

All Vermont Acute Care Community Hospitals

Table 1A - Hospital Pricing of Top 2020 Inpatient Diagnoses - Gross Charges

These are hospital gross charges only. Physician charges are NOT included. Charges displayed include each community hospital's top inpatient diagnoses by volume for the period of 10/1/2019 to 9/30/2020. 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 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
No data	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
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2	MDC 14	Pregnancy, Childbirth and Puerperium
2	MDC 15	Newborn and Other Neonates (Perinatal Period)
2	MDC 16	Blood and Blood Forming Organs and Immunological Disorders
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3	MDC 19	Mental Diseases and Disorders
3	MDC 20	Alcohol/Drug Use or Induced Mental Disorders
3	MDC 21	Injuries, Poison and Toxic Effect of Drugs
No data	MDC 22	Burns
3	MDC 23	Factors Influencing Health Status
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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 - Charges Displayed Include Each Hospital's Top Diagnoses By Volume														
MDC	MS-DRG Diagnosis Description	System Number of Cases ²	System Average Gross Charges ³	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Gifford Medical Center	Grace Cottage Family Health & Hospital	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	
MDC 1: Diseases and Disorders of the Nervous System																		
57	Degenerative nervous system disorders w/o MCC	334	\$57,559						\$56,838									\$66,200
65	Stroke with CC or TPA in 24 hrs	479	\$33,282		\$22,591				\$62,361			\$15,359		\$25,769	\$19,779	\$19,884		\$39,424
101	Seizures w/o MCC	260	\$22,254		\$15,491									\$19,652				\$24,709
MDC 4: Diseases and Disorders of the Respiratory System																		
177	Resp infect/inflam w MCC	298	\$32,322		\$27,432							\$17,541		\$35,439	\$25,179			\$39,857
178	Respiratory infections & inflammation with CC	133	\$28,422											\$22,145	\$15,819			\$43,058
189	Pulmonary edema & respiratory failure	688	\$27,178	\$21,050	\$21,281	\$13,800				\$27,476		\$16,159	\$21,950	\$28,872	\$17,535	\$29,193		\$33,907
190	Chronic lung disease (emphysema) with MCC	476	\$21,996	\$19,281	\$20,871	\$10,327	\$21,078				\$27,411	\$16,831		\$25,447	\$16,222			\$28,505
191	Chronic lung disease (emphysema) with CC	230	\$19,006	\$16,265			\$15,884							\$17,753	\$12,227			\$21,725
193	Pneumonia with MCC	546	\$23,121	\$27,266	\$22,006	\$10,097						\$15,419		\$32,014	\$18,564	\$28,661		\$26,526
194	Pneumonia with CC	506	\$17,609	\$16,523			\$17,250		\$16,944	\$22,844	\$27,602	\$10,680	\$15,469	\$19,177	\$14,612	\$20,453		\$18,642
195	Pneumonia w/o CC	158	\$13,158							\$22,332				\$8,961	\$11,043			\$12,296
MDC 5: Diseases and Disorders of the Circulatory System																		
280	AMI discharged alive w MCC	348	\$29,631		\$23,178							\$10,991		\$26,537	\$19,556			\$39,554
281	AMI discharged alive w CC	303	\$19,197		\$15,248					\$23,861		\$8,670		\$14,743				\$26,681
282	AMI discharged alive w/out CC/MCC	219	\$14,029		\$8,544					\$12,939		\$7,100		\$10,783				\$22,684
291	Heart failure with MCC	918	\$25,835	\$24,548	\$21,646	\$10,335	\$19,740			\$27,395	\$30,496	\$16,463		\$27,843	\$16,705	\$26,903		\$34,293
292	Heart failure with CC	394	\$19,660	\$25,766	\$18,458		\$17,252		\$17,732	\$18,065	\$26,462	\$12,032	\$18,202	\$18,155	\$14,264	\$22,788		\$25,859
308	Heart rhythm disturbances with MCC	224	\$22,972		\$20,318									\$27,469	\$18,183			\$28,992
309	Heart rhythm disturbances with CC	400	\$16,093	\$15,558	\$14,631							\$10,374		\$17,873	\$15,545			\$16,704
312	Syncope & collapse	227	\$18,717		\$14,185									\$18,165	\$14,503			\$23,653
313	Chest pain	114	\$15,774				\$20,308							\$15,462				\$14,048
MDC 6: Diseases and Disorders of the Digestive System																		
331	Major small & large bowel procedures without CC/MCC	181	\$38,907							\$57,270				\$35,068				\$34,224
378	Bleeding from the stomach or intestine with CC	383	\$19,895		\$16,519	\$9,737					\$27,321	\$11,446		\$23,138	\$15,752			\$22,847
389	G.I. obstruction with CC	233	\$18,258		\$15,796							\$11,712		\$16,158	\$17,022			\$25,547
390	G.I. obstruction w/o CC	169	\$14,367												\$11,626			\$18,507
392	Irritation or ulcer of the esophagus or stomach w/o MC	762	\$15,934	\$18,679	\$14,274	\$9,256	\$13,589		\$14,204	\$20,468	\$17,849	\$10,458	\$14,243	\$15,629	\$14,607	\$18,245		\$18,996
MDC 8: Diseases and Disorders of the Musculoskeletal System and Connective Tissue																		
460	Fusion of spinal vertebra of the chest or low back w/o MCC	209	\$75,292									\$57,684						\$80,848
470	Hip or knee replacement or reattachment of feet or legs w/o MCC	1901	\$40,706	\$29,751	\$35,928	\$38,230	\$46,680			\$54,537	\$57,170	\$55,860	\$56,166	\$35,918	\$38,570	\$37,772		\$41,483

Inpatient Diagnosis		Hospital System		Vermont Community Hospitals - Charges Displayed Include Each Hospital's Top Diagnoses By Volume														
MDC	MS-DRG Diagnosis Description	System Number of Cases ²	System Average Gross Charges ³	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Gifford Medical Center	Grace Cottage Family Health & Hospital	Mount Acutney 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	
481	Hip & femur procedures except major joint w CC	284	\$45,658	\$38,047	\$36,444									\$40,021	\$35,622		\$54,770	
483	Upper extrem major joint & limb reattachment	261	\$53,808	\$30,507		\$50,995								\$48,490			\$63,617	
536	Fractures of hip & pelvis w/o MCC	105	\$19,610												\$12,039		\$26,610	
552	Medical back problems w/o MCC	237	\$24,147									\$11,002		\$25,182	\$13,103		\$29,792	
554	Bone diseases & arthropathies w/o MCC	107	\$31,452				\$43,921								\$32,354		\$20,929	
559	Aftercare, musculoskeletal system and connective tissue with MCC	51	\$45,233						\$33,750								\$60,663	
560	Aftercare, musculoskeletal system & connective tissue w CC	251	\$38,423						\$37,646								\$41,481	
561	Aftercare, musculoskeletal system & connective tissue w/o CC/MCC	105	\$26,096						\$23,791								\$29,882	
563	FX, sprn, strn & disl except femur, hip, pelvis & thigh w/o MCC	138	\$19,153				\$17,942							\$17,003	\$19,411		\$22,543	
MDC 9: Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast																		
603	A deep infection of the skin w/o MCC	495	\$15,789	\$11,674	\$13,022	\$8,419	\$17,548		\$12,330	\$17,453			\$10,896	\$13,037	\$18,153	\$13,467	\$22,298	\$19,114
MDC 10: Endocrine, Nutritional and Metabolic Diseases and Disorders																		
641	Dehydration w/o MCC	398	\$17,595	\$18,692	\$16,448		\$14,087			\$16,102			\$9,145		\$21,538	\$14,732		\$19,447
MDC 11: Diseases and Disorders of the Kidney and Urinary Tract																		
683	Renal failure with CC	328	\$18,160	\$16,391	\$15,557	\$9,516			\$16,379	\$19,298				\$19,134	\$13,747		\$22,472	
690	Kidney or urinary tract infection w/o MCC	440	\$17,258	\$23,518	\$17,279		\$15,012			\$17,861	\$25,678	\$11,200		\$16,162	\$15,774	\$16,982	\$20,027	
MDC 14: Pregnancy, Childbirth, and the Puerperium																		
768	Vaginal delivery w o.r. proc except steril &/or D&C	142	\$15,507										\$15,082				\$16,759	
787	Cesarean section w/o sterilization w CC	305	\$24,308	\$19,211								\$11,628		\$19,681			\$27,290	
788	Cesarean section w/o sterilization w/o CC/MCC	699	\$19,570	\$17,790	\$15,934	\$15,617			\$21,937			\$11,044	\$23,637	\$21,316	\$16,726		\$22,501	
806	Vaginal delivery w/o sterilization/D&C w CC	727	\$11,806	\$9,679	\$14,420	\$5,663	\$11,305			\$10,538	\$12,997	\$4,733	\$12,095	\$12,256	\$10,743		\$13,125	
807	Vaginal delivery w/o sterilization/D&C w/o CC/MCC	2377	\$10,342	\$8,780	\$12,875	\$5,279	\$10,656			\$8,993	\$13,192	\$4,232	\$10,742	\$11,968	\$10,260		\$11,332	
833	Other antepartum diagnosis w/o o.r. procedure w/o CC/MCC	163	\$9,356				\$14,150								\$4,509		\$10,694	
MDC 15: Newborns and Other Neonates with Conditions Originating in the Perinatal Period																		
789	Neonates died or transferred to an Oth acute care facility	140	\$25,023	\$2,791	\$3,096							\$2,779	\$3,429	\$4,822				
793	A full-term baby with major problems	341	\$25,487	\$5,034					\$9,323	\$10,693	\$4,567	\$3,817			\$6,167		\$42,210	
794	Newborn with medical problems	1807	\$5,455	\$4,130	\$5,421	\$2,707	\$4,774			\$5,912	\$5,383	\$3,438	\$2,851	\$5,285	\$4,234		\$7,282	
795	Normal newborn	2402	\$3,529	\$3,592	\$4,089	\$2,451	\$3,479			\$4,538	\$4,947	\$2,894	\$2,415	\$3,624	\$3,414		\$3,557	
MDC 16: Diseases and Disorders of the Blood and Blood Forming Organs and Immunological Disorders																		
812	Red blood cell disorders w/o MCC	175	\$17,264		\$19,674								\$11,613	\$17,046			\$21,202	
MDC 18: Infectious and Parasitic Diseases (Systemic or Unspecified Sites)																		

Inpatient Diagnosis		Hospital System		Vermont Community Hospitals - Charges Displayed Include Each Hospital's Top Diagnoses By Volume													
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871	Septicemia or severe sepsis w/o MV for 96+ hours with MCC	1431	\$35,700	\$25,119	\$26,748		\$34,091				\$41,883	\$22,314	\$21,858	\$38,195	\$24,253	\$28,971	\$47,661
872	Septicemia or severe sepsis w/o MV for 96+ hours w/o MCC	645	\$21,433	\$19,949	\$15,214		\$23,672					\$16,532	\$15,002	\$26,351	\$18,149	\$24,997	\$25,999
MDC 19: Mental Diseases and Disorders																	
881	Depressive neuroses	221	\$19,391		\$18,482									\$12,056		\$10,876	\$32,471
882	Neuroses exc depressive	172	\$26,612		\$31,362									\$29,824		\$9,255	\$25,623
885	Psychoses (such as schizophrenia)	991	\$38,986		\$25,700									\$45,394		\$13,725	\$54,902
MDC 20: Alcohol/Drug Use and Alcohol/Drug Induced Organic Mental																	
897	Untreated alcohol or drug abuse w/o MCC	551	\$15,557	\$14,984	\$14,919	\$6,657	\$16,102					\$9,269	\$14,455	\$14,486	\$16,337		\$17,841
MDC 21: Injuries, Poisonings, and Toxic Effects of Drugs																	
918	Poisoning and other adverse effects from a medication w/o MCC	172	\$15,679											\$14,390			\$16,615
MDC 23: Factors Influencing Health Status and Other Contacts with Health Services																	
948	Signs & symptoms w/o MCC	243	\$20,623				\$15,271			\$17,960				\$23,273	\$16,982		\$30,647
949	Aftercare w CC/MCC	208	\$38,964						\$24,885								\$77,871
951	Other factors influencing health status	149	\$15,722		\$14,137	\$3,908								\$11,062			\$23,767

Sorted by MDC and MS-DRG codes and alphabetically by Hospital.

Data source: the Vermont Uniform Hospital Discharge Data Sets as of January 2022. Please see the Act 53 Pricing FAQs for more information.

¹ 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.

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.

§ Hospital did not verify the data.