

2016

Vermont Hospitals Report

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Disclaimer

Vermont hospital discharge data for use in this publication were supplied by the VAHHS-NSO reporting system, Vermont EXPLOR, under a contract with GMCB. These data were supplied upon the authorization of the hospitals through agreements between VAHHS-NSO and each participating hospital.

After receipt of the data files from VAHHS-NSO, the data undergo additional editing and processing by the Vermont Department of Health, under an agreement with GMCB, before inclusion in the Vermont Uniform Hospital Discharge Data Set (VUHDDS). The VUHDDS is used to construct this report and is the official state data file available to the public. The Health Department does not assume responsibility for errors in the data due to coding or processing by hospitals, VAHHS-NSO Vermont EXPLOR, or other data providers.

Vermonters Using Out-of-State Hospitals

GMCB has data sharing agreements with state agencies in New

Hampshire, Massachusetts, and New York to receive hospital discharge records for Vermont residents using hospital services outside of Vermont. Unfortunately, the timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's data collection and processing technologies. At the time of this report, New Hampshire has not released data to Vermont beyond 2011. The most recent *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.

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2016 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 2016.

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 2016 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 15.7% from 2015 to 2016. Charges for non-resident inpatient discharges increased by 11.5%. These are the highest rates of increase in the past several years. The *number* of inpatient discharges for Vermont residents in 2016 increased by 9.2% over 2015, and the number of non-resident inpatient discharges increased by 5.3%, also the highest rates of increase in recent years.
- **Total charges for Vermont residents with ED visits to Vermont hospitals** increased by 7.5% from 2015 to 2016, a smaller increase than that for non-residents (11.6%). 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 2011 to 2012 (11.1% and 11.4% respectively). The *number* of ED visits for both Vermont residents and non-residents has changed very little from 2015 to 2016 (-1.6% and 0.6% respectively).
- **Total charges for Vermont residents with outpatient procedures in CCS high-level procedure groups 1 through 15 at Vermont hospitals** increased 3.4% from 2015 to 2016 compared to the decrease of -9.9% in total charges for non-residents. The increase for Vermont resident charges is higher than the change from 2014 to 2015 (-0.1%), and the decrease in total charges for non-residents is less than the decrease from 2014 to 2015 (-13.1%). The *number* of outpatient procedures in range for Vermont residents and non-residents changed little from 2015 to 2016 (1.7% and -1.4% 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.

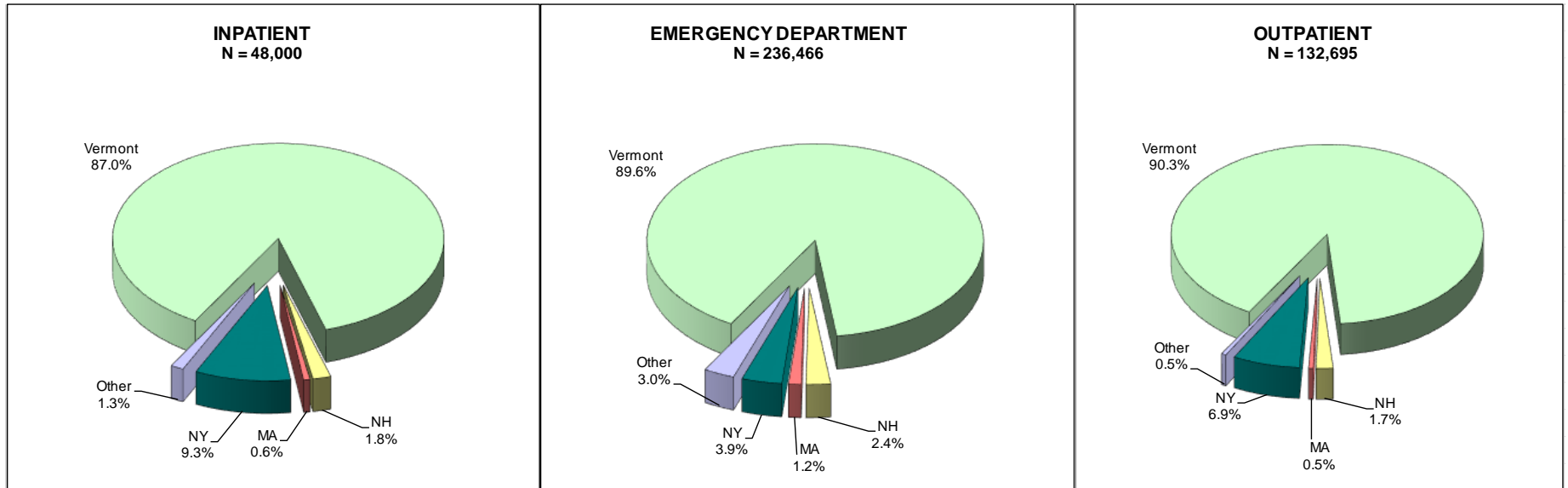
In-migration

- Most in-migration to Vermont hospitals in 2016 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 9.3% of inpatient discharges and 6.9% of outpatient procedures in range).
- In 2016, New York residents accounted for a higher percent of total charges than of total discharges in all three settings (4.7% of ED charges, 14.3% of inpatient charges and 8.7% of outpatient charges), as in recent years.

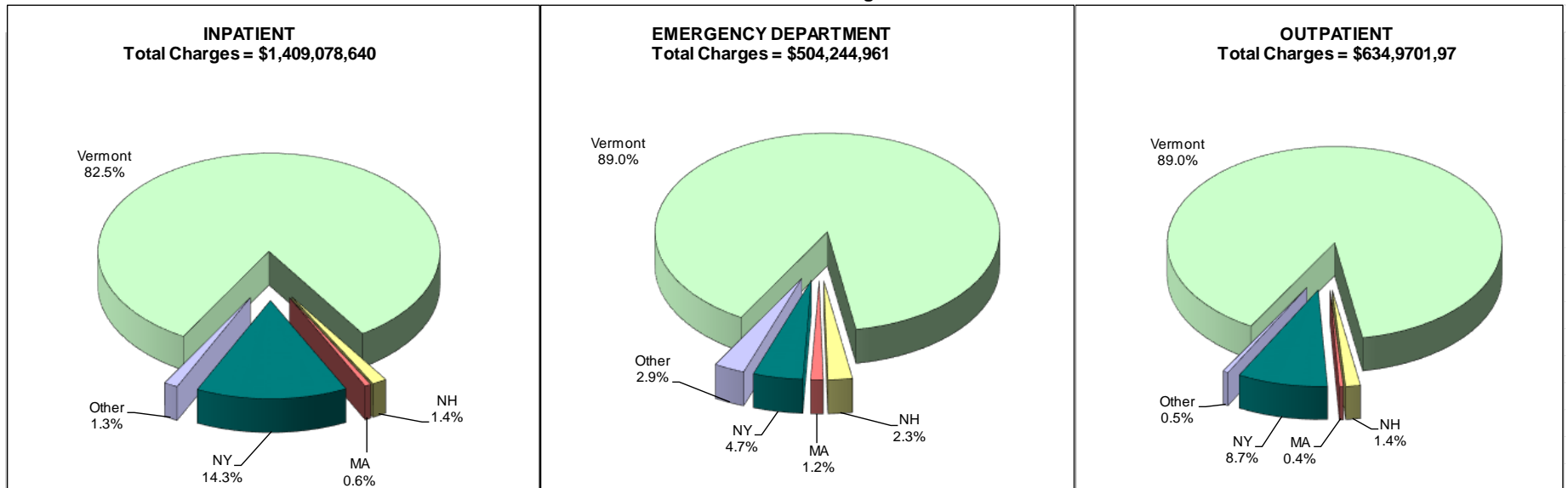
Note: Reporting is limited to Vermont hospitals until the 2016 data are available for Vermont residents served in New Hampshire, Massachusetts and New York hospitals. The timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's data collection and processing technologies. Data from Massachusetts have not been available since the 2013 discharge year.

2016 Vermont Hospitals Summary of Patients' State of Residence by Hospital Setting

Percent of Total Discharges



Percent of Total Charges

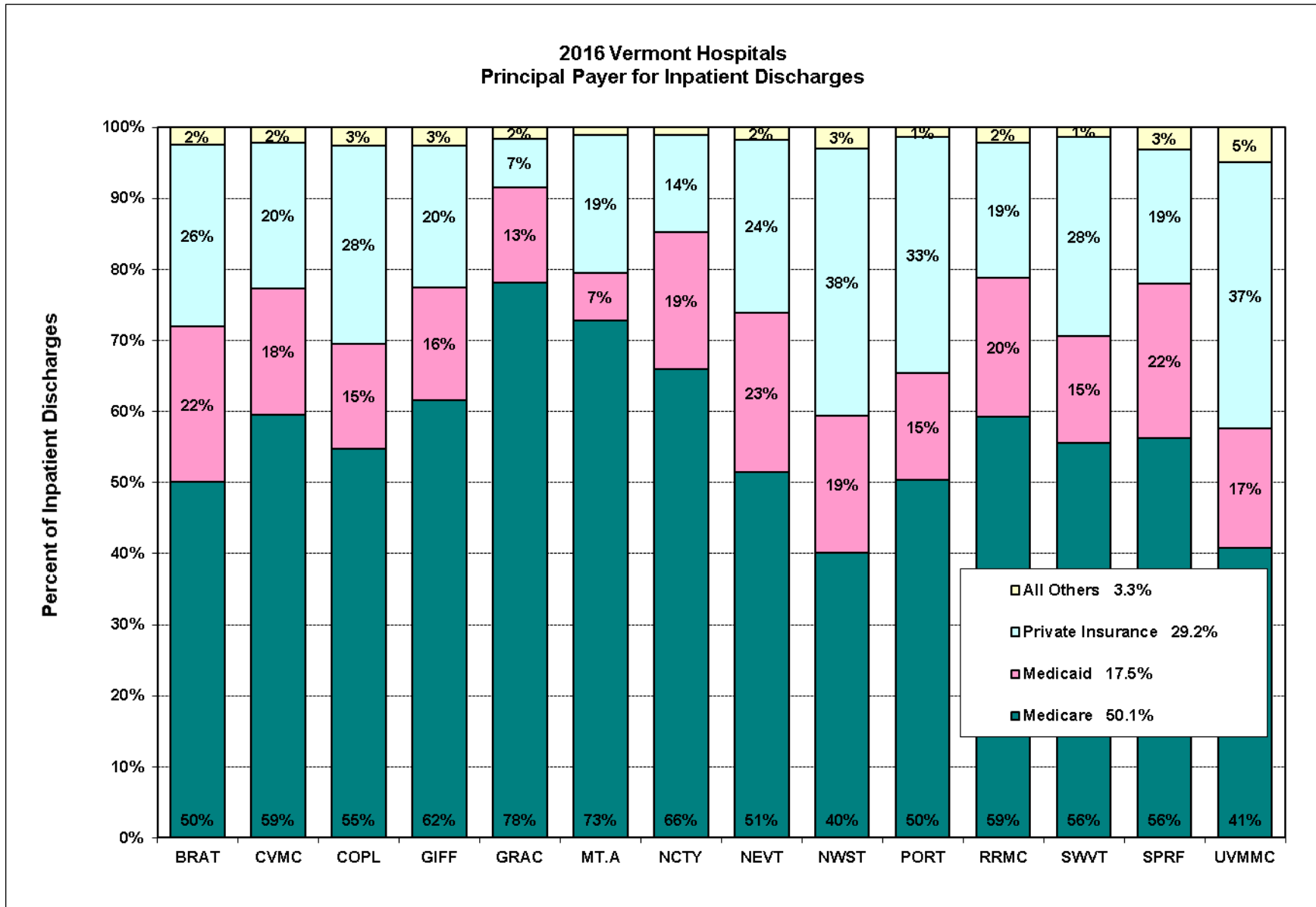


Numbers of discharges exclude newborns. Total charges include charges for newborns.

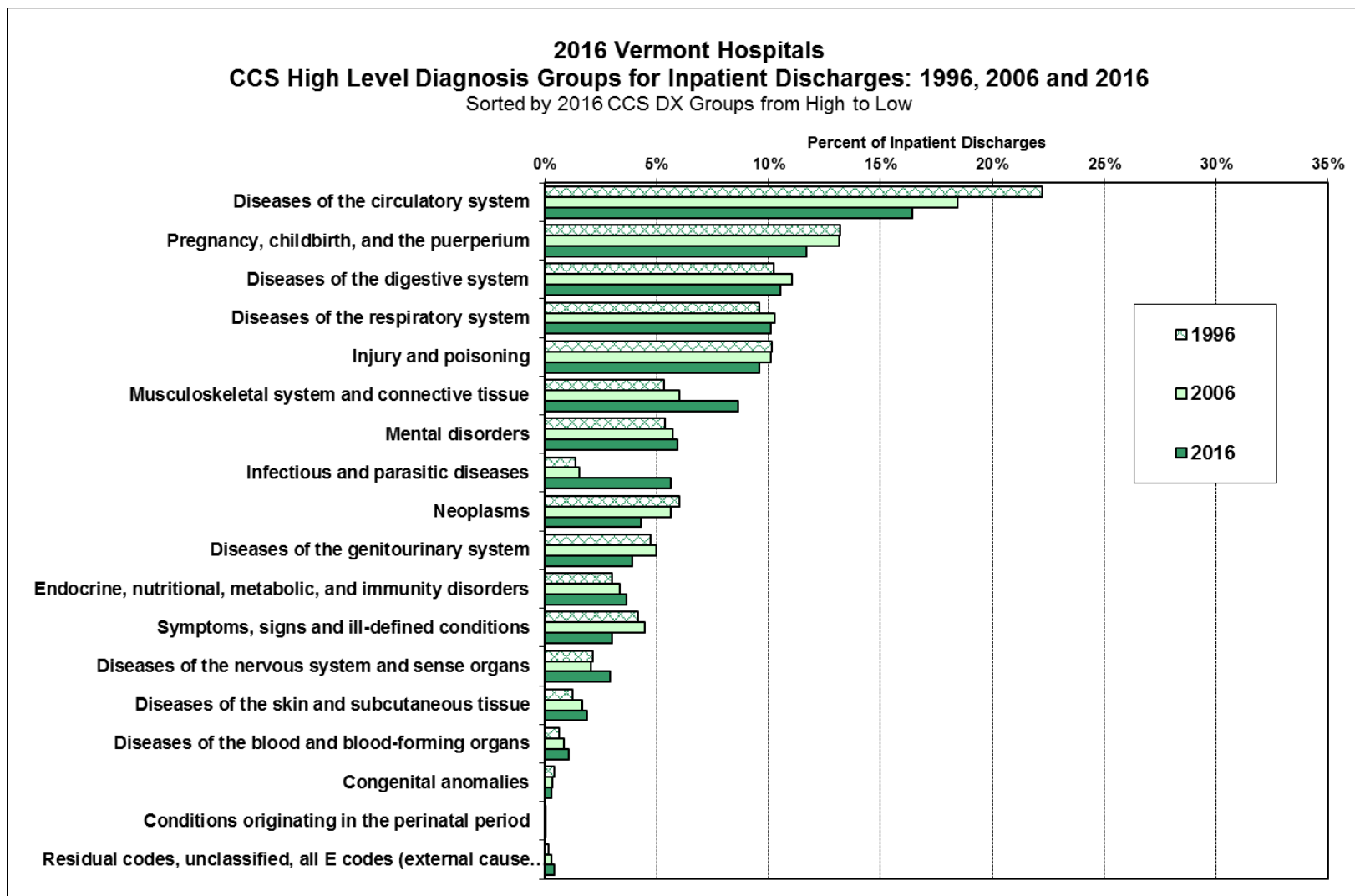
Highlights of Inpatient Discharges from Vermont Hospitals

- **In 2016, there were 48,000 inpatient discharges from Vermont hospitals**, including maternal records but excluding newborns. Of these, 87.0% were Vermont residents, and 13.0% were residents of New Hampshire, Massachusetts, New York or elsewhere.
- **The number of inpatient discharges from Vermont hospitals has declined** 8.3% from 1996, and increased 0.2% from 2006, including both Vermont residents and non-residents. The average length of stay for these discharges declined from 5.0 days per discharge in 1996 to 4.6 in 2006, and to 4.7 in 2016.
- **Similar to findings in recent years**, more than half of the total inpatient discharges from Vermont hospitals in 2016 originated in the Emergency Department (61.1%).
- **The University of Vermont Medical Center** continued to have the highest number of inpatient discharges at 19,420 in 2016 (40.5% of all inpatient discharges, compared to 38.6% in 1996 and 42.4% in 2006). Rutland followed with 6,365 discharges (13.3%). Grace Cottage Hospital and Mt. Ascutney Hospital and Health Center had the lowest total numbers of inpatient discharges (119 and 967 respectively).
- **The University of Vermont Medical Center** continued to have the highest total number of patient days at 110,773 in 2016 (49.0% of 226,106 patient days), followed by Rutland Regional Medical Center with 30,235 (13.4%). Grace Cottage Hospital had the lowest total number of patient days (384).
- **In 2016, average length of stay in Vermont hospitals varied** from 2.6 days per discharge at Copley Hospital to 5.7 days per discharge at The University of Vermont Medical Center.
- **The exception** was Mt. Ascutney Hospital and Health Center, where the average length of stay in 2015 was 9.3, a slight change from 8.8 days per discharge in 2015 and 9.5 days per discharge in 2014 but a continuation of the large increase from 3.9 days per discharge in 2013. The number of inpatient discharges increased from 360 in 2013 to 933 in 2014, to 1,053 in 2015 and 967 in 2016, and the number of patient days increased from 1,391 in 2013 to 8,873 in 2014, to 9,295 in 2015 and 9,033 in 2016. As in 2014 and 2015, where the increases were found primarily in discharges with diagnoses of symptoms, signs and ill-defined conditions and a substantial increase in average length of stay, in 2016 there were 511 discharges in this same diagnosis group with an average of 13.2 patient days per discharge. These increases are 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.

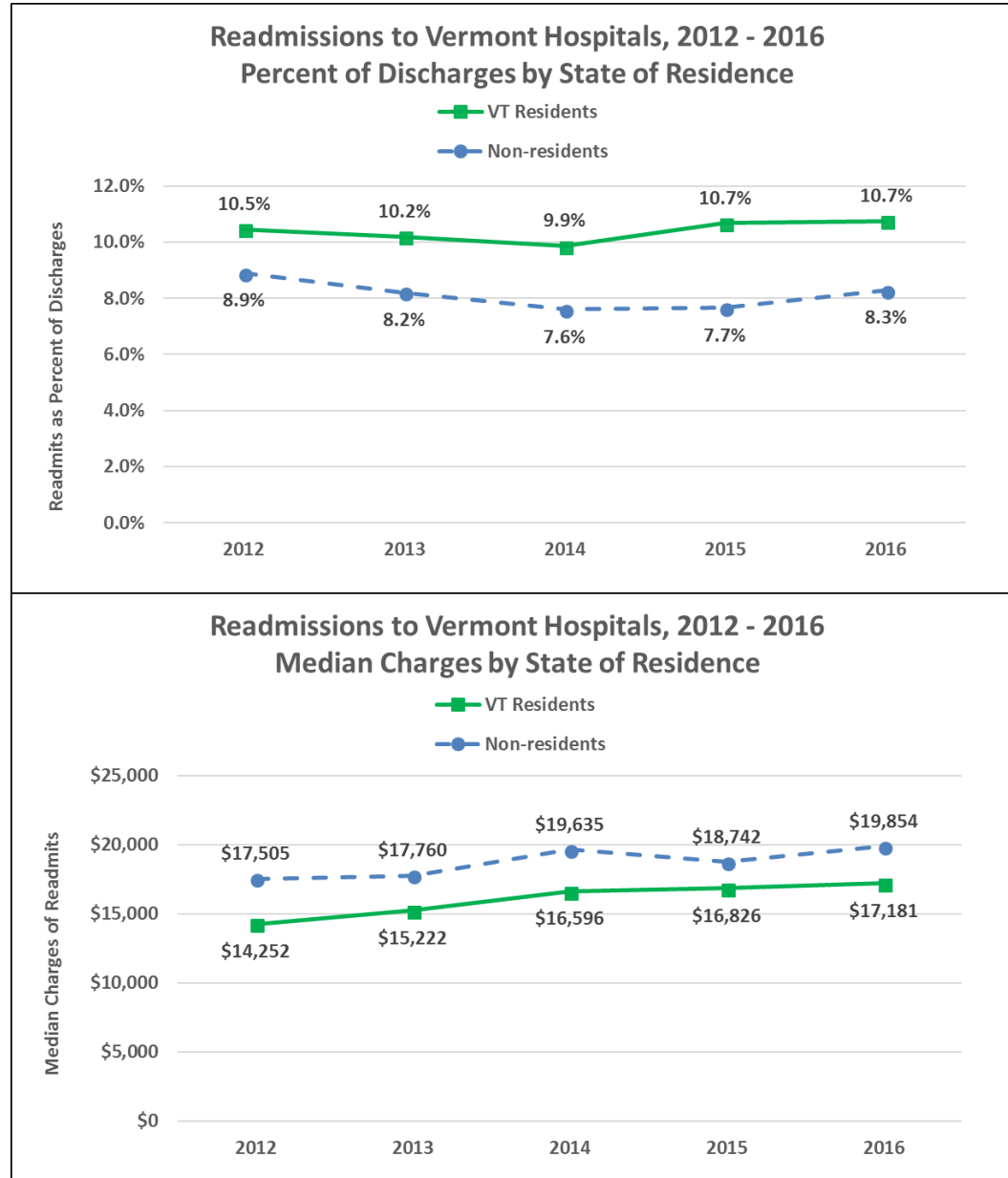
- **In 2016, Medicare continued to be the leading principal payer** for inpatient discharges from Vermont hospitals at 50.1% of total discharges, followed by private insurance at 29.2% and Medicaid at 17.5%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.



- **The most frequent reasons for hospitalization in 2016** were Diseases of the circulatory system; Pregnancy, childbirth and the puerperium; Diseases of the digestive system; Diseases of the respiratory system; and Injury and poisoning, consistent with recent years. Of note are the continued decrease in percent of inpatient discharges hospitalized with diagnoses for Diseases of the circulatory system, and the substantial increases in the percent of diagnoses with Musculoskeletal system and connective tissue, and with Infectious and parasitic diseases.



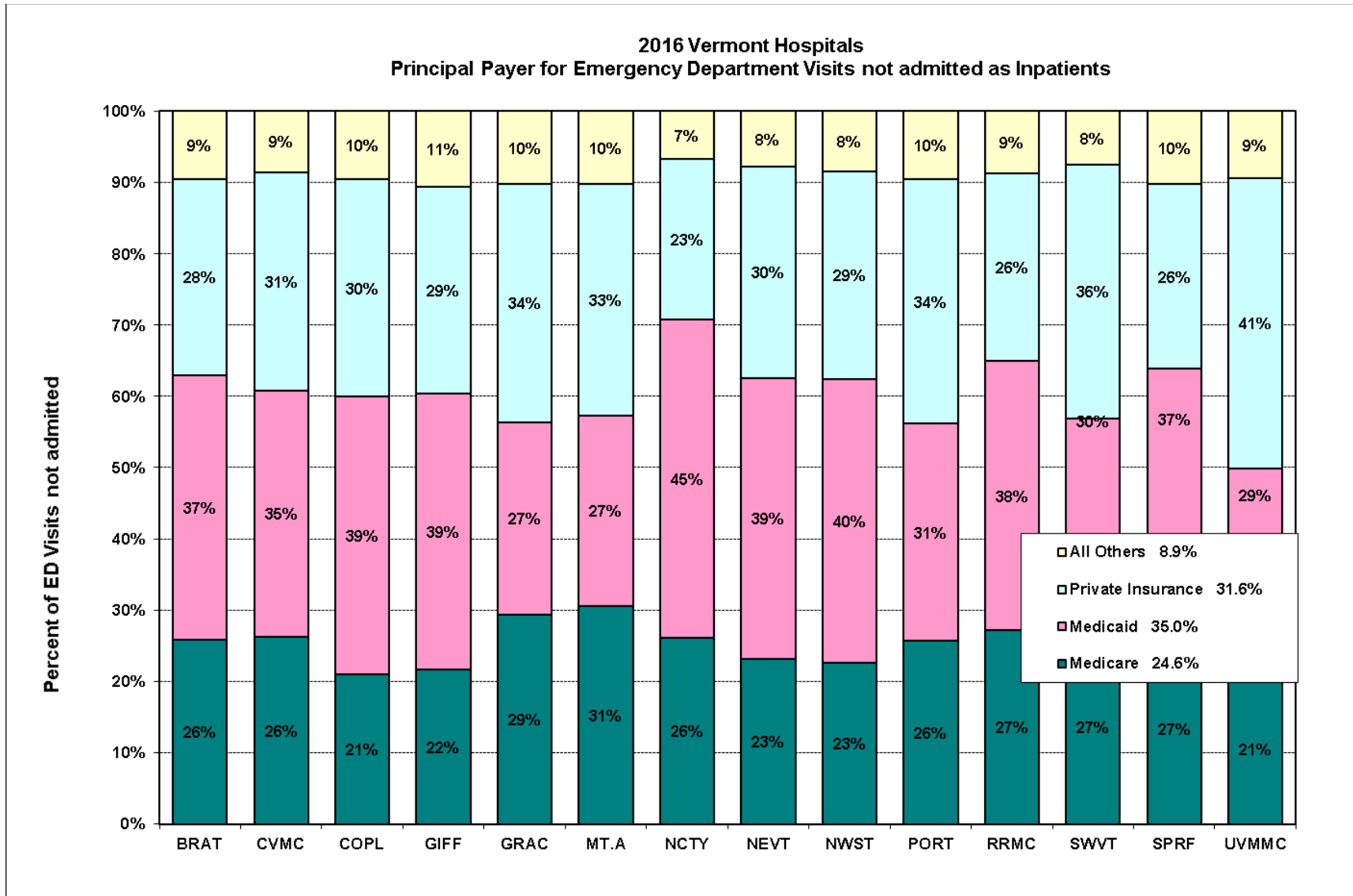
- **The percent of inpatients readmitted to the same hospital for any reason within 30 days of discharge** differs by the patient’s state of residence, with Vermont residents readmitted more frequently than out-of-state residents each year from 2012 through 2016. In contrast, out-of-state residents have higher median charges than Vermont residents have when readmitted to Vermont hospitals.



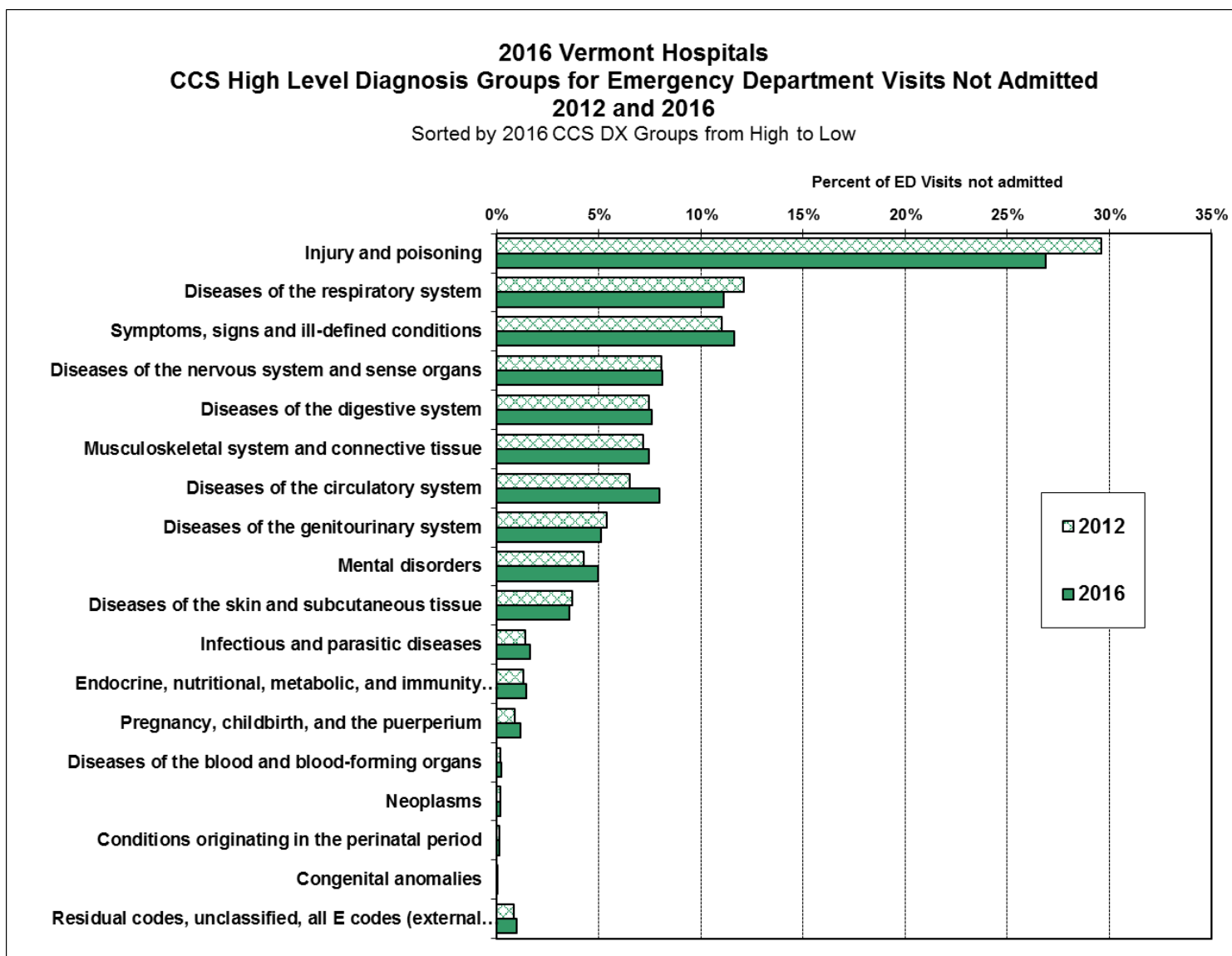
Highlights of Visits to Vermont Hospital Emergency Departments

- **In 2016, there were a total of 265,811 visits to Vermont hospital Emergency Departments**, including both Vermont residents and non-residents, a small decrease from 2015. Similar to recent years, 89.0% (236,466) of these ED visits were not admitted, while the remaining 11.0% (29,345) of ED visits were admitted and categorized as inpatient discharges.
- **Overall, the number of ED visits decreased** from 2012 to 2016 by -3.3% overall (-5.3% for ED visits not admitted, and an increase of 17.5% for those admitted as inpatients).
- **In 2016, 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 3.9% of visits by individuals age 15-44, 12.5% of those aged 45-64, 20.4% of those aged 65-69, 23.7% of those aged 70-74, 26.4% of those aged 75-79, and 32.6% of those aged 80 and older.
- **The University of Vermont Medical Center** continued to have the highest percent of visits to the ED in 2016, leading all Vermont hospitals with 21.3% of all ED visits. Of all ED visits to The University of Vermont Medical Center, 16.7% were admitted as inpatients, consistent with previous years.
- **The percent of ED visits that were admitted in 2016** ranged from highs of 16.7% at The University of Vermont Medical Center, 14.2% at Rutland Regional Medical Center, and 13.8% at Central Vermont Medical Center, to a low of 3.5% at Grace Cottage Hospital.
- **Of all ED visits, those with a primary diagnosis of neoplasms were the most likely to be admitted (64.7%),** followed by those with diseases of the blood and blood-forming organs (44.5%), those with infectious and parasitic diseases (39.0%) and those with congenital anomalies (38.3%). Least likely to be admitted were ED visits for Conditions originating in the perinatal period (0.8%) and for Symptoms, signs and ill-defined conditions (2.2%).

In 2016, Medicaid was the leading principal payer for ED visits not admitted at 35.0% of these visits, followed by private insurance at 31.6% and Medicare at 24.6%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.



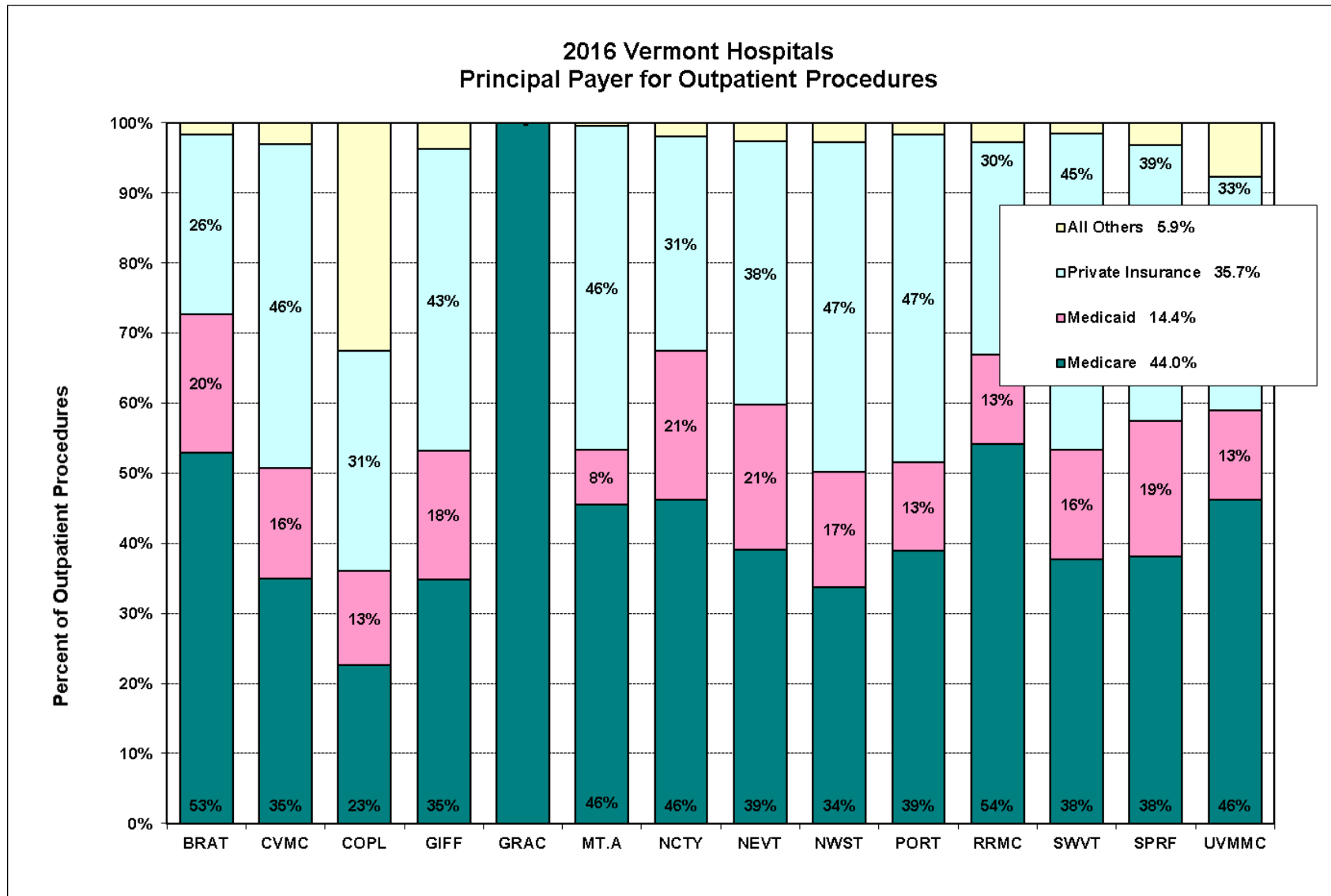
- **The most frequent reasons for ED visits not admitted in 2016** were Injury and poisoning; Diseases of the respiratory system; Symptoms, signs and ill-defined conditions; Diseases of the nervous system and sense organs; Diseases of the digestive system; and Musculoskeletal system & connective tissue, consistent with recent years. Of note is the substantial decrease in percent of ED visits not admitted for Injury and poisoning, and increases in Diseases of the circulatory system and Mental disorders.



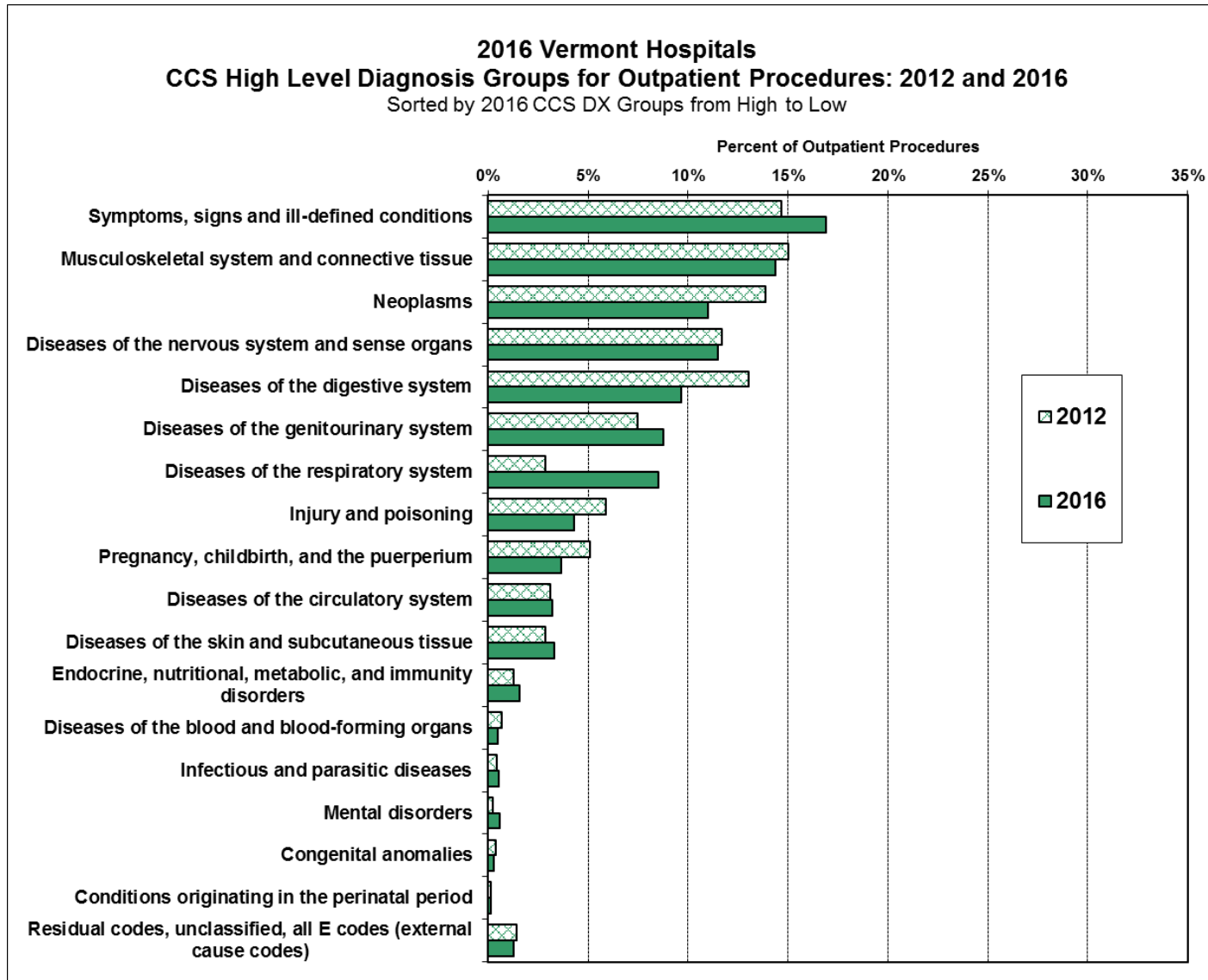
Highlights of Outpatient Procedures and Services in Vermont Hospitals

- **In 2016, there were 132,695 visits to Vermont hospitals for outpatient procedures** with a high-level procedure code in CCS procedure groups 1 through 15, representing both Vermont residents and non-residents. These outpatient visits did not originate in the Emergency Department. Grace Cottage Hospital had two visits for outpatient procedures in this range of CCS procedure groups.
- **The number of outpatient procedures in Vermont hospitals increased** by 3.3% from 2015 after a slight decrease of -1.9% from 2014 to 2015. 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 9.7% of all visits to Vermont hospitals for outpatient procedures** in 2016. As in previous years, there was wide variation in the percent of non-residents at Vermont hospitals, with non-residents comprising 40.8% of Mt. Ascutney Hospital and Health Center's outpatient visits and 24.2% of Southwestern Vermont Medical Center's outpatient visits, compared to less than 1% of outpatient visits to Central Vermont Medical Center, Copley Hospital, North Country Hospital and Northwestern Medical Center.
- **Medicare was the primary payer** for 44.0% of all visits to Vermont hospitals for outpatient procedures in 2016. Rutland Regional Medical Center reported 54.2 % of outpatient visits with Medicare as the primary payer, and Brattleboro Memorial Hospital reported 52.9%, while Copley reported the lowest percent with 22.6%. Consistent with recent years, there was substantial variation by CCS diagnosis group, with Diseases of the skin and subcutaneous tissue (69.0%) and Diseases of the nervous system and sense organs (64.4%) having the highest percent of visits with Medicare as the primary payer.
- **Mt. Ascutney Hospital and Health Center reported the lowest percent of outpatient procedures with Medicaid** as primary payer (7.8%), while North Country Hospital and Brattleboro Memorial Hospital reported the highest percent with Medicaid as primary payer (21.3% and 20.7% respectively).
- **The services most frequently provided in expanded outpatient visits** in 2016 were charged under the primary cost center for Laboratory-Clinical services in all 14 Vermont hospitals. The frequency of these services far exceeded the next most frequent services, which were charged under the primary cost centers for Radiology-Diagnostic, Drugs Charged to Patients, Mammography, Chemistry, Ultrasound, Physical Therapy, Laboratory-Pathological, Hematology, and Magnetic Resonance Imaging (MRI).
- **The average charge for observation beds in Vermont hospitals** was 38.6% higher in 2016 than it was in 2012, while the number of these beds has fluctuated somewhat over time but changed very little since 2012 (1.6%). The University of Vermont Medical Center had 32.3% of all observation beds in 2016, followed by Rutland Regional Medical Center (10.5%), and Brattleboro Memorial Hospital (9.4%). The same hospitals consistently have the highest percents of observation beds, but the rank order may change from one year to another.

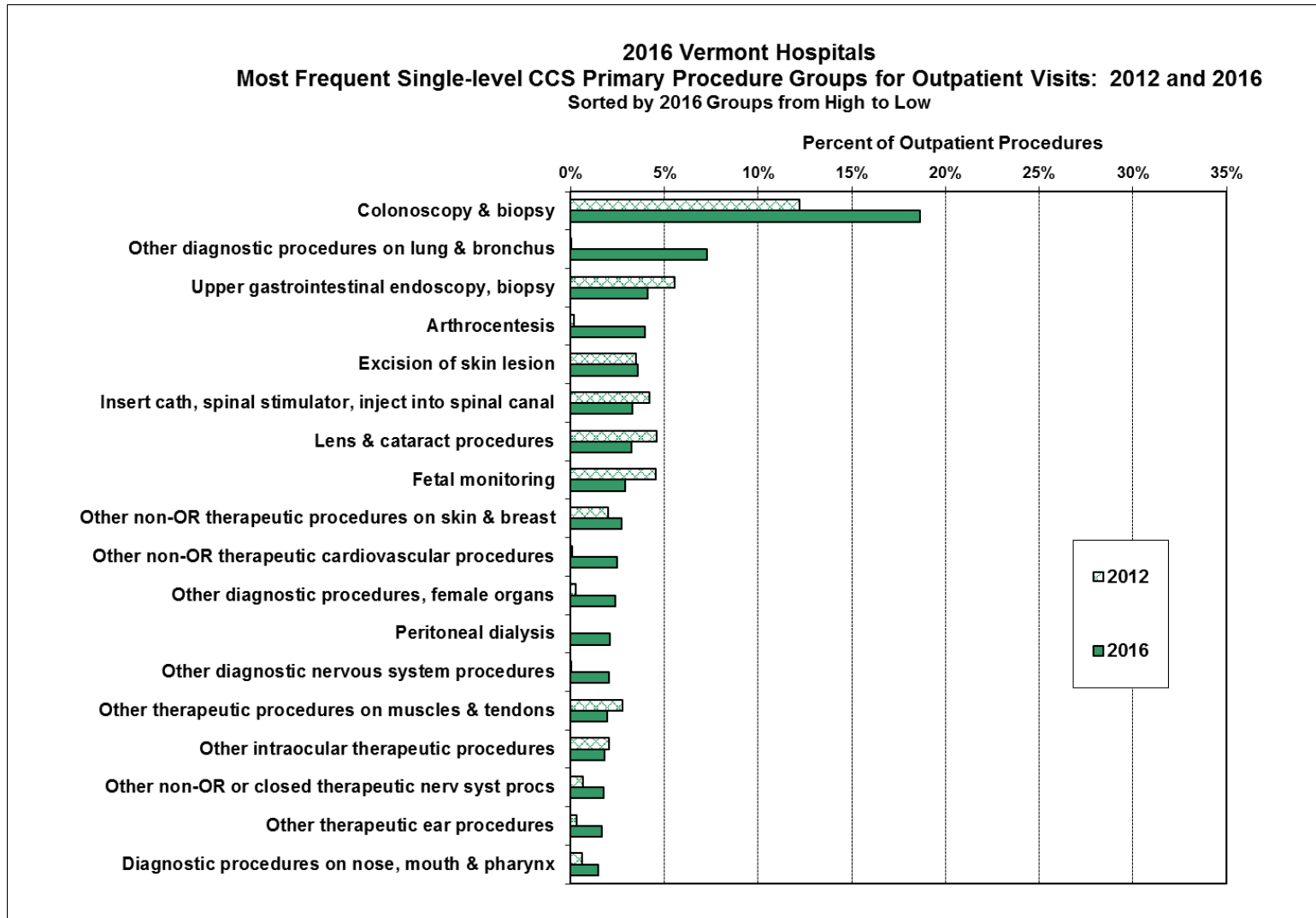
- **In 2016, Medicare was the leading principal payer** for 44.0% of outpatient procedures in range, followed by private insurance at 35.7% and Medicaid at 14.4%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix. (Grace Cottage Hospital had only two outpatients.)



- The most frequent reasons for outpatient procedures in range** in 2016 were Symptoms, signs and ill-defined conditions; Musculoskeletal system and connective tissue; Neoplasms; Diseases of the nervous system and sense organs; and Diseases of the digestive system. The most frequent reasons in 2016 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, and Diseases of the respiratory system compared to 2012.

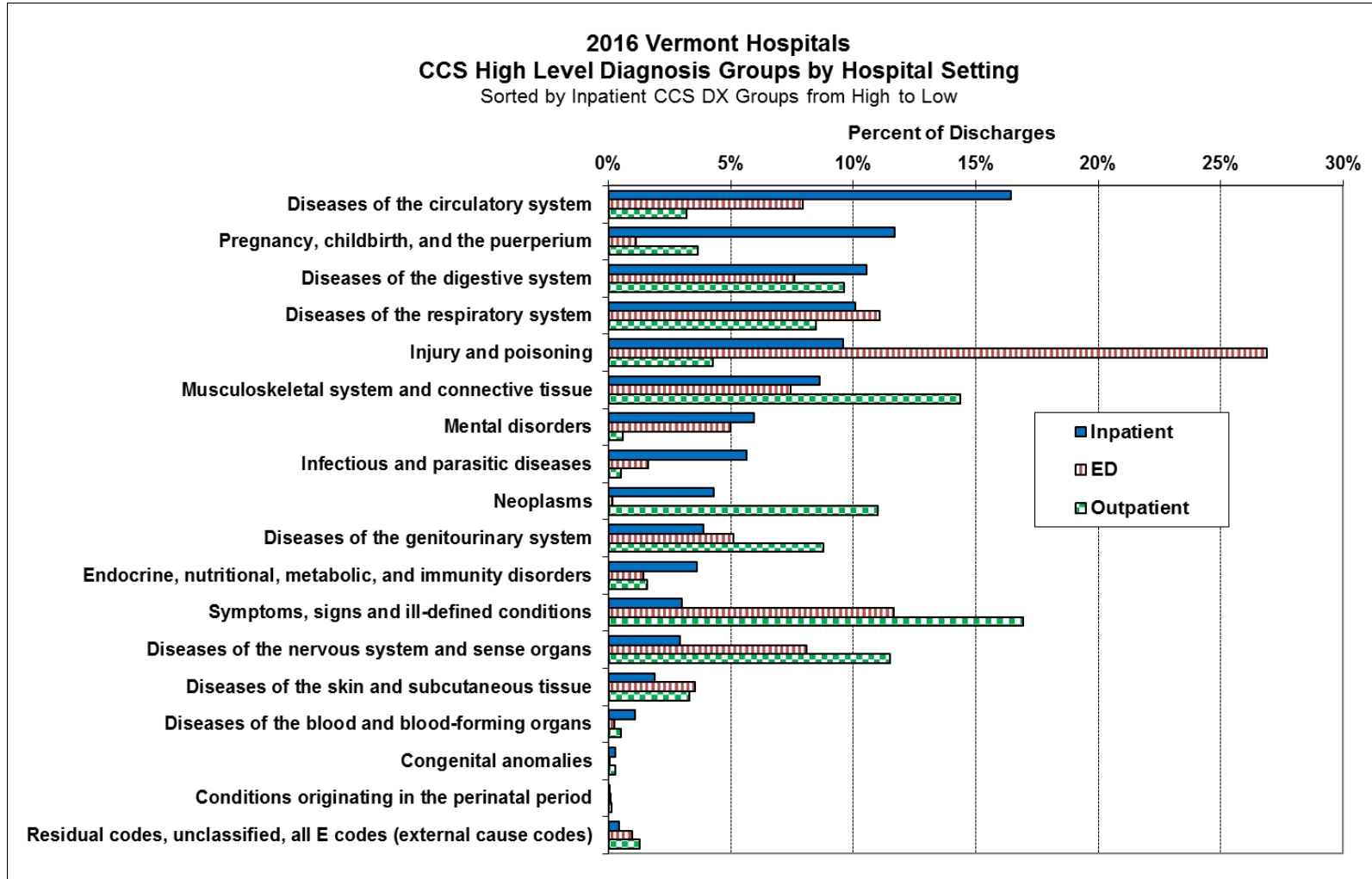


- **The leading single-level group of outpatient procedures in high-level CCS procedure groups 1 through 15 in both 2012 and 2016 was Colonoscopy & biopsy.** Following this procedure group in 2016 were Other diagnostic procedures on lung & bronchus, and Upper gastrointestinal endoscopy, biopsy. These most frequent procedure groups in 2016 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.

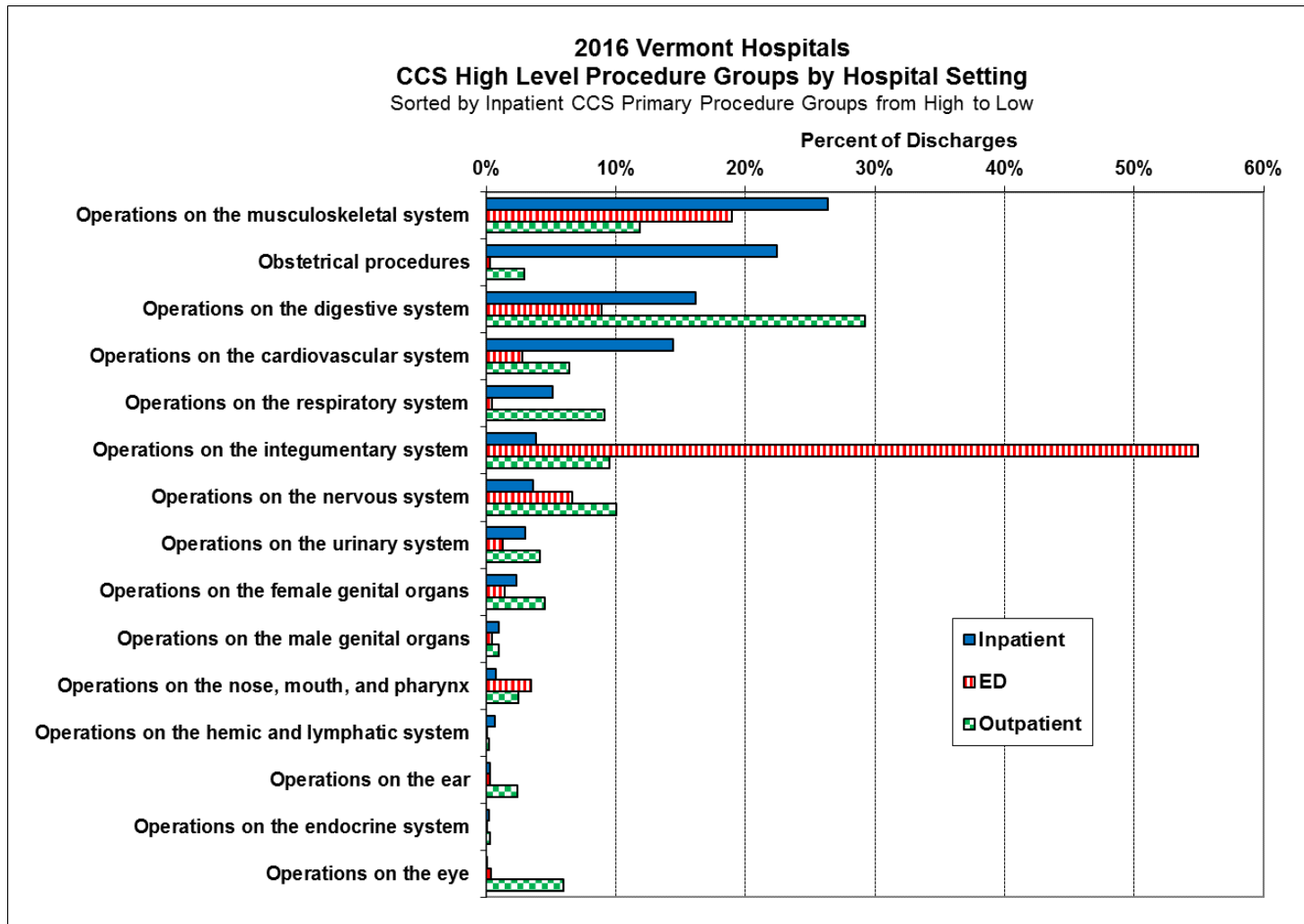


Highlights of Comparisons across Vermont Hospital Settings

- The most frequent CCS high level diagnosis groups differed across Vermont hospital settings in 2016.** 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 2016.** The most frequent procedure group for inpatients was Operations on the musculoskeletal system, followed by Obstetrical procedures. The most frequent procedure group for ED visits was Operations on the integumentary system, followed by Operations on the musculoskeletal system, 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
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Vermont Hospitals by Setting

Vermont Hospital	Inpatient Discharges NOT Originating in ED		Inpatient Discharges Originating in ED		All Inpatient Discharges	
	N	Row %	N	Row %	N	Col %
Brattleboro Memorial Hospital	676	42.1%	930	57.9%	1,606	3.3%
Central Vermont Medical Center	723	17.2%	3,478	82.8%	4,201	8.8%
Copley Hospital	798	45.3%	962	54.7%	1,760	3.7%
Gifford Medical Center	487	33.4%	970	66.6%	1,457	3.0%
Grace Cottage Hospital	18	15.1%	101	84.9%	119	0.2%
Mt. Ascutney Hospital and Health Center	723	74.8%	244	25.2%	967	2.0%
North Country Hospital	568	35.5%	1,032	64.5%	1,600	3.3%
Northeastern Vermont Regional Hospital	459	33.3%	918	66.7%	1,377	2.9%
Northwestern Medical Center	831	31.9%	1,776	68.1%	2,607	5.4%
Porter Medical Center	599	42.7%	803	57.3%	1,402	2.9%
Rutland Regional Medical Center	1,615	25.4%	4,750	74.6%	6,365	13.3%
Southwestern Vermont Medical Center	733	22.1%	2,586	77.9%	3,319	6.9%
Springfield Hospital	476	26.4%	1,324	73.6%	1,800	3.8%
University of Vermont Medical Center	9,949	51.2%	9,471	48.8%	19,420	40.5%
Total	18,655	38.9%	29,345	61.1%	48,000	100.0%

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

Table I-2
2016 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>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Brattleboro Memorial Hospital	2,629	2,139	1,606	11,684	8,451	5,287	4.4	4.0	3.3
Central Vermont Medical Center	4,096	3,201	4,201	20,275	14,253	18,525	4.9	4.5	4.4
Copley Hospital	1,558	1,129	1,760	5,828	4,160	4,549	3.7	3.7	2.6
Gifford Medical Center	1,115	967	1,457	4,044	3,007	5,780	3.6	3.1	4.0
Grace Cottage Hospital	233	185	119	707	581	384	3.0	3.1	3.2
Mt. Ascutney Hospital and Health Center	554	426	967	2,573	1,497	9,033	4.6	3.5	9.3
North Country Hospital	1,809	1,452	1,600	5,529	4,852	5,474	3.1	3.3	3.4
Northeastern Vermont Regional Hospital	1,682	1,389	1,377	6,001	4,150	4,296	3.6	3.0	3.1
Northwestern Medical Center	2,638	1,996	2,607	11,083	7,303	7,895	4.2	3.7	3.0
Porter Medical Center	1,435	1,373	1,402	6,287	4,409	4,746	4.4	3.2	3.4
Rutland Regional Medical Center	6,939	6,437	6,365	37,378	31,307	30,235	5.4	4.9	4.8
Southwestern Vermont Medical Center	5,052	4,678	3,319	20,940	16,200	11,091	4.1	3.5	3.3
Springfield Hospital	2,437	2,300	1,800	10,501	9,527	8,038	4.3	4.1	4.5
University of Vermont Medical Center	20,194	20,405	19,420	118,423	109,503	110,773	5.9	5.4	5.7
Total	52,371	48,077	48,000	261,253	219,200	226,106	5.0	4.6	4.7

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
All Vermont Hospitals									
Infectious & parasitic diseases	725	750	2,703	4,416	5,868	16,755	6.1	7.8	6.2
Neoplasms	3,159	2,707	2,061	18,771	15,165	11,351	5.9	5.6	5.5
Endocrine, nutritional, metabolic, immunity	1,568	1,627	1,741	8,869	7,830	8,211	5.7	4.8	4.7
Diseases of the blood & blood-forming organs	342	406	517	1,649	1,679	2,166	4.8	4.1	4.2
Mental disorders	2,805	2,959	2,851	21,809	21,753	27,519	7.8	7.4	9.7
Diseases of the nervous system and sense organs	1,112	995	1,405	4,911	4,080	6,674	4.4	4.1	4.8
Diseases of the circulatory system	11,648	8,865	7,894	58,221	34,959	33,340	5.0	3.9	4.2
Diseases of the respiratory system	5,029	4,944	4,848	28,424	23,231	20,256	5.7	4.7	4.2
Diseases of the digestive system	5,349	5,235	5,054	25,548	23,544	21,077	4.8	4.5	4.2
Diseases of the genitourinary system	2,476	2,400	1,865	9,116	8,253	7,124	3.7	3.4	3.8
Pregnancy, childbirth, and the puerperium	6,921	6,254	5,611	14,716	15,553	14,763	2.1	2.5	2.6
Diseases of the skin and subcutaneous tissue	644	805	909	3,757	4,179	4,168	5.8	5.2	4.6
Musculoskeletal system and connective tissue	2,779	2,897	4,143	11,841	11,192	12,950	4.3	3.9	3.1
Congenital anomalies	229	157	136	1,113	549	630	4.9	3.5	4.6
Conditions originating in the perinatal period	1	1	10	1	4	68	1.0	4.0	6.8
Injury & poisoning	5,304	4,780	4,609	27,836	23,343	27,239	5.2	4.9	5.9
Symptoms, signs & ill-defined conditions	2,184	2,151	1,438	19,835	17,561	11,078	9.1	8.2	7.7
Residual codes, unclassified, all Ecodes	96	144	205	420	457	737	4.4	3.2	3.6
Total	52,371	48,077	48,000	261,253	219,200	226,106	5.0	4.6	4.7

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Brattleboro Memorial Hospital									
Infectious & parasitic diseases	29	26	87	136	162	370	4.7	6.2	4.3
Neoplasms	166	100	47	1,034	598	193	6.2	6.0	4.1
Endocrine, nutritional, metabolic, immunity	80	79	66	422	361	225	5.3	4.6	3.4
Diseases of the blood & blood-forming organs	15	17	20	67	67	56	4.5	3.9	2.8
Mental disorders	41	47	34	230	240	143	5.6	5.1	4.2
Diseases of the nervous system and sense organs	57	37	17	257	139	75	4.5	3.8	4.4
Diseases of the circulatory system	459	330	174	2,139	1,191	551	4.7	3.6	3.2
Diseases of the respiratory system	235	252	197	1,562	1,231	705	6.6	4.9	3.6
Diseases of the digestive system	397	285	203	1,616	1,263	780	4.1	4.4	3.8
Diseases of the genitourinary system	139	111	60	522	335	181	3.8	3.0	3.0
Pregnancy, childbirth, and the puerperium	395	368	304	868	940	677	2.2	2.6	2.2
Diseases of the skin and subcutaneous tissue	24	38	44	103	174	200	4.3	4.6	4.5
Musculoskeletal system and connective tissue	200	171	206	905	717	619	4.5	4.2	3.0
Congenital anomalies	7	1	-	24	3	-	3.4	3.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	331	235	122	1,558	902	412	4.7	3.8	3.4
Symptoms, signs & ill-defined conditions	50	36	18	233	112	70	4.7	3.1	3.9
Residual codes, unclassified, all Ecodes	4	6	7	8	16	30	2.0	2.7	4.3
Total	2,629	2,139	1,606	11,684	8,451	5,287	4.4	4.0	3.3

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
Central Vermont Medical Center									
Infectious & parasitic diseases	56	35	382	301	228	2,041	5.4	6.5	5.3
Neoplasms	244	122	71	1,405	589	368	5.8	4.8	5.2
Endocrine, nutritional, metabolic, immunity	116	100	133	624	427	449	5.4	4.3	3.4
Diseases of the blood & blood-forming organs	21	28	36	138	135	118	6.6	4.8	3.3
Mental disorders	502	585	497	4,719	4,109	4,453	9.4	7.0	9.0
Diseases of the nervous system and sense organs	76	47	120	499	194	485	6.6	4.1	4.0
Diseases of the circulatory system	726	399	717	2,836	1,503	2,251	3.9	3.8	3.1
Diseases of the respiratory system	431	413	530	2,362	1,910	2,179	5.5	4.6	4.1
Diseases of the digestive system	479	373	485	2,149	1,709	1,859	4.5	4.6	3.8
Diseases of the genitourinary system	272	148	164	999	442	586	3.7	3.0	3.6
Pregnancy, childbirth, and the puerperium	551	395	322	1,186	858	795	2.2	2.2	2.5
Diseases of the skin and subcutaneous tissue	38	58	118	281	300	540	7.4	5.2	4.6
Musculoskeletal system and connective tissue	146	166	267	795	560	1,078	5.4	3.4	4.0
Congenital anomalies	5	2	2	18	3	4	3.6	1.5	2.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	331	273	278	1,571	1,140	1,114	4.7	4.2	4.0
Symptoms, signs & ill-defined conditions	95	54	61	325	140	168	3.4	2.6	2.8
Residual codes, unclassified, all Ecodes	7	3	18	67	6	37	9.6	2.0	2.1
Total	4,096	3,201	4,201	20,275	14,253	18,525	4.9	4.5	4.4

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Copley Hospital									
Infectious & parasitic diseases	12	13	21	79	82	73	6.6	6.3	3.5
Neoplasms	57	38	26	199	142	109	3.5	3.7	4.2
Endocrine, nutritional, metabolic, immunity	40	24	40	198	102	117	5.0	4.3	2.9
Diseases of the blood & blood-forming organs	10	5	11	35	15	28	3.5	3.0	2.5
Mental disorders	38	16	54	122	39	151	3.2	2.4	2.8
Diseases of the nervous system and sense organs	27	9	34	90	30	82	3.3	3.3	2.4
Diseases of the circulatory system	321	91	166	1,245	379	399	3.9	4.2	2.4
Diseases of the respiratory system	183	119	197	963	592	680	5.3	5.0	3.5
Diseases of the digestive system	216	140	205	922	582	592	4.3	4.2	2.9
Diseases of the genitourinary system	65	63	87	219	263	196	3.4	4.2	2.3
Pregnancy, childbirth, and the puerperium	239	323	207	431	676	378	1.8	2.1	1.8
Diseases of the skin and subcutaneous tissue	28	26	42	119	104	150	4.3	4.0	3.6
Musculoskeletal system and connective tissue	70	120	437	337	488	881	4.8	4.1	2.0
Congenital anomalies	1	1	-	1	1	-	1.0	1.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	199	119	157	699	587	553	3.5	4.9	3.5
Symptoms, signs & ill-defined conditions	50	19	50	144	67	118	2.9	3.5	2.4
Residual codes, unclassified, all Ecodes	2	3	26	25	11	42	12.5	3.7	1.6
Total	1,558	1,129	1,760	5,828	4,160	4,549	3.7	3.7	2.6

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Gifford Medical Center									
Infectious & parasitic diseases	26	24	17	127	92	65	4.9	3.8	3.8
Neoplasms	45	29	28	199	124	179	4.4	4.3	6.4
Endocrine, nutritional, metabolic, immunity	57	46	67	257	138	281	4.5	3.0	4.2
Diseases of the blood & blood-forming organs	5	9	25	29	36	99	5.8	4.0	4.0
Mental disorders	4	16	70	8	55	296	2.0	3.4	4.2
Diseases of the nervous system and sense organs	16	16	49	68	42	154	4.3	2.6	3.1
Diseases of the circulatory system	213	119	252	828	353	994	3.9	3.0	3.9
Diseases of the respiratory system	155	113	191	751	441	777	4.8	3.9	4.1
Diseases of the digestive system	126	96	170	528	353	777	4.2	3.7	4.6
Diseases of the genitourinary system	58	63	94	160	186	390	2.8	3.0	4.1
Pregnancy, childbirth, and the puerperium	278	260	204	519	603	542	1.9	2.3	2.7
Diseases of the skin and subcutaneous tissue	17	25	46	80	79	249	4.7	3.2	5.4
Musculoskeletal system and connective tissue	30	49	81	120	164	283	4.0	3.3	3.5
Congenital anomalies	2	1	1	4	5	4	2.0	5.0	4.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	73	69	97	332	248	478	4.5	3.6	4.9
Symptoms, signs & ill-defined conditions	10	26	53	34	65	180	3.4	2.5	3.4
Residual codes, unclassified, all Ecodes	-	6	12	-	23	32	-	3.8	2.7
Total	1,115	967	1,457	4,044	3,007	5,780	3.6	3.1	4.0

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Grace Cottage Hospital									
Infectious & parasitic diseases	4	2	2	12	6	7	3.0	3.0	3.5
Neoplasms	11	9	4	44	23	12	4.0	2.6	3.0
Endocrine, nutritional, metabolic, immunity	9	18	7	28	60	21	3.1	3.3	3.0
Diseases of the blood & blood-forming organs	1	1	2	4	4	10	4.0	4.0	5.0
Mental disorders	15	7	1	44	26	2	2.9	3.7	2.0
Diseases of the nervous system and sense organs	2	6	7	8	14	20	4.0	2.3	2.9
Diseases of the circulatory system	53	31	23	170	92	62	3.2	3.0	2.7
Diseases of the respiratory system	51	48	27	154	162	78	3.0	3.4	2.9
Diseases of the digestive system	17	10	11	54	26	21	3.2	2.6	1.9
Diseases of the genitourinary system	16	13	14	55	34	38	3.4	2.6	2.7
Pregnancy, childbirth, and the puerperium	28	1	-	46	2	-	1.6	2.0	-
Diseases of the skin and subcutaneous tissue	9	10	4	30	35	14	3.3	3.5	3.5
Musculoskeletal system and connective tissue	4	11	2	14	41	6	3.5	3.7	3.0
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	9	11	9	32	31	25	3.6	2.8	2.8
Symptoms, signs & ill-defined conditions	4	6	5	12	19	63	3.0	3.2	12.6
Residual codes, unclassified, all Ecodes	-	1	1	-	6	5	-	6.0	5.0
Total	233	185	119	707	581	384	3.0	3.1	3.2

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
Mt. Ascutney Hospital and Health Center									
Infectious & parasitic diseases	8	3	8	88	17	40	11.0	5.7	5.0
Neoplasms	29	14	28	151	82	135	5.2	5.9	4.8
Endocrine, nutritional, metabolic, immunity	11	15	16	55	39	53	5.0	2.6	3.3
Diseases of the blood & blood-forming organs	5	3	9	25	6	29	5.0	2.0	3.2
Mental disorders	10	11	5	48	33	28	4.8	3.0	5.6
Diseases of the nervous system and sense organs	10	8	8	42	21	39	4.2	2.6	4.9
Diseases of the circulatory system	141	89	73	571	281	246	4.0	3.2	3.4
Diseases of the respiratory system	92	65	74	466	233	251	5.1	3.6	3.4
Diseases of the digestive system	72	62	81	383	239	339	5.3	3.9	4.2
Diseases of the genitourinary system	41	28	25	122	90	100	3.0	3.2	4.0
Pregnancy, childbirth, and the puerperium	-	1	-	-	1	-	-	1.0	-
Diseases of the skin and subcutaneous tissue	9	9	17	69	34	57	7.7	3.8	3.4
Musculoskeletal system and connective tissue	33	56	10	152	217	55	4.6	3.9	5.5
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	78	38	98	324	142	894	4.2	3.7	9.1
Symptoms, signs & ill-defined conditions	14	24	511	75	62	6,755	5.4	2.6	13.2
Residual codes, unclassified, all Ecodes	1	-	4	2	-	12	2.0	-	3.0
Total	554	426	967	2,573	1,497	9,033	4.6	3.5	9.3

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
North Country Hospital									
Infectious & parasitic diseases	28	50	35	124	163	148	4.4	3.3	4.2
Neoplasms	87	67	27	346	326	117	4.0	4.9	4.3
Endocrine, nutritional, metabolic, immunity	78	56	86	246	201	302	3.2	3.6	3.5
Diseases of the blood & blood-forming organs	12	10	28	46	33	78	3.8	3.3	2.8
Mental disorders	53	29	35	136	81	125	2.6	2.8	3.6
Diseases of the nervous system and sense organs	45	33	46	116	88	155	2.6	2.7	3.4
Diseases of the circulatory system	487	281	276	1,380	781	831	2.8	2.8	3.0
Diseases of the respiratory system	273	237	273	970	914	985	3.6	3.9	3.6
Diseases of the digestive system	198	189	228	689	817	872	3.5	4.3	3.8
Diseases of the genitourinary system	89	61	102	241	184	375	2.7	3.0	3.7
Pregnancy, childbirth, and the puerperium	218	230	207	440	544	481	2.0	2.4	2.3
Diseases of the skin and subcutaneous tissue	23	27	37	78	105	149	3.4	3.9	4.0
Musculoskeletal system and connective tissue	56	39	76	245	160	283	4.4	4.1	3.7
Congenital anomalies	-	1	1	-	2	5	-	2.0	5.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	107	101	95	345	363	418	3.2	3.6	4.4
Symptoms, signs & ill-defined conditions	54	39	32	124	86	87	2.3	2.2	2.7
Residual codes, unclassified, all Ecodes	1	2	16	3	4	63	3.0	2.0	3.9
Total	1,809	1,452	1,600	5,529	4,852	5,474	3.1	3.3	3.4

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Northeastern Vermont Regional Hospital									
Infectious & parasitic diseases	43	28	35	173	101	118	4.0	3.6	3.4
Neoplasms	52	50	18	213	191	67	4.1	3.8	3.7
Endocrine, nutritional, metabolic, immunity	37	47	36	206	174	101	5.6	3.7	2.8
Diseases of the blood & blood-forming organs	8	11	15	37	29	40	4.6	2.6	2.7
Mental disorders	41	26	64	115	93	239	2.8	3.6	3.7
Diseases of the nervous system and sense organs	27	21	31	76	37	103	2.8	1.8	3.3
Diseases of the circulatory system	319	177	189	1,039	603	621	3.3	3.4	3.3
Diseases of the respiratory system	236	194	156	821	551	493	3.5	2.8	3.2
Diseases of the digestive system	219	206	151	937	602	519	4.3	2.9	3.4
Diseases of the genitourinary system	74	88	77	255	252	240	3.4	2.9	3.1
Pregnancy, childbirth, and the puerperium	256	248	226	591	502	490	2.3	2.0	2.2
Diseases of the skin and subcutaneous tissue	40	26	44	122	123	172	3.1	4.7	3.9
Musculoskeletal system and connective tissue	99	89	133	551	364	407	5.6	4.1	3.1
Congenital anomalies	1	2	-	3	4	-	3.0	2.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	182	127	136	737	404	484	4.0	3.2	3.6
Symptoms, signs & ill-defined conditions	46	45	49	121	111	126	2.6	2.5	2.6
Residual codes, unclassified, all Ecodes	2	4	17	4	9	76	2.0	2.3	4.5
Total	1,682	1,389	1,377	6,001	4,150	4,296	3.6	3.0	3.1

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
Northwestern Medical Center									
Infectious & parasitic diseases	41	26	116	150	146	385	3.7	5.6	3.3
Neoplasms	95	80	54	558	396	186	5.9	5.0	3.4
Endocrine, nutritional, metabolic, immunity	64	43	67	288	166	171	4.5	3.9	2.6
Diseases of the blood & blood-forming organs	10	18	27	42	56	89	4.2	3.1	3.3
Mental disorders	44	29	69	448	123	368	10.2	4.2	5.3
Diseases of the nervous system and sense organs	32	25	42	135	95	151	4.2	3.8	3.6
Diseases of the circulatory system	619	286	330	2,325	1,061	940	3.8	3.7	2.8
Diseases of the respiratory system	371	323	372	1,898	1,472	1,261	5.1	4.6	3.4
Diseases of the digestive system	358	255	316	1,658	1,039	1,025	4.6	4.1	3.2
Diseases of the genitourinary system	118	81	174	593	309	516	5.0	3.8	3.0
Pregnancy, childbirth, and the puerperium	481	476	365	849	1,037	779	1.8	2.2	2.1
Diseases of the skin and subcutaneous tissue	45	31	67	222	201	228	4.9	6.5	3.4
Musculoskeletal system and connective tissue	108	138	351	564	485	830	5.2	3.5	2.4
Congenital anomalies	2	-	-	6	-	-	3.0	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	213	160	222	1,236	631	870	5.8	3.9	3.9
Symptoms, signs & ill-defined conditions	36	25	27	110	86	74	3.1	3.4	2.7
Residual codes, unclassified, all Ecodes	1	-	8	1	-	22	1.0	-	2.8
Total	2,638	1,996	2,607	11,083	7,303	7,895	4.2	3.7	3.0

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
Porter Medical Center									
Infectious & parasitic diseases	9	22	155	58	98	751	6.4	4.5	4.8
Neoplasms	76	57	24	307	222	156	4.0	3.9	6.5
Endocrine, nutritional, metabolic, immunity	23	50	52	96	172	128	4.2	3.4	2.5
Diseases of the blood & blood-forming organs	9	7	12	35	17	30	3.9	2.4	2.5
Mental disorders	12	23	25	41	57	102	3.4	2.5	4.1
Diseases of the nervous system and sense organs	13	11	25	63	38	107	4.8	3.5	4.3
Diseases of the circulatory system	263	157	140	1,021	510	474	3.9	3.2	3.4
Diseases of the respiratory system	170	218	133	1,406	794	471	8.3	3.6	3.5
Diseases of the digestive system	207	189	127	929	800	482	4.5	4.2	3.8
Diseases of the genitourinary system	94	68	28	328	207	105	3.5	3.0	3.8
Pregnancy, childbirth, and the puerperium	337	329	378	625	635	900	1.9	1.9	2.4
Diseases of the skin and subcutaneous tissue	32	29	26	236	114	105	7.4	3.9	4.0
Musculoskeletal system and connective tissue	48	100	161	311	335	448	6.5	3.4	2.8
Congenital anomalies	2	-	-	4	-	-	2.0	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	113	91	85	716	329	380	6.3	3.6	4.5
Symptoms, signs & ill-defined conditions	25	16	25	81	63	76	3.2	3.9	3.0
Residual codes, unclassified, all Ecodes	2	6	6	30	18	31	15.0	3.0	5.2
Total	1,435	1,373	1,402	6,287	4,409	4,746	4.4	3.2	3.4

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>	<u>1996</u>	<u>2006</u>	<u>2016</u>
Rutland Regional Medical Center									
Infectious & parasitic diseases	128	106	462	1,018	906	3,112	8.0	8.5	6.7
Neoplasms	419	330	217	2,770	1,547	1,149	6.6	4.7	5.3
Endocrine, nutritional, metabolic, immunity	255	218	164	1,557	909	728	6.1	4.2	4.4
Diseases of the blood & blood-forming organs	48	41	79	198	130	334	4.1	3.2	4.2
Mental disorders	358	573	832	2,795	4,164	7,916	7.8	7.3	9.5
Diseases of the nervous system and sense organs	149	112	165	515	462	695	3.5	4.1	4.2
Diseases of the circulatory system	1,428	969	827	6,652	3,727	2,877	4.7	3.8	3.5
Diseases of the respiratory system	781	858	646	5,148	4,645	2,756	6.6	5.4	4.3
Diseases of the digestive system	658	733	718	3,409	3,324	3,023	5.2	4.5	4.2
Diseases of the genitourinary system	337	410	304	1,093	1,442	1,120	3.2	3.5	3.7
Pregnancy, childbirth, and the puerperium	802	493	341	1,483	1,126	831	1.8	2.3	2.4
Diseases of the skin and subcutaneous tissue	80	139	166	524	666	647	6.6	4.8	3.9
Musculoskeletal system and connective tissue	420	426	783	1,975	1,502	1,954	4.7	3.5	2.5
Congenital anomalies	8	2	5	43	6	6	5.4	3.0	1.2
Conditions originating in the perinatal period	-	-	3	-	-	12	-	-	4.0
Injury & poisoning	625	602	558	3,768	2,944	2,818	6.0	4.9	5.1
Symptoms, signs & ill-defined conditions	420	414	88	4,356	3,775	244	10.4	9.1	2.8
Residual codes, unclassified, all Ecodes	23	11	7	74	32	13	3.2	2.9	1.9
Total	6,939	6,437	6,365	37,378	31,307	30,235	5.4	4.9	4.8

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
Southwestern Vermont Medical Center									
Infectious & parasitic diseases	90	106	305	462	482	1,242	5.1	4.5	4.1
Neoplasms	312	169	86	1,684	774	289	5.4	4.6	3.4
Endocrine, nutritional, metabolic, immunity	198	193	107	824	686	354	4.2	3.6	3.3
Diseases of the blood & blood-forming organs	46	40	37	188	120	101	4.1	3.0	2.7
Mental disorders	306	82	50	1,470	245	195	4.8	3.0	3.9
Diseases of the nervous system and sense organs	100	120	77	323	336	244	3.2	2.8	3.2
Diseases of the circulatory system	1,105	914	428	4,441	2,808	1,363	4.0	3.1	3.2
Diseases of the respiratory system	626	674	551	3,048	2,648	2,096	4.9	3.9	3.8
Diseases of the digestive system	531	655	462	2,385	2,762	1,672	4.5	4.2	3.6
Diseases of the genitourinary system	225	246	133	825	819	395	3.7	3.3	3.0
Pregnancy, childbirth, and the puerperium	457	533	467	976	1,312	1,112	2.1	2.5	2.4
Diseases of the skin and subcutaneous tissue	69	95	93	292	388	294	4.2	4.1	3.2
Musculoskeletal system and connective tissue	298	244	149	1,215	795	431	4.1	3.3	2.9
Congenital anomalies	7	3	1	26	5	8	3.7	1.7	8.0
Conditions originating in the perinatal period	1	-	1	1	-	2	1.0	-	2.0
Injury & poisoning	537	434	311	2,251	1,609	1,120	4.2	3.7	3.6
Symptoms, signs & ill-defined conditions	138	166	50	504	403	120	3.7	2.4	2.4
Residual codes, unclassified, all Ecodes	6	4	11	25	8	53	4.2	2.0	4.8
Total	5,052	4,678	3,319	20,940	16,200	11,091	4.1	3.5	3.3

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
Springfield Hospital									
Infectious & parasitic diseases	40	36	38	271	166	191	6.8	4.6	5.0
Neoplasms	96	84	20	527	345	84	5.5	4.1	4.2
Endocrine, nutritional, metabolic, immunity	52	55	52	256	174	179	4.9	3.2	3.4
Diseases of the blood & blood-forming organs	7	15	15	41	43	57	5.9	2.9	3.8
Mental disorders	400	436	367	2,147	3,271	2,847	5.4	7.5	7.8
Diseases of the nervous system and sense organs	34	43	24	106	158	67	3.1	3.7	2.8
Diseases of the circulatory system	495	323	216	1,748	866	765	3.5	2.7	3.5
Diseases of the respiratory system	239	283	313	1,224	1,039	1,420	5.1	3.7	4.5
Diseases of the digestive system	266	264	212	1,438	1,136	797	5.4	4.3	3.8
Diseases of the genitourinary system	135	132	78	410	365	313	3.0	2.8	4.0
Pregnancy, childbirth, and the puerperium	242	227	190	505	489	443	2.1	2.2	2.3
Diseases of the skin and subcutaneous tissue	34	47	30	176	197	145	5.2	4.2	4.8
Musculoskeletal system and connective tissue	78	109	78	312	383	214	4.0	3.5	2.7
Congenital anomalies	4	1	-	11	1	-	2.8	1.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	249	167	131	1,119	693	422	4.5	4.1	3.2
Symptoms, signs & ill-defined conditions	62	70	28	196	176	68	3.2	2.5	2.4
Residual codes, unclassified, all Ecodes	4	8	8	14	25	26	3.5	3.1	3.3
Total	2,437	2,300	1,800	10,501	9,527	8,038	4.3	4.1	4.5

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

Table I-3
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1996, 2006 and 2016
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1996	2006	2016	1996	2006	2016	1996	2006	2016
University of Vermont Medical Center									
Infectious & parasitic diseases	211	273	1,040	1,417	3,219	8,212	6.7	11.8	7.9
Neoplasms	1,470	1,558	1,411	9,334	9,806	8,307	6.3	6.3	5.9
Endocrine, nutritional, metabolic, immunity	548	683	848	3,812	4,221	5,102	7.0	6.2	6.0
Diseases of the blood & blood-forming organs	145	201	201	764	988	1,097	5.3	4.9	5.5
Mental disorders	981	1,079	748	9,486	9,217	10,654	9.7	8.5	14.2
Diseases of the nervous system and sense organs	524	507	760	2,613	2,426	4,297	5.0	4.8	5.7
Diseases of the circulatory system	5,019	4,699	4,083	31,826	20,804	20,966	6.3	4.4	5.1
Diseases of the respiratory system	1,186	1,147	1,188	7,651	6,599	6,104	6.5	5.8	5.1
Diseases of the digestive system	1,605	1,778	1,685	8,451	8,892	8,319	5.3	5.0	4.9
Diseases of the genitourinary system	813	888	525	3,294	3,325	2,569	4.1	3.7	4.9
Pregnancy, childbirth, and the puerperium	2,637	2,370	2,400	6,197	6,828	7,335	2.4	2.9	3.1
Diseases of the skin and subcutaneous tissue	196	245	175	1,425	1,659	1,218	7.3	6.8	7.0
Musculoskeletal system and connective tissue	1,189	1,179	1,409	4,345	4,981	5,461	3.7	4.2	3.9
Congenital anomalies	190	143	126	973	519	603	5.1	3.6	4.8
Conditions originating in the perinatal period	-	1	6	-	4	54	-	4.0	9.0
Injury & poisoning	2,257	2,353	2,310	13,148	13,320	17,251	5.8	5.7	7.5
Symptoms, signs & ill-defined conditions	1,180	1,211	441	13,520	12,396	2,929	11.5	10.2	6.6
Residual codes, unclassified, all Ecodes	43	90	64	167	299	295	3.9	3.3	4.6
Total	20,194	20,405	19,420	118,423	109,503	110,773	5.9	5.4	5.7

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

Table I-4
2016 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	7	451	423	150	145	129	301	881	725	1,606
Central Vermont Medical Center	32	916	1,138	404	352	394	965	2,086	2,115	4,201
Copley Hospital	12	342	429	213	211	170	383	783	977	1,760
Gifford Medical Center	4	313	311	162	144	126	397	628	829	1,457
Grace Cottage Hospital	-	6	19	8	16	18	52	25	94	119
Mt. Ascutney Hospital and Health Center	-	48	218	132	126	128	315	266	701	967
North Country Hospital	11	327	333	145	187	141	456	671	929	1,600
Northeastern Vermont Regional Hospital	18	352	344	135	135	123	270	714	663	1,377
Northwestern Medical Center	31	587	661	272	237	223	596	1,279	1,328	2,607
Porter Medical Center	-	470	267	94	112	137	322	737	665	1,402
Rutland Regional Medical Center	107	1,269	1,856	694	641	583	1,215	3,232	3,133	6,365
Southwestern Vermont Medical Center	15	765	741	295	296	319	888	1,521	1,798	3,319
Springfield Hospital	-	507	446	122	175	148	402	953	847	1,800
University of Vermont Medical Center	901	5,015	5,626	2,054	1,681	1,490	2,653	11,542	7,878	19,420
Total	1,138	11,368	12,812	4,880	4,458	4,129	9,215	25,318	22,682	48,000

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

Table I-4
2016 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>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	<u>Total</u>
Brattleboro Memorial Hospital	12	1,116	1,577	472	465	464	1,181	2,705	2,582	5,287
Central Vermont Medical Center	72	3,681	5,109	1,873	1,831	1,888	4,071	8,862	9,663	18,525
Copley Hospital	21	658	1,061	492	542	481	1,294	1,740	2,809	4,549
Gifford Medical Center	7	850	1,121	628	676	605	1,893	1,978	3,802	5,780
Grace Cottage Hospital	-	13	104	25	45	48	149	117	267	384
Mt. Ascutney Hospital and Health Center	-	459	1,927	1,255	1,090	1,351	2,951	2,386	6,647	9,033
North Country Hospital	32	864	1,140	462	706	522	1,748	2,036	3,438	5,474
Northeastern Vermont Regional Hospital	41	842	1,075	465	419	483	971	1,958	2,338	4,296
Northwestern Medical Center	65	1,323	2,078	826	705	774	2,124	3,466	4,429	7,895
Porter Medical Center	-	1,119	886	377	364	530	1,470	2,005	2,741	4,746
Rutland Regional Medical Center	215	5,639	9,774	3,249	2,786	2,915	5,657	15,628	14,607	30,235
Southwestern Vermont Medical Center	27	2,008	2,655	1,019	1,038	1,103	3,241	4,690	6,401	11,091
Springfield Hospital	-	2,124	2,371	624	773	586	1,560	4,495	3,543	8,038
University of Vermont Medical Center	4,009	24,341	36,456	12,424	9,939	8,714	14,890	64,806	45,967	110,773
Total	4,501	45,037	67,334	24,191	21,379	20,464	43,200	116,872	109,234	226,106

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

Table I-4
2016 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	1.7	2.5	3.7	3.1	3.2	3.6	3.9	3.1	3.6	3.3
Central Vermont Medical Center	2.3	4.0	4.5	4.6	5.2	4.8	4.2	4.2	4.6	4.4
Copley Hospital	1.8	1.9	2.5	2.3	2.6	2.8	3.4	2.2	2.9	2.6
Gifford Medical Center	1.8	2.7	3.6	3.9	4.7	4.8	4.8	3.1	4.6	4.0
Grace Cottage Hospital	0.0	2.2	5.5	3.1	2.8	2.7	2.9	4.7	2.8	3.2
Mt. Ascutney Hospital and Health Center	0.0	9.6	8.8	9.5	8.7	10.6	9.4	9.0	9.5	9.3
North Country Hospital	2.9	2.6	3.4	3.2	3.8	3.7	3.8	3.0	3.7	3.4
Northeastern Vermont Regional Hospital	2.3	2.4	3.1	3.4	3.1	3.9	3.6	2.7	3.5	3.1
Northwestern Medical Center	2.1	2.3	3.1	3.0	3.0	3.5	3.6	2.7	3.3	3.0
Porter Medical Center	0.0	2.4	3.3	4.0	3.3	3.9	4.6	2.7	4.1	3.4
Rutland Regional Medical Center	2.0	4.4	5.3	4.7	4.3	5.0	4.7	4.8	4.7	4.8
Southwestern Vermont Medical Center	1.8	2.6	3.6	3.5	3.5	3.5	3.6	3.1	3.6	3.3
Springfield Hospital	0.0	4.2	5.3	5.1	4.4	4.0	3.9	4.7	4.2	4.5
University of Vermont Medical Center	4.4	4.9	6.5	6.0	5.9	5.8	5.6	5.6	5.8	5.7
Total	4.0	4.0	5.3	5.0	4.8	5.0	4.7	4.6	4.8	4.7

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

**Table I-5
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Vermont Hospitals by Principal Payer**

Vermont Hospital	Principal Payer														Total	
	Medicare		Medicaid		Other Govt		Workers Comp.		Private Insurance		Other		Unknown			
	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	805	50.1%	350	21.8%	11	0.7%	2	0.1%	411	25.6%	13	0.8%	14	0.9%	1,606	3.3%
Central Vermont Medical Center	2,499	59.5%	751	17.9%	23	0.5%	11	0.3%	858	20.4%	59	1.4%	-	0.0%	4,201	8.8%
Copley Hospital	964	54.8%	259	14.7%	17	1.0%	12	0.7%	492	28.0%	16	0.9%	-	0.0%	1,760	3.7%
Gifford Medical Center	897	61.6%	232	15.9%	13	0.9%	4	0.3%	291	20.0%	20	1.4%	-	0.0%	1,457	3.0%
Grace Cottage Hospital	93	78.2%	16	13.4%	1	0.8%	-	0.0%	8	6.7%	1	0.8%	-	0.0%	119	0.2%
Mt. Ascutney Hospital and Health Center	704	72.8%	65	6.7%	-	0.0%	6	0.6%	188	19.4%	4	0.4%	-	0.0%	967	2.0%
North Country Hospital	1,055	65.9%	308	19.3%	6	0.4%	5	0.3%	219	13.7%	7	0.4%	-	0.0%	1,600	3.3%
Northeastern Vermont Regional Hospital	708	51.4%	310	22.5%	3	0.2%	4	0.3%	334	24.3%	18	1.3%	-	0.0%	1,377	2.9%
Northwestern Medical Center	1,045	40.1%	503	19.3%	22	0.8%	17	0.7%	981	37.6%	35	1.3%	4	0.2%	2,607	5.4%
Porter Medical Center	706	50.4%	211	15.0%	6	0.4%	-	0.0%	465	33.2%	13	0.9%	1	0.1%	1,402	2.9%
Rutland Regional Medical Center	3,772	59.3%	1,244	19.5%	30	0.5%	21	0.3%	1,213	19.1%	85	1.3%	-	0.0%	6,365	13.3%
Southwestern Vermont Medical Center	1,846	55.6%	496	14.9%	13	0.4%	7	0.2%	934	28.1%	23	0.7%	-	0.0%	3,319	6.9%
Springfield Hospital	1,013	56.3%	391	21.7%	7	0.4%	1	0.1%	340	18.9%	46	2.6%	2	0.1%	1,800	3.8%
University of Vermont Medical Center	7,917	40.8%	3,263	16.8%	268	1.4%	116	0.6%	7,280	37.5%	207	1.1%	369	1.9%	19,420	40.5%
Total	24,024	50.1%	8,399	17.5%	420	0.9%	206	0.4%	14,014	29.2%	547	1.1%	390	0.8%	48,000	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
2016 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															
	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	1,831	67.7%	291	10.8%	14	0.5%	5	0.2%	502	18.6%	29	1.1%	31	1.1%	2,703	5.6%
Neoplasms	934	45.3%	237	11.5%	38	1.8%	-	0.0%	842	40.9%	6	0.3%	4	0.2%	2,061	4.3%
Endocrine, nutritional, metabolic, immunity	802	46.1%	424	24.4%	6	0.3%	-	0.0%	452	26.0%	21	1.2%	36	2.1%	1,741	3.6%
Diseases of the blood & blood-forming organs	314	60.7%	78	15.1%	5	1.0%	-	0.0%	115	22.2%	3	0.6%	2	0.4%	517	1.1%
Mental disorders	943	33.1%	1,165	40.9%	10	0.4%	-	0.0%	650	22.8%	80	2.8%	3	0.1%	2,851	5.9%
Diseases of the nervous system and sense organs	681	48.5%	246	17.5%	14	1.0%	17	1.2%	415	29.5%	20	1.4%	12	0.9%	1,405	2.9%
Diseases of the circulatory system	5,281	66.9%	559	7.1%	66	0.8%	11	0.1%	1,804	22.9%	82	1.0%	91	1.2%	7,894	16.4%
Diseases of the respiratory system	3,166	65.3%	751	15.5%	24	0.5%	3	0.1%	809	16.7%	41	0.8%	54	1.1%	4,848	10.1%
Diseases of the digestive system	2,615	51.7%	823	16.3%	39	0.8%	1	0.0%	1,470	29.1%	72	1.4%	34	0.7%	5,054	10.5%
Diseases of the genitourinary system	1,230	66.0%	183	9.8%	11	0.6%	1	0.1%	405	21.7%	21	1.1%	14	0.8%	1,865	3.9%
Pregnancy, childbirth, and the puerperium	68	1.2%	2,256	40.2%	90	1.6%	1	0.0%	3,136	55.9%	60	1.1%	-	0.0%	5,611	11.7%
Diseases of the skin and subcutaneous tissue	483	53.1%	185	20.4%	10	1.1%	6	0.7%	202	22.2%	19	2.1%	4	0.4%	909	1.9%
Musculoskeletal system and connective tissue	2,146	51.8%	445	10.7%	38	0.9%	52	1.3%	1,438	34.7%	12	0.3%	12	0.3%	4,143	8.6%
Congenital anomalies	27	19.9%	30	22.1%	6	4.4%	-	0.0%	69	50.7%	3	2.2%	1	0.7%	136	0.3%
Conditions originating in the perinatal period	-	0.0%	7	70.0%	-	0.0%	-	0.0%	3	30.0%	-	0.0%	-	0.0%	10	0.0%
Injury & poisoning	2,474	53.7%	538	11.7%	34	0.7%	105	2.3%	1,328	28.8%	64	1.4%	66	1.4%	4,609	9.6%
Symptoms, signs & ill-defined conditions	900	62.6%	160	11.1%	9	0.6%	3	0.2%	333	23.2%	12	0.8%	21	1.5%	1,438	3.0%
Residual codes, unclassified, all Ecodes	129	62.9%	21	10.2%	6	2.9%	1	0.5%	41	20.0%	2	1.0%	5	2.4%	205	0.4%
Total	24,024	50.1%	8,399	17.5%	420	0.9%	206	0.4%	14,014	29.2%	547	1.1%	390	0.8%	48,000	100.0%

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

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

Table I-7
2016 Vermont Hospital Inpatient Discharges, Including VT Residents and Non-residents
Percent Readmitted within 30 days by Vermont Hospital and State of Residence
2012 - 2016

Vermont Hospital	2012				2013				2014				2015				2016			
	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	1,398	5.9%	273	4.4%	1,291	5.7%	302	6.0%	1,245	5.3%	311	5.5%	1,231	5.4%	318	5.0%	1,344	6.9%	262	3.1%
Central Vermont Medical Center	3,055	8.8%	68	4.4%	3,284	9.6%	65	3.1%	3,461	10.8%	66	1.5%	3,846	11.4%	83	2.4%	4,128	12.0%	73	2.7%
Copley Hospital	1,387	6.9%	48	2.1%	1,353	7.2%	60	3.3%	1,528	8.0%	70	5.7%	1,629	10.3%	52	0.0%	1,686	8.0%	74	2.7%
Gifford Medical Center	1,094	9.1%	18	11.1%	1,055	8.7%	13	7.7%	1,208	9.2%	14	0.0%	1,425	11.6%	17	0.0%	1,438	12.0%	19	0.0%
Grace Cottage Hospital	156	6.4%	10	0.0%	158	5.7%	8	12.5%	152	3.9%	7	0.0%	117	2.6%	8	0.0%	111	2.7%	8	0.0%
Mt. Ascutney Hospital and Health Center	320	8.1%	88	6.8%	290	6.9%	70	5.7%	673	9.2%	260	8.5%	767	9.6%	286	6.6%	698	8.3%	269	9.7%
North Country Hospital	1,316	8.7%	42	16.7%	1,265	8.3%	39	17.9%	1,281	9.9%	31	6.5%	1,588	11.7%	41	12.2%	1,559	11.9%	41	9.8%
Northeastern Vermont Regional Hospital	1,325	8.2%	39	10.3%	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%
Northwestern Medical Center	2,190	8.4%	36	2.8%	2,266	8.0%	23	0.0%	2,363	9.4%	34	5.9%	2,558	10.0%	32	0.0%	2,587	9.1%	20	0.0%
Porter Medical Center	1,430	7.6%	87	1.1%	1,487	7.3%	94	5.3%	1,456	8.6%	95	1.1%	1,372	8.1%	115	1.7%	1,297	6.0%	105	1.0%
Rutland Regional Medical Center	5,709	12.3%	528	8.7%	5,730	11.8%	471	6.4%	5,281	11.0%	413	6.1%	5,663	11.7%	442	8.1%	5,895	11.6%	470	9.6%
Southwestern Vermont Medical Center	2,900	12.8%	1,047	8.8%	2,868	10.9%	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%
Springfield Hospital	1,817	9.6%	306	4.9%	1,598	8.3%	267	3.7%	1,618	9.5%	276	4.0%	1,634	11.0%	290	5.9%	1,499	10.6%	301	2.7%
University of Vermont Medical Center	16,091	11.5%	3,828	10.0%	15,570	11.5%	3,528	9.4%	14,397	10.5%	3,320	8.6%	15,244	11.1%	3,490	8.6%	15,842	11.5%	3,578	9.1%
Total	40,188	10.5%	6,418	8.9%	39,453	10.2%	6,033	8.2%	38,249	9.9%	5,912	7.6%	40,785	10.7%	6,138	7.7%	41,776	10.7%	6,224	8.3%

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

Table I-8
2016 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Median Charges for Readmissions within 30 days by Vermont Hospital and State of Residence
2012 - 2016

Vermont Hospital	2012		2013		2014		2015		2016											
	VT resident discharges		Non-Vermont discharges		VT resident discharges		Non-Vermont discharges		VT resident discharges		Non-Vermont discharges									
	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges	N	Median Charges								
Brattleboro Memorial Hospital	82	\$ 13,133	12	\$ 15,242	74	\$ 11,073	18	\$ 9,636	66	\$ 12,636	17	\$ 13,454	66	\$ 12,118	16	\$ 18,190	93	\$ 15,704	8	\$ 17,963
Central Vermont Medical Center	270	\$ 12,946	3	\$ 16,116	315	\$ 13,309	2	\$ 12,363	373	\$ 15,727	1	\$ 18,346	437	\$ 16,389	2	\$ 16,759	497	\$ 15,675	2	\$ 14,777
Copley Hospital	96	\$ 5,564	1	\$ 1,620	97	\$ 6,278	2	\$ 12,531	122	\$ 6,273	4	\$ 5,305	167	\$ 7,066	-	-	135	\$ 7,750	2	\$ 9,381
Gifford Medical Center	100	\$ 10,486	2	\$ 10,060	92	\$ 11,201	1	\$ 5,464	111	\$ 13,129	-	-	166	\$ 13,614	-	-	172	\$ 14,100	-	-
Grace Cottage Hospital	10	\$ 7,569	-	-	9	\$ 5,624	1	\$ 1,485	6	\$ 4,406	-	-	3	\$ 12,156	-	-	3	\$ 7,187	-	-
Mt. Ascutney Hospital and Health Center	26	\$ 7,430	6	\$ 9,706	20	\$ 9,599	4	\$ 4,471	62	\$ 9,646	22	\$ 8,701	74	\$ 13,864	19	\$ 9,698	58	\$ 13,198	26	\$ 18,691
North Country Hospital	115	\$ 13,293	7	\$ 8,894	105	\$ 15,989	7	\$ 20,355	127	\$ 15,045	2	\$ 8,444	186	\$ 14,723	5	\$ 15,013	186	\$ 16,655	4	\$ 16,972
Northeastern Vermont Regional Hospital	109	\$ 11,156	4	\$ 17,034	102	\$ 14,568	2	\$ 17,546	61	\$ 13,497	3	\$ 78,383	85	\$ 15,342	2	\$ 29,749	99	\$ 15,523	2	\$ 28,636
Northwestern Medical Center	185	\$ 13,571	1	\$ 9,712	182	\$ 12,520	-	-	221	\$ 12,845	2	\$ 18,937	256	\$ 12,510	-	-	235	\$ 10,485	-	-
Porter Medical Center	108	\$ 11,358	1	\$ 7,729	108	\$ 13,278	5	\$ 5,044	125	\$ 12,184	1	\$ 2,045	111	\$ 15,799	2	\$ 5,409	78	\$ 14,930	1	\$ 6,425
Rutland Regional Medical Center	700	\$ 15,109	46	\$ 16,499	674	\$ 15,872	30	\$ 24,077	580	\$ 18,676	25	\$ 25,537	663	\$ 18,185	36	\$ 26,923	683	\$ 19,969	45	\$ 15,951
Southwestern Vermont Medical Center	371	\$ 12,867	92	\$ 12,733	314	\$ 12,413	80	\$ 12,659	257	\$ 13,511	77	\$ 13,169	265	\$ 14,513	70	\$ 16,050	267	\$ 13,646	92	\$ 14,421
Springfield Hospital	175	\$ 10,782	15	\$ 10,517	133	\$ 10,666	10	\$ 12,316	154	\$ 11,529	11	\$ 15,277	180	\$ 14,095	17	\$ 16,550	159	\$ 15,105	8	\$ 12,355
University of Vermont Medical Center	1,855	\$ 16,832	381	\$ 21,284	1,796	\$ 19,397	333	\$ 21,166	1,508	\$ 22,125	284	\$ 24,660	1,693	\$ 21,060	301	\$ 45,556	1,825	\$ 22,293	325	\$ 28,827
Total	4,202	\$ 14,252	571	\$ 17,505	4,021	\$ 15,222	495	\$ 17,760	3,773	\$ 16,596	449	\$ 19,635	4,352	\$ 16,826	470	\$ 18,742	4,490	\$ 17,181	515	\$ 19,854

Readmission is defined as inpatient readmitted to the same hospital for any reason within 30 days of discharge.

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 the User's Guide to Vermont Hospitals Report for details.

Table I-9
2016 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	1,344	\$23,823,717	262	\$5,145,459	1,606	\$28,969,176
Central Vermont Medical Center	4,128	\$84,366,656	73	\$1,562,270	4,201	\$85,928,926
Copley Hospital	1,686	\$33,299,869	74	\$1,767,255	1,760	\$35,067,124
Gifford Medical Center	1,438	\$31,668,730	19	\$327,784	1,457	\$31,996,514
Grace Cottage Hospital	111	\$1,211,833	8	\$78,299	119	\$1,290,132
Mt. Ascutney Hospital and Health Center	698	\$16,105,543	269	\$6,360,216	967	\$22,465,759
North Country Hospital	1,559	\$30,730,285	41	\$900,139	1,600	\$31,630,424
Northeastern Vermont Regional Hospital	1,338	\$35,572,405	39	\$949,401	1,377	\$36,521,806
Northwestern Medical Center	2,587	\$39,324,801	20	\$365,475	2,607	\$39,690,276
Porter Medical Center	1,297	\$31,213,355	105	\$2,358,898	1,402	\$33,572,252
Rutland Regional Medical Center	5,895	\$168,539,145	470	\$12,762,133	6,365	\$181,301,278
Southwestern Vermont Medical Center	2,354	\$41,784,077	965	\$16,803,849	3,319	\$58,587,926
Springfield Hospital	1,499	\$25,661,236	301	\$4,925,966	1,800	\$30,587,202
University of Vermont Medical Center	15,842	\$598,566,098	3,578	\$192,903,748	19,420	\$791,469,845
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 the User's Guide to Vermont Hospitals Report for details.

Emergency Department Visits

Table E-1
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting

Vermont Hospital	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	930	6.8%	12,696	93.2%	13,626	5.1%
Central Vermont Medical Center	3,478	13.8%	21,788	86.2%	25,266	9.5%
Copley Hospital	962	7.1%	12,545	92.9%	13,507	5.1%
Gifford Medical Center	970	12.9%	6,559	87.1%	7,529	2.8%
Grace Cottage Hospital	101	3.5%	2,817	96.5%	2,918	1.1%
Mt. Ascutney Hospital and Health Center	244	5.3%	4,346	94.7%	4,590	1.7%
North Country Hospital	1,032	6.7%	14,473	93.3%	15,505	5.8%
Northeastern Vermont Regional Hospital	918	6.6%	12,975	93.4%	13,893	5.2%
Northwestern Medical Center	1,776	7.1%	23,083	92.9%	24,859	9.4%
Porter Medical Center	803	5.6%	13,424	94.4%	14,227	5.4%
Rutland Regional Medical Center	4,750	14.2%	28,647	85.8%	33,397	12.6%
Southwestern Vermont Medical Center	2,586	11.2%	20,519	88.8%	23,105	8.7%
Springfield Hospital	1,324	7.9%	15,426	92.1%	16,750	6.3%
University of Vermont Medical Center	9,471	16.7%	47,168	83.3%	56,639	21.3%
Total	29,345	11.0%	236,466	89.0%	265,811	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Five-year Comparison

Inpatient Discharges Originating in ED	2012	2013	2014	2015	2016
Brattleboro Memorial Hospital	920	855	823	811	930
Central Vermont Medical Center	2,332	2,536	2,813	3,218	3,478
Copley Hospital	256	316	322	885	962
Gifford Medical Center	608	624	755	950	970
Grace Cottage Hospital	27	27	10	104	101
Mt. Ascutney Hospital and Health Center	94	175	109	275	244
North Country Hospital	253	288	291	1,017	1,032
Northeastern Vermont Regional Hospital	369	298	291	496	918
Northwestern Medical Center	1,293	1,434	1,511	1,735	1,776
Porter Medical Center	643	948	944	888	803
Rutland Regional Medical Center	4,488	4,471	4,149	4,471	4,750
Southwestern Vermont Medical Center	3,044	3,016	2,674	2,620	2,586
Springfield Hospital	1,086	463	379	1,421	1,324
University of Vermont Medical Center	9,566	9,397	8,171	8,766	9,471
Total	24,979	24,848	23,242	27,657	29,345
ED Visits Not Admitted	2012	2013	2014	2015	2016
Brattleboro Memorial Hospital	12,077	11,822	12,796	12,488	12,696
Central Vermont Medical Center	26,766	25,362	22,574	21,723	21,788
Copley Hospital	13,091	13,040	12,966	12,185	12,545
Gifford Medical Center	6,604	6,311	6,464	6,611	6,559
Grace Cottage Hospital	3,091	2,792	2,612	2,731	2,817
Mt. Ascutney Hospital and Health Center	5,338	5,261	4,832	4,387	4,346
North Country Hospital	15,274	14,601	14,903	15,665	14,473
Northeastern Vermont Regional Hospital	13,848	13,572	12,534	13,110	12,975
Northwestern Medical Center	26,340	24,605	23,202	23,583	23,083
Porter Medical Center	14,638	13,783	14,039	14,522	13,424
Rutland Regional Medical Center	27,865	28,729	28,975	28,923	28,647
Southwestern Vermont Medical Center	20,977	19,771	20,698	20,700	20,519
Springfield Hospital	15,777	16,141	15,564	15,611	15,426
University of Vermont Medical Center	48,138	46,776	47,683	48,117	47,168
Total	249,824	242,566	239,842	240,356	236,466

Table E-2
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Five-year Comparison

All ED Visits, Including Those Admitted	2012	2013	2014	2015	2016
Brattleboro Memorial Hospital	12,997	12,677	13,619	13,299	13,626
Central Vermont Medical Center	29,098	27,898	25,387	24,941	25,266
Copley Hospital	13,347	13,356	13,288	13,070	13,507
Gifford Medical Center	7,212	6,935	7,219	7,561	7,529
Grace Cottage Hospital	3,118	2,819	2,622	2,835	2,918
Mt. Ascutney Hospital and Health Center	5,432	5,436	4,941	4,662	4,590
North Country Hospital	15,527	14,889	15,194	16,682	15,505
Northeastern Vermont Regional Hospital	14,217	13,870	12,825	13,606	13,893
Northwestern Medical Center	27,633	26,039	24,713	25,318	24,859
Porter Medical Center	15,281	14,731	14,983	15,410	14,227
Rutland Regional Medical Center	32,353	33,200	33,124	33,394	33,397
Southwestern Vermont Medical Center	24,021	22,787	23,372	23,320	23,105
Springfield Hospital	16,863	16,604	15,943	17,032	16,750
University of Vermont Medical Center	57,704	56,173	55,854	56,883	56,639
Total	274,803	267,414	263,084	268,013	265,811

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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
All Vermont Hospitals						
Infectious & parasitic diseases	2,461	39.0%	3,854	61.0%	6,315	2.4%
Neoplasms	712	64.7%	389	35.3%	1,101	0.4%
Endocrine, nutritional, metabolic, immunity	1,210	26.3%	3,386	73.7%	4,596	1.7%
Diseases of the blood & blood-forming organs	434	44.5%	541	55.5%	975	0.4%
Mental disorders	2,084	15.0%	11,768	85.0%	13,852	5.2%
Diseases of the nervous system and sense organs	997	5.0%	19,102	95.0%	20,099	7.6%
Diseases of the circulatory system	5,583	22.9%	18,792	77.1%	24,375	9.2%
Diseases of the respiratory system	4,318	14.1%	26,212	85.9%	30,530	11.5%
Diseases of the digestive system	4,188	18.9%	17,941	81.1%	22,129	8.3%
Diseases of the genitourinary system	1,503	11.1%	12,096	88.9%	13,599	5.1%
Pregnancy, childbirth, and the puerperium	120	4.3%	2,686	95.7%	2,806	1.1%
Diseases of the skin and subcutaneous tissue	768	8.4%	8,337	91.6%	9,105	3.4%
Musculoskeletal system and connective tissue	725	4.0%	17,594	96.0%	18,319	6.9%
Congenital anomalies	31	38.3%	50	61.7%	81	0.0%
Conditions originating in the perinatal period	2	0.8%	262	99.2%	264	0.1%
Injury & poisoning	3,446	5.1%	63,599	94.9%	67,045	25.2%
Symptoms, signs & ill-defined conditions	607	2.2%	27,524	97.8%	28,131	10.6%
Residual codes, unclassified, all Ecodes	156	6.3%	2,333	93.7%	2,489	0.9%
Total	29,345	11.0%	236,466	89.0%	265,811	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital						
Infectious & parasitic diseases	82	30.1%	190	69.9%	272	2.0%
Neoplasms	19	54.3%	16	45.7%	35	0.3%
Endocrine, nutritional, metabolic, immunity	54	22.1%	190	77.9%	244	1.8%
Diseases of the blood & blood-forming organs	19	50.0%	19	50.0%	38	0.3%
Mental disorders	29	2.8%	1,017	97.2%	1,046	7.7%
Diseases of the nervous system and sense organs	16	1.6%	984	98.4%	1,000	7.3%
Diseases of the circulatory system	157	13.2%	1,028	86.8%	1,185	8.7%
Diseases of the respiratory system	183	13.3%	1,198	86.7%	1,381	10.1%
Diseases of the digestive system	162	15.5%	882	84.5%	1,044	7.7%
Diseases of the genitourinary system	42	7.4%	523	92.6%	565	4.1%
Pregnancy, childbirth, and the puerperium	8	8.7%	84	91.3%	92	0.7%
Diseases of the skin and subcutaneous tissue	35	8.0%	400	92.0%	435	3.2%
Musculoskeletal system and connective tissue	17	2.1%	796	97.9%	813	6.0%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	4	100.0%	4	0.0%
Injury & poisoning	86	2.3%	3,623	97.7%	3,709	27.2%
Symptoms, signs & ill-defined conditions	14	0.9%	1,567	99.1%	1,581	11.6%
Residual codes, unclassified, all Ecodes	7	3.9%	173	96.1%	180	1.3%
Total	930	6.8%	12,696	93.2%	13,626	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Central Vermont Medical Center						
Infectious & parasitic diseases	381	53.3%	334	46.7%	715	2.8%
Neoplasms	51	67.1%	25	32.9%	76	0.3%
Endocrine, nutritional, metabolic, immunity	131	28.3%	332	71.7%	463	1.8%
Diseases of the blood & blood-forming organs	35	42.7%	47	57.3%	82	0.3%
Mental disorders	373	24.1%	1,174	75.9%	1,547	6.1%
Diseases of the nervous system and sense organs	115	6.5%	1,642	93.5%	1,757	7.0%
Diseases of the circulatory system	690	25.0%	2,070	75.0%	2,760	10.9%
Diseases of the respiratory system	529	18.2%	2,373	81.8%	2,902	11.5%
Diseases of the digestive system	477	21.4%	1,748	78.6%	2,225	8.8%
Diseases of the genitourinary system	158	12.5%	1,107	87.5%	1,265	5.0%
Pregnancy, childbirth, and the puerperium	10	4.6%	209	95.4%	219	0.9%
Diseases of the skin and subcutaneous tissue	116	13.7%	729	86.3%	845	3.3%
Musculoskeletal system and connective tissue	86	4.5%	1,832	95.5%	1,918	7.6%
Congenital anomalies	2	40.0%	3	60.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	21	100.0%	21	0.1%
Injury & poisoning	247	4.6%	5,161	95.4%	5,408	21.4%
Symptoms, signs & ill-defined conditions	60	2.1%	2,743	97.9%	2,803	11.1%
Residual codes, unclassified, all Ecodes	17	6.7%	238	93.3%	255	1.0%
Total	3,478	13.8%	21,788	86.2%	25,266	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Copley Hospital						
Infectious & parasitic diseases	20	9.3%	195	90.7%	215	1.6%
Neoplasms	17	51.5%	16	48.5%	33	0.2%
Endocrine, nutritional, metabolic, immunity	36	21.2%	134	78.8%	170	1.3%
Diseases of the blood & blood-forming organs	8	33.3%	16	66.7%	24	0.2%
Mental disorders	51	10.4%	438	89.6%	489	3.6%
Diseases of the nervous system and sense organs	30	3.2%	900	96.8%	930	6.9%
Diseases of the circulatory system	154	16.6%	771	83.4%	925	6.8%
Diseases of the respiratory system	174	10.0%	1,569	90.0%	1,743	12.9%
Diseases of the digestive system	175	15.6%	948	84.4%	1,123	8.3%
Diseases of the genitourinary system	64	8.6%	676	91.4%	740	5.5%
Pregnancy, childbirth, and the puerperium	1	1.1%	90	98.9%	91	0.7%
Diseases of the skin and subcutaneous tissue	35	7.0%	466	93.0%	501	3.7%
Musculoskeletal system and connective tissue	24	2.0%	1,166	98.0%	1,190	8.8%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	6	100.0%	6	0.0%
Injury & poisoning	110	2.8%	3,890	97.3%	4,000	29.6%
Symptoms, signs & ill-defined conditions	45	3.7%	1,158	96.3%	1,203	8.9%
Residual codes, unclassified, all Ecodes	18	14.6%	105	85.4%	123	0.9%
Total	962	7.1%	12,545	92.9%	13,507	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Gifford Medical Center						
Infectious & parasitic diseases	14	11.0%	113	89.0%	127	1.7%
Neoplasms	11	73.3%	4	26.7%	15	0.2%
Endocrine, nutritional, metabolic, immunity	51	34.9%	95	65.1%	146	1.9%
Diseases of the blood & blood-forming organs	24	64.9%	13	35.1%	37	0.5%
Mental disorders	56	19.0%	238	81.0%	294	3.9%
Diseases of the nervous system and sense organs	36	6.7%	504	93.3%	540	7.2%
Diseases of the circulatory system	217	34.2%	418	65.8%	635	8.4%
Diseases of the respiratory system	165	17.6%	772	82.4%	937	12.4%
Diseases of the digestive system	147	21.3%	542	78.7%	689	9.2%
Diseases of the genitourinary system	75	18.9%	322	81.1%	397	5.3%
Pregnancy, childbirth, and the puerperium	5	6.4%	73	93.6%	78	1.0%
Diseases of the skin and subcutaneous tissue	25	9.4%	240	90.6%	265	3.5%
Musculoskeletal system and connective tissue	21	4.2%	481	95.8%	502	6.7%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	8	100.0%	8	0.1%
Injury & poisoning	71	3.4%	2,030	96.6%	2,101	27.9%
Symptoms, signs & ill-defined conditions	41	6.1%	633	93.9%	674	9.0%
Residual codes, unclassified, all Ecodes	11	13.3%	72	86.7%	83	1.1%
Total	970	12.9%	6,559	87.1%	7,529	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Grace Cottage Hospital						
Infectious & parasitic diseases	1	1.7%	58	98.3%	59	2.0%
Neoplasms	3	18.8%	13	81.3%	16	0.5%
Endocrine, nutritional, metabolic, immunity	6	8.3%	66	91.7%	72	2.5%
Diseases of the blood & blood-forming organs	1	7.1%	13	92.9%	14	0.5%
Mental disorders	0	0.0%	94	100.0%	94	3.2%
Diseases of the nervous system and sense organs	6	2.6%	229	97.4%	235	8.1%
Diseases of the circulatory system	19	8.6%	202	91.4%	221	7.6%
Diseases of the respiratory system	24	8.0%	277	92.0%	301	10.3%
Diseases of the digestive system	10	4.9%	196	95.1%	206	7.1%
Diseases of the genitourinary system	12	9.0%	122	91.0%	134	4.6%
Pregnancy, childbirth, and the puerperium	0	0.0%	10	100.0%	10	0.3%
Diseases of the skin and subcutaneous tissue	4	4.1%	93	95.9%	97	3.3%
Musculoskeletal system and connective tissue	2	1.0%	197	99.0%	199	6.8%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	1	100.0%	1	0.0%
Injury & poisoning	8	0.8%	947	99.2%	955	32.7%
Symptoms, signs & ill-defined conditions	4	1.5%	264	98.5%	268	9.2%
Residual codes, unclassified, all Ecodes	1	2.8%	35	97.2%	36	1.2%
Total	101	3.5%	2,817	96.5%	2,918	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Mt. Ascutney Hospital and Health Center						
Infectious & parasitic diseases	5	5.3%	89	94.7%	94	2.0%
Neoplasms	10	45.5%	12	54.5%	22	0.5%
Endocrine, nutritional, metabolic, immunity	12	16.2%	62	83.8%	74	1.6%
Diseases of the blood & blood-forming organs	7	53.8%	6	46.2%	13	0.3%
Mental disorders	4	2.7%	143	97.3%	147	3.2%
Diseases of the nervous system and sense organs	3	0.9%	325	99.1%	328	7.1%
Diseases of the circulatory system	52	13.6%	330	86.4%	382	8.3%
Diseases of the respiratory system	51	9.0%	514	91.0%	565	12.3%
Diseases of the digestive system	52	11.6%	395	88.4%	447	9.7%
Diseases of the genitourinary system	14	5.9%	224	94.1%	238	5.2%
Pregnancy, childbirth, and the puerperium	0	0.0%	10	100.0%	10	0.2%
Diseases of the skin and subcutaneous tissue	6	2.9%	204	97.1%	210	4.6%
Musculoskeletal system and connective tissue	3	0.9%	343	99.1%	346	7.5%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	2	100.0%	2	0.0%
Injury & poisoning	18	1.4%	1,252	98.6%	1,270	27.7%
Symptoms, signs & ill-defined conditions	4	1.0%	407	99.0%	411	9.0%
Residual codes, unclassified, all Ecodes	3	9.7%	28	90.3%	31	0.7%
Total	244	5.3%	4,346	94.7%	4,590	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
North Country Hospital						
Infectious & parasitic diseases	30	9.3%	293	90.7%	323	2.1%
Neoplasms	11	35.5%	20	64.5%	31	0.2%
Endocrine, nutritional, metabolic, immunity	65	27.8%	169	72.2%	234	1.5%
Diseases of the blood & blood-forming organs	26	48.1%	28	51.9%	54	0.3%
Mental disorders	29	6.4%	426	93.6%	455	2.9%
Diseases of the nervous system and sense organs	35	2.9%	1,181	97.1%	1,216	7.8%
Diseases of the circulatory system	220	18.7%	957	81.3%	1,177	7.6%
Diseases of the respiratory system	212	9.0%	2,143	91.0%	2,355	15.2%
Diseases of the digestive system	182	13.6%	1,156	86.4%	1,338	8.6%
Diseases of the genitourinary system	75	9.1%	753	90.9%	828	5.3%
Pregnancy, childbirth, and the puerperium	5	4.1%	117	95.9%	122	0.8%
Diseases of the skin and subcutaneous tissue	27	4.3%	599	95.7%	626	4.0%
Musculoskeletal system and connective tissue	20	2.0%	977	98.0%	997	6.4%
Congenital anomalies	1	50.0%	1	50.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	5	100.0%	5	0.0%
Injury & poisoning	63	1.6%	3,902	98.4%	3,965	25.6%
Symptoms, signs & ill-defined conditions	23	1.4%	1,599	98.6%	1,622	10.5%
Residual codes, unclassified, all Ecodes	8	5.2%	147	94.8%	155	1.0%
Total	1,032	6.7%	14,473	93.3%	15,505	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Northeastern Vermont Regional Hospital						
Infectious & parasitic diseases	34	15.8%	181	84.2%	215	1.5%
Neoplasms	10	43.5%	13	56.5%	23	0.2%
Endocrine, nutritional, metabolic, immunity	30	14.0%	184	86.0%	214	1.5%
Diseases of the blood & blood-forming organs	12	30.8%	27	69.2%	39	0.3%
Mental disorders	59	11.9%	435	88.1%	494	3.6%
Diseases of the nervous system and sense organs	27	2.6%	1,018	97.4%	1,045	7.5%
Diseases of the circulatory system	182	16.6%	916	83.4%	1,098	7.9%
Diseases of the respiratory system	143	6.4%	2,106	93.6%	2,249	16.2%
Diseases of the digestive system	136	12.5%	952	87.5%	1,088	7.8%
Diseases of the genitourinary system	64	7.9%	745	92.1%	809	5.8%
Pregnancy, childbirth, and the puerperium	8	5.6%	134	94.4%	142	1.0%
Diseases of the skin and subcutaneous tissue	37	5.8%	597	94.2%	634	4.6%
Musculoskeletal system and connective tissue	16	1.9%	845	98.1%	861	6.2%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	9	100.0%	9	0.1%
Injury & poisoning	102	2.7%	3,634	97.3%	3,736	26.9%
Symptoms, signs & ill-defined conditions	46	4.1%	1,079	95.9%	1,125	8.1%
Residual codes, unclassified, all Ecodes	12	10.7%	100	89.3%	112	0.8%
Total	918	6.6%	12,975	93.4%	13,893	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Northwestern Medical Center						
Infectious & parasitic diseases	114	23.7%	368	76.3%	482	1.9%
Neoplasms	27	46.6%	31	53.4%	58	0.2%
Endocrine, nutritional, metabolic, immunity	65	17.0%	317	83.0%	382	1.5%
Diseases of the blood & blood-forming organs	25	33.8%	49	66.2%	74	0.3%
Mental disorders	49	6.2%	745	93.8%	794	3.2%
Diseases of the nervous system and sense organs	38	1.9%	1,991	98.1%	2,029	8.2%
Diseases of the circulatory system	325	16.1%	1,694	83.9%	2,019	8.1%
Diseases of the respiratory system	363	11.7%	2,733	88.3%	3,096	12.5%
Diseases of the digestive system	289	12.7%	1,992	87.3%	2,281	9.2%
Diseases of the genitourinary system	165	11.3%	1,301	88.7%	1,466	5.9%
Pregnancy, childbirth, and the puerperium	6	1.7%	340	98.3%	346	1.4%
Diseases of the skin and subcutaneous tissue	64	6.6%	911	93.4%	975	3.9%
Musculoskeletal system and connective tissue	37	1.9%	1,883	98.1%	1,920	7.7%
Congenital anomalies	0	0.0%	7	100.0%	7	0.0%
Conditions originating in the perinatal period	0	0.0%	28	100.0%	28	0.1%
Injury & poisoning	176	3.0%	5,775	97.0%	5,951	23.9%
Symptoms, signs & ill-defined conditions	25	0.9%	2,736	99.1%	2,761	11.1%
Residual codes, unclassified, all Ecodes	8	4.2%	182	95.8%	190	0.8%
Total	1,776	7.1%	23,083	92.9%	24,859	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Porter Medical Center						
Infectious & parasitic diseases	152	36.2%	268	63.8%	420	3.0%
Neoplasms	12	35.3%	22	64.7%	34	0.2%
Endocrine, nutritional, metabolic, immunity	52	21.8%	187	78.2%	239	1.7%
Diseases of the blood & blood-forming organs	10	24.4%	31	75.6%	41	0.3%
Mental disorders	21	4.5%	445	95.5%	466	3.3%
Diseases of the nervous system and sense organs	25	2.3%	1,039	97.7%	1,064	7.5%
Diseases of the circulatory system	125	11.8%	937	88.2%	1,062	7.5%
Diseases of the respiratory system	130	7.8%	1,544	92.2%	1,674	11.8%
Diseases of the digestive system	117	9.9%	1,066	90.1%	1,183	8.3%
Diseases of the genitourinary system	23	3.0%	747	97.0%	770	5.4%
Pregnancy, childbirth, and the puerperium	4	5.5%	69	94.5%	73	0.5%
Diseases of the skin and subcutaneous tissue	19	3.6%	511	96.4%	530	3.7%
Musculoskeletal system and connective tissue	14	1.4%	1,012	98.6%	1,026	7.2%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	10	100.0%	10	0.1%
Injury & poisoning	71	1.7%	4,017	98.3%	4,088	28.7%
Symptoms, signs & ill-defined conditions	22	1.5%	1,413	98.5%	1,435	10.1%
Residual codes, unclassified, all Ecodes	6	5.4%	105	94.6%	111	0.8%
Total	803	5.6%	13,424	94.4%	14,227	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Rutland Regional Medical Center						
Infectious & parasitic diseases	455	45.7%	541	54.3%	996	3.0%
Neoplasms	122	76.7%	37	23.3%	159	0.5%
Endocrine, nutritional, metabolic, immunity	149	30.2%	344	69.8%	493	1.5%
Diseases of the blood & blood-forming organs	68	61.8%	42	38.2%	110	0.3%
Mental disorders	654	27.6%	1,715	72.4%	2,369	7.1%
Diseases of the nervous system and sense organs	151	5.8%	2,461	94.2%	2,612	7.8%
Diseases of the circulatory system	798	26.1%	2,265	73.9%	3,063	9.2%
Diseases of the respiratory system	616	18.2%	2,770	81.8%	3,386	10.1%
Diseases of the digestive system	632	22.3%	2,199	77.7%	2,831	8.5%
Diseases of the genitourinary system	278	17.2%	1,339	82.8%	1,617	4.8%
Pregnancy, childbirth, and the puerperium	11	3.0%	354	97.0%	365	1.1%
Diseases of the skin and subcutaneous tissue	153	12.0%	1,121	88.0%	1,274	3.8%
Musculoskeletal system and connective tissue	123	4.8%	2,430	95.2%	2,553	7.6%
Congenital anomalies	3	30.0%	7	70.0%	10	0.0%
Conditions originating in the perinatal period	1	3.1%	31	96.9%	32	0.1%
Injury & poisoning	457	5.6%	7,744	94.4%	8,201	24.6%
Symptoms, signs & ill-defined conditions	73	2.4%	2,954	97.6%	3,027	9.1%
Residual codes, unclassified, all Ecodes	6	2.0%	293	98.0%	299	0.9%
Total	4,750	14.2%	28,647	85.8%	33,397	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Southwestern Vermont Medical Center						
Infectious & parasitic diseases	305	44.9%	374	55.1%	679	2.9%
Neoplasms	51	55.4%	41	44.6%	92	0.4%
Endocrine, nutritional, metabolic, immunity	104	24.3%	324	75.7%	428	1.9%
Diseases of the blood & blood-forming organs	34	29.6%	81	70.4%	115	0.5%
Mental disorders	46	4.7%	942	95.3%	988	4.3%
Diseases of the nervous system and sense organs	72	4.5%	1,528	95.5%	1,600	6.9%
Diseases of the circulatory system	409	17.3%	1,953	82.7%	2,362	10.2%
Diseases of the respiratory system	544	21.6%	1,972	78.4%	2,516	10.9%
Diseases of the digestive system	410	22.1%	1,444	77.9%	1,854	8.0%
Diseases of the genitourinary system	120	10.4%	1,030	89.6%	1,150	5.0%
Pregnancy, childbirth, and the puerperium	6	1.6%	367	98.4%	373	1.6%
Diseases of the skin and subcutaneous tissue	81	13.6%	516	86.4%	597	2.6%
Musculoskeletal system and connective tissue	54	3.8%	1,379	96.2%	1,433	6.2%
Congenital anomalies	0	0.0%	7	100.0%	7	0.0%
Conditions originating in the perinatal period	0	0.0%	31	100.0%	31	0.1%
Injury & poisoning	293	4.9%	5,733	95.1%	6,026	26.1%
Symptoms, signs & ill-defined conditions	46	1.7%	2,591	98.3%	2,637	11.4%
Residual codes, unclassified, all Ecodes	11	5.1%	206	94.9%	217	0.9%
Total	2,586	11.2%	20,519	88.8%	23,105	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
Springfield Hospital						
Infectious & parasitic diseases	38	12.5%	266	87.5%	304	1.8%
Neoplasms	14	31.1%	31	68.9%	45	0.3%
Endocrine, nutritional, metabolic, immunity	50	17.7%	233	82.3%	283	1.7%
Diseases of the blood & blood-forming organs	15	40.5%	22	59.5%	37	0.2%
Mental disorders	171	21.8%	614	78.2%	785	4.7%
Diseases of the nervous system and sense organs	24	2.0%	1,159	98.0%	1,183	7.1%
Diseases of the circulatory system	210	15.2%	1,170	84.8%	1,380	8.2%
Diseases of the respiratory system	305	13.6%	1,934	86.4%	2,239	13.4%
Diseases of the digestive system	205	13.4%	1,327	86.6%	1,532	9.1%
Diseases of the genitourinary system	75	10.7%	626	89.3%	701	4.2%
Pregnancy, childbirth, and the puerperium	6	2.5%	234	97.5%	240	1.4%
Diseases of the skin and subcutaneous tissue	28	4.5%	590	95.5%	618	3.7%
Musculoskeletal system and connective tissue	26	3.4%	730	96.6%	756	4.5%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	32	100.0%	32	0.2%
Injury & poisoning	122	2.8%	4,285	97.2%	4,407	26.3%
Symptoms, signs & ill-defined conditions	27	1.3%	2,044	98.7%	2,071	12.4%
Residual codes, unclassified, all Ecodes	8	5.8%	129	94.2%	137	0.8%
Total	1,324	7.9%	15,426	92.1%	16,750	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
2016 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) High Level Diagnosis Groups
Vermont Hospitals by Setting

CCS Diagnosis Groups	Inpatient Discharges Originating in ED		ED Visits Not Admitted		All ED Visits	
	N	Row%	N	Row%	N	Col%
University of Vermont Medical Center						
Infectious & parasitic diseases	830	58.7%	584	41.3%	1,414	2.5%
Neoplasms	354	76.6%	108	23.4%	462	0.8%
Endocrine, nutritional, metabolic, immunity	405	35.1%	749	64.9%	1,154	2.0%
Diseases of the blood & blood-forming organs	150	50.5%	147	49.5%	297	0.5%
Mental disorders	542	14.0%	3,342	86.0%	3,884	6.9%
Diseases of the nervous system and sense organs	419	9.2%	4,141	90.8%	4,560	8.1%
Diseases of the circulatory system	2,025	33.2%	4,081	66.8%	6,106	10.8%
Diseases of the respiratory system	879	16.9%	4,307	83.1%	5,186	9.2%
Diseases of the digestive system	1,194	27.8%	3,094	72.2%	4,288	7.6%
Diseases of the genitourinary system	338	11.6%	2,581	88.4%	2,919	5.2%
Pregnancy, childbirth, and the puerperium	50	7.8%	595	92.2%	645	1.1%
Diseases of the skin and subcutaneous tissue	138	9.2%	1,360	90.8%	1,498	2.6%
Musculoskeletal system and connective tissue	282	7.4%	3,523	92.6%	3,805	6.7%
Congenital anomalies	25	55.6%	20	44.4%	45	0.1%
Conditions originating in the perinatal period	1	1.3%	74	98.7%	75	0.1%
Injury & poisoning	1,622	12.3%	11,606	87.7%	13,228	23.4%
Symptoms, signs & ill-defined conditions	177	2.7%	6,336	97.3%	6,513	11.5%
Residual codes, unclassified, all Ecodes	40	7.1%	520	92.9%	560	1.0%
Total	9,471	16.7%	47,168	83.3%	56,639	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
2016 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	1,528	5,674	3,148	584	489	394	879	10,350	2,346	12,696
Central Vermont Medical Center	2,909	9,201	5,469	1,159	798	752	1,500	17,579	4,209	21,788
Copley Hospital	2,082	5,635	2,801	591	451	418	567	10,518	2,027	12,545
Gifford Medical Center	993	2,994	1,461	316	239	186	370	5,448	1,111	6,559
Grace Cottage Hospital	406	912	704	170	176	151	298	2,022	795	2,817
Mt. Ascutney Hospital and Health Center	541	1,533	1,181	280	224	169	418	3,255	1,091	4,346
North Country Hospital	2,228	6,118	3,236	750	675	556	910	11,582	2,891	14,473
Northeastern Vermont Regional Hospital	1,900	5,681	2,944	665	554	443	788	10,525	2,450	12,975
Northwestern Medical Center	3,414	10,197	5,590	1,020	826	680	1,356	19,201	3,882	23,083
Porter Medical Center	1,745	5,665	3,271	663	635	468	977	10,681	2,743	13,424
Rutland Regional Medical Center	3,589	12,544	7,421	1,355	1,038	948	1,752	23,554	5,093	28,647
Southwestern Vermont Medical Center	2,694	8,374	4,903	1,150	821	802	1,775	15,971	4,548	20,519
Springfield Hospital	2,308	6,464	3,837	683	644	550	940	12,609	2,817	15,426
University of Vermont Medical Center	5,761	21,331	11,458	2,333	1,718	1,497	3,070	38,550	8,618	47,168
Total	32,098	102,323	57,424	11,719	9,288	8,014	15,600	191,845	44,621	236,466

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
2016 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%		
Brattleboro Memorial Hospital	3,285	25.9%	4,708	37.1%	82	0.6%	286	2.3%	3,500	27.6%	828	6.5%	7	0.1%	12,696	5.4%
Central Vermont Medical Center	5,729	26.3%	7,518	34.5%	279	1.3%	436	2.0%	6,679	30.7%	1,147	5.3%	-	0.0%	21,788	9.2%
Copley Hospital	2,629	21.0%	4,892	39.0%	189	1.5%	249	2.0%	3,820	30.5%	751	6.0%	15	0.1%	12,545	5.3%
Gifford Medical Center	1,423	21.7%	2,536	38.7%	71	1.1%	155	2.4%	1,905	29.0%	469	7.2%	-	0.0%	6,559	2.8%
Grace Cottage Hospital	828	29.4%	758	26.9%	18	0.6%	55	2.0%	944	33.5%	212	7.5%	2	0.1%	2,817	1.2%
Mt. Ascutney Hospital and Health Center	1,330	30.6%	1,157	26.6%	-	0.0%	94	2.2%	1,413	32.5%	345	7.9%	7	0.2%	4,346	1.8%
North Country Hospital	3,780	26.1%	6,453	44.6%	116	0.8%	316	2.2%	3,268	22.6%	540	3.7%	-	0.0%	14,473	6.1%
Northeastern Vermont Regional Hospital	2,997	23.1%	5,123	39.5%	57	0.4%	245	1.9%	3,843	29.6%	710	5.5%	-	0.0%	12,975	5.5%
Northwestern Medical Center	5,217	22.6%	9,203	39.9%	290	1.3%	376	1.6%	6,727	29.1%	1,239	5.4%	31	0.1%	23,083	9.8%
Porter Medical Center	3,446	25.7%	4,096	30.5%	71	0.5%	233	1.7%	4,594	34.2%	818	6.1%	166	1.2%	13,424	5.7%
Rutland Regional Medical Center	7,770	27.1%	10,837	37.8%	195	0.7%	706	2.5%	7,525	26.3%	1,614	5.6%	-	0.0%	28,647	12.1%
Southwestern Vermont Medical Center	5,567	27.1%	6,105	29.8%	137	0.7%	438	2.1%	7,308	35.6%	964	4.7%	-	0.0%	20,519	8.7%
Springfield Hospital	4,113	26.7%	5,742	37.2%	93	0.6%	173	1.1%	3,989	25.9%	1,306	8.5%	10	0.1%	15,426	6.5%
University of Vermont Medical Center	9,939	21.1%	13,568	28.8%	787	1.7%	857	1.8%	19,241	40.8%	2,555	5.4%	221	0.5%	47,168	19.9%
Total	58,053	24.6%	82,696	35.0%	2,385	1.0%	4,619	2.0%	74,756	31.6%	13,498	5.7%	459	0.2%	236,466	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
2016 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															
	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	645	16.7%	1,719	44.6%	37	1.0%	10	0.3%	1,151	29.9%	288	7.5%	4	0.1%	3,854	1.6%
Neoplasms	181	46.5%	72	18.5%	10	2.6%	1	0.3%	115	29.6%	9	2.3%	1	0.3%	389	0.2%
Endocrine, nutritional, metabolic, immunity	1,465	43.3%	896	26.5%	27	0.8%	9	0.3%	833	24.6%	146	4.3%	10	0.3%	3,386	1.4%
Diseases of the blood & blood-forming organs	272	50.3%	96	17.7%	3	0.6%	-	0.0%	155	28.7%	11	2.0%	4	0.7%	541	0.2%
Mental disorders	2,685	22.8%	5,260	44.7%	98	0.8%	27	0.2%	2,824	24.0%	869	7.4%	5	0.0%	11,768	5.0%
Diseases of the nervous system and sense organs	4,446	23.3%	7,465	39.1%	219	1.1%	111	0.6%	5,903	30.9%	938	4.9%	20	0.1%	19,102	8.1%
Diseases of the circulatory system	7,885	42.0%	3,530	18.8%	207	1.1%	41	0.2%	6,433	34.2%	647	3.4%	49	0.3%	18,792	7.9%
Diseases of the respiratory system	6,093	23.2%	11,116	42.4%	224	0.9%	27	0.1%	7,236	27.6%	1,475	5.6%	41	0.2%	26,212	11.1%
Diseases of the digestive system	4,272	23.8%	7,009	39.1%	144	0.8%	22	0.1%	5,129	28.6%	1,345	7.5%	20	0.1%	17,941	7.6%
Diseases of the genitourinary system	3,408	28.2%	3,666	30.3%	143	1.2%	10	0.1%	4,217	34.9%	638	5.3%	14	0.1%	12,096	5.1%
Pregnancy, childbirth, and the puerperium	78	2.9%	1,627	60.6%	21	0.8%	5	0.2%	800	29.8%	155	5.8%	-	0.0%	2,686	1.1%
Diseases of the skin and subcutaneous tissue	1,957	23.5%	3,263	39.1%	86	1.0%	53	0.6%	2,258	27.1%	704	8.4%	16	0.2%	8,337	3.5%
Musculoskeletal system and connective tissue	5,182	29.5%	5,682	32.3%	154	0.9%	502	2.9%	5,151	29.3%	890	5.1%	33	0.2%	17,594	7.4%
Congenital anomalies	2	4.0%	25	50.0%	1	2.0%	-	0.0%	20	40.0%	2	4.0%	-	0.0%	50	0.0%
Conditions originating in the perinatal period	1	0.4%	143	54.6%	5	1.9%	-	0.0%	66	25.2%	47	17.9%	-	0.0%	262	0.1%
Injury & poisoning	12,242	19.2%	20,253	31.8%	693	1.1%	3,572	5.6%	22,878	36.0%	3,764	5.9%	197	0.3%	63,599	26.9%
Symptoms, signs & ill-defined conditions	6,285	22.8%	10,258	37.3%	291	1.1%	125	0.5%	9,044	32.9%	1,482	5.4%	39	0.1%	27,524	11.6%
Residual codes, unclassified, all Ecodes	954	40.9%	616	26.4%	22	0.9%	104	4.5%	543	23.3%	88	3.8%	6	0.3%	2,333	1.0%
Total	58,053	24.6%	82,696	35.0%	2,385	1.0%	4,619	2.0%	74,756	31.6%	13,498	5.7%	459	0.2%	236,466	100.0%

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

ED visits include all hospital records that originated in the ED and did not result in hospital admission.

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

Table E-7
2016 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	9,879	\$19,492,895	2,817	\$5,408,267	12,696	\$24,901,162
Central Vermont Medical Center	20,888	\$50,764,587	900	\$2,278,450	21,788	\$53,043,037
Copley Hospital	11,359	\$11,386,139	1,186	\$1,196,995	12,545	\$12,583,134
Gifford Medical Center	6,310	\$12,015,413	249	\$554,173	6,559	\$12,569,586
Grace Cottage Hospital	2,388	\$4,219,570	429	\$608,416	2,817	\$4,827,987
Mt. Ascutney Hospital and Health Center	3,414	\$6,124,145	932	\$1,723,634	4,346	\$7,847,779
North Country Hospital	13,634	\$26,705,241	839	\$1,706,119	14,473	\$28,411,360
Northeastern Vermont Regional Hospital	12,229	\$22,141,347	746	\$1,242,577	12,975	\$23,383,924
Northwestern Medical Center	22,607	\$32,135,951	476	\$672,146	23,083	\$32,808,096
Porter Medical Center	12,058	\$21,024,884	1,366	\$2,062,973	13,424	\$23,087,857
Rutland Regional Medical Center	25,987	\$48,067,682	2,660	\$5,239,841	28,647	\$53,307,523
Southwestern Vermont Medical Center	14,679	\$33,574,720	5,840	\$14,274,151	20,519	\$47,848,871
Springfield Hospital	12,647	\$28,243,852	2,779	\$6,508,981	15,426	\$34,752,833
University of Vermont Medical Center	43,856	\$132,919,071	3,312	\$11,952,741	47,168	\$144,871,811
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 the User's Guide to Vermont Hospitals Report for details.

Outpatient Procedures and Services

Table O-1
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Vermont Hospitals by State of Residence

Vermont Hospital	Vermont Residents		Non-residents		All Outpatient Procedures	
	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	5,611	86.7%	860	13.3%	6,471	4.9%
Central Vermont Medical Center	9,207	99.3%	64	0.7%	9,271	7.0%
Copley Hospital	4,443	99.1%	40	0.9%	4,483	3.4%
Gifford Medical Center	1,960	98.3%	34	1.7%	1,994	1.5%
Grace Cottage Hospital	1	50.0%	1	50.0%	2	0.0%
Mt. Ascutney Hospital and Health Center	1,078	59.2%	744	40.8%	1,822	1.4%
North Country Hospital	4,251	99.2%	35	0.8%	4,286	3.2%
Northeastern Vermont Regional Hospital	4,063	91.6%	374	8.4%	4,437	3.3%
Northwestern Medical Center	5,934	99.2%	46	0.8%	5,980	4.5%
Porter Medical Center	2,886	89.5%	337	10.5%	3,223	2.4%
Rutland Regional Medical Center	16,259	95.1%	841	4.9%	17,100	12.9%
Southwestern Vermont Medical Center	7,159	75.8%	2,284	24.2%	9,443	7.1%
Springfield Hospital	2,304	86.8%	349	13.2%	2,653	2.0%
University of Vermont Medical Center	54,673	88.9%	6,857	11.1%	61,530	46.4%
Total	119,829	90.3%	12,866	9.7%	132,695	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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Vermont Hospitals by Data Year: Five-year Comparison

Vermont Hospital	2012	2013	2014	2015	2016
Brattleboro Memorial Hospital	3,376	3,990	5,801	4,237	6,471
Central Vermont Medical Center	7,759	7,653	8,984	8,800	9,271
Copley Hospital	4,078	5,579	7,814	4,442	4,483
Gifford Medical Center	2,455	2,513	2,377	1,845	1,994
Grace Cottage Hospital	-	-	3	-	2
Mt. Ascutney Hospital and Health Center	1,226	1,768	1,863	1,827	1,822
North Country Hospital	3,617	3,976	4,662	3,963	4,286
Northeastern Vermont Regional Hospital	2,863	2,585	4,057	3,761	4,437
Northwestern Medical Center	6,423	5,681	6,212	6,190	5,980
Porter Medical Center	3,301	3,340	3,493	3,486	3,223
Rutland Regional Medical Center	8,525	10,356	14,576	15,695	17,100
Southwestern Vermont Medical Center	6,820	6,053	9,136	9,168	9,443
Springfield Hospital	2,385	2,254	2,635	2,493	2,653
University of Vermont Medical Center	48,006	46,514	59,298	62,527	61,530
Total	100,834	102,262	130,911	128,434	132,695

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
2016 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	35	19	2	3	-	2	13	6	13	4	62	28	-	484	671
Neoplasms	543	753	212	243	1	197	505	674	397	141	804	1,699	181	8,239	14,589
Endocrine, nutritional, metabolic, immunity	235	36	3	12	-	6	31	26	27	10	94	50	6	1,575	2,111
Diseases of the blood & blood-forming organs	16	48	15	3	-	26	23	17	27	14	134	52	6	281	662
Mental disorders	32	124	-	3	-	13	288	21	68	3	41	34	-	155	782
Diseases of the nervous system and sense organs	659	888	203	296	-	314	520	605	486	581	2,832	115	270	7,513	15,282
Diseases of the circulatory system	245	193	32	42	-	11	99	47	64	41	368	195	35	2,854	4,226
Diseases of the respiratory system	240	615	99	106	-	102	775	287	377	119	2,188	1,393	275	4,693	11,269
Diseases of the digestive system	594	1,012	263	225	1	285	513	354	1,298	333	1,453	897	440	5,120	12,788
Diseases of the genitourinary system	464	530	261	189	-	6	149	167	328	210	1,005	811	230	7,293	11,643
Pregnancy, childbirth, and the puerperium	302	553	292	191	-	-	280	412	282	26	328	403	146	1,617	4,832
Diseases of the skin and subcutaneous tissue	338	103	52	19	-	17	39	231	182	18	237	77	23	3,076	4,412
Musculoskeletal system and connective tissue	1,244	1,025	634	215	-	111	405	571	706	186	4,363	636	121	8,860	19,077
Congenital anomalies	8	6	3	11	-	-	5	5	10	4	16	9	5	288	370
Conditions originating in the perinatal period	3	51	-	-	-	-	21	6	19	38	1	13	9	17	178
Injury & poisoning	494	454	386	145	-	15	131	205	323	227	750	200	153	2,190	5,673
Symptoms, signs & ill-defined conditions	990	2,803	2,021	273	-	714	435	801	1,358	1,262	2,387	2,133	750	6,524	22,451
Residual codes, unclassified, all Ecodes	29	58	5	18	-	3	54	2	15	6	37	698	3	751	1,679
Total	6,471	9,271	4,483	1,994	2	1,822	4,286	4,437	5,980	3,223	17,100	9,443	2,653	61,530	132,695

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
2016 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	273	701	352	138	-	92	284	407	459	95	2,261	465	76	7,722	13,325
Operations on the endocrine system	1	5	-	-	-	-	6	6	1	3	39	35	-	235	331
Operations on the eye	477	628	91	209	-	300	402	478	325	400	461	1	173	3,913	7,858
Operations on the ear	110	60	-	-	-	8	19	13	-	86	1,402	28	32	1,455	3,213
Operations on the nose, mouth, and pharynx	9	118	4	7	1	18	123	46	10	111	1,099	82	37	1,581	3,246
Operations on the respiratory system	315	584	105	131	-	109	814	291	419	48	1,902	1,766	248	5,361	12,093
Operations on the cardiovascular system	275	591	126	56	-	5	588	622	224	77	704	435	114	4,719	8,536
Operations on the hemic and lymphatic system	12	10	-	2	-	3	3	4	2	4	47	11	3	147	248
Operations on the digestive system	1,685	3,396	988	676	-	1,190	1,142	1,191	2,821	1,596	3,378	3,778	1,215	15,763	38,819
Operations on the urinary system	325	301	211	126	-	-	28	102	82	111	907	167	79	3,082	5,521
Operations on the male genital organs	32	110	21	20	-	-	28	40	35	76	170	48	36	692	1,308
Operations on the female genital organs	314	942	101	76	-	6	177	78	307	101	434	1,541	165	1,766	6,008
Obstetrical procedures	253	511	301	173	-	-	253	394	217	2	130	242	113	1,318	3,907
Operations on the musculoskeletal system	1,572	936	760	302	-	41	312	468	698	412	3,432	394	260	6,079	15,666
Operations on the integumentary system	818	378	1,423	78	1	50	107	297	380	101	734	450	102	7,697	12,616
Total	6,471	9,271	4,483	1,994	2	1,822	4,286	4,437	5,980	3,223	17,100	9,443	2,653	61,530	132,695

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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2012 - 2016

CCS High Level Procedure Group CCS Single Level Procedure Group	2012	2013	2014	2015	2016
1 Operations on the nervous system					
1 Incision & excision of CNS	-	1	1	-	-
2 Insertion, replacem, rem of extracranial ventricular shunt	5	3	17	16	8
3 Laminectomy, excision intervertebral disc	453	452	401	443	367
4 Diagnostic spinal tap	138	200	124	37	59
5 Insert cath, spinal stimulator, inject into spinal canal	4,253	3,360	2,932	4,523	4,386
6 Decompression peripheral nerve	1,772	1,705	1,617	1,585	1,618
7 Other diagnostic nervous system procedures	15	15	1,813	2,676	2,704
8 Other non-OR or closed therapeutic nerv syst procs	653	473	1,435	2,413	2,341
9 Other OR therapeutic nervous system procedures	1,078	1,111	1,388	1,765	1,842
Total	8,367	7,320	9,728	13,458	13,325
2 Operations on the endocrine system					
10 Thyroidectomy, partial or complete	195	192	163	160	211
11 Diagnostic endocrine procedures	320	365	227	28	27
12 Other therapeutic endocrine procedures	61	66	97	81	93
Total	576	623	487	269	331
3 Operations on the eye					
13 Corneal transplant	20	20	11	10	9
14 Glaucoma procedures	194	195	180	307	352
15 Lens & cataract procedures	4,607	4,670	4,422	4,320	4,280
16 Repair of retinal tear, detachment	331	263	299	246	182
17 Destruction of lesion of retina & choroid	186	179	122	109	87
18 Diagnostic procedures on eye	21	21	32	37	23
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	375	397	295	391	403
20 Other intraocular therapeutic procedures	2,053	2,032	1,947	2,195	2,418
21 Other extraocular muscle & orbit therapeutic procedures	150	125	114	112	104
Total	7,937	7,902	7,422	7,727	7,858
4 Operations on the ear					
22 Tympanoplasty	93	125	98	69	76
23 Myringotomy	1,024	951	817	911	873
24 Mastoidectomy	24	27	29	19	30
25 Diagnostic procedures on ear	16	34	24	1	3
26 Other therapeutic ear procedures	316	475	1,682	1,971	2,231
Total	1,473	1,612	2,650	2,971	3,213

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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2012 - 2016

CCS High Level Procedure Group CCS Single Level Procedure Group	2012	2013	2014	2015	2016
5 Operations on the nose, mouth, and pharynx					
27 Control of epistaxis	85	111	147	145	154
28 Plastic procedures on nose	272	237	238	198	140
29 Dental procedures	628	710	568	55	37
30 Tonsillectomy and/or adenoidectomy	830	759	691	629	571
31 Diagnostic procedures on nose, mouth & pharynx	588	1,065	1,664	1,751	1,955
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	380	461	210	26	44
33 Other OR therapeutic procedures on nose, mouth & pharynx	478	516	457	371	345
Total	3,261	3,859	3,975	3,175	3,246
6 Operations on the respiratory system					
34 Tracheostomy, temporary & permanent	1	-	-	2	5
35 Tracheoscopy & laryngoscopy with biopsy	922	1,728	1,773	1,747	1,643
36 Lobectomy or pneumonectomy	10	10	-	-	1
37 Diagnostic bronchoscopy & biopsy of bronchus	538	507	416	295	369
38 Other diagnostic procedures on lung & bronchus	1	2	7,800	9,740	9,660
39 Incision of pleura, thoracentesis, chest drainage	191	216	229	227	236
40 Other diagnostic proc of respiratory tract & mediastinum	18	31	31	13	15
41 Other non-OR therapeutic procedures on respiratory system	19	24	31	11	11
42 Other OR therapeutic procedures on respiratory system	126	101	129	141	153
Total	1,826	2,619	10,409	12,176	12,093
7 Operations on the cardiovascular system					
43 Heart valve procedures	-	2	2	-	1
45 Percutaneous transluminal coronary angioplasty (PTCA)	336	202	43	23	10
47 Diagnostic cardiac catheterization, coronary arteriography	795	622	1,144	1,081	1,141
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	332	420	433	483	1,474
49 Other OR heart procedures	30	98	116	7	4
51 Endarterectomy, vessel of head & neck	-	-	1	-	2
52 Aortic resection, replacement or anastomosis	-	1	-	1	-
53 Varicose vein stripping, lower limb	110	92	165	205	209
54 Other vascular catheterization, not heart	823	680	975	1,098	1,026
55 Peripheral vascular bypass	-	3	-	-	-
56 Other vascular bypass & shunt, not heart	-	2	5	6	6
57 Creat, revis, rem of arteriovenous fistula or cannula for dialysis	126	112	128	148	165
58 Hemodialysis	2	3	5	12	56

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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2012 - 2016

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2012	2013	2014	2015	2016
59 Other OR procedures on vessels of head & neck	12	15	54	97	100
60 Embolectomy & endarterectomy of lower limbs	1	-	1	-	1
61 Other OR procedures on vessels other than head & neck	721	702	624	397	403
62 Other diagnostic cardiovascular procedures	228	206	848	677	663
63 Other non-OR therapeutic cardiovascular procedures	64	81	2,729	3,036	3,275
Total	3,580	3,241	7,273	7,271	8,536
8 Operations on the hemic and lymphatic system					
64 Bone marrow transplant	9	7	23	38	23
65 Bone marrow biopsy	203	250	182	41	75
66 Procedures on spleen	1	2	5	1	1
67 Other therap procedures, hemic & lymphatic system	305	301	296	175	149
Total	518	560	506	255	248
9 Operations on the digestive system					
68 Injection or ligation of esophageal varices	-	-	26	47	46
69 Esophageal dilatation	431	430	466	484	509
70 Upper gastrointestinal endoscopy, biopsy	5,589	5,243	5,128	5,109	5,434
71 Gastrostomy, temporary & permanent	65	58	153	152	114
72 Colostomy, temporary & permanent	-	-	-	2	2
73 Ileostomy & other enterostomy	3	9	19	14	16
75 Small bowel resection	-	-	3	1	-
76 Colonoscopy & biopsy	12,290	12,698	17,936	23,156	24,716
77 Proctoscopy & anorectal biopsy	523	387	548	615	664
78 Colorectal resection	4	3	8	17	14
79 Local excision of large intestine lesion (not endoscopic)	-	2	1	2	-
80 Appendectomy	53	57	44	57	59
81 Hemorrhoid procedures	238	187	204	226	203
82 Endoscopic retrograde cannulation of pancreas (ERCP)	33	33	95	146	159
83 Biopsy of liver	278	242	97	2	1
84 Cholecystectomy & common duct exploration	1,302	1,193	1,090	1,052	1,024
85 Inguinal & femoral hernia repair	1,216	1,294	1,174	1,118	1,062
86 Other hernia repair	787	875	886	865	846
87 Laparoscopy	74	88	78	86	82
88 Abdominal paracentesis	222	254	281	258	309
89 Exploratory laparotomy	1	2	-	4	-

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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2012 - 2016

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2012	2013	2014	2015	2016
90 Excision, lysis peritoneal adhesions	27	36	22	2	1
91 Peritoneal dialysis	-	-	2,806	2,683	2,769
92 Other bowel diagnostic procedures	31	31	12	-	-
93 Other non-OR upper GI therapeutic procedures	275	342	277	36	21
94 Other OR upper GI therapeutic procedures	91	57	46	33	33
95 Other non-OR lower GI therapeutic procedures	9,971	10,308	5,539	58	64
96 Other OR lower GI therapeutic procedures	263	256	248	173	198
97 Other gastrointestinal diagnostic procedures	100	93	258	220	280
98 Other non-OR gastrointestinal therapeutic procedures	179	162	88	15	66
99 Other OR gastrointestinal therapeutic procedures	90	98	117	87	127
Total	34,136	34,438	37,650	36,720	38,819
10 Operations on the urinary system					
100 Endoscopy & endoscopic biopsy of the urinary tract	1,787	2,087	2,100	1,667	1,655
101 Transurethral excision, drainage, rem urinary obstruction	833	851	776	655	614
102 Ureteral catheterization	255	270	300	269	254
103 Nephrotomy & nephrostomy	38	23	19	10	72
104 Nephrectomy, partial or complete	-	1	3	2	4
106 Genitourinary incontinence procedures	238	185	150	159	209
107 Extracorporeal lithotripsy, urinary	8	7	587	780	842
108 Indwelling catheter	211	145	352	518	574
109 Procedures on the urethra	183	163	160	191	218
110 Other diagnostic procedures of urinary tract	124	142	76	9	11
111 Other non-OR therapeutic procedures of urinary tract	186	177	605	739	803
112 Other OR therapeutic procedures of urinary tract	49	75	174	275	265
Total	3,912	4,126	5,302	5,274	5,521
11 Operations on the male genital organs					
113 Transurethral resection of prostate (TURP)	204	140	155	87	144
114 Open prostatectomy	1	6	11	1	3
115 Circumcision	256	228	250	249	286
116 Diagnostic procedures, male genital	267	262	274	223	209
117 Other non-OR therapeutic procedures, male genital	121	124	156	164	162
118 Other OR therapeutic procedures, male genital	328	337	405	476	504
Total	1,177	1,097	1,251	1,200	1,308

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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2012 - 2016

CCS High Level Procedure Group CCS Single Level Procedure Group	2012	2013	2014	2015	2016
12 Operations on the female genital organs					
119 Oophorectomy, unilateral & bilateral	217	194	206	303	327
120 Other operations on ovary	232	183	99	2	35
121 Ligation of fallopian tubes	293	324	280	216	139
123 Other operations on fallopian tubes	36	39	35	28	27
124 Hysterectomy, abdominal & vaginal	573	553	569	554	633
125 Other excision of cervix & uterus	616	630	516	363	401
126 Abortion (termination of pregnancy)	25	32	35	33	47
127 D&C, aspiration after delivery or abortion	230	241	250	210	185
128 Diagnostic dilatation & curettage (D&C)	619	540	338	45	38
129 Repair cystocele & rectocele, oblit of vaginal vault	101	73	87	98	120
130 Other diagnostic procedures, female organs	268	342	3,129	3,478	3,182
131 Other non-OR therapeutic procedures, female organs	65	124	552	572	538
132 Other OR therapeutic procedures, female organs	336	293	319	316	336
Total	3,611	3,568	6,415	6,218	6,008
13 Obstetrical procedures					
122 Removal of ectopic pregnancy	4	7	6	5	13
134 Cesarean section	1	-	1	-	-
135 Forceps, vacuum & breech delivery	-	-	3	2	1
137 Other procedures to assist delivery	39	26	50	43	42
138 Diagnostic amniocentesis	6	2	-	-	1
139 Fetal monitoring	4,552	3,048	5,509	3,833	3,826
140 Repair of current obstetric laceration	1	2	4	1	-
141 Other therapeutic obstetrical procedures	18	14	16	22	24
Total	4,621	3,099	5,589	3,906	3,907
14 Operations on the musculoskeletal system					
142 Partial excision bone	404	346	423	444	449
143 Bunionectomy or repair of toe deformities	631	706	542	505	495
144 Treatment, facial fracture or dislocation	65	64	58	76	78
145 Treatment, fracture or disloc of radius & ulna	429	445	452	416	464
146 Treatment, fracture or disloc of hip & femur	59	63	33	17	13
147 Treatment, fracture or disloc of lower extremity	618	649	632	460	474
148 Other fracture & dislocation procedure	612	603	542	538	507
149 Arthroscopy	624	548	385	395	353

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
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2012 - 2016

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2012	2013	2014	2015	2016
150 Division of joint capsule, ligament or cartilage	93	72	89	93	90
151 Excision of semilunar cartilage of knee	1,505	1,364	1,307	1,284	1,227
152 Arthroplasty knee	289	260	120	47	56
153 Hip replacement, total & partial	-	2	23	45	31
154 Arthroplasty other than hip or knee	603	499	360	274	222
155 Arthrocentesis	183	203	2,568	3,932	5,229
156 Injections & aspirations of muscles, tendons, etc.	445	490	1,253	1,284	1,277
157 Amputation of lower extremity	90	140	141	134	131
158 Spinal fusion	132	133	73	31	30
159 Other diagnostic procedures on musculoskeletal system	110	126	157	87	78
160 Other therapeutic procedures on muscles & tendons	2,794	2,693	2,567	2,450	2,614
161 Other OR therapeutic procedures on bone	267	256	487	650	601
162 Other OR therapeutic procedures on joints	1,025	1,041	1,018	1,051	1,160
163 Other non-OR therapeutic procedures on musc system	4,337	6,187	4,662	16	25
164 Other OR therapeutic procedures on musc system	69	105	74	80	62
Total	15,384	16,995	17,966	14,309	15,666
15 Operations on the integumentary system					
165 Breast biopsy & other diagnostic procedures on breast	1,425	1,269	1,243	1,056	1,029
166 Lumpectomy, quadrantectomy of breast	781	728	626	502	455
167 Mastectomy	81	86	81	64	68
168 Incision & drainage, skin & subcutaneous tissue	169	176	268	280	261
169 Debridement of wound, infection or burn	135	665	1,477	665	660
170 Excision of skin lesion	3,503	3,638	4,366	4,968	4,720
171 Suture of skin & subcutaneous tissue	231	334	619	972	721
172 Skin graft	67	69	277	493	561
173 Other diagnostic proc on skin & subcutaneous tissue	1,380	1,435	784	96	160
174 Other non-OR therapeutic procedures on skin & breast	2,021	2,005	3,897	4,011	3,604
175 Other OR therapeutic procedures on skin & breast	662	798	650	398	377
Total	10,455	11,203	14,288	13,505	12,616
Yearly Total	100,834	102,262	130,911	128,434	132,695

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

Table O-6
2016 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Vermont Hospitals by Age Group

<u>Vermont Hospital</u>	<u>Age Group</u>								<u>Total</u>	
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>		<u>65+</u>
Brattleboro Memorial Hospital	169	960	2,220	932	802	624	764	3,349	3,122	6,471
Central Vermont Medical Center	187	2,177	3,823	1,133	873	537	541	6,187	3,084	9,271
Copley Hospital	37	887	1,533	491	465	399	671	2,457	2,026	4,483
Gifford Medical Center	41	470	799	257	197	121	109	1,310	684	1,994
Grace Cottage Hospital	-	-	-	-	-	1	1	-	2	2
Mt. Ascutney Hospital and Health Center	22	150	774	316	261	164	135	946	876	1,822
North Country Hospital	102	804	1,576	596	588	341	279	2,482	1,804	4,286
Northeastern Vermont Regional Hospital	115	883	1,693	601	470	318	357	2,691	1,746	4,437
Northwestern Medical Center	57	1,345	2,559	691	590	385	353	3,961	2,019	5,980
Porter Medical Center	165	436	1,402	422	351	244	203	2,003	1,220	3,223
Rutland Regional Medical Center	270	2,634	6,129	2,352	2,097	1,577	2,041	9,033	8,067	17,100
Southwestern Vermont Medical Center	85	1,957	4,060	1,153	892	657	639	6,102	3,341	9,443
Springfield Hospital	56	605	1,101	350	240	198	103	1,762	891	2,653
University of Vermont Medical Center	2,782	9,901	20,475	8,526	7,048	5,299	7,499	33,158	28,372	61,530
Total	4,088	23,209	48,144	17,820	14,874	10,865	13,695	75,441	57,254	132,695

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
2016 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	3,424	52.9%	1,281	19.8%	36	0.6%	57	0.9%	1,655	25.6%	12	0.2%	6	0.1%	6,471	4.9%
Central Vermont Medical Center	3,241	35.0%	1,466	15.8%	132	1.4%	92	1.0%	4,278	46.1%	62	0.7%	-	0.0%	9,271	7.0%
Copley Hospital	1,012	22.6%	603	13.5%	42	0.9%	108	2.4%	1,407	31.4%	1,311	29.2%	-	0.0%	4,483	3.4%
Gifford Medical Center	695	34.9%	365	18.3%	13	0.7%	26	1.3%	860	43.1%	35	1.8%	-	0.0%	1,994	1.5%
Grace Cottage Hospital	2	100.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	2	0.0%
Mt. Ascutney Hospital and Health Center	830	45.6%	143	7.8%	-	0.0%	3	0.2%	842	46.2%	2	0.1%	2	0.1%	1,822	1.4%
North Country Hospital	1,980	46.2%	911	21.3%	33	0.8%	46	1.1%	1,310	30.6%	6	0.1%	-	0.0%	4,286	3.2%
Northeastern Vermont Regional Hospital	1,733	39.1%	917	20.7%	14	0.3%	70	1.6%	1,670	37.6%	33	0.7%	-	0.0%	4,437	3.3%
Northwestern Medical Center	2,015	33.7%	987	16.5%	62	1.0%	71	1.2%	2,812	47.0%	31	0.5%	2	0.0%	5,980	4.5%
Porter Medical Center	1,254	38.9%	406	12.6%	9	0.3%	20	0.6%	1,509	46.8%	21	0.7%	4	0.1%	3,223	2.4%
Rutland Regional Medical Center	9,262	54.2%	2,175	12.7%	128	0.7%	217	1.3%	5,200	30.4%	116	0.7%	2	0.0%	17,100	12.9%
Southwestern Vermont Medical Center	3,564	37.7%	1,479	15.7%	45	0.5%	53	0.6%	4,256	45.1%	46	0.5%	-	0.0%	9,443	7.1%
Springfield Hospital	1,010	38.1%	514	19.4%	12	0.5%	14	0.5%	1,043	39.3%	60	2.3%	-	0.0%	2,653	2.0%
University of Vermont Medical Center	28,403	46.2%	7,912	12.9%	640	1.0%	643	1.0%	20,472	33.3%	216	0.4%	3,244	5.3%	61,530	46.4%
Total	58,425	44.0%	19,159	14.4%	1,166	0.9%	1,420	1.1%	47,314	35.7%	1,951	1.5%	3,260	2.5%	132,695	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
2016 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														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	399	59.5%	171	25.5%	3	0.4%	-	0.0%	94	14.0%	1	0.1%	3	0.4%	671	0.5%
Neoplasms	7,889	54.1%	1,324	9.1%	126	0.9%	5	0.0%	5,182	35.5%	37	0.3%	26	0.2%	14,589	11.0%
Endocrine, nutritional, metabolic, immunity	1,209	57.3%	345	16.3%	8	0.4%	2	0.1%	480	22.7%	5	0.2%	62	2.9%	2,111	1.6%
Diseases of the blood & blood-forming organs	365	55.1%	85	12.8%	5	0.8%	1	0.2%	201	30.4%	1	0.2%	4	0.6%	662	0.5%
Mental disorders	428	54.7%	174	22.3%	3	0.4%	-	0.0%	177	22.6%	-	0.0%	-	0.0%	782	0.6%
Diseases of the nervous system and sense organs	9,847	64.4%	1,782	11.7%	115	0.8%	167	1.1%	3,308	21.6%	38	0.2%	25	0.2%	15,282	11.5%
Diseases of the circulatory system	2,293	54.3%	398	9.4%	50	1.2%	2	0.0%	1,352	32.0%	15	0.4%	116	2.7%	4,226	3.2%
Diseases of the respiratory system	5,697	50.6%	2,001	17.8%	106	0.9%	17	0.2%	3,359	29.8%	74	0.7%	15	0.1%	11,269	8.5%
Diseases of the digestive system	4,372	34.2%	2,106	16.5%	141	1.1%	64	0.5%	6,000	46.9%	89	0.7%	16	0.1%	12,788	9.6%
Diseases of the genitourinary system	3,982	34.2%	1,234	10.6%	84	0.7%	-	0.0%	3,406	29.3%	49	0.4%	2,888	24.8%	11,643	8.8%
Pregnancy, childbirth, and the puerperium	112	2.3%	2,525	52.3%	50	1.0%	1	0.0%	2,088	43.2%	56	1.2%	-	0.0%	4,832	3.6%
Diseases of the skin and subcutaneous tissue	3,044	69.0%	718	16.3%	15	0.3%	7	0.2%	607	13.8%	12	0.3%	9	0.2%	4,412	3.3%
Musculoskeletal system and connective tissue	10,333	54.2%	2,328	12.2%	176	0.9%	699	3.7%	5,471	28.7%	53	0.3%	17	0.1%	19,077	14.4%
Congenital anomalies	49	13.2%	133	35.9%	5	1.4%	2	0.5%	176	47.6%	5	1.4%	-	0.0%	370	0.3%
Conditions originating in the perinatal period	-	0.0%	59	33.1%	4	2.2%	-	0.0%	83	46.6%	32	18.0%	-	0.0%	178	0.1%
Injury & poisoning	1,320	23.3%	1,043	18.4%	59	1.0%	447	7.9%	2,654	46.8%	92	1.6%	58	1.0%	5,673	4.3%
Symptoms, signs & ill-defined conditions	6,563	29.2%	2,473	11.0%	199	0.9%	6	0.0%	11,821	52.7%	1,369	6.1%	20	0.1%	22,451	16.9%
Residual codes, unclassified, all Ecodes	523	31.1%	260	15.5%	17	1.0%	-	0.0%	855	50.9%	23	1.4%	1	0.1%	1,679	1.3%
Total	58,425	44.0%	19,159	14.4%	1,166	0.9%	1,420	1.1%	47,314	35.7%	1,951	1.5%	3,260	2.5%	132,695	100.0%

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

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

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

Table O-9
2016 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	5,734	43.0%	2,253	16.9%	153	1.1%	587	4.4%	4,546	34.1%	39	0.3%	13	0.1%	13,325	10.0%
Operations on the endocrine system	86	26.0%	41	12.4%	3	0.9%	-	0.0%	201	60.7%	-	0.0%	-	0.0%	331	0.2%
Operations on the eye	6,255	79.6%	409	5.2%	49	0.6%	2	0.0%	1,060	13.5%	11	0.1%	72	0.9%	7,858	5.9%
Operations on the ear	1,807	56.2%	611	19.0%	21	0.7%	-	0.0%	759	23.6%	14	0.4%	1	0.0%	3,213	2.4%
Operations on the nose, mouth, and pharynx	1,271	39.2%	798	24.6%	35	1.1%	4	0.1%	1,096	33.8%	39	1.2%	3	0.1%	3,246	2.4%
Operations on the respiratory system	6,568	54.3%	1,975	16.3%	106	0.9%	15	0.1%	3,324	27.5%	86	0.7%	19	0.2%	12,093	9.1%
Operations on the cardiovascular system	4,550	53.3%	889	10.4%	76	0.9%	4	0.0%	2,608	30.6%	28	0.3%	381	4.5%	8,536	6.4%
Operations on the hemic and lymphatic system	121	48.8%	31	12.5%	4	1.6%	-	0.0%	92	37.1%	-	0.0%	-	0.0%	248	0.2%
Operations on the digestive system	11,920	30.7%	4,162	10.7%	372	1.0%	61	0.2%	19,476	50.2%	130	0.3%	2,698	7.0%	38,819	29.3%
Operations on the urinary system	3,730	67.6%	563	10.2%	38	0.7%	-	0.0%	1,151	20.8%	16	0.3%	23	0.4%	5,521	4.2%
Operations on the male genital organs	414	31.7%	246	18.8%	25	1.9%	4	0.3%	576	44.0%	43	3.3%	-	0.0%	1,308	1.0%
Operations on the female genital organs	981	16.3%	1,384	23.0%	66	1.1%	-	0.0%	3,514	58.5%	62	1.0%	1	0.0%	6,008	4.5%
Obstetrical procedures	83	2.1%	2,107	53.9%	42	1.1%	1	0.0%	1,635	41.8%	39	1.0%	-	0.0%	3,907	2.9%
Operations on the musculoskeletal system	7,672	49.0%	2,065	13.2%	130	0.8%	705	4.5%	4,980	31.8%	96	0.6%	18	0.1%	15,666	11.8%
Operations on the integumentary system	7,233	57.3%	1,625	12.9%	46	0.4%	37	0.3%	2,296	18.2%	1,348	10.7%	31	0.2%	12,616	9.5%
Total	58,425	44.0%	19,159	14.4%	1,166	0.9%	1,420	1.1%	47,314	35.7%	1,951	1.5%	3,260	2.5%	132,695	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
2016 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	-	-	-	-	-	-	-	-	-	-	-	-	-	8	8
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 14,316	\$ 14,316
3 Laminectomy, excision intervertebral disc															
N	8	5	-	9	-	-	-	-	14	-	41	25	-	265	367
Avg\$	\$ 10,615	\$ 18,717	-	\$ 30,666	-	-	-	-	\$ 14,312	-	\$ 15,536	\$ 14,998	-	\$ 14,697	\$ 15,154
4 Diagnostic spinal tap															
N	1	14	3	8	-	1	7	-	-	1	8	1	-	15	59
Avg\$	\$ 1,746	\$ 2,215	\$ 1,132	\$ 3,500	-	\$ 1,430	\$ 4,362	-	-	\$ 3,483	\$ 2,962	\$ 620	-	\$ 2,042	\$ 2,619
5 Insert cath, spinal stimulator, inject into spinal canal															
N	28	366	174	42	-	57	143	131	301	-	934	361	-	1,849	4,386
Avg\$	\$ 4,454	\$ 1,345	\$ 1,147	\$ 1,581	-	\$ 2,355	\$ 2,810	\$ 1,491	\$ 305	-	\$ 1,906	\$ 2,523	-	\$ 2,006	\$ 1,848
6 Decompression peripheral nerve															
N	99	154	94	77	-	1	82	94	136	92	172	41	73	503	1,618
Avg\$	\$ 4,552	\$ 5,902	\$ 5,107	\$ 9,882	-	\$ 10,220	\$ 7,507	\$ 7,102	\$ 3,256	\$ 5,781	\$ 4,016	\$ 5,783	\$ 2,086	\$ 4,648	\$ 5,122
7 Other diagnostic nervous system procedures															
N	88	6	-	1	-	4	2	-	-	-	631	2	-	1,970	2,704
Avg\$	\$ 160	\$ 5,789	-	\$ 15,479	-	\$ 9,581	\$ 9,018	-	-	-	\$ 699	\$ 569	-	\$ 2,191	\$ 1,805
8 Other non-OR or closed therapeutic nerv syst procs															
N	46	140	73	-	-	14	50	126	3	1	333	29	-	1,526	2,341
Avg\$	\$ 5,075	\$ 2,218	\$ 1,175	-	-	\$ 4,531	\$ 3,348	\$ 2,292	\$ 429	\$ 606	\$ 2,753	\$ 2,463	-	\$ 5,088	\$ 4,231
9 Other OR therapeutic nervous system procedures															
N	3	16	8	1	-	15	-	56	5	1	142	6	3	1,586	1,842
Avg\$	\$ 6,321	\$ 14,512	\$ 26,061	\$ 39,107	-	\$ 5,528	-	\$ 3,276	\$ 3,832	\$ 10,869	\$ 5,394	\$ 7,116	\$ 3,739	\$ 7,683	\$ 7,493
10 Thyroidectomy, partial or complete															
N	-	5	-	-	-	-	4	-	1	3	13	24	-	161	211
Avg\$	-	\$ 13,953	-	-	-	-	\$ 26,532	-	\$ 18,230	\$ 55,267	\$ 17,587	\$ 18,261	-	\$ 13,781	\$ 15,382
11 Diagnostic endocrine procedures															
N	-	-	-	-	-	-	-	6	-	-	19	1	-	1	27
Avg\$	-	-	-	-	-	-	-	\$ 376	-	-	\$ 1,018	\$ 1,097	-	\$ 903	\$ 874
12 Other therapeutic endocrine procedures															
N	1	-	-	-	-	-	2	-	-	-	7	10	-	73	93
Avg\$	\$ 7,661	-	-	-	-	-	\$ 363	-	-	-	\$ 11,219	\$ 24,312	-	\$ 12,048	\$ 13,006
13 Corneal transplant															
N	-	-	-	-	-	-	-	-	-	-	-	-	1	8	9
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	\$ 17,350	\$ 24,689	\$ 23,874

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 discussion in the User's Guide for details.

Table O-10
2016 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	2	46	2	4	-	-	7	-	1	4	43	-	1	242	352
Avg\$	\$ 10,235	\$ 1,290	\$ 14,270	\$ 9,231	-	-	\$ 17,853	-	\$ 5,301	\$ 10,596	\$ 1,203	-	\$ 5,393	\$ 2,978	\$ 3,113
15 Lens & cataract procedures															
N	462	565	89	158	-	300	387	476	316	361	394	-	167	605	4,280
Avg\$	\$ 6,371	\$ 5,399	\$ 6,193	\$ 6,382	-	\$ 5,090	\$ 6,884	\$ 9,448	\$ 5,584	\$ 4,383	\$ 6,150	-	\$ 4,224	\$ 4,965	\$ 6,010
16 Repair of retinal tear, detachment															
N	-	8	-	-	-	-	-	-	-	-	-	-	-	174	182
Avg\$	-	\$ 914	-	-	-	-	-	-	-	-	-	-	-	\$ 10,792	\$ 10,358
17 Destruction of lesion of retina & choroid															
N	-	2	-	-	-	-	-	-	-	-	-	-	-	85	87
Avg\$	-	\$ 1,443	-	-	-	-	-	-	-	-	-	-	-	\$ 4,783	\$ 4,707
18 Diagnostic procedures on eye															
N	1	1	-	-	-	-	-	-	1	-	2	-	-	18	23
Avg\$	\$ 1,142	\$ 8,381	-	-	-	-	-	-	\$ 3,720	-	\$ 4,539	-	-	\$ 4,428	\$ 4,436
19 Other therapeutic procedures on eyelids, conjunctiva, cornea															
N	12	6	-	1	-	-	6	2	6	35	21	1	2	311	403
Avg\$	\$ 4,317	\$ 7,451	-	\$ 7,043	-	-	\$ 8,217	\$ 17,013	\$ 4,044	\$ 5,427	\$ 2,176	\$ 2,593	\$ 1,800	\$ 5,095	\$ 5,056
20 Other intraocular therapeutic procedures															
N	-	-	-	-	-	-	2	-	-	-	1	-	2	2,413	2,418
Avg\$	-	-	-	-	-	-	\$ 6,201	-	-	-	\$ 12,769	-	\$ 3,750	\$ 6,140	\$ 6,141
21 Other extraocular muscle & orbit therapeutic procedures															
N	-	-	-	46	-	-	-	-	1	-	-	-	-	57	104
Avg\$	-	-	-	\$ 13,584	-	-	-	-	\$ 5,706	-	-	-	-	\$ 3,545	\$ 8,006
22 Tympanoplasty															
N	-	12	-	-	-	-	-	2	-	6	16	3	1	36	76
Avg\$	-	\$ 8,535	-	-	-	-	-	\$ 6,544	-	\$ 14,654	\$ 7,847	\$ 3,392	\$ 4,187	\$ 14,705	\$ 11,483
23 Myringotomy															
N	3	46	-	-	-	8	17	10	-	65	79	23	22	600	873
Avg\$	\$ 3,810	\$ 4,497	-	-	-	\$ 4,948	\$ 5,445	\$ 7,517	-	\$ 5,453	\$ 2,416	\$ 3,038	\$ 2,870	\$ 3,212	\$ 3,472
24 Mastoidectomy															
N	-	-	-	-	-	-	-	-	-	-	3	-	-	27	30
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 17,164	-	-	\$ 24,867	\$ 24,096
25 Diagnostic procedures on ear															
N	-	-	-	-	-	-	1	-	-	-	2	-	-	-	3
Avg\$	-	-	-	-	-	-	\$ 6,913	-	-	-	\$ 1,579	-	-	-	\$ 3,357

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
26 Other therapeutic ear procedures															
N	107	2	-	-	-	-	1	1	-	15	1,302	2	9	792	2,231
Avg\$	\$ 159	\$ 3,895	-	-	-	-	\$ 6,753	\$ 4,390	-	\$ 7,737	\$ 291	\$ 7,434	\$ 3,613	\$ 3,082	\$ 1,353
27 Control of epistaxis															
N	1	1	-	-	-	1	3	1	-	-	81	1	1	64	154
Avg\$	\$ 239	\$ 5,275	-	-	-	\$ 16,005	\$ 4,368	\$ 5,871	-	-	\$ 1,167	\$ 9,454	\$ 5,691	\$ 1,783	\$ 1,716
28 Plastic procedures on nose															
N	-	5	-	-	-	1	8	1	-	19	44	13	5	44	140
Avg\$	-	\$ 11,385	-	-	-	\$ 27,196	\$ 10,688	\$ 12,945	-	\$ 12,790	\$ 10,496	\$ 7,168	\$ 14,472	\$ 10,741	\$ 10,897
29 Dental procedures															
N	7	2	-	-	-	-	-	-	-	-	1	-	-	27	37
Avg\$	\$ 12,130	\$ 12,523	-	-	-	-	-	-	-	-	\$ 17,875	-	-	\$ 11,615	\$ 11,931
30 Tonsillectomy and/or adenoidectomy															
N	-	65	-	-	-	7	54	27	4	53	80	33	21	227	571
Avg\$	-	\$ 7,670	-	-	-	\$ 8,256	\$ 7,888	\$ 13,807	\$ 5,150	\$ 9,235	\$ 6,498	\$ 5,862	\$ 6,340	\$ 5,506	\$ 6,938
31 Diagnostic procedures on nose, mouth & pharynx															
N	1	13	4	7	1	2	34	16	6	6	817	26	1	1,021	1,955
Avg\$	\$ 333	\$ 1,896	\$ 358	\$ 336	\$ 520	\$ 250	\$ 1,371	\$ 167	\$ 219	\$ 499	\$ 358	\$ 654	\$ 10,376	\$ 1,290	\$ 880
32 Other non-OR therapeutic procedures on nose, mouth & pharynx															
N	-	-	-	-	-	-	1	1	-	1	8	1	-	32	44
Avg\$	-	-	-	-	-	-	\$ 6,061	\$ 8,094	-	\$ 4,949	\$ 2,215	\$ 8,301	-	\$ 617	\$ 1,474
33 Other OR therapeutic procedures on nose, mouth & pharynx															
N	-	32	-	-	-	7	23	-	-	32	68	8	9	166	345
Avg\$	-	\$ 12,603	-	-	-	\$ 17,477	\$ 6,190	-	-	\$ 12,135	\$ 6,342	\$ 7,946	\$ 10,394	\$ 11,802	\$ 10,446
34 Tracheostomy, temporary & permanent															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	5	5
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 7,679	\$ 7,679
35 Tracheoscopy & laryngoscopy with biopsy															
N	-	41	-	-	-	1	2	-	-	3	865	2	-	729	1,643
Avg\$	-	\$ 1,757	-	-	-	\$ 13,662	\$ 9,121	-	-	\$ 6,854	\$ 367	\$ 6,618	-	\$ 892	\$ 673
36 Lobectomy or pneumonectomy															
N	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 18,788	-	-	-	\$ 18,788
37 Diagnostic bronchoscopy & biopsy of bronchus															
N	-	16	-	-	-	-	50	-	4	-	13	14	-	272	369
Avg\$	-	\$ 6,796	-	-	-	-	\$ 12,689	-	\$ 1,850	-	\$ 6,891	\$ 5,426	-	\$ 8,471	\$ 8,727

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
38 Other diagnostic procedures on lung & bronchus															
N	304	511	105	128	-	108	743	287	409	42	983	1,737	246	4,057	9,660
Avg\$	\$ 400	\$ 841	\$ 601	\$ 1,155	- \$	627	\$ 1,319	\$ 1,018	\$ 515	\$ 592	\$ 1,004	\$ 295	\$ 534	\$ 1,024	\$ 841
39 Incision of pleura, thoracentesis, chest drainage															
N	11	7	-	3	-	-	12	3	6	1	26	8	2	157	236
Avg\$	\$ 4,801	\$ 5,725	-	\$ 2,573	-	-	\$ 2,595	\$ 9,205	\$ 1,469	\$ 1,889	\$ 3,534	\$ 3,325	\$ 3,055	\$ 3,680	\$ 3,697
40 Other diagnostic proc of respiratory tract & mediastinum															
N	-	-	-	-	-	-	4	-	-	-	1	-	-	10	15
Avg\$	-	-	-	-	-	-	\$ 301	-	-	-	\$ 30,513	-	-	\$ 1,296	\$ 2,978
41 Other non-OR therapeutic procedures on respiratory system															
N	-	1	-	-	-	-	2	1	-	-	1	-	-	6	11
Avg\$	-	\$ 14,481	-	-	-	-	\$ 7,457	\$ 2,014	-	-	\$ 4,462	-	-	\$ 4,920	\$ 5,945
42 Other OR therapeutic procedures on respiratory system															
N	-	8	-	-	-	-	1	-	-	2	12	5	-	125	153
Avg\$	-	\$ 9,028	-	-	-	-	\$ 7,021	-	-	\$ 7,919	\$ 8,484	\$ 6,726	-	\$ 9,256	\$ 9,068
43 Heart valve procedures															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 16,634	\$ 16,634
45 Percutaneous transluminal coronary angioplasty (PTCA)															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	10	10
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 41,237	\$ 41,237
47 Diagnostic cardiac catheterization, coronary arteriography															
N	-	-	-	-	-	-	-	-	-	-	5	-	-	1,136	1,141
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 9,911	-	-	\$ 22,743	\$ 22,687
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib															
N	-	257	-	13	-	-	325	16	55	2	49	23	35	699	1,474
Avg\$	-	\$ 3,640	-	\$ 374	-	-	\$ 1,594	\$ 14,468	\$ 1,523	\$ 11,862	\$ 53,122	\$ 16,515	\$ 947	\$ 19,799	\$ 12,655
49 Other OR heart procedures															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	4	4
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 45,487	\$ 45,487
51 Endarterectomy, vessel of head & neck															
N	-	-	-	-	-	-	2	-	-	-	-	-	-	-	2
Avg\$	-	-	-	-	-	-	\$ 24,633	-	-	-	-	-	-	-	\$ 24,633
53 Varicose vein stripping, lower limb															
N	12	10	-	-	-	1	5	-	-	-	8	4	-	169	209
Avg\$	\$ 8,587	\$ 10,142	-	-	-	\$ 15,697	\$ 9,884	-	-	-	\$ 6,510	\$ 8,623	-	\$ 10,596	\$ 10,272

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
54 Other vascular catheterization, not heart															
N	43	89	6	11	-	2	26	33	10	3	88	70	8	637	1,026
Avg\$	\$ 4,384	\$ 8,400	\$ 6,680	\$ 19,752	-	\$ 10,704	\$ 8,957	\$ 12,872	\$ 2,926	\$ 11,384	\$ 7,768	\$ 7,191	\$ 9,998	\$ 11,156	\$ 10,048
56 Other vascular bypass & shunt, not heart															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	6	6
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 3,365	\$ 3,365
57 Creat, revis, rem of arteriovenous fistula or cannula for dialysis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	165	165
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 7,240	\$ 7,240
58 Hemodialysis															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	55	56
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 33,399	-	\$ 6,321	\$ 6,804
59 Other OR procedures on vessels of head & neck															
N	7	5	5	3	-	-	3	1	6	3	7	15	1	44	100
Avg\$	\$ 1,681	\$ 4,156	\$ 1,810	\$ 13,471	-	-	\$ 6,546	\$ 9,705	\$ 3,347	\$ 6,791	\$ 4,261	\$ 1,275	\$ 5,099	\$ 7,699	\$ 5,446
60 Embolectomy & endarterectomy of lower limbs															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 7,077	\$ 7,077
61 Other OR procedures on vessels other than head & neck															
N	2	3	1	-	-	-	4	-	-	-	26	1	-	366	403
Avg\$	\$ 182	\$ 15,309	\$ 9,123	-	-	-	\$ 12,752	-	-	-	\$ 4,915	\$ 784	-	\$ 27,581	\$ 25,632
62 Other diagnostic cardiovascular procedures															
N	121	102	4	23	-	-	4	-	-	1	137	61	-	210	663
Avg\$	\$ 675	\$ 1,699	\$ 580	\$ 620	-	-	\$ 188	-	-	\$ 2,729	\$ 3,764	\$ 152	-	\$ 9,429	\$ 4,193
63 Other non-OR therapeutic cardiovascular procedures															
N	90	125	110	6	-	2	219	572	153	68	384	260	70	1,216	3,275
Avg\$	\$ 2,500	\$ 1,602	\$ 409	\$ 3,558	-	\$ 2,958	\$ 1,214	\$ 1,206	\$ 428	\$ 2,111	\$ 1,035	\$ 672	\$ 542	\$ 1,622	\$ 1,296
64 Bone marrow transplant															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	23	23
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 9,894	\$ 9,894
65 Bone marrow biopsy															
N	8	1	-	-	-	-	-	-	-	-	16	-	-	50	75
Avg\$	\$ 6,462	\$ 4,052	-	-	-	-	-	-	-	-	\$ 5,284	-	-	\$ 5,727	\$ 5,688
66 Procedures on spleen															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 18,757	\$ 18,757

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
67 Other therap procedures, hemic & lymphatic system															
N	4	9	-	2	-	3	3	4	2	4	31	11	3	73	149
Avg\$	\$ 8,673	\$ 12,378	-	\$ 16,780	-	\$ 11,417	\$ 13,272	\$ 26,614	\$ 2,330	\$ 16,346	\$ 11,543	\$ 8,247	\$ 9,401	\$ 12,702	\$ 12,310
68 Injection or ligation of esophageal varices															
N	1	3	-	-	-	-	-	-	-	-	6	1	-	35	46
Avg\$	\$ 5,210	\$ 3,683	-	-	-	-	-	-	-	-	\$ 4,111	\$ 4,188	-	\$ 3,705	\$ 3,800
69 Esophageal dilatation															
N	87	43	4	1	-	6	7	2	3	8	74	12	4	258	509
Avg\$	\$ 3,538	\$ 4,286	\$ 2,100	\$ 3,474	-	\$ 1,382	\$ 4,842	\$ 4,660	\$ 3,849	\$ 5,316	\$ 4,684	\$ 2,355	\$ 3,753	\$ 4,824	\$ 4,409
70 Upper gastrointestinal endoscopy, biopsy															
N	222	456	124	78	-	158	163	134	610	147	581	328	233	2,200	5,434
Avg\$	\$ 3,162	\$ 3,538	\$ 2,406	\$ 3,543	-	\$ 2,320	\$ 5,028	\$ 4,096	\$ 2,362	\$ 3,838	\$ 4,264	\$ 1,913	\$ 2,169	\$ 3,401	\$ 3,262
71 Gastrostomy, temporary & permanent															
N	3	6	1	-	-	1	2	-	8	-	14	1	2	76	114
Avg\$	\$ 3,547	\$ 1,862	\$ 857	-	-	\$ 1,112	\$ 3,241	-	\$ 380	-	\$ 2,519	\$ 6,384	\$ 1,756	\$ 2,665	\$ 2,465
72 Colostomy, temporary & permanent															
N	-	-	-	-	-	-	1	-	-	-	-	-	-	1	2
Avg\$	-	-	-	-	-	-	\$ 9,688	-	-	-	-	-	-	\$ 6,065	\$ 7,877
73 Ileostomy & other enterostomy															
N	-	-	-	-	-	-	1	-	-	-	3	1	-	11	16
Avg\$	-	-	-	-	-	-	\$ 11,013	-	-	-	\$ 1,915	\$ 7,656	-	\$ 6,087	\$ 5,711
76 Colonoscopy & biopsy															
N	1,110	2,457	717	501	-	913	749	887	1,742	1,281	2,187	2,847	829	8,496	24,716
Avg\$	\$ 3,694	\$ 4,075	\$ 2,327	\$ 4,070	-	\$ 1,853	\$ 4,907	\$ 4,610	\$ 1,509	\$ 4,005	\$ 4,605	\$ 2,537	\$ 2,279	\$ 3,790	\$ 3,497
77 Proctoscopy & anorectal biopsy															
N	38	31	16	7	-	9	17	5	35	6	73	37	14	376	664
Avg\$	\$ 1,584	\$ 1,830	\$ 1,146	\$ 6,021	-	\$ 1,181	\$ 3,437	\$ 2,750	\$ 1,001	\$ 2,553	\$ 1,572	\$ 1,620	\$ 1,958	\$ 1,732	\$ 1,753
78 Colorectal resection															
N	3	-	-	-	-	-	1	1	-	4	-	1	1	3	14
Avg\$	\$ 5,352	-	-	-	-	-	\$ 9,504	\$ 15,242	-	\$ 25,325	-	\$ 7,789	\$ 12,236	\$ 9,473	\$ 13,610
80 Appendectomy															
N	4	2	2	1	-	9	1	-	1	3	6	5	1	24	59
Avg\$	\$ 14,308	\$ 12,943	\$ 18,760	\$ 47,033	-	\$ 15,048	\$ 25,692	-	\$ 7,482	\$ 26,534	\$ 14,277	\$ 10,857	\$ 14,449	\$ 13,474	\$ 15,146
81 Hemorrhoid procedures															
N	12	11	1	4	-	2	19	10	32	4	26	9	7	66	203
Avg\$	\$ 2,743	\$ 7,636	\$ 14,932	\$ 11,296	-	\$ 12,023	\$ 6,937	\$ 7,426	\$ 2,773	\$ 10,577	\$ 6,578	\$ 10,453	\$ 8,424	\$ 2,472	\$ 5,051

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
82 Endoscopic retrograde cannulation of pancreas (ERCP)															
N	2	3	-	-	-	-	-	-	-	-	-	16	-	138	159
Avg\$	\$ 14,363	\$ 9,534	-	-	-	-	-	-	-	-	-	\$ 11,255	-	\$ 14,640	\$ 14,200
83 Biopsy of liver															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 3,656	\$ 3,656
84 Cholecystectomy & common duct exploration															
N	45	127	49	21	-	31	60	32	159	42	105	90	49	214	1,024
Avg\$	\$ 11,160	\$ 13,828	\$ 15,742	\$ 29,306	-	\$ 17,441	\$ 17,543	\$ 24,075	\$ 9,241	\$ 26,404	\$ 10,215	\$ 9,709	\$ 12,544	\$ 10,999	\$ 13,185
85 Inguinal & femoral hernia repair															
N	67	119	50	40	-	36	41	44	83	62	122	98	49	251	1,062
Avg\$	\$ 7,384	\$ 11,222	\$ 19,867	\$ 29,021	-	\$ 17,438	\$ 12,593	\$ 14,666	\$ 7,953	\$ 19,185	\$ 8,883	\$ 11,781	\$ 7,732	\$ 9,539	\$ 11,897
86 Other hernia repair															
N	34	82	20	16	-	17	45	36	88	29	110	111	15	243	846
Avg\$	\$ 7,149	\$ 11,645	\$ 16,358	\$ 27,988	-	\$ 15,612	\$ 12,538	\$ 18,523	\$ 7,266	\$ 18,153	\$ 10,515	\$ 10,788	\$ 9,170	\$ 9,801	\$ 11,239
87 Laparoscopy															
N	8	3	-	5	-	2	6	6	15	2	5	10	3	17	82
Avg\$	\$ 10,707	\$ 11,780	-	\$ 28,601	-	\$ 12,867	\$ 11,742	\$ 18,570	\$ 7,048	\$ 14,201	\$ 11,533	\$ 7,358	\$ 6,774	\$ 11,655	\$ 11,652
88 Abdominal paracentesis															
N	28	6	2	-	-	-	10	19	27	-	37	63	1	116	309
Avg\$	\$ 3,144	\$ 1,515	\$ 1,121	-	-	-	\$ 1,585	\$ 5,982	\$ 734	-	\$ 1,745	\$ 2,223	\$ 4,494	\$ 1,806	\$ 2,159
90 Excision, lysis peritoneal adhesions															
N	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1
Avg\$	-	-	-	-	-	-	\$ 20,207	-	-	-	-	-	-	-	\$ 20,207
91 Peritoneal dialysis															
N	-	-	-	-	-	-	-	-	-	-	-	126	-	2,643	2,769
Avg\$	-	-	-	-	-	-	-	-	-	-	-	\$ 36,034	-	\$ 9,560	\$ 10,764
93 Other non-OR upper GI therapeutic procedures															
N	3	-	-	1	-	-	-	-	-	-	2	2	-	13	21
Avg\$	\$ 3,785	-	-	\$ 2,823	-	-	-	-	-	-	\$ 4,991	\$ 2,575	-	\$ 2,806	\$ 3,133
94 Other OR upper GI therapeutic procedures															
N	-	-	-	-	-	3	-	-	2	-	-	-	-	28	33
Avg\$	-	-	-	-	-	\$ 27,814	-	-	\$ 14,238	-	-	-	-	\$ 15,517	\$ 16,557
95 Other non-OR lower GI therapeutic procedures															
N	1	4	1	-	-	-	3	2	5	1	4	3	3	37	64
Avg\$	\$ 404	\$ 5,967	\$ 975	-	-	-	\$ 6,485	\$ 10,857	\$ 2,349	\$ 7,434	\$ 5,720	\$ 6,513	\$ 5,528	\$ 2,864	\$ 3,915

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
96 Other OR lower GI therapeutic procedures															
N	17	15	1	-	-	2	10	12	11	6	12	10	4	98	198
Avg\$	\$ 6,054	\$ 5,608	\$ 9,300	-	-	\$ 9,102	\$ 10,231	\$ 8,589	\$ 4,844	\$ 9,696	\$ 6,809	\$ 6,381	\$ 6,536	\$ 5,302	\$ 6,175
97 Other gastrointestinal diagnostic procedures															
N	-	21	-	-	-	-	2	-	-	-	-	-	-	257	280
Avg\$	-	\$ 1,513	-	-	-	-	\$ 6,524	-	-	-	-	-	-	\$ 2,794	\$ 2,725
98 Other non-OR gastrointestinal therapeutic procedures															
N	-	6	-	1	-	-	-	-	-	-	-	-	-	59	66
Avg\$	-	\$ 3,770	-	\$ 3,565	-	-	-	-	-	-	-	-	-	\$ 4,347	\$ 4,283
99 Other OR gastrointestinal therapeutic procedures															
N	-	1	-	-	-	1	3	1	-	1	11	7	-	102	127
Avg\$	-	\$ 7,367	-	-	-	\$ 3,539	\$ 5,096	\$ 12,592	-	\$ 18,937	\$ 6,305	\$ 4,371	-	\$ 8,160	\$ 7,795
100 Endoscopy & endoscopic biopsy of the urinary tract															
N	139	79	7	9	-	-	1	24	6	9	389	23	10	959	1,655
Avg\$	\$ 1,182	\$ 3,813	\$ 8,403	\$ 11,590	-	-	\$ 14,465	\$ 10,367	\$ 4,436	\$ 17,000	\$ 1,782	\$ 6,985	\$ 4,301	\$ 2,071	\$ 2,390
101 Transurethral excision, drainage, rem urinary obstruction															
N	31	54	9	14	-	-	3	24	24	25	98	32	22	278	614
Avg\$	\$ 5,226	\$ 7,817	\$ 8,992	\$ 14,008	-	-	\$ 10,326	\$ 15,090	\$ 6,402	\$ 14,241	\$ 4,689	\$ 8,440	\$ 9,224	\$ 5,049	\$ 6,678
102 Ureteral catheterization															
N	9	17	6	10	-	-	-	17	11	2	11	18	6	147	254
Avg\$	\$ 8,575	\$ 7,787	\$ 9,678	\$ 11,896	-	-	-	\$ 8,886	\$ 7,914	\$ 12,312	\$ 7,673	\$ 6,368	\$ 6,681	\$ 8,629	\$ 8,492
103 Nephrotomy & nephrostomy															
N	4	-	-	-	-	-	-	-	-	-	1	-	-	67	72
Avg\$	\$ 22,962	-	-	-	-	-	-	-	-	-	\$ 4,406	-	-	\$ 8,385	\$ 9,139
104 Nephrectomy, partial or complete															
N	-	-	-	1	-	-	-	-	-	-	-	3	-	-	4
Avg\$	-	-	-	\$ 43,297	-	-	-	-	-	-	-	\$ 30,042	-	-	\$ 33,356
106 Genitourinary incontinence procedures															
N	2	8	-	14	-	-	18	5	4	10	12	3	4	129	209
Avg\$	\$ 17,193	\$ 9,054	-	\$ 23,244	-	-	\$ 12,008	\$ 12,283	\$ 8,380	\$ 20,947	\$ 11,885	\$ 10,340	\$ 8,710	\$ 13,688	\$ 14,005
107 Extracorporeal lithotripsy, urinary															
N	37	115	53	43	-	-	-	21	29	48	113	81	31	271	842
Avg\$	\$ 13,843	\$ 13,964	\$ 8,882	\$ 10,358	-	-	-	\$ 19,867	\$ 8,014	\$ 15,517	\$ 13,881	\$ 15,515	\$ 7,683	\$ 12,828	\$ 13,027
108 Indwelling catheter															
N	48	-	62	-	-	-	5	-	1	-	71	1	-	386	574
Avg\$	\$ 238	-	\$ 163	-	-	-	\$ 511	-	\$ 230	-	\$ 233	\$ 7,561	-	\$ 535	\$ 444

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
109 Procedures on the urethra															
N	1	20	-	7	-	-	-	3	1	4	77	1	2	102	218
Avg\$	\$ 477	\$ 5,952	-	\$ 16,368	-	-	-	\$ 10,376	\$ 7,626	\$ 7,362	\$ 1,298	\$ 8,109	\$ 6,738	\$ 3,176	\$ 3,430
110 Other diagnostic procedures of urinary tract															
N	-	-	-	-	-	-	-	-	-	-	1	2	-	8	11
Avg\$	-	-	-	-	-	-	-	-	-	-	\$ 2,840	\$ 3,063	-	\$ 5,277	\$ 4,653
111 Other non-OR therapeutic procedures of urinary tract															
N	50	-	70	-	-	-	-	-	1	-	73	-	-	609	803
Avg\$	\$ 468	-	\$ 146	-	-	-	-	-	\$ 3,857	-	\$ 491	-	-	\$ 1,160	\$ 971
112 Other OR therapeutic procedures of urinary tract															
N	4	8	4	28	-	-	1	8	5	13	61	3	4	126	265
Avg\$	\$ 7,856	\$ 11,647	\$ 4,752	\$ 14,611	-	-	\$ 12,023	\$ 12,112	\$ 8,026	\$ 13,819	\$ 6,729	\$ 8,567	\$ 6,929	\$ 9,135	\$ 9,420
113 Transurethral resection of prostate (TURP)															
N	-	19	4	4	-	-	1	5	-	11	27	16	-	57	144
Avg\$	-	\$ 14,124	\$ 12,808	\$ 24,549	-	-	\$ 11,451	\$ 22,132	-	\$ 18,356	\$ 9,519	\$ 10,780	-	\$ 9,395	\$ 11,853
114 Open prostatectomy															
N	-	-	-	-	-	-	-	-	-	2	-	-	-	1	3
Avg\$	-	-	-	-	-	-	-	-	-	\$ 28,727	-	-	-	\$ 15,752	\$ 24,402
115 Circumcision															
N	5	55	2	2	-	-	23	14	22	41	7	15	12	88	286
Avg\$	\$ 7,802	\$ 1,748	\$ 4,710	\$ 14,331	-	-	\$ 2,290	\$ 5,563	\$ 1,041	\$ 691	\$ 7,030	\$ 1,637	\$ 1,895	\$ 7,354	\$ 3,842
116 Diagnostic procedures, male genital															
N	8	2	1	6	-	-	-	-	2	-	67	2	-	121	209
Avg\$	\$ 5,645	\$ 9,317	\$ 4,676	\$ 10,857	-	-	-	-	\$ 130	-	\$ 7,567	\$ 5,538	-	\$ 3,848	\$ 5,347
117 Other non-OR therapeutic procedures, male genital															
N	2	18	8	-	-	-	-	9	1	5	45	-	10	64	162
Avg\$	\$ 4,884	\$ 4,575	\$ 843	-	-	-	-	\$ 5,239	\$ 4,728	\$ 5,499	\$ 3,608	-	\$ 6,215	\$ 6,292	\$ 4,972
118 Other OR therapeutic procedures, male genital															
N	17	16	6	8	-	-	4	12	10	17	24	15	14	361	504
Avg\$	\$ 9,399	\$ 9,076	\$ 6,445	\$ 15,789	-	-	\$ 9,808	\$ 11,694	\$ 6,823	\$ 12,836	\$ 13,573	\$ 7,771	\$ 13,346	\$ 10,648	\$ 10,732
119 Oophorectomy, unilateral & bilateral															
N	14	1	9	20	-	-	23	9	19	18	14	27	31	142	327
Avg\$	\$ 13,276	\$ 12,224	\$ 11,919	\$ 23,528	-	-	\$ 16,337	\$ 22,170	\$ 7,124	\$ 19,475	\$ 10,490	\$ 12,198	\$ 11,891	\$ 11,353	\$ 13,132
120 Other operations on ovary															
N	2	-	-	-	-	-	-	-	-	-	-	-	-	33	35
Avg\$	\$ 10,137	-	-	-	-	-	-	-	-	-	-	-	-	\$ 3,429	\$ 3,813

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
121 Ligation of fallopian tubes															
N	15	16	10	5	-	-	2	1	14	2	15	31	7	21	139
Avg\$	\$ 8,682	\$ 8,949	\$ 9,374	\$ 17,412	-	-	\$ 12,657	\$ 12,699	\$ 6,040	\$ 14,033	\$ 8,357	\$ 7,375	\$ 9,220	\$ 8,838	\$ 8,698
122 Removal of ectopic pregnancy															
N	1	2	-	-	-	-	1	-	-	1	1	1	-	6	13
Avg\$	\$ 13,932	\$ 14,485	-	-	-	-	\$ 13,496	-	-	\$ 21,901	\$ 11,508	\$ 22,585	-	\$ 9,794	\$ 13,166
123 Other operations on fallopian tubes															
N	-	1	-	1	-	-	1	-	12	-	1	-	-	11	27
Avg\$	-	\$ 8,349	-	\$ 40,723	-	-	\$ 11,416	-	\$ 7,220	-	\$ 9,202	-	-	\$ 10,563	\$ 10,093
124 Hysterectomy, abdominal & vaginal															
N	17	10	25	16	-	-	39	20	29	26	36	63	37	315	633
Avg\$	\$ 15,809	\$ 25,405	\$ 24,511	\$ 46,664	-	-	\$ 27,294	\$ 34,432	\$ 10,758	\$ 34,252	\$ 17,429	\$ 16,930	\$ 24,950	\$ 19,130	\$ 21,297
125 Other excision of cervix & uterus															
N	29	14	15	10	-	-	8	14	88	17	33	72	20	81	401
Avg\$	\$ 10,394	\$ 6,520	\$ 12,049	\$ 11,522	-	-	\$ 14,586	\$ 16,907	\$ 5,904	\$ 10,547	\$ 7,013	\$ 8,891	\$ 9,214	\$ 8,814	\$ 8,755
126 Abortion (termination of pregnancy)															
N	3	-	-	-	-	-	-	-	-	2	-	-	-	42	47
Avg\$	\$ 6,214	-	-	-	-	-	-	-	-	\$ 8,966	-	-	-	\$ 6,900	\$ 6,944
127 D&C, aspiration after delivery or abortion															
N	17	17	10	1	-	-	9	7	25	8	10	17	4	60	185
Avg\$	\$ 5,736	\$ 5,921	\$ 7,344	\$ 18,642	-	-	\$ 8,419	\$ 10,322	\$ 4,035	\$ 5,046	\$ 6,220	\$ 4,101	\$ 4,761	\$ 5,397	\$ 5,699
128 Diagnostic dilatation & curettage (D&C)															
N	3	1	8	-	-	-	-	1	1	-	14	1	-	9	38
Avg\$	\$ 3,231	\$ 8,231	\$ 3,537	-	-	-	-	\$ 6,229	\$ 3,688	-	\$ 7,149	\$ 7,476	-	\$ 5,671	\$ 5,651
129 Repair cystocele & rectocele, oblit of vaginal vault															
N	2	-	-	2	-	-	7	3	16	1	-	3	7	79	120
Avg\$	\$ 12,691	-	-	\$ 31,624	-	-	\$ 20,645	\$ 28,695	\$ 10,022	\$ 20,168	-	\$ 15,616	\$ 15,675	\$ 12,068	\$ 13,414
130 Other diagnostic procedures, female organs															
N	171	880	12	16	-	6	44	17	73	20	144	1,304	43	452	3,182
Avg\$	\$ 5,319	\$ 1,049	\$ 3,393	\$ 13,402	-	\$ 165	\$ 6,132	\$ 9,586	\$ 3,970	\$ 7,916	\$ 2,822	\$ 641	\$ 5,925	\$ 4,989	\$ 2,113
131 Other non-OR therapeutic procedures, female organs															
N	22	-	2	1	-	-	2	-	8	-	158	-	1	344	538
Avg\$	\$ 286	-	\$ 7,528	\$ 12,139	-	-	\$ 9,116	-	\$ 4,446	-	\$ 2,858	-	\$ 4,055	\$ 1,216	\$ 1,787
132 Other OR therapeutic procedures, female organs															
N	19	2	10	4	-	-	42	6	22	7	9	23	15	177	336
Avg\$	\$ 10,223	\$ 4,492	\$ 13,100	\$ 20,202	-	-	\$ 21,353	\$ 15,215	\$ 5,084	\$ 17,255	\$ 10,349	\$ 8,974	\$ 11,905	\$ 9,649	\$ 11,375

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
135 Forceps, vacuum & breech delivery															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 19,164	\$ 19,164
137 Other procedures to assist delivery															
N	-	-	3	-	-	-	1	2	-	-	-	1	-	35	42
Avg\$	-	-	\$ 1,359	-	-	-	\$ 296	\$ 1,105	-	-	-	\$ 4,015	-	\$ 2,772	\$ 2,562
138 Diagnostic amniocentesis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	-	-	-	-	-	-	-	-	-	-	-	-	-	\$ 1,791	\$ 1,791
139 Fetal monitoring															
N	252	509	298	173	-	-	251	391	217	1	129	238	113	1,254	3,826
Avg\$	\$ 686	\$ 619	\$ 490	\$ 946	-	-	\$ 638	\$ 582	\$ 238	\$ 2,013	\$ 1,457	\$ 889	\$ 360	\$ 974	\$ 758
141 Other therapeutic obstetrical procedures															
N	-	-	-	-	-	-	-	1	-	-	-	2	-	21	24
Avg\$	-	-	-	-	-	-	-	\$ 3,137	-	-	-	\$ 4,348	-	\$ 3,856	\$ 3,867
142 Partial excision bone															
N	26	32	25	17	-	-	6	30	22	9	61	19	7	195	449
Avg\$	\$ 8,282	\$ 10,736	\$ 13,100	\$ 22,431	-	-	\$ 7,978	\$ 15,367	\$ 7,476	\$ 10,486	\$ 9,502	\$ 9,316	\$ 5,972	\$ 9,334	\$ 10,365
143 Bunionectomy or repair of toe deformities															
N	13	26	19	68	-	4	-	36	29	33	44	35	21	167	495
Avg\$	\$ 10,263	\$ 17,092	\$ 20,980	\$ 18,701	-	\$ 7,246	-	\$ 14,613	\$ 5,924	\$ 14,317	\$ 14,793	\$ 13,690	\$ 7,242	\$ 7,172	\$ 11,974
144 Treatment, facial fracture or dislocation															
N	-	1	-	-	-	-	5	-	-	8	27	1	5	31	78
Avg\$	-	\$ 14,109	-	-	-	-	\$ 6,098	-	-	\$ 5,437	\$ 3,755	\$ 4,826	\$ 3,865	\$ 13,038	\$ 7,920
145 Treatment, fracture or disloc of radius & ulna															
N	33	57	39	15	-	-	24	19	39	26	75	12	19	106	464
Avg\$	\$ 12,034	\$ 15,448	\$ 19,638	\$ 35,918	-	-	\$ 17,652	\$ 20,187	\$ 9,135	\$ 17,794	\$ 6,484	\$ 16,045	\$ 14,423	\$ 15,691	\$ 14,708
146 Treatment, fracture or disloc of hip & femur															
N	-	-	-	-	-	-	-	-	-	1	-	-	-	12	13
Avg\$	-	-	-	-	-	-	-	-	-	\$ 30,361	-	-	-	\$ 13,436	\$ 14,738
147 Treatment, fracture or disloc of lower extremity															
N	19	39	40	20	-	-	17	16	34	10	88	31	16	144	474
Avg\$	\$ 13,451	\$ 18,795	\$ 26,220	\$ 24,670	-	-	\$ 26,415	\$ 22,222	\$ 10,228	\$ 19,486	\$ 7,562	\$ 13,896	\$ 11,800	\$ 15,073	\$ 15,472
148 Other fracture & dislocation procedure															
N	24	53	39	7	-	-	18	17	35	22	77	16	13	186	507
Avg\$	\$ 13,837	\$ 13,934	\$ 22,140	\$ 27,126	-	-	\$ 17,244	\$ 17,414	\$ 7,853	\$ 15,290	\$ 9,463	\$ 14,500	\$ 8,277	\$ 13,983	\$ 13,828

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149 Arthroscopy															
N	21	31	44	3	-	3	4	6	4	13	80	25	7	112	353
Avg\$	\$ 14,850	\$ 20,993	\$ 29,179	\$ 38,817	-	\$ 15,588	\$ 37,261	\$ 55,781	\$ 12,999	\$ 37,196	\$ 13,360	\$ 21,739	\$ 20,372	\$ 21,412	\$ 21,479
150 Division of joint capsule, ligament or cartilage															
N	4	1	14	-	-	-	2	3	5	6	5	1	1	48	90
Avg\$	\$ 7,429	\$ 9,106	\$ 13,300	-	-	-	\$ 10,685	\$ 22,854	\$ 11,938	\$ 16,348	\$ 8,041	\$ 9,297	\$ 8,488	\$ 8,704	\$ 10,539
151 Excision of semilunar cartilage of knee															
N	161	104	80	55	-	7	12	68	86	54	137	54	36	373	1,227
Avg\$	\$ 5,411	\$ 9,401	\$ 11,156	\$ 17,595	-	\$ 10,244	\$ 12,688	\$ 18,731	\$ 9,237	\$ 17,291	\$ 6,844	\$ 7,434	\$ 6,157	\$ 9,334	\$ 9,761
152 Arthroplasty knee															
N	11	-	5	4	-	-	1	3	9	3	3	2	1	14	56
Avg\$	\$ 18,574	-	\$ 26,580	\$ 25,136	-	-	\$ 26,918	\$ 25,357	\$ 15,673	\$ 25,943	\$ 17,789	\$ 14,071	\$ 506	\$ 22,101	\$ 20,555
153 Hip replacement, total & partial															
N	-	1	1	-	-	-	-	-	5	-	24	-	-	-	31
Avg\$	-	\$ 27,482	\$ 49,114	-	-	-	-	-	\$ 16,882	-	\$ 15,096	-	-	-	\$ 16,881
154 Arthroplasty other than hip or knee															
N	13	23	24	2	-	1	7	6	19	3	15	-	10	99	222
Avg\$	\$ 11,416	\$ 11,446	\$ 16,206	\$ 55,953	-	\$ 13,744	\$ 29,384	\$ 36,164	\$ 15,369	\$ 17,409	\$ 12,419	-	\$ 6,617	\$ 19,178	\$ 17,316
155 Arthrocentesis															
N	890	22	-	1	-	11	46	6	14	53	1,957	2	-	2,227	5,229
Avg\$	\$ 413	\$ 1,067	-	\$ 6,009	-	\$ 260	\$ 2,325	\$ 657	\$ 4,290	\$ 217	\$ 705	\$ 834	-	\$ 765	\$ 702
156 Injections & aspirations of muscles, tendons, etc.															
N	68	202	29	-	-	3	-	16	3	-	281	9	-	666	1,277
Avg\$	\$ 522	\$ 1,689	\$ 985	-	-	\$ 769	-	\$ 520	\$ 3,163	-	\$ 1,034	\$ 1,751	-	\$ 1,306	\$ 1,254
157 Amputation of lower extremity															
N	7	16	4	9	-	3	7	7	17	4	7	1	-	49	131
Avg\$	\$ 6,043	\$ 7,105	\$ 8,888	\$ 12,732	-	\$ 5,905	\$ 8,410	\$ 8,856	\$ 4,373	\$ 6,366	\$ 9,856	\$ 11,898	-	\$ 5,614	\$ 6,874
158 Spinal fusion															
N	-	3	-	3	-	-	-	-	14	-	2	-	-	8	30
Avg\$	-	\$ 16,665	-	\$ 47,939	-	-	-	-	\$ 24,675	-	\$ 20,304	-	-	\$ 24,136	\$ 25,765
159 Other diagnostic procedures on musculoskeletal system															
N	3	5	2	1	-	1	1	1	1	-	6	6	1	50	78
Avg\$	\$ 7,246	\$ 8,797	\$ 19,636	\$ 20,949	-	\$ 17,634	\$ 15,440	\$ 2,482	\$ 4,265	-	\$ 6,629	\$ 5,452	\$ 2,200	\$ 8,110	\$ 8,282
160 Other therapeutic procedures on muscles & tendons															
N	186	211	226	63	-	4	114	161	263	87	346	103	62	788	2,614
Avg\$	\$ 8,268	\$ 10,328	\$ 18,339	\$ 28,218	-	\$ 11,841	\$ 12,529	\$ 14,074	\$ 4,499	\$ 18,805	\$ 7,701	\$ 11,542	\$ 4,006	\$ 8,828	\$ 10,428

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161 Other OR therapeutic procedures on bone															
N	27	46	36	10	-	-	10	19	36	31	42	29	11	304	601
Avg\$	\$ 5,422	\$ 9,885	\$ 13,204	\$ 19,056	-	-	\$ 15,413	\$ 10,273	\$ 7,640	\$ 9,307	\$ 7,952	\$ 10,486	\$ 6,989	\$ 12,347	\$ 11,062
162 Other OR therapeutic procedures on joints															
N	62	61	131	24	-	4	35	50	56	42	149	47	46	453	1,160
Avg\$	\$ 8,309	\$ 13,862	\$ 22,685	\$ 26,143	-	\$ 16,346	\$ 11,614	\$ 20,680	\$ 12,581	\$ 24,925	\$ 9,479	\$ 9,722	\$ 10,758	\$ 13,284	\$ 14,309
163 Other non-OR therapeutic procedures on musc system															
N	2	-	-	-	-	-	-	1	-	-	1	-	-	21	25
Avg\$	\$ 212	-	-	-	-	-	-	\$ 3,844	-	-	\$ 5,701	-	-	\$ 1,175	\$ 1,385
164 Other OR therapeutic procedures on musc system															
N	2	2	2	-	-	-	3	3	7	7	5	1	4	26	62
Avg\$	\$ 5,815	\$ 6,568	\$ 10,125	-	-	-	\$ 10,733	\$ 7,283	\$ 3,161	\$ 9,058	\$ 5,824	\$ 4,608	\$ 5,259	\$ 7,373	\$ 6,953
165 Breast biopsy & other diagnostic procedures on breast															
N	48	111	-	15	-	14	20	-	16	41	107	165	37	455	1,029
Avg\$	\$ 6,627	\$ 4,214	-	\$ 7,112	-	\$ 4,894	\$ 3,929	-	\$ 2,175	\$ 2,384	\$ 2,625	\$ 3,061	\$ 3,755	\$ 5,166	\$ 4,322
166 Lumpectomy, quadrantectomy of breast															
N	28	63	2	6	-	2	12	3	13	20	87	81	9	129	455
Avg\$	\$ 11,355	\$ 12,890	\$ 5,679	\$ 28,103	-	\$ 9,073	\$ 12,651	\$ 12,568	\$ 3,978	\$ 14,500	\$ 10,637	\$ 8,477	\$ 9,256	\$ 6,662	\$ 9,701
167 Mastectomy															
N	5	1	-	1	-	-	3	2	4	1	8	4	3	36	68
Avg\$	\$ 12,702	\$ 20,586	-	\$ 50,368	-	-	\$ 15,516	\$ 37,776	\$ 11,330	\$ 40,223	\$ 13,883	\$ 14,078	\$ 18,228	\$ 17,615	\$ 17,622
168 Incision & drainage, skin & subcutaneous tissue															
N	55	2	1	4	-	-	3	2	15	6	19	4	-	150	261
Avg\$	\$ 767	\$ 3,967	\$ 2,880	\$ 10,862	-	-	\$ 6,254	\$ 7,758	\$ 2,991	\$ 7,477	\$ 1,677	\$ 4,585	-	\$ 1,473	\$ 1,884
169 Debridement of wound, infection or burn															
N	452	2	5	6	-	-	4	5	7	3	55	3	-	118	660
Avg\$	\$ 836	\$ 7,140	\$ 8,275	\$ 13,817	-	-	\$ 7,599	\$ 9,567	\$ 2,299	\$ 11,014	\$ 1,475	\$ 6,701	-	\$ 1,994	\$ 1,486
170 Excision of skin lesion															
N	141	109	112	26	1	18	43	47	260	15	190	129	30	3,599	4,720
Avg\$	\$ 1,664	\$ 4,508	\$ 2,249	\$ 9,191	\$ 702	\$ 7,482	\$ 5,938	\$ 7,197	\$ 1,572	\$ 6,326	\$ 3,582	\$ 3,755	\$ 5,164	\$ 2,110	\$ 2,408
171 Suture of skin & subcutaneous tissue															
N	8	30	3	2	-	11	4	16	2	2	104	12	-	527	721
Avg\$	\$ 1,348	\$ 4,605	\$ 8,149	\$ 11,708	-	\$ 5,805	\$ 8,877	\$ 10,150	\$ 4,650	\$ 4,158	\$ 3,030	\$ 4,036	-	\$ 3,072	\$ 3,410
172 Skin graft															
N	43	16	1	15	-	-	4	9	2	4	31	17	9	410	561
Avg\$	\$ 3,157	\$ 7,307	\$ 3,771	\$ 11,642	-	-	\$ 10,954	\$ 20,822	\$ 4,374	\$ 8,968	\$ 14,144	\$ 10,505	\$ 5,669	\$ 8,587	\$ 8,726

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 discussion in the User's Guide for details.

Table O-10
2016 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
173 Other diagnostic proc on skin & subcutaneous tissue															
N	5	4	-	-	-	-	1	-	23	-	72	17	2	36	160
Avg\$	\$ 355	\$ 1,636	-	-	-	-	\$ 2,701	-	\$ 1,066	-	\$ 1,069	\$ 623	\$ 2,955	\$ 1,448	\$ 1,132
174 Other non-OR therapeutic procedures on skin & breast															
N	30	8	1,290	2	-	3	5	196	21	3	47	3	3	1,993	3,604
Avg\$	\$ 2,447	\$ 7,313	\$ 46	\$ 4,610	-	\$ 3,981	\$ 7,877	\$ 214	\$ 2,851	\$ 5,850	\$ 1,793	\$ 5,414	\$ 5,032	\$ 849	\$ 605
175 Other OR therapeutic procedures on skin & breast															
N	3	32	9	1	-	2	8	17	17	6	14	15	9	244	377
Avg\$	\$ 5,456	\$ 6,178	\$ 8,676	\$ 17,910	-	\$ 6,063	\$ 9,018	\$ 8,384	\$ 3,890	\$ 9,826	\$ 7,027	\$ 5,542	\$ 10,564	\$ 16,507	\$ 13,173
Total															
N	6,471	9,271	4,483	1,994	2	1,822	4,286	4,437	5,980	3,223	17,100	9,443	2,653	61,530	132,695
Avg\$	\$ 3,504	\$ 4,614	\$ 5,054	\$ 10,149	\$ 611	\$ 3,681	\$ 5,471	\$ 6,202	\$ 3,176	\$ 7,637	\$ 3,318	\$ 3,569	\$ 4,165	\$ 5,264	\$ 4,785

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 discussion in the User's Guide for details.

Table O-11
2016 Vermont Hospital Expanded Outpatient Services, including VT Residents and Non-residents
Primary Cost Centers of Services Provided by Vermont Hospitals

Primary Cost Center	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
3390 Laboratory - Clinical	38,805	85,000	21,709	10,844	8,368	13,519	29,026	27,946	64,323	34,357	78,551	53,002	37,299	237,387	740,136
4100 Radiology - Diagnostic	12,754	19,267	8,609	1,046	1,451	2,736	4,767	4,743	12,368	7,435	15,358	13,019	1,975	51,136	156,664
5600 Drugs Charged to Patients	6,388	12,459	5,010	1,016	36	635	3,217	1,642	6,801	1,905	9,609	13,979	2,479	49,744	114,920
3440 Mammography	4,822	7,954	1,876	1,832	-	1,231	3,084	2,664	4,962	3,586	8,400	6,424	2,971	26,188	75,994
Diagnostic	622	992	398	258	-	260	243	483	824	388	961	1,086	335	3,341	10,191
Screening	4,203	6,962	1,480	1,574	-	973	2,842	2,182	4,142	3,198	7,445	5,341	2,636	22,942	65,920
3180 Chemistry	-	-	-	-	5,309	2,357	9	17,987	205	-	-	46,632	-	297	72,796
3630 Ultra Sound	446	5,909	2,092	1,488	534	542	2,138	1,004	5,272	2,557	5,105	6,713	1,978	14,265	50,043
5000 Physical Therapy	-	5,839	1,532	2,306	653	1,305	1,137	5,120	2,318	2,074	2,351	1,221	1,318	13,553	40,727
3420 Laboratory - Pathological	826	1,329	498	243	-	458	525	716	4,816	2,733	2,353	2,695	762	22,254	40,208
3350 Hematology	-	-	-	-	3,802	-	-	397	1	-	-	33,325	-	-	37,525
3430 Magnetic Resonance Imaging (MRI)	1,892	2,660	1,054	1,069	-	366	1,206	1,013	2,081	925	3,559	2,753	1,230	12,539	32,347
3230 CAT Scan	1,208	2,365	996	514	305	442	1,311	643	2,056	1,111	3,124	2,975	1,005	11,691	29,746
3240 Cytology	-	2,865	-	21	-	5	1,179	1,947	193	-	4,928	2,083	12	16,111	29,344
3280 EKG and EEG	1,323	1,798	1,322	258	379	135	993	456	705	325	6,427	1,009	166	7,537	22,833
EKG	1,323	1,672	1,219	222	379	135	527	405	705	325	5,448	457	166	4,752	17,735
EEG	-	126	103	36	-	-	466	52	-	-	979	552	-	2,785	5,099
3050 Bacteriology and Microbiology	-	-	-	-	247	-	-	5,735	1,466	-	-	14,346	-	-	21,794
4800 Intravenous Therapy	1,139	2,873	791	127	49	-	1,652	295	667	421	1,758	5,112	812	1,600	17,296
3190 Chemotherapy	-	1,590	284	23	-	121	591	-	-	28	1,016	2,827	408	10,240	17,128
3260 Echocardiography	378	1,378	586	285	-	169	991	345	724	642	1,826	1,831	431	5,604	15,190
3140 Cardiology	440	749	72	43	-	50	22	718	-	15	2,293	1,231	-	4,186	9,819
3450 Nuclear Medicine - Diagnostic	476	1,221	214	145	-	-	249	341	756	410	1,107	1,018	269	3,580	9,786
PET Scan	-	150	-	-	-	-	-	-	-	-	164	317	-	188	819
All other	476	1,221	214	145	-	-	249	341	756	410	1,107	701	269	3,578	9,467
3650 Vascular Lab	456	719	248	125	88	126	470	188	-	-	986	719	277	4,433	8,835

Table O-11
2016 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
3480 Oncology	2,101	1	-	88	-	-	381	-	-	-	5,887	-	-	1	8,459
3620 Stress Test	474	774	338	188	-	-	359	356	1,082	536	1,092	748	212	2,157	8,316
5100 Occupational Therapy	-	1,095	282	374	64	137	253	3	162	256	473	229	88	4,464	7,880
3370 Holter Monitor	-	504	109	74	25	-	566	565	323	22	432	-	133	3,378	6,131
3550 Psychiatric/Psychological Services	-	-	-	-	-	-	-	-	-	-	1,626	-	-	3,215	4,841
3040 Audiology	6	38	25	2	-	-	14	9	20	27	2,163	-	5	1,842	4,151
3540 Prosthetic Devices	-	401	140	1	-	-	2	-	93	1	-	54	21	2,713	3,426
4000 Anesthesiology	60	19	122	24	-	-	10	19	33	39	107	-	34	2,893	3,360
4200 Radiology - Therapeutic	-	325	-	-	-	-	-	-	-	-	495	144	-	1,774	2,738
5200 Speech Pathology	44	329	12	43	10	33	61	41	74	45	339	129	34	905	2,099
4900 Respiratory Therapy	510	26	26	2	-	6	95	12	22	26	138	-	13	854	1,730
3560 Pulmonary Function Testing	25	27	21	6	-	7	26	26	25	15	79	241	15	774	1,287
5700 Renal Dialysis	-	-	-	-	-	-	-	-	-	-	-	92	-	657	749
Total (not including subcategories)	74,573	159,514	47,968	22,187	21,320	24,380	54,334	74,931	111,548	59,491	161,582	214,551	53,947	517,972	1,598,298

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
2016 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	125	\$ 14,725	398	\$ 11,451	28	\$ 16,647	256	\$ 1,620	439	\$ 1,364	1,246	\$ 6,322
Central Vermont Medical Center	234	\$ 17,936	832	\$ 9,095	41	\$ 16,903	41	\$ 13,187	39	\$ 3,722	1,187	\$ 11,084
Copley Hospital	35	\$ 12,071	244	\$ 3,782	22	\$ 18,602	74	\$ 26,890	56	\$ 2,953	431	\$ 9,071
Gifford Medical Center	65	\$ 20,988	186	\$ 12,532	16	\$ 29,030	28	\$ 33,917	42	\$ 4,741	337	\$ 15,752
Grace Cottage Hospital	1	\$ 10,231	83	\$ 5,892	-	\$ -	-	\$ -	16	\$ 4,739	100	\$ 5,751
Mt. Ascutney Hospital and Health Center	-	\$ -	35	\$ 5,755	-	\$ -	19	\$ 20,688	120	\$ 4,162	174	\$ 6,287
North Country Hospital	54	\$ 20,952	231	\$ 9,834	19	\$ 23,611	97	\$ 25,987	40	\$ 6,323	441	\$ 15,024
Northeastern Vermont Regional Hospital	151	\$ 24,472	417	\$ 8,211	55	\$ 26,303	66	\$ 31,177	30	\$ 6,382	719	\$ 15,042
Northwestern Medical Center	97	\$ 11,498	328	\$ 5,404	33	\$ 13,390	107	\$ 14,070	19	\$ 2,934	584	\$ 8,375
Porter Medical Center	175	\$ 17,046	278	\$ 8,433	65	\$ 28,637	64	\$ 31,294	212	\$ 1,020	794	\$ 11,849
Rutland Regional Medical Center	305	\$ 29,456	923	\$ 8,011	51	\$ 13,921	50	\$ 15,892	58	\$ 4,806	1,387	\$ 13,094
Southwestern Vermont Medical Center	169	\$ 14,807	746	\$ 9,305	78	\$ 17,267	22	\$ 19,954	27	\$ 4,020	1,042	\$ 10,881
Springfield Hospital	20	\$ 20,772	383	\$ 9,058	30	\$ 17,409	62	\$ 22,509	3	\$ 6,665	498	\$ 11,692
University of Vermont Medical Center	1,732	\$ 29,734	1,753	\$ 9,025	304	\$ 23,712	208	\$ 19,353	271	\$ 7,667	4,268	\$ 18,907
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 the User's Guide to Vermont Hospitals Report for details.

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

Table O-13

**2016 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	5,611	\$19,606,606	860	\$3,067,762	6,471	\$22,674,368
Central Vermont Medical Center	9,207	\$42,409,881	64	\$363,436	9,271	\$42,773,317
Copley Hospital	4,443	\$22,425,740	40	\$230,930	4,483	\$22,656,670
Gifford Medical Center	1,960	\$19,729,096	34	\$507,849	1,994	\$20,236,946
Grace Cottage Hospital	1	\$520	1	\$702	2	\$1,222
Mt. Ascutney Hospital and Health Center	1,078	\$4,166,691	744	\$2,540,124	1,822	\$6,706,815
North Country Hospital	4,251	\$23,276,120	35	\$172,312	4,286	\$23,448,432
Northeastern Vermont Regional Hospital	4,063	\$26,284,531	374	\$1,231,955	4,437	\$27,516,486
Northwestern Medical Center	5,934	\$18,832,182	46	\$162,017	5,980	\$18,994,199
Porter Medical Center	2,886	\$22,015,862	337	\$2,597,983	3,223	\$24,613,845
Rutland Regional Medical Center	16,259	\$53,739,907	841	\$2,981,050	17,100	\$56,720,957
Southwestern Vermont Medical Center	7,159	\$25,234,726	2,284	\$8,466,118	9,443	\$33,700,845
Springfield Hospital	2,304	\$9,336,048	349	\$1,712,582	2,653	\$11,048,630
University of Vermont Medical Center	54,673	\$277,987,714	6,857	\$45,889,752	61,530	\$323,877,466
Total for 2016	119,829	\$565,045,625	12,866	\$69,924,572	132,695	\$634,970,197
Total for 2015	116,134	\$545,650,951	12,300	\$67,449,779	128,434	\$613,100,730
Total for 2014	117,859	\$546,346,794	13,052	\$77,607,455	130,911	\$623,954,249
Total for 2013	93,936	\$486,776,842	10,715	\$73,499,273	104,651	\$560,276,115
Total for 2012	92,537	\$453,755,623	10,296	\$64,947,708	102,833	\$518,703,330

Table O-13

2016 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	69,825	\$42,914,860	11,691	\$7,098,297	81,516	\$50,013,157
Central Vermont Medical Center	175,872	\$121,958,219	2,202	\$1,112,778	178,074	\$123,070,997
Copley Hospital	54,094	\$24,575,563	701	\$284,109	54,795	\$24,859,671
Gifford Medical Center	20,259	\$23,187,883	216	\$347,226	20,475	\$23,535,109
Grace Cottage Hospital	10,675	\$7,032,338	340	\$231,644	11,015	\$7,263,981
Mt. Ascutney Hospital and Health Center	15,454	\$17,362,589	4,752	\$5,627,701	20,206	\$22,990,291
North Country Hospital	46,567	\$50,104,125	477	\$501,063	47,044	\$50,605,189
Northeastern Vermont Regional Hospital	53,912	\$35,632,760	1,472	\$1,006,470	55,384	\$36,639,229
Northwestern Medical Center	127,695	\$37,874,177	968	\$248,846	128,663	\$38,123,024
Porter Medical Center	51,275	\$31,017,387	3,295	\$2,238,242	54,570	\$33,255,629
Rutland Regional Medical Center	154,169	\$122,574,070	8,141	\$5,535,235	162,310	\$128,109,304
Southwestern Vermont Medical Center	128,350	\$91,861,517	31,020	\$28,477,176	159,370	\$120,338,694
Springfield Hospital	45,248	\$24,751,828	6,159	\$3,289,211	51,407	\$28,041,039
University of Vermont Medical Center	497,808	\$514,380,977	34,431	\$62,258,127	532,239	\$576,639,104
Total for 2016	1,451,203	\$1,145,228,292	105,865	\$118,256,126	1,557,068	\$1,263,484,418
Total for 2015	1,458,663	\$1,113,383,420	100,188	\$110,008,920	1,558,851	\$1,223,392,341
Total for 2014	1,389,358	\$1,020,585,047	96,970	\$97,883,028	1,486,328	\$1,118,468,075
Total for 2013	1,407,763	\$956,212,737	100,143	\$95,514,163	1,507,906	\$1,051,726,900
Total for 2012	1,390,532	\$883,670,902	94,251	\$85,777,378	1,484,783	\$969,448,281

Table O-13

**2016 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	75,436	\$62,521,466	12,551	\$10,166,059	87,987	\$72,687,526
Central Vermont Medical Center	185,079	\$164,368,100	2,266	\$1,476,214	187,345	\$165,844,314
Copley Hospital	58,537	\$47,001,303	741	\$515,038	59,278	\$47,516,341
Gifford Medical Center	22,219	\$42,916,979	250	\$855,076	22,469	\$43,772,055
Grace Cottage Hospital	10,676	\$7,032,857	341	\$232,346	11,017	\$7,265,203
Mt. Ascutney Hospital and Health Center	16,532	\$21,529,281	5,496	\$8,167,825	22,028	\$29,697,106
North Country Hospital	50,818	\$73,380,245	512	\$673,375	51,330	\$74,053,620
Northeastern Vermont Regional Hospital	57,975	\$61,917,291	1,846	\$2,238,425	59,821	\$64,155,715
Northwestern Medical Center	133,629	\$56,706,359	1,014	\$410,863	134,643	\$57,117,222
Porter Medical Center	54,161	\$53,033,249	3,632	\$4,836,224	57,793	\$57,869,473
Rutland Regional Medical Center	170,428	\$176,313,976	8,982	\$8,516,285	179,410	\$184,830,261
Southwestern Vermont Medical Center	135,509	\$117,096,244	33,304	\$36,943,295	168,813	\$154,039,538
Springfield Hospital	47,552	\$34,087,876	6,508	\$5,001,793	54,060	\$39,089,669
University of Vermont Medical Center	552,481	\$792,368,691	41,288	\$108,147,879	593,769	\$900,516,570
Total for 2016	1,571,032	\$1,710,273,917	118,731	\$188,180,698	1,689,763	\$1,898,454,615
Total for 2015	1,574,797	\$1,659,034,371	112,488	\$177,458,699	1,687,285	\$1,836,493,070
Total for 2014	1,507,217	\$1,566,931,842	110,022	\$175,490,482	1,617,239	\$1,742,422,324
Total for 2013	1,501,699	\$1,442,989,579	110,858	\$169,013,436	1,612,557	\$1,612,003,015
Total for 2012	1,483,069	\$1,337,426,525	104,547	\$150,725,086	1,587,616	\$1,488,151,611

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 the User's Guide to Vermont Hospitals Report for details.

Comparisons across Hospital Settings

Table C-1
2016 Vermont Hospital Data, including VT Residents and Non-residents
Summary of 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	1,606	3.3%	6,471	4.9%	12,696	5.4%	81,516	5.2%	102,289	5.2%
Central Vermont Medical Center	4,201	8.8%	9,271	7.0%	21,788	9.2%	178,074	11.4%	213,334	10.8%
Copley Hospital	1,760	3.7%	4,483	3.4%	12,545	5.3%	54,795	3.5%	73,583	3.7%
Gifford Medical Center	1,457	3.0%	1,994	1.5%	6,559	2.8%	20,475	1.3%	30,485	1.5%
Grace Cottage Hospital	119	0.2%	2	0.0%	2,817	1.2%	11,015	0.7%	13,953	0.7%
Mt. Ascutney Hospital and Health Center	967	2.0%	1,822	1.4%	4,346	1.8%	20,206	1.3%	27,341	1.4%
North Country Hospital	1,600	3.3%	4,286	3.2%	14,473	6.1%	47,044	3.0%	67,403	3.4%
Northeastern Vermont Regional Hospital	1,377	2.9%	4,437	3.3%	12,975	5.5%	55,384	3.6%	74,173	3.8%
Northwestern Medical Center	2,607	5.4%	5,980	4.5%	23,083	9.8%	128,663	8.3%	160,333	8.1%
Porter Medical Center	1,402	2.9%	3,223	2.4%	13,424	5.7%	54,570	3.5%	72,619	3.7%
Rutland Regional Medical Center	6,365	13.3%	17,100	12.9%	28,647	12.1%	162,310	10.4%	214,422	10.9%
Southwestern Vermont Medical Center	3,319	6.9%	9,443	7.1%	20,519	8.7%	159,370	10.2%	192,651	9.8%
Springfield Hospital	1,800	3.8%	2,653	2.0%	15,426	6.5%	51,407	3.3%	71,286	3.6%
University of Vermont Medical Center	19,420	40.5%	61,530	46.4%	47,168	19.9%	532,239	34.2%	660,357	33.4%
Total	48,000	100.0%	132,695	100.0%	236,466	100.0%	1,557,068	100.0%	1,974,229	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
2016 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	2,703	\$32,822	671	\$1,355	3,854	\$1,475	42,076	\$346	49,304	\$2,242
Neoplasms	2,061	\$40,337	14,589	\$4,760	389	\$5,822	96,649	\$3,196	113,688	\$4,093
Endocrine, nutritional, metabolic, immunity	1,741	\$25,865	2,111	\$3,350	3,386	\$2,614	165,309	\$415	172,547	\$752
Diseases of the blood & blood-forming organs	517	\$25,710	662	\$4,091	541	\$4,499	27,753	\$700	29,473	\$1,289
Mental disorders	2,851	\$24,568	782	\$1,865	11,768	\$1,887	43,656	\$386	59,057	\$1,887
Diseases of the nervous system and sense organs	1,405	\$26,164	15,282	\$4,511	19,102	\$2,033	77,978	\$1,100	113,767	\$2,031
Diseases of the circulatory system	7,894	\$33,223	4,226	\$13,635	18,792	\$3,752	189,792	\$634	220,704	\$2,322
Diseases of the respiratory system	4,848	\$20,748	11,269	\$1,904	26,212	\$1,643	75,458	\$626	117,787	\$1,808
Diseases of the digestive system	5,054	\$23,759	12,788	\$5,752	17,941	\$2,802	47,204	\$1,267	82,987	\$3,683
Diseases of the genitourinary system	1,865	\$19,334	11,643	\$7,926	12,096	\$2,721	119,108	\$585	144,712	\$1,606
Pregnancy, childbirth, and the puerperium	5,611	\$11,684	4,832	\$1,837	2,686	\$2,265	44,442	\$429	57,571	\$1,777
Diseases of the skin and subcutaneous tissue	909	\$17,347	4,412	\$1,423	8,337	\$1,115	35,595	\$529	49,253	\$1,024
Musculoskeletal system and connective tissue	4,143	\$43,383	19,077	\$4,370	17,594	\$1,619	204,066	\$1,012	244,880	\$2,051
Congenital anomalies	136	\$49,653	370	\$8,548	50	\$3,199	3,732	\$1,299	4,288	\$3,573
Conditions originating in the perinatal period	10	\$10,969	178	\$1,190	262	\$1,141	1,618	\$209	2,068	\$8,158
Injury & poisoning	4,609	\$39,907	5,673	\$11,765	63,599	\$1,680	61,376	\$672	135,257	\$2,991
Symptoms, signs & ill-defined conditions	1,438	\$24,389	22,451	\$2,923	27,524	\$2,547	294,145	\$493	345,558	\$919
Residual codes, unclassified, all Ecodes	205	\$18,371	1,679	\$3,139	2,333	\$2,542	27,111	\$1,402	31,328	\$1,707
Total Discharges and Average Charges	48,000	\$26,269	132,695	\$4,785	236,466	\$2,132	1,557,068	\$823	1,974,229	\$1,948
Total Charges	\$1,409,078,640		\$634,970,197		\$504,244,961		\$1,263,484,418		\$3,811,778,216	

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 the User's Guide to Vermont Hospitals Report 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
2016 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	780	\$51,787	13,325	\$3,813	695	\$1,292	-	\$0	14,800	\$6,291
Operations on the endocrine system	42	\$43,301	331	\$13,531	1	\$10,530	-	\$0	374	\$16,866
Operations on the eye	17	\$35,345	7,858	\$6,000	38	\$7,217	-	\$0	7,913	\$6,069
Operations on the ear	61	\$47,014	3,213	\$2,383	25	\$1,063	-	\$0	3,299	\$3,212
Operations on the nose, mouth, and pharynx	149	\$25,692	3,246	\$3,568	360	\$2,175	-	\$0	3,755	\$4,687
Operations on the respiratory system	1,100	\$42,455	12,093	\$1,230	41	\$3,475	-	\$0	13,234	\$4,750
Operations on the cardiovascular system	3,108	\$61,557	8,536	\$9,039	293	\$16,908	-	\$0	11,937	\$23,016
Operations on the hemic and lymphatic system	134	\$62,813	248	\$10,109	1	\$19,683	-	\$0	383	\$28,574
Operations on the digestive system	3,482	\$38,792	38,819	\$4,732	928	\$15,509	-	\$0	43,229	\$7,718
Operations on the urinary system	640	\$42,885	5,521	\$5,294	131	\$9,679	-	\$0	6,292	\$9,214
Operations on the male genital organs	204	\$11,332	1,308	\$7,807	42	\$8,764	-	\$0	1,554	\$9,811
Operations on the female genital organs	492	\$21,484	6,008	\$6,260	150	\$8,718	-	\$0	6,650	\$7,444
Obstetrical procedures	4,821	\$11,965	3,907	\$843	31	\$11,431	-	\$0	8,759	\$7,002
Operations on the musculoskeletal system	5,670	\$47,307	15,666	\$7,478	1,982	\$4,521	-	\$0	23,318	\$16,917
Operations on the integumentary system	822	\$32,710	12,616	\$2,979	5,756	\$1,181	-	\$0	19,194	\$3,719
Miscellaneous diagnostic and therapeutic procs	7,829	\$24,763	-	\$0	225,949	\$2,052	713,247	\$1,435	947,025	\$1,800
New Categories specific to CPT/HCPCS	-	\$0	-	\$0	33	\$4,142	585,510	\$340	585,543	\$340
Total Discharges and Average Charges	29,351	\$33,273	132,695	\$4,785	236,456	\$2,132	1,298,757	\$941	1,697,259	\$2,017
Total charges	\$1,068,175,665		\$634,970,197		\$504,241,657		\$1,222,295,261		\$3,429,682,780	

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 2016, ten 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 the User's Guide to Vermont Hospitals Report 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

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 range 10021-69990, 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 CPT high level 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

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.

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 the 2015 data by quarter to check for discontinuities or inconsistencies. At the time of this report, groupings of the fourth

quarter diagnosis data are very consistent with groupings of the first three quarters of data for 2015 in all hospital settings. As the 2016 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, the 2015 inpatient procedure data were analyzed by quarter to check for discontinuities or inconsistencies. At the time of this report, groupings of the fourth quarter data are generally consistent with groupings of the first three quarters of data for 2015. Such analyses will continue as the 2016 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 Postabortion 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: 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

- 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 (External Cause Codes)

- 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

CCS High Level Diagnosis Group	dy																			ICD-10-CM					
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
54 Gout and other crystal arthropathies	11	7	3	11	32	9	6	6	5	26	5	10	5	8	28	6	7	6	8	27	12	10	7	17	46
55 Fluid and electrolyte disorders	121	155	120	123	519	134	131	150	90	505	108	125	101	65	399	96	113	101	109	419	99	106	117	104	426
56 Cystic fibrosis	39	43	46	54	182	50	50	67	42	209	46	57	45	58	206	51	40	45	43	179	35	43	37	48	163
57 Immunity disorders	-	2	2	1	5	-	1	2	-	3	-	3	1	1	5	-	-	-	3	3	1	1	1	2	5
58 Other nutritional, endocrine; and metabolic disorders	44	52	55	45	196	64	47	57	44	212	53	66	55	69	243	60	64	54	78	256	73	88	81	63	305
Total	421	454	434	440	1,749	431	427	486	348	1,692	401	447	391	384	1,623	392	438	405	431	1,666	382	429	476	454	1,741
4 Diseases of the blood & blood-forming organs																									
59 Deficiency and other anemia	55	40	58	61	214	40	41	49	54	184	50	55	64	39	208	43	46	57	40	186	33	57	51	45	186
60 Acute posthemorrhagic anemia	20	21	20	14	75	12	25	24	9	70	23	19	18	25	85	22	19	24	24	89	22	26	33	22	103
61 Sickle cell anemia	4	8	2	6	20	5	4	6	4	19	9	7	3	3	22	1	4	5	4	14	7	7	6	4	24
62 Coagulation and hemorrhagic disorders	7	7	14	15	43	10	14	12	7	43	12	8	8	6	34	9	11	8	9	37	13	9	20	17	59
63 Diseases of white blood cells	37	44	42	33	156	27	34	35	31	127	22	42	35	36	135	38	31	38	36	143	24	32	42	32	130
64 Other hematologic conditions	1	2	2	2	7	1	1	1	3	6	4	3	2	1	10	3	2	1	5	11	3	5	6	1	15
Total	124	122	138	131	515	95	119	127	108	449	120	134	130	110	494	116	113	133	118	480	102	136	158	121	517
5 Mental disorders																									
650 Adjustment disorders	37	42	30	30	139	32	26	29	33	120	26	21	25	24	96	26	26	25	20	97	15	18	15	19	67
651 Anxiety disorders	34	34	33	32	133	22	36	37	26	121	11	31	42	28	112	34	40	34	31	139	22	36	23	26	107
652 Attention-deficit conduct and disruptive behavior disorders	3	1	-	-	4	2	-	-	-	2	1	-	1	-	2	-	-	1	-	1	1	-	1	-	2
653 Delirium dementia and amnesic and other cognitive disorders	27	32	32	35	126	46	42	32	27	147	32	30	41	39	142	31	43	34	45	153	34	22	39	49	144
654 Developmental disorders	1	2	-	2	5	1	1	-	2	4	5	2	1	1	9	-	1	1	-	2	-	-	-	-	-
655 Disorders usually diagnosed in infancy childhood or adolescence	-	2	1	-	3	1	-	-	1	2	-	-	1	1	2	-	1	-	-	1	2	2	1	-	5
656 Impulse control disorders NEC	-	-	1	-	1	1	1	-	1	3	1	-	-	-	1	1	-	2	1	4	-	1	1	-	2
657 Mood disorders	234	280	255	274	1,043	260	291	308	263	1,122	256	272	278	222	1,028	262	299	279	303	1,143	309	286	252	262	1,109
658 Personality disorders	16	20	13	18	67	16	9	22	28	75	12	7	14	20	53	21	27	20	2	70	22	12	13	19	66
659 Schizophrenia and other psychotic disorders	90	85	90	75	340	90	86	95	68	339	91	75	81	67	314	72	85	89	78	324	63	80	72	69	284
660 Alcohol-related disorders	108	109	126	122	465	97	143	129	104	473	114	122	123	130	489	127	166	165	170	628	172	167	172	147	658
661 Substance-related disorders	79	87	66	65	297	70	76	74	73	293	75	59	60	68	262	58	51	58	42	209	36	47	39	38	160
662 Suicide and intentional self-inflicted injury	1	-	2	1	4	3	2	4	4	13	3	5	1	-	9	1	-	1	54	56	53	62	56	45	216
663 Screening and history of mental health and substance abuse codes	26	18	21	27	92	18	20	25	23	86	-	1	1	-	2	1	-	2	-	3	-	-	-	-	-
670 Miscellaneous disorders	17	19	14	22	72	22	23	17	15	77	21	19	13	19	72	30	17	24	8	79	5	6	11	9	31
Total	673	731	684	703	2,791	681	756	772	668	2,877	648	644	682	619	2,593	664	756	735	754	2,909	734	739	695	683	2,851
6 Diseases of the nervous system and sense organs																									
76 Meningitis (except that caused by TB or STD)	12	19	28	16	75	5	17	33	18	73	10	7	25	15	57	8	7	13	16	44	9	13	14	11	47
77 Encephalitis (except that caused by TB or STD)	2	6	5	8	21	1	6	6	4	17	3	2	1	8	14	3	3	7	3	16	9	11	7	4	31
78 Other CNS infection and poliomyelitis	10	4	5	4	23	4	-	3	1	8	5	6	2	15	2	5	3	6	16	8	8	4	5	1	18
79 Parkinson's disease	3	4	6	6	19	8	5	4	12	29	6	8	6	9	29	7	11	3	3	24	11	9	8	10	38
80 Multiple sclerosis	5	4	3	3	15	3	5	5	5	18	2	3	9	11	25	4	5	7	6	22	6	11	8	2	27
81 Other hereditary and degenerative nervous system conditions	20	20	31	19	90	20	26	15	27	88	16	20	10	14	60	18	20	27	12	77	14	11	12	13	50
82 Paralysis	1	2	2	1	6	4	-	2	1	7	4	-	3	4	11	2	2	4	11	19	16	6	7	8	37
83 Epilepsy; convulsions	80	78	75	68	301	80	88	87	49	304	60	72	60	41	233	60	52	50	75	237	93	100	90	90	373
84 Headache; including migraine	14	16	18	17	65	13	10	15	15	53	15	17	15	13	60	21	14	18	26	79	27	29	39	33	128
85 Coma; stupor; and brain damage	11	7	14	11	43	9	9	10	6	34	14	7	10	7	38	7	19	8	3	37	9	8	6	6	29
87 Retinal detachments; defects; vascular occlusion; and retinopathy	3	-	-	1	4	-	-	-	-	-	1	-	1	1	3	1	1	2	1	5	-	-	1	-	1
89 Blindness and vision defects	3	5	3	4	15	-	1	3	1	5	-	1	1	1	3	2	-	1	1	4	2	1	1	3	7
90 Inflammation; infection of eye (except that caused by TB or sexually transmitted disease)	4	4	3	2	13	8	6	3	3	20	2	3	4	4	13	1	2	1	1	5	7	5	6	4	22
91 Other eye disorders	1	-	1	3	5	2	-	-	1	3	-	2	2	-	4	-	2	-	1	3	-	3	2	2	7
92 Otitis media and related conditions	2	4	1	-	7	3	1	5	-	9	2	-	-	2	4	5	2	1	4	12	4	3	2	1	10
93 Conditions associated with dizziness or vertigo	12	21	18	12	63	15	14	17	14	60	14	16	13	8	51	19	12	11	13	55	16	17	18	18	69
94 Other ear and sense organ disorders	4	1	3	4	12	2	1	1	-	4	5	-	-	4	9	2	1	3	3	9	2	2	3	2	9
95 Other nervous system disorders	83	87	57	80	307	93	98	91	90	372	92	93	93	83	361	100	110	114	127	451	106	129	138	129	502
Total	270	282	273	259	1,084	270	287	300	247	1,104	251	257	255	227	990	262	268	273	312	1,115	339	362	367	337	1,405
7 Diseases of the circulatory system																									
96 Heart valve disorders	53	60	58	43	214	60	45	48	49	202	47	60	69	68	244	69	60	96	82	307	62	63	60	81	266
97 Peri-, endo-, and myocarditis; cardiomyopathy (except that caused by TB or STD)	36	32	33	26	127	29	42	25	30	126	20	32	35	30	117	27	34	22	31	114	35	33	35	28	131
98 Essential hypertension	17	11	7	8	43	10	5	6	6	27	5	7	4	7	23	6	9	6	9	30	12	13	12	3	40
99 Hypertension with complications and secondary hypertension	41	42	45	40	168	39	43	30	61	173	33	43	38	43	157	55	47	49	65	216	42	44	46	195	327
100 Acute myocardial infarction	267	307	297	329	1,200	293	335	279	280	1,187	276	289	282	289	1,136	344	287	308	317	1,256					

CCS High Level Diagnosis Group	dy																			ICD-10-CM					
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
103 Pulmonary heart disease	88	95	92	93	368	91	93	90	84	358	89	73	91	90	343	94	88	88	75	345	108	96	97	98	399
104 Other and ill-defined heart disease	6	3	3	2	14	7	4	6	4	21	6	3	6	5	20	3	9	6	6	24	11	6	8	10	35
105 Conduction disorders	27	35	33	19	114	18	29	29	23	99	24	23	27	18	92	22	21	19	24	86	19	20	26	29	94
106 Cardiac dysrhythmias	326	389	327	332	1,374	303	320	359	305	1,287	290	316	311	277	1,194	292	348	350	307	1,297	315	322	297	295	1,229
107 Cardiac arrest and ventricular fibrillation	11	4	12	6	33	2	5	4	6	17	5	7	2	10	24	5	10	5	9	29	11	2	13	11	37
108 Congestive heart failure; nonhypertensive	360	341	301	314	1,316	339	313	297	313	1,262	311	367	319	351	1,348	366	337	295	336	1,334	346	395	351	221	1,313
109 Acute cerebrovascular disease	208	220	269	216	913	198	243	222	242	905	226	182	218	222	848	238	243	227	251	959	241	254	248	238	981
110 Occlusion or stenosis of precerebral arteries	31	36	32	19	118	22	26	24	28	100	27	20	27	24	98	24	23	28	33	108	16	29	35	29	109
111 Other and ill-defined cerebrovascular disease	3	14	12	7	36	13	10	5	6	34	6	8	5	6	25	9	5	10	16	40	8	10	9	7	34
112 Transient cerebral ischemia	37	40	35	33	145	33	34	28	26	121	20	26	22	32	100	26	30	34	24	114	28	31	26	25	110
113 Late effects of cerebrovascular disease	7	3	8	6	24	3	5	1	4	13	5	2	1	9	5	8	5	67	85	61	58	60	55	234	
114 Peripheral and visceral atherosclerosis	56	43	37	31	167	44	47	43	42	176	31	35	43	40	149	41	33	61	54	189	51	64	55	56	226
115 Aortic; peripheral; and visceral artery aneurysms	28	20	26	21	95	24	33	35	34	126	32	26	19	28	105	19	25	24	30	98	25	25	34	34	118
116 Aortic and peripheral arterial embolism or thrombosis	12	13	14	6	45	14	8	4	2	28	7	3	7	10	27	9	7	10	3	29	5	4	6	8	23
117 Other circulatory disease	25	40	49	28	142	35	47	37	32	151	24	29	41	28	122	34	28	30	22	114	33	27	25	27	112
118 Phlebitis; thrombophlebitis and thromboembolism	32	23	31	28	114	27	20	31	24	102	28	26	21	17	92	21	12	31	30	94	27	33	28	48	136
119 Varicose veins of lower extremity	1	-	-	1	2	-	-	2	3	5	1	-	3	1	5	-	-	-	2	2	1	1	5	5	12
120 Hemorrhoids	5	4	9	8	26	7	11	3	4	25	3	3	1	6	13	3	2	2	4	11	7	4	6	3	20
121 Other diseases of veins and lymphatics	13	9	6	8	36	11	9	5	6	31	11	12	8	5	36	10	7	8	5	30	6	6	1	5	18
Total	1,942	2,004	1,939	1,832	7,717	1,806	1,950	1,809	1,757	7,322	1,669	1,751	1,754	1,750	6,924	1,841	1,825	1,902	1,938	7,506	1,945	2,024	1,935	1,990	7,894
8 Diseases of the respiratory system																									
122 Pneumonia (except that caused by TB or STD)	624	530	420	548	2,122	618	500	406	451	1,975	498	499	355	407	1,759	537	473	356	420	1,786	426	426	299	339	1,490
123 Influenza	15	31	-	22	68	131	12	-	12	155	76	25	-	27	128	233	33	-	2	268	52	69	1	11	133
124 Acute and chronic tonsillitis	2	6	4	4	16	4	8	4	6	22	6	4	4	2	16	-	2	3	4	9	-	7	4	4	15
125 Acute bronchitis	124	19	16	23	182	107	34	6	24	171	59	29	8	22	118	77	32	10	16	135	118	53	9	21	201
126 Other upper respiratory infections	19	13	9	15	56	24	20	13	27	84	14	11	15	15	55	26	15	8	16	65	21	22	15	14	72
127 Chronic obstructive pulmonary disease and bronchiectasis	352	313	230	303	1,198	437	310	227	282	1,256	335	297	222	240	1,094	317	280	196	276	1,069	308	351	241	346	1,246
128 Asthma	73	74	54	96	297	105	92	57	76	330	76	64	63	66	269	101	81	47	44	273	45	46	34	40	165
129 Aspiration pneumonitis; food/vomitus	83	87	86	95	341	85	86	96	78	345	82	76	83	80	321	81	95	74	60	310	93	77	74	63	307
130 Pleurisy; pneumothorax; pulmonary collapse	63	53	59	50	225	53	42	47	47	189	49	46	34	37	166	35	47	49	33	164	51	53	48	39	191
131 Respiratory failure; insufficiency; arrest (adult)	147	116	141	119	523	137	147	122	142	548	198	170	160	204	732	299	287	219	239	1,044	237	217	169	178	801
132 Lung disease due to external agents	4	5	3	6	18	3	5	4	3	15	3	2	7	14	4	3	10	1	18	7	2	4	5	18	
133 Other lower respiratory disease	48	50	35	40	173	51	50	38	32	171	31	33	43	29	136	38	36	33	39	146	40	44	35	37	156
134 Other upper respiratory disease	16	14	15	9	54	8	12	10	19	49	5	8	11	10	34	11	9	12	9	41	17	17	11	8	53
Total	1,570	1,311	1,072	1,320	5,273	1,763	1,318	1,030	1,199	5,310	1,432	1,264	1,000	1,146	4,842	1,759	1,393	1,017	1,159	5,328	1,415	1,384	944	1,105	4,848
9 Diseases of the digestive system																									
135 Intestinal infection	117	76	89	75	357	75	76	88	62	301	79	73	54	75	281	105	113	73	67	358	78	78	77	91	324
136 Disorders of teeth and jaw	16	13	24	21	74	12	12	9	8	41	5	12	7	3	27	6	8	7	14	35	13	14	11	5	43
137 Diseases of mouth; excluding dental	9	7	7	11	34	7	3	9	5	24	4	4	10	4	22	6	5	8	7	26	7	8	6	6	27
138 Esophageal disorders	33	20	21	23	97	26	19	32	17	94	17	16	13	19	65	16	19	17	20	72	20	28	23	23	94
139 Gastroduodenal ulcer (except hemorrhage)	14	10	14	15	53	13	8	12	8	41	5	12	13	10	40	11	11	16	10	48	6	5	6	6	23
140 Gastritis and duodenitis	16	19	13	19	67	15	9	16	9	49	15	12	14	17	58	9	13	13	13	48	6	18	14	10	48
141 Other disorders of stomach and duodenum	18	20	16	27	81	33	35	22	21	111	16	23	21	24	84	24	26	29	23	102	10	16	11	16	53
142 Appendicitis and other appendiceal conditions	104	121	123	101	449	99	95	105	82	381	80	82	87	81	330	58	68	66	49	241	80	83	86	67	316
143 Abdominal hernia	59	87	52	59	257	63	73	61	51	248	44	53	51	49	197	48	46	43	49	186	54	59	58	65	236
144 Regional enteritis and ulcerative colitis	31	30	33	35	129	41	40	32	25	138	30	38	37	31	136	36	39	35	40	150	31	32	40	32	135
145 Intestinal obstruction without hernia	159	145	167	142	613	145	142	152	196	635	165	163	149	153	630	162	172	145	151	630	167	166	185	184	702
146 Diverticulosis and diverticulitis	118	132	137	139	526	122	135	144	119	520	108	143	139	135	525	147	119	137	152	555	149	148	140	136	573
147 Anal and rectal conditions	11	10	13	10	44	13	8	12	13	46	15	8	12	11	46	9	12	8	11	40	11	14	14	7	46
148 Peritonitis and intestinal abscess	12	16	21	10	59	15	15	23	16	69	16	14	11	13	54	12	11	12	10	45	15	10	6	6	37
149 Biliary tract disease	138	121	142	140	541	136	124	154	121	535	96	126	109	113	444	119	116	117	119	471	132	121	125	127	505
151 Other liver diseases	60	40	36	50	186	51	42	43	46	182	37	43	43	40	163	44	56	46	50	196	40	30	50	44	164
152 Pancreatic disorders (not diabetes)	145	137	140	120	542	114	153	144	124	535	123	118	134	115	490	102	113	151	127	493	134	153	190	152	629
153 Gastrointestinal hemorrhage	141	149	167	145	602	137	151	137	135	560	144	129	159	144	576	126	130	126	116	498	140	141	164	150	595
154 Noninfectious gastroenteritis	65	48																							

CCS High Level Diagnosis Group	dy																			ICD-10-CM					
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
161 Other diseases of kidney and ureters	15	15	21	13	64	24	11	12	14	61	14	16	19	10	59	14	10	8	43	75	42	46	62	34	184
162 Other diseases of bladder and urethra	11	1	7	11	30	10	11	13	12	46	7	7	12	9	35	8	12	11	5	36	9	9	10	15	43
163 Genitourinary symptoms and ill-defined conditions	12	14	9	9	44	11	9	8	12	40	11	14	15	11	51	8	7	10	11	36	9	13	14	12	48
164 Hyperplasia of prostate	21	9	14	14	58	15	14	12	18	59	18	13	10	14	55	13	17	13	23	66	16	14	14	13	57
165 Inflammatory conditions of male genital organs	5	4	8	8	25	5	12	13	6	36	8	4	8	7	27	9	11	5	8	33	5	8	6	6	25
166 Other male genital disorders	2	3	1	1	7	4	3	4	2	13	-	3	4	-	7	4	4	2	-	10	-	2	1	3	6
167 Nonmalignant breast conditions	5	3	3	2	13	3	1	3	5	12	2	4	4	1	11	3	3	-	6	12	2	2	3	4	11
168 Inflammatory diseases of female pelvic organs	14	16	7	5	42	10	9	15	7	41	11	5	5	8	29	8	6	8	11	33	11	11	5	6	33
169 Endometriosis	10	6	1	7	24	2	9	3	3	17	2	9	2	-	13	2	1	2	4	9	6	3	2	-	11
170 Prolapse of female genital organs	24	16	2	9	51	8	10	9	7	34	7	3	5	8	23	1	-	2	5	8	3	2	1	1	7
171 Menstrual disorders	16	16	12	12	56	6	12	9	6	33	8	9	7	7	31	8	9	5	9	31	4	5	3	-	12
172 Ovarian cyst	5	2	6	11	24	10	6	3	5	24	4	4	4	1	13	4	4	3	2	13	3	5	6	1	15
173 Menopausal disorders	5	-	-	2	7	1	2	1	1	5	-	1	1	-	2	-	-	-	1	1	-	-	-	-	-
175 Other female genital disorders	21	9	7	9	46	10	13	9	7	39	5	9	9	4	27	5	6	11	8	30	5	13	4	3	25
Total	552	495	552	491	2,090	464	509	495	460	1,928	421	520	514	466	1,921	446	457	494	467	1,864	434	523	488	420	1,865
11 Pregnancy, childbirth, and the puerperium																									
176 Contraceptive and procreative management	1	-	-	-	1	-	-	-	-	-	-	-	1	-	1	-	-	1	-	1	-	-	-	-	-
177 Spontaneous abortion	2	3	1	2	8	1	-	-	2	3	1	1	1	1	4	-	1	1	4	6	3	-	4	2	9
178 Induced abortion	-	1	-	3	4	1	1	1	3	6	1	2	3	2	8	1	1	2	1	5	2	2	2	1	7
179 Postabortion complications	2	1	-	-	3	2	-	1	-	3	1	-	-	-	1	1	-	-	1	1	-	-	-	-	-
180 Ectopic pregnancy	6	5	2	7	20	3	2	2	1	8	2	3	1	1	7	1	1	5	6	13	2	-	1	-	3
181 Other complications of pregnancy	156	150	175	157	638	136	147	165	114	562	140	147	141	143	571	141	155	154	89	539	94	83	100	101	378
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa	21	26	18	18	83	15	16	20	18	69	23	22	18	18	81	29	19	21	21	90	23	20	20	20	83
183 Hypertension complicating pregnancy; childbirth and the puerperium	72	74	62	72	280	87	95	96	86	364	97	109	117	131	454	105	96	104	129	434	132	116	115	112	475
184 Early or threatened labor	61	43	44	46	194	34	47	56	50	187	36	56	51	28	171	39	43	44	36	162	38	40	42	44	164
185 Prolonged pregnancy	172	197	246	223	838	216	205	250	191	862	187	263	264	207	921	204	213	251	147	815	148	143	249	198	738
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth, or the puerperium	22	22	23	26	93	28	25	21	26	100	29	26	26	27	108	27	29	39	29	124	20	27	34	36	117
187 Malposition; malpresentation	47	59	53	66	225	54	52	58	61	225	43	59	55	65	222	61	54	53	48	216	68	48	70	62	248
188 Fetopelvic disproportion; obstruction	13	18	14	14	59	10	11	16	13	50	15	17	10	18	60	14	20	23	8	65	13	24	20	15	72
189 Previous C-section	85	123	118	121	447	105	131	132	120	488	102	106	140	110	458	110	125	136	118	489	107	121	123	101	452
190 Fetal distress and abnormal forces of labor	106	116	117	91	430	90	77	92	87	346	96	93	91	76	356	68	64	92	73	297	54	82	60	64	260
191 Polyhydramnios and other problems of amniotic cavity	98	99	127	112	436	87	125	113	121	446	107	126	127	120	480	122	124	115	103	464	140	167	172	143	622
192 Umbilical cord complication	35	35	44	43	157	35	50	52	40	177	46	32	57	51	186	45	45	59	64	213	68	58	75	56	257
193 OB-related trauma to perineum and vulva	180	194	176	173	723	176	176	178	171	701	168	172	173	148	661	148	169	159	189	665	183	176	117	109	585
194 Forceps delivery	1	-	-	-	1	-	-	-	1	1	1	-	-	-	1	-	-	-	1	1	1	-	-	-	1
195 Other complications of birth; puerperium affecting management of mother	195	253	250	198	896	217	211	231	202	861	240	223	213	214	890	233	237	254	244	968	249	260	275	244	1,028
196 Normal pregnancy and/or delivery	44	32	41	31	148	36	27	41	43	147	40	52	30	44	166	36	52	31	40	159	23	31	21	37	112
Total	1,319	1,451	1,511	1,403	5,684	1,333	1,398	1,525	1,350	5,606	1,375	1,509	1,519	1,404	5,807	1,385	1,448	1,544	1,350	5,727	1,368	1,398	1,500	1,345	5,611
12 Diseases of the skin and subcutaneous tissue																									
197 Skin and subcutaneous tissue infections	160	242	228	196	826	207	228	264	183	882	161	206	235	186	788	174	186	231	170	761	178	203	248	196	825
198 Other inflammatory condition of skin	1	2	2	1	6	6	3	3	3	15	7	3	3	4	17	2	3	3	6	14	3	3	3	4	13
199 Chronic ulcer of skin	13	14	17	15	59	12	9	20	21	62	14	13	18	19	64	12	15	18	11	56	10	15	11	24	60
200 Other skin disorders	1	4	1	4	10	2	1	4	-	7	-	-	3	1	4	-	3	-	2	5	3	2	2	4	11
Total	175	262	248	216	901	227	241	291	207	966	182	222	259	210	873	188	207	252	189	836	194	223	264	228	909
13 Musculoskeletal system and connective tissue																									
201 Infective arthritis and osteomyelitis (except that caused by TB or STD)	24	24	40	32	120	19	27	38	32	116	32	33	33	34	132	32	26	50	40	148	49	51	55	48	203
202 Rheumatoid arthritis and related disease	7	5	6	3	21	8	8	-	4	20	6	5	4	7	22	6	2	3	2	13	3	3	4	6	16
203 Osteoarthritis	485	511	484	501	1,981	530	513	500	536	2,079	510	524	463	568	2,065	563	572	539	634	2,308	648	623	627	669	2,567
204 Other non-traumatic joint disorders	18	17	17	16	68	17	15	8	20	60	15	13	6	15	49	15	15	16	17	63	18	20	18	23	79
205 Spondylosis; intervertebral disc disorders; other back problems	169	170	131	179	649	172	171	146	142	631	147	130	154	169	600	151	184	153	184	672	146	180	168	174	668
206 Osteoporosis	-	-	1	-	1	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
207 Pathological fracture	31	21	24	14	90	21	20	20	25	86	17	18	17	30	82	29	29	38	38	134	24	42	26	43	135
208 Acquired foot deformities	5	-	1	3	9	3	2	4	-	9	2	2	1	-	5	1	1	1	-	3	-	-	1	-	1
209 Other acquired deformities	26	28	24	22	100	31	18	32	20	101	36	36	27	31	130	40	30	39	57	166	45	50	39	34	168
210 Systemic lupus erythematosus and connective tissue disorders	-	2	-	3	5	2	-	2	1	5	2	2	-	3	7	3	3	1	5	12	4	10	11	7	32
211 Other connective tissue disease	61	44	53	33	191	52	51	63	50	216	44	38	49	56	187	48	53	46	44	191	68	45	57	38	208
212 Other bone disease and musculoskeletal deformities	25	23	26	28	102	23	28	32	23	106	30	27	23	24	104	26	20	31	10	87	9	16	22	19	66
Total	851	845	807	834	3,337	878	854	845	853	3,430	841	828	777	937	3,383	914	935	917	1,031	3,797	1,014	1,040	1,028	1,061	4,143
14 Congenital anomalies																									

CCS High Level Diagnosis Group	dy																ICD-10-CM								
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
213 Cardiac and circulatory congenital anomalies	11	9	1	2	23	4	2	4	4	14	9	2	8	8	27	3	9	4	13	29	8	14	18	16	56
214 Digestive congenital anomalies	4	3	8	12	27	10	7	3	14	34	5	5	11	9	30	5	10	5	4	24	5	7	3	8	23
215 Genitourinary congenital anomalies	7	7	4	9	27	4	7	8	1	20	-	5	5	2	12	4	5	5	5	19	7	7	3	3	20
216 Nervous system congenital anomalies	2	4	2	1	9	2	2	6	-	10	6	4	2	2	14	2	3	4	4	13	1	5	3	2	11
217 Other congenital anomalies	16	20	17	19	72	19	15	21	10	65	11	13	10	9	43	9	8	11	6	34	5	8	5	8	26
Total	40	43	32	43	158	39	33	42	29	143	31	29	36	30	126	23	35	29	32	119	26	41	32	37	136
15 Conditions originating in the perinatal period																									
218 Liveborn	-	1	-	-	1	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-
224 Other perinatal conditions	2	-	2	-	4	1	-	1	1	3	-	-	-	2	2	-	1	-	2	3	3	3	2	2	10
Total	2	1	2	-	5	1	-	1	1	3	-	1	-	2	3	-	1	-	2	3	3	3	2	2	10
16 Injury & poisoning																									
225 Joint disorders and dislocations; trauma-related	9	7	9	15	40	9	12	11	14	46	12	10	7	7	36	4	13	18	5	40	3	8	4	5	20
226 Fracture of neck of femur (hip)	199	151	154	158	662	177	142	184	151	654	205	145	168	157	675	170	154	189	197	710	203	161	173	192	729
227 Spinal cord injury	2	3	7	4	16	7	4	9	2	22	2	3	7	3	15	11	6	8	10	35	3	10	12	9	34
228 Skull and face fractures	16	9	12	13	50	14	13	16	14	57	1	12	15	5	33	7	17	8	17	49	14	26	26	16	82
229 Fracture of upper limb	42	39	52	36	169	37	46	64	40	187	48	36	40	32	156	41	25	52	42	160	42	52	61	57	212
230 Fracture of lower limb	158	96	96	100	450	154	84	114	103	455	144	85	93	108	430	152	88	99	99	438	191	117	132	154	594
231 Other fractures	102	111	106	83	402	105	96	113	103	417	96	97	118	110	421	86	110	116	158	470	143	132	154	130	559
232 Sprains and strains	14	7	11	9	41	12	7	12	8	39	10	8	8	7	33	9	5	8	8	30	7	13	5	8	33
233 Intracranial injury	91	80	99	81	351	77	73	100	67	317	67	67	83	56	273	61	70	76	67	274	88	73	80	71	312
234 Crushing injury or internal injury	52	41	54	47	194	54	27	52	43	176	32	38	49	37	156	37	34	48	35	154	40	39	54	28	161
235 Open wounds of head; neck; and trunk	5	4	13	8	30	6	12	8	2	28	5	5	8	2	20	7	4	5	5	21	4	11	6	6	27
236 Open wounds of extremities	8	14	22	16	60	10	16	18	8	52	5	10	15	10	40	8	14	23	13	58	11	9	20	7	47
237 Complication of device; implant or graft	183	178	156	178	695	162	156	165	165	648	185	159	177	192	713	166	179	215	158	718	170	155	174	185	684
238 Complications of surgical procedures or medical care	156	173	185	160	674	166	175	157	167	665	167	157	191	171	686	145	158	162	199	664	165	165	178	197	705
239 Superficial injury; contusion	14	16	9	13	52	11	14	16	13	54	9	9	11	14	43	10	13	18	19	60	13	18	19	17	67
240 Burns	9	10	8	9	36	11	11	9	8	39	8	9	12	5	34	7	15	9	10	41	7	13	11	9	40
241 Poisoning by psychotropic agents	29	31	37	40	137	34	40	41	38	153	29	38	26	36	129	22	27	28	9	86	13	9	13	9	44
242 Poisoning by other medications and drugs	57	73	39	60	229	52	52	66	59	229	35	53	47	56	191	51	47	48	29	175	30	25	26	22	103
243 Poisoning by nonmedicinal substances	1	4	10	6	21	2	6	8	6	22	3	6	5	4	18	4	3	1	5	13	3	4	6	6	19
244 Other injuries and conditions due to external causes	13	27	17	22	79	29	17	33	13	92	24	23	18	13	78	41	15	14	24	94	38	36	31	32	137
Total	1,160	1,074	1,096	1,058	4,388	1,129	1,003	1,196	1,024	4,352	1,087	970	1,098	1,025	4,180	1,039	997	1,145	1,109	4,290	1,188	1,076	1,185	1,160	4,609
17 Symptoms, signs & ill-defined conditions																									
245 Syncope	45	47	57	57	206	40	44	47	32	163	29	37	25	32	123	23	22	46	42	133	38	45	48	53	184
246 Fever of unknown origin	16	19	27	22	84	9	32	33	18	92	15	16	27	20	78	11	19	29	26	85	19	14	28	18	79
247 Lymphadenitis	5	4	4	3	16	1	-	2	8	11	2	2	2	2	8	5	1	4	1	11	4	3	3	5	15
248 Gangrene	3	11	6	5	25	7	10	10	3	30	5	8	2	6	21	17	8	11	10	46	5	6	9	8	28
249 Shock	1	-	-	-	1	-	1	-	-	1	-	1	-	1	2	-	-	-	5	5	5	6	4	4	19
250 Nausea and vomiting	19	21	15	24	79	17	14	18	21	70	11	16	15	7	49	14	14	18	14	60	14	32	26	25	97
251 Abdominal pain	41	41	51	31	164	47	34	51	35	167	23	33	28	33	117	32	25	32	35	124	34	29	38	34	135
252 Malaise and fatigue	11	16	15	21	63	11	11	16	11	49	11	9	11	8	39	11	25	15	21	72	10	20	18	28	76
253 Allergic reactions	6	2	10	7	25	7	5	9	3	24	2	9	6	2	19	2	8	9	7	26	8	7	5	11	31
254 Rehabilitation care; fitting of prostheses; and adjustment of devices	239	224	239	197	899	169	165	141	152	627	261	285	308	323	1,177	348	362	348	-	1,058	-	1	-	-	1
255 Administrative/social admission	5	5	2	6	18	8	2	4	1	15	1	2	1	1	5	1	-	2	1	4	1	3	4	-	8
256 Medical examination/evaluation	1	2	1	1	5	-	1	1	1	3	2	2	1	1	6	-	4	2	-	6	-	-	-	-	-
257 Other aftercare	6	5	8	8	27	15	8	5	2	30	12	8	21	15	56	8	17	27	189	241	203	187	201	156	747
258 Other screening for suspected conditions (not mental disorders or infectious disease)	4	2	1	-	7	2	1	2	3	8	-	1	-	1	2	1	4	-	4	9	4	6	3	5	18
Total	402	399	436	382	1,619	333	328	339	290	1,290	374	429	447	452	1,702	473	509	543	355	1,880	345	359	387	347	1,438
18 Residual codes, unclassified, all Ecodes																									
259 Residual codes; unclassified	41	48	51	47	187	35	29	35	34	133	25	36	35	34	130	28	36	25	41	130	46	50	36	52	184
2617 Adverse effects of medical drugs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	9	8	7	4	2	21
Total	41	48	51	47	187	35	29	35	34	133	25	36	35	34	130	28	36	25	50	139	54	57	40	54	205
Totals by Quarter/Year	11,870	11,748	11,570	11,414	46,602	11,718	11,475	11,605	10,688	45,486	10,864	11,258	11,140	10,896	44,158	11,753	11,813	11,739	11,617	46,922					

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								
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
1 Infectious & parasitic diseases																									
1 Tuberculosis	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2	-	-	1	1	2	-	1	-	-	1
2 Septicemia (except in labor)	2	1	1	-	4	2	2	-	2	6	3	4	3	5	15	1	4	-	1	6	-	-	-	-	-
3 Bacterial infection; unspecified site	1	1	1	1	4	-	2	4	4	10	10	3	10	4	27	4	2	6	9	21	6	12	9	7	34
4 Mycoses	13	19	11	12	55	13	27	39	50	129	49	76	67	56	248	55	86	86	77	304	64	55	48	58	225
5 HIV infection	1	1	1	1	4	2	-	-	-	2	2	1	3	1	7	2	-	6	2	10	-	1	-	-	1
6 Hepatitis	42	30	28	37	137	30	27	30	27	114	29	15	4	3	51	8	6	9	4	27	4	28	13	17	62
7 Viral infection	55	49	39	37	180	33	32	41	38	144	45	58	79	79	261	69	75	72	73	289	72	64	41	33	210
8 Other infections; including parasitic	5	9	4	6	24	4	4	13	5	26	37	38	41	40	156	42	47	46	5	140	7	7	8	6	28
9 Sexually transmitted infections (not HIV or hepatitis)	1	4	1	2	8	2	3	9	4	18	5	8	14	8	35	7	6	7	11	31	11	8	2	5	26
10 Immunizations and screening for infectious disease	4	2	2	1	9	2	1	3	8	14	7	9	12	18	46	10	13	10	11	44	11	11	21	41	84
Total	124	116	88	97	425	88	98	139	138	463	188	213	233	214	848	198	239	243	194	874	175	187	142	167	671
2 Neoplasms																									
11 Cancer of head and neck	50	58	37	58	203	64	64	55	73	256	76	103	79	95	353	72	71	92	82	317	54	68	55	65	242
12 Cancer of esophagus	27	24	15	25	91	20	23	23	21	87	28	33	26	21	108	39	29	31	25	124	27	20	42	40	129
13 Cancer of stomach	20	13	10	13	56	14	9	20	13	56	10	8	11	10	39	20	10	9	9	49	1	5	18	21	45
14 Cancer of colon	75	75	74	77	301	79	84	88	102	353	132	143	141	118	534	109	91	130	96	426	117	118	122	98	455
15 Cancer of rectum and anus	45	38	50	39	172	47	63	47	54	211	77	96	79	75	327	74	52	70	97	293	87	72	97	89	345
16 Cancer of liver and intrahepatic bile duct	9	10	8	12	39	4	6	8	5	23	23	23	11	11	68	12	11	18	9	50	21	8	6	17	52
17 Cancer of pancreas	18	18	13	12	61	25	17	23	13	78	34	27	37	37	135	21	25	28	36	110	32	48	47	59	186
18 Cancer of other GI organs; peritoneum	6	5	3	5	19	7	6	8	9	30	5	11	17	13	46	10	11	12	10	43	9	11	7	9	36
19 Cancer of bronchus; lung	49	42	56	44	191	57	42	56	56	211	85	124	98	105	412	118	79	114	105	416	135	136	159	119	549
20 Cancer; other respiratory and intrathoracic	-	-	-	-	-	-	-	-	1	1	1	-	3	-	4	-	-	1	-	1	-	1	1	1	3
21 Cancer of bone and connective tissue	7	7	8	6	28	11	10	11	10	42	17	21	9	8	55	12	8	13	14	47	6	10	12	6	34
22 Melanomas of skin	63	76	64	92	295	63	69	74	76	282	66	65	57	68	256	43	47	82	72	244	78	79	85	54	296
23 Other non-epithelial cancer of skin	459	457	456	514	1,886	420	497	502	488	1,907	413	496	433	409	1,751	369	442	497	497	1,805	466	468	526	500	1,960
24 Cancer of breast	217	199	260	247	923	193	263	240	237	933	308	309	202	245	1,064	240	216	221	257	934	223	222	221	193	859
25 Cancer of uterus	35	31	36	34	136	27	41	41	34	143	44	67	59	50	220	47	71	85	72	275	58	48	52	44	202
26 Cancer of cervix	21	15	17	22	75	19	21	24	20	84	29	33	32	39	133	27	37	21	31	116	44	33	24	24	125
27 Cancer of ovary	13	5	13	16	47	9	18	5	9	41	21	38	43	35	137	45	46	43	37	171	51	39	34	34	158
28 Cancer of other female genital organs	13	6	11	12	42	8	6	7	10	31	20	19	11	7	57	11	8	15	9	43	9	13	34	17	73
29 Cancer of prostate	49	51	50	58	208	47	59	53	65	224	71	82	69	47	269	38	54	58	76	226	48	60	62	58	228
30 Cancer of testis	2	1	2	3	8	10	10	5	6	31	13	13	4	4	43	7	2	3	2	14	6	3	8	4	21
31 Cancer of other male genital organs	-	3	2	1	6	-	2	-	2	4	1	2	-	2	5	5	8	4	4	21	2	2	2	3	9
32 Cancer of bladder	199	213	182	218	812	206	209	220	253	888	226	302	226	238	992	184	233	184	208	809	217	259	176	151	803
33 Cancer of kidney and renal pelvis	15	13	8	9	45	4	8	9	12	33	13	10	16	18	57	12	11	13	20	56	10	9	10	14	43
34 Cancer of other urinary organs	6	2	3	8	19	5	6	6	5	22	7	8	2	4	21	3	5	6	12	26	2	9	15	6	32
35 Cancer of brain and nervous system	-	2	-	2	4	-	1	-	4	5	4	7	4	9	24	3	3	3	3	12	4	4	5	3	16
36 Cancer of thyroid	19	22	17	19	77	27	18	14	18	77	18	12	13	61	10	18	16	24	68	28	33	21	24	106	
37 Hodgkin's disease	3	2	14	6	25	12	11	18	11	52	9	20	9	7	45	11	7	8	11	37	14	14	14	5	47
38 Non-Hodgkin's lymphoma	76	86	91	89	342	99	84	85	83	351	128	142	124	113	507	116	158	183	219	676	171	149	154	136	610
39 Leukemias	35	43	37	60	175	57	45	54	47	203	75	83	89	79	326	53	61	78	81	273	68	55	57	47	227
40 Multiple myeloma	31	36	21	16	104	16	10	19	20	65	43	31	33	43	150	27	19	31	20	97	34	29	37	38	138
41 Cancer; other and unspecified primary	6	9	10	9	34	10	2	10	9	31	9	10	12	12	43	13	10	13	32	68	28	24	20	25	97
42 Secondary malignancies	26	29	28	29	112	31	23	33	29	116	20	36	46	46	148	24	35	23	34	116	37	32	29	46	144
43 Malignant neoplasm without specification of site	10	9	4	6	29	4	5	11	9	29	10	14	20	16	60	13	16	16	9	54	20	10	19	16	65
44 Neoplasms of unspecified nature or uncertain behavior	246	332	294	308	1,180	252	339	314	376	1,281	339	447	104	75	965	105	77	100	96	378	108	94	90	71	363
45 Maintenance chemotherapy; radiotherapy	16	14	9	10	49	8	3	8	4	23	65	86	55	23	229	21	16	20	5	62	1	9	7	6	23
46 Benign neoplasm of uterus	52	54	39	42	187	37	41	39	62	179	40	49	53	60	202	47	40	33	37	157	47	50	32	70	199
47 Other and unspecified benign neoplasm	1,591	1,494	1,369	1,551	6,005	1,248	1,452	1,304	1,311	5,315	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
Total	3,509	3,494	3,311	3,672	13,986	3,140	3,567	3,434	3,557	13,698	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

CCS High Level Group	ICD-9-CM																ICD-10-CM								
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
3 Endocrine, nutritional, metabolic, immunity																									
48 Thyroid disorders	103	120	92	119	434	112	136	128	97	473	105	105	102	85	397	60	38	37	55	190	52	54	45	37	188
49 Diabetes mellitus without complication	10	10	11	12	43	18	21	38	25	102	84	102	89	87	362	97	124	87	35	343	27	23	18	21	89
50 Diabetes mellitus with complications	117	135	94	92	438	111	147	135	156	549	203	210	281	260	954	224	231	266	309	1,030	300	279	228	236	1,043
51 Other endocrine disorders	11	17	17	12	57	14	17	12	13	56	10	21	7	17	55	10	15	12	10	47	14	14	18	17	63
52 Nutritional deficiencies	3	1	-	1	5	1	2	-	-	3	5	2	3	4	14	2	3	1	2	8	5	7	6	6	24
53 Disorders of lipid metabolism	8	5	3	2	18	6	6	12	9	33	11	11	10	9	41	11	7	13	3	34	3	13	9	7	32
54 Gout and other crystal arthropathies	10	14	5	1	30	1	9	9	9	28	7	11	6	11	35	4	7	5	15	31	10	6	13	12	41
55 Fluid and electrolyte disorders	1	3	-	2	6	2	3	-	2	7	1	1	4	3	9	2	2	3	3	10	3	8	3	9	23
56 Cystic fibrosis	13	9	6	3	31	7	9	7	4	27	83	84	89	90	346	103	96	101	109	409	91	81	48	54	274
57 Immunity disorders	1	3	2	1	7	-	1	5	5	11	3	5	5	3	16	4	4	4	40	52	44	37	39	43	163
58 Other nutritional; endocrine; and metabolic disorders	61	48	45	41	195	53	47	54	49	203	53	38	55	48	194	33	55	48	43	179	47	41	38	45	171
Total	338	465	275	286	1,264	325	398	400	369	1,492	565	590	651	617	2,423	550	582	577	624	2,333	596	563	465	487	2,111
4 Diseases of the blood & blood-forming organs																									
59 Deficiency and other anemia	160	164	162	131	617	124	131	179	161	595	165	193	169	173	700	157	173	187	154	671	135	151	144	142	572
60 Acute posthemorrhagic anemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	-	3	1	1	-	-	2
61 Sickle cell anemia	-	1	-	-	1	1	-	1	1	3	3	-	-	1	4	-	-	2	-	2	1	-	1	1	3
62 Coagulation and hemorrhagic disorders	10	5	3	4	22	10	10	11	6	37	15	18	10	10	53	11	11	12	10	44	11	13	18	15	57
63 Diseases of white blood cells	4	3	4	5	16	2	6	6	5	19	5	-	14	9	28	7	6	3	3	19	5	6	5	6	22
64 Other hematologic conditions	3	4	-	2	9	1	1	2	-	4	8	-	1	2	11	1	1	1	3	6	2	2	1	1	6
Total	177	177	169	142	665	138	148	199	173	658	196	211	194	195	796	176	192	207	170	745	155	173	169	165	662
5 Mental disorders																									
650 Adjustment disorders	-	-	-	1	1	-	-	-	1	1	5	1	1	1	8	2	-	-	1	3	2	-	1	-	3
651 Anxiety disorders	47	43	28	22	140	34	39	26	40	139	40	48	42	39	169	4	5	7	9	25	13	8	2	1	24
652 Attention-deficit conduct and disruptive behavior disorders	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3	3	3	-	7	13	11	3	-	-	14
653 Delirium dementia and amnesic and other cognitive disorders	1	-	1	-	2	-	1	2	4	7	1	-	-	2	3	3	1	2	4	10	-	5	-	2	7
654 Developmental disorders	-	-	-	-	-	-	-	1	-	1	-	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
656 Impulse control disorders NEC	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	1	-	1	-	-	-	-	-
657 Mood disorders	1	3	1	2	7	-	4	8	1	13	3	4	5	12	24	3	10	5	2	20	6	5	3	3	17
658 Personality disorders	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-
659 Schizophrenia and other psychotic disorders	-	-	-	-	-	-	-	1	-	1	3	2	3	2	10	2	1	4	3	10	1	2	2	5	10
660 Alcohol-related disorders	-	-	-	-	-	-	1	-	-	1	1	4	3	4	12	2	1	4	22	29	15	13	14	14	56
661 Substance-related disorders	2	5	1	4	12	2	1	-	2	5	6	8	5	4	23	5	8	8	34	55	24	22	18	60	124
662 Suicide and intentional self-inflicted injury	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-
663 Screening and history of mental health and substance abuse codes	7	6	7	5	25	6	3	9	6	24	13	11	18	11	53	17	14	23	18	72	97	113	92	136	438
670 Miscellaneous disorders	6	3	9	20	38	22	23	18	14	77	8	14	16	16	54	16	22	15	25	78	18	22	25	17	82
Total	64	60	47	54	225	64	72	65	68	269	82	93	94	99	368	57	66	72	127	322	188	196	160	238	782
6 Diseases of the nervous system and sense organs																									
76 Meningitis (except that caused by TB or STD)	1	-	1	-	2	2	-	3	2	7	2	-	1	1	4	-	-	-	-	-	-	-	1	-	1
77 Encephalitis (except that caused by TB or STD)	-	-	-	-	-	1	-	-	-	1	1	4	-	-	5	2	1	1	-	4	2	1	1	1	5
78 Other CNS infection and poliomyelitis	-	1	1	-	2	-	-	-	-	-	1	-	3	2	6	3	-	-	-	3	-	-	1	-	1
79 Parkinson's disease	1	1	6	2	10	2	1	1	6	10	12	17	35	10	74	19	23	27	18	87	12	9	13	19	53
80 Multiple sclerosis	9	9	8	8	34	10	7	13	12	42	16	25	16	12	69	24	22	27	18	91	19	15	7	10	51
81 Other hereditary and degenerative nervous system conditions	60	44	43	35	182	30	35	42	44	151	74	80	86	86	326	93	117	95	91	396	83	74	79	66	302
82 Paralysis	29	28	22	33	112	25	33	39	22	119	28	42	69	81	220	64	80	68	63	275	76	73	44	50	243
83 Epilepsy; convulsions	1	2	1	2	6	1	3	1	1	6	8	11	15	12	46	7	10	12	15	44	8	7	5	7	27
84 Headache; including migraine	50	51	45	42	188	54	63	66	46	229	74	86	84	87	331	95	91	111	107	404	112	132	98	94	436
85 Coma; stupor; and brain damage	-	-	-	1	1	-	-	1	-	1	-	-	-	-	-	1	-	9	3	13	1	3	3	-	7
86 Cataract	1,273	1,140	1,067	1,114	4,594	1,120	1,192	1,215	1,118	4,645	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

CCS High Level Group	ICD-9-CM															ICD-10-CM									
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
8 Diseases of the respiratory system																									
122 Pneumonia (except that caused by TB or STD)	4	8	3	7	22	-	3	-	4	7	26	26	15	42	109	46	34	45	36	161	34	38	24	32	128
123 Influenza	-	-	-	-	-	-	1	-	1	2	1	-	-	-	1	-	-	-	-	-	1	-	-	-	1
124 Acute and chronic tonsillitis	171	184	161	165	681	144	176	168	139	627	162	161	130	125	578	138	144	171	139	592	147	147	110	116	520
125 Acute bronchitis	2	2	-	2	6	-	1	-	1	2	6	6	5	7	24	9	4	10	7	30	4	10	3	9	26
126 Other upper respiratory infections	74	76	56	121	327	150	169	129	140	588	121	121	179	154	575	168	236	178	178	760	186	210	168	159	723
127 Chronic obstructive pulmonary disease and bronchiectasis	6	3	5	4	18	15	9	16	6	46	240	360	371	412	1,383	409	511	503	531	1,954	563	648	571	570	2,352
128 Asthma	-	5	-	4	9	4	5	3	7	19	234	252	274	351	1,111	353	408	373	367	1,501	419	404	245	416	1,484
129 Aspiration pneumonia; food/vomitus	-	-	-	-	-	-	-	1	-	1	-	1	-	1	2	2	1	2	3	8	2	3	4	2	11
130 Pleurisy; pneumothorax; pulmonary collapse	20	45	41	34	140	42	44	38	38	162	45	64	41	58	208	52	49	41	61	203	51	61	53	55	220
131 Respiratory failure; insufficiency; arrest (adult)	1	-	2	-	3	1	-	1	-	2	11	6	10	11	38	11	11	11	13	46	9	6	9	6	30
132 Lung disease due to external agents	-	-	-	-	-	-	1	-	-	1	11	8	7	8	34	7	7	11	8	33	9	8	1	8	26
133 Other lower respiratory disease	110	129	106	155	500	149	138	150	158	595	849	979	883	1,019	3,730	958	1,043	1,055	908	3,964	990	1,041	895	902	3,828
134 Other upper respiratory disease	211	239	244	482	1,176	400	504	412	418	1,734	424	458	448	516	1,846	439	472	457	437	1,805	522	460	433	505	1,920
Total	599	691	618	974	2,882	905	1,051	918	912	3,786	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
9 Diseases of the digestive system																									
135 Intestinal infection	-	1	-	-	1	2	-	-	-	2	-	-	-	3	3	6	5	6	5	22	4	13	9	7	33
136 Disorders of teeth and jaw	125	154	145	136	560	152	191	166	171	680	164	184	90	74	512	43	40	22	20	125	20	22	24	21	87
137 Diseases of mouth; excluding dental	20	18	14	28	80	33	27	26	23	109	34	38	34	26	132	31	26	31	30	118	30	27	28	31	116
138 Esophageal disorders	556	583	565	575	2,279	601	624	593	557	2,375	619	671	653	626	2,569	578	616	604	606	2,404	680	788	703	656	2,827
139 Gastroduodenal ulcer (except hemorrhage)	31	35	28	22	116	23	28	35	27	113	25	31	23	27	106	30	31	31	40	132	30	36	30	39	135
140 Gastritis and duodenitis	250	173	188	177	788	146	137	102	109	494	123	128	126	180	557	146	165	184	152	647	205	160	181	131	677
141 Other disorders of stomach and duodenum	67	84	70	92	313	70	72	86	61	289	93	99	88	91	371	96	92	102	80	370	77	81	107	106	371
142 Appendicitis and other appendiceal conditions	7	8	12	15	42	12	11	14	13	50	10	7	6	6	29	15	14	7	9	45	13	12	15	14	54
143 Abdominal hernia	580	547	482	536	2,145	561	570	536	600	2,267	585	576	523	601	2,285	552	573	468	608	2,201	587	515	472	562	2,136
144 Regional enteritis and ulcerative colitis	96	99	77	84	356	80	81	95	69	325	96	118	116	129	459	91	114	107	108	420	104	120	103	121	448
145 Intestinal obstruction without hernia	5	14	9	13	41	9	10	12	11	42	5	9	10	4	28	10	8	10	5	33	4	7	1	5	17
146 Diverticulosis and diverticulitis	189	156	179	136	660	108	98	81	94	381	126	156	80	76	438	62	61	91	78	292	92	90	83	103	368
147 Anal and rectal conditions	124	148	108	97	477	109	91	80	92	372	92	94	106	81	373	70	92	81	97	340	107	105	88	104	404
148 Peritonitis and intestinal abscess	6	3	3	3	15	1	2	2	3	8	3	9	6	4	22	2	6	9	4	21	2	6	6	4	18
149 Biliary tract disease	329	370	361	364	1,424	350	313	316	316	1,295	288	318	302	299	1,207	261	318	293	284	1,156	318	298	292	282	1,190
151 Other liver diseases	78	73	77	89	317	86	85	91	93	355	102	105	71	73	351	75	55	78	30	238	47	27	36	35	145
152 Pancreatic disorders (not diabetes)	14	15	18	18	65	20	18	25	10	73	16	29	11	14	70	21	21	12	10	64	18	22	24	28	92
153 Gastrointestinal hemorrhage	247	272	253	236	1,008	257	280	264	266	1,067	230	237	234	273	974	295	279	240	277	1,091	265	274	247	249	1,035
154 Noninfectious gastroenteritis	84	63	68	68	283	60	60	36	35	191	49	47	58	70	224	57	62	82	88	289	85	85	94	85	349
155 Other gastrointestinal disorders	515	582	528	521	2,146	509	594	629	560	2,292	614	592	673	628	2,507	598	595	653	588	2,434	544	557	549	636	2,286
Total	3,323	3,398	3,185	3,210	13,116	3,189	3,292	3,189	3,110	12,780	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
10 Diseases of the genitourinary system																									
156 Nephritis; nephrosis; renal sclerosis	5	4	2	4	15	1	4	4	4	13	6	6	-	1	13	2	-	2	-	4	-	1	-	-	1
157 Acute and unspecified renal failure	2	1	4	-	7	7	18	14	13	52	22	25	16	10	73	14	16	14	24	68	17	19	33	14	83
158 Chronic kidney disease	38	50	38	41	167	57	37	37	51	182	743	789	736	731	2,999	709	781	775	652	2,917	768	826	820	635	3,049
159 Urinary tract infections	59	67	63	67	256	58	48	51	47	204	71	67	114	94	346	104	84	91	100	379	104	84	83	83	354
160 Calculus of urinary tract	170	173	194	163	700	203	204	209	171	767	300	298	338	319	1,255	315	297	348	306	1,266	314	315	323	279	1,231
161 Other diseases of kidney and ureters	75	67	70	47	259	54	78	63	82	277	64	77	58	80	279	55	71	54	94	274	103	79	82	102	366
162 Other diseases of bladder and urethra	76	86	70	64	296	57	75	78	77	287	94	87	110	104	395	121	117	128	138	504	160	163	145	163	631
163 Genitourinary symptoms and ill-defined conditions	189	209	160	167	725	210	190	227	215	842	328	365	318	240	1,251	297	314	306	361	1,278	418	440	340	358	1,556
164 Hyperplasia of prostate	120	89	77	99	385	83	81	77	93	334	123	157	92	97	469	89	85	87	76	337	112	101	91	102	406
165 Inflammatory conditions of male genital organs	12	5	9	8	34	9	7	11	8	35	7	8	11	9	35	2	6	3	5	16	3	5	5	4	17
166 Other male genital disorders	99	85	100	92	376	84	106	96	87	373	91	74	79	90	334	80	88	87	87	342	93	97	71	108	369
167 Nonmalignant breast conditions	382	449	404	396	1,631	361	386	354	298	1,399	376	349	323	309	1,357	296	272	278	265	1,111	244	264	215	264	987
168 Inflammatory diseases of female pelvic organs	21	30	24	21	96	20	27	22	22	91	19	33	21	27	100	14	20	16	19	69	27	22	22	22	93

CCS High Level Group	ICD-9-CM															ICD-10-CM													
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total				
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4					
CCS Single Level Group																													
169 Endometriosis	39	33	33	21	126	26	40	28	36	130	41	36	31	30	138	29	13	24	32	98	52	40	37	44	173	52	40	37	44
170 Prolapse of female genital organs	49	62	49	51	211	49	50	25	53	177	46	50	66	61	223	55	75	71	68	269	73	70	74	77	294	73	70	74	77
171 Menstrual disorders	175	195	164	177	711	170	168	190	168	696	158	186	181	181	706	162	202	178	100	642	125	99	97	81	402	125	99	97	81
172 Ovarian cyst	35	38	28	38	139	26	26	34	30	116	35	24	20	22	101	33	19	32	34	118	24	22	24	23	93	24	22	24	23
173 Menopausal disorders	56	66	55	55	232	76	83	61	63	283	79	84	79	78	320	76	74	88	79	317	82	95	99	64	340	82	95	99	64
174 Female infertility	60	52	51	52	215	50	50	35	48	183	123	127	81	23	354	9	16	5	37	67	43	30	39	68	180	43	30	39	68
175 Other female genital disorders	276	277	205	201	959	229	227	185	228	869	165	213	187	229	794	171	171	167	223	732	249	268	246	255	1,018	249	268	246	255
Total	1,938	2,038	1,800	1,764	7,540	1,810	1,905	1,801	1,794	7,310	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	3,011	3,040	2,846	2,746
11 Pregnancy, childbirth, and the puerperium																													
176 Contraceptive and procreative management	89	99	93	126	407	110	142	120	143	515	127	146	149	189	611	192	207	202	192	793	155	209	141	155	660	155	209	141	155
177 Spontaneous abortion	9	10	9	7	35	8	11	10	12	41	9	7	4	11	31	11	4	8	16	39	13	4	9	10	36	13	4	9	10
178 Induced abortion	7	6	11	3	27	8	11	6	7	32	4	8	10	12	34	9	5	7	6	27	7	11	9	16	43	7	11	9	16
179 Postabortion complications	-	-	-	1	1	1	1	-	1	3	1	1	1	-	3	-	-	-	1	1	-	-	-	-	-	-	-	-	-
180 Ectopic pregnancy	2	1	4	3	10	3	3	5	1	12	3	1	3	2	9	2	1	2	1	6	2	1	6	5	14	2	1	6	5
181 Other complications of pregnancy	211	190	215	181	797	137	128	130	116	511	323	274	290	280	1,167	185	265	238	363	1,051	454	365	377	457	1,653	454	365	377	457
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa	49	28	26	21	124	19	11	12	9	51	27	30	20	22	99	6	11	16	19	52	17	22	16	19	74	17	22	16	19
183 Hypertension complicating pregnancy; childbirth and the puerperium	48	86	56	61	251	31	41	36	23	131	76	80	62	73	291	76	52	44	70	242	48	56	43	47	194	48	56	43	47
184 Early or threatened labor	310	302	316	246	1,174	105	118	169	102	494	258	250	294	232	1,034	233	189	201	182	805	182	189	199	175	745	182	189	199	175
185 Prolonged pregnancy	55	61	66	56	238	13	14	19	19	65	32	39	55	41	167	32	49	43	31	155	53	35	37	37	162	53	35	37	37
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium	9	84	49	43	185	30	43	52	18	143	70	97	154	99	420	84	76	80	77	317	89	90	89	151	419	89	90	89	151
187 Malposition; malpresentation	10	12	11	11	44	7	5	6	5	23	14	8	12	11	45	11	14	13	3	41	12	8	15	13	48	12	8	15	13
188 Fetopelvic disproportion; obstruction	-	1	-	-	1	1	1	3	-	5	1	-	3	-	4	1	-	-	-	1	-	-	-	-	-	-	-	-	-
189 Previous C-section	1	-	-	-	1	-	-	-	-	-	2	1	3	2	8	2	-	1	2	5	1	2	-	2	5	1	2	-	2
190 Fetal distress and abnormal forces of labor	4	-	1	-	5	2	5	2	2	11	9	8	8	14	39	4	3	16	18	41	14	4	5	3	26	14	4	5	3
191 Polyhydramnios and other problems of amniotic cavity	17	17	23	19	76	5	1	8	3	17	30	45	38	14	127	14	21	18	19	72	37	34	23	15	109	37	34	23	15
192 Umbilical cord complication	-	1	-	4	5	-	1	-	1	2	7	1	7	-	15	4	4	-	2	10	-	2	-	-	2	-	2	-	-
193 OB-related trauma to perineum and vulva	-	-	-	1	1	-	1	-	1	2	1	4	1	1	7	-	-	-	1	1	-	-	-	-	-	-	-	-	-
195 Other complications of birth; puerperium affecting management of mother	232	208	252	235	927	166	189	126	116	597	272	277	278	243	1,070	202	222	239	47	710	29	14	16	13	72	29	14	16	13
196 Normal pregnancy and/or delivery	224	199	201	178	802	266	294	264	211	1,035	299	301	288	278	1,166	196	170	132	168	666	136	186	143	105	570	136	186	143	105
Total	1,277	1,305	1,333	1,196	5,111	912	1,020	968	790	3,690	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	1,249	1,232	1,128	1,223
12 Diseases of the skin and subcutaneous tissue																													
197 Skin and subcutaneous tissue infections	89	94	84	96	363	79	74	95	81	329	92	118	105	115	430	125	82	102	90	399	89	117	82	82	370	89	117	82	82
198 Other inflammatory condition of skin	23	24	17	20	84	24	32	34	25	115	238	190	226	227	881	274	339	214	308	1,135	273	266	250	157	946	273	266	250	157
199 Chronic ulcer of skin	23	21	16	28	88	14	68	151	172	405	206	192	217	277	892	70	74	78	117	339	90	126	59	50	325	90	126	59	50
200 Other skin disorders	493	630	589	621	2,333	562	726	728	717	2,733	551	797	763	706	2,817	628	828	712	772	2,940	663	769	633	706	2,771	663	769	633	706
Total	628	769	706	765	2,868	679	900	1,008	995	3,582	1,087	1,297	1,311	1,325	5,020	1,097	1,323	1,106	1,287	4,813	1,115	1,278	1,024	995	4,412	1,115	1,278	1,024	995
13 Musculoskeletal system and connective tissue																													
201 Infective arthritis and osteomyelitis (except that caused by TB or STD)	14	18	26	18	76	24	36	28	28	116	29	38	44	24	135	33	29	22	34	118	32	35	42	33	142	32	35	42	33
202 Rheumatoid arthritis and related disease	44	44	28	41	157	25	40	47	40	152	42	64	43	34	183	32	51	34	32	149	14	21	22	24	81	14	21	22	24
203 Osteoarthritis	298	330	310	558	1,496	550	681	552	602	2,385	658	930	827	776	3,191	430	539	545	854	2,368	683	1,009	967	934	3,593	683	1,009	967	934
204 Other non-traumatic joint disorders	414	383	300	510	1,607	541	505	509	687	2,242	673	823	663	749	2,908	395	488	450	446	1,779	409	487	397	390	1,683	409	487	397	390
205 Spondylosis; intervertebral disc disorders; other back problems	1,984	1,946	1,696	1,723	7,349	1,692	1,756	1,457	1,542	6,447	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	2,051	2,083	1,912	1,939
206 Osteoporosis	1	5	1	4	11	2	5	2	5	14	7	4	7	8	26	3	1	2	2	8	2	4	6	-	12	2	4	6	-
207 Pathological fracture	18	17	9	11	55	16	11	18	14	59	18	22	13	15	68	13	20	18	13	64	13	8	16	11	48	13	8	16	11
208 Acquired foot deformities	197	205	160	238	800	227	212	177	243	859	186	157	171	199	713	175	195	142	200	712	201	164	163	199	727	201	164	163	199
209 Other acquired deformities	25	20	19	20	84	23	19	20	24	86	34	26	35	25	120	27	30	38	57	152	43	52	57	56	208	43	52	57	56
210 Systemic lupus erythematosus and connective tissue disorders	3	6	1	3	13	2	6	3	9	20	13	19	15	18	65	13	21	24	26	84	30	37	25	29	121	30	37	25	29
211 Other connective tissue disease	815	897	640	842	3,194	721	805	729	803	3,058	1,076	1,126	999	993	4,194	879	996	1,035	1,090	4,000	1,059	1							

CCS High Level Group	ICD-9-CM														ICD-10-CM														
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total				
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4					
CCS Single Level Group																													
14 Congenital anomalies																													
213 Cardiac and circulatory congenital anomalies	11	6	10	12	39	9	5	6	2	22	11	12	13	10	46	9	8	9	8	34	11	13	5	2	31	11	13	5	2
214 Digestive congenital anomalies	6	5	10	14	35	10	9	7	4	30	23	9	13	5	50	6	8	3	4	21	7	6	7	7	27	7	6	7	7
215 Genitourinary congenital anomalies	20	26	29	31	106	36	33	28	33	130	38	35	31	30	134	28	30	50	29	137	24	36	28	25	113	24	36	28	25
216 Nervous system congenital anomalies	-	-	1	-	1	1	3	4	1	9	-	3	1	1	5	-	1	1	4	6	1	3	2	1	7	1	3	2	1
217 Other congenital anomalies	42	52	45	47	186	46	40	50	41	177	46	54	56	47	203	50	59	71	51	231	53	51	50	38	192	53	51	50	38
Total	79	89	95	104	367	102	90	95	81	368	118	113	114	93	438	93	106	134	96	429	96	109	92	73	370	96	109	92	73
15 Conditions originating in the perinatal period																													
218 Liveborn	-	1	-	-	1	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
219 Short gestation; low birth weight; and fetal growth retardation	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	1	-	1	-	-	1	-
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	4	1	1	-
223 Birth trauma	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-
224 Other perinatal conditions	32	44	28	37	141	30	30	47	27	134	34	40	41	37	152	44	49	45	24	162	45	32	43	51	171	45	32	43	51
Total	32	45	28	38	143	30	30	47	27	134	37	40	43	37	157	45	53	47	24	169	49	33	45	51	178	49	33	45	51
16 Injury & poisoning																													
225 Joint disorders and dislocations; trauma-related	509	582	511	567	2,169	548	509	440	531	2,028	447	434	428	494	1,803	357	454	432	423	1,666	393	445	320	386	1,544	393	445	320	386
226 Fracture of neck of femur (hip)	-	-	-	-	-	-	1	1	1	3	-	2	1	1	4	1	1	1	1	4	1	5	3	4	13	1	5	3	4
227 Spinal cord injury	1	2	1	1	5	-	-	-	1	1	-	3	1	1	5	1	-	1	-	2	-	1	-	-	1	-	1	-	-
228 Skull and face fractures	17	22	14	16	69	17	16	20	15	68	16	14	20	18	68	21	24	22	14	81	23	20	24	25	92	23	20	24	25
229 Fracture of upper limb	243	153	207	179	782	175	178	220	205	778	249	161	216	204	830	229	212	230	198	869	253	209	261	238	961	253	209	261	238
230 Fracture of lower limb	104	85	78	77	344	113	75	93	92	373	163	114	102	104	483	136	106	99	105	446	155	107	139	122	523	155	107	139	122
231 Other fractures	25	29	24	26	104	26	28	31	22	107	23	31	20	21	95	14	23	25	5	67	14	4	10	13	41	14	4	10	13
232 Sprains and strains	208	242	192	219	861	211	227	173	198	809	241	238	202	234	915	231	258	189	238	916	206	245	203	235	889	206	245	203	235
233 Intracranial injury	1	4	3	1	9	1	-	3	3	7	1	2	5	3	11	4	3	3	1	11	1	1	2	1	5	1	1	2	1
234 Crushing injury or internal injury	5	2	4	6	17	2	4	3	6	15	3	6	9	3	21	3	2	4	4	13	2	7	5	5	19	2	7	5	5
235 Open wounds of head; neck; and trunk	15	21	19	10	65	14	19	18	26	77	12	24	24	34	94	18	35	38	27	118	22	14	6	8	50	22	14	6	8
236 Open wounds of extremities	47	48	71	60	226	51	69	91	72	283	59	67	94	74	294	53	82	82	79	296	70	69	88	64	291	70	69	88	64
237 Complication of device; implant or graft	208	197	183	225	813	216	202	170	183	771	176	250	190	214	830	172	208	195	214	789	151	167	159	196	673	151	167	159	196
238 Complications of surgical procedures or medical care	76	68	73	87	304	56	81	75	85	297	113	91	86	71	361	45	49	76	54	224	55	86	69	61	271	55	86	69	61
239 Superficial injury; contusion	9	11	15	17	52	13	21	24	28	86	19	26	15	23	83	18	33	26	18	95	12	25	20	14	71	12	25	20	14
240 Burns	-	3	1	3	7	2	2	3	3	10	1	19	8	5	33	6	5	9	9	29	20	11	3	5	39	20	11	3	5
242 Poisoning by other medications and drugs	1	-	1	-	2	-	-	-	1	1	-	-	2	2	4	-	1	1	1	3	-	-	-	-	-	-	-	-	-
243 Poisoning by nonmedicinal substances	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	2	2	-	1	5	2	2	-	1
244 Other injuries and conditions due to external causes	24	20	20	34	98	20	25	34	9	88	46	41	46	41	174	48	56	52	45	201	48	62	38	37	185	48	62	38	37
Total	1,493	1,489	1,417	1,528	5,927	1,465	1,457	1,399	1,481	5,802	1,570	1,523	1,469	1,547	6,109	1,357	1,552	1,485	1,436	5,830	1,428	1,480	1,350	1,415	5,673	1,428	1,480	1,350	1,415
17 Symptoms, signs & ill-defined conditions																													
245 Syncope	4	9	13	7	33	7	6	19	11	43	14	14	17	15	60	16	18	18	14	66	12	11	18	17	58	12	11	18	17
246 Fever of unknown origin	-	1	-	1	2	2	1	1	4	8	-	1	3	3	7	2	-	1	2	5	1	1	-	-	2	1	1	-	-
247 Lymphadenitis	37	41	36	39	153	57	45	39	40	181	52	57	42	22	173	30	22	20	30	102	28	24	22	30	104	28	24	22	30
248 Gangrene	2	4	5	4	15	10	2	6	5	23	2	5	9	3	19	10	14	1	7	32	7	8	5	5	25	7	8	5	5
249 Shock	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	-	-	-
250 Nausea and vomiting	22	32	37	33	124	37	33	32	33	135	36	40	40	35	151	36	39	36	33	144	32	36	43	29	140	32	36	43	29
251 Abdominal pain	357	364	360	295	1,376	372	358	383	287	1,400	366	352	310	306	1,334	318	321	302	320	1,261	309	329	283	276	1,197	309	329	283	276
252 Malaise and fatigue	4	-	2	3	9	2	3	8	2	15	11	9	16	9	45	13	23	21	16	73	16	10	15	19	60	16	10	15	19
253 Allergic reactions	15	23	19	20	77	27	22	22	28	99	65	96	62	99	322	75	162	120	90	447	52	63	66	85	266	52	63	66	85
254 Rehabilitation care; fitting of prostheses; and adjustment of devices	13	9	15	17	54	13	6	3	8	30	17	16	14	16	63	13	11	20	8	52	8	16	3	11	38	8	16	3	11
255 Administrative/social admission	-	1	-	-	1	1	-	-	-	1	1	14	8	10	33	41	91	90	10	232	11	16	28	18	73	11	16	28	18
256 Medical examination/evaluation	17	23	14	8	62	11	21	15	14	61	420	483	353	303	1,559	361	393	368	575	1,697	709	634	468	410	2,221	709	634	468	410
257 Other aftercare	258	301	268	294	1,121	237	205	214	240	896	178	205	273	269	925	259	316	253	581	1,409	572	575	588	590	2,325	572	575	588	590
258 Other screening for suspected conditions (not mental disorders or infectious disease)	2,890	2,955	2,813	3,123	11,781	3,241	3,364	3,279	3,729	13,613	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	4,035	4,205	3,782	3,919
Total	3,619	3,763	3,582	3,844	14,808	4,017	4,066	4,021	4,401	16,505	4,878	4,930	4,806	5,129	19,743	4,829	5,487	4,952	5,694	20,962	5,793	5,928	5,321	5,409	22,451	5,793	5,928	5,321	5,409
18 Residual codes, unclassified, all Ecodes																													

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														
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
6 Operations on the respiratory system																									
34 Tracheostomy, temporary & permanent	12	11	16	13	52	10	8	9	13	40	12	11	3	9	35	8	4	11	10	33	7	11	11	8	37
35 Tracheoscopy & laryngoscopy with biopsy	15	15	11	9	50	17	18	11	11	57	18	4	14	11	47	17	18	11	1	47	1	3	2	1	7
36 Lobectomy or pneumonectomy	29	24	24	15	92	21	21	32	23	97	16	22	28	24	90	23	31	21	25	100	26	19	31	24	100
37 Diagnostic bronchoscopy & biopsy of bronchus	46	55	55	57	213	56	57	47	51	211	56	60	61	53	230	78	57	54	50	239	52	40	39	41	172
38 Other diagnostic procedures on lung & bronchus	6	-	4	5	15	1	6	1	2	10	1	-	-	3	4	1	2	2	1	6	-	1	-	1	2
39 Incision of pleura, thoracentesis, chest drainage	126	92	101	115	434	133	107	104	102	446	103	97	104	103	407	101	110	105	-	316	85	99	83	81	348
40 Other diagnostic proc of respiratory tract & mediastinum	6	3	7	2	18	3	1	2	1	7	3	7	2	4	16	-	2	5	37	44	5	4	1	6	16
41 Other non-OR therapeutic procedures on respiratory system	1	1	2	-	4	1	4	-	1	6	1	2	1	-	4	3	2	6	71	82	74	85	92	119	370
42 Other OR therapeutic procedures on respiratory system	14	18	19	20	71	10	19	14	12	55	17	17	20	12	66	15	13	13	12	53	13	5	13	17	48
Total	255	219	239	236	949	252	241	220	216	929	227	220	233	219	899	246	239	228	207	920	263	267	272	298	1,100
7 Operations on the cardiovascular system																									
43 Heart valve procedures	57	59	57	40	213	60	40	57	58	215	42	57	64	72	235	66	60	83	84	293	70	76	76	84	306
44 Coronary artery bypass graft (CABG)	49	62	48	61	220	44	70	58	71	243	69	79	64	70	282	45	66	60	72	243	58	73	71	73	275
45 Percutaneous transluminal coronary angioplasty (PTCA)	162	187	184	201	734	175	213	162	146	696	160	160	162	137	619	155	143	154	169	621	164	163	164	155	646
47 Diagnostic cardiac catheterization, coronary arteriography	90	77	101	84	352	70	100	75	47	292	49	52	49	44	194	54	50	58	-	162	85	97	76	84	342
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	75	105	80	100	360	60	58	69	66	253	55	59	61	51	226	54	66	52	57	229	52	56	44	58	210
49 Other OR heart procedures	39	51	43	18	151	15	17	16	28	76	21	28	20	17	86	15	18	18	27	78	17	16	15	19	67
50 Extracorporeal circ auxiliary to open heart procedures	-	-	-	1	1	-	-	-	-	-	-	-	-	1	1	-	-	1	-	1	-	1	-	-	1
51 Endarterectomy, vessel of head & neck	26	35	27	18	106	17	26	22	28	93	24	15	26	17	82	21	22	25	35	103	19	31	34	31	115
52 Aortic resection, replacement or anastomosis	13	13	12	8	46	12	17	16	15	60	16	15	7	16	54	7	11	8	5	31	-	2	7	4	13
54 Other vascular catheterization, not heart	337	274	275	312	1,198	266	234	261	225	986	230	227	200	207	864	239	227	232	137	835	82	85	103	122	392
55 Peripheral vascular bypass	15	24	19	12	70	20	24	21	10	75	17	18	21	14	70	13	14	17	23	67	19	17	13	21	70
56 Other vascular bypass & shunt, not heart	-	3	3	3	9	1	3	2	2	8	5	-	3	2	10	6	5	2	3	16	6	3	4	5	18
57 Creat, revis, rem of arterio fistula or cannula for dialys	-	-	1	1	2	1	1	-	1	3	1	1	2	1	5	2	-	-	-	2	-	-	-	-	-
58 Hemodialysis	58	58	70	81	267	58	51	59	43	211	57	55	43	44	199	71	62	49	-	182	61	62	65	48	236
59 Other OR procedures on vessels of head & neck	14	22	21	11	68	14	15	16	5	50	10	10	15	14	49	8	9	16	20	53	12	14	20	14	60
60 Embolectomy & endarterectomy of lower limbs	5	6	5	11	27	6	2	3	6	17	8	6	9	8	31	4	11	7	10	32	6	16	17	12	51
61 Other OR procedures on vessels other than head & neck	71	55	53	63	242	64	51	54	40	209	59	34	35	41	169	46	43	61	57	207	50	44	63	55	212
62 Other diagnostic cardiovascular procedures	7	3	2	3	15	1	5	2	1	9	5	2	1	2	10	1	6	2	4	13	2	2	2	7	13
63 Other non-OR therapeutic cardiovascular procedures	7	9	8	12	36	20	21	16	19	76	20	24	31	37	112	30	24	29	2	85	18	13	29	21	81
Total	1,025	1,043	1,009	1,040	4,117	904	948	909	811	3,572	848	842	813	795	3,298	837	837	874	705	3,253	721	771	803	813	3,108
8 Operations on the hemic and lymphatic system																									
64 Bone marrow transplant	-	1	-	1	2	2	1	1	1	5	-	4	-	-	4	-	-	1	-	1	1	-	1	1	3
65 Bone marrow biopsy	9	18	19	19	65	24	14	24	15	77	25	26	19	14	84	19	18	21	15	73	11	14	11	13	49
66 Procedures on spleen	3	4	5	3	15	4	4	4	3	15	2	4	1	6	13	3	1	4	6	14	6	4	4	2	16
67 Other therap procedures, hemic & lymphatic system	29	27	29	18	103	15	10	7	9	41	11	15	8	13	47	10	11	15	8	44	14	14	16	22	66
Total	41	50	53	41	185	45	29	36	28	138	38	49	28	33	148	32	30	41	29	132	32	32	32	38	134
9 Operations on the digestive system																									
69 Esophageal dilatation	4	3	2	3	12	5	3	7	3	18	1	2	2	3	8	3	3	2	2	10	6	4	7	3	20
70 Upper gastrointestinal endoscopy, biopsy	156	144	120	125	545	162	141	144	138	585	135	145	108	126	514	112	136	150	49	447	129	128	153	118	528
71 Gastrotomy, temporary & permanent	16	17	15	13	61	18	16	12	13	59	10	18	17	17	62	17	16	16	9	58	22	8	12	14	56

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														
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
72 Colostomy, temporary & permanent	9	2	2	5	18	3	5	4	3	15	-	3	3	2	8	4	1	4	11	20	4	8	6	8	26
73 Ileostomy & other enterostomy	1	5	3	3	12	5	8	3	4	20	1	1	1	4	7	4	1	3	1	9	1	1	7	7	16
74 Gastrectomy, partial & total	17	25	27	19	88	20	19	26	22	87	20	39	22	27	108	35	30	22	44	131	39	50	42	34	165
75 Small bowel resection	23	24	23	16	86	23	14	23	18	78	17	10	15	15	57	15	29	19	1	64	1	3	3	2	9
76 Colonoscopy & biopsy	55	49	54	45	203	64	52	55	43	214	36	54	47	39	176	50	51	73	22	196	22	26	29	23	100
77 Proctoscopy & anorectal biopsy	6	5	8	6	25	6	6	4	6	22	10	6	5	1	22	7	1	4	5	17	3	2	1	5	11
78 Colorectal resection	118	108	147	138	511	96	131	105	113	445	100	110	85	123	418	110	104	128	59	401	68	70	67	77	282
79 Local excision of large intestine lesion (not endoscopic)	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-	-	-	-	29	29	23	22	23	23	91
80 Appendectomy	94	117	112	96	419	95	93	99	73	360	72	74	85	73	304	47	58	56	41	202	64	66	68	59	257
81 Hemorrhoid procedures	1	-	3	1	5	-	2	-	-	2	1	1	-	2	4	1	-	-	1	2	1	2	-	-	3
82 Endoscopic retrograde cannulation of pancreas (ERCP)	3	3	3	4	13	1	2	3	6	12	2	3	2	3	10	1	1	2	-	4	1	3	3	3	10
83 Biopsy of liver	6	7	9	4	26	8	6	6	9	29	4	6	11	11	32	8	7	10	14	39	8	11	6	13	38
84 Cholecystectomy & common duct exploration	95	82	99	95	371	82	83	106	87	358	73	65	67	83	288	92	70	77	90	329	93	84	83	85	345
85 Inguinal & femoral hernia repair	10	8	6	3	27	4	7	5	3	19	7	5	14	10	36	11	12	3	5	31	5	16	7	10	38
86 Other hernia repair	30	52	31	40	153	43	46	42	43	174	25	41	32	31	129	30	31	22	6	89	20	14	21	19	74
87 Laparoscopy	3	5	7	4	19	2	1	3	4	10	-	1	2	1	4	4	4	1	-	9	2	3	3	3	11
88 Abdominal paracentesis	60	53	62	67	242	58	60	62	60	240	79	55	67	71	272	57	66	55	1	179	59	48	45	47	199
89 Exploratory laparotomy	2	6	7	6	21	5	4	6	3	18	2	2	5	3	12	6	3	3	3	15	-	2	2	1	5
90 Excision, lysis peritoneal adhesions	24	31	31	25	111	28	13	18	20	79	25	13	22	14	74	16	15	19	13	63	15	18	20	20	73
91 Peritoneal dialysis	1	3	2	5	11	-	1	3	4	8	-	-	-	4	4	-	4	3	-	7	1	3	4	6	14
92 Other bowel diagnostic procedures	2	2	1	-	5	-	-	-	2	2	-	-	-	-	-	1	-	1	78	80	27	40	39	29	135
93 Other non-OR upper GI therapeutic procedures	25	37	21	34	117	25	39	31	25	120	28	22	28	30	108	25	31	31	19	106	18	16	20	9	63
94 Other OR upper GI therapeutic procedures	22	23	27	35	107	23	26	29	22	100	16	23	26	22	87	28	26	27	29	110	31	28	25	18	102
95 Other non-OR lower GI therapeutic procedures	20	19	14	18	71	19	23	23	24	89	21	11	32	14	78	19	11	22	8	60	12	12	32	11	67
96 Other OR lower GI therapeutic procedures	50	50	51	59	210	45	45	60	44	194	53	39	56	54	202	46	60	51	88	245	69	62	60	74	265
97 Other gastrointestinal diagnostic procedures	5	3	5	5	18	7	3	8	7	25	5	9	14	11	39	4	9	9	8	30	26	26	29	34	115
98 Other non-OR gastrointestinal therapeutic procedures	42	29	44	27	142	47	51	38	38	174	24	44	36	39	143	34	42	33	29	138	42	47	69	67	225
99 Other OR gastrointestinal therapeutic procedures	24	28	25	28	105	29	32	26	18	105	18	25	33	16	92	22	21	24	17	84	33	39	32	35	139
Total	924	940	961	929	3,754	923	932	953	855	3,663	785	827	837	849	3,298	809	843	870	682	3,204	845	862	918	857	3,482
10 Operations on the urinary system																									
100 Endoscopy & endoscopic biopsy of the urinary tract	7	8	8	7	30	4	8	13	6	31	8	10	5	7	30	4	8	11	4	27	9	6	15	7	37
101 Transurethral excision, drainage, rem urinary obstruction	31	24	27	25	107	39	32	32	30	133	22	33	30	22	107	24	23	26	23	96	25	31	35	18	109
102 Ureteral catheterization	25	15	35	24	99	20	17	15	24	76	20	21	32	26	99	29	33	26	30	118	19	20	26	29	94
103 Nephrotomy & nephrostomy	12	13	12	21	58	13	9	12	19	53	18	13	13	18	62	11	10	8	7	36	2	2	4	4	12
104 Nephrectomy, partial or complete	31	28	22	26	107	19	27	19	20	85	26	29	24	30	109	20	24	27	20	91	35	25	15	32	107
105 Kidney transplant	2	7	5	7	21	7	6	5	7	25	7	7	9	4	27	2	7	3	5	17	3	6	12	3	24
106 Genitourinary incontinence procedures	5	1	-	2	8	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-
107 Extracorporeal lithotripsy, urinary	1	-	-	1	2	-	1	-	-	1	-	-	-	-	-	1	2	1	4	8	1	3	4	3	11
108 Indwelling catheter	63	58	44	62	227	75	79	56	67	277	68	55	85	93	301	93	79	48	38	258	11	16	16	18	61
109 Procedures on the urethra	5	3	1	-	9	5	5	1	1	12	1	1	6	4	12	3	2	3	1	9	1	2	2	3	8
110 Other diagnostic procedures of urinary tract	7	10	7	3	27	5	5	5	10	25	5	5	9	12	31	7	4	2	11	24	9	6	3	14	32
111 Other non-OR therapeutic procedures of urinary tract	7	6	11	8	32	8	8	6	15	37	18	9	6	13	46	5	7	8	13	33	13	13	18	19	63

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														
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
112 Other OR therapeutic procedures of urinary tract	19	23	22	18	82	19	20	17	19	75	14	24	20	17	75	21	14	11	43	89	14	25	19	24	82
Total	215	196	194	204	809	214	217	181	218	830	207	207	239	246	899	220	214	174	199	807	142	155	169	174	640
11 Operations on the male genital organs																									
113 Transurethral resection of prostate (TURP)	18	11	12	12	53	10	13	11	13	47	14	12	10	14	50	13	13	12	16	54	11	11	14	12	48
114 Open prostatectomy	27	28	22	30	107	24	24	27	32	107	37	25	26	25	113	21	28	27	33	109	30	30	35	35	130
115 Circumcision	-	-	1	-	1	-	-	1	-	1	-	3	-	-	3	-	1	-	-	1	-	1	1	-	2
116 Diagnostic procedures, male genital	-	-	-	1	1	-	1	2	-	3	-	-	1	1	2	3	1	-	1	5	3	2	-	1	6
117 Other non-OR therapeutic procedures, male genital	2	4	2	3	11	4	1	7	1	13	4	-	4	2	10	3	4	5	2	14	3	3	2	-	8
118 Other OR therapeutic procedures, male genital	1	2	6	7	16	7	8	4	1	20	-	3	2	2	7	3	4	2	2	11	2	5	1	2	10
Total	48	45	43	53	189	45	47	52	47	191	55	43	43	44	185	43	51	46	54	194	49	52	53	50	204
12 Operations on the female genital organs																									
119 Oophorectomy, unilateral & bilateral	13	5	12	17	47	17	23	11	17	68	12	26	12	12	62	17	17	10	4	48	5	14	9	3	31
120 Other operations on ovary	5	4	4	3	16	1	3	1	1	6	1	-	-	3	4	2	1	-	7	10	5	5	3	2	15
121 Ligation of fallopian tubes	15	9	16	13	53	3	4	3	1	11	3	2	6	1	12	3	4	1	48	56	-	-	1	1	2
123 Other operations on fallopian tubes	-	1	2	-	3	-	1	2	-	3	-	1	1	2	4	1	-	1	42	44	1	7	3	-	11
124 Hysterectomy, abdominal & vaginal	103	82	53	79	317	56	53	56	45	210	44	60	47	36	187	42	35	43	49	169	45	45	34	35	159
125 Other excision of cervix & uterus	6	3	4	6	19	3	4	3	2	12	2	3	3	3	11	2	1	5	4	12	-	7	2	6	15
126 Abortion (termination of pregnancy)	-	-	-	-	-	1	-	-	-	1	-	1	-	-	1	-	-	-	-	-	1	1	3	-	5
127 D&C, aspiration after delivery or abortion	7	9	7	5	28	3	5	4	4	16	3	6	9	3	21	5	5	6	-	16	6	3	7	4	20
128 Diagnostic dilatation & curettage (D&C)	3	2	1	2	8	-	2	-	1	3	1	-	1	1	3	-	1	1	3	5	2	2	1	-	5
129 Repair cystocele & rectocele, oblit of vaginal vault	1	5	-	1	7	1	3	1	-	5	2	-	1	2	5	-	-	1	-	1	1	-	-	-	1
130 Other diagnostic procedures, female organs	5	1	4	4	14	-	2	-	2	4	4	3	1	-	8	1	-	-	4	5	2	2	3	3	10
131 Other non-OR therapeutic procedures, female organs	3	2	4	3	12	5	3	-	2	10	2	1	1	2	6	4	2	-	191	197	85	59	32	22	198
132 Other OR therapeutic procedures, female organs	9	15	5	10	39	9	9	8	5	31	7	4	6	10	27	7	6	5	149	167	4	9	1	6	20
Total	170	138	112	143	563	99	112	89	80	380	81	107	88	75	351	84	72	73	501	730	157	154	99	82	492
13 Obstetrical procedures																									
122 Removal of ectopic pregnancy	4	3	1	3	11	-	1	1	-	2	2	2	-	1	5	-	1	5	-	6	1	-	1	-	2
133 Episiotomy	31	41	33	24	129	25	25	29	18	97	27	18	14	20	79	19	20	21	28	88	7	5	5	6	23
134 Cesarean section	346	374	407	366	1,493	334	341	380	385	1,440	331	354	388	342	1,415	349	353	379	-	1,081	315	325	393	330	1,363
135 Forceps, vacuum & breech delivery	44	61	42	45	192	36	36	42	42	156	44	55	34	48	181	46	49	58	-	153	46	53	57	43	199
136 Artificial rupture of membranes to assist delivery	94	90	91	69	344	74	99	113	87	373	94	111	116	116	437	120	111	122	-	353	20	39	14	22	95
137 Other procedures to assist delivery	335	401	399	378	1,513	400	431	475	399	1,705	451	468	467	426	1,812	421	456	514	-	1,391	647	729	830	782	2,988
138 Diagnostic amniocentesis	-	2	1	-	3	-	-	2	1	3	1	-	-	-	1	-	1	-	-	1	1	-	-	1	2
139 Fetal monitoring	142	121	134	158	555	134	128	118	97	477	88	113	109	101	411	69	65	83	-	217	41	31	32	38	142
140 Repair of current obstetric laceration	243	283	322	262	1,110	275	269	290	281	1,115	292	327	312	283	1,214	294	322	294	-	910	-	-	-	-	-
141 Other therapeutic obstetrical procedures	6	5	7	5	23	7	6	17	6	36	8	6	23	11	48	2	9	10	-	21	-	1	2	4	7
Total	1,245	1,381	1,437	1,310	5,373	1,285	1,336	1,467	1,316	5,404	1,338	1,454	1,463	1,348	5,603	1,320	1,387	1,486	28	4,221	1,078	1,183	1,334	1,226	4,821
14 Operations on the musculoskeletal system																									
142 Partial excision bone	10	16	11	14	51	8	14	14	12	48	14	13	15	12	54	15	9	9	17	50	20	20	21	23	84
143 Bunionectomy or repair of toe deformities	1	-	-	-	1	-	1	-	-	1	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-
144 Treatment, facial fracture or dislocation	3	4	3	6	16	4	7	4	1	16	-	4	5	-	9	3	9	3	5	20	5	6	11	9	31
145 Treatment, fracture or disloc of radius & ulna	11	11	15	16	53	13	20	27	11	71	16	11	12	5	44	14	10	22	13	59	11	16	19	10	56

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														
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	2016				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
146 Treatment, fracture or disloc of hip & femur	194	133	136	140	603	154	113	147	133	547	168	119	134	122	543	166	115	150	137	568	182	122	131	158	593
147 Treatment, fracture or disloc of lower extremity	105	57	65	59	286	102	59	76	68	305	95	53	69	74	291	93	67	52	53	265	112	68	72	90	342
148 Other fracture & dislocation procedure	32	29	30	24	115	30	38	38	31	137	23	33	26	31	113	30	27	32	30	119	25	34	27	30	116
149 Arthroscopy	1	1	-	1	3	2	1	-	3	6	-	1	-	-	1	-	-	1	1	2	-	-	3	1	4
150 Division of joint capsule, ligament or cartilage	3	-	-	2	5	2	1	-	-	3	-	1	-	-	1	-	-	-	1	1	3	2	1	1	7
151 Excision of semilunar cartilage of knee	-	2	2	-	4	-	1	-	-	1	-	1	1	-	2	1	-	-	-	1	-	-	-	-	-
152 Arthroplasty knee	328	325	295	308	1,256	324	290	309	318	1,241	314	330	272	333	1,249	326	364	320	387	1,397	362	370	372	408	1,512
153 Hip replacement, total & partial	228	247	242	264	981	265	269	265	276	1,075	267	253	245	300	1,065	285	278	292	282	1,137	307	286	294	281	1,168
154 Arthroplasty other than hip or knee	49	38	36	40	163	39	39	31	45	154	48	47	36	58	189	50	36	59	53	198	64	46	59	60	229
155 Arthrocentesis	16	23	22	27	88	18	22	26	17	83	18	23	17	20	78	17	21	18	10	66	13	5	5	6	29
156 Injections & aspirations of muscles, tendons, etc.	4	2	3	2	11	2	7	5	4	18	5	1	2	2	10	5	6	3	6	20	13	14	12	11	50
157 Amputation of lower extremity	26	31	31	44	132	31	31	37	31	130	38	42	37	38	155	38	51	37	46	172	29	38	41	35	143
158 Spinal fusion	135	144	129	168	576	164	155	132	118	569	140	157	145	174	616	160	159	145	187	651	141	167	167	149	624
159 Other diagnostic procedures on musculoskeletal system	15	17	11	15	58	12	13	8	6	39	11	10	5	11	37	13	11	23	36	83	39	36	44	50	169
160 Other therapeutic procedures on muscles & tendons	41	45	43	48	177	46	27	39	42	154	32	28	39	45	144	43	25	28	225	321	89	66	56	40	251
161 Other OR therapeutic procedures on bone	14	11	9	7	41	13	15	12	14	54	12	14	4	11	41	11	13	12	19	55	13	13	13	16	55
162 Other OR therapeutic procedures on joints	35	27	41	27	130	23	39	37	36	135	37	23	30	23	113	22	15	28	33	98	37	31	31	41	140
163 Other non-OR therapeutic procedures on musc system	7	6	7	4	24	7	4	5	7	23	5	14	4	8	31	7	8	12	9	36	13	9	8	9	39
164 Other OR therapeutic procedures on musc system	15	9	19	24	67	12	11	10	5	38	8	11	5	4	28	7	4	6	11	28	6	5	12	5	28
Total	1,273	1,178	1,150	1,240	4,841	1,271	1,177	1,222	1,178	4,848	1,251	1,189	1,103	1,271	4,814	1,306	1,229	1,252	1,561	5,348	1,484	1,354	1,399	1,433	5,670
15 Operations on the integumentary system																									
165 Breast biopsy & other diagnostic procedures on breast	1	-	-	-	1	-	-	1	-	1	1	3	1	2	7	-	1	1	2	4	1	2	2	2	7
166 Lumpectomy, quadrantectomy of breast	1	1	-	1	3	2	2	2	2	8	2	-	-	1	3	2	-	2	2	6	3	3	3	-	9
167 Mastectomy	9	13	8	10	40	19	17	10	7	53	9	10	10	11	40	8	13	15	14	50	10	7	10	2	29
168 Incision & drainage, skin & subcutaneous tissue	25	40	37	34	136	52	47	54	42	195	38	47	57	39	181	47	45	64	34	190	45	46	46	36	173
169 Debridement of wound, infection or burn	28	37	45	39	149	38	51	51	41	181	49	37	56	39	181	50	52	41	-	143	-	-	-	-	-
170 Excision of skin lesion	3	7	7	1	18	6	8	5	6	25	6	2	2	2	12	7	10	5	19	41	12	12	12	11	47
171 Suture of skin & subcutaneous tissue	25	22	39	27	113	25	41	33	25	124	15	22	21	14	72	14	20	45	38	117	54	41	36	38	169
172 Skin graft	16	13	20	17	66	10	14	7	8	39	8	7	10	7	32	6	10	6	10	32	9	6	4	6	25
173 Other diagnostic proc on skin & subcutaneous tissue	12	10	8	16	46	12	9	14	7	42	6	6	13	8	33	8	9	10	19	46	18	19	11	18	66
174 Other non-OR therapeutic procedures on skin & breast	43	36	31	32	142	25	18	31	24	98	21	29	30	27	107	42	38	31	42	153	28	39	31	31	129
175 Other OR therapeutic procedures on skin & breast	12	10	11	8	41	22	5	12	5	44	6	13	9	7	35	-	4	4	46	54	48	42	38	40	168
Total	175	189	206	185	755	211	212	220	167	810	161	176	209	157	703	184	202	224	226	836	228	217	193	184	822
Totals by Quarter/Year	5,684	5,722	5,719	5,682	22,807	5,534	5,531	5,695	5,223	21,983	5,260	5,357	5,348	5,291	21,256	5,348	5,388	5,520	4,499	20,755	5,253	5,328	5,551	5,390	21,522

APPENDIX I

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

CCS High Level Procedure Groups	ICD-9-CM										CPT																			
	2012				2013				2014				2015				2016													
	Q1	Q2	Q3	Q4	total	Q1	Q2	Q3	Q4	total	Q1	Q2	Q3	Q4	total	Q1	Q2	Q3	Q4	total	Q1	Q2	Q3	Q4	total					
CCS Single Level Procedure Categories																														
111 Other non-OR therapeutic procedures of urinary tract	48	59	42	37	186	45	50	34	48	177	109	136	203	157	605	165	179	189	206	739	219	202	192	190	803	265	56	80	68	61
112 Other OR therapeutic procedures of urinary tract	12	12	12	13	49	15	15	31	14	75	33	28	49	64	174	66	70	62	77	275	56	20	60	68	252	265	56	80	68	61
Total	1,002	1,029	923	958	3,912	993	1,015	1,047	1,071	4,126	1,288	1,471	1,335	1,208	5,302	1,217	1,334	1,308	1,415	5,274	1,486	1,468	1,293	1,274	5,521					
11 Operations on the male genital organs																														
113 Transurethral resection of prostate (TURP)	65	52	35	52	204	33	39	25	43	140	43	46	25	41	155	31	18	17	21	87	40	38	31	35	144					
114 Open prostatectomy	-	-	1	-	1	1	2	1	2	6	2	4	4	1	11	1	-	-	-	1	-	1	2	-	3					
115 Circumcision	65	70	60	61	256	52	57	68	51	228	58	59	76	57	250	60	75	72	42	249	76	59	67	84	286					
116 Diagnostic procedures, male genital	56	60	68	83	267	66	64	66	66	262	87	87	56	44	274	40	63	67	53	223	64	61	46	38	209					
117 Other non-OR therapeutic procedures, male genital	26	28	22	45	121	26	46	18	34	124	41	45	36	34	156	34	35	43	52	164	46	51	29	36	162					
118 Other OR therapeutic procedures, male genital	85	84	80	79	328	83	88	75	91	337	85	79	111	130	405	115	122	118	121	476	127	137	106	134	504					
Total	297	294	266	320	1,177	261	296	253	287	1,097	316	320	308	307	1,251	281	313	317	289	1,200	353	347	281	327	1,308					
12 Operations on the female genital organs																														
119 Oophorectomy, unilateral & bilateral	44	57	55	61	217	42	49	50	53	194	47	51	47	61	206	84	64	61	94	303	82	96	64	85	327					
120 Other operations on ovary	60	57	57	58	232	53	43	30	57	183	46	45	7	1	99	-	1	1	-	2	3	11	10	11	35					
121 Ligation of fallopian tubes	59	78	72	84	293	81	80	76	87	324	77	69	66	68	280	49	54	57	56	216	41	32	35	31	139					
123 Other operations on fallopian tubes	7	7	7	15	36	11	11	8	9	39	8	12	8	7	35	2	8	6	12	28	10	10	5	2	27					
124 Hysterectomy, abdominal & vaginal	143	141	146	143	573	130	144	128	151	553	132	149	131	157	569	140	121	136	157	554	180	153	140	160	633					
125 Other excision of cervix & uterus	166	176	140	134	616	128	154	182	166	630	133	165	109	109	516	86	95	97	85	363	101	98	90	112	401					
126 Abortion (termination of pregnancy)	6	6	10	3	25	9	8	5	10	32	3	12	10	10	35	9	5	9	10	33	9	13	9	16	47					
127 D&C, aspiration after delivery or abortion	70	56	54	50	230	61	51	59	70	241	61	57	58	74	250	49	49	49	63	210	64	30	48	43	185					
128 Diagnostic dilatation & curettage (D&C)	168	183	140	128	619	137	145	122	136	540	150	156	21	11	338	13	8	11	13	45	12	10	7	9	38					
129 Repair cystocele & rectocele, oblit of vaginal vault	16	33	26	26	101	24	23	6	20	73	16	14	32	25	87	18	35	20	25	98	24	26	28	42	120					
130 Other diagnostic procedures, female organs	75	78	50	65	268	94	104	73	71	342	638	730	888	873	3,129	885	915	864	814	3,478	930	810	785	657	3,182					
131 Other non-OR therapeutic procedures, female organs	13	20	16	16	65	20	36	44	24	124	119	154	140	139	552	125	144	157	146	572	115	156	125	142	538					
132 Other OR therapeutic procedures, female organs	89	91	78	78	336	69	81	62	81	293	66	82	92	79	319	80	78	84	74	316	87	79	75	95	336					
Total	916	983	851	861	3,611	859	929	845	935	3,568	1,496	1,696	1,609	1,614	6,415	1,540	1,577	1,552	1,549	6,218	1,658	1,524	1,421	1,405	6,008					
13 Obstetrical procedures																														
122 Removal of ectopic pregnancy	1	-	2	1	4	3	1	2	1	7	2	-	2	2	6	1	1	2	1	5	2	2	6	3	13					
134 Cesarean section	-	1	-	-	1	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-					
135 Forceps, vacuum & breech delivery	-	-	-	-	-	-	-	-	-	-	1	2	-	-	3	-	-	-	2	2	-	-	-	1	1					
137 Other procedures to assist delivery	11	13	9	6	39	5	7	6	8	26	17	9	13	11	50	7	15	14	7	43	12	9	12	9	42					
138 Diagnostic amniocentesis	-	-	5	1	6	2	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1					
139 Fetal monitoring	1,141	1,150	1,210	1,051	4,552	791	841	813	603	3,048	1,386	1,412	1,465	1,246	5,509	957	988	954	934	3,833	1,002	939	902	983	3,826					
140 Repair of current obstetric laceration	-	-	-	1	1	-	1	-	1	2	1	1	1	1	4	-	-	-	1	1	-	-	-	-	-					
141 Other therapeutic obstetrical procedures	2	7	4	5	18	10	1	-	3	14	2	5	4	5	16	6	6	5	5	22	10	7	2	5	24					
Total	1,155	1,171	1,230	1,065	4,621	811	851	821	616	3,099	1,410	1,429	1,485	1,265	5,589	971	1,010	975	950	3,906	1,026	957	923	1,001	3,907					
14 Operations on the musculoskeletal system																														
142 Partial excision bone	102	105	81	116	404	96	88	93	69	346	104	88	106	125	423	103	108	105	128	444	129	121	84	115	449					
143 Bunionectomy or repair of toe deformities	150	165	126	190	631	182	171	138	215	706	155	118	124	145	542	115	138	112	140	505	136	114	102	143	495					
144 Treatment, facial fracture or dislocation	17	17	12	19	65	18	14	13	19	64	9	14	17	18	58	21	21	23	11	76	17	18	22	21	78					
145 Treatment, fracture or disloc of radius & ulna	151	81	111	86	429	108	89	126	122	445	146	91	109	106	452	114	98	116	88	416	140	97	111	116	464					
146 Treatment, fracture or disloc of hip & femur	12	14	13	20	59	18	15	17	13	63	9	15	5	4	33	4	5	2	6	17	3	1	3	6	13					
147 Treatment, fracture or disloc of lower extremity	169	149	138	162	618	190	148	151	160	649	224	194	107	107	632	138	114	109	99	460	129	106	126	113	474					
148 Other fracture & dislocation procedure	160	134	154	164	612	145	147	155	156	603	159	139	123	121	542	133	145	144	116	538	119	108	160	120	507					
149 Arthroscopy	150	191	128	155	624	183	154	85	126	548	112	113	60	100	385	91	125	81	98	395	88	111	76	78	353					
150 Division of joint capsule, ligament or cartilage	22	25	20	26	93	14	15	21	22	72	23	18	26	22	89	21	28	23	21	93	21	36	17	16	90					
151 Excision of semilunar cartilage of knee	349	384	362	410	1,505	346	338	321	359	1,364	311	294	323	379	1,307	283	334	327	340	1,284	303	338	260	326	1,227					
152 Arthroplasty knee	77	66	77	69	289	90	59	38	73	260	50	48	12	10	120	7	11	13	16	47	14	22	8	12	56					
153 Hip replacement, total & partial	-	-	-	-	-	2	-	-	-	2	-	-	10	13	23	11	15	16	3	45	8	10	6	7	31					
154 Arthroplasty other than hip or knee	163	171	126	143	603	144	132	103	120	499	132	103	51	74	360	63	80	58	73	274	62	49	48	63	222					
155 Arthrocentesis	60	56	32	35	183	42	45	76	40	203	328	650	838	752	2,568	747	943	981	1,261	3,932	1,002	1,55								

APPENDIX I
Outpatient Procedures in Vermont Hospitals: CCS Single and High Level Groups by Discharge Year and Quarter

CCS High Level Procedure Groups	ICD-9-CM										CPT														
	2012				total	2013				total	2014				total	2015				total	2016				total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
165 Breast biopsy & other diagnostic procedures on breast	346	381	342	356	1,425	323	356	317	273	1,269	361	320	286	276	1,243	250	252	250	304	1,056	252	284	209	284	1,029
166 Lumpectomy, quadrantectomy of breast	203	198	201	179	781	161	205	186	176	728	171	185	117	153	626	136	117	115	134	502	128	116	108	103	455
167 Mastectomy	12	20	27	22	81	25	20	17	24	86	29	23	16	13	81	21	12	14	17	64	14	17	22	15	68
168 Incision & drainage, skin & subcutaneous tissue	42	37	42	48	169	37	40	62	37	176	45	63	85	75	268	65	64	87	64	280	58	85	67	51	261
169 Debridement of wound, infection or burn	26	30	36	43	135	29	131	256	249	665	301	329	391	456	1,477	119	134	168	244	665	201	236	136	87	660
170 Excision of skin lesion	762	904	906	931	3,503	780	884	985	989	3,638	864	1,071	1,242	1,189	4,366	1,068	1,351	1,277	1,272	4,968	1,133	1,231	1,163	1,193	4,720
171 Suture of skin & subcutaneous tissue	50	58	66	57	231	66	86	95	87	334	69	92	231	227	619	217	247	283	225	972	188	200	179	154	721
172 Skin graft	18	16	12	21	67	12	17	15	25	69	14	14	131	118	277	109	109	121	154	493	128	117	150	166	561
173 Other diagnostic proc on skin & subcutaneous tissue	282	372	341	385	1,380	286	400	346	403	1,435	292	441	34	17	784	24	17	27	28	96	17	38	58	47	160
174 Other non-OR therapeutic procedures on skin & breast	530	492	500	499	2,021	417	471	569	548	2,005	1,049	1,158	847	843	3,897	877	1,077	989	1,068	4,011	987	928	860	829	3,604
175 Other OR therapeutic procedures on skin & breast	149	175	168	170	662	173	242	186	197	798	210	209	103	128	650	124	104	91	79	398	92	99	70	116	377
Total	2,420	2,683	2,641	2,711	10,455	2,309	2,852	3,034	3,008	11,203	3,405	3,905	3,483	3,495	14,288	3,010	3,484	3,422	3,589	13,505	3,198	3,351	3,022	3,045	12,616
Total of Groups 1 - 15	25,363	25,951	23,778	25,742	100,834	24,690	26,528	25,335	25,709	102,262	31,597	34,258	32,353	32,703	130,911	29,844	32,996	32,307	33,287	128,434	33,486	34,743	31,787	32,679	132,695

APPENDIX J

Crosswalk for Revenue Code to Primary Cost Center

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0250	Pharmacy	5600	Drugs Charged to Patients
0251	Pharmacy: Generic	5600	Drugs Charged to Patients
0252	Pharmacy: Nongeneric	5600	Drugs Charged to Patients
0254	Pharmacy: Incident to other diagnostic services	5600	Drugs Charged to Patients
0255	Pharmacy: Incident to radiology	5600	Drugs Charged to Patients
0256	Pharmacy: Experimental drugs	5600	Drugs Charged to Patients
0257	Pharmacy: Non-prescription	5600	Drugs Charged to Patients
0258	Pharmacy: IV solutions	5600	Drugs Charged to Patients
0259	Pharmacy: Other	5600	Drugs Charged to Patients
0260	IV Therapy	4800	Intravenous Therapy
0261	IV Therapy: Infusion pump	4800	Intravenous Therapy
0262	IV Therapy: IV Therapy, pharm services	4800	Intravenous Therapy
0263	IV Therapy: IV Therapy/drug/supp/delivery	4800	Intravenous Therapy
0264	IV Therapy: supplies	4800	Intravenous Therapy
0269	IV Therapy: Other IV therapy	4800	Intravenous Therapy
0270	Medical/Surgical Supplies	5500	Med Supplies Charged to Patient
0271	Medical/Surgical Supplies: Nonsterile supplies	5500	Med Supplies Charged to Patient
0272	Medical/Surgical Supplies: Sterile supplies	5500	Med Supplies Charged to Patient
0273	Medical/Surgical Supplies: Take home supplies	5500	Med Supplies Charged to Patient
0274	Medical/Surgical Supplies: Prosthetic/Orthotic devices	3540	Prosthetic Devices
0275	Medical/Surgical Supplies: Pacemaker	3540	Prosthetic Devices
0276	Medical/Surgical Supplies: Intraocular lens	3540	Prosthetic Devices
0278	Medical/Surgical Supplies: Other implants	5500	Med Supplies Charged to Patient
0279	Medical/Surgical Supplies: Other supplies/devices	5500	Med Supplies Charged to Patient
0280	Oncology	3480	Oncology
0289	Oncology: Other oncology	3480	Oncology
0299	Durable Medical Equipment: Other equipment	6700	Durable Medical Equip. - Sold
0300	Laboratory - Clinical Diagnostic	3390	Laboratory - Clinical
0301	Laboratory - Clinical Diagnostic: Chemistry	3180	Chemistry
0302	Laboratory - Clinical Diagnostic: Immunology	3380	Immunology
0303	Laboratory - Clinical Diagnostic: Renal patient (home)	3390	Laboratory - Clinical
0304	Laboratory - Clinical Diagnostic: Nonroutine dialysis	3390	Laboratory - Clinical
0305	Laboratory - Clinical Diagnostic: Hematology	3350	Hematology
0306	Laboratory - Clinical Diagnostic: Bacteriology/microbiology	3050	Bacteriology and Microbiology

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0307	Laboratory - Clinical Diagnostic: Urology	3390	Laboratory - Clinical
0309	Laboratory - Clinical Diagnostic: Other laboratory	3390	Laboratory - Clinical
0310	Laboratory - Pathology	3420	Laboratory - Pathological
0311	Laboratory - Pathology: Cytology	3240	Laboratory - Pathological
0312	Laboratory - Pathology: Histology	3360	Histology
0314	Laboratory - Pathology: Biopsy	3060	Biopsy
0319	Laboratory - Pathology: Other	3420	Laboratory - Pathological
0320	Radiology - Diagnostic	4100	Radiology-Diagnostic
0321	Radiology - Diagnostic: Angiocardigraphy	3030	Angiocardigraphy
0322	Radiology - Diagnostic: Arthrography	4100	Radiology-Diagnostic
0323	Radiology - Diagnostic: Arteriography	3650	Vascular Lab
0324	Radiology - Diagnostic: Chest X-ray	4100	Radiology-Diagnostic
0329	Radiology - Diagnostic: Other	4100	Radiology-Diagnostic
0330	Radiology - Therapeutic	4200	Radiology-Therapeutic
0331	Radiology - Therapeutic: Chemotherapy - injected	3190	Chemotherapy
0332	Radiology - Therapeutic: Chemotherapy - oral	3190	Chemotherapy
0333	Radiology - Therapeutic: Radiation therapy	4200	Radiology-Therapeutic
0335	Radiology - Therapeutic: Chemotherapy - IV	3190	Chemotherapy
0339	Radiology - Therapeutic: Other	4200	Radiology-Therapeutic
0340	Nuclear Medicine	3450	Nuclear Medicine - Diagnostic
0341	Nuclear Medicine: Diagnostic	3450	Nuclear Medicine - Diagnostic
0342	Nuclear Medicine: Therapeutic	3470	Nuclear Medicine - Therapeutic
0343	Diagnostic Radiopharms	3450	Nuclear Medicine - Diagnostic
0344	Therapeutic Radiopharms	3470	Nuclear Medicine - Therapeutic
0349	Nuclear Medicine: Other	3450	Nuclear Medicine - Diagnostic
0350	CT Scan	3230	CAT Scan
0351	CT Scan: Head	3230	CAT Scan
0352	CT Scan: Body	3230	CAT Scan
0359	CT Scan: Other CT scans	3230	CAT Scan
0360	Operating Room Services	3700	Operating Room
0361	Operating Room Services: Minor surgery	3700	Operating Room
0362	Operating Room Services: Organ trnsplnt, not kidney	3700	Operating Room
0367	Operating Room Services: Kidney transplant	3700	Operating Room
0369	Operating Room Services: Other operating room services	3700	Operating Room
0370	Anesthesia	4000	Anesthesiology
0371	Anesthesia: Incident to radiology	4000	Anesthesiology
0372	Anesthesia: Incident to other diag services	4000	Anesthesiology
0379	Anesthesia: Other anesthesia	4000	Anesthesiology

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0380	Blood	4600	Whole Blood & Packed Red Blood Cells
0381	Blood: Packed red cells	4600	Whole Blood & Packed Red Blood Cells
0382	Blood: Whole blood	4600	Whole Blood & Packed Red Blood Cells
0383	Blood: Plasma	4600	Whole Blood & Packed Red Blood Cells
0384	Blood: Platelets	4600	Whole Blood & Packed Red Blood Cells
0385	Blood: Leukocytes	4600	Whole Blood & Packed Red Blood Cells
0386	Blood: Other components	4600	Whole Blood & Packed Red Blood Cells
0387	Blood: Other derivatives	4600	Whole Blood & Packed Red Blood Cells
0389	Blood: Other blood	4600	Whole Blood & Packed Red Blood Cells
0390	Blood Storage/Processing	4700	Blood Storing, Processing, & Trans.
0391	Blood: Administration (e.g. Transfusion)	4700	Blood Storing, Processing, & Trans.
0392	Blood: Processing and Storage	4700	Blood Storing, Processing, & Trans.
0399	Other blood handling	4700	Blood Storing, Processing, & Trans.
0400	Other Imaging Services	4100	Radiology - Diagnostic
0401	Other Imaging Services: Diagnostic mammography	3440	Mammography
0402	Other Imaging Services: Ultrasound	3630	Ultra Sound
0403	Other Imaging Services: Screening mammography	3440	Mammography
0404	Other Imaging Services: PET scan	3450	Nuclear Medicine-Diagnostic
0409	Other Imaging Services: Other imaging services	4100	Radiology - Diagnostic
0410	Respiratory Services	4900	Respiratory Therapy
0412	Respiratory Services: Inhalation services	4900	Respiratory Therapy
0413	Respiratory Services: Hyperbaric oxygen therapy	4900	Respiratory Therapy
0419	Respiratory Services: Other respiratory services	4900	Respiratory Therapy
0420	Physical Therapy	5000	Physical Therapy
0421	Physical Therapy: Visit charge	5000	Physical Therapy
0422	Physical Therapy: Hourly charge	5000	Physical Therapy
0423	Physical Therapy: Group rate	5000	Physical Therapy
0424	Physical Therapy: Evaluation/re-evaluation	5000	Physical Therapy
0429	Physical Therapy: Other physical therapy	5000	Physical Therapy
0430	Occupational Therapy	5100	Occupational Therapy
0431	Occupational Therapy: Visit charge	5100	Occupational Therapy
0432	Occupational Therapy: Hourly charge	5100	Occupational Therapy
0433	Occupational Therapy: Group rate	5100	Occupational Therapy
0434	Occupational Therapy: Evaluation/re-evaluation	5100	Occupational Therapy
0439	Occupational Therapy: Other occupational therapy	5100	Occupational Therapy
0440	Speech-Language Pathology	5200	Speech Pathology
0441	Speech-Language Pathology: Visit charge	5200	Speech Pathology
0442	Speech-Language Pathology: Hourly charge	5200	Speech Pathology

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0443	Speech-Language Pathology: Group rate	5200	Speech Pathology
0444	Speech-Language Pathology: Evaluation/ re-evaluation	5200	Speech Pathology
0449	Speech-Language Pathology: Other speech language pathology	5200	Speech Pathology
0450	Emergency Room	6100	Emergency
0451	Emergency Room: EM/EMTALA	6100	Emergency
0452	Emergency Room: ER/ Beyond EMTALA	6100	Emergency
0456	Emergency Room: Urgent care	6100	Emergency
0459	Emergency Room: Other emergency room	6100	Emergency
0460	Pulmonary Function	3560	Pulmonary Function Testing
0469	Pulmonary Function: Other	3560	Pulmonary Function Testing
0470	Audiology	3040	Audiology
0471	Audiology: Diagnostic	3040	Audiology
0472	Audiology: Treatment	3040	Audiology
0479	Audiology: Other audiology	3040	Audiology
0480	Cardiology	3140	Cardiology
0481	Cardiology: Cardiac catheter lab	3120	Cardiac Catheterization Laboratory
0482	Cardiology: Stress test	3620	Stress Test
0483	Cardiology: Echocardiology	3260	Echocardiography
0489	Cardiology: Other cardiology	3140	Cardiology
0490	Ambulatory Surgery	5800	ASC
0499	Ambulatory Surgery: Other ambulatory surgical care	5800	ASC
0510	Clinic	6000	Clinic
0511	Clinic: Chronic pain center	6000	Clinic
0512	Clinic: Dental clinic	3250	Dental Services
0513	Clinic: Psychiatric clinic	3550	Psychiatric/Psychological Services
0514	Clinic: OB/GYN clinic	6000	Clinic
0515	Clinic: Pediatric clinic	6000	Clinic
0516	Clinic: Urgent care clinic	6000	Clinic
0517	Clinic: Family clinic	4040	Family Practice
0519	Clinic: Other clinic	6000	Clinic
0530	Osteopathic Services	3530	Osteopathic Therapy
0531	Osteopathic Services: Osteopathic therapy	3530	Osteopathic Therapy
0539	Osteopathic Services: Other osteopathic services	3530	Osteopathic Therapy
0610	Magnetic Resonance Tech. (MRT)	3430	Magnetic Resonance Imaging (MRI)
0611	Magnetic Resonance Tech. (MRT): Brain (incl. Brainstem)	3430	Magnetic Resonance Imaging (MRI)
0612	Magnetic Resonance Tech. (MRT): Spinal cord (incl. spine)	3430	Magnetic Resonance Imaging (MRI)
0614	Magnetic Resonance Tech. (MRT): MRI - Other	3430	Magnetic Resonance Imaging (MRI)
0615	Magnetic Resonance Tech. (MRT): MRA - Head and Neck	3430	Magnetic Resonance Imaging (MRI)

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0616	Magnetic Resonance Tech. (MRT): MRA - Lower Ext	3430	Magnetic Resonance Imaging (MRI)
0618	Magnetic Resonance Tech. (MRT): MRA - Other	3430	Magnetic Resonance Imaging (MRI)
0619	Magnetic Resonance Tech. (MRT): Other MRT	3430	Magnetic Resonance Imaging (MRI)
0621	Med - Surg Supplies Ext. of 270: Incident to radiology	5500	Med Supplies Charged to Patient
0622	Med - Surg Supplies Ext. of 270: Incident to other diag.	5500	Med Supplies Charged to Patient
0623	Surgical dressings	5500	Med Supplies Charged to Patient
0624	Med - Surg Supplies Ext. of 270: Investigational Device (IDE)	5500	Med Supplies Charged to Patient
0631	Drugs Require Specific ID: Single source drug	5600	Drugs Charged to Patients
0632	Drugs Require Specific ID: Multiple source drug	5600	Drugs Charged to Patients
0633	Drugs Require Specific ID: Restrictive prescription	5600	Drugs Charged to Patients
0634	Drugs Require Specific ID: EPO under 10,000 units	5600	Drugs Charged to Patients
0635	Drugs Require Specific ID: EPO over 10,000 units	5600	Drugs Charged to Patients
0636	Drugs Require Specific ID: Drugs requiring detail coding	5600	Drugs Charged to Patients
0637	Drugs Require Specific ID: Self admin drugs (insulin admin in emergency-diabetes coma)	5600	Drugs Charged to Patients
0681	Trauma Response: Level I	6100	Emergency
0682	Trauma Response: Level II	6100	Emergency
0683	Trauma Response: Level III	6100	Emergency
0684	Trauma Response: Level IV	6100	Emergency
0689	Trauma Response: Other	6100	Emergency
0700	Cast Room	6000	Clinic
0710	Recovery Room	3800	Recovery Room
0720	Labor Room	3900	Delivery Room & Labor Room
0721	Labor Room: Labor	3900	Delivery Room & Labor Room
0722	Labor Room: Delivery	3900	Delivery Room & Labor Room
0723	Labor Room: Circumcision	3220	Circumcision
0724	Labor Room: Birthing center	3070	Birthing Center
0729	Labor Room: Other labor room/delivery	3900	Delivery Room & Labor Room
0730	EKG/ECG	3280	EKG and EEG
0731	EKG/ECG: Holter monitor	3370	Holter Monitor
0732	EKG/ECG: Telemetry	3280	EKG and EEG
0739	EKG/ECG: Other EKG/ECG	3280	EKG and EEG
0740	EEG	3280	EKG and EEG
0750	Gastrointestinal	3340	Gastro Intestinal Services
0760	Treatment/Observation Room	6000	Clinic
0761	Treatment/Observation Room: Treatment room	6000	Clinic
0762	Treatment/Observation Room: Observation room	6201	Observation Beds (Distinct Part)
0769	Treatment/Observation Room: Other treatment room	6000	Clinic
0770	Preventive Care Services	6000	Clinic

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0771	Preventive Care Services: Admin. of vaccine	6000	Clinic
0790	Extra-Corp Shock Wave Therapy	3640	Urology
0800	Inpatient Dialysis	5700	Renal Dialysis
0801	Inpatient Hemodialysis	5700	Renal Dialysis
0802	Inpatient peritoneal dialysis	5700	Renal Dialysis
0803	Inpatient dialysis CAPD	5700	Renal Dialysis
0804	Inpatient dialysis CCPD	5700	Renal Dialysis
0809	Other inp dialysis	5700	Renal Dialysis
0810	Organ Acquisition	8600	Other Organ Acquisition (Specify)
0811	Organ Acquisition: Living donor	8600	Other Organ Acquisition (Specify)
0812	Organ Acquisition: Cadaver donor	8600	Other Organ Acquisition (Specify)
0813	Organ Acquisition: Unknown donor	8600	Other Organ Acquisition (Specify)
0814	Organ Acquisition: Unsuccessful Organ Search Donor Bank Charges	8600	Other Organ Acquisition (Specify)
0819	Organ Acquisition: Other donor	8600	Other Organ Acquisition (Specify)
0820	Hemo OPD/Home	5700	Renal Dialysis
0821	Hemo OPD/Home: Hemodialysis comp or other rate	5700	Renal Dialysis
0822	Hemo OPD/Home supplies	5700	Renal Dialysis
0823	Hemo OPD/home equipment	5700	Renal Dialysis
0824	Hemo OPD/Home Maintenance 100%	5700	Renal Dialysis
0825	Hemo OPD/Home Support Services	5700	Renal Dialysis
0829	Hemo OPD/Home: Other HEMO outpatient	5700	Renal Dialysis
0830	Peritoneal OPD/Home	5700	Renal Dialysis
0831	Peritoneal OPD/Home: Peritoneal comp or other rate	5700	Renal Dialysis
0839	Peritoneal OPD/Home: Other peritoneal dialysis	5700	Renal Dialysis
0840	CAPD OPD/Home	5700	Renal Dialysis
0841	CAPD OPD/Home: CAPD comp or other rate	5700	Renal Dialysis
0849	CAPD OPD/Home: Other CAPD dialysis	5700	Renal Dialysis
0850	CCPD OPD/Home	5700	Renal Dialysis
0851	CCPD OPD/Home: CCPD comp or other rate	5700	Renal Dialysis
0859	CCPD OPD/Home: Other CCPD dialysis	5700	Renal Dialysis
0880	Miscellaneous Dialysis	5700	Renal Dialysis
0881	Miscellaneous Dialysis: Ultrafiltration	5700	Renal Dialysis
0889	Miscellaneous Dialysis: Other misc dialysis	5700	Renal Dialysis
0900	Psychiatric/Psychological Trt	3550	Psychiatric/Psychological Services
0901	Psychiatric/Psychological Trt: Electroshock treatment	3320	Electroshock Therapy
0902	Psychiatric/Psychological Trt: Milieu therapy	3550	Psychiatric/Psychological Services
0903	Psychiatric/Psychological Trt: Play therapy	3550	Psychiatric/Psychological Services
0904	Psychiatric/Psychological Trt: Activity therapy	3580	Recreational Therapy

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0905	Psychiatric/Psychological Trt: Intensive Outpatient serv-sych	3550	Psychiatric/Psychological Services
0906	Psychiatric/Psychological Trt: Intensive out serv - chem dep	3550	Psychiatric/Psychological Services
0907	Psychiatric/Psychological Trt: Comm behavioral program	3550	Psychiatric/Psychological Services
0911	Psychiatric/Psychological Svcs: Rehabilitation	3550	Psychiatric/Psychological Services
0912	Psychiatric/Psychological Svcs: Partial Hosp - less intensive	3550	Psychiatric/Psychological Services
0913	Psychiatric/Psychological Svcs: Partial Hosp - Intensive	3550	Psychiatric/Psychological Services
0914	Psychiatric/Psychological Svcs: Individual therapy	3550	Psychiatric/Psychological Services
0915	Psychiatric/Psychological Svcs: Group therapy	3550	Psychiatric/Psychological Services
0916	Psychiatric/Psychological Svcs: Family therapy	3550	Psychiatric/Psychological Services
0917	Psychiatric/Psychological Svcs: Biofeedback	3550	Psychiatric/Psychological Services
0918	Psychiatric/Psychological Svcs: Testing	3550	Psychiatric/Psychological Services
0919	Psychiatric/Psychological Svcs: Other behavioral treat/serv	3550	Psychiatric/Psychological Services
0921	Other Diagnostic Services: Peripheral vascular lab	3650	Vascular Lab
0922	Other Diagnostic Services: Electromyogram	3290	Electromyography
0923	Other Diagnostic Services: Pap smear	3240	Cytology
0924	Other Diagnostic Services: Allergy test	3380	Immunology
0925	Other Diagnostic Services: Pregnancy test	3390	Laboratory - Clinical
0941	Other Therapeutic Serv: Recreation Rx	6000	Clinic
0942	Other Therapeutic Serv: Educ/training	6000	Clinic
0943	Other Therapeutic Serv: Cardiac rehab	3140	cardiology
0944	Other Therapeutic Serv: Drug rehab	3550	Psychiatric/Psychological Services
0945	Other Therapeutic Serv: Alcohol rehab	3550	Psychiatric/Psychological Services
0948	Pulmonary Rehabilitation	4900	respiratory
0001	Total Charge	N/A	
0022	HIPPS	N/A	
0023	HIPPS	N/A	
0024	HIPPS	N/A	
0100	All Inclusive Rate	N/A	
0101	All Inclusive Rate	N/A	
0110	Room & Board (Private)	N/A	
0111	Medical/Surgical/Gyn	N/A	
0112	OB	N/A	
0113	Pediatric	N/A	
0114	Psychiatric	N/A	
0115	Hospice	N/A	
0116	Detoxification	N/A	
0117	Oncology	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0118	Rehab	N/A	
0119	Other	N/A	
0120	Room & Board (Semi-Private 2 beds)	N/A	
0121	Medical/Surgical/Gyn	N/A	
0122	OB	N/A	
0123	Pediatric	N/A	
0124	Psychiatric	N/A	
0125	Hospice	N/A	
0126	Detoxification	N/A	
0127	Oncology	N/A	
0128	Rehab	N/A	
0129	Other	N/A	
0130	Room&Board (Semi private 3-4 beds)	N/A	
0131	Medical/Surgical/Gyn	N/A	
0132	OB	N/A	
0133	Pediatric	N/A	
0134	Psychiatric	N/A	
0135	Hospice	N/A	
0136	Detoxification	N/A	
0137	Oncology	N/A	
0138	Rehab	N/A	
0139	Other	N/A	
0140	Room & Board (Private Deluxe)	N/A	
0141	Medical/Surgical/Gyn	N/A	
0142	OB	N/A	
0143	Pediatric	N/A	
0144	Psychiatric	N/A	
0145	Hospice	N/A	
0146	Detoxification	N/A	
0147	Oncology	N/A	
0148	Rehab	N/A	
0149	Other	N/A	
0150	Room & Board (Ward)	N/A	
0151	Medical/Surgical/Gyn	N/A	
0152	OB	N/A	
0153	Pediatric	N/A	
0154	Psychiatric	N/A	
0155	Hospice	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0156	Detoxification	N/A	
0157	Oncology	N/A	
0158	Rehab	N/A	
0159	Other	N/A	
0160	Room & Board (other)	N/A	
0164	Sterile Environment	N/A	
0167	Self care	N/A	
0169	Other	N/A	
0170	Nursery	N/A	
0171	Newborn-Level I	N/A	
0172	Newborn-Level II	N/A	
0173	Newborn-Level III	N/A	
0174	Newborn-Level IV	N/A	
0179	Other Nursery	N/A	
0180	Leave of Absence	N/A	
0182	Patient Convenience	N/A	
0183	Therapeutic Leave	N/A	
0185	Hospitalization	N/A	
0189	Other leave of absence	N/A	
0190	Subacute care	N/A	
0191	Subacute care-Level I	N/A	
0192	Subacute care-Level II	N/A	
0193	Subacute care-Level III	N/A	
0194	Subacute care-Level IV	N/A	
0199	Other subacute care	N/A	
0200	Intensive care	N/A	
0201	Surgical	N/A	
0202	Medical	N/A	
0203	Pediatric	N/A	
0204	Psychiatric	N/A	
0206	Intermediate ICU	N/A	
0207	Burn care	N/A	
0208	Trauma	N/A	
0209	Other intensive care	N/A	
0210	Coronary care	N/A	
0211	Myocardial Infarction	N/A	
0212	Pulmonary Care	N/A	
0213	Heart Transplant	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0214	Intermediate CCU	N/A	
0219	Other Coronary Care	N/A	
0220	Special charges	N/A	
0221	Admission charge	N/A	
0222	Technical support charge	N/A	
0223	U.R. service charge	N/A	
0224	Late discharge, medically necessary	N/A	
0229	Other special charges	N/A	
0230	Incremental nursing charge rate	N/A	
0231	Nursery	N/A	
0232	OB	N/A	
0233	ICU	N/A	
0234	CCU	N/A	
0235	Hospice	N/A	
0239	Other	N/A	
0240	All inclusive Ancillary	N/A	
0241	Basic	N/A	
0242	Comprehensive	N/A	
0243	Specialty	N/A	
0249	Other all inclusive ancillary	N/A	
0253	Take home drugs	N/A	
0277	Oxygen-Take home	N/A	
0290	Durable Medical Equipment	N/A	
0291	DME Rental	N/A	
0292	Durable Medical Equipment: Purchase - new equipment	N/A	
0293	Purchase of used DME	N/A	
0294	Supplies/Drugs for DME effectiveness (HHA only)	N/A	
0374	Acupuncture	N/A	
0500	Outpatient services	N/A	
0509	Other Outpatient	N/A	
0520	Free-Standing Clinic	N/A	
0521	Rural health-clinic	N/A	
0522	Rural health-home	N/A	
0523	Family Practice Clinic	N/A	
0524	RHC/FQHC visit in Part A covered SNF	N/A	
0525	RHC/FQHC visit in noncovered SNF, NF, ICFMR or other	N/A	
0526	Urgent Care Clinic	N/A	
0527	Nurse visit to home in a HH shortage area	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0528	RHC/FQHC visit to other non RHC/FQHC site	N/A	
0529	Free-Standing Clinic: Other	N/A	
0540	Ambulance	N/A	
0541	Supplies	N/A	
0542	Medical Transport	N/A	
0543	Heart Mobile	N/A	
0544	Oxygen	N/A	
0545	Air ambulance	N/A	
0546	Neonatal ambulance services	N/A	
0547	Pharmacy	N/A	
0548	Telephone Transmission EKG	N/A	
0549	Other ambulance	N/A	
0550	Skilled nursing	N/A	
0551	Visit charge	N/A	
0552	Hourly charge	N/A	
0559	Other skilled nursing	N/A	
0560	Home Health (HH) -- Medical Social Services	N/A	
0561	Home Health (HH) Medical Social Services: Visit charge	N/A	
0562	Home Health (HH) Medical Social Services: Hourly charge	N/A	
0569	Home Health (HH) Medical Social Services: Other Medical Social Services	N/A	
0570	Home health-Home health aide	N/A	
0571	Visit charge	N/A	
0572	Hourly charge	N/A	
0579	Other home health aide	N/A	
0580	Home health-other visits	N/A	
0581	Visit charge	N/A	
0582	Hourly charge	N/A	
0583	Assessment	N/A	
0589	Other home health visit	N/A	
0590	Home health-units of service	N/A	
0600	Home health-oxygen	N/A	
0601	Oxygen-state/equip/suppl/ or cont	N/A	
0602	Oxygen-state/equip/suppl/ or under 1 LPM	N/A	
0603	Oxygen-state/equip/over 4 LPM	N/A	
0604	Oxygen-Portable Add-on	N/A	
0609	Other oxygen	N/A	
0640	Home IV Therapy Services	N/A	
0641	Nonroutine nursing, central line	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0642	IV site care, Central line	N/A	
0643	IV start/change, peripheral line	N/A	
0644	Nonroutine nursing, peripheral line	N/A	
0645	Training, patient/caregiver, central line	N/A	
0646	Training, disabled patient, central line	N/A	
0647	Training, patient/caregiver, peripheral line	N/A	
0648	Training, disabled patient, peripheral line	N/A	
0649	Other IV therapy services	N/A	
0650	Hospice service	N/A	
0651	Routine home care	N/A	
0652	Continuous home care	N/A	
0655	Inpatient respite care	N/A	
0656	General inpatient care (non-respite)	N/A	
0657	Physician services	N/A	
0658	Hospice Room & Board-Nursing facility	N/A	
0659	Other hospice service	N/A	
0660	Respite Care	N/A	
0661	Hourly Repite Care Charge Nursing	N/A	
0662	Hourly Respite Care Charge Aide/Homemaker/Companion	N/A	
0663	Daily Respite Charge	N/A	
0669	Other respite care	N/A	
0670	Outpatient Special Residence Charges	N/A	
0671	Hospital based	N/A	
0672	Contracted	N/A	
0679	Other special residence charge	N/A	
0680	Not Used	N/A	
0780	Telemedicine	N/A	
0832	Home supplies	N/A	
0833	Home equipment	N/A	
0834	Maintenance/100%	N/A	
0835	Support services	N/A	
0842	Home supplies	N/A	
0843	Home equipment	N/A	
0844	Maintenance/100%	N/A	
0845	Support services	N/A	
0852	Home supplies	N/A	
0853	Home equipment	N/A	
0854	Maintenance/100%	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0855	Support services	N/A	
0882	Home dialysis aid visit	N/A	
0920	Other Diagnostic Services	N/A	
0929	Other Diagnostic Services: Other diagnostic services	N/A	
0931	Medical rehab; half day	N/A	
0932	Medical rehab; full day	N/A	
0940	Other Therapeutic Serv	N/A	
0946	Complex medical equipment-Routine	N/A	
0947	Complex medical equipment-Ancillary	N/A	
0949	Other Therapeutic Serv: Additional RX SVS	N/A	
0951	Other therapeutic services-(940x) Athletic training	N/A	
0952	Other therapeutic services-(940x) Kinesiotherapy	N/A	
0960	Professional fees	N/A	
0961	Psychiatric	N/A	
0962	Ophthalmology	N/A	
0963	Anesthesiologist (MD)	N/A	
0964	Anesthetist (CRNA)	N/A	
0969	Other professional fee	N/A	
0971	Professional fees (096x) Laboratory	N/A	
0972	Professional fees (096x) Radiology-Diagnostic	N/A	
0973	Professional fees (096x) Radiology-Therapeutic	N/A	
0974	Professional fees (096x) Radiology-nuclear medicine	N/A	
0975	Professional fees (096x) Operating room	N/A	
0976	Professional fees (096x) Respiratory Therapy	N/A	
0977	Professional fees (096x) Physical therapy	N/A	
0978	Professional fees (096x) Occupational therapy	N/A	
0979	Professional fees (096x) Speech pathology	N/A	
0981	Professional fees (096x) Emergency room	N/A	
0982	Professional fees (096x) Outpatient services	N/A	
0983	Professional fees (096x) clinic	N/A	
0984	Professional fees (096x) medical social services	N/A	
0985	Professional fees (096x) EKG	N/A	
0986	Professional fees (096x) EEK	N/A	
0987	Professional fees (096x) Hospital visit	N/A	
0988	Professional fees (096x) Consultation	N/A	
0989	Private duty nurse	N/A	
0990	Patient convenience items	N/A	
0991	Cafeteria/guest tray	N/A	

Revenue Code	Revenue Code Description	Primary Cost Center	Primary Cost Center Name
0992	Private linen service	N/A	
0993	Telephone/telegraph	N/A	
0994	TV/radio	N/A	
0995	Nonpatient room rentals	N/A	
0996	Late discharge charge	N/A	
0997	Admission kits	N/A	
0998	Beauty shop/barber	N/A	
0999	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	
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

Attribute	Description	Public Use Data Element	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 Source	Transfer, referral, newborn and court/law enforcement categories.	Y	Y	Y	Y
Admission Type	Emergency, urgent, elective, newborns.	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
Ambulatory Flag	Record having any procedure in the 00.00 - 86.99 range: This flag not used for inpatient records.	Y	N	Y	Y
Attending physician	Hospital-specific code for attending physician at time of discharge.	N	Y	Y	Y
Bill Type	Bill type as designated by the hospital.	Y	Y	Y	Y
Birth Weight	Birth weight of newborns in grams.	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 16 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

Attribute	Description	Public Use Data Element	Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Diagnosis Related Group (DRG)	Medicare classification system that groups inpatient discharges into more than 900 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 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
ERFLAG	Set to 1 if record has an associated revenue code of 45x, Emergency Room.	Y	Y	Y	Y
Groupers	Groupers version used to assign DRG and MDC.	Y	Y	Y	Y
Hospital	--	Y	Y	Y	Y
Hospital Service Area	Defined by the geographically distinct population of Vermont residents who are highly dependent on a hospital or group of hospitals.	Y	Y	Y	Y
Major Diagnostic Category (MDC)	An aggregation of inpatient DRGs (see definition of DRGs above) into 25 groups that define major body systems.	Y	Y	N	N
OBSFLAG	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; maximum 255 days.	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

Attribute	Description	Public Use Data Element	Inpatient Dataset	Outpatient Dataset	Emergency Department Dataset
Principal Diagnosis and Up to 19 Secondary Diagnoses	ICD-9-CM 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.	Y	Y	Y	Y
Race	--	N	Y	Y	Y
Readmission indicator	Any patient readmitted to the same hospital within 30 days.	N	Y	Y	Y
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
Year of Discharge	--	Y	Y	Y	Y
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 a 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

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>

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

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

To request non-public data elements, contact:

Green Mountain Care Board
89 Main Street, Drawer 20
Montpelier, VT 05620-3601
(802) 828-2906