

# 2017 Hospital Report Card

## All Vermont Acute Care Community Hospitals

**Table 2A - Hospital Pricing of Top 2015 Outpatient Procedures - Gross Charges**

These are hospital gross charges only. Physician charges are NOT included. Charges displayed include each community hospital's top outpatient surgical procedures by volume for the period of 10/1/2014 to 9/30/2015. Because each patient receives treatment based on their individual needs, the gross charge to each patient will vary. Hospital System Number of Cases and Average Gross Charges include all hospitals. For individual hospitals, charges for procedures having fewer than 15 cases are not shown. Blanks in the table indicate that the hospital has fewer than 15 cases for that procedure or the hospital does not perform that procedure. The hospital, however, may perform a similar procedure under a different code which may not be shown. Please call the hospital for more information. Note: the surgical cases shown include some anesthetic procedures for the treatment of pain not connected with surgery.

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

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

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Outpatient Procedures		Hospital System		Vermont Community Hospitals - Charges Displayed Include Each Hospital's Top Outpatient Procedures By Volume														
CCS High-level Group <sup>1</sup> and Single-level Category	Procedure Description	System Number of Cases <sup>2</sup>	System Average Gross Charges <sup>3</sup>	*Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	*Gifford Medical Center	Grace Cottage Hospital	*Mount Ascutney Hospital	North Country Hospital	*Northeastern Vermont Regional Hospital	*Northwestern Medical Center	Porter Medical Center	Rutland Regional Medical Center	*Southwestern Vermont Medical Center	Springfield Hospital	University of Vermont Medical Center	
<b>CCS 1: Operations on the nervous system</b>																		
5	Insert cath, spinal stimulator, inject into spinal canal	4,078	\$2,036	\$4,296	\$1,883	\$1,144	\$2,466		\$2,198	\$2,576	\$1,387	\$1,038		\$2,071	\$2,367		\$2,253	
6	Decompression peripheral nerve	1,584	\$4,934	\$4,320	\$5,193	\$5,496	\$10,116			\$6,429	\$6,346	\$3,682	\$5,524	\$3,801	\$5,443	\$2,695	\$4,619	
7	Other diagnostic nervous system procedures	2,409	\$1,849											\$502			\$2,088	
8	Other non-OR or closed therapeutic nerv syst procs	2,358	\$4,445	\$5,872	\$2,889	\$1,535				\$3,105	\$2,575	\$1,473		\$2,638	\$2,773		\$5,179	
9	Other OR therapeutic nervous system procedures	1,728	\$7,540								\$2,979			\$6,667			\$7,749	
<b>CCS 3: Operations on the eye</b>																		
15	Lens & cataract procedures	4,285	\$5,971	\$5,794	\$4,500	\$6,148	\$6,850		\$7,671	\$6,560	\$9,572	\$5,581	\$4,079	\$5,761		\$4,066	\$5,160	
21	Other extraocular muscle & orbit therapeutic procedures	125	\$8,363				\$13,600										\$2,313	
<b>CCS 4: Operations on the ear</b>																		
23	Myringotomy	903	\$3,400		\$4,131					\$5,322			\$5,326	\$2,306	\$2,367		\$3,181	
26	Other therapeutic ear procedures	1,897	\$1,494											\$286			\$3,185	
<b>CCS 5: Operations on the nose, mouth, and pharynx</b>																		
29	Dental procedures	133	\$10,423			\$9,728											\$15,002	
30	Tonsillectomy and/or adenoidectomy	637	\$6,730		\$7,606					\$6,993	\$11,325		\$8,006	\$6,440	\$5,549		\$5,278	
31	Diagnostic procedures on nose, mouth & pharynx	1,791	\$1,040		\$1,258		\$313			\$1,493	\$267			\$314	\$856		\$1,412	
33	Other OR therapeutic procedures on nose, mouth & pharynx	366	\$10,405		\$11,447					\$6,447			\$10,694	\$6,278			\$11,892	
<b>CCS 6: Operations on the respiratory system</b>																		
35	Tracheoscopy & laryngoscopy with biopsy	1,826	\$829		\$2,112									\$421			\$975	
38	Other diagnostic procedures on lung & bronchus	9,524	\$812	\$436	\$872	\$595	\$906		\$504	\$1,156	\$932	\$504	\$640	\$1,013	\$291	\$499	\$976	
<b>CCS 7: Operations on the cardiovascular system</b>																		
47	Diagnostic cardiac catheterization, coronary arteriography	1,122	\$22,834											\$10,353			\$23,049	
54	Other vascular catheterization, not heart	1,100	\$9,890	\$4,810	\$7,219					\$9,783	\$10,569			\$8,057	\$6,726		\$11,307	
62	Other diagnostic cardiovascular procedures	668	\$3,771	\$585	\$1,131		\$748							\$4,032	\$195		\$10,366	
63	Other non-OR therapeutic cardiovascular procedures	2,980	\$1,445	\$3,382	\$1,613	\$568				\$809	\$2,309	\$449	\$1,554	\$1,490	\$496	\$884	\$1,686	
<b>CCS 9: Operations on the digestive system</b>																		
69	Esophageal dilatation	508	\$4,178	\$3,204	\$4,770									\$4,429			\$4,460	
70	Upper gastrointestinal endoscopy, biopsy	5,103	\$3,296	\$3,047	\$3,308	\$3,016	\$4,673		\$2,771	\$4,610	\$3,879	\$2,798	\$3,558	\$4,024	\$1,671	\$2,203	\$3,427	
76	Colonoscopy & biopsy	23,280	\$3,523	\$3,913	\$3,983	\$2,660	\$5,426		\$2,091	\$4,583	\$4,800	\$2,064	\$3,854	\$4,225	\$2,530	\$2,089	\$3,770	
77	Proctoscopy & anorectal biopsy	570	\$1,811	\$1,693	\$1,885	\$1,111				\$3,552		\$846		\$1,376	\$1,944	\$1,528	\$1,789	
81	Hemorrhoid procedures	218	\$5,203									\$3,573		\$5,234			\$2,826	
84	Cholecystectomy & common duct exploration	1,063	\$12,804	\$10,888	\$13,042	\$17,254	\$36,193		\$19,491	\$14,373	\$21,738	\$9,677	\$23,915	\$9,828	\$8,827	\$10,346	\$11,251	
85	Inguinal & femoral hernia repair	1,114	\$11,221	\$8,144	\$9,882	\$14,070	\$21,932		\$18,160	\$11,826	\$17,007	\$8,807	\$19,987	\$9,620	\$10,787	\$8,213	\$9,657	
86	Other hernia repair	865	\$11,400	\$6,841	\$9,075	\$13,753	\$17,537		\$20,920	\$12,009	\$20,128	\$7,897	\$14,219	\$11,245	\$9,850	\$9,145	\$11,401	
88	Abdominal paracentesis	259	\$2,445							\$1,397				\$2,102	\$2,840		\$1,809	
91	Peritoneal dialysis	2,785	\$10,350												\$32,122		\$9,581	
95	Other non-OR lower GI therapeutic procedures	98	\$3,459	\$3,438													\$2,458	

Table 2A

2017 Hospital Report Card

Outpatient Procedures		Hospital System		Vermont Community Hospitals - Charges Displayed Include Each Hospital's Top Outpatient Procedures By Volume														
CCS High-level Group <sup>1</sup> and Single-level Category	Procedure Description	System Number of Cases <sup>2</sup>	System Average Gross Charges <sup>3</sup>	*Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	*Gifford Medical Center	Grace Cottage Hospital	*Mount Ascutney Hospital	North Country Hospital	*Northeastern Vermont Regional Hospital	*Northwestern Medical Center	Porter Medical Center	Rutland Regional Medical Center	*Southwestern Vermont Medical Center	Springfield Hospital	University of Vermont Medical Center	
<b>CCS 10: Operations on the urinary system</b>																		
100	Endoscopy & endoscopic biopsy of the urinary tract	1,588	\$2,487	\$5,534	\$2,311	\$1,201							\$14,002	\$1,886	\$8,123		\$2,210	
101	Transurethral excision, drainage, rem urinary obstruction	663	\$6,621	\$7,773	\$8,018	\$8,718	\$17,256					\$7,471	\$13,455	\$4,970	\$7,056	\$11,593	\$4,859	
107	Extracorporeal lithotripsy, urinary	782	\$13,064	\$13,578	\$14,957	\$8,318	\$9,821					\$13,206	\$15,249	\$12,880	\$15,933	\$9,004	\$12,884	
112	Other OR therapeutic procedures of urinary tract	262	\$9,483				\$11,101							\$7,042			\$9,877	
<b>CCS 11: Operations on the male genital organs</b>																		
115	Circumcision	264	\$3,326		\$1,452							\$828	\$1,459			\$1,256	\$6,850	
<b>CCS 12: Operations on the female genital organs</b>																		
125	Other excision of cervix & uterus	387	\$8,979	\$9,724	\$7,033	\$11,086						\$5,865	\$10,396	\$13,961	\$8,181		\$10,274	
130	Other diagnostic procedures, female organs	3,537	\$1,527	\$6,787	\$571	\$3,397				\$3,340	\$9,859	\$4,505	\$6,588	\$3,110	\$554	\$5,543	\$4,145	
132	Other OR therapeutic procedures, female organs	321	\$10,741	\$8,014						\$15,045		\$4,911			\$9,996		\$10,383	
<b>CCS 13: Obstetrical procedures</b>																		
139	Fetal monitoring	4,145	\$789	\$630	\$482	\$498	\$694				\$988	\$684	\$152	\$909	\$1,143	\$990	\$387	\$945
<b>CCS 14: Operations on the musculoskeletal system</b>																		
143	Bunionectomy or repair of toe deformities	510	\$11,501	\$10,873	\$14,105	\$23,707	\$17,756				\$13,801	\$6,472	\$14,339	\$21,658	\$10,689	\$6,401	\$7,121	
145	Treatment, fracture or disloc of radius & ulna	434	\$14,103	\$11,086	\$14,087	\$22,860						\$8,554	\$17,040	\$6,347	\$10,707		\$14,839	
147	Treatment, fracture or disloc of lower extremity	468	\$15,394	\$12,837	\$13,941	\$25,731	\$31,941			\$19,114	\$25,905	\$9,709	\$22,701	\$6,379	\$10,744	\$14,156	\$13,531	
148	Other fracture & dislocation procedure	543	\$14,680	\$14,431	\$14,081	\$21,170				\$14,042		\$8,784	\$24,661	\$8,639	\$11,370	\$11,187	\$14,627	
151	Excision of semilunar cartilage of knee	1,323	\$8,951	\$5,312	\$8,291	\$11,869	\$16,586			\$11,814	\$16,313	\$7,839	\$12,815	\$6,585	\$6,001	\$5,759	\$9,219	
155	Arthrocentesis	3,423	\$774	\$450	\$1,165	\$0				\$2,468		\$2,455	\$171	\$674			\$821	
156	Injections & aspirations of muscles, tendons, etc.	1,275	\$1,407		\$2,028	\$873						\$2,808		\$790			\$1,486	
160	Other therapeutic procedures on muscles & tendons	2,398	\$10,280	\$7,726	\$9,005	\$20,748	\$27,329		\$13,579	\$13,381	\$10,814	\$5,220	\$16,595	\$6,773	\$10,348	\$5,157	\$8,357	
161	Other OR therapeutic procedures on bone	640	\$11,275	\$6,706	\$8,418	\$10,863	\$17,156			\$12,436	\$10,866	\$6,148	\$14,018	\$8,569	\$9,016	\$5,445	\$13,427	
162	Other OR therapeutic procedures on joints	1,061	\$13,741	\$8,731	\$12,232	\$21,891	\$34,278			\$12,423	\$14,751	\$9,850	\$24,288	\$9,297	\$9,532	\$13,862	\$12,540	
163	Other non-OR therapeutic procedures on musc system	751	\$520			\$285						\$1,344			\$1,162		\$2,468	
<b>CCS 15: Operations on the integumentary system</b>																		
165	Breast biopsy & other diagnostic procedures on breast	1,029	\$4,422	\$7,642	\$4,499		\$4,714	\$3,094	\$4,519			\$2,887	\$2,024	\$2,321	\$2,905	\$3,317	\$5,437	
166	Lumpectomy, quadrantectomy of breast	521	\$8,962	\$9,924	\$9,436		\$23,370			\$9,814		\$4,459	\$12,914	\$9,699	\$7,203	\$9,634	\$6,549	
169	Debridement of wound, infection or burn	877	\$1,423	\$874										\$1,664			\$2,072	
170	Excision of skin lesion	4,885	\$2,252	\$2,623	\$4,074	\$3,193	\$11,409			\$4,799	\$6,577	\$1,492	\$6,848	\$3,135	\$3,198	\$4,935	\$1,966	
171	Suture of skin & subcutaneous tissue	974	\$3,331		\$3,436									\$3,083	\$2,535		\$3,171	
174	Other non-OR therapeutic procedures on skin & breast	3,786	\$636			\$62					\$361	\$2,513		\$3,769			\$841	
175	Other OR therapeutic procedures on skin & breast	447	\$12,919		\$6,159							\$5,473		\$7,331	\$6,840		\$15,402	

\* These hospitals did not validate their data.

Sorted by CCS procedure groups and alphabetically by Hospital.

Data source: the Vermont Uniform Hospital Discharge Data Sets as of June 2016. Please see the Act 53 Pricing FAQs for more information.

Grace Cottage Hospital has no procedures with 15 or more cases.

1. Based on "Current Procedural Terminology" (CPT) codes that define outpatient procedures for the period October 1, 2014 through September 30, 2015.

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

2. System Number of Cases includes the number of cases for all hospitals with charges. Records with zero charges are not included.

3. System Average Gross Charge is an average based on all hospital cases with charges.