312	164	92	4.2	3.5	4.0
Endocrine, nutritional, metabolic, immunity	27	44	46	114	130	166	4.2	3.0	3.6
Diseases of the blood & blood-forming organs	7	11	14	28	28	55	4.0	2.5	3.9
Mental disorders	13	28	75	43	80	283	3.3	2.9	3.8
Diseases of the nervous system and sense organs	24	29	46	79	80	158	3.3	2.8	3.4
Diseases of the circulatory system	346	207	184	1,068	684	573	3.1	3.3	3.1
Diseases of the respiratory system	223	206	141	821	648	485	3.7	3.1	3.4
Diseases of the digestive system	184	270	183	654	846	670	3.6	3.1	3.7
Diseases of the genitourinary system	93	76	60	280	210	182	3.0	2.8	3.0
Pregnancy, childbirth, and the puerperium	304	261	229	722	516	503	2.4	2.0	2.2
Diseases of the skin and subcutaneous tissue	25	48	33	102	246	105	4.1	5.1	3.2
Musculoskeletal system and connective tissue	89	106	134	503	456	341	5.7	4.3	2.5
Congenital anomalies	2	1	-	6	4	-	3.0	4.0	-
Conditions originating in the perinatal period	1	-	-	1	-	-	1.0	-	-
Injury & poisoning	179	131	125	745	520	441	4.2	4.0	3.5
Symptoms, signs & ill-defined conditions	38	51	39	141	115	103	3.7	2.3	2.6
Residual codes, unclassified, all Ecodes	3	3	17	6	6	63	2.0	2.0	3.7
Total	1,659	1,552	1,375	5,726	4,850	4,299	3.5	3.1	3.1

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b>CCS Diagnosis Groups</b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Northwestern Medical Center</b>									
Infectious & parasitic diseases	24	23	75	121	94	256	5.0	4.1	3.4
Neoplasms	91	71	35	468	304	112	5.1	4.3	3.2
Endocrine, nutritional, metabolic, immunity	40	65	71	140	204	243	3.5	3.1	3.4
Diseases of the blood & blood-forming organs	9	17	45	36	65	134	4.0	3.8	3.0
Mental disorders	28	30	78	122	127	381	4.4	4.2	4.9
Diseases of the nervous system and sense organs	20	28	51	65	74	174	3.3	2.6	3.4
Diseases of the circulatory system	469	288	278	1,622	962	981	3.5	3.3	3.5
Diseases of the respiratory system	376	376	366	1,959	1,593	1,361	5.2	4.2	3.7
Diseases of the digestive system	279	305	260	1,120	1,113	933	4.0	3.6	3.6
Diseases of the genitourinary system	121	90	128	350	354	550	2.9	3.9	4.3
Pregnancy, childbirth, and the puerperium	445	473	362	760	1,002	785	1.7	2.1	2.2
Diseases of the skin and subcutaneous tissue	24	40	57	97	150	206	4.0	3.8	3.6
Musculoskeletal system and connective tissue	87	144	310	347	509	896	4.0	3.5	2.9
Congenital anomalies	2	1	1	6	1	3	3.0	1.0	3.0
Conditions originating in the perinatal period	-	-	2	-	-	5	-	-	2.5
Injury & poisoning	154	163	196	619	670	690	4.0	4.1	3.5
Symptoms, signs & ill-defined conditions	37	26	38	132	77	114	3.6	3.0	3.0
Residual codes, unclassified, all Ecodes	-	1	4	-	4	16	-	4.0	4.0
Total	2,206	2,141	2,357	7,964	7,303	7,840	3.6	3.4	3.3

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Porter Medical Center</b>									
Infectious & parasitic diseases	4	17	80	25	78	335	6.3	4.6	4.2
Neoplasms	76	64	16	426	268	67	5.6	4.2	4.2
Endocrine, nutritional, metabolic, immunity	35	48	21	176	199	69	5.0	4.1	3.3
Diseases of the blood & blood-forming organs	7	9	3	31	46	10	4.4	5.1	3.3
Mental disorders	13	22	13	71	64	46	5.5	2.9	3.5
Diseases of the nervous system and sense organs	15	17	21	60	53	94	4.0	3.1	4.5
Diseases of the circulatory system	285	125	95	1,202	521	321	4.2	4.2	3.4
Diseases of the respiratory system	207	183	139	1,222	675	506	5.9	3.7	3.6
Diseases of the digestive system	173	193	103	1,082	847	400	6.3	4.4	3.9
Diseases of the genitourinary system	52	77	25	171	249	70	3.3	3.2	2.8
Pregnancy, childbirth, and the puerperium	326	299	331	590	582	788	1.8	1.9	2.4
Diseases of the skin and subcutaneous tissue	41	39	23	284	199	87	6.9	5.1	3.8
Musculoskeletal system and connective tissue	60	127	149	413	404	314	6.9	3.2	2.1
Congenital anomalies	2	2	-	11	8	-	5.5	4.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	92	117	57	534	442	235	5.8	3.8	4.1
Symptoms, signs & ill-defined conditions	27	17	23	150	52	70	5.6	3.1	3.0
Residual codes, unclassified, all Ecodes	-	3	5	-	6	20	-	2.0	4.0
Total	1,415	1,359	1,104	6,448	4,693	3,432	4.6	3.5	3.1

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Rutland Regional Medical Center</b>									
Infectious & parasitic diseases	85	124	486	406	825	3,057	4.8	6.7	6.3
Neoplasms	357	302	224	2,121	1,543	1,266	5.9	5.1	5.7
Endocrine, nutritional, metabolic, immunity	243	222	240	1,125	1,034	1,005	4.6	4.7	4.2
Diseases of the blood & blood-forming organs	55	55	68	326	189	175	5.9	3.4	2.6
Mental disorders	376	582	881	2,198	3,651	8,048	5.8	6.3	9.1
Diseases of the nervous system and sense organs	137	123	161	641	578	539	4.7	4.7	3.3
Diseases of the circulatory system	1,347	948	945	5,804	3,899	3,232	4.3	4.1	3.4
Diseases of the respiratory system	744	875	576	4,186	4,985	2,515	5.6	5.7	4.4
Diseases of the digestive system	703	730	667	3,231	3,435	2,645	4.6	4.7	4.0
Diseases of the genitourinary system	371	379	363	1,107	1,419	1,344	3.0	3.7	3.7
Pregnancy, childbirth, and the puerperium	680	561	364	1,161	1,329	892	1.7	2.4	2.5
Diseases of the skin and subcutaneous tissue	66	133	132	332	679	514	5.0	5.1	3.9
Musculoskeletal system and connective tissue	405	453	900	1,749	1,763	2,113	4.3	3.9	2.3
Congenital anomalies	10	3	6	26	7	14	2.6	2.3	2.3
Conditions originating in the perinatal period	-	-	1	-	-	1	-	-	1.0
Injury & poisoning	611	558	529	3,528	2,656	2,031	5.8	4.8	3.8
Symptoms, signs & ill-defined conditions	450	387	85	4,554	3,399	237	10.1	8.8	2.8
Residual codes, unclassified, all Ecodes	24	32	12	75	130	45	3.1	4.1	3.8
Total	6,664	6,467	6,640	32,570	31,521	29,673	4.9	4.9	4.5

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b><u>CCS Diagnosis Groups</u></b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Southwestern Vermont Medical Center</b>									
Infectious & parasitic diseases	73	117	341	399	574	1,441	5.5	4.9	4.2
Neoplasms	214	174	65	1,190	829	295	5.6	4.8	4.5
Endocrine, nutritional, metabolic, immunity	170	185	124	666	588	452	3.9	3.2	3.6
Diseases of the blood & blood-forming organs	37	40	33	146	112	109	3.9	2.8	3.3
Mental disorders	154	74	81	726	206	330	4.7	2.8	4.1
Diseases of the nervous system and sense organs	94	113	66	278	330	253	3.0	2.9	3.8
Diseases of the circulatory system	1,058	917	445	3,828	3,039	1,495	3.6	3.3	3.4
Diseases of the respiratory system	535	720	504	2,668	3,229	1,888	5.0	4.5	3.7
Diseases of the digestive system	502	695	414	2,308	3,111	1,428	4.6	4.5	3.4
Diseases of the genitourinary system	201	228	130	652	791	413	3.2	3.5	3.2
Pregnancy, childbirth, and the puerperium	441	511	479	911	1,237	1,172	2.1	2.4	2.4
Diseases of the skin and subcutaneous tissue	58	113	89	286	452	284	4.9	4.0	3.2
Musculoskeletal system and connective tissue	273	260	245	1,030	837	708	3.8	3.2	2.9
Congenital anomalies	7	5	2	16	9	7	2.3	1.8	3.5
Conditions originating in the perinatal period	3	-	-	3	-	-	1.0	-	-
Injury & poisoning	520	423	333	1,749	1,691	1,187	3.4	4.0	3.6
Symptoms, signs & ill-defined conditions	111	142	46	344	373	121	3.1	2.6	2.6
Residual codes, unclassified, all Ecodes	2	8	8	15	23	25	7.5	2.9	3.1
Total	4,453	4,725	3,405	17,215	17,431	11,608	3.9	3.7	3.4

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

**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Summary Statistics for Vermont Hospitals: Comparison of 1997, 2007 and 2017**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b>CCS Diagnosis Groups</b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>Springfield Hospital</b>									
Infectious & parasitic diseases	33	17	52	163	76	240	4.9	4.5	4.6
Neoplasms	91	57	26	372	239	101	4.1	4.2	3.9
Endocrine, nutritional, metabolic, immunity	47	42	62	179	254	220	3.8	6.0	3.5
Diseases of the blood & blood-forming organs	7	23	11	30	94	23	4.3	4.1	2.1
Mental disorders	503	408	356	2,843	3,385	2,676	5.7	8.3	7.5
Diseases of the nervous system and sense organs	29	36	47	76	90	126	2.6	2.5	2.7
Diseases of the circulatory system	546	345	261	1,923	901	827	3.5	2.6	3.2
Diseases of the respiratory system	229	339	329	1,079	1,315	1,311	4.7	3.9	4.0
Diseases of the digestive system	245	258	197	1,355	941	708	5.5	3.6	3.6
Diseases of the genitourinary system	125	102	84	333	309	312	2.7	3.0	3.7
Pregnancy, childbirth, and the puerperium	223	223	161	454	524	350	2.0	2.3	2.2
Diseases of the skin and subcutaneous tissue	34	54	66	150	226	266	4.4	4.2	4.0
Musculoskeletal system and connective tissue	63	113	93	234	450	234	3.7	4.0	2.5
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	178	167	133	678	680	413	3.8	4.1	3.1
Symptoms, signs & ill-defined conditions	43	85	15	119	223	47	2.8	2.6	3.1
Residual codes, unclassified, all Ecodes	7	10	10	13	43	24	1.9	4.3	2.4
Total	2,403	2,279	1,903	10,001	9,750	7,878	4.2	4.3	4.1

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



**Table I-3**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
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**Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<b>CCS Diagnosis Groups</b>	<b>Discharges</b>			<b>Patient Days</b>			<b>Average Length of Stay</b>		
	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>	<b><u>1997</u></b>	<b><u>2007</u></b>	<b><u>2017</u></b>
<b>University of Vermont Medical Center</b>									
Infectious & parasitic diseases	192	288	1,084	1,595	3,061	8,399	8.3	10.6	7.7
Neoplasms	1,410	1,565	1,371	8,161	8,926	8,423	5.8	5.7	6.1
Endocrine, nutritional, metabolic, immunity	490	711	818	3,285	4,406	5,330	6.7	6.2	6.5
Diseases of the blood & blood-forming organs	116	180	234	700	985	1,268	6.0	5.5	5.4
Mental disorders	987	901	852	9,638	8,474	13,629	9.8	9.4	16.0
Diseases of the nervous system and sense organs	429	505	822	1,961	2,466	5,874	4.6	4.9	7.1
Diseases of the circulatory system	4,768	4,167	4,258	27,117	20,361	23,323	5.7	4.9	5.5
Diseases of the respiratory system	1,134	1,196	1,218	8,122	7,205	6,599	7.2	6.0	5.4
Diseases of the digestive system	1,535	1,879	1,783	8,718	9,760	9,749	5.7	5.2	5.5
Diseases of the genitourinary system	773	860	482	2,950	3,614	2,393	3.8	4.2	5.0
Pregnancy, childbirth, and the puerperium	2,641	2,427	2,359	6,456	7,233	7,335	2.4	3.0	3.1
Diseases of the skin and subcutaneous tissue	169	219	157	1,341	1,107	1,172	7.9	5.1	7.5
Musculoskeletal system and connective tissue	1,086	1,121	1,261	4,080	4,971	5,106	3.8	4.4	4.0
Congenital anomalies	146	140	136	575	584	721	3.9	4.2	5.3
Conditions originating in the perinatal period	-	-	2	-	-	44	-	-	22.0
Injury & poisoning	1,915	2,450	2,392	12,679	15,269	17,580	6.6	6.2	7.3
Symptoms, signs & ill-defined conditions	1,265	1,080	482	13,077	11,247	3,362	10.3	10.4	7.0
Residual codes, unclassified, all Ecodes	45	83	58	197	260	271	4.4	3.1	4.7
Total	19,101	19,772	19,769	110,652	109,929	120,578	5.8	5.6	6.1

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

**Table I-4**  
**2017 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>Discharges 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	1	476	445	163	159	154	378	922	854	1,776
Central Vermont Medical Center	19	891	1,013	430	348	341	974	1,923	2,093	4,016
Copley Hospital	3	335	428	207	212	195	402	766	1,016	1,782
Gifford Medical Center	6	261	248	119	148	122	418	515	807	1,322
Grace Cottage Hospital	-	6	29	12	16	13	75	35	116	151
Mt. Ascutney Hospital and Health Center	-	58	232	96	134	160	351	290	741	1,031
North Country Hospital	18	280	309	168	162	172	426	607	928	1,535
Northeastern Vermont Regional Hospital	24	373	344	120	133	113	268	741	634	1,375
Northwestern Medical Center	31	589	564	200	242	181	550	1,184	1,173	2,357
Porter Medical Center	2	386	207	98	88	73	250	595	509	1,104
Rutland Regional Medical Center	108	1,301	1,902	696	710	580	1,343	3,311	3,329	6,640
Southwestern Vermont Medical Center	19	730	797	304	328	332	895	1,546	1,859	3,405
Springfield Hospital	2	491	517	140	150	163	440	1,010	893	1,903
University of Vermont Medical Center	828	5,133	5,482	2,014	1,844	1,630	2,838	11,443	8,326	19,769
Total	1,061	11,310	12,517	4,767	4,674	4,229	9,608	24,888	23,278	48,166

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

**Table I-4**  
**2017 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	1	1,304	1,506	505	504	528	1,395	2,811	2,932	5,743
Central Vermont Medical Center	46	3,876	5,112	2,207	1,785	1,533	4,057	9,034	9,582	18,616
Copley Hospital	6	688	1,058	468	574	579	1,473	1,752	3,094	4,846
Gifford Medical Center	16	785	960	490	668	445	1,766	1,761	3,369	5,130
Grace Cottage Hospital	-	21	72	32	47	41	210	93	330	423
Mt. Ascutney Hospital and Health Center	-	547	2,761	881	1,458	1,496	2,811	3,308	6,646	9,954
North Country Hospital	36	707	1,123	654	558	644	1,640	1,866	3,496	5,362
Northeastern Vermont Regional Hospital	44	881	1,086	384	453	369	1,082	2,011	2,288	4,299
Northwestern Medical Center	71	1,507	1,983	712	847	630	2,090	3,561	4,279	7,840
Porter Medical Center	8	948	564	319	255	251	1,087	1,520	1,912	3,432
Rutland Regional Medical Center	198	5,846	8,818	3,085	3,124	2,451	6,151	14,862	14,811	29,673
Southwestern Vermont Medical Center	38	1,963	2,865	1,072	1,220	1,158	3,292	4,866	6,742	11,608
Springfield Hospital	7	2,051	2,391	514	663	572	1,680	4,449	3,429	7,878
University of Vermont Medical Center	3,927	27,891	37,370	13,565	10,900	10,837	16,088	69,188	51,390	120,578
Total	4,398	49,015	67,669	24,888	23,056	21,534	44,822	121,082	114,300	235,382

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

**Table I-4**  
**2017 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>Average Length of Stay 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	1.0	2.7	3.4	3.1	3.2	3.4	3.7	3.0	3.4	3.2
Central Vermont Medical Center	2.4	4.4	5.0	5.1	5.1	4.5	4.2	4.7	4.6	4.6
Copley Hospital	2.0	2.1	2.5	2.3	2.7	3.0	3.7	2.3	3.0	2.7
Gifford Medical Center	2.7	3.0	3.9	4.1	4.5	3.6	4.2	3.4	4.2	3.9
Grace Cottage Hospital	0.0	3.5	2.5	2.7	2.9	3.2	2.8	2.7	2.8	2.8
Mt. Ascutney Hospital and Health Center	0.0	9.4	11.9	9.2	10.9	9.4	8.0	11.4	9.0	9.7
North Country Hospital	2.0	2.5	3.6	3.9	3.4	3.7	3.8	3.1	3.8	3.5
Northeastern Vermont Regional Hospital	1.8	2.4	3.2	3.2	3.4	3.3	4.0	2.7	3.6	3.1
Northwestern Medical Center	2.3	2.6	3.5	3.6	3.5	3.5	3.8	3.0	3.6	3.3
Porter Medical Center	4.0	2.5	2.7	3.3	2.9	3.4	4.3	2.6	3.8	3.1
Rutland Regional Medical Center	1.8	4.5	4.6	4.4	4.4	4.2	4.6	4.5	4.4	4.5
Southwestern Vermont Medical Center	2.0	2.7	3.6	3.5	3.7	3.5	3.7	3.1	3.6	3.4
Springfield Hospital	3.5	4.2	4.6	3.7	4.4	3.5	3.8	4.4	3.8	4.1
University of Vermont Medical Center	4.7	5.4	6.8	6.7	5.9	6.6	5.7	6.0	6.2	6.1
Total	4.1	4.3	5.4	5.2	4.9	5.1	4.7	4.9	4.9	4.9

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

**Table I-5  
2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents  
Vermont Hospitals by Principal Payer**

Vermont Hospital	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		
Brattleboro Memorial Hospital	921	51.9%	344	19.4%	5	0.3%	6	0.3%	477	26.9%	18	1.0%	5	0.3%	1,776	3.7%
Central Vermont Medical Center	2,384	59.4%	696	17.3%	56	1.4%	15	0.4%	819	20.4%	46	1.1%	-	0.0%	4,016	8.3%
Copley Hospital	983	55.2%	246	13.8%	22	1.2%	8	0.4%	501	28.1%	22	1.2%	-	0.0%	1,782	3.7%
Gifford Medical Center	843	63.8%	193	14.6%	10	0.8%	3	0.2%	254	19.2%	19	1.4%	-	0.0%	1,322	2.7%
Grace Cottage Hospital	115	76.2%	13	8.6%	-	0.0%	-	0.0%	23	15.2%	-	0.0%	-	0.0%	151	0.3%
Mt. Ascutney Hospital and Health Center	806	78.2%	64	6.2%	-	0.0%	7	0.7%	147	14.3%	7	0.7%	-	0.0%	1,031	2.1%
North Country Hospital	1,045	68.1%	271	17.7%	9	0.6%	3	0.2%	200	13.0%	7	0.5%	-	0.0%	1,535	3.2%
Northeastern Vermont Regional Hospital	687	50.0%	323	23.5%	12	0.9%	2	0.1%	333	24.2%	18	1.3%	-	0.0%	1,375	2.9%
Northwestern Medical Center	1,237	52.5%	458	19.4%	15	0.6%	22	0.9%	563	23.9%	43	1.8%	19	0.8%	2,357	4.9%
Porter Medical Center	523	47.4%	132	12.0%	5	0.5%	-	0.0%	421	38.1%	23	2.1%	-	0.0%	1,104	2.3%
Rutland Regional Medical Center	4,021	60.6%	1,219	18.4%	38	0.6%	27	0.4%	1,246	18.8%	89	1.3%	-	0.0%	6,640	13.8%
Southwestern Vermont Medical Center	1,898	55.7%	494	14.5%	18	0.5%	5	0.1%	956	28.1%	34	1.0%	-	0.0%	3,405	7.1%
Springfield Hospital	1,059	55.6%	399	21.0%	-	0.0%	-	0.0%	382	20.1%	63	3.3%	-	0.0%	1,903	4.0%
University of Vermont Medical Center	8,099	41.0%	3,102	15.7%	257	1.3%	98	0.5%	7,630	38.6%	225	1.1%	358	1.8%	19,769	41.0%
Total	24,621	51.1%	7,954	16.5%	447	0.9%	196	0.4%	13,952	29.0%	614	1.3%	382	0.8%	48,166	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**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Clinical Classifications Software (CCS) High Level Diagnosis Groups by Principal Payer**

CCS Diagnosis Groups	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		
Infectious & parasitic diseases	1,782	65.5%	307	11.3%	23	0.8%	2	0.1%	553	20.3%	21	0.8%	34	1.2%	2,722	5.7%
Neoplasms	970	48.7%	185	9.3%	25	1.3%	-	0.0%	800	40.2%	11	0.6%	1	0.1%	1,992	4.1%
Endocrine, nutritional, metabolic, immunity	878	48.8%	368	20.4%	11	0.6%	3	0.2%	481	26.7%	26	1.4%	33	1.8%	1,800	3.7%
Diseases of the blood & blood-forming organs	301	59.1%	55	10.8%	5	1.0%	1	0.2%	134	26.3%	11	2.2%	2	0.4%	509	1.1%
Mental disorders	996	32.8%	1,238	40.8%	16	0.5%	2	0.1%	680	22.4%	102	3.4%	3	0.1%	3,037	6.3%
Diseases of the nervous system and sense organs	754	52.0%	229	15.8%	6	0.4%	7	0.5%	423	29.2%	18	1.2%	12	0.8%	1,449	3.0%
Diseases of the circulatory system	5,459	67.8%	534	6.6%	70	0.9%	10	0.1%	1,822	22.6%	71	0.9%	89	1.1%	8,055	16.7%
Diseases of the respiratory system	3,325	68.1%	662	13.6%	35	0.7%	5	0.1%	751	15.4%	62	1.3%	42	0.9%	4,882	10.1%
Diseases of the digestive system	2,480	51.4%	738	15.3%	49	1.0%	4	0.1%	1,422	29.5%	98	2.0%	37	0.8%	4,828	10.0%
Diseases of the genitourinary system	1,251	67.6%	192	10.4%	17	0.9%	1	0.1%	351	19.0%	27	1.5%	12	0.6%	1,851	3.8%
Pregnancy, childbirth, and the puerperium	56	1.0%	2,174	39.6%	74	1.3%	1	0.0%	3,127	56.9%	55	1.0%	5	0.1%	5,492	11.4%
Diseases of the skin and subcutaneous tissue	474	53.9%	198	22.5%	5	0.6%	7	0.8%	179	20.3%	11	1.3%	6	0.7%	880	1.8%
Musculoskeletal system and connective tissue	2,273	53.9%	348	8.3%	51	1.2%	66	1.6%	1,458	34.6%	10	0.2%	9	0.2%	4,215	8.8%
Congenital anomalies	25	17.0%	38	25.9%	5	3.4%	-	0.0%	73	49.7%	5	3.4%	1	0.7%	147	0.3%
Conditions originating in the perinatal period	-	0.0%	3	42.9%	-	0.0%	-	0.0%	4	57.1%	-	0.0%	-	0.0%	7	0.0%
Injury & poisoning	2,528	53.9%	524	11.2%	37	0.8%	81	1.7%	1,364	29.1%	71	1.5%	83	1.8%	4,688	9.7%
Symptoms, signs & ill-defined conditions	952	66.5%	134	9.4%	12	0.8%	6	0.4%	305	21.3%	11	0.8%	12	0.8%	1,432	3.0%
Residual codes, unclassified, all Ecodes	117	65.0%	27	15.0%	6	3.3%	-	0.0%	25	13.9%	4	2.2%	1	0.6%	180	0.4%
<b>Total</b>	<b>24,621</b>	<b>51.1%</b>	<b>7,954</b>	<b>16.5%</b>	<b>447</b>	<b>0.9%</b>	<b>196</b>	<b>0.4%</b>	<b>13,952</b>	<b>29.0%</b>	<b>614</b>	<b>1.3%</b>	<b>382</b>	<b>0.8%</b>	<b>48,166</b>	<b>100.0%</b>

"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**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Percent Readmitted within 30 days by Vermont Hospital and State of Residence**  
**2013 - 2017**

Vermont Hospital	2013				2014				2015				2016				2017			
	VT resident discharges		Non-Vermont discharges		VT resident discharges		Non-Vermont discharges		VT resident discharges		Non-Vermont discharges		VT resident discharges		Non-Vermont discharges		VT resident discharges		Non-Vermont 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	1,291	5.7%	302	6.0%	1,245	5.3%	311	5.5%	1,231	5.4%	318	5.0%	1,344	6.8%	262	3.1%	1,444	6.0%	332	5.1%
Central Vermont Medical Center	3,284	9.5%	65	3.1%	3,461	10.5%	66	1.5%	3,846	11.3%	83	2.4%	4,128	11.8%	73	2.7%	3,936	11.9%	80	2.5%
Copley Hospital	1,353	7.2%	60	3.3%	1,528	8.0%	70	5.7%	1,629	10.1%	52	0.0%	1,686	8.0%	74	2.7%	1,710	7.3%	72	5.6%
Gifford Medical Center	1,055	8.5%	13	7.7%	1,208	8.1%	14	0.0%	1,425	9.9%	17	0.0%	1,438	10.6%	19	0.0%	1,302	9.1%	20	0.0%
Grace Cottage Hospital	158	5.7%	8	12.5%	152	3.9%	7	0.0%	117	2.6%	8	0.0%	111	2.7%	8	0.0%	140	6.4%	11	0.0%
Mt. Ascutney Hospital and Health Center	290	6.2%	70	5.7%	673	7.1%	260	5.8%	767	8.2%	286	5.2%	698	6.7%	269	7.8%	777	6.9%	254	5.5%
North Country Hospital	1,265	8.2%	39	17.9%	1,281	9.9%	31	6.5%	1,588	9.1%	41	9.8%	1,559	9.7%	41	4.9%	1,488	9.3%	47	6.4%
Northeastern Vermont Regional Hospital	1,238	8.2%	57	3.5%	1,113	5.5%	48	6.3%	1,200	7.1%	54	3.7%	1,338	7.4%	39	5.1%	1,321	7.1%	54	9.3%
Northwestern Medical Center	2,266	7.8%	23	0.0%	2,363	9.2%	34	5.9%	2,558	9.9%	32	0.0%	2,587	9.1%	20	0.0%	2,327	8.2%	30	3.3%
Porter Medical Center	1,487	7.2%	94	5.3%	1,456	8.5%	95	1.1%	1,372	8.1%	115	1.7%	1,297	6.0%	105	1.0%	1,002	3.6%	102	2.9%
Rutland Regional Medical Center	5,730	11.6%	471	5.9%	5,281	10.7%	413	6.1%	5,663	11.1%	442	8.1%	5,895	11.5%	470	9.6%	6,162	11.3%	478	6.7%
Southwestern Vermont Medical Center	2,868	11.0%	1,036	7.7%	2,473	10.4%	967	8.0%	2,511	10.6%	910	7.7%	2,354	11.3%	965	9.5%	2,311	10.3%	1,094	7.2%
Springfield Hospital	1,598	8.2%	267	3.7%	1,618	9.3%	276	4.0%	1,634	10.8%	290	5.9%	1,499	10.4%	301	2.7%	1,581	8.7%	322	5.3%
University of Vermont Medical Center	15,570	10.9%	3,528	8.7%	14,397	9.9%	3,320	7.8%	15,244	10.4%	3,490	8.0%	15,842	11.0%	3,578	8.6%	16,168	10.7%	3,601	8.7%
<b>Total</b>	<b>39,453</b>	<b>9.9%</b>	<b>6,033</b>	<b>7.7%</b>	<b>38,249</b>	<b>9.5%</b>	<b>5,912</b>	<b>7.1%</b>	<b>40,785</b>	<b>10.1%</b>	<b>6,138</b>	<b>7.2%</b>	<b>41,776</b>	<b>10.3%</b>	<b>6,224</b>	<b>7.9%</b>	<b>41,669</b>	<b>9.9%</b>	<b>6,497</b>	<b>7.5%</b>

	Readmissions			Readmissions			Readmissions			Readmissions			Readmissions		
	Total N	N	Pct	Total N	N	Pct	Total N	N	Pct	Total N	N	Pct	Total N	N	Pct
<b>Total for All Discharges</b>	45,486	4,367	9.6%	44,161	4,044	9.2%	46,923	4,568	9.7%	48,000	4,805	10.0%	48,166	4,617	9.6%

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**  
**2017 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents**  
**Median Charges for Readmissions within 30 days by Vermont Hospital and State of Residence**  
**2013 - 2017**

Vermont Hospital	2013				2014				2015				2016				2017			
	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	73	\$ 11,073	18	\$ 9,636	66	\$ 12,636	17	\$ 13,454	66	\$ 12,118	16	\$ 14,893	92	\$ 15,811	8	\$ 17,963	87	\$ 14,481	17	\$ 9,727
Central Vermont Medical Center	311	\$ 13,309	2	\$ 12,363	365	\$ 15,727	1	\$ 18,346	433	\$ 16,389	2	\$ 16,759	486	\$ 15,807	2	\$ 14,777	467	\$ 16,757	2	\$ 15,760
Copley Hospital	97	\$ 6,278	2	\$ 12,531	122	\$ 6,273	4	\$ 5,305	165	\$ 7,066	-	-	135	\$ 7,750	2	\$ 9,381	125	\$ 8,035	4	\$ 9,123
Gifford Medical Center	90	\$ 11,542	1	\$ 5,464	98	\$ 13,796	-	-	141	\$ 14,273	-	-	152	\$ 14,841	-	-	119	\$ 17,124	-	-
Grace Cottage Hospital	9	\$ 5,624	1	\$ 1,485	6	\$ 4,406	-	-	3	\$ 12,156	-	-	3	\$ 7,187	-	-	9	\$ 9,980	-	-
Mt. Ascutney Hospital and Health Center	18	\$ 10,429	4	\$ 4,471	48	\$ 11,052	15	\$ 8,682	63	\$ 14,504	15	\$ 9,591	47	\$ 12,564	21	\$ 19,812	54	\$ 13,899	14	\$ 11,465
North Country Hospital	104	\$ 15,744	7	\$ 20,355	127	\$ 15,045	2	\$ 8,444	144	\$ 17,150	4	\$ 18,122	151	\$ 19,348	2	\$ 14,342	139	\$ 21,860	3	\$ 22,981
Northeastern Vermont Regional Hospital	102	\$ 14,568	2	\$ 17,546	61	\$ 13,497	3	\$ 78,383	85	\$ 15,342	2	\$ 29,749	99	\$ 15,523	2	\$ 28,636	94	\$ 17,383	5	\$ 36,089
Northwestern Medical Center	177	\$ 12,799	-	-	218	\$ 13,050	2	\$ 18,937	252	\$ 12,714	-	-	235	\$ 10,485	-	-	191	\$ 10,998	1	\$ 24,297
Porter Medical Center	107	\$ 13,282	5	\$ 5,044	124	\$ 12,149	1	\$ 2,045	111	\$ 15,799	2	\$ 2,885	78	\$ 14,930	1	\$ 6,425	36	\$ 18,021	3	\$ 37,944
Rutland Regional Medical Center	664	\$ 16,128	28	\$ 24,346	563	\$ 18,634	25	\$ 25,537	631	\$ 18,511	36	\$ 17,979	678	\$ 19,979	45	\$ 15,951	695	\$ 18,701	32	\$ 23,855
Southwestern Vermont Medical Center	315	\$ 12,431	80	\$ 12,659	257	\$ 13,511	77	\$ 13,169	265	\$ 14,513	70	\$ 12,480	267	\$ 13,646	92	\$ 14,421	238	\$ 14,326	79	\$ 15,327
Springfield Hospital	131	\$ 10,433	10	\$ 12,316	150	\$ 11,529	11	\$ 15,277	176	\$ 13,917	17	\$ 15,869	156	\$ 15,069	8	\$ 12,355	137	\$ 11,886	17	\$ 13,541
University of Vermont Medical Center	1,703	\$ 18,879	306	\$ 20,762	1,422	\$ 21,683	259	\$ 23,817	1,589	\$ 20,533	280	\$ 24,765	1,735	\$ 21,664	308	\$ 28,654	1,736	\$ 22,953	313	\$ 29,854
<b>Total</b>	<b>3,901</b>	<b>\$ 15,082</b>	<b>466</b>	<b>\$ 17,170</b>	<b>3,627</b>	<b>\$ 16,404</b>	<b>417</b>	<b>\$ 19,051</b>	<b>4,124</b>	<b>\$ 16,845</b>	<b>444</b>	<b>\$ 18,487</b>	<b>4,314</b>	<b>\$ 17,171</b>	<b>491</b>	<b>\$ 19,493</b>	<b>4,127</b>	<b>\$ 18,202</b>	<b>490</b>	<b>\$ 22,981</b>
<b>Total Readmissions</b>	<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>		<b>Total N</b>	
	4,367		4,044		4,568		4,805		4,617											
	\$15,229		\$16,774		\$16,990		\$17,392		\$17,003											

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**  
**2017 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	1,444	\$ 25,117,493	332	\$ 5,833,439	1,776	\$ 30,950,932
Central Vermont Medical Center	3,936	\$ 83,707,666	80	\$ 1,415,528	4,016	\$ 85,123,194
Copley Hospital	1,710	\$ 31,194,980	72	\$ 1,558,208	1,782	\$ 32,753,188
Gifford Medical Center	1,302	\$ 28,400,583	20	\$ 420,458	1,322	\$ 28,821,041
Grace Cottage Hospital	140	\$ 1,434,136	11	\$ 86,028	151	\$ 1,520,164
Mt. Ascutney Hospital and Health Center	777	\$ 18,496,494	254	\$ 6,636,434	1,031	\$ 25,132,928
North Country Hospital	1,488	\$ 30,712,788	47	\$ 1,057,727	1,535	\$ 31,770,515
Northeastern Vermont Regional Hospital	1,321	\$ 35,978,141	54	\$ 1,742,597	1,375	\$ 37,720,739
Northwestern Medical Center	2,327	\$ 36,585,882	30	\$ 394,778	2,357	\$ 36,980,659
Porter Medical Center	1,002	\$ 25,478,400	102	\$ 2,329,877	1,104	\$ 27,808,277
Rutland Regional Medical Center	6,162	\$ 165,383,670	478	\$ 12,228,186	6,640	\$ 177,611,856
Southwestern Vermont Medical Center	2,311	\$ 42,437,787	1,094	\$ 21,052,764	3,405	\$ 63,490,550
Springfield Hospital	1,581	\$ 24,967,037	322	\$ 5,354,348	1,903	\$ 30,321,385
University of Vermont Medical Center	16,168	\$ 650,963,928	3,601	\$ 207,016,375	19,769	\$ 857,980,304
<b>Total for 2017</b>	<b>41,669</b>	<b>\$ 1,200,858,983</b>	<b>6,497</b>	<b>\$ 267,126,748</b>	<b>48,166</b>	<b>\$ 1,467,985,731</b>
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
Total for 2014	38,250	\$ 1,003,791,680	5,912	\$ 221,690,325	44,162	\$ 1,225,482,004
Total for 2013	39,453	\$ 935,887,527	6,033	\$ 201,157,783	45,486	\$ 1,137,045,311
Total for 2012	40,188	\$ 886,530,118	6,418	\$ 189,510,572	46,606	\$ 1,076,040,690

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**  
**2017 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Setting**

<b>Vermont Hospital</b>	<b>Inpatient Discharges Originating in ED</b>		<b>ED Visits Not Admitted</b>		<b>All ED Visits</b>	
	<b>N</b>	<b>Row%</b>	<b>N</b>	<b>Row%</b>	<b>N</b>	<b>Col%</b>
Brattleboro Memorial Hospital	1,087	8.0%	12,576	92.0%	13,663	5.2%
Central Vermont Medical Center	3,302	13.4%	21,325	86.6%	24,627	9.4%
Copley Hospital	997	8.0%	11,496	92.0%	12,493	4.8%
Gifford Medical Center	888	13.0%	5,962	87.0%	6,850	2.6%
Grace Cottage Hospital	120	4.1%	2,807	95.9%	2,927	1.1%
Mt. Ascutney Hospital and Health Center	265	5.6%	4,506	94.4%	4,771	1.8%
North Country Hospital	979	6.3%	14,534	93.7%	15,513	5.9%
Northeastern Vermont Regional Hospital	943	6.8%	12,980	93.2%	13,923	5.3%
Northwestern Medical Center	1,619	6.9%	21,954	93.1%	23,573	9.0%
Porter Medical Center	596	4.1%	13,930	95.9%	14,526	5.6%
Rutland Regional Medical Center	5,015	15.3%	27,868	84.7%	32,883	12.6%
Southwestern Vermont Medical Center	2,565	11.2%	20,297	88.8%	22,862	8.8%
Springfield Hospital	1,449	9.0%	14,629	91.0%	16,078	6.2%
University of Vermont Medical Center	9,665	17.1%	46,860	82.9%	56,525	21.6%
Total	29,490	11.3%	231,724	88.7%	261,214	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**  
**2017 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Setting: Five-year Comparison**

<b>Inpatient Discharges Originating in ED</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Brattleboro Memorial Hospital	855	823	811	930	1,087
Central Vermont Medical Center	2,536	2,813	3,218	3,478	3,302
Copley Hospital	316	322	885	962	997
Gifford Medical Center	624	755	950	970	888
Grace Cottage Hospital	27	10	104	101	120
Mt. Ascutney Hospital and Health Center	175	109	275	244	265
North Country Hospital	288	291	1,017	1,032	979
Northeastern Vermont Regional Hospital	298	291	496	918	943
Northwestern Medical Center	1,434	1,511	1,735	1,776	1,619
Porter Medical Center	948	944	888	803	596
Rutland Regional Medical Center	4,471	4,149	4,471	4,750	5,015
Southwestern Vermont Medical Center	3,016	2,674	2,620	2,586	2,565
Springfield Hospital	463	379	1,421	1,324	1,449
University of Vermont Medical Center	9,397	8,171	8,766	9,471	9,665
Total	24,848	23,242	27,657	29,345	29,490
<b>ED Visits Not Admitted</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Brattleboro Memorial Hospital	11,822	12,796	12,488	12,696	12,576
Central Vermont Medical Center	25,362	22,574	21,723	21,788	21,325
Copley Hospital	13,040	12,966	12,185	12,545	11,496
Gifford Medical Center	6,311	6,464	6,611	6,559	5,962
Grace Cottage Hospital	2,792	2,612	2,731	2,817	2,807
Mt. Ascutney Hospital and Health Center	5,261	4,832	4,387	4,346	4,506
North Country Hospital	14,601	14,903	15,665	14,473	14,534
Northeastern Vermont Regional Hospital	13,572	12,534	13,110	12,975	12,980
Northwestern Medical Center	24,605	23,202	23,583	23,083	21,954
Porter Medical Center	13,783	14,039	14,522	13,424	13,930
Rutland Regional Medical Center	28,729	28,975	28,923	28,647	27,868
Southwestern Vermont Medical Center	19,771	20,698	20,700	20,519	20,297
Springfield Hospital	16,141	15,564	15,611	15,426	14,629
University of Vermont Medical Center	46,776	47,683	48,117	47,168	46,860
Total	242,566	239,842	240,356	236,466	231,724

**Table E-2**  
**2017 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Setting: Five-year Comparison**

<b>All ED Visits, Including Those Admitted</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
Brattleboro Memorial Hospital	12,677	13,619	13,299	13,626	13,663
Central Vermont Medical Center	27,898	25,387	24,941	25,266	24,627
Copley Hospital	13,356	13,288	13,070	13,507	12,493
Gifford Medical Center	6,935	7,219	7,561	7,529	6,850
Grace Cottage Hospital	2,819	2,622	2,835	2,918	2,927
Mt. Ascutney Hospital and Health Center	5,436	4,941	4,662	4,590	4,771
North Country Hospital	14,889	15,194	16,682	15,505	15,513
Northeastern Vermont Regional Hospital	13,870	12,825	13,606	13,893	13,923
Northwestern Medical Center	26,039	24,713	25,318	24,859	23,573
Porter Medical Center	14,731	14,983	15,410	14,227	14,526
Rutland Regional Medical Center	33,200	33,124	33,394	33,397	32,883
Southwestern Vermont Medical Center	22,787	23,372	23,320	23,105	22,862
Springfield Hospital	16,604	15,943	17,032	16,750	16,078
University of Vermont Medical Center	56,173	55,854	56,883	56,639	56,525
Total	267,414	263,084	268,013	265,811	261,214

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**  
**2017 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%
<b>All Vermont Hospitals</b>						
Infectious & parasitic diseases	2,441	37.0%	4,150	63.0%	6,591	2.5%
Neoplasms	676	62.2%	411	37.8%	1,087	0.4%
Endocrine, nutritional, metabolic, immunity	1,273	26.5%	3,535	73.5%	4,808	1.8%
Diseases of the blood & blood-forming organs	441	42.6%	593	57.4%	1,034	0.4%
Mental disorders	2,368	16.4%	12,094	83.6%	14,462	5.5%
Diseases of the nervous system and sense organs	1,027	5.2%	18,796	94.8%	19,823	7.6%
Diseases of the circulatory system	5,586	22.6%	19,158	77.4%	24,744	9.5%
Diseases of the respiratory system	4,340	14.0%	26,552	86.0%	30,892	11.8%
Diseases of the digestive system	4,010	19.4%	16,686	80.6%	20,696	7.9%
Diseases of the genitourinary system	1,531	11.6%	11,655	88.4%	13,186	5.0%
Pregnancy, childbirth, and the puerperium	105	4.1%	2,477	95.9%	2,582	1.0%
Diseases of the skin and subcutaneous tissue	751	8.3%	8,281	91.7%	9,032	3.5%
Musculoskeletal system and connective tissue	698	4.0%	16,865	96.0%	17,563	6.7%
Congenital anomalies	34	39.1%	53	60.9%	87	0.0%
Conditions originating in the perinatal period	3	1.1%	275	98.9%	278	0.1%
Injury & poisoning	3,453	5.4%	60,394	94.6%	63,847	24.4%
Symptoms, signs & ill-defined conditions	612	2.2%	27,347	97.8%	27,959	10.7%
Residual codes, unclassified, all Ecodes	141	5.5%	2,402	94.5%	2,543	1.0%
Total	29,490	11.3%	231,724	88.7%	261,214	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**  
**2017 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%
<b>Brattleboro Memorial Hospital</b>						
Infectious & parasitic diseases	85	26.0%	242	74.0%	327	2.4%
Neoplasms	17	48.6%	18	51.4%	35	0.3%
Endocrine, nutritional, metabolic, immunity	46	21.6%	167	78.4%	213	1.6%
Diseases of the blood & blood-forming organs	13	32.5%	27	67.5%	40	0.3%
Mental disorders	48	4.1%	1,119	95.9%	1,167	8.5%
Diseases of the nervous system and sense organs	20	2.1%	923	97.9%	943	6.9%
Diseases of the circulatory system	200	14.7%	1,162	85.3%	1,362	10.0%
Diseases of the respiratory system	223	16.8%	1,102	83.2%	1,325	9.7%
Diseases of the digestive system	158	15.4%	866	84.6%	1,024	7.5%
Diseases of the genitourinary system	55	10.0%	495	90.0%	550	4.0%
Pregnancy, childbirth, and the puerperium	7	4.6%	144	95.4%	151	1.1%
Diseases of the skin and subcutaneous tissue	58	13.2%	380	86.8%	438	3.2%
Musculoskeletal system and connective tissue	22	2.2%	967	97.8%	989	7.2%
Congenital anomalies	0	0.0%	5	100.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	11	100.0%	11	0.1%
Injury & poisoning	118	3.6%	3,154	96.4%	3,272	23.9%
Symptoms, signs & ill-defined conditions	14	0.9%	1,487	99.1%	1,501	11.0%
Residual codes, unclassified, all Ecodes	3	1.0%	307	99.0%	310	2.3%
Total	1,087	8.0%	12,576	92.0%	13,663	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**  
**2017 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%
<b>Central Vermont Medical Center</b>						
Infectious & parasitic diseases	410	54.8%	338	45.2%	748	3.0%
Neoplasms	41	50.0%	41	50.0%	82	0.3%
Endocrine, nutritional, metabolic, immunity	160	37.1%	271	62.9%	431	1.8%
Diseases of the blood & blood-forming organs	37	51.4%	35	48.6%	72	0.3%
Mental disorders	451	27.7%	1,178	72.3%	1,629	6.6%
Diseases of the nervous system and sense organs	96	5.1%	1,770	94.9%	1,866	7.6%
Diseases of the circulatory system	657	24.3%	2,050	75.7%	2,707	11.0%
Diseases of the respiratory system	458	16.1%	2,380	83.9%	2,838	11.5%
Diseases of the digestive system	387	19.5%	1,595	80.5%	1,982	8.0%
Diseases of the genitourinary system	159	12.8%	1,079	87.2%	1,238	5.0%
Pregnancy, childbirth, and the puerperium	7	3.1%	216	96.9%	223	0.9%
Diseases of the skin and subcutaneous tissue	92	10.8%	756	89.2%	848	3.4%
Musculoskeletal system and connective tissue	77	4.1%	1,812	95.9%	1,889	7.7%
Congenital anomalies	1	25.0%	3	75.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	21	100.0%	21	0.1%
Injury & poisoning	219	4.4%	4,786	95.6%	5,005	20.3%
Symptoms, signs & ill-defined conditions	45	1.6%	2,757	98.4%	2,802	11.4%
Residual codes, unclassified, all Ecodes	5	2.1%	237	97.9%	242	1.0%
Total	3,302	13.4%	21,325	86.6%	24,627	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**  
**2017 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%
<b>Copley Hospital</b>						
Infectious & parasitic diseases	21	10.9%	171	89.1%	192	1.5%
Neoplasms	14	48.3%	15	51.7%	29	0.2%
Endocrine, nutritional, metabolic, immunity	48	27.7%	125	72.3%	173	1.4%
Diseases of the blood & blood-forming organs	8	25.8%	23	74.2%	31	0.2%
Mental disorders	31	6.8%	424	93.2%	455	3.6%
Diseases of the nervous system and sense organs	23	2.4%	945	97.6%	968	7.7%
Diseases of the circulatory system	169	18.3%	757	81.7%	926	7.4%
Diseases of the respiratory system	199	12.2%	1,427	87.8%	1,626	13.0%
Diseases of the digestive system	174	18.4%	773	81.6%	947	7.6%
Diseases of the genitourinary system	77	11.7%	582	88.3%	659	5.3%
Pregnancy, childbirth, and the puerperium	1	1.3%	74	98.7%	75	0.6%
Diseases of the skin and subcutaneous tissue	34	7.5%	417	92.5%	451	3.6%
Musculoskeletal system and connective tissue	28	2.5%	1,078	97.5%	1,106	8.9%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	8	100.0%	8	0.1%
Injury & poisoning	126	3.5%	3,492	96.5%	3,618	29.0%
Symptoms, signs & ill-defined conditions	32	2.8%	1,110	97.2%	1,142	9.1%
Residual codes, unclassified, all Ecodes	12	14.1%	73	85.9%	85	0.7%
Total	997	8.0%	11,496	92.0%	12,493	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**  
**2017 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%
<b>Gifford Medical Center</b>						
Infectious & parasitic diseases	19	23.2%	63	76.8%	82	1.2%
Neoplasms	16	66.7%	8	33.3%	24	0.4%
Endocrine, nutritional, metabolic, immunity	43	37.1%	73	62.9%	116	1.7%
Diseases of the blood & blood-forming organs	17	68.0%	8	32.0%	25	0.4%
Mental disorders	35	13.3%	229	86.7%	264	3.9%
Diseases of the nervous system and sense organs	33	6.1%	506	93.9%	539	7.9%
Diseases of the circulatory system	207	34.8%	387	65.2%	594	8.7%
Diseases of the respiratory system	157	17.0%	768	83.0%	925	13.5%
Diseases of the digestive system	119	18.8%	515	81.2%	634	9.3%
Diseases of the genitourinary system	62	20.1%	246	79.9%	308	4.5%
Pregnancy, childbirth, and the puerperium	3	5.2%	55	94.8%	58	0.8%
Diseases of the skin and subcutaneous tissue	28	11.8%	209	88.2%	237	3.5%
Musculoskeletal system and connective tissue	29	7.0%	383	93.0%	412	6.0%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	10	100.0%	10	0.1%
Injury & poisoning	86	4.4%	1,853	95.6%	1,939	28.3%
Symptoms, signs & ill-defined conditions	29	4.7%	587	95.3%	616	9.0%
Residual codes, unclassified, all Ecodes	5	7.5%	62	92.5%	67	1.0%
Total	888	13.0%	5,962	87.0%	6,850	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**  
**2017 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%
<b>Grace Cottage Hospital</b>						
Infectious & parasitic diseases	3	4.2%	69	95.8%	72	2.5%
Neoplasms	0	0.0%	2	100.0%	2	0.1%
Endocrine, nutritional, metabolic, immunity	9	12.5%	63	87.5%	72	2.5%
Diseases of the blood & blood-forming organs	3	20.0%	12	80.0%	15	0.5%
Mental disorders	2	2.0%	99	98.0%	101	3.5%
Diseases of the nervous system and sense organs	3	1.3%	224	98.7%	227	7.8%
Diseases of the circulatory system	11	4.9%	214	95.1%	225	7.7%
Diseases of the respiratory system	35	10.2%	308	89.8%	343	11.7%
Diseases of the digestive system	17	7.9%	197	92.1%	214	7.3%
Diseases of the genitourinary system	8	5.6%	134	94.4%	142	4.9%
Pregnancy, childbirth, and the puerperium	0	0.0%	12	100.0%	12	0.4%
Diseases of the skin and subcutaneous tissue	11	10.1%	98	89.9%	109	3.7%
Musculoskeletal system and connective tissue	0	0.0%	186	100.0%	186	6.4%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	2	100.0%	2	0.1%
Injury & poisoning	9	1.0%	867	99.0%	876	29.9%
Symptoms, signs & ill-defined conditions	5	1.8%	278	98.2%	283	9.7%
Residual codes, unclassified, all Ecodes	4	8.7%	42	91.3%	46	1.6%
Total	120	4.1%	2,807	95.9%	2,927	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**  
**2017 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%
<b>Mt. Ascutney Hospital and Health Center</b>						
Infectious & parasitic diseases	5	4.7%	102	95.3%	107	2.2%
Neoplasms	3	25.0%	9	75.0%	12	0.3%
Endocrine, nutritional, metabolic, immunity	10	13.9%	62	86.1%	72	1.5%
Diseases of the blood & blood-forming organs	3	42.9%	4	57.1%	7	0.1%
Mental disorders	2	1.1%	186	98.9%	188	3.9%
Diseases of the nervous system and sense organs	6	2.0%	294	98.0%	300	6.3%
Diseases of the circulatory system	53	15.1%	298	84.9%	351	7.4%
Diseases of the respiratory system	62	9.7%	580	90.3%	642	13.5%
Diseases of the digestive system	59	14.3%	355	85.7%	414	8.7%
Diseases of the genitourinary system	12	4.8%	240	95.2%	252	5.3%
Pregnancy, childbirth, and the puerperium	0	0.0%	12	100.0%	12	0.3%
Diseases of the skin and subcutaneous tissue	10	4.9%	195	95.1%	205	4.3%
Musculoskeletal system and connective tissue	5	1.6%	314	98.4%	319	6.7%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	3	100.0%	3	0.1%
Injury & poisoning	15	1.1%	1,346	98.9%	1,361	28.5%
Symptoms, signs & ill-defined conditions	17	3.5%	462	96.5%	479	10.0%
Residual codes, unclassified, all Ecodes	3	6.5%	43	93.5%	46	1.0%
Total	265	5.6%	4,506	94.4%	4,771	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**  
**2017 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%
<b>North Country Hospital</b>						
Infectious & parasitic diseases	10	3.1%	317	96.9%	327	2.1%
Neoplasms	21	63.6%	12	36.4%	33	0.2%
Endocrine, nutritional, metabolic, immunity	49	23.6%	159	76.4%	208	1.3%
Diseases of the blood & blood-forming organs	14	25.0%	42	75.0%	56	0.4%
Mental disorders	20	4.3%	450	95.7%	470	3.0%
Diseases of the nervous system and sense organs	18	1.5%	1,215	98.5%	1,233	7.9%
Diseases of the circulatory system	146	13.0%	976	87.0%	1,122	7.2%
Diseases of the respiratory system	289	12.0%	2,111	88.0%	2,400	15.5%
Diseases of the digestive system	162	13.8%	1,015	86.2%	1,177	7.6%
Diseases of the genitourinary system	100	12.1%	725	87.9%	825	5.3%
Pregnancy, childbirth, and the puerperium	2	1.0%	191	99.0%	193	1.2%
Diseases of the skin and subcutaneous tissue	33	5.4%	577	94.6%	610	3.9%
Musculoskeletal system and connective tissue	16	1.7%	934	98.3%	950	6.1%
Congenital anomalies	1	25.0%	3	75.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	12	100.0%	12	0.1%
Injury & poisoning	39	1.0%	3,919	99.0%	3,958	25.5%
Symptoms, signs & ill-defined conditions	37	2.1%	1,729	97.9%	1,766	11.4%
Residual codes, unclassified, all Ecodes	22	13.0%	147	87.0%	169	1.1%
Total	979	6.3%	14,534	93.7%	15,513	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**  
**2017 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%
<b>Northeastern Vermont Regional Hospital</b>						
Infectious & parasitic diseases	24	9.5%	229	90.5%	253	1.8%
Neoplasms	15	41.7%	21	58.3%	36	0.3%
Endocrine, nutritional, metabolic, immunity	41	15.5%	224	84.5%	265	1.9%
Diseases of the blood & blood-forming organs	13	26.0%	37	74.0%	50	0.4%
Mental disorders	70	13.3%	455	86.7%	525	3.8%
Diseases of the nervous system and sense organs	37	3.3%	1,079	96.7%	1,116	8.0%
Diseases of the circulatory system	177	15.6%	954	84.4%	1,131	8.1%
Diseases of the respiratory system	140	6.7%	1,960	93.3%	2,100	15.1%
Diseases of the digestive system	169	15.6%	916	84.4%	1,085	7.8%
Diseases of the genitourinary system	56	6.7%	775	93.3%	831	6.0%
Pregnancy, childbirth, and the puerperium	15	9.8%	138	90.2%	153	1.1%
Diseases of the skin and subcutaneous tissue	29	5.1%	537	94.9%	566	4.1%
Musculoskeletal system and connective tissue	15	1.8%	820	98.2%	835	6.0%
Congenital anomalies	0	0.0%	3	100.0%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	9	100.0%	9	0.1%
Injury & poisoning	92	2.5%	3,642	97.5%	3,734	26.8%
Symptoms, signs & ill-defined conditions	36	3.3%	1,067	96.7%	1,103	7.9%
Residual codes, unclassified, all Ecodes	14	10.9%	114	89.1%	128	0.9%
Total	943	6.8%	12,980	93.2%	13,923	100.0%

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**Table E-3**  
**2017 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%
<b>Northwestern Medical Center</b>						
Infectious & parasitic diseases	71	16.9%	349	83.1%	420	1.8%
Neoplasms	20	36.4%	35	63.6%	55	0.2%
Endocrine, nutritional, metabolic, immunity	70	14.3%	418	85.7%	488	2.1%
Diseases of the blood & blood-forming organs	45	44.1%	57	55.9%	102	0.4%
Mental disorders	64	7.0%	847	93.0%	911	3.9%
Diseases of the nervous system and sense organs	49	2.7%	1,776	97.3%	1,825	7.7%
Diseases of the circulatory system	276	12.6%	1,913	87.4%	2,189	9.3%
Diseases of the respiratory system	347	12.3%	2,481	87.7%	2,828	12.0%
Diseases of the digestive system	252	12.2%	1,819	87.8%	2,071	8.8%
Diseases of the genitourinary system	121	9.3%	1,180	90.7%	1,301	5.5%
Pregnancy, childbirth, and the puerperium	5	2.0%	249	98.0%	254	1.1%
Diseases of the skin and subcutaneous tissue	55	5.9%	879	94.1%	934	4.0%
Musculoskeletal system and connective tissue	46	2.7%	1,631	97.3%	1,677	7.1%
Congenital anomalies	0	0.0%	4	100.0%	4	0.0%
Conditions originating in the perinatal period	0	0.0%	29	100.0%	29	0.1%
Injury & poisoning	157	2.8%	5,459	97.2%	5,616	23.8%
Symptoms, signs & ill-defined conditions	37	1.4%	2,653	98.6%	2,690	11.4%
Residual codes, unclassified, all Ecodes	4	2.2%	175	97.8%	179	0.8%
Total	1,619	6.9%	21,954	93.1%	23,573	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**  
**2017 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%
<b>Porter Medical Center</b>						
Infectious & parasitic diseases	80	20.5%	311	79.5%	391	2.7%
Neoplasms	7	24.1%	22	75.9%	29	0.2%
Endocrine, nutritional, metabolic, immunity	19	7.6%	231	92.4%	250	1.7%
Diseases of the blood & blood-forming organs	3	10.7%	25	89.3%	28	0.2%
Mental disorders	12	2.9%	399	97.1%	411	2.8%
Diseases of the nervous system and sense organs	21	1.8%	1,135	98.2%	1,156	8.0%
Diseases of the circulatory system	87	9.9%	793	90.1%	880	6.1%
Diseases of the respiratory system	138	5.9%	2,203	94.1%	2,341	16.1%
Diseases of the digestive system	98	8.2%	1,091	91.8%	1,189	8.2%
Diseases of the genitourinary system	25	3.1%	784	96.9%	809	5.6%
Pregnancy, childbirth, and the puerperium	1	1.7%	57	98.3%	58	0.4%
Diseases of the skin and subcutaneous tissue	19	3.3%	563	96.7%	582	4.0%
Musculoskeletal system and connective tissue	12	1.1%	1,049	98.9%	1,061	7.3%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	10	100.0%	10	0.1%
Injury & poisoning	48	1.3%	3,699	98.7%	3,747	25.8%
Symptoms, signs & ill-defined conditions	22	1.5%	1,449	98.5%	1,471	10.1%
Residual codes, unclassified, all Ecodes	4	3.6%	107	96.4%	111	0.8%
Total	596	4.1%	13,930	95.9%	14,526	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**  
**2017 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%
<b>Rutland Regional Medical Center</b>						
Infectious & parasitic diseases	478	46.8%	544	53.2%	1,022	3.1%
Neoplasms	143	74.9%	48	25.1%	191	0.6%
Endocrine, nutritional, metabolic, immunity	211	33.1%	426	66.9%	637	1.9%
Diseases of the blood & blood-forming organs	58	54.2%	49	45.8%	107	0.3%
Mental disorders	734	31.2%	1,616	68.8%	2,350	7.1%
Diseases of the nervous system and sense organs	142	6.1%	2,182	93.9%	2,324	7.1%
Diseases of the circulatory system	908	29.0%	2,218	71.0%	3,126	9.5%
Diseases of the respiratory system	554	15.3%	3,060	84.7%	3,614	11.0%
Diseases of the digestive system	614	24.2%	1,926	75.8%	2,540	7.7%
Diseases of the genitourinary system	342	20.7%	1,309	79.3%	1,651	5.0%
Pregnancy, childbirth, and the puerperium	17	4.7%	341	95.3%	358	1.1%
Diseases of the skin and subcutaneous tissue	125	9.6%	1,171	90.4%	1,296	3.9%
Musculoskeletal system and connective tissue	145	5.9%	2,310	94.1%	2,455	7.5%
Congenital anomalies	3	33.3%	6	66.7%	9	0.0%
Conditions originating in the perinatal period	1	3.2%	30	96.8%	31	0.1%
Injury & poisoning	455	5.8%	7,328	94.2%	7,783	23.7%
Symptoms, signs & ill-defined conditions	73	2.3%	3,039	97.7%	3,112	9.5%
Residual codes, unclassified, all Ecodes	12	4.3%	265	95.7%	277	0.8%
Total	5,015	15.3%	27,868	84.7%	32,883	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**  
**2017 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%
<b>Southwestern Vermont Medical Center</b>						
Infectious & parasitic diseases	335	46.9%	380	53.1%	715	3.1%
Neoplasms	40	40.4%	59	59.6%	99	0.4%
Endocrine, nutritional, metabolic, immunity	117	28.1%	300	71.9%	417	1.8%
Diseases of the blood & blood-forming organs	33	29.2%	80	70.8%	113	0.5%
Mental disorders	74	7.0%	977	93.0%	1,051	4.6%
Diseases of the nervous system and sense organs	65	4.1%	1,528	95.9%	1,593	7.0%
Diseases of the circulatory system	422	17.7%	1,958	82.3%	2,380	10.4%
Diseases of the respiratory system	493	18.7%	2,148	81.3%	2,641	11.6%
Diseases of the digestive system	370	20.0%	1,480	80.0%	1,850	8.1%
Diseases of the genitourinary system	118	10.3%	1,033	89.7%	1,151	5.0%
Pregnancy, childbirth, and the puerperium	6	1.6%	361	98.4%	367	1.6%
Diseases of the skin and subcutaneous tissue	83	12.8%	563	87.2%	646	2.8%
Musculoskeletal system and connective tissue	44	3.1%	1,394	96.9%	1,438	6.3%
Congenital anomalies	2	20.0%	8	80.0%	10	0.0%
Conditions originating in the perinatal period	0	0.0%	24	100.0%	24	0.1%
Injury & poisoning	310	5.5%	5,358	94.5%	5,668	24.8%
Symptoms, signs & ill-defined conditions	46	1.8%	2,456	98.2%	2,502	10.9%
Residual codes, unclassified, all Ecodes	7	3.6%	190	96.4%	197	0.9%
Total	2,565	11.2%	20,297	88.8%	22,862	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**  
**2017 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%
<b>Springfield Hospital</b>						
Infectious & parasitic diseases	48	14.0%	295	86.0%	343	2.1%
Neoplasms	21	46.7%	24	53.3%	45	0.3%
Endocrine, nutritional, metabolic, immunity	60	21.0%	226	79.0%	286	1.8%
Diseases of the blood & blood-forming organs	11	30.6%	25	69.4%	36	0.2%
Mental disorders	163	19.5%	672	80.5%	835	5.2%
Diseases of the nervous system and sense organs	45	4.1%	1,041	95.9%	1,086	6.8%
Diseases of the circulatory system	256	18.3%	1,145	81.7%	1,401	8.7%
Diseases of the respiratory system	324	15.6%	1,748	84.4%	2,072	12.9%
Diseases of the digestive system	192	14.9%	1,099	85.1%	1,291	8.0%
Diseases of the genitourinary system	81	11.3%	639	88.8%	720	4.5%
Pregnancy, childbirth, and the puerperium	4	1.9%	209	98.1%	213	1.3%
Diseases of the skin and subcutaneous tissue	66	10.8%	547	89.2%	613	3.8%
Musculoskeletal system and connective tissue	28	3.5%	763	96.5%	791	4.9%
Congenital anomalies	0	0.0%	3	100.0%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	14	100.0%	14	0.1%
Injury & poisoning	126	3.0%	4,139	97.0%	4,265	26.5%
Symptoms, signs & ill-defined conditions	15	0.8%	1,918	99.2%	1,933	12.0%
Residual codes, unclassified, all Ecodes	9	6.9%	122	93.1%	131	0.8%
Total	1,449	9.0%	14,629	91.0%	16,078	100.0%

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**Table E-3**  
**2017 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%
<b>University of Vermont Medical Center</b>						
Infectious & parasitic diseases	852	53.5%	740	46.5%	1,592	2.8%
Neoplasms	318	76.6%	97	23.4%	415	0.7%
Endocrine, nutritional, metabolic, immunity	390	33.1%	790	66.9%	1,180	2.1%
Diseases of the blood & blood-forming organs	183	52.0%	169	48.0%	352	0.6%
Mental disorders	662	16.1%	3,443	83.9%	4,105	7.3%
Diseases of the nervous system and sense organs	469	10.1%	4,178	89.9%	4,647	8.2%
Diseases of the circulatory system	2,017	31.8%	4,333	68.2%	6,350	11.2%
Diseases of the respiratory system	921	17.7%	4,276	82.3%	5,197	9.2%
Diseases of the digestive system	1,239	29.0%	3,039	71.0%	4,278	7.6%
Diseases of the genitourinary system	315	11.5%	2,434	88.5%	2,749	4.9%
Pregnancy, childbirth, and the puerperium	37	8.1%	418	91.9%	455	0.8%
Diseases of the skin and subcutaneous tissue	108	7.2%	1,389	92.8%	1,497	2.6%
Musculoskeletal system and connective tissue	231	6.7%	3,224	93.3%	3,455	6.1%
Congenital anomalies	27	67.5%	13	32.5%	40	0.1%
Conditions originating in the perinatal period	2	2.1%	92	97.9%	94	0.2%
Injury & poisoning	1,653	12.7%	11,352	87.3%	13,005	23.0%
Symptoms, signs & ill-defined conditions	204	3.1%	6,355	96.9%	6,559	11.6%
Residual codes, unclassified, all Ecodes	37	6.7%	518	93.3%	555	1.0%
Total	9,665	17.1%	46,860	82.9%	56,525	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**  
**2017 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	1,377	5,654	3,144	683	483	450	785	10,175	2,401	12,576
Central Vermont Medical Center	2,711	8,880	5,346	1,236	946	739	1,467	16,937	4,388	21,325
Copley Hospital	1,977	4,919	2,563	536	453	444	604	9,459	2,037	11,496
Gifford Medical Center	888	2,521	1,389	308	273	188	395	4,798	1,164	5,962
Grace Cottage Hospital	383	903	707	183	210	135	286	1,993	814	2,807
Mt. Ascutney Hospital and Health Center	550	1,515	1,210	292	261	205	473	3,275	1,231	4,506
North Country Hospital	2,421	5,757	3,327	789	690	609	941	11,505	3,029	14,534
Northeastern Vermont Regional Hospital	1,841	5,339	3,167	673	689	475	796	10,347	2,633	12,980
Northwestern Medical Center	3,058	9,076	5,534	1,079	991	731	1,485	17,668	4,286	21,954
Porter Medical Center	1,819	5,898	3,429	683	624	448	1,029	11,146	2,784	13,930
Rutland Regional Medical Center	3,720	11,558	7,350	1,448	1,143	943	1,706	22,628	5,240	27,868
Southwestern Vermont Medical Center	2,778	7,755	4,853	1,138	1,015	844	1,914	15,386	4,911	20,297
Springfield Hospital	2,241	6,053	3,580	709	609	539	898	11,874	2,755	14,629
University of Vermont Medical Center	5,856	20,458	11,458	2,328	1,986	1,587	3,187	37,772	9,088	46,860
Total	31,620	96,286	57,057	12,085	10,373	8,337	15,966	184,963	46,761	231,724

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**  
**2017 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Principal Payer**

Vermont Hospital	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown		N	Col%
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	3,185	25.3%	4,446	35.4%	57	0.5%	205	1.6%	3,721	29.6%	891	7.1%	71	0.6%	12,576	5.4%
Central Vermont Medical Center	5,728	26.9%	7,142	33.5%	337	1.6%	387	1.8%	6,672	31.3%	1,059	5.0%	-	0.0%	21,325	9.2%
Copley Hospital	2,442	21.2%	4,217	36.7%	197	1.7%	211	1.8%	3,702	32.2%	701	6.1%	26	0.2%	11,496	5.0%
Gifford Medical Center	1,397	23.4%	2,194	36.8%	60	1.0%	140	2.3%	1,794	30.1%	377	6.3%	-	0.0%	5,962	2.6%
Grace Cottage Hospital	829	29.5%	729	26.0%	6	0.2%	55	2.0%	1,010	36.0%	174	6.2%	4	0.1%	2,807	1.2%
Mt. Ascutney Hospital and Health Center	1,485	33.0%	1,107	24.6%	-	0.0%	111	2.5%	1,478	32.8%	312	6.9%	13	0.3%	4,506	1.9%
North Country Hospital	3,873	26.6%	6,273	43.2%	102	0.7%	351	2.4%	3,415	23.5%	520	3.6%	-	0.0%	14,534	6.3%
Northeastern Vermont Regional Hospital	3,218	24.8%	4,726	36.4%	55	0.4%	278	2.1%	4,002	30.8%	701	5.4%	-	0.0%	12,980	5.6%
Northwestern Medical Center	5,583	25.4%	8,100	36.9%	250	1.1%	294	1.3%	6,035	27.5%	1,449	6.6%	243	1.1%	21,954	9.5%
Porter Medical Center	3,275	23.5%	2,958	21.2%	84	0.6%	55	0.4%	6,666	47.9%	847	6.1%	45	0.3%	13,930	6.0%
Rutland Regional Medical Center	7,666	27.5%	10,022	36.0%	226	0.8%	703	2.5%	7,515	27.0%	1,731	6.2%	5	0.0%	27,868	12.0%
Southwestern Vermont Medical Center	5,659	27.9%	5,830	28.7%	159	0.8%	360	1.8%	7,260	35.8%	1,029	5.1%	-	0.0%	20,297	8.8%
Springfield Hospital	3,923	26.8%	5,325	36.4%	72	0.5%	165	1.1%	3,854	26.3%	1,282	8.8%	8	0.1%	14,629	6.3%
University of Vermont Medical Center	9,920	21.2%	12,437	26.5%	870	1.9%	919	2.0%	19,635	41.9%	2,866	6.1%	213	0.5%	46,860	20.2%
Total	58,183	25.1%	75,506	32.6%	2,475	1.1%	4,234	1.8%	76,759	33.1%	13,939	6.0%	628	0.3%	231,724	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**  
**2017 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Infectious & parasitic diseases	686	16.5%	1,700	41.0%	48	1.2%	34	0.8%	1,362	32.8%	307	7.4%	13	0.3%	4,150	1.8%
Neoplasms	191	46.5%	74	18.0%	1	0.2%	1	0.2%	134	32.6%	9	2.2%	1	0.2%	411	0.2%
Endocrine, nutritional, metabolic, immunity	1,548	43.8%	846	23.9%	32	0.9%	7	0.2%	963	27.2%	121	3.4%	18	0.5%	3,535	1.5%
Diseases of the blood & blood-forming organs	285	48.1%	106	17.9%	4	0.7%	-	0.0%	181	30.5%	12	2.0%	5	0.8%	593	0.3%
Mental disorders	2,592	21.4%	5,670	46.9%	121	1.0%	17	0.1%	2,735	22.6%	945	7.8%	14	0.1%	12,094	5.2%
Diseases of the nervous system and sense organs	4,454	23.7%	6,799	36.2%	186	1.0%	110	0.6%	6,217	33.1%	986	5.2%	44	0.2%	18,796	8.1%
Diseases of the circulatory system	8,115	42.4%	3,287	17.2%	224	1.2%	46	0.2%	6,658	34.8%	771	4.0%	57	0.3%	19,158	8.3%
Diseases of the respiratory system	6,605	24.9%	10,079	38.0%	268	1.0%	25	0.1%	7,980	30.1%	1,527	5.8%	68	0.3%	26,552	11.5%
Diseases of the digestive system	4,091	24.5%	5,717	34.3%	164	1.0%	28	0.2%	5,334	32.0%	1,297	7.8%	55	0.3%	16,686	7.2%
Diseases of the genitourinary system	3,351	28.8%	3,229	27.7%	166	1.4%	9	0.1%	4,226	36.3%	646	5.5%	28	0.2%	11,655	5.0%
Pregnancy, childbirth, and the puerperium	52	2.1%	1,509	60.9%	19	0.8%	8	0.3%	767	31.0%	117	4.7%	5	0.2%	2,477	1.1%
Diseases of the skin and subcutaneous tissue	1,971	23.8%	3,065	37.0%	66	0.8%	71	0.9%	2,425	29.3%	668	8.1%	15	0.2%	8,281	3.6%
Musculoskeletal system and connective tissue	4,977	29.5%	4,882	28.9%	169	1.0%	461	2.7%	5,389	32.0%	952	5.6%	35	0.2%	16,865	7.3%
Congenital anomalies	8	15.1%	20	37.7%	1	1.9%	-	0.0%	20	37.7%	4	7.5%	-	0.0%	53	0.0%
Conditions originating in the perinatal period	1	0.4%	154	56.0%	5	1.8%	-	0.0%	80	29.1%	35	12.7%	-	0.0%	275	0.1%
Injury & poisoning	12,078	20.0%	18,103	30.0%	681	1.1%	3,208	5.3%	22,281	36.9%	3,870	6.4%	173	0.3%	60,394	26.1%
Symptoms, signs & ill-defined conditions	6,155	22.5%	9,649	35.3%	305	1.1%	106	0.4%	9,504	34.8%	1,552	5.7%	76	0.3%	27,347	11.8%
Residual codes, unclassified, all Ecodes	1,023	42.6%	617	25.7%	15	0.6%	103	4.3%	503	20.9%	120	5.0%	21	0.9%	2,402	1.0%
<b>Total</b>	<b>58,183</b>	<b>25.1%</b>	<b>75,506</b>	<b>32.6%</b>	<b>2,475</b>	<b>1.1%</b>	<b>4,234</b>	<b>1.8%</b>	<b>76,759</b>	<b>33.1%</b>	<b>13,939</b>	<b>6.0%</b>	<b>628</b>	<b>0.3%</b>	<b>231,724</b>	<b>100.0%</b>

"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**  
**2017 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	9,785	\$ 23,504,583	2,791	\$ 6,186,921	12,576	\$ 29,691,504
Central Vermont Medical Center	20,457	\$ 46,316,941	868	\$ 1,846,916	21,325	\$ 48,163,857
Copley Hospital	10,297	\$ 10,480,121	1,199	\$ 1,233,479	11,496	\$ 11,713,600
Gifford Medical Center	5,750	\$ 11,729,911	212	\$ 511,180	5,962	\$ 12,241,091
Grace Cottage Hospital	2,346	\$ 4,307,332	461	\$ 768,323	2,807	\$ 5,075,655
Mt. Ascutney Hospital and Health Center	3,569	\$ 7,263,003	937	\$ 2,050,026	4,506	\$ 9,313,029
North Country Hospital	13,681	\$ 30,003,811	853	\$ 1,763,511	14,534	\$ 31,767,322
Northeastern Vermont Regional Hospital	12,210	\$ 25,560,951	770	\$ 1,427,931	12,980	\$ 26,988,882
Northwestern Medical Center	21,472	\$ 32,421,063	482	\$ 711,465	21,954	\$ 33,132,528
Porter Medical Center	12,470	\$ 20,546,561	1,460	\$ 2,071,719	13,930	\$ 22,618,281
Rutland Regional Medical Center	25,349	\$ 46,052,906	2,519	\$ 4,978,113	27,868	\$ 51,031,019
Southwestern Vermont Medical Center	14,412	\$ 32,311,782	5,885	\$ 14,830,266	20,297	\$ 47,142,048
Springfield Hospital	12,116	\$ 29,034,285	2,513	\$ 6,446,670	14,629	\$ 35,480,955
University of Vermont Medical Center	43,489	\$ 140,419,257	3,371	\$ 12,592,449	46,860	\$ 153,011,706
<b>Total for 2017</b>	<b>207,403</b>	<b>\$ 459,952,510</b>	<b>24,321</b>	<b>\$ 57,418,969</b>	<b>231,724</b>	<b>\$ 517,371,478</b>
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
Total for 2014	215,448	\$ 417,678,759	24,394	\$ 49,657,093	239,842	\$ 467,335,852
Total for 2013	218,117	\$ 376,817,175	24,449	\$ 44,768,696	242,566	\$ 421,585,871
Total for 2012	225,304	\$ 358,197,475	24,520	\$ 41,161,604	249,824	\$ 399,359,078

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by State of Residence**

<b>Vermont Hospital</b>	<b>Vermont Residents</b>		<b>Non-residents</b>		<b>All Outpatient Procedures</b>	
	<b>N</b>	<b>Row%</b>	<b>N</b>	<b>Row%</b>	<b>N</b>	<b>Col%</b>
Brattleboro Memorial Hospital	4,240	85.5%	718	14.5%	4,958	3.8%
Central Vermont Medical Center	9,485	99.6%	41	0.4%	9,526	7.3%
Copley Hospital	4,434	99.1%	41	0.9%	4,475	3.4%
Gifford Medical Center	1,876	98.5%	29	1.5%	1,905	1.5%
Grace Cottage Hospital	8	100.0%	-	0.0%	8	0.0%
Mt. Ascutney Hospital and Health Center	976	64.1%	546	35.9%	1,522	1.2%
North Country Hospital	4,020	99.0%	39	1.0%	4,059	3.1%
Northeastern Vermont Regional Hospital	4,170	91.2%	404	8.8%	4,574	3.5%
Northwestern Medical Center	5,998	99.1%	57	0.9%	6,055	4.6%
Porter Medical Center	2,613	88.7%	332	11.3%	2,945	2.2%
Rutland Regional Medical Center	17,227	95.2%	871	4.8%	18,098	13.8%
Southwestern Vermont Medical Center	7,056	73.8%	2,510	26.2%	9,566	7.3%
Springfield Hospital	2,217	85.1%	388	14.9%	2,605	2.0%
University of Vermont Medical Center	53,607	88.3%	7,131	11.7%	60,738	46.4%
Total	117,927	90.0%	13,107	10.0%	131,034	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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Data Year: Five-year Comparison**

Vermont Hospital	2013	2014	2015	2016	2017
Brattleboro Memorial Hospital	3,990	5,801	4,237	6,471	4,958
Central Vermont Medical Center	7,653	8,984	8,800	9,271	9,526
Copley Hospital	5,579	7,814	4,442	4,483	4,475
Gifford Medical Center	2,513	2,377	1,845	1,994	1,905
Grace Cottage Hospital	-	3	-	2	8
Mt. Ascutney Hospital and Health Center	1,768	1,863	1,827	1,822	1,522
North Country Hospital	3,976	4,662	3,963	4,286	4,059
Northeastern Vermont Regional Hospital	2,585	4,057	3,761	4,437	4,574
Northwestern Medical Center	5,681	6,212	6,190	5,980	6,055
Porter Medical Center	3,340	3,493	3,486	3,223	2,945
Rutland Regional Medical Center	10,356	14,576	15,695	17,100	18,098
Southwestern Vermont Medical Center	6,053	9,136	9,168	9,443	9,566
Springfield Hospital	2,254	2,635	2,493	2,653	2,605
University of Vermont Medical Center	46,514	59,298	62,527	61,530	60,738
Total	102,262	130,911	128,434	132,695	131,034

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**  
**2017 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	14	45	1	20	-	2	17	2	20	4	103	47	1	466	742
Neoplasms	430	726	144	110	-	136	593	837	443	179	984	893	177	7,489	13,141
Endocrine, nutritional, metabolic, immunity	140	68	5	23	-	3	25	37	22	5	139	51	11	1,378	1,907
Diseases of the blood & blood-forming organs	5	65	13	17	-	25	37	27	22	7	120	66	7	232	643
Mental disorders	12	205	4	6	-	6	259	39	131	-	86	30	4	132	914
Diseases of the nervous system and sense organs	587	1,012	222	297	-	370	537	572	500	560	3,137	80	224	7,546	15,644
Diseases of the circulatory system	176	145	26	28	-	20	88	55	72	27	375	227	34	2,714	3,987
Diseases of the respiratory system	176	581	72	147	-	93	556	271	547	126	2,381	1,403	310	4,922	11,585
Diseases of the digestive system	514	1,112	273	180	1	298	503	361	1,274	301	1,321	1,150	376	5,083	12,747
Diseases of the genitourinary system	305	512	204	172	-	6	151	167	362	220	1,227	639	191	6,866	11,022
Pregnancy, childbirth, and the puerperium	646	623	415	207	-	-	253	296	78	84	496	360	165	1,558	5,181
Diseases of the skin and subcutaneous tissue	91	72	43	11	-	17	38	354	231	19	263	73	19	2,891	4,122
Musculoskeletal system and connective tissue	697	1,197	519	230	4	115	375	562	617	121	4,377	759	88	9,145	18,806
Congenital anomalies	9	4	4	4	-	1	5	5	15	7	16	9	2	280	361
Conditions originating in the perinatal period	4	30	-	1	-	-	8	12	14	24	-	18	25	32	168
Injury & poisoning	311	402	370	121	1	5	99	219	280	141	653	345	139	2,144	5,230
Symptoms, signs & ill-defined conditions	834	2,704	2,157	327	2	422	471	750	1,410	1,118	2,381	3,058	822	7,135	23,591
Residual codes, unclassified, all Ecodes	7	23	3	4	-	3	44	8	17	2	39	358	10	725	1,243
Total	4,958	9,526	4,475	1,905	8	1,522	4,059	4,574	6,055	2,945	18,098	9,566	2,605	60,738	131,034

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**  
**2017 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	103	897	261	121	-	84	307	423	446	57	2,184	474	81	7,350	12,788
Operations on the endocrine system	2	9	-	1	-	-	1	3	4	5	67	20	-	212	324
Operations on the eye	460	773	103	224	-	363	389	440	303	460	459	5	127	3,894	8,000
Operations on the ear	40	52	-	-	-	-	17	20	-	48	1,413	23	22	1,409	3,044
Operations on the nose, mouth, and pharynx	14	110	5	10	1	3	90	38	4	105	1,321	63	41	1,411	3,216
Operations on the respiratory system	235	552	76	153	-	102	536	288	522	49	1,872	1,797	290	5,594	12,066
Operations on the cardiovascular system	174	578	65	97	-	11	613	798	379	88	837	457	186	4,566	8,849
Operations on the hemic and lymphatic system	9	13	1	1	-	2	9	4	3	3	49	19	2	156	271
Operations on the digestive system	1,556	3,508	1,093	535	-	850	1,272	1,117	2,862	1,432	3,225	3,865	1,155	15,375	37,845
Operations on the urinary system	179	288	131	127	-	-	40	100	81	130	849	157	100	2,949	5,131
Operations on the male genital organs	34	90	21	16	-	-	24	41	32	70	192	49	53	696	1,318
Operations on the female genital organs	191	808	124	64	-	1	187	100	340	101	1,003	1,453	107	1,569	6,048
Obstetrical procedures	621	600	380	192	-	-	214	272	6	66	128	203	141	1,309	4,132
Operations on the musculoskeletal system	953	895	751	293	6	51	270	436	655	248	3,620	628	207	6,493	15,506
Operations on the integumentary system	387	353	1,464	71	1	55	90	494	418	83	879	353	93	7,755	12,496
Total	4,958	9,526	4,475	1,905	8	1,522	4,059	4,574	6,055	2,945	18,098	9,566	2,605	60,738	131,034

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

CCS High Level Procedure Group CCS Single Level Procedure Group	2013	2014	2015	2016	2017
<b>1 Operations on the nervous system</b>					
1 Incision & excision of CNS	1	1	-	-	-
2 Insertion, replacem, rem of extracranial ventricular shunt	3	17	16	8	13
3 Laminectomy, excision intervertebral disc	452	401	443	367	323
4 Diagnostic spinal tap	200	124	37	59	58
5 Insert cath, spinal stimulator, inject into spinal canal	3,360	2,932	4,523	4,386	4,181
6 Decompression peripheral nerve	1,705	1,617	1,585	1,618	1,636
7 Other diagnostic nervous system procedures	15	1,813	2,676	2,704	2,454
8 Other non-OR or closed therapeutic nerv syst procs	473	1,435	2,413	2,341	2,299
9 Other OR therapeutic nervous system procedures	1,111	1,388	1,765	1,842	1,824
Total	7,320	9,728	13,458	13,325	12,788
<b>2 Operations on the endocrine system</b>					
10 Thyroidectomy, partial or complete	192	163	160	211	174
11 Diagnostic endocrine procedures	365	227	28	27	49
12 Other therapeutic endocrine procedures	66	97	81	93	101
Total	623	487	269	331	324
<b>3 Operations on the eye</b>					
13 Corneal transplant	20	11	10	9	4
14 Glaucoma procedures	195	180	307	352	344
15 Lens & cataract procedures	4,670	4,422	4,320	4,280	4,404
16 Repair of retinal tear, detachment	263	299	246	182	185
17 Destruction of lesion of retina & choroid	179	122	109	87	52
18 Diagnostic procedures on eye	21	32	37	23	45
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	397	295	391	403	395
20 Other intraocular therapeutic procedures	2,032	1,947	2,195	2,418	2,463
21 Other extraocular muscle & orbit therapeutic procedures	125	114	112	104	108
Total	7,902	7,422	7,727	7,858	8,000
<b>4 Operations on the ear</b>					
22 Tympanoplasty	125	98	69	76	77
23 Myringotomy	951	817	911	873	834

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

CCS High Level Procedure Group CCS Single Level Procedure Group	2013	2014	2015	2016	2017
24 Mastoidectomy	27	29	19	30	16
25 Diagnostic procedures on ear	34	24	1	3	-
26 Other therapeutic ear procedures	475	1,682	1,971	2,231	2,117
Total	1,612	2,650	2,971	3,213	3,044
<b>5 Operations on the nose, mouth, and pharynx</b>					
27 Control of epistaxis	111	147	145	154	173
28 Plastic procedures on nose	237	238	198	140	160
29 Dental procedures	710	568	55	37	41
30 Tonsillectomy and/or adenoidectomy	759	691	629	571	566
31 Diagnostic procedures on nose, mouth & pharynx	1,065	1,664	1,751	1,955	1,917
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	461	210	26	44	23
33 Other OR therapeutic procedures on nose, mouth & pharynx	516	457	371	345	336
Total	3,859	3,975	3,175	3,246	3,216
<b>6 Operations on the respiratory system</b>					
34 Tracheostomy, temporary & permanent	-	-	2	5	10
35 Tracheoscopy & laryngoscopy with biopsy	1,728	1,773	1,747	1,643	1,557
36 Lobectomy or pneumonectomy	10	-	-	1	-
37 Diagnostic bronchoscopy & biopsy of bronchus	507	416	295	369	311
38 Other diagnostic procedures on lung & bronchus	2	7,800	9,740	9,660	9,820
39 Incision of pleura, thoracentesis, chest drainage	216	229	227	236	234
40 Other diagnostic proc of respiratory tract & mediastinum	31	31	13	15	9
41 Other non-OR therapeutic procedures on respiratory system	24	31	11	11	11
42 Other OR therapeutic procedures on respiratory system	101	129	141	153	114
Total	2,619	10,409	12,176	12,093	12,066
<b>7 Operations on the cardiovascular system</b>					
43 Heart valve procedures	2	2	-	1	1
45 Percutaneous transluminal coronary angioplasty (PTCA)	202	43	23	10	19
47 Diagnostic cardiac catheterization, coronary arteriography	622	1,144	1,081	1,141	1,062
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	420	433	483	1,474	2,047
49 Other OR heart procedures	98	116	7	4	13

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

CCS High Level Procedure Group CCS Single Level Procedure Group	2013	2014	2015	2016	2017
51 Endarterectomy, vessel of head & neck	-	1	-	2	-
52 Aortic resection, replacement or anastomosis	1	-	1	-	-
53 Varicose vein stripping, lower limb	92	165	205	209	219
54 Other vascular catheterization, not heart	680	975	1,098	1,026	1,072
55 Peripheral vascular bypass	3	-	-	-	-
56 Other vascular bypass & shunt, not heart	2	5	6	6	5
57 Creat, revis, rem of arteriovenous fistula or cannula for dialysis	112	128	148	165	280
58 Hemodialysis	3	5	12	56	25
59 Other OR procedures on vessels of head & neck	15	54	97	100	95
60 Embolectomy & endarterectomy of lower limbs	-	1	-	1	1
61 Other OR procedures on vessels other than head & neck	702	624	397	403	267
62 Other diagnostic cardiovascular procedures	206	848	677	663	550
63 Other non-OR therapeutic cardiovascular procedures	81	2,729	3,036	3,275	3,193
Total	3,241	7,273	7,271	8,536	8,849
<b>8 Operations on the hemic and lymphatic system</b>					
64 Bone marrow transplant	7	23	38	23	38
65 Bone marrow biopsy	250	182	41	75	67
66 Procedures on spleen	2	5	1	1	-
67 Other therapeutic procedures, hemic & lymphatic system	301	296	175	149	166
Total	560	506	255	248	271
<b>9 Operations on the digestive system</b>					
68 Injection or ligation of esophageal varices	-	26	47	46	39
69 Esophageal dilatation	430	466	484	509	473
70 Upper gastrointestinal endoscopy, biopsy	5,243	5,128	5,109	5,434	5,376
71 Gastrostomy, temporary & permanent	58	153	152	114	97
72 Colostomy, temporary & permanent	-	-	2	2	1
73 Ileostomy & other enterostomy	9	19	14	16	15
75 Small bowel resection	-	3	1	-	-
76 Colonoscopy & biopsy	12,698	17,936	23,156	24,716	24,036
77 Proctoscopy & anorectal biopsy	387	548	615	664	621

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

<b>CCS High Level Procedure Group</b>					
<b>CCS Single Level Procedure Group</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
78 Colorectal resection	3	8	17	14	9
79 Local excision of large intestine lesion (not endoscopic)	2	1	2	-	1
80 Appendectomy	57	44	57	59	62
81 Hemorrhoid procedures	187	204	226	203	198
82 Endoscopic retrograde cannulation of pancreas (ERCP)	33	95	146	159	148
83 Biopsy of liver	242	97	2	1	-
84 Cholecystectomy & common duct exploration	1,193	1,090	1,052	1,024	925
85 Inguinal & femoral hernia repair	1,294	1,174	1,118	1,062	1,089
86 Other hernia repair	875	886	865	846	882
87 Laparoscopy	88	78	86	82	45
88 Abdominal paracentesis	254	281	258	309	352
89 Exploratory laparotomy	2	-	4	-	3
90 Excision, lysis peritoneal adhesions	36	22	2	1	-
91 Peritoneal dialysis	-	2,806	2,683	2,769	2,658
92 Other bowel diagnostic procedures	31	12	-	-	1
93 Other non-OR upper GI therapeutic procedures	342	277	36	21	26
94 Other OR upper GI therapeutic procedures	57	46	33	33	47
95 Other non-OR lower GI therapeutic procedures	10,308	5,539	58	64	62
96 Other OR lower GI therapeutic procedures	256	248	173	198	189
97 Other gastrointestinal diagnostic procedures	93	258	220	280	290
98 Other non-OR gastrointestinal therapeutic procedures	162	88	15	66	67
99 Other OR gastrointestinal therapeutic procedures	98	117	87	127	133
Total	34,438	37,650	36,720	38,819	37,845
<b>10 Operations on the urinary system</b>					
100 Endoscopy & endoscopic biopsy of the urinary tract	2,087	2,100	1,667	1,655	1,309
101 Transurethral excision, drainage, rem urinary obstruction	851	776	655	614	622
102 Ureteral catheterization	270	300	269	254	282
103 Nephrotomy & nephrostomy	23	19	10	72	103
104 Nephrectomy, partial or complete	1	3	2	4	1
106 Genitourinary incontinence procedures	185	150	159	209	197

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**Table O-5**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

<b>CCS High Level Procedure Group</b>					
<b>CCS Single Level Procedure Group</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
107 Extracorporeal lithotripsy, urinary	7	587	780	842	855
108 Indwelling catheter	145	352	518	574	438
109 Procedures on the urethra	163	160	191	218	201
110 Other diagnostic procedures of urinary tract	142	76	9	11	13
111 Other non-OR therapeutic procedures of urinary tract	177	605	739	803	784
112 Other OR therapeutic procedures of urinary tract	75	174	275	265	326
Total	4,126	5,302	5,274	5,521	5,131
<b>11 Operations on the male genital organs</b>					
113 Transurethral resection of prostate (TURP)	140	155	87	144	145
114 Open prostatectomy	6	11	1	3	6
115 Circumcision	228	250	249	286	282
116 Diagnostic procedures, male genital	262	274	223	209	237
117 Other non-OR therapeutic procedures, male genital	124	156	164	162	158
118 Other OR therapeutic procedures, male genital	337	405	476	504	490
Total	1,097	1,251	1,200	1,308	1,318
<b>12 Operations on the female genital organs</b>					
119 Oophorectomy, unilateral & bilateral	194	206	303	327	387
120 Other operations on ovary	183	99	2	35	64
121 Ligation of fallopian tubes	324	280	216	139	136
123 Other operations on fallopian tubes	39	35	28	27	4
124 Hysterectomy, abdominal & vaginal	553	569	554	633	612
125 Other excision of cervix & uterus	630	516	363	401	402
126 Abortion (termination of pregnancy)	32	35	33	47	32
127 D&C, aspiration after delivery or abortion	241	250	210	185	179
128 Diagnostic dilatation & curettage (D&C)	540	338	45	38	34
129 Repair cystocele & rectocele, oblit of vaginal vault	73	87	98	120	112
130 Other diagnostic procedures, female organs	342	3,129	3,478	3,182	3,061
131 Other non-OR therapeutic procedures, female organs	124	552	572	538	650
132 Other OR therapeutic procedures, female organs	293	319	316	336	375
Total	3,568	6,415	6,218	6,008	6,048

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

<b>CCS High Level Procedure Group</b> <b>CCS Single Level Procedure Group</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
<b>13 Obstetrical procedures</b>					
122 Removal of ectopic pregnancy	7	6	5	13	10
134 Cesarean section	-	1	-	-	-
135 Forceps, vacuum & breech delivery	-	3	2	1	4
137 Other procedures to assist delivery	26	50	43	42	48
138 Diagnostic amniocentesis	2	-	-	1	1
139 Fetal monitoring	3,048	5,509	3,833	3,826	4,038
140 Repair of current obstetric laceration	2	4	1	-	5
141 Other therapeutic obstetrical procedures	14	16	22	24	26
Total	3,099	5,589	3,906	3,907	4,132
<b>14 Operations on the musculoskeletal system</b>					
142 Partial excision bone	346	423	444	449	467
143 Bunionectomy or repair of toe deformities	706	542	505	495	499
144 Treatment, facial fracture or dislocation	64	58	76	78	50
145 Treatment, fracture or disloc of radius & ulna	445	452	416	464	450
146 Treatment, fracture or disloc of hip & femur	63	33	17	13	15
147 Treatment, fracture or disloc of lower extremity	649	632	460	474	466
148 Other fracture & dislocation procedure	603	542	538	507	502
149 Arthroscopy	548	385	395	353	374
150 Division of joint capsule, ligament or cartilage	72	89	93	90	77
151 Excision of semilunar cartilage of knee	1,364	1,307	1,284	1,227	1,071
152 Arthroplasty knee	260	120	47	56	36
153 Hip replacement, total & partial	2	23	45	31	23
154 Arthroplasty other than hip or knee	499	360	274	222	244
155 Arthrocentesis	203	2,568	3,932	5,229	5,307
156 Injections & aspirations of muscles, tendons, etc.	490	1,253	1,284	1,277	1,290
157 Amputation of lower extremity	140	141	134	131	139
158 Spinal fusion	133	73	31	30	47
159 Other diagnostic procedures on musculoskeletal system	126	157	87	78	68
160 Other therapeutic procedures on muscles & tendons	2,693	2,567	2,450	2,614	2,586

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**Table O-5**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2013 - 2017**

<b>CCS High Level Procedure Group</b>					
<b>CCS Single Level Procedure Group</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>
161 Other OR therapeutic procedures on bone	256	487	650	601	637
162 Other OR therapeutic procedures on joints	1,041	1,018	1,051	1,160	1,044
163 Other non-OR therapeutic procedures on musc system	6,187	4,662	16	25	40
164 Other OR therapeutic procedures on musc system	105	74	80	62	74
Total	16,995	17,966	14,309	15,666	15,506
<b>15 Operations on the integumentary system</b>					
165 Breast biopsy & other diagnostic procedures on breast	1,269	1,243	1,056	1,029	1,052
166 Lumpectomy, quadrantectomy of breast	728	626	502	455	382
167 Mastectomy	86	81	64	68	72
168 Incision & drainage, skin & subcutaneous tissue	176	268	280	261	172
169 Debridement of wound, infection or burn	665	1,477	665	660	337
170 Excision of skin lesion	3,638	4,366	4,968	4,720	4,624
171 Suture of skin & subcutaneous tissue	334	619	972	721	664
172 Skin graft	69	277	493	561	673
173 Other diagnostic proc on skin & subcutaneous tissue	1,435	784	96	160	280
174 Other non-OR therapeutic procedures on skin & breast	2,005	3,897	4,011	3,604	3,782
175 Other OR therapeutic procedures on skin & breast	798	650	398	377	458
Total	11,203	14,288	13,505	12,616	12,496

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**Table O-6**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Age Group**

<u>Vermont Hospital</u>	<u>Age Group</u>							<u>0-64</u>	<u>65+</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>			
Brattleboro Memorial Hospital	24	1,156	1,597	667	593	381	540	2,777	2,181	4,958
Central Vermont Medical Center	153	2,131	3,858	1,261	962	628	533	6,142	3,384	9,526
Copley Hospital	21	898	1,521	524	471	373	667	2,440	2,035	4,475
Gifford Medical Center	39	443	731	248	189	136	119	1,213	692	1,905
Grace Cottage Hospital	-	-	7	-	1	-	-	7	1	8
Mt. Ascutney Hospital and Health Center	4	160	606	222	206	171	153	770	752	1,522
North Country Hospital	52	731	1,541	591	489	358	297	2,324	1,735	4,059
Northeastern Vermont Regional Hospital	120	765	1,921	534	560	340	334	2,806	1,768	4,574
Northwestern Medical Center	64	1,095	2,720	777	583	441	375	3,879	2,176	6,055
Porter Medical Center	121	432	1,203	389	330	251	219	1,756	1,189	2,945
Rutland Regional Medical Center	332	3,044	6,358	2,434	2,168	1,690	2,072	9,734	8,364	18,098
Southwestern Vermont Medical Center	83	1,872	3,864	1,229	1,070	767	681	5,819	3,747	9,566
Springfield Hospital	80	531	1,093	307	292	161	141	1,704	901	2,605
University of Vermont Medical Center	2,534	9,264	19,021	8,815	7,724	5,790	7,590	30,819	29,919	60,738
Total	3,627	22,522	46,041	17,998	15,638	11,487	13,721	72,190	58,844	131,034

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**  
**2017 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents**  
**Vermont Hospitals by Principal Payer**

Vermont Hospital	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%
Brattleboro Memorial Hospital	2,227	44.9%	908	18.3%	20	0.4%	38	0.8%	1,737	35.0%	13	0.3%	15	0.3%	4,958	3.8%
Central Vermont Medical Center	3,464	36.4%	1,364	14.3%	162	1.7%	71	0.7%	4,411	46.3%	54	0.6%	-	0.0%	9,526	7.3%
Copley Hospital	969	21.7%	601	13.4%	30	0.7%	89	2.0%	1,400	31.3%	1,386	31.0%	-	0.0%	4,475	3.4%
Gifford Medical Center	703	36.9%	316	16.6%	18	0.9%	21	1.1%	833	43.7%	14	0.7%	-	0.0%	1,905	1.5%
Grace Cottage Hospital	1	12.5%	2	25.0%	-	0.0%	-	0.0%	5	62.5%	-	0.0%	-	0.0%	8	0.0%
Mt. Ascutney Hospital and Health Center	744	48.9%	109	7.2%	-	0.0%	4	0.3%	658	43.2%	4	0.3%	3	0.2%	1,522	1.2%
North Country Hospital	1,923	47.4%	771	19.0%	34	0.8%	30	0.7%	1,289	31.8%	12	0.3%	-	0.0%	4,059	3.1%
Northeastern Vermont Regional Hospital	1,785	39.0%	817	17.9%	15	0.3%	45	1.0%	1,885	41.2%	27	0.6%	-	0.0%	4,574	3.5%
Northwestern Medical Center	2,152	35.5%	834	13.8%	78	1.3%	51	0.8%	2,798	46.2%	39	0.6%	103	1.7%	6,055	4.6%
Porter Medical Center	1,153	39.2%	201	6.8%	14	0.5%	-	0.0%	1,554	52.8%	19	0.6%	4	0.1%	2,945	2.2%
Rutland Regional Medical Center	9,575	52.9%	2,466	13.6%	128	0.7%	190	1.0%	5,611	31.0%	128	0.7%	-	0.0%	18,098	13.8%
Southwestern Vermont Medical Center	3,833	40.1%	1,207	12.6%	61	0.6%	69	0.7%	4,356	45.5%	40	0.4%	-	0.0%	9,566	7.3%
Springfield Hospital	1,010	38.8%	447	17.2%	25	1.0%	15	0.6%	1,051	40.3%	57	2.2%	-	0.0%	2,605	2.0%
University of Vermont Medical Center	29,684	48.9%	4,954	8.2%	676	1.1%	608	1.0%	21,425	35.3%	281	0.5%	3,110	5.1%	60,738	46.4%
Total	59,223	45.2%	14,997	11.4%	1,261	1.0%	1,231	0.9%	49,013	37.4%	2,074	1.6%	3,235	2.5%	131,034	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**  
**2017 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	517	69.7%	76	10.2%	3	0.4%	2	0.3%	135	18.2%	2	0.3%	7	0.9%	742	0.6%
Neoplasms	7,695	58.6%	923	7.0%	96	0.7%	2	0.0%	4,369	33.2%	23	0.2%	33	0.3%	13,141	10.0%
Endocrine, nutritional, metabolic, immunity	1,169	61.3%	148	7.8%	14	0.7%	1	0.1%	513	26.9%	8	0.4%	54	2.8%	1,907	1.5%
Diseases of the blood & blood-forming organs	368	57.2%	67	10.4%	4	0.6%	-	0.0%	201	31.3%	3	0.5%	-	0.0%	643	0.5%
Mental disorders	484	53.0%	145	15.9%	9	1.0%	1	0.1%	271	29.6%	2	0.2%	2	0.2%	914	0.7%
Diseases of the nervous system and sense organs	10,359	66.2%	1,455	9.3%	103	0.7%	162	1.0%	3,490	22.3%	34	0.2%	41	0.3%	15,644	11.9%
Diseases of the circulatory system	2,165	54.3%	316	7.9%	46	1.2%	3	0.1%	1,360	34.1%	12	0.3%	85	2.1%	3,987	3.0%
Diseases of the respiratory system	5,786	49.9%	1,571	13.6%	166	1.4%	8	0.1%	3,979	34.3%	55	0.5%	20	0.2%	11,585	8.8%
Diseases of the digestive system	4,546	35.7%	1,881	14.8%	148	1.2%	65	0.5%	5,978	46.9%	78	0.6%	51	0.4%	12,747	9.7%
Diseases of the genitourinary system	3,745	34.0%	977	8.9%	88	0.8%	1	0.0%	3,386	30.7%	68	0.6%	2,757	25.0%	11,022	8.4%
Pregnancy, childbirth, and the puerperium	81	1.6%	2,446	47.2%	50	1.0%	3	0.1%	2,537	49.0%	60	1.2%	4	0.1%	5,181	4.0%
Diseases of the skin and subcutaneous tissue	3,056	74.1%	287	7.0%	14	0.3%	4	0.1%	720	17.5%	23	0.6%	18	0.4%	4,122	3.1%
Musculoskeletal system and connective tissue	10,636	56.6%	1,557	8.3%	227	1.2%	639	3.4%	5,648	30.0%	79	0.4%	20	0.1%	18,806	14.4%
Congenital anomalies	45	12.5%	119	33.0%	7	1.9%	-	0.0%	187	51.8%	3	0.8%	-	0.0%	361	0.3%
Conditions originating in the perinatal period	-	0.0%	56	33.3%	1	0.6%	-	0.0%	75	44.6%	36	21.4%	-	0.0%	168	0.1%
Injury & poisoning	1,219	23.3%	817	15.6%	57	1.1%	333	6.4%	2,620	50.1%	89	1.7%	95	1.8%	5,230	4.0%
Symptoms, signs & ill-defined conditions	6,877	29.2%	2,006	8.5%	212	0.9%	5	0.0%	13,008	55.1%	1,438	6.1%	45	0.2%	23,591	18.0%
Residual codes, unclassified, all Ecodes	475	38.2%	150	12.1%	16	1.3%	2	0.2%	536	43.1%	61	4.9%	3	0.2%	1,243	0.9%
<b>Total</b>	<b>59,223</b>	<b>45.2%</b>	<b>14,997</b>	<b>11.4%</b>	<b>1,261</b>	<b>1.0%</b>	<b>1,231</b>	<b>0.9%</b>	<b>49,013</b>	<b>37.4%</b>	<b>2,074</b>	<b>1.6%</b>	<b>3,235</b>	<b>2.5%</b>	<b>131,034</b>	<b>100.0%</b>

"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**  
**2017 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															
	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%
Operations on the nervous system	5,777	45.2%	1,520	11.9%	165	1.3%	541	4.2%	4,721	36.9%	48	0.4%	16	0.1%	12,788	9.8%
Operations on the endocrine system	105	32.4%	29	9.0%	7	2.2%	-	0.0%	180	55.6%	2	0.6%	1	0.3%	324	0.2%
Operations on the eye	6,490	81.1%	283	3.5%	44	0.6%	-	0.0%	1,126	14.1%	8	0.1%	49	0.6%	8,000	6.1%
Operations on the ear	1,814	59.6%	510	16.8%	18	0.6%	-	0.0%	684	22.5%	12	0.4%	6	0.2%	3,044	2.3%
Operations on the nose, mouth, and pharynx	1,193	37.1%	714	22.2%	45	1.4%	2	0.1%	1,244	38.7%	15	0.5%	3	0.1%	3,216	2.5%
Operations on the respiratory system	6,674	55.3%	1,326	11.0%	157	1.3%	12	0.1%	3,822	31.7%	54	0.4%	21	0.2%	12,066	9.2%
Operations on the cardiovascular system	4,635	52.4%	796	9.0%	79	0.9%	4	0.0%	2,967	33.5%	17	0.2%	351	4.0%	8,849	6.8%
Operations on the hemic and lymphatic system	129	47.6%	25	9.2%	5	1.8%	1	0.4%	110	40.6%	-	0.0%	1	0.4%	271	0.2%
Operations on the digestive system	11,793	31.2%	3,640	9.6%	365	1.0%	63	0.2%	19,188	50.7%	141	0.4%	2,655	7.0%	37,845	28.9%
Operations on the urinary system	3,494	68.1%	351	6.8%	51	1.0%	-	0.0%	1,184	23.1%	25	0.5%	26	0.5%	5,131	3.9%
Operations on the male genital organs	492	37.3%	221	16.8%	12	0.9%	5	0.4%	535	40.6%	52	3.9%	1	0.1%	1,318	1.0%
Operations on the female genital organs	831	13.7%	1,292	21.4%	73	1.2%	1	0.0%	3,770	62.3%	67	1.1%	14	0.2%	6,048	4.6%
Obstetrical procedures	51	1.2%	2,067	50.0%	37	0.9%	2	0.0%	1,932	46.8%	43	1.0%	-	0.0%	4,132	3.2%
Operations on the musculoskeletal system	8,074	52.1%	1,430	9.2%	158	1.0%	583	3.8%	5,113	33.0%	117	0.8%	31	0.2%	15,506	11.8%
Operations on the integumentary system	7,671	61.4%	793	6.3%	45	0.4%	17	0.1%	2,437	19.5%	1,473	11.8%	60	0.5%	12,496	9.5%
Total	59,223	45.2%	14,997	11.4%	1,261	1.0%	1,231	0.9%	49,013	37.4%	2,074	1.6%	3,235	2.5%	131,034	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**  
**2017 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
2 Insertion, replacem, rem of extracranial ventricular shunt															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	13	13
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 2,117	\$ 2,117
3 Laminectomy, excision intervertebral disc															
N	3	9	-	7	-	-	-	-	10	-	65	-	-	229	323
Avg\$	\$ 12,794	\$ 19,497	-	\$ 29,994	-	-	-	-	\$ 14,462	-	\$ 14,728	-	-	\$ 16,208	\$ 16,215
4 Diagnostic spinal tap															
N	2	18	4	10	-	-	6	-	-	-	11	-	-	7	58
Avg\$	\$ 1,004	\$ 2,958	\$ 1,105	\$ 3,792	-	-	\$ 5,055	-	-	-	\$ 3,344	-	-	\$ 7,874	\$ 3,790
5 Insert cath, spinal stimulator, inject into spinal canal															
N	-	427	84	40	-	45	149	146	244	-	798	439	-	1,809	4,181
Avg\$	-	\$ 1,099	\$ 1,216	\$ 2,631	-	\$ 1,917	\$ 2,904	\$ 1,770	\$ 692	-	\$ 1,728	\$ 2,615	-	\$ 1,938	\$ 1,831
6 Decompression peripheral nerve															
N	91	159	107	47	-	-	99	91	162	54	198	16	79	533	1,636
Avg\$	\$ 4,438	\$ 6,328	\$ 3,340	\$ 9,617	-	-	\$ 7,225	\$ 8,223	\$ 3,372	\$ 6,399	\$ 3,736	\$ 3,803	\$ 2,066	\$ 4,913	\$ 4,986
7 Other diagnostic nervous system procedures															
N	-	8	-	-	-	9	-	-	15	-	573	-	-	1,849	2,454
Avg\$	-	\$ 6,023	-	-	-	\$ 7,430	-	-	\$ 502	-	\$ 997	-	-	\$ 1,867	\$ 1,690
8 Other non-OR or closed therapeutic nerv syst procs															
N	4	257	60	14	-	19	52	121	11	1	296	13	-	1,451	2,299
Avg\$	\$ 658	\$ 1,859	\$ 1,311	\$ 2,051	-	\$ 4,771	\$ 3,715	\$ 1,884	\$ 1,139	\$ 1,980	\$ 2,050	\$ 3,213	-	\$ 5,188	\$ 4,041
9 Other OR therapeutic nervous system procedures															
N	3	19	6	3	-	11	1	65	4	2	243	6	2	1,459	1,824
Avg\$	\$ 6,712	\$ 12,817	\$ 17,560	\$ 24,048	-	\$ 5,802	\$ 6,156	\$ 3,321	\$ 7,174	\$ 8,559	\$ 4,418	\$ 5,288	\$ 35,322	\$ 8,314	\$ 7,719
10 Thyroidectomy, partial or complete															
N	-	7	-	1	-	-	-	-	4	4	14	6	-	138	174
Avg\$	-	\$ 14,989	-	\$ 60,573	-	-	-	-	\$ 18,456	\$ 42,481	\$ 15,318	\$ 20,964	-	\$ 13,562	\$ 15,064
11 Diagnostic endocrine procedures															
N	-	-	-	-	-	-	-	3	-	-	39	-	-	7	49
Avg\$	-	-	-	-	-	-	-	\$ 406	-	-	\$ 937	-	-	\$ 896	\$ 899
12 Other therapeutic endocrine procedures															
N	2	2	-	-	-	-	1	-	-	1	14	14	-	67	101
Avg\$	\$ 5,237	\$ 11,604	-	-	-	-	\$ 12,326	-	-	\$ 19,690	\$ 9,643	\$ 27,735	-	\$ 12,533	\$ 14,145
13 Corneal transplant															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	4	4
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 26,236	\$ 26,236

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**  
**2017 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
14 Glaucoma procedures															
N	4	89	-	-	-	-	4	-	1	1	40	-	3	202	344
Avg\$	\$ 3,483	\$ 777	-	-	-	-	\$ 17,629	-	\$ 4,325	\$ 9,733	\$ 1,499	-	\$ 4,698	\$ 3,802	\$ 2,935
15 Lens & cataract procedures															
N	452	671	103	172	-	363	383	439	296	430	351	-	122	622	4,404
Avg\$	\$ 6,604	\$ 5,688	\$ 5,249	\$ 6,466	-	\$ 5,421	\$ 7,130	\$ 11,145	\$ 5,042	\$ 4,518	\$ 5,932	-	\$ 3,976	\$ 4,960	\$ 6,161
16 Repair of retinal tear, detachment															
N	-	9	-	-	-	-	-	-	-	-	-	-	-	176	185
Avg\$	-	\$ 1,177	-	-	-	-	-	-	-	-	-	-	-	\$ 11,426	\$ 10,927
17 Destruction of lesion of retina & choroid															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	52	52
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 4,291	\$ 4,291
18 Diagnostic procedures on eye															
N	-	-	-	-	-	-	-	-	-	-	8	-	-	37	45
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 1,618	-	-	\$ 2,374	\$ 2,240
19 Other therapeutic procedures on eyelids, conjunctiva, cornea															
N	4	3	-	-	-	-	1	1	5	29	60	5	1	286	395
Avg\$	\$ 5,810	\$ 8,265	-	-	-	-	\$ 7,037	\$ 8,158	\$ 3,807	\$ 5,073	\$ 2,487	\$ 4,699	\$ 4,497	\$ 5,680	\$ 5,142
20 Other intraocular therapeutic procedures															
N	-	1	-	-	-	-	1	-	1	-	-	-	1	2,459	2,463
Avg\$	-	\$ 1,079	-	-	-	-	\$ 9,487	-	\$ 5,686	-	-	-	\$ 4,625	\$ 5,921	\$ 5,920
21 Other extraocular muscle & orbit therapeutic procedures															
N	-	-	-	52	-	-	-	-	-	-	-	-	-	56	108
Avg\$	-	-	-	\$ 13,193	-	-	-	-	-	-	-	-	-	\$ 3,171	\$ 7,996
22 Tympanoplasty															
N	-	11	-	-	-	-	1	2	-	3	15	5	1	39	77
Avg\$	-	\$ 8,271	-	-	-	-	\$ 13,007	\$ 6,297	-	\$ 22,106	\$ 8,078	\$ 4,689	\$ 14,526	\$ 16,467	\$ 12,782
23 Myringotomy															
N	2	38	-	-	-	-	15	18	-	42	113	16	19	571	834
Avg\$	\$ 4,721	\$ 5,019	-	-	-	-	\$ 6,288	\$ 6,228	-	\$ 5,513	\$ 1,953	\$ 3,113	\$ 2,442	\$ 3,514	\$ 3,551
24 Mastoidectomy															
N	-	1	-	-	-	-	1	-	-	-	1	-	-	13	16
Avg\$	-	\$ 14,925	-	-	-	-	\$ 19,244	-	-	-	\$ 15,217	-	-	\$ 25,584	\$ 23,874
26 Other therapeutic ear procedures															
N	38	2	-	-	-	-	-	-	-	3	1,284	2	2	786	2,117
Avg\$	\$ 159	\$ 7,663	-	-	-	-	-	-	-	\$ 7,264	\$ 238	\$ 8,665	\$ 2,008	\$ 3,962	\$ 1,646

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**  
**2017 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
27 Control of epistaxis															
N	1	1	-	-	-	-	3	3	-	-	121	-	-	44	173
Avg\$	\$ 375	\$ 5,848	-	-	-	-	\$ 10,648	\$ 8,614	-	-	\$ 737	-	-	\$ 1,742	\$ 1,329
28 Plastic procedures on nose															
N	-	4	-	-	-	-	11	3	-	17	55	11	2	57	160
Avg\$	-	\$ 11,604	-	-	-	-	\$ 10,861	\$ 20,285	-	\$ 12,767	\$ 9,304	\$ 8,237	\$ 9,331	\$ 11,305	\$ 10,682
29 Dental procedures															
N	4	1	-	-	-	-	2	-	-	-	2	2	-	30	41
Avg\$	\$ 13,495	\$ 1,558	-	-	-	-	\$ 1,353	-	-	-	\$ 3,455	\$ 6,526	-	\$ 12,316	\$ 10,919
30 Tonsillectomy and/or adenoidectomy															
N	1	57	-	-	-	-	36	15	2	50	112	23	26	244	566
Avg\$	\$ 8,456	\$ 8,673	-	-	-	-	\$ 7,912	\$ 14,205	\$ 5,614	\$ 8,975	\$ 6,822	\$ 6,010	\$ 6,223	\$ 5,772	\$ 6,949
31 Diagnostic procedures on nose, mouth & pharynx															
N	3	15	5	10	1	3	23	16	-	11	971	19	4	836	1,917
Avg\$	\$ 201	\$ 1,433	\$ 286	\$ 357	\$ 520	\$ 268	\$ 605	\$ 236	-	\$ 472	\$ 349	\$ 6,295	\$ 9,285	\$ 1,111	\$ 770
32 Other non-OR therapeutic procedures on nose, mouth & pharynx															
N	4	3	-	-	-	-	-	-	1	1	7	-	1	6	23
Avg\$	\$ 11,700	\$ 1,118	-	-	-	-	-	-	\$ 267	\$ 4,580	\$ 1,937	-	\$ 1,966	\$ 3,565	\$ 3,996
33 Other OR therapeutic procedures on nose, mouth & pharynx															
N	1	29	-	-	-	-	15	1	1	26	53	8	8	194	336
Avg\$	\$ 8,479	\$ 12,716	-	-	-	-	\$ 6,828	\$ 9,142	\$ 894	\$ 10,782	\$ 5,638	\$ 6,928	\$ 7,955	\$ 12,572	\$ 10,794
34 Tracheostomy, temporary & permanent															
N	-	-	-	-	-	-	-	-	-	-	6	-	-	4	10
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 9,135	-	-	\$ 8,039	\$ 8,696
35 Tracheoscopy & laryngoscopy with biopsy															
N	-	42	-	-	-	-	1	-	1	1	905	1	2	604	1,557
Avg\$	-	\$ 2,191	-	-	-	-	\$ 1,526	-	\$ 3,864	\$ 7,207	\$ 468	\$ 8,027	\$ 4,098	\$ 914	\$ 704
37 Diagnostic bronchoscopy & biopsy of bronchus															
N	-	6	-	-	-	-	17	-	7	-	34	14	-	233	311
Avg\$	-	\$ 6,715	-	-	-	-	\$ 14,478	-	\$ 2,434	-	\$ 8,110	\$ 4,910	-	\$ 8,644	\$ 8,560
38 Other diagnostic procedures on lung & bronchus															
N	229	492	75	153	-	102	489	285	503	43	893	1,756	285	4,515	9,820
Avg\$	\$ 408	\$ 740	\$ 596	\$ 1,365	-	\$ 576	\$ 1,307	\$ 1,131	\$ 266	\$ 647	\$ 1,030	\$ 314	\$ 542	\$ 1,014	\$ 824
39 Incision of pleura, thoracentesis, chest drainage															
N	5	5	1	-	-	-	24	3	9	2	19	25	3	138	234
Avg\$	\$ 4,036	\$ 5,561	\$ 1,085	-	-	-	\$ 4,207	\$ 7,035	\$ 1,354	\$ 2,206	\$ 2,728	\$ 2,527	\$ 2,609	\$ 3,552	\$ 3,422

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**  
**2017 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
40 Other diagnostic proc of respiratory tract & mediastinum															
N	-	-	-	-	-	-	2	-	-	-	4	-	-	3	9
Avg\$	-	-	-	-	-	-	\$ 12,540	-	-	-	\$ 146	-	-	\$ 8,158	\$ 5,571
41 Other non-OR therapeutic procedures on respiratory system															
N	-	-	-	-	-	-	3	-	-	-	1	-	-	7	11
Avg\$	-	-	-	-	-	-	\$ 4,970	-	-	-	\$ 449	-	-	\$ 1,776	\$ 2,527
42 Other OR therapeutic procedures on respiratory system															
N	1	7	-	-	-	-	-	-	2	3	10	1	-	90	114
Avg\$	\$ 230	\$ 7,906	-	-	-	-	-	-	\$ 3,302	\$ 8,547	\$ 8,117	\$ 7,156	-	\$ 10,943	\$ 10,184
43 Heart valve procedures															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 35,512	\$ 35,512
45 Percutaneous transluminal coronary angioplasty (PTCA)															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	19	19
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 39,553	\$ 39,553
47 Diagnostic cardiac catheterization, coronary arteriography															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1,062	1,062
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 24,360	\$ 24,360
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib															
N	-	307	-	56	-	-	355	49	208	1	93	12	105	861	2,047
Avg\$	-	\$ 3,474	-	\$ 689	-	-	\$ 1,629	\$ 4,488	\$ 1,576	\$ 17,681	\$ 18,095	\$ 18,498	\$ 866	\$ 14,898	\$ 8,340
49 Other OR heart procedures															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	13	13
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 44,386	\$ 44,386
53 Varicose vein stripping, lower limb															
N	11	17	-	-	-	2	7	1	-	-	1	1	-	179	219
Avg\$	\$ 7,521	\$ 12,097	-	-	-	\$ 29,056	\$ 11,150	\$ 24,670	-	-	\$ 10,004	\$ 13,304	-	\$ 10,651	\$ 10,864
54 Other vascular catheterization, not heart															
N	14	91	5	7	-	7	22	19	3	1	101	88	6	708	1,072
Avg\$	\$ 6,900	\$ 8,816	\$ 4,646	\$ 13,395	-	\$ 11,538	\$ 11,269	\$ 16,013	\$ 2,853	\$ 13,448	\$ 7,243	\$ 8,359	\$ 11,845	\$ 12,180	\$ 11,038
56 Other vascular bypass & shunt, not heart															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	5	5
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 6,454	\$ 6,454
57 Creat, revis, rem of arterioven fistula or cannula for dialys															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	280	280
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 12,482	\$ 12,482

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 Column headers denote hospitals: see Appendix K.  
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**2017 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
58 Hemodialysis															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	24	25
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 6,965	-	\$ 9,194	\$ 9,105
59 Other OR procedures on vessels of head & neck															
N	4	9	4	5	-	-	2	1	8	2	11	10	2	37	95
Avg\$	\$ 840	\$ 4,413	\$ 2,163	\$ 11,908	-	-	\$ 6,580	\$ 11,249	\$ 2,036	\$ 5,665	\$ 4,128	\$ 1,245	\$ 7,046	\$ 2,863	\$ 3,591
60 Embolectomy & endarterectomy of lower limbs															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 7,661	\$ 7,661
61 Other OR procedures on vessels other than head & neck															
N	-	-	-	-	-	-	-	-	-	-	16	-	-	251	267
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 16,101	-	-	\$ 34,586	\$ 33,478
62 Other diagnostic cardiovascular procedures															
N	84	42	-	21	-	-	1	1	-	-	137	51	-	213	550
Avg\$	\$ 677	\$ 2,393	-	\$ 644	-	-	\$ 194	\$ 2,626	-	-	\$ 3,281	\$ 181	-	\$ 9,475	\$ 4,819
63 Other non-OR therapeutic cardiovascular procedures															
N	61	112	56	8	-	2	226	727	160	84	478	294	73	912	3,193
Avg\$	\$ 2,511	\$ 1,867	\$ 319	\$ 5,958	-	\$ 7,860	\$ 1,110	\$ 1,322	\$ 466	\$ 627	\$ 1,905	\$ 719	\$ 394	\$ 1,755	\$ 1,420
64 Bone marrow transplant															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	38	38
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 9,133	\$ 9,133
65 Bone marrow biopsy															
N	4	6	-	-	-	-	-	-	-	-	13	5	-	39	67
Avg\$	\$ 7,582	\$ 4,371	-	-	-	-	-	-	-	-	\$ 4,858	\$ 5,844	-	\$ 8,551	\$ 7,201
67 Other therap procedures, hemic & lymphatic system															
N	5	7	1	1	-	2	9	4	3	3	36	14	2	79	166
Avg\$	\$ 11,300	\$ 13,266	\$ 20,527	\$ 28,404	-	\$ 30,199	\$ 11,813	\$ 9,072	\$ 4,812	\$ 16,235	\$ 10,694	\$ 7,119	\$ 12,402	\$ 13,304	\$ 12,198
68 Injection or ligation of esophageal varices															
N	1	1	1	-	-	-	-	-	-	-	8	2	-	26	39
Avg\$	\$ 3,268	\$ 3,771	\$ 1,706	-	-	-	-	-	-	-	\$ 4,515	\$ 2,666	-	\$ 3,871	\$ 3,868
69 Esophageal dilatation															
N	53	54	3	1	-	4	12	4	16	2	57	11	3	253	473
Avg\$	\$ 3,397	\$ 4,353	\$ 1,944	\$ 3,273	-	\$ 1,189	\$ 5,571	\$ 4,973	\$ 3,250	\$ 5,347	\$ 4,975	\$ 2,795	\$ 3,939	\$ 5,438	\$ 4,821
70 Upper gastrointestinal endoscopy, biopsy															
N	229	458	144	64	-	147	166	108	580	119	497	581	200	2,083	5,376
Avg\$	\$ 3,302	\$ 3,768	\$ 2,173	\$ 3,582	-	\$ 3,165	\$ 5,381	\$ 4,079	\$ 2,159	\$ 4,085	\$ 4,409	\$ 2,192	\$ 2,260	\$ 3,694	\$ 3,380

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

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
71 Gastrostomy, temporary & permanent															
N	1	9	1	-	-	-	-	2	8	-	13	5	-	58	97
Avg\$	\$ 1,571	\$ 3,599	\$ 850	-	-	-	-	\$ 13,820	\$ 362	-	\$ 1,373	\$ 5,838	-	\$ 2,539	\$ 2,677
72 Colostomy, temporary & permanent															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 6,913	-	-	\$ 6,913
73 Ileostomy & other enterostomy															
N	-	-	-	-	-	-	-	-	-	-	4	-	-	11	15
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 4,856	-	-	\$ 1,988	\$ 2,753
76 Colonoscopy & biopsy															
N	1,044	2,570	807	404	-	584	875	831	1,803	1,179	2,187	2,602	804	8,346	24,036
Avg\$	\$ 3,532	\$ 4,671	\$ 2,148	\$ 4,780	-	\$ 3,116	\$ 5,300	\$ 4,901	\$ 1,596	\$ 4,113	\$ 4,770	\$ 2,834	\$ 2,340	\$ 4,033	\$ 3,784
77 Proctoscopy & anorectal biopsy															
N	27	36	22	3	-	10	11	10	32	4	37	41	27	361	621
Avg\$	\$ 1,880	\$ 2,436	\$ 1,053	\$ 5,200	-	\$ 2,405	\$ 4,778	\$ 3,938	\$ 899	\$ 5,747	\$ 1,220	\$ 1,468	\$ 1,943	\$ 1,585	\$ 1,731
78 Colorectal resection															
N	1	-	-	-	-	-	1	-	-	1	1	2	-	3	9
Avg\$	\$ 10,021	-	-	-	-	-	\$ 7,843	-	-	\$ 12,445	\$ 6,969	\$ 6,268	-	\$ 14,957	\$ 10,521
79 Local excision of large intestine lesion (not endoscopic)															
N	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Avg\$	\$ 9,709	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 9,709
80 Appendectomy															
N	10	5	1	-	-	10	1	1	1	2	3	7	-	21	62
Avg\$	\$ 10,174	\$ 15,817	\$ 14,739	-	-	\$ 15,804	\$ 20,228	\$ 26,194	\$ 12,719	\$ 28,687	\$ 13,046	\$ 12,383	-	\$ 16,761	\$ 15,289
81 Hemorrhoid procedures															
N	11	12	-	2	-	6	12	10	21	8	19	13	6	78	198
Avg\$	\$ 3,567	\$ 5,836	-	\$ 8,972	-	\$ 9,075	\$ 9,232	\$ 8,243	\$ 3,112	\$ 11,759	\$ 3,734	\$ 6,606	\$ 10,335	\$ 3,499	\$ 5,182
82 Endoscopic retrograde cannulation of pancreas (ERCP)															
N	2	1	-	-	-	-	1	-	-	-	-	29	-	115	148
Avg\$	\$ 10,156	\$ 13,813	-	-	-	-	\$ 4,804	-	-	-	-	\$ 12,834	-	\$ 12,782	\$ 12,710
84 Cholecystectomy & common duct exploration															
N	49	115	31	13	-	25	50	48	136	23	92	111	39	193	925
Avg\$	\$ 10,844	\$ 14,808	\$ 13,693	\$ 30,925	-	\$ 17,201	\$ 19,783	\$ 26,737	\$ 9,498	\$ 28,361	\$ 9,644	\$ 10,166	\$ 11,866	\$ 11,409	\$ 13,392
85 Inguinal & femoral hernia repair															
N	62	111	49	31	-	30	54	40	114	55	119	102	36	286	1,089
Avg\$	\$ 7,803	\$ 11,482	\$ 16,429	\$ 27,423	-	\$ 16,945	\$ 18,369	\$ 16,309	\$ 8,673	\$ 22,591	\$ 9,675	\$ 12,212	\$ 7,929	\$ 9,865	\$ 12,214

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
86 Other hernia repair															
N	26	75	20	15	-	22	45	46	110	28	100	108	34	253	882
Avg\$	\$ 7,764	\$ 10,896	\$ 13,747	\$ 25,655	-	\$ 17,326	\$ 13,482	\$ 20,756	\$ 7,662	\$ 18,095	\$ 11,221	\$ 9,969	\$ 9,729	\$ 10,861	\$ 11,619
87 Laparoscopy															
N	5	1	-	-	-	1	6	2	11	-	2	-	3	14	45
Avg\$	\$ 6,959	\$ 19,656	-	-	-	\$ 13,796	\$ 12,913	\$ 18,841	\$ 6,813	-	\$ 6,639	-	\$ 9,976	\$ 11,990	\$ 10,432
88 Abdominal paracentesis															
N	13	12	13	-	-	-	23	5	4	-	36	106	-	140	352
Avg\$	\$ 4,080	\$ 1,744	\$ 932	-	-	-	\$ 1,338	\$ 8,547	\$ 1,046	-	\$ 1,846	\$ 2,443	-	\$ 1,697	\$ 2,065
89 Exploratory laparotomy															
N	-	-	-	-	-	-	1	-	2	-	-	-	-	-	3
Avg\$	-	-	-	-	-	-	\$ 8,843	-	\$ 12,133	-	-	-	-	-	\$ 11,036
91 Peritoneal dialysis															
N	-	-	-	-	-	-	-	-	-	-	-	126	-	2,532	2,658
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 33,927	-	\$ 9,693	\$ 10,842
92 Other bowel diagnostic procedures															
N	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Avg\$	\$ 11,597	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 11,597
93 Other non-OR upper GI therapeutic procedures															
N	1	-	1	-	-	-	1	-	-	-	5	-	-	18	26
Avg\$	\$ 4,115	-	\$ 1,752	-	-	-	\$ 6,468	-	-	-	\$ 4,326	-	-	\$ 4,454	\$ 4,390
94 Other OR upper GI therapeutic procedures															
N	-	3	-	-	-	3	-	-	3	-	1	-	-	37	47
Avg\$	-	\$ 1,363	-	-	-	\$ 26,637	-	-	\$ 19,079	-	\$ 16,296	-	-	\$ 15,135	\$ 15,267
95 Other non-OR lower GI therapeutic procedures															
N	4	6	-	-	-	1	3	2	1	4	8	2	1	30	62
Avg\$	\$ 5,174	\$ 7,071	-	-	-	\$ 16,606	\$ 6,603	\$ 9,833	\$ 1,576	\$ 8,321	\$ 7,280	\$ 5,396	\$ 5,519	\$ 3,674	\$ 5,465
96 Other OR lower GI therapeutic procedures															
N	13	7	-	2	-	5	6	7	18	7	23	10	2	89	189
Avg\$	\$ 5,490	\$ 5,224	-	\$ 6,944	-	\$ 7,940	\$ 7,823	\$ 9,678	\$ 4,466	\$ 10,581	\$ 7,461	\$ 5,372	\$ 5,155	\$ 5,478	\$ 6,105
97 Other gastrointestinal diagnostic procedures															
N	2	17	-	-	-	-	3	-	-	-	1	2	-	265	290
Avg\$	\$ 4,348	\$ 1,957	-	-	-	-	\$ 7,410	-	-	-	\$ 4,975	\$ 3,487	-	\$ 2,870	\$ 2,885
98 Other non-OR gastrointestinal therapeutic procedures															
N	-	15	-	-	-	-	-	-	-	-	-	-	-	52	67
Avg\$	-	\$ 4,414	-	-	-	-	-	-	-	-	-	-	-	\$ 4,479	\$ 4,464

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
99 Other OR gastrointestinal therapeutic procedures															
N	-	-	-	-	-	2	1	1	2	-	12	4	-	111	133
Avg\$	-	-	-	-	-	\$ 11,889	\$ 8,459	\$ 10,252	\$ 7,784	-	\$ 2,361	\$ 6,181	-	\$ 8,584	\$ 7,999
100 Endoscopy & endoscopic biopsy of the urinary tract															
N	70	35	9	12	-	-	3	21	8	13	320	15	16	787	1,309
Avg\$	\$ 1,687	\$ 6,273	\$ 5,356	\$ 11,216	-	-	\$ 9,989	\$ 12,463	\$ 5,918	\$ 13,801	\$ 1,891	\$ 7,880	\$ 3,950	\$ 2,020	\$ 2,609
101 Transurethral excision, drainage, rem urinary obstruction															
N	28	32	13	15	-	-	3	26	24	29	98	36	23	295	622
Avg\$	\$ 7,155	\$ 8,974	\$ 8,272	\$ 16,782	-	-	\$ 9,297	\$ 15,746	\$ 5,724	\$ 15,658	\$ 5,081	\$ 7,800	\$ 9,063	\$ 5,102	\$ 7,022
102 Ureteral catheterization															
N	17	42	5	9	-	-	2	17	13	11	9	14	4	139	282
Avg\$	\$ 7,753	\$ 8,589	\$ 8,185	\$ 9,569	-	-	\$ 15,431	\$ 10,105	\$ 6,634	\$ 14,171	\$ 8,228	\$ 6,847	\$ 8,442	\$ 9,365	\$ 9,113
103 Nephrotomy & nephrostomy															
N	1	-	-	-	-	-	-	-	-	-	1	1	-	100	103
Avg\$	\$ 22,307	-	-	-	-	-	-	-	-	-	\$ 7,554	\$ 18,171	-	\$ 8,275	\$ 8,500
104 Nephrectomy, partial or complete															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 25,247	-	-	\$ 25,247
106 Genitourinary incontinence procedures															
N	2	4	-	23	-	-	20	8	4	6	13	4	7	106	197
Avg\$	\$ 11,253	\$ 11,658	-	\$ 21,093	-	-	\$ 13,380	\$ 12,508	\$ 8,987	\$ 16,093	\$ 11,524	\$ 11,303	\$ 11,409	\$ 17,205	\$ 16,005
107 Extracorporeal lithotripsy, urinary															
N	32	126	30	36	-	-	5	18	23	33	147	74	33	298	855
Avg\$	\$ 12,468	\$ 15,727	\$ 7,953	\$ 9,622	-	-	\$ 21,629	\$ 23,053	\$ 7,486	\$ 17,113	\$ 15,966	\$ 15,432	\$ 10,606	\$ 13,312	\$ 14,072
108 Indwelling catheter															
N	22	1	26	-	-	-	4	-	1	-	64	-	-	320	438
Avg\$	\$ 227	\$ 6,859	\$ 122	-	-	-	\$ 273	-	\$ 185	-	\$ 231	-	-	\$ 477	\$ 420
109 Procedures on the urethra															
N	1	13	4	2	-	-	-	-	3	25	53	2	1	97	201
Avg\$	\$ 509	\$ 6,156	\$ 5,651	\$ 10,308	-	-	-	-	\$ 5,478	\$ 10,742	\$ 1,716	\$ 7,274	\$ 2,490	\$ 5,889	\$ 5,413
110 Other diagnostic procedures of urinary tract															
N	-	-	-	-	-	-	-	-	-	-	3	-	-	10	13
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 3,285	-	-	\$ 4,292	\$ 4,059
111 Other non-OR therapeutic procedures of urinary tract															
N	1	3	36	1	-	-	-	-	-	2	89	-	-	652	784
Avg\$	\$ 231	\$ 7,752	\$ 176	\$ 7,234	-	-	-	-	-	\$ 5,187	\$ 595	-	-	\$ 976	\$ 940

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112 Other OR therapeutic procedures of urinary tract															
N	5	32	8	29	-	-	3	10	5	11	52	10	16	145	326
Avg\$	\$ 7,929	\$ 9,494	\$ 2,576	\$ 11,375	-	-	\$ 12,122	\$ 11,592	\$ 6,708	\$ 12,445	\$ 7,888	\$ 11,401	\$ 7,144	\$ 10,039	\$ 9,542
113 Transurethral resection of prostate (TURP)															
N	-	20	6	5	-	-	2	3	-	17	25	10	1	56	145
Avg\$	-	\$ 15,266	\$ 12,415	\$ 27,865	-	-	\$ 25,168	\$ 26,838	-	\$ 22,943	\$ 9,148	\$ 9,747	\$ 14,868	\$ 9,901	\$ 13,349
114 Open prostatectomy															
N	-	-	-	-	-	-	-	-	-	4	1	-	-	1	6
Avg\$	-	-	-	-	-	-	-	-	-	\$ 27,810	\$ 18,764	-	-	\$ 9,371	\$ 23,229
115 Circumcision															
N	4	40	1	1	-	-	11	18	19	31	9	20	27	101	282
Avg\$	\$ 4,893	\$ 2,715	\$ 670	\$ 17,910	-	-	\$ 4,009	\$ 5,037	\$ 1,992	\$ 1,709	\$ 6,243	\$ 1,256	\$ 1,185	\$ 7,126	\$ 4,274
116 Diagnostic procedures, male genital															
N	14	9	1	2	-	-	7	-	1	-	91	2	1	109	237
Avg\$	\$ 6,692	\$ 8,993	\$ 4,209	\$ 9,980	-	-	\$ 4,118	-	\$ 2,839	-	\$ 5,353	\$ 5,521	\$ 2,781	\$ 3,176	\$ 4,546
117 Other non-OR therapeutic procedures, male genital															
N	1	11	10	2	-	-	1	5	2	4	46	-	5	71	158
Avg\$	\$ 533	\$ 7,009	\$ 738	\$ 8,761	-	-	\$ 9,361	\$ 5,954	\$ 4,503	\$ 1,224	\$ 3,443	-	\$ 6,442	\$ 6,194	\$ 4,974
118 Other OR therapeutic procedures, male genital															
N	15	10	3	6	-	-	3	15	10	14	20	17	19	358	490
Avg\$	\$ 8,038	\$ 10,275	\$ 5,339	\$ 17,917	-	-	\$ 11,359	\$ 12,804	\$ 7,211	\$ 12,325	\$ 13,254	\$ 8,162	\$ 15,148	\$ 11,385	\$ 11,398
119 Oophorectomy, unilateral & bilateral															
N	13	1	17	13	-	-	31	25	33	20	38	22	22	152	387
Avg\$	\$ 12,114	\$ 12,165	\$ 13,297	\$ 22,564	-	-	\$ 14,583	\$ 19,529	\$ 7,551	\$ 19,032	\$ 10,986	\$ 13,439	\$ 11,903	\$ 12,957	\$ 13,446
120 Other operations on ovary															
N	-	-	-	-	-	-	3	-	-	1	-	-	-	60	64
Avg\$	-	-	-	-	-	-	\$ 3,086	-	-	\$ 25,807	-	-	-	\$ 4,140	\$ 4,429
121 Ligation of fallopian tubes															
N	21	20	7	1	-	-	1	-	26	1	4	44	-	11	136
Avg\$	\$ 7,793	\$ 10,248	\$ 10,118	\$ 17,251	-	-	\$ 20,931	-	\$ 6,258	\$ 10,006	\$ 8,884	\$ 7,527	-	\$ 8,511	\$ 8,167
122 Removal of ectopic pregnancy															
N	1	1	-	-	-	-	-	-	5	-	1	1	-	1	10
Avg\$	\$ 11,722	\$ 16,831	-	-	-	-	-	-	\$ 6,856	-	\$ 10,692	\$ 10,234	-	\$ 9,471	\$ 9,323
123 Other operations on fallopian tubes															
N	1	-	-	-	-	-	-	-	-	-	1	-	-	2	4
Avg\$	\$ 14,338	-	-	-	-	-	-	-	-	-	\$ 10,483	-	-	\$ 23,390	\$ 17,900

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124 Hysterectomy, abdominal & vaginal															
N	26	4	15	6	-	-	52	29	55	27	39	41	19	299	612
Avg\$	\$ 15,775	\$ 23,088	\$ 20,242	\$ 56,420	-	-	\$ 26,612	\$ 45,957	\$ 13,136	\$ 34,044	\$ 18,799	\$ 18,031	\$ 22,503	\$ 21,031	\$ 22,371
125 Other excision of cervix & uterus															
N	32	6	28	12	-	-	9	18	86	14	44	67	11	75	402
Avg\$	\$ 9,060	\$ 7,283	\$ 9,548	\$ 15,664	-	-	\$ 10,721	\$ 15,073	\$ 5,562	\$ 10,124	\$ 10,085	\$ 9,555	\$ 8,506	\$ 9,211	\$ 9,067
126 Abortion (termination of pregnancy)															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	32	32
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 6,710	\$ 6,710
127 D&C, aspiration after delivery or abortion															
N	13	16	14	5	-	-	14	6	27	5	11	22	5	41	179
Avg\$	\$ 5,462	\$ 7,310	\$ 7,009	\$ 7,888	-	-	\$ 8,034	\$ 9,325	\$ 4,049	\$ 5,291	\$ 7,485	\$ 4,853	\$ 5,315	\$ 6,382	\$ 6,185
128 Diagnostic dilatation & curettage (D&C)															
N	-	2	11	1	-	-	1	3	3	1	3	1	1	7	34
Avg\$	-	\$ 6,885	\$ 5,352	\$ 5,618	-	-	\$ 6,713	\$ 8,666	\$ 4,147	\$ 5,843	\$ 6,797	\$ 8,116	\$ 3,756	\$ 7,853	\$ 6,367
129 Repair cystocele & rectocele, oblit of vaginal vault															
N	-	-	-	7	-	-	8	2	17	2	-	1	1	74	112
Avg\$	-	-	-	\$ 23,616	-	-	\$ 22,638	\$ 25,311	\$ 10,854	\$ 10,028	-	\$ 16,803	\$ 14,611	\$ 12,903	\$ 14,177
130 Other diagnostic procedures, female organs															
N	66	754	14	15	-	1	32	17	60	25	447	1,236	39	355	3,061
Avg\$	\$ 7,936	\$ 1,019	\$ 4,727	\$ 11,993	-	\$ 164	\$ 6,576	\$ 9,403	\$ 4,161	\$ 8,013	\$ 1,898	\$ 778	\$ 6,039	\$ 5,877	\$ 2,120
131 Other non-OR therapeutic procedures, female organs															
N	2	1	1	-	-	-	2	-	2	1	374	-	-	267	650
Avg\$	\$ 185	\$ 1,468	\$ 6,195	-	-	-	\$ 7,556	-	\$ 4,673	\$ 4,040	\$ 2,576	-	-	\$ 1,352	\$ 2,094
132 Other OR therapeutic procedures, female organs															
N	17	4	17	4	-	-	34	-	31	4	42	19	9	194	375
Avg\$	\$ 11,468	\$ 10,402	\$ 10,615	\$ 10,511	-	-	\$ 15,844	-	\$ 6,553	\$ 11,548	\$ 5,958	\$ 11,216	\$ 11,726	\$ 9,475	\$ 9,744
135 Forceps, vacuum & breech delivery															
N	3	-	-	-	-	-	-	-	-	-	-	-	-	1	4
Avg\$	\$ 11,813	-	-	-	-	-	-	-	-	-	-	-	-	\$ 8,675	\$ 11,028
137 Other procedures to assist delivery															
N	-	-	5	-	-	-	-	2	-	3	2	5	2	29	48
Avg\$	-	-	\$ 1,271	-	-	-	-	\$ 694	-	\$ 1,665	\$ 1,969	\$ 4,766	\$ 894	\$ 3,472	\$ 2,979
138 Diagnostic amniocentesis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 1,680	\$ 1,680

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**  
**2017 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
139 Fetal monitoring															
N	615	599	375	192	-	-	214	267	1	63	125	196	139	1,252	4,038
Avg\$	\$ 554	\$ 662	\$ 484	\$ 865	-	-	\$ 676	\$ 615	\$ 435	\$ 1,043	\$ 2,393	\$ 855	\$ 397	\$ 991	\$ 798
140 Repair of current obstetric laceration															
N	-	-	-	-	-	-	-	1	-	-	-	-	-	4	5
Avg\$	-	-	-	-	-	-	-	\$ 9,787	-	-	-	-	-	\$ 6,773	\$ 7,376
141 Other therapeutic obstetrical procedures															
N	2	-	-	-	-	-	-	2	-	-	-	1	-	21	26
Avg\$	\$ 6,378	-	-	-	-	-	-	\$ 6,071	-	-	-	\$ 4,126	-	\$ 6,718	\$ 6,543
142 Partial excision bone															
N	28	33	18	19	-	3	5	31	23	9	63	29	4	202	467
Avg\$	\$ 7,745	\$ 9,794	\$ 13,349	\$ 18,310	-	\$ 8,188	\$ 10,999	\$ 15,359	\$ 5,062	\$ 12,111	\$ 10,324	\$ 9,018	\$ 6,492	\$ 11,148	\$ 10,919
143 Bunionectomy or repair of toe deformities															
N	8	32	26	75	-	7	-	27	49	24	30	33	19	169	499
Avg\$	\$ 12,232	\$ 14,081	\$ 22,697	\$ 19,056	-	\$ 13,594	-	\$ 13,878	\$ 6,828	\$ 17,137	\$ 14,312	\$ 15,887	\$ 6,124	\$ 7,614	\$ 12,305
144 Treatment, facial fracture or dislocation															
N	-	2	-	-	-	-	1	-	-	2	15	4	1	25	50
Avg\$	-	\$ 14,840	-	-	-	-	\$ 6,304	-	-	\$ 5,648	\$ 5,172	\$ 5,668	\$ 3,477	\$ 16,907	\$ 11,473
145 Treatment, fracture or disloc of radius & ulna															
N	19	67	32	8	-	-	12	22	40	30	60	33	21	106	450
Avg\$	\$ 11,356	\$ 15,585	\$ 20,613	\$ 34,825	-	-	\$ 20,292	\$ 23,813	\$ 9,105	\$ 16,222	\$ 4,346	\$ 11,112	\$ 16,157	\$ 15,242	\$ 14,220
146 Treatment, fracture or disloc of hip & femur															
N	1	3	2	-	-	-	-	-	-	-	1	-	-	8	15
Avg\$	\$ 11,286	\$ 20,491	\$ 24,650	-	-	-	-	-	-	-	\$ 12,792	-	-	\$ 19,996	\$ 19,654
147 Treatment, fracture or disloc of lower extremity															
N	19	48	44	13	-	-	16	12	40	13	69	39	11	142	466
Avg\$	\$ 13,747	\$ 17,443	\$ 18,323	\$ 31,794	-	-	\$ 25,337	\$ 22,813	\$ 10,866	\$ 28,423	\$ 6,986	\$ 12,592	\$ 13,353	\$ 15,770	\$ 15,366
148 Other fracture & dislocation procedure															
N	9	47	42	4	-	-	31	15	23	11	54	38	10	218	502
Avg\$	\$ 16,041	\$ 14,657	\$ 18,222	\$ 48,772	-	-	\$ 14,366	\$ 16,465	\$ 10,774	\$ 19,702	\$ 9,157	\$ 12,986	\$ 10,771	\$ 15,787	\$ 14,916
149 Arthroscopy															
N	20	13	39	3	-	-	4	6	24	15	69	21	9	151	374
Avg\$	\$ 13,134	\$ 21,385	\$ 24,669	\$ 40,812	-	-	\$ 38,570	\$ 42,901	\$ 23,838	\$ 47,056	\$ 13,352	\$ 22,013	\$ 21,121	\$ 19,500	\$ 20,944
150 Division of joint capsule, ligament or cartilage															
N	-	6	14	1	-	-	-	4	5	-	6	8	1	32	77
Avg\$	-	\$ 9,931	\$ 12,682	\$ 21,170	-	-	-	\$ 17,714	\$ 7,094	-	\$ 16,182	\$ 9,270	\$ 12,683	\$ 8,760	\$ 10,765

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.

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**Table O-10**  
**2017 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
151 Excision of semilunar cartilage of knee															
N	120	82	82	41	-	-	11	59	67	20	114	96	31	348	1,071
Avg\$	\$ 5,486	\$ 9,589	\$ 10,073	\$ 17,207	-	-	\$ 13,621	\$ 17,552	\$ 7,023	\$ 17,449	\$ 6,777	\$ 6,189	\$ 6,208	\$ 9,353	\$ 9,146
152 Arthroplasty knee															
N	6	3	6	1	-	-	-	2	-	1	2	4	1	10	36
Avg\$	\$ 19,560	\$ 22,799	\$ 27,878	\$ 35,496	-	-	-	\$ 40,305	-	\$ 24,822	\$ 20,161	\$ 16,202	\$ 39,810	\$ 20,008	\$ 23,305
153 Hip replacement, total & partial															
N	-	-	-	-	-	-	-	-	4	-	19	-	-	-	23
Avg\$	-	-	-	-	-	-	-	-	\$ 20,806	-	\$ 16,680	-	-	-	\$ 17,398
154 Arthroplasty other than hip or knee															
N	13	27	18	1	-	-	12	9	16	3	15	6	10	114	244
Avg\$	\$ 11,544	\$ 14,800	\$ 13,539	\$ 30,445	-	-	\$ 15,473	\$ 21,951	\$ 7,110	\$ 41,839	\$ 11,819	\$ 10,662	\$ 6,801	\$ 18,014	\$ 15,611
155 Arthrocentesis															
N	432	20	-	-	-	10	32	8	-	27	2,315	2	-	2,461	5,307
Avg\$	\$ 580	\$ 677	-	-	-	\$ 608	\$ 1,016	\$ 1,779	-	\$ 202	\$ 696	\$ 859	-	\$ 727	\$ 702
156 Injections & aspirations of muscles, tendons, etc.															
N	25	180	15	1	-	19	-	21	-	-	268	18	-	743	1,290
Avg\$	\$ 428	\$ 1,846	\$ 972	\$ 2,168	-	\$ 1,039	-	\$ 489	-	-	\$ 843	\$ 2,044	-	\$ 1,357	\$ 1,288
157 Amputation of lower extremity															
N	3	25	6	8	-	1	4	7	10	5	9	1	-	60	139
Avg\$	\$ 5,863	\$ 7,583	\$ 8,045	\$ 9,603	-	\$ 8,003	\$ 7,752	\$ 8,151	\$ 4,359	\$ 7,101	\$ 8,265	\$ 4,919	-	\$ 5,830	\$ 6,738
158 Spinal fusion															
N	-	-	-	1	-	-	-	-	17	-	-	-	-	29	47
Avg\$	-	-	-	\$ 38,522	-	-	-	-	\$ 25,406	-	-	-	-	\$ 31,355	\$ 29,356
159 Other diagnostic procedures on musculoskeletal system															
N	1	2	-	3	-	-	5	1	1	-	9	7	-	39	68
Avg\$	\$ 5,795	\$ 8,813	-	\$ 12,306	-	-	\$ 10,160	\$ 23,378	\$ 4,068	-	\$ 7,350	\$ 4,934	-	\$ 8,384	\$ 8,327
160 Other therapeutic procedures on muscles & tendons															
N	163	207	234	71	-	4	101	144	256	52	322	173	46	813	2,586
Avg\$	\$ 8,467	\$ 10,228	\$ 17,345	\$ 24,641	-	\$ 11,600	\$ 11,345	\$ 16,831	\$ 5,904	\$ 18,111	\$ 7,634	\$ 12,645	\$ 3,987	\$ 8,363	\$ 10,442
161 Other OR therapeutic procedures on bone															
N	25	37	51	16	-	2	11	19	33	17	47	44	10	325	637
Avg\$	\$ 7,310	\$ 10,367	\$ 8,848	\$ 14,962	-	\$ 9,238	\$ 12,699	\$ 12,199	\$ 6,633	\$ 10,257	\$ 8,117	\$ 9,928	\$ 4,416	\$ 14,774	\$ 12,095
162 Other OR therapeutic procedures on joints															
N	54	55	121	24	-	5	23	47	36	19	125	71	33	431	1,044
Avg\$	\$ 8,829	\$ 13,185	\$ 18,781	\$ 27,501	-	\$ 21,548	\$ 15,646	\$ 21,257	\$ 12,763	\$ 26,823	\$ 9,453	\$ 9,332	\$ 11,859	\$ 13,098	\$ 13,842

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).  
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**Table O-10**  
**2017 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
163 Other non-OR therapeutic procedures on musc system															
N	3	-	-	-	6	-	-	1	-	-	-	-	-	30	40
Avg\$	\$ 164	-	-	- \$ 61	-	-	\$ 5,845	-	-	-	-	-	- \$ 4,411	\$ 3,476	
164 Other OR therapeutic procedures on musc system															
N	4	6	1	3	-	-	2	1	11	-	8	1	-	37	74
Avg\$	\$ 6,675	\$ 7,568	\$ 7,448	\$ 15,132	-	-	\$ 7,435	\$ 9,581	\$ 7,068	-	\$ 10,404	\$ 1,059	- \$ 7,957	\$ 8,187	
165 Breast biopsy & other diagnostic procedures on breast															
N	51	122	1	18	-	19	15	-	55	27	114	129	22	479	1,052
Avg\$	\$ 6,912	\$ 4,384	\$ 473	\$ 7,242	-	\$ 5,321	\$ 4,227	-	\$ 1,643	\$ 2,207	\$ 2,808	\$ 3,208	\$ 2,893	\$ 4,941	\$ 4,275
166 Lumpectomy, quadrantectomy of breast															
N	21	71	-	2	-	8	4	7	18	9	58	62	7	115	382
Avg\$	\$ 10,911	\$ 12,925	-	\$ 30,414	-	\$ 16,258	\$ 9,867	\$ 20,141	\$ 6,099	\$ 15,138	\$ 11,233	\$ 8,684	\$ 9,245	\$ 7,234	\$ 10,081
167 Mastectomy															
N	4	6	-	1	-	2	3	-	2	3	12	2	-	37	72
Avg\$	\$ 14,649	\$ 19,758	-	\$ 54,870	-	\$ 20,403	\$ 26,516	-	\$ 10,311	\$ 30,262	\$ 16,153	\$ 14,429	- \$ 18,757	\$ 19,173	
168 Incision & drainage, skin & subcutaneous tissue															
N	9	3	1	2	-	3	2	1	25	5	32	3	3	83	172
Avg\$	\$ 2,043	\$ 7,027	\$ 2,552	\$ 12,068	-	\$ 9,180	\$ 3,743	\$ 26,577	\$ 2,949	\$ 5,769	\$ 1,980	\$ 6,075	\$ 3,554	\$ 2,255	\$ 2,964
169 Debridement of wound, infection or burn															
N	85	2	7	-	-	1	3	8	6	-	95	2	-	128	337
Avg\$	\$ 1,052	\$ 9,642	\$ 4,248	-	-	\$ 9,081	\$ 10,325	\$ 10,794	\$ 2,839	-	\$ 802	\$ 8,129	- \$ 1,848	\$ 1,813	
170 Excision of skin lesion															
N	83	68	94	36	1	12	41	47	240	21	163	91	23	3,704	4,624
Avg\$	\$ 2,335	\$ 5,372	\$ 2,008	\$ 7,347	\$ 810	\$ 9,187	\$ 6,928	\$ 10,012	\$ 1,466	\$ 7,907	\$ 3,328	\$ 4,520	\$ 5,358	\$ 2,070	\$ 2,409
171 Suture of skin & subcutaneous tissue															
N	-	37	1	1	-	2	3	20	24	1	115	14	-	446	664
Avg\$	-	\$ 4,445	\$ 1,579	\$ 8,781	-	\$ 11,003	\$ 6,315	\$ 8,977	\$ 1,897	\$ 3,560	\$ 2,612	\$ 4,865	- \$ 3,650	\$ 3,676	
172 Skin graft															
N	114	12	-	8	-	-	4	14	4	3	17	27	4	466	673
Avg\$	\$ 4,100	\$ 10,640	-	\$ 6,118	-	-	\$ 16,771	\$ 18,554	\$ 5,750	\$ 9,156	\$ 12,512	\$ 8,826	\$ 6,048	\$ 7,863	\$ 7,668
173 Other diagnostic proc on skin & subcutaneous tissue															
N	3	3	-	-	-	-	2	-	10	-	205	10	9	38	280
Avg\$	\$ 339	\$ 1,623	-	-	-	-	\$ 1,953	-	\$ 774	-	\$ 1,068	\$ 742	\$ 2,177	\$ 1,082	\$ 1,088
174 Other non-OR therapeutic procedures on skin & breast															
N	10	9	1,355	2	-	4	6	384	16	10	51	2	2	1,931	3,782
Avg\$	\$ 3,518	\$ 6,004	\$ 30	\$ 4,878	-	\$ 2,973	\$ 3,549	\$ 238	\$ 1,333	\$ 2,094	\$ 1,234	\$ 2,517	\$ 2,788	\$ 895	\$ 558

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

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**Table O-10**  
**2017 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**

	<b>BRAT</b>	<b>CVMC</b>	<b>COPL</b>	<b>GIFF</b>	<b>GRAC</b>	<b>MTA</b>	<b>NCTY</b>	<b>NEVT</b>	<b>NWST</b>	<b>PORT</b>	<b>RRMC</b>	<b>SWVT</b>	<b>SPRF</b>	<b>UVMC</b>	<b>Total</b>
175 Other OR therapeutic procedures on skin & breast															
N	7	20	5	1	-	4	7	13	18	4	17	11	23	328	458
Avg\$	\$ 4,682	\$ 8,044	\$ 7,934	\$ 10,192	-	\$ 13,131	\$ 9,248	\$ 6,186	\$ 4,587	\$ 11,227	\$ 6,997	\$ 8,212	\$ 11,048	\$ 19,113	\$ 15,941
Total															
N	4,958	9,526	4,475	1,905	8	1,522	4,059	4,574	6,055	2,945	18,098	9,566	2,605	60,738	131,034
Avg\$	\$ 4,015	\$ 4,850	\$ 4,384	\$ 9,211	\$ 212	\$ 4,863	\$ 5,848	\$ 6,462	\$ 3,342	\$ 7,363	\$ 3,146	\$ 3,768	\$ 3,820	\$ 5,488	\$ 4,901

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).  
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**Table O-11**  
**2017 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	UVMHC	Total
3390 Laboratory - Clinical	33,184	81,325	21,502	10,702	8,087	13,428	27,576	28,951	65,655	32,714	78,650	53,618	35,482	235,742	726,616
5400 Radiology - Diagnostic	9,531	20,998	9,165	1,016	1,590	2,541	5,103	4,905	13,150	6,783	15,086	12,616	2,274	55,099	159,857
7300 Drugs Charged to Patients	3,478	10,576	5,283	989	21	560	2,345	1,799	6,852	2,067	7,575	12,658	2,250	46,275	102,728
3440 Mammography	4,510	8,354	1,876	1,828	-	1,308	3,121	2,691	4,881	3,640	8,165	6,392	3,011	26,665	76,442
Diagnostic	487	1,052	361	290	-	301	255	493	691	374	1,091	941	320	3,281	9,937
Screening	4,024	7,302	1,516	1,543	-	1,007	2,878	2,199	4,193	3,266	7,079	5,451	2,692	23,500	66,650
3180 Chemistry	2	-	-	-	5,284	2,451	16	18,870	509	-	-	46,796	-	71	73,999
3630 Ultra Sound	1,898	6,076	1,999	1,357	302	609	2,086	1,038	5,209	2,319	5,265	6,568	1,705	14,247	50,678
6600 Physical Therapy	608	5,569	1,317	2,401	795	1,140	1,103	5,301	1,301	1,874	2,262	1,270	1,196	14,260	40,397
3350 Hematology	-	-	-	-	3,785	-	-	434	21	-	-	33,178	-	-	37,418
3420 Laboratory - Pathological	1,113	1,380	437	46	-	477	573	779	4,058	2,618	458	2,831	815	20,971	36,556
5800 Magnetic Resonance Imaging (MRI)	1,722	2,586	931	957	-	315	1,154	947	2,141	843	3,232	2,574	1,042	13,116	31,560
5700 CT Scan	1,076	2,629	1,090	551	232	418	1,317	608	2,231	1,021	2,757	3,069	957	12,468	30,424
3240 Cytology	-	2,727	-	-	-	5	1,119	1,963	205	-	4,810	2,113	12	16,049	29,003
3050 Bacteriology & Microbiology	-	-	-	-	217	-	-	5,528	1,241	-	-	15,484	-	-	22,470
3280 EKG and EEG	1,124	1,738	1,278	213	450	54	948	444	617	269	6,688	833	212	6,691	21,559
EKG	1,124	1,615	1,187	174	450	54	520	394	617	269	5,805	395	212	4,443	17,259
EEG	-	123	91	39	-	-	429	53	-	-	885	438	-	2,250	4,308
3190 Chemotherapy	130	1,490	368	9	-	106	140	-	-	63	1,103	2,728	414	10,409	16,960
3260 Echocardiography	695	1,465	642	265	-	153	1,004	382	902	721	2,166	1,794	443	6,121	16,753
6400 Intravenous Therapy	682	2,833	643	85	62	-	1,022	336	617	620	1,471	5,169	690	1,742	15,972
7100 Medical Supplies Charged to Patients	3,504	138	918	744	-	-	177	28	1,120	880	408	2,038	2,190	1,187	13,332
3380 Immunology	-	66	-	-	47	1	-	641	110	-	-	9,509	-	10	10,384
3450 Nuclear Medicine - Diagnostic	449	1,273	204	147	-	-	241	367	651	427	1,144	1,026	269	3,763	9,961
PET Scan	-	198	-	-	-	-	-	-	-	-	125	336	-	220	879
All other	449	1,273	204	147	-	-	241	367	651	427	1,144	690	269	3,762	9,624

**Table O-11**  
**2017 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
5000 Operating Room	105	309	158	13	-	28	37	95	11	16	243	544	86	8,029	9,674
3650 Vascular Lab	441	713	250	123	52	138	377	165	706	-	929	789	238	4,404	9,325
3140 Cardiology	291	669	58	42	-	53	43	775	70	13	2,170	997	-	3,803	8,984
6700 Occupational Therapy	204	1,144	296	233	78	94	240	10	52	335	416	234	89	4,975	8,400
3620 Stress Test	452	792	358	211	-	-	311	429	967	529	1,082	702	219	2,340	8,392
3480 Oncology	1,410	-	-	186	-	-	81	-	-	-	5,047	-	-	-	6,724
3370 Holter Monitor	93	611	130	77	-	1	487	646	402	17	460	-	104	3,001	6,029
5100 Recovery Room	21	68	111	4	-	-	21	47	31	6	120	167	71	4,301	4,968
3550 Psychiatric/Psychological Services	-	-	-	-	-	-	-	-	279	-	1,744	-	-	2,404	4,427
5300 Anesthesiology	38	36	109	10	-	-	9	42	19	21	80	8	16	3,217	3,605
3540 Prosthetic Devices	-	404	118	1	-	-	112	-	31	2	2	27	21	2,668	3,386
3040 Audiology	10	42	30	1	-	-	16	8	18	21	2,190	-	4	609	2,949
5500 Radiology - Therapeutic	-	386	-	-	-	-	-	-	-	-	375	155	-	1,672	2,588
6300 Blood Storing, Processing, & Trans.	123	149	70	14	2	9	96	55	122	52	202	228	21	923	2,066
6800 Speech Pathology	35	291	8	21	10	18	43	42	63	59	318	158	52	928	2,046
Total (not including subcategories)	68,303	157,903	50,371	22,688	16,180	21,677	51,500	60,248	115,030	58,494	162,293	177,877	53,915	517,595	1,534,074

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.

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**  
**2017 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	136	\$ 14,445	289	\$ 9,604	28	\$ 15,302	338	\$ 3,108	255	\$ 1,697	1,046	\$ 6,359
Central Vermont Medical Center	204	\$ 18,154	723	\$ 8,532	32	\$ 18,093	39	\$ 14,482	24	\$ 2,882	1,022	\$ 10,854
Copley Hospital	11	\$ 10,452	133	\$ 4,276	13	\$ 17,182	45	\$ 25,238	97	\$ 2,871	299	\$ 7,764
Gifford Medical Center	29	\$ 21,648	144	\$ 12,969	9	\$ 37,192	28	\$ 29,869	35	\$ 6,009	245	\$ 15,823
Grace Cottage Hospital	1	\$ 9,472	48	\$ 6,577	-	\$ -	-	\$ -	5	\$ 8,077	54	\$ 6,770
Mt. Ascutney Hospital and Health Center	-	\$ -	54	\$ 7,328	-	\$ -	20	\$ 22,590	127	\$ 4,357	201	\$ 6,969
North Country Hospital	62	\$ 18,206	213	\$ 17,029	16	\$ 27,930	80	\$ 25,437	30	\$ 5,819	401	\$ 18,484
Northeastern Vermont Regional Hospital	209	\$ 24,636	555	\$ 8,771	57	\$ 27,725	80	\$ 33,625	31	\$ 6,803	932	\$ 15,566
Northwestern Medical Center	184	\$ 10,478	595	\$ 5,212	56	\$ 13,360	129	\$ 14,915	78	\$ 2,089	1,042	\$ 7,550
Porter Medical Center	85	\$ 20,721	250	\$ 9,017	68	\$ 30,351	65	\$ 31,367	9	\$ 3,508	477	\$ 17,086
Rutland Regional Medical Center	380	\$ 27,897	783	\$ 8,240	50	\$ 12,410	36	\$ 14,825	34	\$ 6,168	1,283	\$ 14,355
Southwestern Vermont Medical Center	141	\$ 16,342	599	\$ 10,112	59	\$ 17,436	24	\$ 20,048	17	\$ 6,514	840	\$ 11,883
Springfield Hospital	20	\$ 19,608	441	\$ 9,129	52	\$ 17,840	39	\$ 20,095	8	\$ 5,867	560	\$ 11,029
University of Vermont Medical Center	1,818	\$ 29,949	1,880	\$ 9,765	315	\$ 24,522	253	\$ 20,500	281	\$ 7,744	4,547	\$ 19,351
<b>Total for 2017</b>	<b>3,280</b>	<b>\$ 25,652</b>	<b>6,707</b>	<b>\$ 9,071</b>	<b>755</b>	<b>\$ 22,127</b>	<b>1,176</b>	<b>\$ 16,762</b>	<b>1,031</b>	<b>\$ 4,566</b>	<b>12,949</b>	<b>\$ 14,383</b>
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
Total for 2014	2,658	\$ 24,188	7,839	\$ 8,259	1,142	\$ 16,265	1,373	\$ 15,062	1,207	\$ 6,356	14,219	\$ 12,379
Total for 2013	1,802	\$ 21,059	6,872	\$ 7,368	899	\$ 15,393	998	\$ 19,478	1,235	\$ 3,251	11,806	\$ 10,665
Total for 2012	2,205	\$ 18,384	7,547	\$ 6,606	953	\$ 13,651	1,440	\$ 14,734	855	\$ 3,520	13,000	\$ 9,819

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**

**2017 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	4,240	\$ 16,786,879	718	\$ 3,080,916	4,958	\$ 19,867,795
Central Vermont Medical Center	9,485	\$ 46,037,664	41	\$ 164,750	9,526	\$ 46,202,414
Copley Hospital	4,434	\$ 19,175,391	41	\$ 441,539	4,475	\$ 19,616,931
Gifford Medical Center	1,876	\$ 17,124,371	29	\$ 422,226	1,905	\$ 17,546,597
Grace Cottage Hospital	8	\$ 1,693	-	\$ -	8	\$ 1,693
Mt. Ascutney Hospital and Health Center	976	\$ 4,707,786	546	\$ 2,693,339	1,522	\$ 7,401,125
North Country Hospital	4,020	\$ 23,537,186	39	\$ 198,865	4,059	\$ 23,736,051
Northeastern Vermont Regional Hospital	4,170	\$ 27,879,655	404	\$ 1,677,859	4,574	\$ 29,557,514
Northwestern Medical Center	5,998	\$ 19,976,258	57	\$ 258,375	6,055	\$ 20,234,633
Porter Medical Center	2,613	\$ 19,129,868	332	\$ 2,554,490	2,945	\$ 21,684,358
Rutland Regional Medical Center	17,227	\$ 54,223,320	871	\$ 2,712,727	18,098	\$ 56,936,047
Southwestern Vermont Medical Center	7,056	\$ 25,814,783	2,510	\$ 10,233,601	9,566	\$ 36,048,385
Springfield Hospital	2,217	\$ 8,297,529	388	\$ 1,652,595	2,605	\$ 9,950,123
University of Vermont Medical Center	53,607	\$ 285,843,844	7,131	\$ 47,500,055	60,738	\$ 333,343,899
<b>Total for 2017</b>	<b>117,927</b>	<b>\$ 568,536,227</b>	<b>13,107</b>	<b>\$ 73,591,337</b>	<b>131,034</b>	<b>\$ 642,127,564</b>
<b>Total for 2016</b>	<b>119,829</b>	<b>\$ 565,045,625</b>	<b>12,866</b>	<b>\$ 69,924,572</b>	<b>132,695</b>	<b>\$ 634,970,197</b>
<b>Total for 2015</b>	<b>116,134</b>	<b>\$ 545,650,951</b>	<b>12,300</b>	<b>\$ 67,449,779</b>	<b>128,434</b>	<b>\$ 613,100,730</b>
<b>Total for 2014</b>	<b>117,859</b>	<b>\$ 546,346,794</b>	<b>13,052</b>	<b>\$ 77,607,455</b>	<b>130,911</b>	<b>\$ 623,954,249</b>
<b>Total for 2013</b>	<b>93,936</b>	<b>\$ 486,776,842</b>	<b>10,715</b>	<b>\$ 73,499,273</b>	<b>104,651</b>	<b>\$ 560,276,115</b>
<b>Total for 2012</b>	<b>92,537</b>	<b>\$ 453,755,623</b>	<b>10,296</b>	<b>\$ 64,947,708</b>	<b>102,833</b>	<b>\$ 518,703,330</b>

Table O-13

**2017 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	52,858	\$ 33,520,208	10,166	\$ 6,282,337	63,024	\$ 39,802,544
Central Vermont Medical Center	161,923	\$ 124,363,824	2,388	\$ 1,343,840	164,311	\$ 125,707,664
Copley Hospital	52,186	\$ 23,960,266	759	\$ 486,824	52,945	\$ 24,447,091
Gifford Medical Center	19,771	\$ 23,397,306	190	\$ 243,911	19,961	\$ 23,641,217
Grace Cottage Hospital	10,722	\$ 6,978,228	331	\$ 236,162	11,053	\$ 7,214,390
Mt. Ascutney Hospital and Health Center	15,078	\$ 17,177,058	4,532	\$ 5,269,780	19,610	\$ 22,446,838
North Country Hospital	45,043	\$ 45,778,082	505	\$ 437,702	45,548	\$ 46,215,784
Northeastern Vermont Regional Hospital	55,143	\$ 37,973,317	1,532	\$ 1,062,632	56,675	\$ 39,035,949
Northwestern Medical Center	123,725	\$ 37,842,747	1,228	\$ 368,413	124,953	\$ 38,211,160
Porter Medical Center	49,480	\$ 31,619,053	3,281	\$ 2,341,481	52,761	\$ 33,960,535
Rutland Regional Medical Center	151,552	\$ 114,428,376	8,049	\$ 5,942,970	159,601	\$ 120,371,346
Southwestern Vermont Medical Center	114,671	\$ 94,944,606	31,876	\$ 33,252,930	146,547	\$ 128,197,536
Springfield Hospital	43,054	\$ 23,626,012	6,184	\$ 3,682,821	49,238	\$ 27,308,833
University of Vermont Medical Center	484,467	\$ 542,904,542	35,511	\$ 72,665,803	519,978	\$ 615,570,345
<b>Total for 2017</b>	<b>1,379,673</b>	<b>\$ 1,158,513,625</b>	<b>106,532</b>	<b>\$ 133,617,606</b>	<b>1,486,205</b>	<b>\$ 1,292,131,232</b>
<b>Total for 2016</b>	<b>1,451,203</b>	<b>\$ 1,145,228,292</b>	<b>105,865</b>	<b>\$ 118,256,126</b>	<b>1,557,068</b>	<b>\$ 1,263,484,418</b>
<b>Total for 2015</b>	<b>1,458,663</b>	<b>\$ 1,113,383,420</b>	<b>100,188</b>	<b>\$ 110,008,920</b>	<b>1,558,851</b>	<b>\$ 1,223,392,341</b>
<b>Total for 2014</b>	<b>1,389,358</b>	<b>\$ 1,020,585,047</b>	<b>96,970</b>	<b>\$ 97,883,028</b>	<b>1,486,328</b>	<b>\$ 1,118,468,075</b>
<b>Total for 2013</b>	<b>1,407,763</b>	<b>\$ 956,212,737</b>	<b>100,143</b>	<b>\$ 95,514,163</b>	<b>1,507,906</b>	<b>\$ 1,051,726,900</b>
<b>Total for 2012</b>	<b>1,390,532</b>	<b>\$ 883,670,902</b>	<b>94,251</b>	<b>\$ 85,777,378</b>	<b>1,484,783</b>	<b>\$ 969,448,281</b>

**Table O-13**

**2017 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	57,098	\$ 50,307,087	10,884	\$ 9,363,252	67,982	\$ 59,670,339
Central Vermont Medical Center	171,408	\$ 170,401,488	2,429	\$ 1,508,590	173,837	\$ 171,910,078
Copley Hospital	56,620	\$ 43,135,658	800	\$ 928,364	57,420	\$ 44,064,021
Gifford Medical Center	21,647	\$ 40,521,677	219	\$ 666,137	21,866	\$ 41,187,814
Grace Cottage Hospital	10,730	\$ 6,979,920	331	\$ 236,162	11,061	\$ 7,216,082
Mt. Ascutney Hospital and Health Center	16,054	\$ 21,884,844	5,078	\$ 7,963,119	21,132	\$ 29,847,963
North Country Hospital	49,063	\$ 69,315,268	544	\$ 636,567	49,607	\$ 69,951,835
Northeastern Vermont Regional Hospital	59,313	\$ 65,852,972	1,936	\$ 2,740,491	61,249	\$ 68,593,463
Northwestern Medical Center	129,723	\$ 57,819,005	1,285	\$ 626,788	131,008	\$ 58,445,793
Porter Medical Center	52,093	\$ 50,748,921	3,613	\$ 4,895,971	55,706	\$ 55,644,893
Rutland Regional Medical Center	168,779	\$ 168,651,696	8,920	\$ 8,655,697	177,699	\$ 177,307,393
Southwestern Vermont Medical Center	121,727	\$ 120,759,390	34,386	\$ 43,486,531	156,113	\$ 164,245,921
Springfield Hospital	45,271	\$ 31,923,541	6,572	\$ 5,335,415	51,843	\$ 37,258,956
University of Vermont Medical Center	538,074	\$ 828,748,386	42,642	\$ 120,165,858	580,716	\$ 948,914,243
<b>Total for 2017</b>	<b>1,497,600</b>	<b>\$ 1,727,049,853</b>	<b>119,639</b>	<b>\$ 207,208,943</b>	<b>1,617,239</b>	<b>\$ 1,934,258,795</b>
<b>Total for 2016</b>	<b>1,571,032</b>	<b>\$ 1,710,273,917</b>	<b>118,731</b>	<b>\$ 188,180,698</b>	<b>1,689,763</b>	<b>\$ 1,898,454,615</b>
<b>Total for 2015</b>	<b>1,574,797</b>	<b>\$ 1,659,034,371</b>	<b>112,488</b>	<b>\$ 177,458,699</b>	<b>1,687,285</b>	<b>\$ 1,836,493,070</b>
<b>Total for 2014</b>	<b>1,507,217</b>	<b>\$ 1,566,931,842</b>	<b>110,022</b>	<b>\$ 175,490,482</b>	<b>1,617,239</b>	<b>\$ 1,742,422,324</b>
<b>Total for 2013</b>	<b>1,501,699</b>	<b>\$ 1,442,989,579</b>	<b>110,858</b>	<b>\$ 169,013,436</b>	<b>1,612,557</b>	<b>\$ 1,612,003,015</b>
<b>Total for 2012</b>	<b>1,483,069</b>	<b>\$ 1,337,426,525</b>	<b>104,547</b>	<b>\$ 150,725,086</b>	<b>1,587,616</b>	<b>\$ 1,488,151,611</b>

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**  
**2017 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	1,776	3.7%	4,958	3.8%	12,576	5.4%	63,024	4.2%	82,334	4.3%
Central Vermont Medical Center	4,016	8.3%	9,526	7.3%	21,325	9.2%	164,311	11.1%	199,178	10.5%
Copley Hospital	1,782	3.7%	4,475	3.4%	11,496	5.0%	52,945	3.6%	70,698	3.7%
Gifford Medical Center	1,322	2.7%	1,905	1.5%	5,962	2.6%	19,961	1.3%	29,150	1.5%
Grace Cottage Hospital	151	0.3%	8	0.0%	2,807	1.2%	11,053	0.7%	14,019	0.7%
Mt. Ascutney Hospital and Health Center	1,031	2.1%	1,522	1.2%	4,506	1.9%	19,610	1.3%	26,669	1.4%
North Country Hospital	1,535	3.2%	4,059	3.1%	14,534	6.3%	45,548	3.1%	65,676	3.5%
Northeastern Vermont Regional Hospital	1,375	2.9%	4,574	3.5%	12,980	5.6%	56,675	3.8%	75,604	4.0%
Northwestern Medical Center	2,357	4.9%	6,055	4.6%	21,954	9.5%	124,953	8.4%	155,319	8.2%
Porter Medical Center	1,104	2.3%	2,945	2.2%	13,930	6.0%	52,761	3.6%	70,740	3.7%
Rutland Regional Medical Center	6,640	13.8%	18,098	13.8%	27,868	12.0%	159,601	10.7%	212,207	11.2%
Southwestern Vermont Medical Center	3,405	7.1%	9,566	7.3%	20,297	8.8%	146,547	9.9%	179,815	9.5%
Springfield Hospital	1,903	4.0%	2,605	2.0%	14,629	6.3%	49,238	3.3%	68,375	3.6%
University of Vermont Medical Center	19,769	41.0%	60,738	46.4%	46,860	20.2%	519,978	35.0%	647,345	34.1%
Total	48,166	100.0%	131,034	100.0%	231,724	100.0%	1,486,205	100.0%	1,897,129	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**  
**2017 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	2,722	\$33,570	742	\$1,309	4,150	\$1,601	40,461	\$382	48,075	\$2,405
Neoplasms	1,992	\$42,433	13,141	\$5,174	411	\$9,789	95,704	\$3,426	111,248	\$4,384
Endocrine, nutritional, metabolic, immunity	1,800	\$24,281	1,907	\$3,727	3,535	\$2,680	161,903	\$420	169,145	\$761
Diseases of the blood & blood-forming organs	509	\$23,830	643	\$4,037	593	\$4,110	27,479	\$737	29,224	\$1,284
Mental disorders	3,037	\$26,204	914	\$2,011	12,094	\$1,985	33,238	\$462	49,283	\$2,470
Diseases of the nervous system and sense organs	1,449	\$30,616	15,644	\$4,481	18,796	\$2,163	69,965	\$1,312	105,854	\$2,340
Diseases of the circulatory system	8,055	\$36,433	3,987	\$14,341	19,158	\$3,761	182,023	\$689	213,223	\$2,584
Diseases of the respiratory system	4,882	\$20,985	11,585	\$1,799	26,552	\$1,781	69,478	\$704	112,497	\$1,958
Diseases of the digestive system	4,828	\$24,826	12,747	\$5,863	16,686	\$3,086	44,932	\$1,454	79,193	\$3,959
Diseases of the genitourinary system	1,851	\$19,691	11,022	\$8,288	11,655	\$2,782	115,175	\$601	139,703	\$1,654
Pregnancy, childbirth, and the puerperium	5,492	\$12,253	5,181	\$1,943	2,477	\$2,295	39,943	\$466	53,093	\$1,969
Diseases of the skin and subcutaneous tissue	880	\$17,025	4,122	\$1,491	8,281	\$1,150	33,468	\$550	46,751	\$1,055
Musculoskeletal system and connective tissue	4,215	\$42,604	18,806	\$4,450	16,865	\$1,689	203,006	\$1,043	242,892	\$2,094
Congenital anomalies	147	\$47,466	361	\$9,827	53	\$3,006	3,875	\$1,614	4,436	\$3,868
Conditions originating in the perinatal period	7	\$11,763	168	\$1,709	275	\$1,175	1,356	\$442	1,806	\$9,053
Injury & poisoning	4,688	\$39,789	5,230	\$12,158	60,394	\$1,749	59,391	\$730	129,703	\$3,118
Symptoms, signs & ill-defined conditions	1,432	\$25,201	23,591	\$3,174	27,347	\$2,601	279,052	\$511	331,422	\$987
Residual codes, unclassified, all Ecodes	180	\$20,987	1,243	\$4,233	2,402	\$2,492	25,756	\$1,296	29,581	\$1,657
<b>Total Discharges and Average Charges</b>	<b>48,166</b>	<b>\$27,356</b>	<b>131,034</b>	<b>\$4,901</b>	<b>231,724</b>	<b>\$2,233</b>	<b>1,486,205</b>	<b>\$886</b>	<b>1,897,129</b>	<b>\$2,091</b>
<b>Total Charges</b>	<b>\$1,467,985,731</b>		<b>\$642,127,564</b>		<b>\$517,371,478</b>		<b>\$1,292,131,232</b>		<b>\$3,919,616,005</b>	

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**  
**2017 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	787	\$ 61,789	12,788	\$ 3,817	719	\$ 1,254	-	\$ -	14,294	\$ 7,006
Operations on the endocrine system	61	\$ 44,259	324	\$ 12,635	2	\$ 7,798	-	\$ -	387	\$ 17,595
Operations on the eye	12	\$ 38,274	8,000	\$ 6,009	41	\$ 8,273	-	\$ -	8,053	\$ 6,072
Operations on the ear	52	\$ 60,671	3,044	\$ 2,566	21	\$ 1,412	-	\$ -	3,117	\$ 3,528
Operations on the nose, mouth, and pharynx	143	\$ 23,702	3,216	\$ 3,580	397	\$ 2,006	-	\$ -	3,756	\$ 4,542
Operations on the respiratory system	790	\$ 54,296	12,066	\$ 1,159	25	\$ 3,803	-	\$ -	12,881	\$ 4,446
Operations on the cardiovascular system	3,196	\$ 71,918	8,849	\$ 8,899	211	\$ 19,416	-	\$ -	12,256	\$ 25,721
Operations on the hemic and lymphatic system	151	\$ 57,175	271	\$ 10,533	2	\$ 11,262	-	\$ -	424	\$ 27,147
Operations on the digestive system	3,432	\$ 42,061	37,845	\$ 4,953	946	\$ 16,566	-	\$ -	42,223	\$ 8,241
Operations on the urinary system	663	\$ 39,774	5,131	\$ 6,161	117	\$ 10,300	-	\$ -	5,911	\$ 10,013
Operations on the male genital organs	172	\$ 9,221	1,318	\$ 8,140	44	\$ 9,161	-	\$ -	1,534	\$ 8,770
Operations on the female genital organs	288	\$ 28,920	6,048	\$ 6,388	155	\$ 10,278	-	\$ -	6,491	\$ 7,481
Obstetrical procedures	4,986	\$ 12,438	4,132	\$ 899	33	\$ 12,638	-	\$ -	9,151	\$ 7,235
Operations on the musculoskeletal system	5,832	\$ 46,846	15,506	\$ 7,406	2,131	\$ 4,376	-	\$ -	23,469	\$ 16,933
Operations on the integumentary system	934	\$ 35,749	12,496	\$ 3,145	5,280	\$ 1,126	-	\$ -	18,710	\$ 4,215
Miscellaneous diagnostic and therapeutic procs	572	\$ 68,335	-	\$ -	221,518	\$ 2,150	703,221	\$ 1,507	925,311	\$ 1,707
New Categories specific to CPT/HCPCS	-	\$ -	-	\$ -	62	\$ 2,512	575,347	\$ 343	575,409	\$ 343
<b>Total Discharges and Average Charges</b>	<b>22,071</b>	<b>\$ 39,932</b>	<b>131,034</b>	<b>\$ 4,901</b>	<b>231,704</b>	<b>\$ 2,233</b>	<b>1,278,568</b>	<b>\$ 983</b>	<b>1,663,377</b>	<b>\$ 2,026</b>
<b>Total charges</b>		<b>\$956,849,628</b>		<b>\$642,127,564</b>		<b>\$517,332,993</b>		<b>\$1,256,859,859</b>		<b>\$3,373,170,043</b>

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. In 2017, 20 of these visits had no procedure code.

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 both ICD-9-CM and 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-9-CM procedure codes, 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](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

### Changes in Reporting of Diagnoses and Procedures

**Two major changes were made in the reporting of diagnoses and procedures.** The first change took place on July 1, 2014: Vermont hospitals were required to report outpatient procedures using HCPCS/CPT codes instead of ICD-9-CM procedure codes. The second change took place on October 1, 2015: by federal mandate, all diagnosis codes and inpatient procedure codes were required to be reported using the ICD-10-CM/PCS coding system instead of the ICD-9-CM system.

#### July 1, 2014

##### **Change in Vermont Hospitals' Reporting of Outpatient Procedures.**

As of July 1, 2014, significant changes were made in the requirements for Vermont hospitals' reporting of all outpatient procedures and services. Prior to that date, 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, 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 both ICD-9-CM procedure codes and 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 in the first half of 2014 were based on the presence of an ICD-9-CM procedure code in range 00.00-86.99, and if none, then on the presence of a primary CPT code in CCS high level group 1 through 15. For the second half of 2014, this order was reversed: CCS groupings for outpatient procedures were first based on the presence of a primary CPT code in CCS range, and if none, then on the presence of an ICD-9-CM procedure code in range.

At the time of this report, CCS groupings of outpatient procedure data before July 1, 2014 show some inconsistencies with groupings of outpatient procedure data after this date. Such analyses will continue as more recent data become available.

### **October 1, 2015 Change in Federal Requirements for Reporting of All Diagnoses and Inpatient Procedures**

As of October 1, 2015, federal requirements mandated that hospitals change from using the ICD-9-CM reporting system to using the ICD-10-CM/PCS system for reporting all diagnoses and inpatient procedures.

For all diagnoses, Clinical Classification Software (CCS) groups ICD-9-CM and ICD-10-CM diagnosis codes into the same single- and high-level diagnosis categories based on body systems, making it possible to analyze data before and after October 1, 2015 by quarter to check for discontinuities or inconsistencies. At the time of this report, groupings of diagnosis data before this date are very consistent with groupings of diagnosis data after this date in all hospital settings. As more recent data become available, such analyses will continue and any problems that may appear will be addressed.

For inpatient procedures, Clinical Classification Software (CCS) groups ICD-9-CM and ICD-10-PCS procedure codes into the same single- and high-level procedure categories based on body systems. As with diagnosis codes, inpatient procedure data were analyzed by discharge year and quarter to check for discontinuities or inconsistencies. At the time of this report, groupings of inpatient procedure data before this date are very consistent with groupings of inpatient procedure data after this date. Such analyses will continue as more recent data become available.

CCS groups ICD-9-CM, 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 and Quarter**  
 \* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM											
	2014					Yearly Total	2015				Yearly Total	2016					Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4	Q1		Q2	Q3	Q4	Q1		Q2	Q3	Q4	Q1	Q2		Q3	Q4			
<b>1 Infectious &amp; parasitic diseases</b>	-	-	-	-	-	1	-	1	-	2	-	-	1	1	2	-	1	-	1	2		
1 Tuberculosis	-	-	-	-	-	1	-	1	-	2	-	-	1	1	2	-	1	-	1	2		
2 Septicemia (except in labor)	410	476	512	448	1,846	533	620	583	613	2,349	631	662	599	543	2,435	628	595	560	629	2,412		
3 Bacterial infection; unspecified site	2	6	3	3	14	-	3	1	19	23	15	21	19	17	72	23	13	30	16	82		
4 Mycoses	7	5	6	7	25	7	10	8	2	27	5	2	3	3	13	1	6	7	2	16		
5 HIV infection	2	1	6	3	12	3	-	-	4	7	2	2	3	-	7	-	2	3	4	9		
6 Hepatitis	11	9	10	3	33	7	8	9	6	30	4	8	12	6	30	7	4	3	6	20		
7 Viral infection	19	16	14	17	66	21	14	15	23	73	25	19	29	19	92	24	25	26	16	91		
8 Other infections; including parasitic	2	9	17	18	46	3	18	24	6	51	-	17	20	13	50	3	26	38	18	85		
9 Sexually transmitted infections (not HIV or hepatitis)	-	-	2	1	3	1	-	-	1	2	-	-	2	-	2	1	-	3	1	5		
<b>Total</b>	<b>453</b>	<b>522</b>	<b>570</b>	<b>500</b>	<b>2,045</b>	<b>576</b>	<b>673</b>	<b>641</b>	<b>674</b>	<b>2,564</b>	<b>682</b>	<b>731</b>	<b>688</b>	<b>602</b>	<b>2,703</b>	<b>687</b>	<b>672</b>	<b>670</b>	<b>693</b>	<b>2,722</b>		
<b>2 Neoplasms</b>																						
11 Cancer of head and neck	13	14	6	12	45	8	13	10	13	44	14	7	11	6	38	6	7	11	11	35		
12 Cancer of esophagus	8	13	6	3	30	5	7	3	5	20	9	6	8	13	36	8	7	8	8	31		
13 Cancer of stomach	5	5	7	8	23	8	5	8	3	24	8	6	3	6	23	8	8	2	5	23		
14 Cancer of colon	35	32	31	38	136	37	30	52	39	158	33	40	43	44	160	31	37	49	47	164		
15 Cancer of rectum and anus	16	12	15	12	55	20	10	18	13	61	19	10	13	14	56	18	14	8	13	53		
16 Cancer of liver and intrahepatic bile duct	4	3	10	6	23	8	9	3	5	25	8	5	3	6	22	10	10	8	1	29		
17 Cancer of pancreas	6	9	12	10	37	8	6	8	4	26	9	9	10	21	49	12	10	14	14	50		
18 Cancer of other GI organs; peritoneum	5	11	9	8	33	11	8	11	7	37	7	4	7	11	29	6	6	13	9	34		
19 Cancer of bronchus; lung	44	48	51	44	187	49	56	49	59	213	61	51	53	50	215	41	39	52	52	184		
20 Cancer; other respiratory and intrathoracic	1	1	1	-	3	1	-	1	-	2	-	-	-	1	1	1	2	-	1	4		
21 Cancer of bone and connective tissue	3	3	4	4	14	1	2	1	3	7	4	5	7	3	19	1	5	3	3	12		
22 Melanomas of skin	-	1	-	-	1	-	2	2	3	7	1	-	-	-	1	-	-	-	-	-		
23 Other non-epithelial cancer of skin	3	-	1	1	5	1	2	-	1	4	2	1	1	1	5	1	1	3	-	5		
24 Cancer of breast	13	14	13	12	52	10	17	21	25	73	18	14	14	8	54	13	9	6	9	37		
25 Cancer of uterus	6	12	4	3	25	9	4	12	6	31	7	12	4	8	31	6	8	5	2	21		
26 Cancer of cervix	1	2	4	4	11	2	2	-	3	7	5	2	2	5	14	-	3	-	1	4		
27 Cancer of ovary	8	12	5	14	39	6	9	8	8	31	10	16	4	6	36	9	6	2	7	24		
28 Cancer of other female genital organs	4	5	4	4	17	6	4	4	3	17	-	7	3	2	12	7	2	4	6	19		
29 Cancer of prostate	37	28	26	26	117	25	27	29	34	115	36	26	37	40	139	35	26	38	24	123		
30 Cancer of testis	1	-	-	-	1	-	-	-	1	1	-	-	1	-	1	-	1	3	-	4		
31 Cancer of other male genital organs	-	1	-	2	3	-	-	-	-	-	-	1	-	3	4	-	1	-	-	1		
32 Cancer of bladder	14	27	13	13	67	13	8	9	13	43	12	14	12	5	43	11	11	10	16	48		
33 Cancer of kidney and renal pelvis	21	20	15	27	83	18	18	20	18	74	29	21	10	24	84	21	26	17	26	90		
34 Cancer of other urinary organs	3	3	2	-	8	-	3	1	1	5	1	2	2	3	8	4	1	2	1	8		
35 Cancer of brain and nervous system	17	16	22	17	72	17	16	12	10	55	17	20	9	16	62	12	17	20	16	65		
36 Cancer of thyroid	2	2	4	2	10	4	2	3	3	12	5	3	2	3	13	6	1	6	3	16		
37 Hodgkin's disease	-	-	-	-	-	-	1	2	-	3	1	-	1	1	3	1	2	-	1	4		
38 Non-Hodgkin's lymphoma	8	16	11	10	45	11	14	17	13	55	20	18	12	22	72	17	23	15	15	70		
39 Leukemias	17	14	21	11	63	13	16	17	14	60	4	11	12	13	40	11	12	11	12	46		
40 Multiple myeloma	4	9	12	4	29	8	3	4	2	17	3	9	4	4	20	6	4	5	8	23		
41 Cancer; other and unspecified primary	1	1	-	4	6	3	2	2	2	9	3	2	-	3	8	4	2	2	2	10		
42 Secondary malignancies	58	80	94	82	314	78	91	59	74	302	74	59	62	68	263	66	74	81	77	298		
43 Malignant neoplasm without specification of site	3	6	9	3	21	10	3	8	3	24	6	3	11	11	31	5	4	11	10	30		
44 Neoplasms of unspecified nature or uncertain behavior	14	14	13	11	52	11	13	16	8	48	11	13	17	10	51	13	11	9	19	52		

**Appendix E**  
**Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single Level Categories by Discharge Year and Quarter**  
\* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM									
	2014					2015					2016					2017				
	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
45 Maintenance chemotherapy; radiotherapy	28	31	30	37	126	41	45	43	53	182	36	34	53	65	188	41	34	49	52	176
46 Benign neoplasm of uterus	20	26	22	19	87	19	14	21	22	76	17	19	15	23	74	11	10	25	22	68
47 Other and unspecified benign neoplasm	41	41	39	28	149	35	39	42	31	147	40	36	34	46	156	31	40	32	28	131
Total	464	532	516	477	1,989	496	501	516	502	2,015	530	486	480	565	2,061	473	474	524	521	1,992
<b>3 Endocrine, nutritional, metabolic, immunity</b>																				
48 Thyroid disorders	6	2	4	2	14	6	6	7	10	29	2	4	6	5	17	10	9	8	5	32
49 Diabetes mellitus without complication	4	4	4	3	15	14	2	7	1	24	1	2	1	-	4	2	-	1	3	6
50 Diabetes mellitus with complications	153	155	156	153	617	137	178	150	147	612	129	151	183	185	648	179	151	183	200	713
51 Other endocrine disorders	23	19	15	19	76	18	23	31	25	97	25	14	33	16	88	29	31	19	17	96
52 Nutritional deficiencies	3	6	5	6	20	4	5	3	5	17	5	10	8	14	37	14	7	4	12	37
53 Disorders of lipid metabolism	-	-	-	-	-	-	-	1	2	3	-	-	2	-	2	-	-	1	-	1
54 Gout and other crystal arthropathies	5	10	5	8	28	6	7	6	8	27	12	10	7	17	46	6	7	10	9	32
55 Fluid and electrolyte disorders	108	125	101	65	399	96	113	101	109	419	99	106	117	104	426	105	97	124	100	426
56 Cystic fibrosis	46	57	45	58	206	51	40	45	43	179	35	43	37	48	163	49	38	38	42	167
57 Immunity disorders	-	3	1	1	5	-	-	-	3	3	1	1	1	2	5	-	2	5	1	8
58 Other nutritional; endocrine; and metabolic disorders	53	66	55	69	243	60	64	54	78	256	73	88	81	63	305	71	65	77	69	282
Total	401	447	391	384	1,623	392	438	405	431	1,666	382	429	476	454	1,741	465	407	470	458	1,800
<b>4 Diseases of the blood &amp; blood-forming organs</b>																				
59 Deficiency and other anemia	50	55	64	39	208	43	46	57	40	186	33	57	51	45	186	49	60	42	38	189
60 Acute posthemorrhagic anemia	23	19	18	25	85	22	19	24	24	89	22	26	33	22	103	22	21	22	17	82
61 Sickle cell anemia	9	7	3	3	22	1	4	5	4	14	7	7	6	4	24	9	5	5	12	31
62 Coagulation and hemorrhagic disorders	12	8	8	6	34	9	11	8	9	37	13	9	20	17	59	19	14	18	20	71
63 Diseases of white blood cells	22	42	35	36	135	38	31	38	36	143	24	32	42	32	130	31	30	37	30	128
64 Other hematologic conditions	4	3	2	1	10	3	2	1	5	11	3	5	6	1	15	2	1	2	3	8
Total	120	134	130	110	494	116	113	133	118	480	102	136	158	121	517	132	131	126	120	509
<b>5 Mental disorders</b>																				
650 Adjustment disorders	26	21	25	24	96	26	26	25	20	97	15	18	15	19	67	18	21	12	26	77
651 Anxiety disorders	11	31	42	28	112	34	40	34	31	139	22	36	23	26	107	19	32	27	29	107
652 Attention-deficit conduct and disruptive behavior disorders	1	-	1	-	2	-	-	1	-	1	1	-	1	-	2	1	-	-	3	4
653 Delirium dementia and amnestic and other cognitive disorders	32	30	41	39	142	31	43	34	45	153	34	22	39	49	144	43	48	41	34	166
654 Developmental disorders	5	2	1	1	9	-	1	1	-	2	-	-	-	-	-	-	-	-	-	-
655 Disorders usually diagnosed in infancy childhood or adolescence	-	-	1	1	2	-	1	-	-	1	2	2	1	-	5	-	2	1	1	4
656 Impulse control disorders NEC	1	-	-	-	1	1	-	2	1	4	-	1	1	-	2	-	1	1	2	4
657 Mood disorders	256	272	278	222	1,028	262	299	279	303	1,143	309	286	252	262	1,109	302	275	289	284	1,150
658 Personality disorders	12	7	14	20	53	21	27	20	2	70	22	12	13	19	66	24	23	13	17	77
659 Schizophrenia and other psychotic disorders	91	75	81	67	314	72	85	89	78	324	63	80	72	69	284	83	84	75	61	303
660 Alcohol-related disorders	114	122	123	130	489	127	166	165	170	628	172	167	172	147	658	160	179	166	193	698
661 Substance-related disorders	75	59	60	68	262	58	51	58	42	209	36	47	39	38	160	41	42	54	32	169
662 Suicide and intentional self-inflicted injury	3	5	1	-	9	1	-	1	54	56	53	62	56	45	216	61	52	45	68	226
663 Screening and history of mental health and substance abuse codes	-	1	1	-	2	1	-	2	-	3	-	-	-	-	-	-	-	-	-	-
670 Miscellaneous disorders	21	19	13	19	72	30	17	24	8	79	5	6	11	9	31	13	8	17	14	52
Total	648	644	682	619	2,593	664	756	735	754	2,909	734	739	695	683	2,851	765	767	741	764	3,037

**Appendix E**  
**Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single Level Categories by Discharge Year and Quarter**  
 \* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM												
	2014					Yearly Total	2015					Yearly Total	2016					Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4	Q1		Q2	Q3	Q4	Q1	Q2		Q3	Q4	Q1	Q2	Q3		Q4				
<b>6 Diseases of the nervous system and sense organs</b>																							
76 Meningitis (except that caused by TB or STD)	10	7	25	15	57	8	7	13	16	44	9	13	14	11	47	5	9	26	12	52			
77 Encephalitis (except that caused by TB or STD)	3	2	1	8	14	3	3	7	3	16	9	11	7	4	31	7	3	2	12	24			
78 Other CNS infection and poliomyelitis	5	6	2	2	15	2	5	3	6	16	8	4	5	1	18	2	4	6	8	20			
79 Parkinson's disease	6	8	6	9	29	7	11	3	3	24	11	9	8	10	38	11	9	11	5	36			
80 Multiple sclerosis	2	3	9	11	25	4	5	7	6	22	6	11	8	2	27	7	7	6	12	32			
81 Other hereditary and degenerative nervous system conditions	16	20	10	14	60	18	20	27	12	77	14	11	12	13	50	12	14	6	11	43			
82 Paralysis	4	-	3	4	11	2	2	4	11	19	16	6	7	8	37	13	10	12	6	41			
83 Epilepsy; convulsions	60	72	60	41	233	60	52	50	75	237	93	100	90	90	373	76	100	88	95	359			
84 Headache; including migraine	15	17	15	13	60	21	14	18	26	79	27	29	39	33	128	26	33	19	31	109			
85 Coma; stupor; and brain damage	14	7	10	7	38	7	19	8	3	37	9	8	6	6	29	4	5	2	3	14			
87 Retinal detachments; defects; vascular occlusion; and retinopathy	1	-	1	1	3	1	1	2	1	5	-	-	1	-	1	1	-	-	2	3			
88 Glaucoma	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1			
89 Blindness and vision defects	-	1	1	1	3	2	-	1	1	4	2	1	1	3	7	-	1	-	2	3			
90 Inflammation; infection of eye (except that caused by TB or sexually transmitted disease)	2	3	4	4	13	1	2	1	1	5	7	5	6	4	22	1	4	4	1	10			
91 Other eye disorders	-	2	2	-	4	-	2	-	1	3	-	3	2	2	7	-	5	3	3	11			
92 Otitis media and related conditions	2	-	-	2	4	5	2	1	4	12	4	3	2	1	10	3	2	3	7	15			
93 Conditions associated with dizziness or vertigo	14	16	13	8	51	19	12	11	13	55	16	17	18	18	69	16	21	25	18	80			
94 Other ear and sense organ disorders	5	-	-	4	9	2	1	3	3	9	2	2	3	2	9	3	2	3	2	10			
95 Other nervous system disorders	92	93	93	83	361	100	110	114	127	451	106	129	138	129	502	127	147	144	168	586			
<b>Total</b>	<b>251</b>	<b>257</b>	<b>255</b>	<b>227</b>	<b>990</b>	<b>262</b>	<b>268</b>	<b>273</b>	<b>312</b>	<b>1,115</b>	<b>339</b>	<b>362</b>	<b>367</b>	<b>337</b>	<b>1,405</b>	<b>314</b>	<b>377</b>	<b>360</b>	<b>398</b>	<b>1,449</b>			
<b>7 Diseases of the circulatory system</b>																							
96 Heart valve disorders	47	60	69	68	244	69	60	96	82	307	62	63	60	81	266	94	85	83	68	330			
97 Peri-; endo-; and myocarditis; cardiomyopathy (except that caused by TB or STD)	20	32	35	30	117	27	34	22	31	114	35	33	35	28	131	31	41	50	35	157			
98 Essential hypertension	5	7	4	7	23	6	9	6	9	30	12	13	12	3	40	-	1	1	1	3			
99 Hypertension with complications and secondary hypertension	33	43	38	43	157	55	47	49	65	216	42	44	46	195	327	249	253	307	300	1,109			
100 Acute myocardial infarction	276	289	282	289	1,136	344	287	308	317	1,256	310	333	307	312	1,262	351	296	328	304	1,279			
101 Coronary atherosclerosis and other heart disease	103	119	120	100	442	79	114	127	101	421	110	103	97	112	422	97	127	114	109	447			
102 Nonspecific chest pain	39	40	34	42	155	40	38	61	35	174	55	48	48	55	206	47	44	40	53	184			
103 Pulmonary heart disease	89	73	91	90	343	94	88	88	75	345	108	96	97	98	399	88	78	87	83	336			
104 Other and ill-defined heart disease	6	3	6	5	20	3	9	6	6	24	11	6	8	10	35	10	9	4	4	27			
105 Conduction disorders	24	23	27	18	92	22	21	19	24	86	19	20	26	29	94	19	39	38	27	123			
106 Cardiac dysrhythmias	290	316	311	277	1,194	292	348	350	307	1,297	315	322	297	295	1,229	267	326	317	329	1,239			
107 Cardiac arrest and ventricular fibrillation	5	7	2	10	24	5	10	5	9	29	11	2	13	11	37	13	12	6	13	44			
108 Congestive heart failure; nonhypertensive	311	367	319	351	1,348	366	337	295	336	1,334	346	395	351	221	1,313	218	203	167	171	759			
109 Acute cerebrovascular disease	226	182	218	222	848	238	243	227	251	959	241	254	248	238	981	225	217	230	222	894			
110 Occlusion or stenosis of precerebral arteries	27	20	27	24	98	24	23	28	33	108	16	29	35	29	109	26	26	30	31	113			
111 Other and ill-defined cerebrovascular disease	6	8	5	6	25	9	5	10	16	40	8	10	9	7	34	11	17	13	14	55			
112 Transient cerebral ischemia	20	26	22	32	100	26	30	34	24	114	28	31	26	25	110	33	38	34	34	139			
113 Late effects of cerebrovascular disease	5	2	1	1	9	5	8	5	67	85	61	58	60	55	234	56	54	65	65	240			
114 Peripheral and visceral atherosclerosis	31	35	43	40	149	41	33	61	54	189	51	64	55	56	226	41	42	37	42	162			

**Appendix E**  
**Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single Level Categories by Discharge Year and Quarter**  
 \* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM									
	2014					2015					2016					2017				
	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
<b>CCS Single Level Diagnosis Category</b>																				
115 Aortic; peripheral; and visceral artery aneurysms	32	26	19	28	105	19	25	24	30	98	25	25	34	34	118	27	29	25	28	109
116 Aortic and peripheral arterial embolism or thrombosis	7	3	7	10	27	9	7	10	3	29	5	4	6	8	23	9	7	9	5	30
117 Other circulatory disease	24	29	41	28	122	34	28	30	22	114	33	27	25	27	112	17	31	31	18	97
118 Phlebitis; thrombophlebitis and thromboembolism	28	26	21	17	92	21	12	31	30	94	27	33	28	48	136	25	34	26	24	109
119 Varicose veins of lower extremity	1	-	3	1	5	-	-	-	2	2	1	1	5	5	12	2	1	-	2	5
120 Hemorrhoids	3	3	1	6	13	3	2	2	4	11	7	4	6	3	20	6	8	8	9	31
121 Other diseases of veins and lymphatics	11	12	8	5	36	10	7	8	5	30	6	6	1	5	18	2	12	16	2	32
<b>Total</b>	<b>1,669</b>	<b>1,751</b>	<b>1,754</b>	<b>1,750</b>	<b>6,924</b>	<b>1,841</b>	<b>1,825</b>	<b>1,902</b>	<b>1,938</b>	<b>7,506</b>	<b>1,945</b>	<b>2,024</b>	<b>1,935</b>	<b>1,990</b>	<b>7,894</b>	<b>1,964</b>	<b>2,030</b>	<b>2,066</b>	<b>1,993</b>	<b>8,053</b>
<b>8 Diseases of the respiratory system</b>																				
122 Pneumonia (except that caused by TB or STD)	498	499	355	407	1,759	537	473	356	420	1,786	426	426	299	339	1,490	428	343	256	353	1,380
123 Influenza	76	25	-	27	128	233	33	-	2	268	52	69	1	11	133	160	57	-	36	253
124 Acute and chronic tonsillitis	6	4	4	2	16	-	2	3	4	9	-	7	4	4	15	1	6	1	1	9
125 Acute bronchitis	59	29	8	22	118	77	32	10	16	135	118	53	9	21	201	72	31	12	30	145
126 Other upper respiratory infections	14	11	15	15	55	26	15	8	16	65	21	22	15	14	72	28	24	13	16	81
127 Chronic obstructive pulmonary disease and bronchiectasis	335	297	222	240	1,094	317	280	196	276	1,069	308	351	241	346	1,246	434	440	308	298	1,480
128 Asthma	76	64	63	66	269	101	81	47	44	273	45	46	34	40	165	43	46	22	53	164
129 Aspiration pneumonitis; food/vomitus	82	76	83	80	321	81	95	74	60	310	93	77	74	63	307	70	75	49	74	268
130 Pleurisy; pneumothorax; pulmonary collapse	49	46	34	37	166	35	47	49	33	164	51	53	48	39	191	44	51	39	43	177
131 Respiratory failure; insufficiency; arrest (adult)	198	170	160	204	732	299	287	219	239	1,044	237	217	169	178	801	227	169	146	157	699
132 Lung disease due to external agents	3	2	2	7	14	4	3	10	1	18	7	2	4	5	18	6	4	3	8	21
133 Other lower respiratory disease	31	33	43	29	136	38	36	33	39	146	40	44	35	37	156	41	34	39	42	156
134 Other upper respiratory disease	5	8	11	10	34	11	9	12	9	41	17	17	11	8	53	11	16	13	9	49
<b>Total</b>	<b>1,432</b>	<b>1,264</b>	<b>1,000</b>	<b>1,146</b>	<b>4,842</b>	<b>1,759</b>	<b>1,393</b>	<b>1,017</b>	<b>1,159</b>	<b>5,328</b>	<b>1,415</b>	<b>1,384</b>	<b>944</b>	<b>1,105</b>	<b>4,848</b>	<b>1,565</b>	<b>1,296</b>	<b>901</b>	<b>1,120</b>	<b>4,882</b>
<b>9 Diseases of the digestive system</b>																				
135 Intestinal infection	79	73	54	75	281	105	113	73	67	358	78	78	77	91	324	89	92	76	72	329
136 Disorders of teeth and jaw	5	12	7	3	27	6	8	7	14	35	13	14	11	5	43	8	11	13	6	38
137 Diseases of mouth; excluding dental	4	4	10	4	22	6	5	8	7	26	7	8	6	6	27	8	10	9	4	31
138 Esophageal disorders	17	16	13	19	65	16	19	17	20	72	20	28	23	23	94	23	22	29	37	111
139 Gastroduodenal ulcer (except hemorrhage)	5	12	13	10	40	11	11	16	10	48	6	5	6	6	23	9	16	15	8	48
140 Gastritis and duodenitis	15	12	14	17	58	9	13	13	13	48	6	18	14	10	48	12	13	16	17	58
141 Other disorders of stomach and duodenum	16	23	21	24	84	24	26	29	23	102	10	16	11	16	53	10	13	18	13	54
142 Appendicitis and other appendiceal conditions	80	82	87	81	330	58	68	66	49	241	80	83	86	67	316	73	82	74	83	312
143 Abdominal hernia	44	53	51	49	197	48	46	43	49	186	54	59	58	65	236	60	63	59	51	233
144 Regional enteritis and ulcerative colitis	30	38	37	31	136	36	39	35	40	150	31	32	40	32	135	44	30	46	51	171
145 Intestinal obstruction without hernia	165	163	149	153	630	162	172	145	151	630	167	166	185	184	702	146	170	155	149	620
146 Diverticulosis and diverticulitis	108	143	139	135	525	147	119	137	152	555	149	148	140	136	573	126	119	145	142	532
147 Anal and rectal conditions	15	8	12	11	46	9	12	8	11	40	11	14	14	7	46	9	13	19	13	54
148 Peritonitis and intestinal abscess	16	14	11	13	54	12	11	12	10	45	15	10	6	6	37	11	10	14	17	52
149 Biliary tract disease	96	126	109	113	444	119	116	117	119	471	132	121	125	127	505	97	128	111	116	452
151 Other liver diseases	37	43	43	40	163	44	56	46	50	196	40	30	50	44	164	37	46	38	33	154
152 Pancreatic disorders (not diabetes)	123	118	134	115	490	102	113	151	127	493	134	153	190	152	629	112	139	155	140	546

**Appendix E**  
**Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single Level Categories by Discharge Year and Quarter**  
 \* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM									
	2014					2015					2016					2017				
	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
153 Gastrointestinal hemorrhage	144	129	159	144	576	126	130	126	116	498	140	141	164	150	595	118	131	154	158	561
154 Noninfectious gastroenteritis	24	38	31	21	114	40	57	38	34	169	41	35	41	45	162	39	33	41	38	151
155 Other gastrointestinal disorders	67	56	63	65	251	71	87	81	82	321	71	98	75	98	342	80	79	81	81	321
Total	1,090	1,163	1,157	1,123	4,533	1,151	1,221	1,168	1,144	4,684	1,205	1,257	1,322	1,270	5,054	1,111	1,220	1,268	1,229	4,828
<b>10 Diseases of the genitourinary system</b>																				
156 Nephritis; nephrosis; renal sclerosis	2	5	3	2	12	2	3	2	2	9	8	9	3	5	25	6	7	3	4	20
157 Acute and unspecified renal failure	122	186	188	151	647	163	165	163	137	628	147	183	161	138	629	136	164	164	125	589
158 Chronic kidney disease	5	12	13	7	37	5	6	6	3	20	2	6	9	5	22	6	4	2	3	15
159 Urinary tract infections	163	173	170	186	692	151	154	196	172	673	152	180	176	161	669	170	200	189	174	733
160 Calculus of urinary tract	32	43	35	40	150	38	39	47	17	141	10	12	8	13	43	10	9	15	8	42
161 Other diseases of kidney and ureters	14	16	19	10	59	14	10	8	43	75	42	46	62	34	184	36	39	51	45	171
162 Other diseases of bladder and urethra	7	7	12	9	35	8	12	11	5	36	9	9	10	15	43	8	7	12	5	32
163 Genitourinary symptoms and ill-defined conditions	11	14	15	11	51	8	7	10	11	36	9	13	14	12	48	10	16	10	9	45
164 Hyperplasia of prostate	18	13	10	14	55	13	17	13	23	66	16	14	14	13	57	13	12	12	10	47
165 Inflammatory conditions of male genital organs	8	4	8	7	27	9	11	5	8	33	5	8	6	6	25	8	6	8	7	29
166 Other male genital disorders	-	3	4	-	7	4	4	2	-	10	-	2	1	3	6	3	1	-	1	5
167 Nonmalignant breast conditions	2	4	4	1	11	3	3	-	6	12	2	2	3	4	11	6	3	4	1	14
168 Inflammatory diseases of female pelvic organs	11	5	5	8	29	8	6	8	11	33	11	11	5	6	33	5	8	4	6	23
169 Endometriosis	2	9	2	-	13	2	1	2	4	9	6	3	2	-	11	3	1	6	4	14
170 Prolapse of female genital organs	7	3	5	8	23	1	-	2	5	8	3	2	1	1	7	1	1	5	3	10
171 Menstrual disorders	8	9	7	7	31	8	9	5	9	31	4	5	3	-	12	2	-	2	2	6
172 Ovarian cyst	4	4	4	1	13	4	4	3	2	13	3	5	6	1	15	5	2	6	-	13
173 Menopausal disorders	-	1	1	-	2	-	-	-	1	1	-	-	-	-	-	-	3	-	1	4
175 Other female genital disorders	5	9	9	4	27	5	6	11	8	30	5	13	4	3	25	8	6	11	14	39
Total	421	520	514	466	1,921	446	457	494	467	1,864	434	523	488	420	1,865	436	489	504	422	1,851
<b>11 Pregnancy, childbirth, and the puerperium</b>																				
176 Contraceptive and procreative management	-	-	1	-	1	-	-	1	-	1	-	-	-	-	-	-	-	1	-	1
177 Spontaneous abortion	1	1	1	1	4	-	1	1	4	6	3	-	4	2	9	-	3	1	-	4
178 Induced abortion	1	2	3	2	8	1	1	2	1	5	2	2	1	7	4	3	1	-	8	8
179 Postabortion complications	1	-	-	-	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-
180 Ectopic pregnancy	2	3	1	1	7	1	1	5	6	13	2	-	1	-	3	2	3	1	1	7
181 Other complications of pregnancy	140	147	141	143	571	141	155	154	89	539	94	83	100	101	378	80	81	87	78	326
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa	23	22	18	18	81	29	19	21	21	90	23	20	20	20	83	20	17	24	13	74
183 Hypertension complicating pregnancy; childbirth and the puerperium	97	109	117	131	454	105	96	104	129	434	132	116	115	112	475	136	134	134	120	524
184 Early or threatened labor	36	56	51	28	171	39	43	44	36	162	38	40	42	44	164	31	46	38	32	147
185 Prolonged pregnancy	187	263	264	207	921	204	213	251	147	815	148	143	249	198	738	177	182	168	162	689
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium	29	26	26	27	108	27	29	39	29	124	20	27	34	36	117	37	59	43	52	191
187 Malposition; malpresentation	43	59	55	65	222	61	54	53	48	216	68	48	70	62	248	44	48	66	60	218
188 Fetopelvic disproportion; obstruction	15	17	10	18	60	14	20	23	8	65	13	24	20	15	72	12	23	16	17	68
189 Previous C-section	102	106	140	110	458	110	125	136	118	489	107	121	123	101	452	93	131	104	98	426
190 Fetal distress and abnormal forces of labor	96	93	91	76	356	68	64	92	73	297	54	82	60	64	260	58	68	50	46	222
191 Polyhydramnios and other problems of amniotic cavity	107	126	127	120	480	122	124	115	103	464	140	167	172	143	622	120	132	187	143	582
192 Umbilical cord complication	46	32	57	51	186	45	45	59	64	213	68	58	75	56	257	56	71	50	31	208

**Appendix E**  
**Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single Level Categories by Discharge Year and Quarter**  
\* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM									
	2014					2015					2016					2017				
	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
<b>CCS Single Level Diagnosis Category</b>																				
193 OB-related trauma to perineum and vulva	168	172	173	148	661	148	169	159	189	665	183	176	117	109	585	121	147	153	133	554
194 Forceps delivery	1	-	-	-	1	-	-	-	1	1	1	-	-	-	1	-	-	-	-	-
195 Other complications of birth; puerperium affecting management of mother	240	223	213	214	890	233	237	254	244	968	249	260	275	244	1,028	238	276	287	288	1,089
196 Normal pregnancy and/or delivery	40	52	30	44	166	36	52	31	40	159	23	31	21	37	112	32	37	49	36	154
<b>Total</b>	<b>1,375</b>	<b>1,509</b>	<b>1,519</b>	<b>1,404</b>	<b>5,807</b>	<b>1,385</b>	<b>1,448</b>	<b>1,544</b>	<b>1,350</b>	<b>5,727</b>	<b>1,368</b>	<b>1,398</b>	<b>1,500</b>	<b>1,345</b>	<b>5,611</b>	<b>1,261</b>	<b>1,461</b>	<b>1,460</b>	<b>1,310</b>	<b>5,492</b>
<b>12 Diseases of the skin and subcutaneous tissue</b>																				
197 Skin and subcutaneous tissue infections	161	206	235	186	788	174	186	231	170	761	178	203	248	196	825	174	188	226	208	796
198 Other inflammatory condition of skin	7	3	3	4	17	2	3	3	6	14	3	3	3	4	13	3	1	5	4	13
199 Chronic ulcer of skin	14	13	18	19	64	12	15	18	11	56	10	15	11	24	60	19	14	16	12	61
200 Other skin disorders	-	-	3	1	4	-	3	-	2	5	3	2	2	4	11	2	3	2	3	10
<b>Total</b>	<b>182</b>	<b>222</b>	<b>259</b>	<b>210</b>	<b>873</b>	<b>188</b>	<b>207</b>	<b>252</b>	<b>189</b>	<b>836</b>	<b>194</b>	<b>223</b>	<b>264</b>	<b>228</b>	<b>909</b>	<b>198</b>	<b>206</b>	<b>249</b>	<b>227</b>	<b>880</b>
<b>13 Musculoskeletal system and connective tissue</b>																				
201 Infective arthritis and osteomyelitis (except that caused by TB or STD)	32	33	33	34	132	32	26	50	40	148	49	51	55	48	203	44	32	47	55	178
202 Rheumatoid arthritis and related disease	6	5	4	7	22	6	2	3	2	13	3	3	4	6	16	4	4	3	7	18
203 Osteoarthritis	510	524	463	568	2,065	563	572	539	634	2,308	648	623	627	669	2,567	658	709	669	739	2,775
204 Other non-traumatic joint disorders	15	13	6	15	49	15	15	16	17	63	18	20	18	23	79	27	17	15	16	75
205 Spondylosis; intervertebral disc disorders; other back problems	147	130	154	169	600	151	184	153	184	672	146	180	168	174	668	161	153	128	141	583
206 Osteoporosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
207 Pathological fracture	17	18	17	30	82	29	29	38	38	134	24	42	26	43	135	32	27	36	41	136
208 Acquired foot deformities	2	2	1	-	5	1	1	1	-	3	-	-	1	-	1	-	1	1	-	2
209 Other acquired deformities	36	36	27	31	130	40	30	39	57	166	45	50	39	34	168	40	42	38	28	148
210 Systemic lupus erythematosus and connective tissue disorders	2	2	-	3	7	3	3	1	5	12	4	10	11	7	32	7	8	8	3	26
211 Other connective tissue disease	44	38	49	56	187	48	53	46	44	191	68	45	57	38	208	59	45	48	50	202
212 Other bone disease and musculoskeletal deformities	30	27	23	24	104	26	20	31	10	87	9	16	22	19	66	17	15	21	19	72
<b>Total</b>	<b>841</b>	<b>828</b>	<b>777</b>	<b>937</b>	<b>3,383</b>	<b>914</b>	<b>935</b>	<b>917</b>	<b>1,031</b>	<b>3,797</b>	<b>1,014</b>	<b>1,040</b>	<b>1,028</b>	<b>1,061</b>	<b>4,143</b>	<b>1,049</b>	<b>1,053</b>	<b>1,014</b>	<b>1,099</b>	<b>4,215</b>
<b>14 Congenital anomalies</b>																				
213 Cardiac and circulatory congenital anomalies	9	2	8	8	27	3	9	4	13	29	8	14	18	16	56	13	14	18	7	52
214 Digestive congenital anomalies	5	5	11	9	30	5	10	5	4	24	5	7	3	8	23	10	4	5	9	28
215 Genitourinary congenital anomalies	-	5	5	2	12	4	5	5	5	19	7	7	3	3	20	10	4	5	6	25
216 Nervous system congenital anomalies	6	4	2	2	14	2	3	4	4	13	1	5	3	2	11	4	2	5	1	12
217 Other congenital anomalies	11	13	10	9	43	9	8	11	6	34	5	8	5	8	26	6	5	11	8	30
<b>Total</b>	<b>31</b>	<b>29</b>	<b>36</b>	<b>30</b>	<b>126</b>	<b>23</b>	<b>35</b>	<b>29</b>	<b>32</b>	<b>119</b>	<b>26</b>	<b>41</b>	<b>32</b>	<b>37</b>	<b>136</b>	<b>43</b>	<b>29</b>	<b>44</b>	<b>31</b>	<b>147</b>
<b>15 Conditions originating in the perinatal period</b>																				
218 Liveborn	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
224 Other perinatal conditions	-	-	-	2	2	-	1	-	2	3	3	3	2	2	10	2	1	1	2	6
<b>Total</b>	<b>-</b>	<b>1</b>	<b>-</b>	<b>2</b>	<b>3</b>	<b>-</b>	<b>1</b>	<b>-</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>10</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>6</b>

**Appendix E**  
**Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single Level Categories by Discharge Year and Quarter**  
 \* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM										ICD-10-CM									
	2014					2015					2016					2017				
	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
<b>16 Injury &amp; poisoning</b>																				
225 Joint disorders and dislocations; trauma-related	12	10	7	7	36	4	13	18	5	40	3	8	4	5	20	13	9	7	9	38
226 Fracture of neck of femur (hip)	205	145	168	157	675	170	154	189	197	710	203	161	173	192	729	213	171	189	207	780
227 Spinal cord injury	2	3	7	3	15	11	6	8	10	35	3	10	12	9	34	7	6	9	8	30
228 Skull and face fractures	1	12	15	5	33	7	17	8	17	49	14	26	26	16	82	20	18	17	11	66
229 Fracture of upper limb	48	36	40	32	156	41	25	52	42	160	42	52	61	57	212	51	51	61	51	214
230 Fracture of lower limb	144	85	93	108	430	152	88	99	99	438	191	117	132	154	594	162	108	148	163	581
231 Other fractures	96	97	118	110	421	86	110	116	158	470	143	132	154	130	559	127	119	144	149	539
232 Sprains and strains	10	8	8	7	33	9	5	8	8	30	7	13	5	8	33	11	7	12	10	40
233 Intracranial injury	67	67	83	56	273	61	70	76	67	274	88	73	80	71	312	75	78	114	82	349
234 Crushing injury or internal injury	32	38	49	37	156	37	34	48	35	154	40	39	54	28	161	35	47	54	43	179
235 Open wounds of head; neck; and trunk	5	5	8	2	20	7	4	5	5	21	4	11	6	6	27	8	4	11	6	29
236 Open wounds of extremities	5	10	15	10	40	8	14	23	13	58	11	9	20	7	47	11	14	20	16	61
237 Complication of device; implant or graft	185	159	177	192	713	166	179	215	158	718	170	155	174	185	684	139	166	173	168	646
238 Complications of surgical procedures or medical care	167	157	191	171	686	145	158	162	199	664	165	165	178	197	705	179	186	166	170	701
239 Superficial injury; contusion	9	9	11	14	43	10	13	18	19	60	13	18	19	17	67	16	20	22	19	77
240 Burns	8	9	12	5	34	7	15	9	10	41	7	13	11	9	40	4	7	15	11	37
241 Poisoning by psychotropic agents	29	38	26	36	129	22	27	28	9	86	13	9	13	9	44	10	9	3	7	29
242 Poisoning by other medications and drugs	35	53	47	56	191	51	47	48	29	175	30	25	26	22	103	20	30	41	23	114
243 Poisoning by nonmedicinal substances	3	6	5	4	18	4	3	1	5	13	3	4	6	6	19	5	6	5	11	27
244 Other injuries and conditions due to external causes	24	23	18	13	78	41	15	14	24	94	38	36	31	32	137	31	38	50	32	151
<b>Total</b>	<b>1,087</b>	<b>970</b>	<b>1,098</b>	<b>1,025</b>	<b>4,180</b>	<b>1,039</b>	<b>997</b>	<b>1,145</b>	<b>1,109</b>	<b>4,290</b>	<b>1,188</b>	<b>1,076</b>	<b>1,185</b>	<b>1,160</b>	<b>4,609</b>	<b>1,137</b>	<b>1,094</b>	<b>1,261</b>	<b>1,196</b>	<b>4,688</b>
<b>17 Symptoms, signs &amp; ill-defined conditions</b>																				
245 Syncope	29	37	25	32	123	23	22	46	42	133	38	45	48	53	184	43	50	54	49	196
246 Fever of unknown origin	15	16	27	20	78	11	19	29	26	85	19	14	28	18	79	18	19	31	25	93
247 Lymphadenitis	2	2	2	2	8	5	1	4	1	11	4	3	3	5	15	1	3	2	4	10
248 Gangrene	5	8	2	6	21	17	8	11	10	46	5	6	9	8	28	12	14	10	11	47
249 Shock	-	1	-	1	2	-	-	-	5	5	5	6	4	4	19	1	6	2	2	11
250 Nausea and vomiting	11	16	15	7	49	14	14	18	14	60	14	32	26	25	97	17	13	26	15	71
251 Abdominal pain	23	33	28	33	117	32	25	32	35	124	34	29	38	34	135	27	27	18	38	110
252 Malaise and fatigue	11	9	11	8	39	11	25	15	21	72	10	20	18	28	76	20	23	33	27	103
253 Allergic reactions	2	9	6	2	19	2	8	9	7	26	8	7	5	11	31	3	9	4	10	26
254 Rehabilitation care; fitting of prostheses; and adjustment of devices	261	285	308	323	1,177	348	362	348	-	1,058	-	1	-	-	1	1	-	-	1	2
255 Administrative/social admission	1	2	1	1	5	1	-	2	1	4	1	3	4	-	8	-	3	2	1	6
256 Medical examination/evaluation	2	2	1	1	6	-	4	2	-	6	-	-	-	-	-	-	-	-	-	-
257 Other aftercare	12	8	21	15	56	8	17	27	189	241	203	187	201	156	747	173	208	167	193	741
258 Other screening for suspected conditions (not mental disorders or infectious disease)	-	1	-	1	2	1	4	-	4	9	4	6	3	5	18	3	3	5	5	16
<b>Total</b>	<b>374</b>	<b>429</b>	<b>447</b>	<b>452</b>	<b>1,702</b>	<b>473</b>	<b>509</b>	<b>543</b>	<b>355</b>	<b>1,880</b>	<b>345</b>	<b>359</b>	<b>387</b>	<b>347</b>	<b>1,438</b>	<b>319</b>	<b>378</b>	<b>354</b>	<b>381</b>	<b>1,432</b>
<b>18 Residual codes, unclassified, all Ecodes</b>																				
259 Residual codes; unclassified	25	36	35	34	130	28	36	25	41	130	46	50	36	52	184	39	50	34	46	169
2617 Adverse effects of medical drugs	-	-	-	-	-	-	-	-	9	9	8	7	4	2	21	4	3	3	1	11
<b>Total</b>	<b>25</b>	<b>36</b>	<b>35</b>	<b>34</b>	<b>130</b>	<b>28</b>	<b>36</b>	<b>25</b>	<b>50</b>	<b>139</b>	<b>54</b>	<b>57</b>	<b>40</b>	<b>54</b>	<b>205</b>	<b>43</b>	<b>53</b>	<b>37</b>	<b>47</b>	<b>180</b>
<b>Totals by Quarter/Year</b>	<b>10,864</b>	<b>11,258</b>	<b>11,140</b>	<b>10,896</b>	<b>44,158</b>	<b>11,753</b>	<b>11,813</b>	<b>11,739</b>	<b>11,617</b>	<b>46,922</b>	<b>11,960</b>	<b>12,268</b>	<b>11,991</b>	<b>11,781</b>	<b>48,000</b>	<b>11,964</b>	<b>12,138</b>	<b>12,050</b>	<b>12,011</b>	<b>48,163</b>



APPENDIX F

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>1 Infectious &amp; parasitic diseases</b>																				
1 Tuberculosis	1	1	-	-	2	-	-	1	1	2	-	1	-	-	1	-	-	-	-	-
2 Septicemia (except in labor)	3	4	3	5	15	1	4	-	1	6	-	-	-	-	-	1	-	2	2	5
3 Bacterial infection; unspecified site	10	3	10	4	27	4	2	6	9	21	6	12	9	7	34	7	10	13	5	35
4 Mycoses	49	76	67	56	248	55	86	86	77	304	64	55	48	58	225	44	75	77	93	289
5 HIV infection	2	1	3	1	7	2	-	6	2	10	-	1	-	-	1	3	-	-	-	3
6 Hepatitis	29	15	4	3	51	8	6	9	4	27	4	28	13	17	62	12	17	11	9	49
7 Viral infection	45	58	79	79	261	69	75	72	73	289	72	64	41	33	210	38	28	36	43	145
8 Other infections; including parasitic	37	38	41	40	156	42	47	46	5	140	7	7	8	6	28	5	4	5	8	22
9 Sexually transmitted infections (not HIV or hepatitis)	5	8	14	8	35	7	6	7	11	31	11	8	2	5	26	14	21	10	12	57
10 Immunizations and screening for infectious disease	7	9	12	18	46	10	13	10	11	44	11	11	21	41	84	29	15	14	79	137
Total	188	213	233	214	848	198	239	243	194	874	175	187	142	167	671	153	170	168	251	742
<b>2 Neoplasms</b>																				
11 Cancer of head and neck	76	103	79	95	353	72	71	92	82	317	54	68	55	65	242	71	60	64	67	262
12 Cancer of esophagus	28	33	26	21	108	39	29	31	25	124	27	20	42	40	129	33	34	28	25	120
13 Cancer of stomach	10	8	11	10	39	20	10	10	9	49	1	5	18	21	45	20	14	9	19	62
14 Cancer of colon	132	143	141	118	534	109	91	130	96	426	117	118	122	98	455	121	124	130	121	496
15 Cancer of rectum and anus	77	96	79	75	327	74	52	70	97	293	87	72	97	89	345	82	83	59	75	299
16 Cancer of liver and intrahepatic bile duct	23	23	11	11	68	12	11	18	9	50	21	8	6	17	52	10	21	14	10	55
17 Cancer of pancreas	34	27	37	37	135	21	25	28	36	110	32	48	47	59	186	48	40	40	45	173
18 Cancer of other GI organs; peritoneum	5	11	17	13	46	10	11	12	10	43	9	11	7	9	36	9	13	12	12	46
19 Cancer of bronchus; lung	85	124	98	105	412	118	79	114	105	416	135	136	159	119	549	128	114	110	119	471
20 Cancer; other respiratory and intrathoracic	1	-	3	-	4	-	-	1	-	1	-	1	1	1	3	1	3	-	-	4
21 Cancer of bone and connective tissue	17	21	9	8	55	12	8	13	14	47	6	10	12	6	34	7	4	10	3	24
22 Melanomas of skin	66	65	57	68	256	43	47	82	72	244	78	79	85	54	296	61	55	73	64	253
23 Other non-epithelial cancer of skin	413	496	433	409	1,751	369	442	497	497	1,805	466	468	526	500	1,960	433	461	487	541	1,922
24 Cancer of breast	308	309	202	245	1,064	240	216	221	257	934	223	222	221	193	859	220	213	219	214	866
25 Cancer of uterus	44	67	59	50	220	47	71	85	72	275	58	48	52	44	202	46	63	83	50	242
26 Cancer of cervix	29	33	32	39	133	27	37	21	31	116	44	33	24	24	125	52	44	48	61	205
27 Cancer of ovary	21	38	43	35	137	45	46	43	37	171	51	39	34	34	158	41	41	43	38	163
28 Cancer of other female genital organs	20	19	11	7	57	11	8	15	9	43	9	13	34	17	73	15	13	16	19	63
29 Cancer of prostate	71	82	69	47	269	38	54	58	76	226	48	60	62	58	228	64	53	58	67	242
30 Cancer of testis	13	13	13	4	43	7	2	3	2	14	6	3	8	4	21	10	5	9	5	29
31 Cancer of other male genital organs	1	2	-	2	5	5	8	4	4	21	2	2	2	3	9	2	-	2	1	5
32 Cancer of bladder	226	302	226	238	992	184	233	184	208	809	217	259	176	151	803	200	185	178	177	740
33 Cancer of kidney and renal pelvis	13	10	16	18	57	12	11	13	20	56	10	9	10	14	43	14	9	6	13	42
34 Cancer of other urinary organs	7	8	2	4	21	3	5	6	12	26	2	9	15	6	32	13	11	10	12	46
35 Cancer of brain and nervous system	4	7	4	9	24	3	3	3	3	12	4	4	5	3	16	3	3	2	3	11
36 Cancer of thyroid	18	18	12	13	61	10	18	16	24	68	28	33	21	24	106	15	11	24	25	75
37 Hodgkin's disease	9	20	9	7	45	11	7	8	11	37	14	14	14	5	47	16	12	14	21	63
38 Non-Hodgkin's lymphoma	128	142	124	113	507	116	158	183	219	676	171	149	154	136	610	184	144	100	133	561
39 Leukemias	75	83	89	79	326	53	61	78	81	273	68	55	57	47	227	53	59	62	40	214
40 Multiple myeloma	43	31	33	43	150	27	19	31	20	97	34	29	37	38	138	23	19	44	44	130
41 Cancer; other and unspecified primary	9	10	12	12	43	13	10	13	32	68	28	24	20	25	97	14	16	14	17	61
42 Secondary malignancies	20	36	46	46	148	24	35	23	34	116	37	32	29	46	144	35	60	34	45	174
43 Malignant neoplasm without specification of site	10	14	20	16	60	13	16	16	9	54	20	10	19	16	65	19	21	21	15	76
44 Neoplasms of unspecified nature or uncertain behavior	339	447	104	75	965	105	77	100	96	378	108	94	90	71	363	103	102	98	119	422

APPENDIX F

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>CCS Single Level Group</b>																				
45 Maintenance chemotherapy; radiotherapy	65	86	55	23	229	21	16	20	5	62	1	9	7	6	23	3	3	1	1	8
46 Benign neoplasm of uterus	40	49	53	60	202	47	40	33	37	157	47	50	32	70	199	55	47	44	38	184
47 Other and unspecified benign neoplasm	1,215	1,373	1,268	1,208	5,064	1,053	1,182	1,186	1,189	4,610	1,329	1,361	1,431	1,548	5,669	1,437	1,211	884	800	4,332
<b>Total</b>	3,695	4,349	3,503	3,363	14,910	3,014	3,209	3,461	3,540	13,224	3,592	3,605	3,731	3,661	14,589	3,661	3,371	3,050	3,059	13,141
<b>3 Endocrine, nutritional, metabolic, immunity</b>																				
48 Thyroid disorders	105	105	102	85	397	60	38	37	55	190	52	54	45	37	188	45	55	55	53	208
49 Diabetes mellitus without complication	84	102	89	87	362	97	124	87	35	343	27	23	18	21	89	24	22	26	38	110
50 Diabetes mellitus with complications	203	210	281	260	954	224	231	266	309	1,030	300	279	228	236	1,043	245	231	223	213	912
51 Other endocrine disorders	10	21	7	17	55	10	15	12	10	47	14	14	18	17	63	21	29	8	20	78
52 Nutritional deficiencies	5	2	3	4	14	2	3	1	2	8	5	7	6	6	24	3	3	5	2	13
53 Disorders of lipid metabolism	11	11	10	9	41	11	7	13	3	34	3	13	9	7	32	7	12	12	7	38
54 Gout and other crystal arthropathies	7	11	6	11	35	4	7	5	15	31	10	6	13	12	41	13	10	8	14	45
55 Fluid and electrolyte disorders	1	1	4	3	9	2	2	3	3	10	3	8	3	9	23	3	4	2	1	10
56 Cystic fibrosis	83	84	89	90	346	103	96	101	109	409	91	81	48	54	274	43	38	37	41	159
57 Immunity disorders	3	5	5	3	16	4	4	4	40	52	44	37	39	43	163	37	55	46	59	197
58 Other nutritional; endocrine; and metabolic disorders	53	38	55	48	194	33	55	48	43	179	47	41	38	45	171	24	39	40	34	137
<b>Total</b>	565	590	651	617	2,423	550	582	577	624	2,333	596	563	465	487	2,111	465	498	462	482	1,907
<b>4 Diseases of the blood &amp; blood-forming organs</b>																				
59 Deficiency and other anemia	165	193	169	173	700	157	173	187	154	671	135	151	144	142	572	134	148	152	125	559
60 Acute posthemorrhagic anemia	-	-	-	-	-	-	1	2	-	3	1	1	-	-	2	-	2	-	-	2
61 Sickle cell anemia	3	-	-	1	4	-	-	2	-	2	1	-	1	1	3	-	2	1	5	8
62 Coagulation and hemorrhagic disorders	15	18	10	10	53	11	11	12	10	44	11	13	18	15	57	7	15	10	11	43
63 Diseases of white blood cells	5	-	14	9	28	7	6	3	3	19	5	6	5	6	22	5	7	6	6	24
64 Other hematologic conditions	8	-	1	2	11	1	1	1	3	6	2	2	1	1	6	3	1	-	3	7
<b>Total</b>	196	211	194	195	796	176	192	207	170	745	155	173	169	165	662	149	175	169	150	643
<b>5 Mental disorders</b>																				
650 Adjustment disorders	5	1	1	1	8	2	-	-	1	3	2	-	1	-	3	-	3	-	-	3
651 Anxiety disorders	40	48	42	39	169	4	5	7	9	25	13	8	2	1	24	4	5	1	1	11
652 Attention-deficit conduct and disruptive behavior disorders	-	-	-	3	3	3	3	-	7	13	11	3	-	-	14	-	-	-	-	-
653 Delirium dementia and amnestic and other cognitive disorders	1	-	-	2	3	3	1	2	4	10	-	5	-	2	7	3	3	-	3	9
654 Developmental disorders	-	1	-	2	3	-	-	1	2	3	1	3	2	-	6	-	-	-	-	-
655 Disorders usually diagnosed in infancy childhood or adolescence	1	-	1	1	3	-	1	2	-	3	-	-	1	-	1	-	1	1	2	4
656 Impulse control disorders NEC	-	-	-	1	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-
657 Mood disorders	3	4	5	12	24	3	10	5	2	20	6	5	3	3	17	10	8	11	7	36
658 Personality disorders	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
659 Schizophrenia and other psychotic disorders	3	2	3	2	10	2	1	4	3	10	1	2	2	5	10	3	3	2	3	11
660 Alcohol-related disorders	1	4	3	4	12	2	1	4	22	29	15	13	14	14	56	13	7	10	16	46
661 Substance-related disorders	6	8	5	4	23	5	8	8	34	55	24	22	18	60	124	52	81	56	81	270
662 Suicide and intentional self-inflicted injury	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
663 Screening and history of mental health and substance abuse codes	13	11	18	11	53	17	14	23	18	72	97	113	92	136	438	118	133	106	83	440
670 Miscellaneous disorders	8	14	16	16	54	16	22	15	25	78	18	22	25	17	82	31	12	24	17	84
<b>Total</b>	82	93	94	99	368	57	66	72	127	322	188	196	160	238	782	234	256	211	213	914
<b>6 Diseases of the nervous system and sense organs</b>																				
76 Meningitis (except that caused by TB or STD)	2	-	1	1	4	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
77 Encephalitis (except that caused by TB or STD)	1	4	-	-	5	2	1	1	-	4	2	1	1	1	5	-	1	1	-	2

**APPENDIX F**

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
78 Other CNS infection and poliomyelitis	1	-	3	2	6	3	-	-	-	3	-	-	1	-	1	-	1	1	-	2
79 Parkinson's disease	12	17	35	10	74	19	23	27	18	87	12	9	13	19	53	19	18	25	16	78
80 Multiple sclerosis	16	25	16	12	69	24	22	27	18	91	19	15	7	10	51	17	9	6	10	42
81 Other hereditary and degenerative nervous system conditions	74	80	86	86	326	93	117	95	91	396	83	74	79	66	302	55	71	80	83	289
82 Paralysis	28	42	69	81	220	64	80	68	63	275	76	73	44	50	243	47	54	32	24	157
83 Epilepsy; convulsions	8	11	15	12	46	7	10	12	15	44	8	7	5	7	27	8	10	7	9	34
84 Headache; including migraine	74	86	84	87	331	95	91	111	107	404	112	132	98	94	436	119	118	134	143	514
85 Coma; stupor; and brain damage	-	-	-	-	-	1	-	9	3	13	1	3	3	-	7	5	2	2	1	10
86 Cataract	977	1,093	1,208	1,121	4,399	923	1,130	1,099	1,156	4,308	1,045	1,088	1,050	1,063	4,246	1,067	1,009	1,108	1,147	4,331
87 Retinal detachments; defects; vascular occlusion; and retinopathy	458	492	485	421	1,856	453	471	538	487	1,949	468	544	526	504	2,042	512	500	636	617	2,265
88 Glaucoma	45	45	81	72	243	47	92	80	116	335	102	99	101	92	394	91	117	64	106	378
89 Blindness and vision defects	22	18	9	11	60	15	18	16	18	67	18	12	13	15	58	17	11	12	7	47
90 Inflammation; infection of eye (except that caused by TB or sexually transmitted disease)	8	5	1	8	22	4	10	17	10	41	13	15	11	15	54	9	5	5	10	29
91 Other eye disorders	89	86	108	92	375	104	110	111	134	459	120	138	106	122	486	104	107	106	163	480
92 Otitis media and related conditions	277	274	252	264	1,067	272	291	305	247	1,115	288	299	276	237	1,100	251	296	255	272	1,074
93 Conditions associated with dizziness or vertigo	12	21	24	28	85	17	15	34	38	104	20	21	30	27	98	60	37	44	43	184
94 Other ear and sense organ disorders	326	468	486	481	1,761	426	501	563	545	2,035	518	596	569	599	2,282	520	580	552	629	2,281
95 Other nervous system disorders	875	732	784	796	3,187	843	832	797	912	3,384	881	879	762	874	3,396	876	874	806	891	3,447
<b>Total</b>	<b>3,305</b>	<b>3,499</b>	<b>3,747</b>	<b>3,585</b>	<b>14,136</b>	<b>3,412</b>	<b>3,814</b>	<b>3,910</b>	<b>3,978</b>	<b>15,114</b>	<b>3,786</b>	<b>4,005</b>	<b>3,696</b>	<b>3,795</b>	<b>15,282</b>	<b>3,777</b>	<b>3,820</b>	<b>3,876</b>	<b>4,171</b>	<b>15,644</b>
<b>7 Diseases of the circulatory system</b>																				
96 Heart valve disorders	31	36	30	30	127	31	19	29	30	109	30	34	33	13	110	22	23	16	13	74
97 Peri-; endo-; and myocarditis; cardiomyopathy (except that caused by TB or STD)	16	11	28	14	69	19	10	8	19	56	20	25	19	18	82	16	21	12	19	68
98 Essential hypertension	28	42	27	23	120	21	21	16	26	84	33	22	23	18	96	26	28	23	23	100
99 Hypertension with complications and secondary hypertension	17	11	16	15	59	15	23	29	15	82	21	19	18	23	81	22	19	14	46	101
100 Acute myocardial infarction	8	15	19	17	59	9	9	20	13	51	16	14	13	5	48	11	14	9	5	39
101 Coronary atherosclerosis and other heart disease	233	266	243	263	1,005	224	254	240	189	907	262	263	210	295	1,030	214	264	245	252	975
102 Nonspecific chest pain	45	39	52	49	185	42	29	34	29	134	36	39	42	35	152	38	32	30	29	129
103 Pulmonary heart disease	16	12	23	21	72	28	24	34	23	109	20	23	27	23	93	28	16	25	9	78
104 Other and ill-defined heart disease	7	11	4	5	27	4	4	7	3	18	9	4	4	2	19	6	8	9	11	34
105 Conduction disorders	37	47	40	61	185	47	77	50	37	211	37	41	40	55	173	38	32	32	36	138
106 Cardiac dysrhythmias	185	194	145	114	638	134	144	148	177	603	146	160	159	185	650	147	188	156	145	636
107 Cardiac arrest and ventricular fibrillation	1	1	1	2	5	1	1	1	1	4	2	-	-	4	6	1	1	2	-	4
108 Congestive heart failure; nonhypertensive	12	18	20	19	69	20	13	15	19	67	18	14	16	15	63	16	17	15	16	64
109 Acute cerebrovascular disease	9	10	12	12	43	7	9	10	6	32	9	15	13	7	44	20	20	10	25	75
110 Occlusion or stenosis of precerebral arteries	6	1	6	4	17	3	8	2	5	18	2	4	1	1	8	1	-	3	1	5
111 Other and ill-defined cerebrovascular disease	6	18	9	12	45	10	30	11	16	67	12	21	12	14	59	15	10	12	14	51
112 Transient cerebral ischemia	1	2	2	-	5	2	-	1	1	4	1	3	-	3	7	1	2	1	-	4
113 Late effects of cerebrovascular disease	1	3	5	15	24	11	7	9	5	32	4	7	6	3	20	6	7	4	6	23
114 Peripheral and visceral atherosclerosis	277	318	349	256	1,200	247	284	302	113	946	102	123	100	95	420	72	86	113	87	358
115 Aortic; peripheral; and visceral artery aneurysms	9	4	7	9	29	4	5	8	7	24	9	6	7	6	28	2	7	10	6	25
116 Aortic and peripheral arterial embolism or thrombosis	3	5	2	2	12	-	4	1	2	7	2	3	1	1	7	1	1	-	1	3
117 Other circulatory disease	49	53	47	40	189	38	35	37	26	136	32	37	24	26	119	24	40	23	40	127

## APPENDIX F

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>CCS Single Level Group</b>																				
118 Phlebitis; thrombophlebitis and thromboembolism	7	14	15	17	53	10	11	10	11	42	10	9	20	13	52	7	6	1	5	19
119 Varicose veins of lower extremity	42	33	34	61	170	28	41	44	48	161	39	31	27	49	146	41	44	45	49	179
120 Hemorrhoids	89	109	78	69	345	67	77	87	95	326	95	92	79	93	359	88	103	75	66	332
121 Other diseases of veins and lymphatics	83	106	80	94	363	72	92	70	94	328	94	83	88	89	354	72	94	93	87	346
Total	1,218	1,379	1,294	1,224	5,115	1,094	1,231	1,223	1,010	4,558	1,061	1,092	982	1,091	4,226	935	1,083	978	991	3,987
<b>8 Diseases of the respiratory system</b>																				
122 Pneumonia (except that caused by TB or STD)	26	26	15	42	109	46	34	45	36	161	34	38	24	32	128	33	32	29	33	127
123 Influenza	1	-	-	-	1	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-
124 Acute and chronic tonsillitis	162	161	130	125	578	138	144	171	139	592	147	147	110	116	520	105	115	153	144	517
125 Acute bronchitis	6	6	5	7	24	9	4	10	7	30	4	10	3	9	26	6	12	5	12	35
126 Other upper respiratory infections	121	121	179	154	575	168	236	178	178	760	186	210	168	159	723	161	144	138	142	585
127 Chronic obstructive pulmonary disease and bronchiectasis	240	360	371	412	1,383	409	511	503	531	1,954	563	648	571	570	2,352	580	582	636	597	2,395
128 Asthma	234	252	274	351	1,111	353	408	373	367	1,501	419	404	245	416	1,484	421	451	473	477	1,822
129 Aspiration pneumonia; food/vomitus	-	1	-	1	2	2	1	2	3	8	2	3	4	2	11	1	1	2	1	5
130 Pleurisy; pneumothorax; pulmonary collapse	45	64	41	58	208	52	49	41	61	203	51	61	53	55	220	51	68	76	43	238
131 Respiratory failure; insufficiency; arrest (adult)	11	6	10	11	38	11	11	11	13	46	9	6	9	6	30	7	9	7	7	30
132 Lung disease due to external agents	11	8	7	8	34	7	7	11	8	33	9	8	1	8	26	5	9	6	11	31
133 Other lower respiratory disease	849	979	883	1,019	3,730	958	1,043	1,055	908	3,964	990	1,041	895	902	3,828	928	952	955	1,005	3,840
134 Other upper respiratory disease	424	458	448	516	1,846	439	472	457	437	1,805	522	460	433	505	1,920	539	460	452	509	1,960
Total	2,130	2,442	2,363	2,704	9,639	2,592	2,920	2,857	2,688	11,057	2,937	3,036	2,516	2,780	11,269	2,837	2,835	2,932	2,981	11,585
<b>9 Diseases of the digestive system</b>																				
135 Intestinal infection	-	-	-	3	3	6	5	6	5	22	4	13	9	7	33	13	11	5	-	29
136 Disorders of teeth and jaw	164	184	90	74	512	43	40	22	20	125	20	22	24	21	87	15	23	24	18	80
137 Diseases of mouth; excluding dental	34	38	34	26	132	31	26	31	30	118	30	27	28	31	116	27	31	25	28	111
138 Esophageal disorders	619	671	653	626	2,569	578	616	604	606	2,404	680	788	703	656	2,827	643	722	669	676	2,710
139 Gastroduodenal ulcer (except hemorrhage)	25	31	23	27	106	30	31	31	40	132	30	36	30	39	135	35	44	39	33	151
140 Gastritis and duodenitis	123	128	126	180	557	146	165	184	152	647	205	160	181	131	677	174	165	142	102	583
141 Other disorders of stomach and duodenum	93	99	88	91	371	96	92	102	80	370	77	81	107	106	371	134	138	122	96	490
142 Appendicitis and other appendiceal conditions	10	7	6	6	29	15	14	7	9	45	13	12	15	14	54	15	21	12	13	61
143 Abdominal hernia	585	576	523	601	2,285	552	573	468	608	2,201	587	515	472	562	2,136	564	538	490	620	2,212
144 Regional enteritis and ulcerative colitis	96	118	116	129	459	91	114	107	108	420	104	120	103	121	448	137	123	88	75	423
145 Intestinal obstruction without hernia	5	9	10	4	28	10	8	10	5	33	4	7	1	5	17	6	6	6	1	19
146 Diverticulosis and diverticulitis	126	156	80	76	438	62	61	91	78	292	92	90	83	103	368	101	129	73	71	374
147 Anal and rectal conditions	92	94	106	81	373	70	92	81	97	340	107	105	88	104	404	92	104	83	104	383
148 Peritonitis and intestinal abscess	3	9	6	4	22	2	6	9	4	21	2	6	6	4	18	3	4	3	7	17
149 Biliary tract disease	288	318	302	299	1,207	261	318	293	284	1,156	318	298	292	282	1,190	281	261	267	254	1,063
151 Other liver diseases	102	105	71	73	351	75	55	78	30	238	47	27	36	35	145	29	36	30	35	130
152 Pancreatic disorders (not diabetes)	16	29	11	14	70	21	21	12	10	64	18	22	24	28	92	20	29	24	30	103
153 Gastrointestinal hemorrhage	230	237	234	273	974	295	279	240	277	1,091	265	274	247	249	1,035	240	244	259	209	952
154 Noninfectious gastroenteritis	49	47	58	70	224	57	62	82	88	289	85	85	94	85	349	91	102	94	77	364
155 Other gastrointestinal disorders	614	592	673	628	2,507	598	595	653	588	2,434	544	557	549	636	2,286	578	635	656	623	2,492
Total	3,274	3,448	3,210	3,285	13,217	3,039	3,173	3,111	3,119	12,442	3,232	3,245	3,092	3,219	12,788	3,198	3,366	3,111	3,072	12,747
<b>10 Diseases of the genitourinary system</b>																				
156 Nephritis; nephrosis; renal sclerosis	6	6	-	1	13	2	-	2	-	4	-	1	-	-	1	3	2	1	1	7

**APPENDIX F**

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>CCS Single Level Group</b>	22	25	16	10	73	14	16	14	24	68	17	19	33	14	83	12	8	12	10	42
157 Acute and unspecified renal failure	743	789	736	731	2,999	709	781	775	652	2,917	768	826	820	635	3,049	746	748	776	631	2,901
158 Chronic kidney disease	71	67	114	94	346	104	84	91	100	379	104	84	83	83	354	83	105	74	84	346
159 Urinary tract infections	300	298	338	319	1,255	315	297	348	306	1,266	314	315	323	279	1,231	306	256	301	321	1,184
160 Calculus of urinary tract	64	77	58	80	279	55	71	54	94	274	103	79	82	102	366	100	91	106	106	403
161 Other diseases of kidney and ureters	94	87	110	104	395	121	117	128	138	504	160	163	145	163	631	146	141	145	169	601
162 Other diseases of bladder and urethra	328	365	318	240	1,251	297	314	306	361	1,278	418	440	340	358	1,556	325	273	326	351	1,275
163 Genitourinary symptoms and ill-defined conditions	123	157	92	97	469	89	85	87	76	337	112	101	91	102	406	93	96	87	101	377
164 Hyperplasia of prostate	7	8	11	9	35	2	6	3	5	16	3	5	5	4	17	6	11	3	5	25
165 Inflammatory conditions of male genital organs	91	74	79	90	334	80	88	87	87	342	93	97	71	108	369	83	89	100	84	356
166 Other male genital disorders	376	349	323	309	1,357	296	272	278	265	1,111	244	264	215	264	987	284	270	289	132	975
167 Nonmalignant breast conditions	19	33	21	27	100	14	20	16	19	69	27	22	22	22	93	14	18	23	30	85
168 Inflammatory diseases of female pelvic organs	41	36	31	30	138	29	13	24	32	98	52	40	37	44	173	40	38	32	32	142
169 Endometriosis	46	50	66	61	223	55	75	71	68	269	73	70	74	77	294	63	77	72	72	284
170 Prolapse of female genital organs	158	186	181	181	706	162	202	178	100	642	125	99	97	81	402	112	88	114	93	407
171 Menstrual disorders	35	24	20	22	101	33	19	32	34	118	24	22	24	23	93	22	28	24	23	97
172 Ovarian cyst	79	84	79	78	320	76	74	88	79	317	82	95	99	64	340	90	81	99	86	356
173 Menopausal disorders	123	127	81	23	354	9	16	5	37	67	43	30	39	68	180	32	46	45	52	175
174 Female infertility	165	213	187	229	794	171	171	167	223	732	249	268	246	255	1,018	282	245	233	224	984
175 Other female genital disorders	2,891	3,055	2,861	2,735	11,542	2,633	2,721	2,754	2,700	10,808	3,011	3,040	2,846	2,746	11,643	2,842	2,711	2,862	2,607	11,022
<b>11 Pregnancy, childbirth, and the puerperium</b>	127	146	149	189	611	192	207	202	192	793	155	209	141	155	660	215	188	179	236	818
176 Contraceptive and procreative management	9	7	4	11	31	11	4	8	16	39	13	4	9	10	36	7	6	12	12	37
177 Spontaneous abortion	4	8	10	12	34	9	5	7	6	27	7	11	9	16	43	11	7	7	7	32
178 Induced abortion	1	1	1	-	3	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-
179 Postabortion complications	3	1	3	2	9	2	1	2	1	6	2	1	6	5	14	3	5	2	-	10
180 Ectopic pregnancy	323	274	290	280	1,167	185	265	238	363	1,051	454	365	377	457	1,653	465	429	456	441	1,791
181 Other complications of pregnancy	27	30	20	22	99	6	11	16	19	52	17	22	16	19	74	13	19	26	19	77
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa	76	80	62	73	291	76	52	44	70	242	48	56	43	47	194	76	135	73	58	342
183 Hypertension complicating pregnancy; childbirth and the puerperium	258	250	294	232	1,034	233	189	201	182	805	182	189	199	175	745	169	166	193	154	682
184 Early or threatened labor	32	39	55	41	167	32	49	43	31	155	53	35	37	37	162	45	31	41	52	169
185 Prolonged pregnancy	70	97	154	99	420	84	76	80	77	317	89	90	89	151	419	78	124	154	171	527
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium	14	8	12	11	45	11	14	13	3	41	12	8	15	13	48	12	10	19	15	56
187 Malposition; malpresentation	1	-	3	-	4	1	-	-	-	1	-	-	-	-	-	2	-	-	-	2
188 Fetopelvic disproportion; obstruction	2	1	3	2	8	2	-	1	2	5	1	2	-	2	5	1	1	-	1	3
189 Previous C-section	9	8	8	14	39	4	3	16	18	41	14	4	5	3	26	2	4	2	3	11
190 Fetal distress and abnormal forces of labor	30	45	38	14	127	14	21	18	19	72	37	34	23	15	109	25	14	40	24	103
191 Polyhydramnios and other problems of amniotic cavity	7	1	7	-	15	4	4	-	2	10	-	2	-	-	2	5	-	10	-	15
192 Umbilical cord complication	1	4	1	1	7	-	-	-	1	1	-	-	-	-	-	-	1	-	1	2
193 OB-related trauma to perineum and vulva	272	277	278	243	1,070	202	222	239	47	710	29	14	16	13	72	20	32	8	13	73
195 Other complications of birth; puerperium affecting management of mother	299	301	288	278	1,166	196	170	132	168	666	136	186	143	105	570	92	138	102	99	431
196 Normal pregnancy and/or delivery	1,565	1,578	1,680	1,524	6,347	1,264	1,293	1,260	1,218	5,035	1,249	1,232	1,128	1,223	4,832	1,241	1,310	1,324	1,306	5,181
Total																				
<b>12 Diseases of the skin and subcutaneous tissue</b>																				

## APPENDIX F

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>CCS Single Level Group</b>	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
197 Skin and subcutaneous tissue infections	92	118	105	115	430	125	82	102	90	399	89	117	82	82	370	73	62	67	71	273
198 Other inflammatory condition of skin	238	190	226	227	881	274	339	214	308	1,135	273	266	250	157	946	206	220	186	151	763
199 Chronic ulcer of skin	206	192	217	277	892	70	74	78	117	339	90	126	59	50	325	40	39	31	24	134
200 Other skin disorders	551	797	763	706	2,817	628	828	712	772	2,940	663	769	633	706	2,771	648	753	751	800	2,952
<b>Total</b>	<b>1,087</b>	<b>1,297</b>	<b>1,311</b>	<b>1,325</b>	<b>5,020</b>	<b>1,097</b>	<b>1,323</b>	<b>1,106</b>	<b>1,287</b>	<b>4,813</b>	<b>1,115</b>	<b>1,278</b>	<b>1,024</b>	<b>995</b>	<b>4,412</b>	<b>967</b>	<b>1,074</b>	<b>1,035</b>	<b>1,046</b>	<b>4,122</b>
<b>13 Musculoskeletal system and connective tissue</b>																				
201 Infective arthritis and osteomyelitis (except that caused by TB or STD)	29	38	44	24	135	33	29	22	34	118	32	35	42	33	142	40	35	30	29	134
202 Rheumatoid arthritis and related disease	42	64	43	34	183	32	51	34	32	149	14	21	22	24	81	27	26	29	17	99
203 Osteoarthritis	658	930	827	776	3,191	430	539	545	854	2,368	683	1,009	967	934	3,593	897	956	963	1,055	3,871
204 Other non-traumatic joint disorders	673	823	663	749	2,908	395	488	450	446	1,779	409	487	397	390	1,683	364	399	363	378	1,504
205 Spondylosis; intervertebral disc disorders; other back problems	1,601	1,762	1,540	1,664	6,567	1,933	2,135	2,090	2,161	8,319	2,051	2,083	1,912	1,939	7,985	1,968	1,971	1,939	1,807	7,685
206 Osteoporosis	7	4	7	8	26	3	1	2	2	8	2	4	6	-	12	1	1	4	2	8
207 Pathological fracture	18	22	13	15	68	13	20	18	13	64	13	8	16	11	48	11	15	19	13	58
208 Acquired foot deformities	186	157	171	199	713	175	195	142	200	712	201	164	163	199	727	197	171	166	203	737
209 Other acquired deformities	34	26	35	25	120	27	30	38	57	152	43	52	57	56	208	44	55	43	35	177
210 Systemic lupus erythematosus and connective tissue disorders	13	19	15	18	65	13	21	24	26	84	30	37	25	29	121	31	36	16	35	118
211 Other connective tissue disease	1,076	1,126	999	993	4,194	879	996	1,035	1,090	4,000	1,059	1,180	964	1,100	4,303	1,092	1,095	977	1,111	4,275
212 Other bone disease and musculoskeletal deformities	87	86	59	82	314	64	67	62	49	242	51	30	46	47	174	42	30	28	40	140
<b>Total</b>	<b>4,424</b>	<b>5,057</b>	<b>4,416</b>	<b>4,587</b>	<b>18,484</b>	<b>3,997</b>	<b>4,572</b>	<b>4,462</b>	<b>4,964</b>	<b>17,995</b>	<b>4,588</b>	<b>5,110</b>	<b>4,617</b>	<b>4,762</b>	<b>19,077</b>	<b>4,714</b>	<b>4,790</b>	<b>4,577</b>	<b>4,725</b>	<b>18,806</b>
<b>14 Congenital anomalies</b>																				
213 Cardiac and circulatory congenital anomalies	11	12	13	10	46	9	8	9	8	34	11	13	5	2	31	13	11	15	9	48
214 Digestive congenital anomalies	23	9	13	5	50	6	8	3	4	21	7	6	7	7	27	9	5	3	5	22
215 Genitourinary congenital anomalies	38	35	31	30	134	28	30	50	29	137	24	36	28	25	113	31	43	19	31	124
216 Nervous system congenital anomalies	-	3	1	1	5	-	1	1	4	6	1	3	2	1	7	1	1	-	2	4
217 Other congenital anomalies	46	54	56	47	203	50	59	71	51	231	53	51	50	38	192	52	32	44	35	163
<b>Total</b>	<b>118</b>	<b>113</b>	<b>114</b>	<b>93</b>	<b>438</b>	<b>93</b>	<b>106</b>	<b>134</b>	<b>96</b>	<b>429</b>	<b>96</b>	<b>109</b>	<b>92</b>	<b>73</b>	<b>370</b>	<b>106</b>	<b>92</b>	<b>81</b>	<b>82</b>	<b>361</b>
<b>15 Conditions originating in the perinatal period</b>																				
218 Liveborn	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
219 Short gestation; low birth weight; and fetal growth retardation	-	-	-	-	-	-	1	-	-	1	-	-	1	-	1	-	-	4	2	6
220 Intrauterine hypoxia and birth asphyxia	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-
222 Hemolytic jaundice and perinatal jaundice	2	-	2	-	4	1	2	1	-	4	4	1	1	-	6	1	1	2	2	6
223 Birth trauma	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	1	1
224 Other perinatal conditions	34	40	41	37	152	44	49	45	24	162	45	32	43	51	171	41	42	40	32	155
<b>Total</b>	<b>37</b>	<b>40</b>	<b>43</b>	<b>37</b>	<b>157</b>	<b>45</b>	<b>53</b>	<b>47</b>	<b>24</b>	<b>169</b>	<b>49</b>	<b>33</b>	<b>45</b>	<b>51</b>	<b>178</b>	<b>42</b>	<b>43</b>	<b>46</b>	<b>37</b>	<b>168</b>
<b>16 Injury &amp; poisoning</b>																				
225 Joint disorders and dislocations; trauma-related	447	434	428	494	1,803	357	454	432	423	1,666	393	445	320	386	1,544	332	355	310	350	1,347
226 Fracture of neck of femur (hip)	-	2	1	1	4	1	1	1	1	4	1	5	3	4	13	3	1	2	2	8
227 Spinal cord injury	-	3	1	1	5	1	-	1	-	2	-	1	-	-	1	-	-	1	-	1
228 Skull and face fractures	16	14	20	18	68	21	24	22	14	81	23	20	24	25	92	12	11	10	20	53
229 Fracture of upper limb	249	161	216	204	830	229	212	230	198	869	253	209	261	238	961	227	201	247	237	912
230 Fracture of lower limb	163	114	102	104	483	136	106	99	105	446	155	107	139	122	523	148	105	141	118	512
231 Other fractures	23	31	20	21	95	14	23	25	5	67	14	4	10	13	41	11	9	10	9	39
232 Sprains and strains	241	238	202	234	915	231	258	189	238	916	206	245	203	235	889	233	253	192	213	891

**APPENDIX F**

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

CCS High Level Group	ICD-9-CM										ICD-10-CM									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>CCS Single Level Group</b>																				
233 Intracranial injury	1	2	5	3	11	4	3	3	1	11	1	1	2	1	5	-	-	-	-	-
234 Crushing injury or internal injury	3	6	9	3	21	3	2	4	4	13	2	7	5	5	19	7	9	2	3	21
235 Open wounds of head; neck; and trunk	12	24	24	34	94	18	35	38	27	118	22	14	6	8	50	8	11	6	6	31
236 Open wounds of extremities	59	67	94	74	294	53	82	82	79	296	70	69	88	64	291	46	57	77	49	229
237 Complication of device; implant or graft	176	250	190	214	830	172	208	195	214	789	151	167	159	196	673	173	196	156	186	711
238 Complications of surgical procedures or medical care	113	91	86	71	361	45	49	76	54	224	55	86	69	61	271	59	52	64	64	239
239 Superficial injury; contusion	19	26	15	23	83	18	33	26	18	95	12	25	20	14	71	12	21	9	21	63
240 Burns	1	19	8	5	33	6	5	9	9	29	20	11	3	5	39	-	-	4	2	6
242 Poisoning by other medications and drugs	-	-	2	2	4	-	1	1	1	3	-	-	-	-	-	1	-	-	-	1
243 Poisoning by nonmedicinal substances	1	-	-	-	1	-	-	-	-	-	2	2	-	1	5	-	-	-	1	1
244 Other injuries and conditions due to external causes	46	41	46	41	174	48	56	52	45	201	48	62	38	37	185	37	42	39	47	165
<b>Total</b>	<b>1,570</b>	<b>1,523</b>	<b>1,469</b>	<b>1,547</b>	<b>6,109</b>	<b>1,357</b>	<b>1,552</b>	<b>1,485</b>	<b>1,436</b>	<b>5,830</b>	<b>1,428</b>	<b>1,480</b>	<b>1,350</b>	<b>1,415</b>	<b>5,673</b>	<b>1,309</b>	<b>1,323</b>	<b>1,270</b>	<b>1,328</b>	<b>5,230</b>
<b>17 Symptoms, signs &amp; ill-defined conditions</b>																				
245 Syncope	14	14	17	15	60	16	18	18	14	66	12	11	18	17	58	14	20	13	13	60
246 Fever of unknown origin	-	1	3	3	7	2	-	1	2	5	1	1	-	-	2	2	-	1	1	4
247 Lymphadenitis	52	57	42	22	173	30	22	20	30	102	28	24	22	30	104	27	27	27	35	116
248 Gangrene	2	5	9	3	19	10	14	1	7	32	7	8	5	5	25	10	9	3	5	27
249 Shock	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-
250 Nausea and vomiting	36	40	40	35	151	36	39	36	33	144	32	36	43	29	140	36	22	31	39	128
251 Abdominal pain	366	352	310	306	1,334	318	321	302	320	1,261	309	329	283	276	1,197	297	247	254	276	1,074
252 Malaise and fatigue	11	9	16	9	45	13	23	21	16	73	16	10	15	19	60	17	19	19	15	70
253 Allergic reactions	65	96	62	99	322	75	162	120	90	447	52	63	66	85	266	143	101	100	135	479
254 Rehabilitation care; fitting of prostheses; and adjustment of devices	17	16	14	16	63	13	11	20	8	52	8	16	3	11	38	9	13	16	11	49
255 Administrative/social admission	1	14	8	10	33	41	91	90	10	232	11	16	28	18	73	20	23	18	21	82
256 Medical examination/evaluation	420	483	353	303	1,559	361	393	368	575	1,697	709	634	468	410	2,221	424	435	474	395	1,728
257 Other aftercare	178	205	273	269	925	259	316	253	581	1,409	572	575	588	590	2,325	575	632	705	607	2,519
258 Other screening for suspected conditions (not mental disorders or infectious disease)	3,716	3,638	3,659	4,039	15,052	3,655	4,077	3,702	4,008	15,442	4,035	4,205	3,782	3,919	15,941	3,626	4,060	4,494	5,075	17,255
<b>Total</b>	<b>4,878</b>	<b>4,930</b>	<b>4,806</b>	<b>5,129</b>	<b>19,743</b>	<b>4,829</b>	<b>5,487</b>	<b>4,952</b>	<b>5,694</b>	<b>20,962</b>	<b>5,793</b>	<b>5,928</b>	<b>5,321</b>	<b>5,409</b>	<b>22,451</b>	<b>5,200</b>	<b>5,608</b>	<b>6,155</b>	<b>6,628</b>	<b>23,591</b>
<b>18 Residual codes, unclassified, all Ecodes</b>																				
259 Residual codes; unclassified	374	441	364	440	1,619	397	463	446	418	1,724	434	430	411	401	1,676	437	320	237	249	1,243
2601 External cause codes: Cut/pierce	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-
2617 Adverse effects of medical drugs	-	-	-	-	-	-	-	-	-	-	-	1	-	1	2	-	-	-	-	-
<b>Total</b>	<b>374</b>	<b>441</b>	<b>364</b>	<b>440</b>	<b>1,619</b>	<b>397</b>	<b>463</b>	<b>446</b>	<b>418</b>	<b>1,724</b>	<b>435</b>	<b>431</b>	<b>411</b>	<b>402</b>	<b>1,679</b>	<b>437</b>	<b>320</b>	<b>237</b>	<b>249</b>	<b>1,243</b>
<b>Totals by Quarter/Year</b>	<b>31,597</b>	<b>34,258</b>	<b>32,353</b>	<b>32,703</b>	<b>130,911</b>	<b>29,844</b>	<b>32,996</b>	<b>32,307</b>	<b>33,287</b>	<b>128,434</b>	<b>33,486</b>	<b>34,743</b>	<b>31,787</b>	<b>32,679</b>	<b>132,695</b>	<b>32,267</b>	<b>32,845</b>	<b>32,544</b>	<b>33,378</b>	<b>131,034</b>

## APPENDIX G

### Clinical Classifications Software (CCS) High-Level and Single-Level Procedure Categories

#### CCS High Level Procedure Group 1: Operations on the Nervous System

- 1 Incision and excision of CNS
- 2 Insertion, replacement, or removal of extracranial ventricular shunt
- 3 Laminectomy, excision intervertebral disc
- 4 Diagnostic spinal tap
- 5 Insertion of catheter or spinal stimulator and injection into spinal canal
- 6 Decompression peripheral nerve
- 7 Other diagnostic nervous system procedures
- 8 Other non-OR or closed therapeutic nervous system procedures
- 9 Other OR therapeutic nervous system procedures

#### CCS High Level Procedure Group 2: Operations on the Endocrine System

- 10 Thyroidectomy, partial or complete
- 11 Diagnostic endocrine procedures
- 12 Other therapeutic endocrine procedures

#### CCS High Level Procedure Group 3: Operations on the Eye

- 13 Corneal transplant
- 14 Glaucoma procedures
- 15 Lens and cataract procedures
- 16 Repair of retinal tear, detachment
- 17 Destruction of lesion of retina and choroid
- 18 Diagnostic procedures on eye
- 19 Other therapeutic procedures on eyelids, conjunctiva, cornea
- 20 Other intraocular therapeutic procedures
- 21 Other extraocular muscle and orbit therapeutic procedures

#### CCS High Level Procedure Group 4: Operations on the Ear

- 22 Tympanoplasty
- 23 Myringotomy
- 24 Mastoidectomy
- 25 Diagnostic procedures on ear
- 26 Other therapeutic ear procedures

#### CCS High Level Procedure Group 5: Operations on the Nose, Mouth and Pharynx

- 27 Control of epistaxis
- 28 Plastic procedures on nose

- 29 Dental procedures
- 30 Tonsillectomy and/or adenoidectomy
- 31 Diagnostic procedures on nose, mouth and pharynx
- 32 Other non-OR therapeutic procedures on nose, mouth and pharynx
- 33 Other OR therapeutic procedures on nose, mouth and pharynx

#### CCS High Level Procedure Group 6: Operations on the Respiratory System

- 34 Tracheostomy, temporary and permanent
- 35 Tracheoscopy and laryngoscopy with biopsy
- 36 Lobectomy or pneumonectomy
- 37 Diagnostic bronchoscopy and biopsy of bronchus
- 38 Other diagnostic procedures on lung and bronchus
- 39 Incision of pleura, thoracentesis, chest drainage
- 40 Other diagnostic procedures of respiratory tract and mediastinum
- 41 Other non-OR therapeutic procedures on respiratory system
- 42 Other OR therapeutic procedures on respiratory system

#### CCS High Level Procedure Group 7: Operations on the Cardiovascular System

- 43 Heart valve procedures
- 44 Coronary artery bypass graft (CABG)
- 45 Percutaneous transluminal coronary angioplasty (PTCA)
- 46 Coronary thrombolysis
- 47 Diagnostic cardiac catheterization, coronary arteriography
- 48 Insertion, revision, replacement, removal of cardiac pacemaker or cardioverter/defibrillator
- 49 Other OR heart procedures
- 50 Extracorporeal circulation auxiliary to open heart procedures
- 51 Endarterectomy, vessel of head and neck
- 52 Aortic resection, replacement or anastomosis
- 53 Varicose vein stripping, lower limb
- 54 Other vascular catheterization, not heart
- 55 Peripheral vascular bypass
- 56 Other vascular bypass and shunt, not heart
- 57 Creation, revision and removal of arteriovenous fistula or vessel-to-vessel cannula for dialysis
- 58 Hemodialysis
- 59 Other OR procedures on vessels of head and neck



- 60 Embolectomy and endarterectomy of lower limbs
- 61 Other OR procedures on vessels other than head and neck
- 62 Other diagnostic cardiovascular procedures
- 63 Other non-OR therapeutic cardiovascular procedures

**CCS High Level Procedure Group 8: Operations on the Hemic and Lymphatic System**

- 64 Bone marrow transplant
- 65 Bone marrow biopsy
- 66 Procedures on spleen
- 67 Other therapeutic procedures, hemic and lymphatic system

**CCS High Level Procedure Group 9: Operations on the Digestive System**

- 68 Injection or ligation of esophageal varices
- 69 Esophageal dilatation
- 70 Upper gastrointestinal endoscopy, biopsy
- 71 Gastrostomy, temporary and permanent
- 72 Colostomy, temporary and permanent
- 73 Ileostomy and other enterostomy
- 74 Gastrectomy, partial and total
- 75 Small bowel resection
- 76 Colonoscopy and biopsy
- 77 Proctoscopy and anorectal biopsy
- 78 Colorectal resection
- 79 Local excision of large intestine lesion (not endoscopic)
- 80 Appendectomy
- 81 Hemorrhoid procedures
- 82 Endoscopic retrograde cannulation of pancreas (ERCP)
- 83 Biopsy of liver
- 84 Cholecystectomy and common duct exploration
- 85 Inguinal and femoral hernia repair
- 86 Other hernia repair
- 87 Laparoscopy
- 88 Abdominal paracentesis
- 89 Exploratory laparotomy
- 90 Excision, lysis peritoneal adhesions
- 91 Peritoneal dialysis
- 92 Other bowel diagnostic procedures
- 93 Other non-OR upper GI therapeutic procedures
- 94 Other OR upper GI therapeutic procedures
- 95 Other non-OR lower GI therapeutic procedures
- 96 Other OR lower GI therapeutic procedures
- 97 Other gastrointestinal diagnostic procedures

- 98 Other non-OR gastrointestinal therapeutic procedures
- 99 Other OR gastrointestinal therapeutic procedures

**CCS High Level Procedure Group 10: Operations on the Urinary System**

- 100 Endoscopy and endoscopic biopsy of the urinary tract
- 101 Transurethral excision, drainage, or removal urinary obstruction
- 102 Ureteral catheterization
- 103 Nephrotomy and nephrostomy
- 104 Nephrectomy, partial or complete
- 105 Kidney transplant
- 106 Genitourinary incontinence procedures
- 107 Extracorporeal lithotripsy, urinary
- 108 Indwelling catheter
- 109 Procedures on the urethra
- 110 Other diagnostic procedures of urinary tract
- 111 Other non-OR therapeutic procedures of urinary tract
- 112 Other OR therapeutic procedures of urinary tract

**CCS High Level Procedure Group 11: Operations on the Male Genital Organs**

- 113 Transurethral resection of prostate (TURP)
- 114 Open prostatectomy
- 115 Circumcision
- 116 Diagnostic procedures, male genital
- 117 Other non-OR therapeutic procedures, male genital
- 118 Other OR therapeutic procedures, male genital

**CCS High Level Procedure Group 12: Operations on the Female Genital Organs**

- 119 Oophorectomy, unilateral and bilateral
- 120 Other operations on ovary
- 121 Ligation of fallopian tubes
- 123 Other operations on fallopian tubes
- 124 Hysterectomy, abdominal and vaginal
- 125 Other excision of cervix and uterus
- 126 Abortion (termination of pregnancy)
- 127 Dilatation and curettage (D&C), aspiration after delivery or abortion
- 128 Diagnostic dilatation and curettage (D&C)
- 129 Repair of cystocele and rectocele, obliteration of vaginal vault
- 130 Other diagnostic procedures, female organs
- 131 Other non-OR therapeutic procedures, female organs
- 132 Other OR therapeutic procedures, female organs

**CCS High Level Procedure Group 13: Obstetrical Procedures**

- 122 Removal of ectopic pregnancy
- 133 Episiotomy
- 134 Cesarean section
- 135 Forceps, vacuum, and breech delivery
- 136 Artificial rupture of membranes to assist delivery
- 137 Other procedures to assist delivery
- 138 Diagnostic amniocentesis
- 139 Fetal monitoring
- 140 Repair of current obstetric laceration
- 141 Other therapeutic obstetrical procedures

**CCS High Level Procedure Group 14: Operations on the Musculoskeletal System**

- 142 Partial excision bone
- 143 Bunionectomy or repair of toe deformities
- 144 Treatment, facial fracture or dislocation
- 145 Treatment, fracture or dislocation of radius and ulna
- 146 Treatment, fracture or dislocation of hip and femur
- 147 Treatment, fracture or dislocation of lower extremity (other than hip or femur)
- 148 Other fracture and dislocation procedure
- 149 Arthroscopy
- 150 Division of joint capsule, ligament or cartilage
- 151 Excision of semilunar cartilage of knee
- 152 Arthroplasty knee
- 153 Hip replacement, total and partial
- 154 Arthroplasty other than hip or knee
- 155 Arthrocentesis
- 156 Injections and aspirations of muscles, tendons, bursa, joints and soft tissue
- 157 Amputation of lower extremity
- 158 Spinal fusion
- 159 Other diagnostic procedures on musculoskeletal system
- 160 Other therapeutic procedures on muscles and tendons
- 161 Other OR therapeutic procedures on bone
- 162 Other OR therapeutic procedures on joints
- 163 Other non-OR therapeutic procedures on musculoskeletal system
- 164 Other OR therapeutic procedures on musculoskeletal system

**CCS High Level Procedure Group 15: Operations on the Integumentary System**

- 165 Breast biopsy and other diagnostic procedures on breast
- 166 Lumpectomy, quadrantectomy of breast
- 167 Mastectomy

- 168 Incision and drainage, skin and subcutaneous tissue
- 169 Debridement of wound, infection or burn
- 170 Excision of skin lesion
- 171 Suture of skin and subcutaneous tissue
- 172 Skin graft
- 173 Other diagnostic procedures on skin and subcutaneous tissue
- 174 Other non-OR therapeutic procedures on skin and breast
- 175 Other OR therapeutic procedures on skin and breast

**CCS High Level Procedure Group 16: Miscellaneous Diagnostic and Therapeutic Procedures**

- 176 Other organ transplantation
- 177 Computerized axial tomography (CT) scan head
- 178 CT scan chest
- 179 CT scan abdomen
- 180 Other CT scan
- 181 Myelogram
- 182 Mammography
- 183 Routine chest X-ray
- 184 Intraoperative cholangiogram
- 185 Upper gastrointestinal X-ray
- 186 Lower gastrointestinal X-ray
- 187 Intravenous pyelogram
- 188 Cerebral arteriogram
- 189 Contrast aortogram
- 190 Contrast arteriogram of femoral and lower extremity arteries
- 191 Arterio- or venogram (not heart and head)
- 192 Diagnostic ultrasound of head and neck
- 193 Diagnostic ultrasound of heart (echocardiogram)
- 194 Diagnostic ultrasound of gastrointestinal tract
- 195 Diagnostic ultrasound of urinary tract
- 196 Diagnostic ultrasound of abdomen or retroperitoneum
- 197 Other diagnostic ultrasound
- 198 Magnetic resonance imaging
- 199 Electroencephalogram (EEG)
- 200 Nonoperative urinary system measurements
- 201 Cardiac stress tests
- 202 Electrocardiogram
- 203 Electrographic cardiac monitoring
- 204 Swan-Ganz catheterization for monitoring
- 205 Arterial blood gases
- 206 Microscopic examination (bacterial smear, culture, toxicology)
- 207 Radioisotope bone scan

- 208 Radioisotope pulmonary scan
- 209 Radioisotope scan and function studies
- 210 Other radioisotope scan
- 211 Therapeutic radiology
- 212 Diagnostic physical therapy
- 213 Physical therapy exercises, manipulation, and other procedures
- 214 Traction, splints, and other wound care
- 215 Other physical therapy and rehabilitation
- 216 Respiratory intubation and mechanical ventilation
- 217 Other respiratory therapy
- 218 Psychological and psychiatric evaluation and therapy
- 219 Alcohol and drug rehabilitation/detoxification
- 220 Ophthalmologic and otologic diagnosis and treatment
- 221 Nasogastric tube
- 222 Blood transfusion
- 223 Enteral and parenteral nutrition
- 224 Cancer chemotherapy
- 225 Conversion of cardiac rhythm
- 226 Other diagnostic radiology and related techniques
- 227 Other diagnostic procedures (interview, evaluation, consultation)

- 228 Prophylactic vaccinations and inoculations
- 229 Nonoperative removal of foreign body
- 230 Extracorporeal shock wave lithotripsy, other than urinary
- 231 Other therapeutic procedures

**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

APPENDIX H

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

\* omits newborns

CCS High Level Procedure Group	ICD-9-CM										ICD-10-PCS													
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total				
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4					
<b>1 Operations on the nervous system</b>																								
1 Incision & excision of CNS	46	43	37	37	163	26	34	31	27	118	40	26	29	26	121	29	28	39	35	131				
2 Insertion, replacem, rem of extracranial ventricular shunt	12	4	9	7	32	8	7	8	3	26	6	4	9	6	25	7	8	11	13	39				
3 Laminectomy, excision intervertebral disc	25	30	26	34	115	27	29	43	27	126	24	18	15	17	74	10	12	11	10	43				
4 Diagnostic spinal tap	60	65	104	75	304	74	85	72	89	320	68	98	89	79	334	66	80	87	81	314				
5 Insert cath, spinal stimulator, inject into spinal canal	17	19	24	14	74	29	40	26	28	123	22	25	35	72	154	45	78	47	54	224				
6 Decompression peripheral nerve	1	-	1	-	2	-	1	-	16	17	12	18	19	19	68	13	9	4	9	35				
7 Other diagnostic nervous system procedures	8	6	10	10	34	7	6	6	6	25	12	9	11	13	45	11	15	22	24	72				
8 Other non-OR or closed therapeutic nerv syst procs	6	4	4	8	22	12	4	4	10	30	2	5	8	4	19	10	8	13	10	41				
9 Other OR therapeutic nervous system procedures	36	25	24	17	102	29	25	16	41	111	20	25	36	18	99	33	23	29	22	107				
<b>Total</b>	211	196	239	202	848	212	231	206	247	896	206	228	251	254	939	224	261	263	258	1,006				
<b>2 Operations on the endocrine system</b>																								
10 Thyroidectomy, partial or complete	2	-	5	2	9	5	3	2	6	16	4	5	2	4	15	6	3	7	4	20				
11 Diagnostic endocrine procedures	-	1	1	-	2	1	-	-	2	3	2	3	2	3	10	2	-	-	1	3				
12 Other therapeutic endocrine procedures	8	3	3	7	21	5	9	8	4	26	2	8	5	3	18	8	17	3	10	38				
<b>Total</b>	10	4	9	9	32	11	12	10	12	45	8	16	9	10	43	16	20	10	15	61				
<b>3 Operations on the eye</b>																								
14 Glaucoma procedures	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	1	-	-	-	1				
15 Lens & cataract procedures	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-				
16 Repair of retinal tear, detachment	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1				
18 Diagnostic procedures on eye	-	2	-	-	2	-	-	-	-	-	2	-	1	1	4	1	-	-	2	3				
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	4	5	3	2	14	2	3	-	1	6	3	-	-	2	5	1	-	1	1	3				
20 Other intraocular therapeutic procedures	-	-	2	1	3	-	1	1	-	2	1	1	1	-	3	-	-	-	-	-				
21 Other extraocular muscle & orbit therapeutic procedures	1	1	-	-	2	1	-	-	-	1	1	1	-	-	2	-	2	1	1	4				
<b>Total</b>	6	8	5	3	22	3	4	1	2	10	7	2	2	4	15	3	2	2	5	12				
<b>4 Operations on the ear</b>																								
23 Myringotomy	1	-	1	2	4	4	-	-	-	4	1	1	1	3	6	3	1	1	-	5				
24 Mastoidectomy	3	-	-	1	4	1	-	1	-	2	-	-	-	-	-	1	-	-	-	1				
25 Diagnostic procedures on ear	-	1	-	-	1	-	-	-	2	2	5	4	5	4	18	1	4	7	5	17				
26 Other therapeutic ear procedures	-	-	3	2	5	-	2	3	12	17	8	15	10	6	39	9	8	7	5	29				
<b>Total</b>	4	1	4	5	14	5	2	4	14	25	14	20	16	13	63	14	13	15	10	52				
<b>5 Operations on the nose, mouth, and pharynx</b>																								
27 Control of epistaxis	7	6	5	3	21	12	7	4	-	23	-	-	-	-	-	-	-	-	-	-				
28 Plastic procedures on nose	1	3	2	2	8	2	2	2	-	6	-	-	-	-	-	-	-	-	-	-				
29 Dental procedures	2	2	3	-	7	3	1	1	2	7	2	2	2	2	8	1	2	3	3	9				
30 Tonsillectomy and/or adenoidectomy	5	1	-	-	6	4	1	6	3	14	1	4	2	-	7	-	2	-	1	3				
31 Diagnostic procedures on nose, mouth & pharynx	6	7	3	10	26	4	7	5	13	29	24	20	13	17	74	10	27	24	15	76				
32 Other non-OR therapeutic procedures on nose, mouth & phar	2	2	5	4	13	1	3	5	1	10	3	-	1	4	8	4	3	2	2	11				
33 Other OR therapeutic procedures on nose, mouth & pharynx	15	13	17	16	61	10	14	8	13	45	12	14	14	11	51	15	11	10	9	45				
<b>Total</b>	38	34	35	35	142	36	35	31	32	134	42	40	32	34	148	30	45	39	30	144				



## APPENDIX H

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

\* omits newborns

CCS High Level Procedure Group	ICD-9-CM										ICD-10-PCS									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
80 Appendectomy	72	74	85	73	304	47	58	56	41	202	65	66	68	61	260	60	65	50	67	242
81 Hemorrhoid procedures	1	1	-	2	4	1	-	-	1	2	2	2	-	-	4	-	1	-	1	2
82 Endoscopic retrograde cannulation of pancreas (ERCP)	2	3	2	3	10	1	1	2	-	4	-	-	-	-	-	-	-	-	-	-
83 Biopsy of liver	4	6	11	11	32	8	7	10	14	39	8	12	7	14	41	7	13	9	7	36
84 Cholecystectomy & common duct exploration	73	65	67	83	288	92	70	77	90	329	94	84	83	86	347	69	87	74	77	307
85 Inguinal & femoral hernia repair	7	5	14	10	36	11	12	3	5	31	5	16	7	10	38	5	10	7	6	28
86 Other hernia repair	25	41	32	31	129	30	31	22	6	89	20	14	22	19	75	22	23	19	18	82
87 Laparoscopy	-	1	2	1	4	4	4	1	-	9	2	4	3	3	12	1	2	2	5	10
88 Abdominal paracentesis	79	55	67	71	272	57	66	55	1	179	63	54	51	48	216	40	44	57	65	206
89 Exploratory laparotomy	2	2	5	3	12	6	3	3	3	15	-	2	2	1	5	2	1	-	2	5
90 Excision, lysis peritoneal adhesions	25	13	22	14	74	16	15	19	13	63	15	18	20	20	73	9	20	15	18	62
91 Peritoneal dialysis	-	-	-	4	4	-	4	3	-	7	-	-	-	-	-	-	-	-	-	-
92 Other bowel diagnostic procedures	-	-	-	-	-	1	-	1	78	80	31	41	45	29	146	37	20	30	29	116
93 Other non-OR upper GI therapeutic procedures	28	22	28	30	108	25	31	31	19	106	9	13	14	3	39	14	10	15	5	44
94 Other OR upper GI therapeutic procedures	16	23	26	22	87	28	26	27	29	110	39	42	31	26	138	25	20	17	15	77
95 Other non-OR lower GI therapeutic procedures	21	11	32	14	78	19	11	22	8	60	10	10	29	8	57	12	5	17	7	41
96 Other OR lower GI therapeutic procedures	53	39	56	54	202	46	60	51	88	245	84	72	69	94	319	89	92	91	85	357
97 Other gastrointestinal diagnostic procedures	5	9	14	11	39	4	9	9	8	30	27	26	32	35	120	31	37	22	35	125
98 Other non-OR gastrointestinal therapeutic procedures	24	44	36	39	143	34	42	33	29	138	30	32	57	57	176	75	73	57	74	279
99 Other OR gastrointestinal therapeutic procedures	18	25	33	16	92	22	21	24	17	84	46	57	48	50	201	42	38	39	32	151
Total	785	827	837	849	3,298	809	843	870	682	3,204	883	897	959	891	3,630	851	889	883	901	3,524
<b>10 Operations on the urinary system</b>																				
100 Endoscopy & endoscopic biopsy of the urinary tract	8	10	5	7	30	4	8	11	4	27	10	8	16	7	41	6	6	8	10	30
101 Transurethral excision, drainage, rem urinary obstruction	22	33	30	22	107	24	23	26	23	96	26	32	35	19	112	26	25	18	17	86
102 Ureteral catheterization	20	21	32	26	99	29	33	26	30	118	25	25	29	30	109	24	27	33	28	112
103 Nephrotomy & nephrostomy	18	13	13	18	62	11	10	8	7	36	2	2	4	4	12	6	4	5	3	18
104 Nephrectomy, partial or complete	26	29	24	30	109	20	24	27	20	91	35	25	16	32	108	28	29	25	34	116
105 Kidney transplant	7	7	9	4	27	2	7	3	5	17	3	6	12	3	24	6	2	8	4	20
106 Genitourinary incontinence procedures	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-
107 Extracorporeal lithotripsy, urinary	-	-	-	-	-	1	2	1	4	8	1	3	5	3	12	4	5	3	1	13
108 Indwelling catheter	68	55	85	93	301	93	79	48	38	258	35	32	28	32	127	29	19	10	10	68
109 Procedures on the urethra	1	1	6	4	12	3	2	3	1	9	1	2	2	3	8	7	4	7	4	22
110 Other diagnostic procedures of urinary tract	5	5	9	12	31	7	4	2	11	24	9	5	3	15	32	5	12	10	6	33
111 Other non-OR therapeutic procedures of urinary tract	18	9	6	13	46	5	7	8	13	33	6	5	7	11	29	24	17	21	16	78
112 Other OR therapeutic procedures of urinary tract	14	24	20	17	75	21	14	11	43	89	35	37	42	34	148	14	21	29	24	88
Total	207	207	239	246	899	220	214	174	199	807	188	182	199	193	762	179	171	177	157	684
<b>11 Operations on the male genital organs</b>																				
113 Transurethral resection of prostate (TURP)	14	12	10	14	50	13	13	12	16	54	11	11	14	12	48	11	6	9	12	38
114 Open prostatectomy	37	25	26	25	113	21	28	27	33	109	30	30	35	35	130	32	31	34	20	117
115 Circumcision	-	3	-	-	3	-	1	-	-	1	-	1	2	-	3	1	1	-	-	2
116 Diagnostic procedures, male genital	-	-	1	1	2	3	1	-	1	5	3	2	-	1	6	-	-	1	1	2
117 Other non-OR therapeutic procedures, male genital	4	-	4	2	10	3	4	5	2	14	2	3	2	-	7	1	2	-	1	4
118 Other OR therapeutic procedures, male genital	-	3	2	2	7	3	4	2	2	11	2	5	1	2	10	1	2	6	-	9
Total	55	43	43	44	185	43	51	46	54	194	48	52	54	50	204	46	42	50	34	172
<b>12 Operations on the female genital organs</b>																				
119 Oophorectomy, unilateral & bilateral	12	26	12	12	62	17	17	10	4	48	5	14	9	3	31	1	3	3	2	9
120 Other operations on ovary	1	-	-	3	4	2	1	-	7	10	7	7	4	3	21	4	3	5	-	12
121 Ligation of fallopian tubes	3	2	6	1	12	3	4	1	48	56	37	35	32	26	130	11	16	10	17	54
123 Other operations on fallopian tubes	-	1	1	2	4	1	-	1	42	44	30	45	54	51	180	58	66	53	63	240
124 Hysterectomy, abdominal & vaginal	44	60	47	36	187	42	35	43	49	169	45	47	35	36	163	33	22	48	50	153

APPENDIX H

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

\* omits newborns

CCS High Level Procedure Group	ICD-9-CM										ICD-10-PCS									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
<b>CCS Single Level Procedure Category</b>	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total
125 Other excision of cervix & uterus	2	3	3	3	11	2	1	5	4	12	-	10	2	7	19	1	5	5	5	16
126 Abortion (termination of pregnancy)	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
127 D&C, aspiration after delivery or abortion	3	6	9	3	21	5	5	6	-	16	-	-	-	-	-	-	-	-	-	-
128 Diagnostic dilatation & curettage (D&C)	1	-	1	1	3	-	1	1	3	5	2	2	1	-	5	1	3	-	2	6
129 Repair cystocele & rectocele, oblit of vaginal vault	2	-	1	2	5	-	-	1	-	1	1	-	-	-	1	-	-	-	-	-
130 Other diagnostic procedures, female organs	4	3	1	-	8	1	-	-	4	5	3	3	3	4	13	7	2	1	-	10
131 Other non-OR therapeutic procedures, female organs	2	1	1	2	6	4	2	-	191	197	114	69	61	39	283	119	137	152	121	529
132 Other OR therapeutic procedures, female organs	7	4	6	10	27	7	6	5	149	167	151	111	91	90	443	13	14	13	15	55
<b>Total</b>	<b>81</b>	<b>107</b>	<b>88</b>	<b>75</b>	<b>351</b>	<b>84</b>	<b>72</b>	<b>73</b>	<b>501</b>	<b>730</b>	<b>395</b>	<b>343</b>	<b>292</b>	<b>259</b>	<b>1,289</b>	<b>248</b>	<b>271</b>	<b>290</b>	<b>275</b>	<b>1,084</b>
<b>13 Obstetrical procedures</b>																				
122 Removal of ectopic pregnancy	2	2	-	1	5	-	1	5	-	6	-	-	-	-	-	-	-	-	-	-
133 Episiotomy	27	18	14	20	79	19	20	21	28	88	23	22	28	26	99	13	22	19	23	77
134 Cesarean section	331	354	388	342	1,415	349	353	379	-	1,081	-	-	-	-	-	-	-	-	-	-
135 Forceps, vacuum & breech delivery	44	55	34	48	181	46	49	58	-	153	-	-	-	-	-	-	-	-	-	-
136 Artificial rupture of membranes to assist delivery	94	111	116	116	437	120	111	122	-	353	-	-	-	-	-	-	-	-	-	-
137 Other procedures to assist delivery	451	468	467	426	1,812	421	456	514	-	1,391	-	-	-	-	-	-	-	-	-	-
138 Diagnostic amniocentesis	1	-	-	-	1	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-
139 Fetal monitoring	88	113	109	101	411	69	65	83	-	217	-	-	-	-	-	-	-	-	-	-
140 Repair of current obstetric laceration	292	327	312	283	1,214	294	322	294	-	910	-	-	-	-	-	-	-	-	-	-
141 Other therapeutic obstetrical procedures	8	6	23	11	48	2	9	10	-	21	-	-	-	3	3	-	-	-	-	-
<b>Total</b>	<b>1,338</b>	<b>1,454</b>	<b>1,463</b>	<b>1,348</b>	<b>5,603</b>	<b>1,320</b>	<b>1,387</b>	<b>1,486</b>	<b>28</b>	<b>4,221</b>	<b>23</b>	<b>22</b>	<b>28</b>	<b>29</b>	<b>102</b>	<b>13</b>	<b>22</b>	<b>19</b>	<b>23</b>	<b>77</b>
<b>14 Operations on the musculoskeletal system</b>																				
142 Partial excision bone	14	13	15	12	54	15	9	9	17	50	20	20	21	23	84	17	29	27	21	94
143 Bunionectomy or repair of toe deformities	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-
144 Treatment, facial fracture or dislocation	-	4	5	-	9	3	9	3	5	20	5	6	11	9	31	5	4	13	5	27
145 Treatment, fracture or disloc of radius & ulna	16	11	12	5	44	14	10	22	13	59	11	17	20	10	58	13	19	20	10	62
146 Treatment, fracture or disloc of hip & femur	168	119	134	122	543	166	115	150	137	568	182	125	132	163	602	170	136	146	145	597
147 Treatment, fracture or disloc of lower extremity	95	53	69	74	291	93	67	52	53	265	113	68	72	90	343	93	60	89	90	332
148 Other fracture & dislocation procedure	23	33	26	31	113	30	27	32	30	119	25	34	27	30	116	35	27	33	26	121
149 Arthroscopy	-	1	-	-	1	-	-	1	1	2	-	-	3	1	4	-	-	-	-	-
150 Division of joint capsule, ligament or cartilage	-	1	-	-	1	-	-	-	1	1	3	2	1	1	7	-	-	-	-	-
151 Excision of semilunar cartilage of knee	-	1	1	-	2	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-
152 Arthroplasty knee	314	330	272	333	1,249	326	364	320	387	1,397	362	372	372	388	1,494	385	411	386	400	1,582
153 Hip replacement, total & partial	267	253	245	300	1,065	285	278	292	282	1,137	307	286	294	281	1,168	306	319	312	364	1,301
154 Arthroplasty other than hip or knee	48	47	36	58	189	50	36	59	53	198	64	46	59	60	229	72	66	53	70	261
155 Arthrocentesis	18	23	17	20	78	17	21	18	10	66	14	8	5	8	35	10	11	9	8	38
156 Injections & aspirations of muscles, tendons, etc.	5	1	2	2	10	5	6	3	6	20	6	10	5	3	24	5	10	6	6	27
157 Amputation of lower extremity	38	42	37	38	155	38	51	37	46	172	30	38	41	35	144	43	38	40	42	163
158 Spinal fusion	140	157	145	174	616	160	159	145	187	651	141	168	168	149	626	152	140	142	135	569
159 Other diagnostic procedures on musculoskeletal system	11	10	5	11	37	13	11	23	36	83	42	37	46	54	179	42	36	54	54	186
160 Other therapeutic procedures on muscles & tendons	32	28	39	45	144	43	25	28	225	321	273	295	300	264	1,132	277	319	323	276	1,195
161 Other OR therapeutic procedures on bone	12	14	4	11	41	11	13	12	19	55	15	13	13	16	57	12	13	14	16	55
162 Other OR therapeutic procedures on joints	37	23	30	23	113	22	15	28	33	98	37	31	31	38	137	23	44	48	44	159
163 Other non-OR therapeutic procedures on musc system	5	14	4	8	31	7	8	12	9	36	13	13	8	9	43	7	6	7	3	23
164 Other OR therapeutic procedures on musc system	8	11	5	4	28	7	4	6	11	28	7	5	12	5	29	7	6	7	8	28
<b>Total</b>	<b>1,251</b>	<b>1,189</b>	<b>1,103</b>	<b>1,271</b>	<b>4,814</b>	<b>1,306</b>	<b>1,229</b>	<b>1,252</b>	<b>1,561</b>	<b>5,348</b>	<b>1,670</b>	<b>1,594</b>	<b>1,641</b>	<b>1,637</b>	<b>6,542</b>	<b>1,674</b>	<b>1,694</b>	<b>1,729</b>	<b>1,723</b>	<b>6,820</b>
<b>15 Operations on the integumentary system</b>																				
165 Breast biopsy & other diagnostic procedures on breast	1	3	1	2	7	-	1	1	2	4	1	3	2	2	8	-	-	1	-	1
166 Lumpectomy, quadrantectomy of breast	2	-	-	1	3	2	-	2	2	6	3	3	3	-	9	1	2	1	2	6
167 Mastectomy	9	10	10	11	40	8	13	15	14	50	10	7	10	2	29	8	3	4	5	20

APPENDIX H

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

\* omits newborns

CCS High Level Procedure Group	ICD-9-CM										ICD-10-PCS									
	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total	2017				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
168 Incision & drainage, skin & subcutaneous tissue	38	47	57	39	181	47	45	64	34	190	48	46	48	39	181	35	50	62	48	195
169 Debridement of wound, infection or burn	49	37	56	39	181	50	52	41	-	143	-	-	-	-	-	-	-	-	-	-
170 Excision of skin lesion	6	2	2	2	12	7	10	5	19	41	13	13	18	13	57	10	9	13	9	41
171 Suture of skin & subcutaneous tissue	15	22	21	14	72	14	20	45	38	117	97	177	203	177	654	183	219	199	200	801
172 Skin graft	8	7	10	7	32	6	10	6	10	32	9	6	4	6	25	8	3	5	8	24
173 Other diagnostic proc on skin & subcutaneous tissue	6	6	13	8	33	8	9	10	19	46	21	22	15	21	79	23	20	22	23	88
174 Other non-OR therapeutic procedures on skin & breast	21	29	30	27	107	42	38	31	42	153	28	44	36	36	144	35	46	51	59	191
175 Other OR therapeutic procedures on skin & breast	6	13	9	7	35	-	4	4	46	54	51	46	42	45	184	55	36	45	46	182
<b>Total</b>	<b>161</b>	<b>176</b>	<b>209</b>	<b>157</b>	<b>703</b>	<b>184</b>	<b>202</b>	<b>224</b>	<b>226</b>	<b>836</b>	<b>281</b>	<b>367</b>	<b>381</b>	<b>341</b>	<b>1,370</b>	<b>358</b>	<b>388</b>	<b>403</b>	<b>400</b>	<b>1,549</b>
<b>Totals by Quarter/Year</b>	<b>5,260</b>	<b>5,357</b>	<b>5,348</b>	<b>5,291</b>	<b>21,256</b>	<b>5,348</b>	<b>5,388</b>	<b>5,520</b>	<b>4,499</b>	<b>20,755</b>	<b>4,648</b>	<b>4,684</b>	<b>4,832</b>	<b>4,580</b>	<b>18,744</b>	<b>4,691</b>	<b>4,850</b>	<b>4,954</b>	<b>4,835</b>	<b>19,330</b>











**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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
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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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: Angiocardiology	3030	Angiocardiology
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
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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
361	Operating Room Services: Minor surgery	5000	Operating Room
362	Operating Room Services: Organ trnsplnt, 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
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: Hyberbaric oxygen therapy	6500	Respiratory Therapy
419	Respiratory Services: Other respiratory services	6500	Respiratory Therapy
420	Physical Therapy	6600	Physical Therapy

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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
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
482	Cardiology: Stress test	3620	Stress Test
483	Cardiology: Echocardiology	3260	Echocardiography



**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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)
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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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)
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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
903	Psychiatric/Psychological Trt: Play therapy	3550	Psychiatric/Psychological Services
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: Electromyogram	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
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	

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
234	CCU	N/A	
235	Hospice	N/A	
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	
540	Ambulance	N/A	
541	Supplies	N/A	
542	Medical Transport	N/A	
543	Heart Mobile	N/A	



**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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	
660	Respite Care	N/A	
661	Hourly Repite 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	

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

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

**APPENDIX J**  
**Crosswalk for Revenue Code to Primary Cost Center**

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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	
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 accomodations	N/A	
1001	Residential treatment-psychiatric	N/A	
1002	residential treatment-chemical dependency	N/A	
1003	Supervised living	N/A	
1004	halfway house	N/A	
1005	group home	N/A	
2100	Alternative therapy services	N/A	
2101	acupuncture	N/A	
2102	acupressure	N/A	
2103	massage	N/A	
2104	reflexology	N/A	
2105	biofeedback	N/A	

## APPENDIX J

### Crosswalk for Revenue Code to Primary Cost Center

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
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 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  
(UVMMC)  
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

Androscoggin Valley Hospital  
(NH-Androscoggin)  
Berlin, New Hampshire

Catholic Medical Center  
(NH-Catholic)  
Manchester, New Hampshire

Cheshire Medical Center  
(NH-Cheshire)  
Keene, New Hampshire

Concord Hospital  
(NH-Concord)  
Concord, New Hampshire

Cottage Hospital  
(NH-Cottage)  
Woodsville, New Hampshire

Dartmouth Hitchcock Medical Center  
(NH-Hitchcock)  
Lebanon, New Hampshire

Dartmouth Hitchcock Psychiatric Unit\*  
(NH-Hitch. Psych)  
Lebanon, New Hampshire

Elliot Hospital  
(NH-Elliot)  
Manchester, New Hampshire

Exeter Hospital  
(NH-Exeter)  
Exeter, New Hampshire

Franklin Regional Hospital  
(NH-Franklin)  
Franklin, New Hampshire

Frisbie Memorial Hospital  
(NH-Frisbie)  
Rochester, New Hampshire

Huggins Hospital  
(NH-Huggins)  
Wolfeboro, New Hampshire

Lakes Region General Hospital  
(NH-Lakes Region)  
Laconia, New Hampshire

Littleton Hospital  
(NH-Littleton)  
Littleton, New Hampshire

Memorial Hospital  
(NH-Memorial)  
North Conway, New Hampshire

Monadnock Community Hospital  
(NH-Monadnock)  
Peterborough, New Hampshire

New London Hospital  
(NH-New London)  
New London, New Hampshire

Parkland Medical Center  
(NH-Parkland)  
Derry, New Hampshire

Portsmouth Regional Hospital  
(NH-Portsmouth)  
Portsmouth, New Hampshire

Southern New Hampshire Medical Center  
(NH-Southern NH)  
Nashua, New Hampshire

St. Joseph's Hospital  
(NH-St. Joseph's)  
Nashua, New Hampshire

Speare Memorial Hospital  
(NH-Speare)  
Plymouth, New Hampshire

Upper Connecticut Valley Hospital  
(NH-Upper CT Val)  
Colebrook, New Hampshire

Valley Regional Hospital  
(NH-Valley Reg.)  
Claremont, New Hampshire

Weeks Medical Center Hospital  
(NH-Weeks)  
Lancaster, New Hampshire

Wentworth-Douglass Hospital  
(NH-Wntwth-Doug)  
Dover, New Hampshire

\* Records from the Dartmouth Hitchcock Psychiatric Unit are combined with the Dartmouth Hitchcock Medical Center beginning 2008.

### Massachusetts Hospitals Most Frequently Used by Vermont Residents

Baystate Medical Center  
(MA-Baystate)  
Springfield, Massachusetts

Berkshire Medical Center  
(MA-Berkshire)  
Pittsfield, Massachusetts

Beth Israel Deaconess Medical Center  
(MA-Beth Israel)  
Boston, Massachusetts

Brigham and Women's Hospital  
(MA-Brigham)  
Boston, Massachusetts

Children's Hospital Boston  
(MA-Children's)  
Boston, Massachusetts

Cooley Dickinson Hospital  
(MA-Cooley Dicki)  
Northampton, Massachusetts

Dana-Farber Cancer Institute  
(MA-Dana Farber)  
Boston, Massachusetts

Franklin Medical Center  
(MA-Franklin Med)  
Greenfield, Massachusetts

Hillcrest Hospital  
(MA-Hillcrest)  
Pittsfield, Massachusetts

Lahey Clinic Hospital  
(MA-Lahey)  
Burlington, Massachusetts

Massachusetts Eye and Ear Infirmary  
(MA-MA Eye & Ear)  
Boston, Massachusetts

Massachusetts General Hospital  
(MA-MA General)  
Boston, Massachusetts

New England Baptist Hospital  
(MA-N.E. Baptist)  
Boston, Massachusetts

Newton-Wellesley Hospital  
(MA-Newton Wells)  
Newton, Massachusetts

North Adams Regional Hospital  
(MA-North Adams)  
North Adams, Massachusetts

Northampton VA Medical Center  
(MA-Northampton)  
Northampton, Massachusetts

Tufts-New England Medical Center  
(MA-N.E. Med Ctr)  
Boston, Massachusetts

UMass Memorial Medical Center  
(MA-U Mass)  
Worcester, Massachusetts

VA Boston Healthcare—Boston Division  
(MA-Boston VA)  
Boston, Massachusetts

VA Boston Healthcare—Brockton Division  
(MA-Brockton VA)  
Brockton, Massachusetts



## **New York Hospitals Most Frequently Used by Vermont Residents**

Albany Medical Center Hospital  
(NY-Albany)  
Albany, New York

Champlain Valley Physicians Hospital Medical Center  
(NY-Champ Val)  
Plattsburgh, New York

Columbia Presbyterian Medical Center  
(NY-Presbyterian)  
New York, New York

Glens Falls Hospital  
(NY-Glens Falls)  
Glens Falls, New York

Leonard Hospital  
(NY-Leonard)  
Troy, New York

Mary McClellan Hospital  
(NY-McClellan)  
Cambridge, New York

Memorial Hospital for Cancer and Allied Disorders  
(NY-Hosp for CA)  
New York, New York

Moses-Ludington Hospital  
(NY-Moses-Luding)  
Ticonderoga, New York

New York United Hospital Medical Center  
(NY-United Med C.)  
Port Chester, New York

New York Weill Cornell Medical Center  
(NY-New York)  
New York, New York

Phelps Memorial Hospital Center  
(NY-Phelps)  
Sleepy Hollow, New York

Samaritan Hospital  
(NY-Samaritan)  
Troy, New York

St. Peters Hospital  
(NY-St Peters)  
Albany, New York

**APPENDIX L**  
**Vermont Hospital Discharge Data Elements**  
**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](mailto:GMCB.DATA@vermont.gov)  
 (802) 828-2906

**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

Attribute	Description	Public Use Data Element	Full Datasets		
			Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
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
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
Emergency Department Flag	Set to 1 if record has an associated revenue code of 45x, Emergency Room.	Y	Y	Y	Y
Grouper	Grouper version used to assign DRG and MDC.	Y	Y	N	N
Hospital	--	Y	Y	Y	Y

Attribute	Description	Public Use Data Element	Full Datasets		
			Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
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
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
ZipTown 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