

**All Vermont Acute Care Community Hospitals**

**Table 1B - Count of Top 2022 Inpatient Diagnoses**

The counts displayed include each community hospital's top inpatient diagnoses by volume. These pages provide the number of cases for these diagnoses for the period of 10/1/2021 to 9/30/2022. Hospital System Number of Cases and Average Gross Charges include all hospitals. For individual hospitals, diagnoses having fewer than 15 cases are excluded. Blanks in the table indicate that the hospital has fewer than 15 cases for that diagnosis or the hospital does not admit patients with that particular diagnosis. The hospital, however, may admit patients with similar diagnoses under a different code which may not be shown. Treating a given diagnosis may entail more than one procedure. Please call the hospital for more information.

Page	Table of Contents - Groupings of Inpatient Diagnoses*
1	MDC 1 Nervous System
No data	MDC 2 Eye
No data	MDC 3 Ear, Nose, Mouth and Throat
1	MDC 4 Respiratory System
1	MDC 5 Circulatory System
1	MDC 6 Digestive System
2	MDC 7 Hepatobiliary System and Pancreas
2	MDC 8 Musculoskeletal System and Connective Tissue
2	MDC 9 Skin, Subcutaneous Tissue and Breast
2	MDC 10 Endocrine, Nutritional and Metabolic System
2	MDC 11 Kidney and Urinary Tract
No data	MDC 12 Male Reproductive System
No data	MDC 13 Female Reproductive System
2	MDC 14 Pregnancy, Childbirth and Puerperium
2	MDC 15 Newborn and Other Neonates (Perinatal Period)
No data	MDC 16 Blood and Blood Forming Organs and Immunological Disorders
No data	MDC 17 Myeloproliferative Diseases and Disorders (Poorly Differentiated Neoplasms)
3	MDC 18 Infectious and Parasitic Diseases
3	MDC 19 Mental Diseases and Disorders
3	MDC 20 Alcohol/Drug Use or Induced Mental Disorders
No data	MDC 21 Injuries, Poison and Toxic Effect of Drugs
No data	MDC 22 Burns
3	MDC 23 Factors Influencing Health Status
No data	MDC 24 Multiple Significant Trauma
No data	MDC 25 Human Immunodeficiency Virus Infection

\* "Major Diagnostic Category" (MDC) is a grouping of similar MS-DRGs, such as all those affecting a given organ system of the body.

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

Inpatient Diagnosis		Hospital System		Vermont Community Hospitals - Counts Displayed Include Each Hospital's Top Diagnoses By Volume													
MDC and MS-DRG 1	Diagnosis Description	System Number of Cases <sup>2</sup>	System Average Gross Charges <sup>3</sup>	Brattleboro Memorial Hospital	Central Vermont Hospital	Copley Hospital	Gifford Medical Center	Grace Cottage Family Health & Hospital	Mount Ascutney Hospital and Health Center	North Country Hospital and Health Center	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>MDC 1: Diseases and Disorders of the Nervous System</b>																	
57	Degenerative nervous system disorders w/o MCC <sup>4</sup>	317	\$60,261						40					18			207
65	Stroke with CC <sup>4</sup> or TPA in 24 hrs	472	\$35,243	21	28				39	19	15	31		67	51	16	164
66	Stroke w/o CC <sup>4</sup>	151	\$26,597		15									25			50
<b>MDC 4: Diseases and Disorders of the Respiratory System</b>																	
177	Resp infect/inflam w MCC <sup>4</sup>	1381	\$39,342	56	138	61			36	46	75	103	68	199	212	53	315
178	Respiratory infections & inflammation with CC <sup>4</sup>	1381	\$39,342	56	138	61			36	46	75	103	68	199	212	53	315
189	Pulmonary edema & respiratory failure	315	\$31,317	16								19	17	44	36		109
190	Chronic lung disease (emphysema) with MCC <sup>4</sup>	609	\$35,799		51	22			17	24		42	41	36	72	25	260
191	Chronic lung disease (emphysema) with CC <sup>4</sup>	544	\$23,705	23	54	29					22	70	26	81	103		109
193	Pneumonia with MCC <sup>4</sup>	139	\$21,838											24			34
194	Pneumonia with CC <sup>4</sup>	539	\$27,459	40	60	36			16	39	26	50	22	52	68	23	105
202	Bronchitis and Asthma w/ CC/MCC <sup>4</sup>	255	\$21,735	19		24				24	19			31	26	18	51
203	Bronchitic & Asthma w/o CC/MCC <sup>4</sup>	173	\$16,337											62			64
<b>MDC 5: Diseases and Disorders of the Circulatory System</b>																	
280	AMI discharged alive w MCC <sup>4</sup>	456	\$31,240		81					23	16	29		18	24		231
281	AMI discharged alive w CC <sup>4</sup>	338	\$21,688		48					29	17	38		39			120
282	AMI discharged alive w/out CC/MCC <sup>4</sup>	260	\$15,008		40					26		33		47			59
291	Heart failure with MCC <sup>4</sup>	1164	\$28,842	68	128	38					53	102	24	169	133	22	398
292	Heart failure with CC <sup>4</sup>	191	\$20,284										39	29			34
308	Heart rhythm disturbances with MCC <sup>4</sup>	242	\$27,396		31							29		41	22		70
309	Heart rhythm disturbances with CC <sup>4</sup>	387	\$17,206		46							21	18	85	38		131
312	Syncope & collapse	169	\$22,833		19									43	17		54
<b>MDC 6: Diseases and Disorders of the Digestive System</b>																	
331	Major small & large bowel procedures without CC/MCC <sup>4</sup>	222	\$39,873							18				22			128
378	Bleeding from the stomach or intestine with CC <sup>4</sup>	386	\$24,474	27	44						16	29		59	40		133
390	G.I. obstruction w/o CC <sup>4</sup>	201	\$15,252		31	18				18					18		59
392	Irritation or ulcer of the esophagus or stomach w/o MC <sup>4</sup>	553	\$20,591	23	49	25				19	23	29	21	90	41		203

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<b>MDC 7: Diseases and Disorders of the Hepatobiliary (Liver) System and Pancreas</b>																		
440	Disorders of pancreas except malignancy w/o CC <sup>4</sup>	124	\$16,479		19										15		30	
<b>MDC 8: Diseases and Disorders of the Musculoskeletal System and Connective Tissue</b>																		
470	Hip or knee replacement or reattachment of feet or legs w/o MCC <sup>4</sup>	527	\$40,509	160	61	115				43		27		28	19		58	
481	Hip & femur procedures except major joint w CC <sup>4</sup>	325	\$53,582	16	30	16					15	23		45	32		123	
482	Hip & femur procedures except major joint w/o CC/MCC <sup>4</sup>	139	\$42,499											22	18		37	
522	Hip replacement w/ principal diagnosis of hip fracture w/o MCC <sup>4</sup>	216	\$53,909	23	25									31	22		65	
559	Aftercare, musculoskeletal system & connective tissue with MCC <sup>4</sup>	60	\$49,822						33								17	
560	Aftercare, musculoskeletal system & connective tissue w CC <sup>4</sup>	186	\$40,249						91								75	
561	Aftercare, musculoskeletal system & connective tissue w/o CC/MCC <sup>4</sup>	66	\$31,081						30								31	
<b>MDC 9: Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast</b>																		
603	A deep infection of the skin w/o MCC <sup>4</sup>	488	\$18,079	40	42	29				19	30	27	18	74	42	17	129	
<b>MDC 10: Endocrine, Nutritional and Metabolic Diseases and Disorders</b>																		
638	Diabetes with CC <sup>4</sup>	268	\$22,697		21						18	19		40	21		98	
641	Dehydration w/o MCC <sup>4</sup>	424	\$21,373	22	45	21				22		25		64	41	18	130	
<b>MDC 11: Diseases and Disorders of the Kidney and Urinary Tract</b>																		
682	Renal failure w MCC <sup>4</sup>	258	\$32,636		27	17						23		41	15		103	
683	Renal failure with CC <sup>4</sup>	343	\$23,763	18	18					18		28		55	31		125	
689	Kidney or urinary tract infection with MCC <sup>4</sup>	165	\$24,982		29							17		18	17		35	
690	Kidney or urinary tract infection w/o MCC <sup>4</sup>	386	\$20,342	27	27	29					24	28	17	42	30		120	
698	Other kidney & urinary tract diagnoses w MCC <sup>4</sup>	172	\$36,248											42	49		57	
<b>MDC 14: Pregnancy, Childbirth, and the Puerperium</b>																		
787	Cesarean section w/o sterilization w CC <sup>4</sup>	291	\$26,978	39							16	15		24	16		153	
788	Cesarean section w/o sterilization w/o CC/MCC <sup>4</sup>	691	\$22,488	28	41	19				32	16	59	49	35	67		344	
806	Vaginal delivery w/o sterilization/D&C w CC <sup>4</sup>	670	\$13,728	92	25						53	25	42	76	44		290	
807	Vaginal delivery w/o sterilization/D&C w/o CC/MCC <sup>4</sup>	2263	\$12,066	67	119	118	23			81	79	140	163	171	242		1060	
832	Other antepartum diagnosis w/o O.R. procedures w/ CC <sup>4</sup>	96	\$11,845											15			53	
<b>MDC 15: Newborns and Other Neonates with Conditions Originating in the Perinatal Period</b>																		
789	Neonates died or transferred to an Oth acute care facility	118	\$58,572	24								16		16			24	
793	A full-term baby with major problems	322	\$30,719	18								18	33		19		180	
794	Newborn with medical problems	1825	\$5,785	133	62	35	18			60	49	177	186	207	152		746	

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795	Normal newborn	2245	\$4,058	95	158	135	36			66	125	87	91	103	210		1139
<b>MDC 18: Infectious and Parasitic Diseases (Systemic or Unspecified Sites)</b>																	
871	Septicemia or severe sepsis w/o MV for 96+ hours with MCC <sup>4</sup>	1718	\$43,788	40	412					24	52	66	55	364	161		517
872	Septicemia or severe sepsis w/o MV for 96+ hours w/o MCC <sup>4</sup>	681	\$25,088	29	85						18	39	71	133	60		196
<b>MDC 19: Mental Diseases and Disorders</b>																	
881	Depressive neuroses	284	\$21,529		41						16			118		16	93
882	Neuroses exc depressive	133	\$26,244		30									47			45
885	Psychoses (such as schizophrenia)	1218	\$38,771		266						20			359		252	308
<b>MDC 20: Alcohol/Drug Use and Alcohol/Drug Induced Organic Mental</b>																	
897	Untreated alcohol or drug abuse w/o MCC <sup>4</sup>	664	\$18,671	20	71	15					21	27		241	28		197
<b>MDC 23: Factors Influencing Health Status and Other Contacts with Health Services</b>																	
948	Signs & symptoms w/o MCC <sup>4</sup>	225	\$24,518		16	17				20			20		19		75
949	Aftercare w CC/MCC <sup>4</sup>	249	\$38,332						216								33
951	Other factors influencing health status	91	\$14,947											24			31

Sorted by MDC and MS-DRG codes and alphabetically by Hospital.  
Data source: the Vermont Uniform Hospital Discharge Data Sets as of March 2024. Please see the Act 53 Pricing FAQs for more information.  
<sup>1</sup> Based on "Medicare Severity - Diagnostic Related Group" (MS-DRG), a code that defines an inpatient diagnosis. Treating a given diagnosis may entail more than one procedure. Major Diagnostic Category (MDC) is a grouping of similar MS DRGs, such as all those affecting a given organ system of the body.  
<sup>2</sup> System Number of Cases includes the number of cases for all hospitals with charges. Records with zero charges are not included.  
<sup>3</sup> System Average Gross Charge is an average based on all hospital cases with charges.  
<sup>4</sup> CC means complication or comorbidity, MCC means major complication or comorbidity, both are additional medical conditions or co-occurring medical conditions