

2015

Vermont Hospitals Report

REVISED

May 2017

Vermont Green Mountain Care Board

Vermont Department of Health

REVISED May 2017

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

Barbara Carroll, Public Health Analyst
Peggy Brozicevic, Research and Statistics Chief

Under the direction of the Vermont Green Mountain Care Board
Roger Tubby, Director of Data and Analytics

The Vermont Department of Health
Division of Health Surveillance
108 Cherry Street, PO Box 70
Burlington, Vermont 05402-0070
(802) 863-7300 or (800) 869-2871

The Vermont Green Mountain Care Board
89 Main Street
Montpelier, Vermont 05620-3601
(802) 828-29

Acknowledgments

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

Disclaimer

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

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

Vermonters Using Out-of-State Hospitals

GMCB has data sharing agreements with state agencies in New

Hampshire, Massachusetts, and New York to receive hospital discharge records for Vermont residents using hospital services outside of Vermont. Unfortunately, the timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's data collection and processing technologies. At the time of this report, New Hampshire has not released data to Vermont beyond 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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Note: Reporting is limited to Vermont hospitals until the 2015 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.

2015 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

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 2012 through 2015 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 10.3% from 2014 to 2015, a higher rate of increase than 7.3% from 2013 to 2014 and 5.6% from 2012 to 2013. Charges for non-resident inpatient discharges increased by 6.4%, a lower rate than 10.2% from 2013 to 2014 and comparable to the increase of 6.1% from 2012 to 2013. The *number* of inpatient discharges for Vermont residents increased by 6.6% from 2014 to 2015 after a slight decrease from 2013 to 2014 (-3.0%), and the number of non-resident inpatient discharges increased by 3.8% from 2014 to 2015, also after a slight decrease from 2013 to 2014 (-2.0%).
- **Total charges for Vermont residents with ED visits to Vermont hospitals** increased by 5.0% from 2014 to 2015, a smaller increase than that for non-residents (7.5%). Both increases are less than those from 2013 to 2014 (10.8% and 10.9% respectively), consistent with the increases from 2012 to 2013 (5.2% and 8.8% respectively), and lower than those 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 2014 to 2015 (0.2% and 0.4% respectively).
- **Total charges for Vermont residents with outpatient procedures in CCS high-level procedure groups 1 through 15 at Vermont hospitals** did not change significantly from 2014 to 2015 (-0.1%), compared to the decrease of -13.1% in total charges for non-residents. The *number* of outpatient procedures in range for Vermont residents and non-residents decreased from 2014 to 2015 (-1.5% and 15.8% respectively). The continued 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.

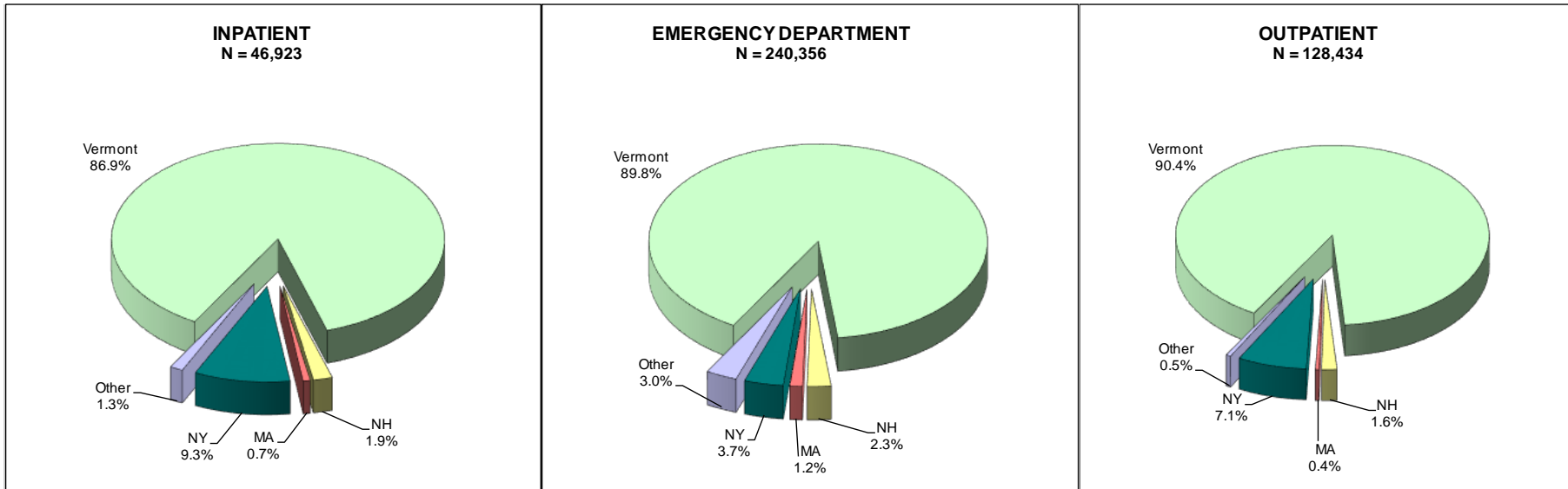
In-migration

- Most in-migration to Vermont hospitals in 2015 continued to be by New York residents for inpatient care, ED visits, and outpatient procedures in range. As in 2014, New York residents comprised a much smaller percent of all ED visits than of either inpatient discharges or outpatient procedures (3.7% of ED visits, compared to 9.3% of inpatient discharges and 7.1% of outpatient procedures in range).
- New York residents accounted for a higher percent of total charges than of total discharges in all three settings (4.4% of ED charges, 14.4% of inpatient charges and 8.6% of outpatient charges).

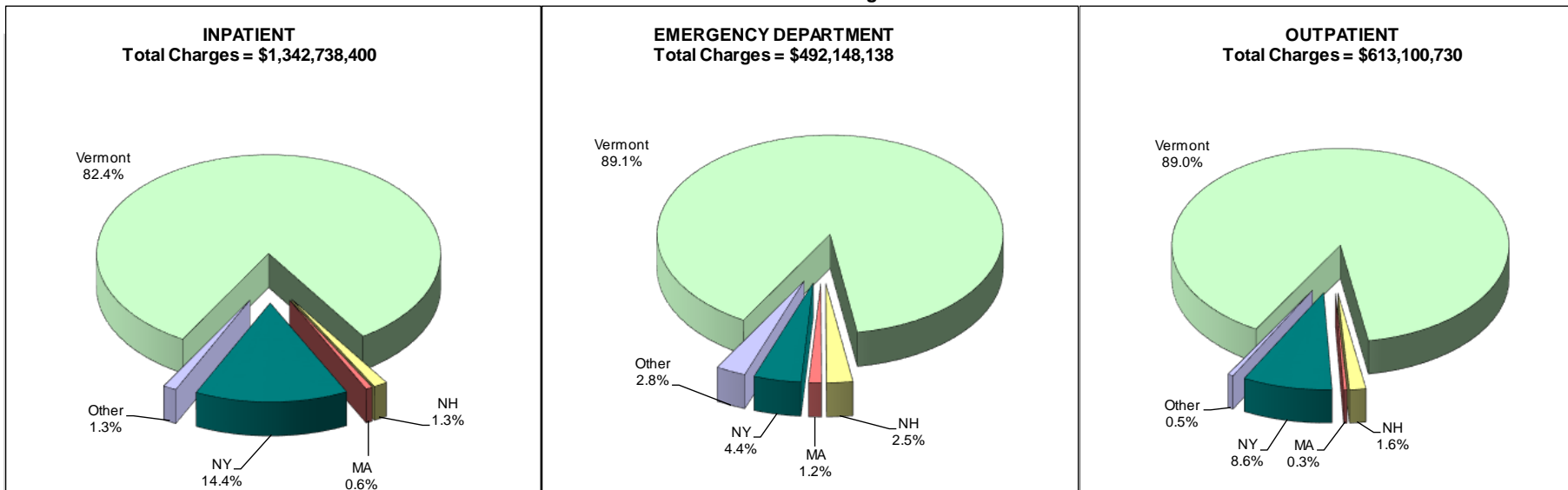
Note: Reporting is limited to Vermont hospitals until the 2015 data are available for Vermont residents served in New Hampshire, Massachusetts and New York hospitals. The timeliness of the annual data exchange between Vermont and New Hampshire has been seriously impacted by major changes in New Hampshire's data collection and processing technologies.

**2015 Vermont Hospitals
Summary of Patients' State of Residence by Hospital Setting**

Percent of Total Discharges



Percent of Total Charges

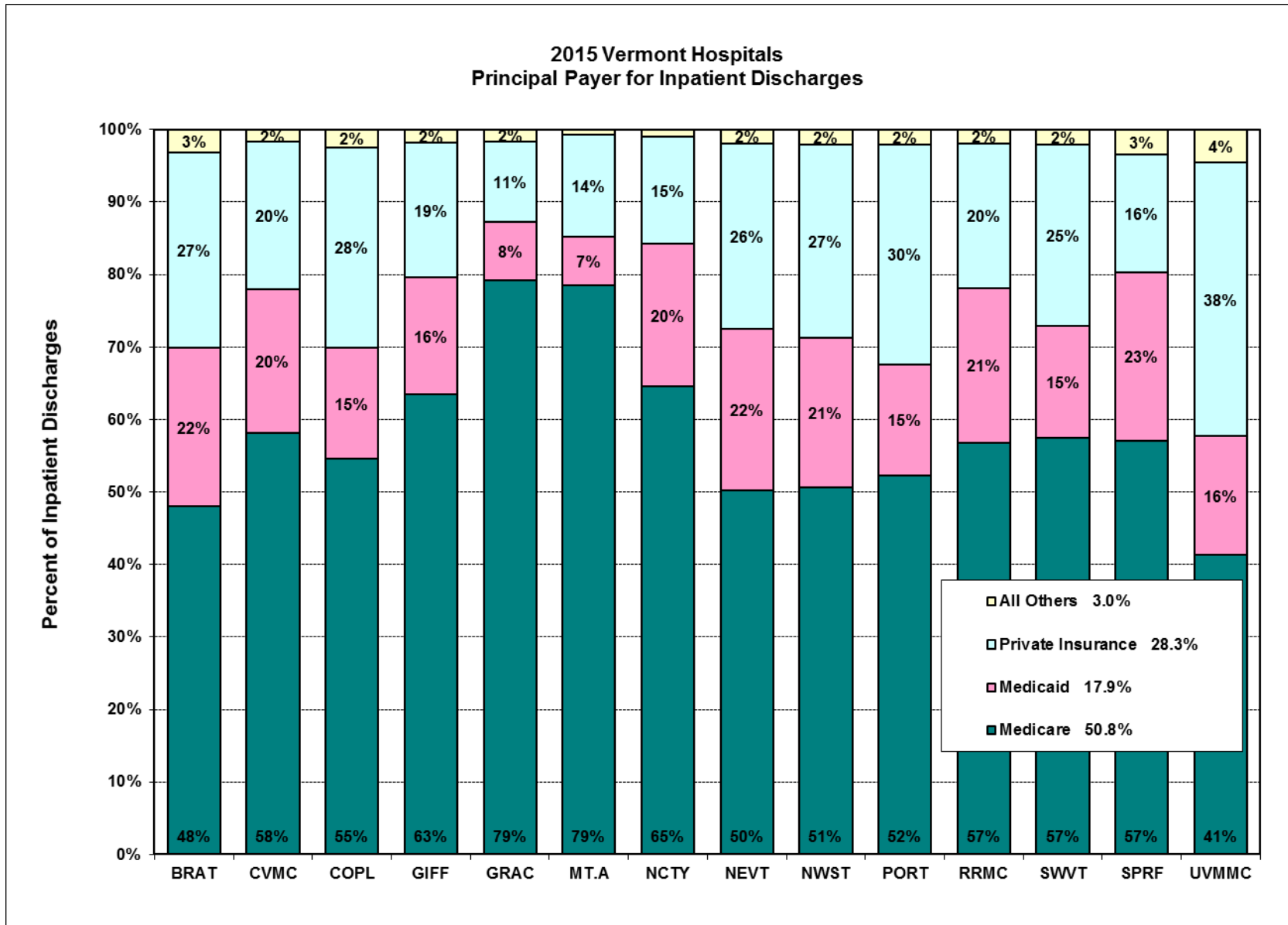


Numbers of discharges exclude newborns. Total charges include charges for newborns.

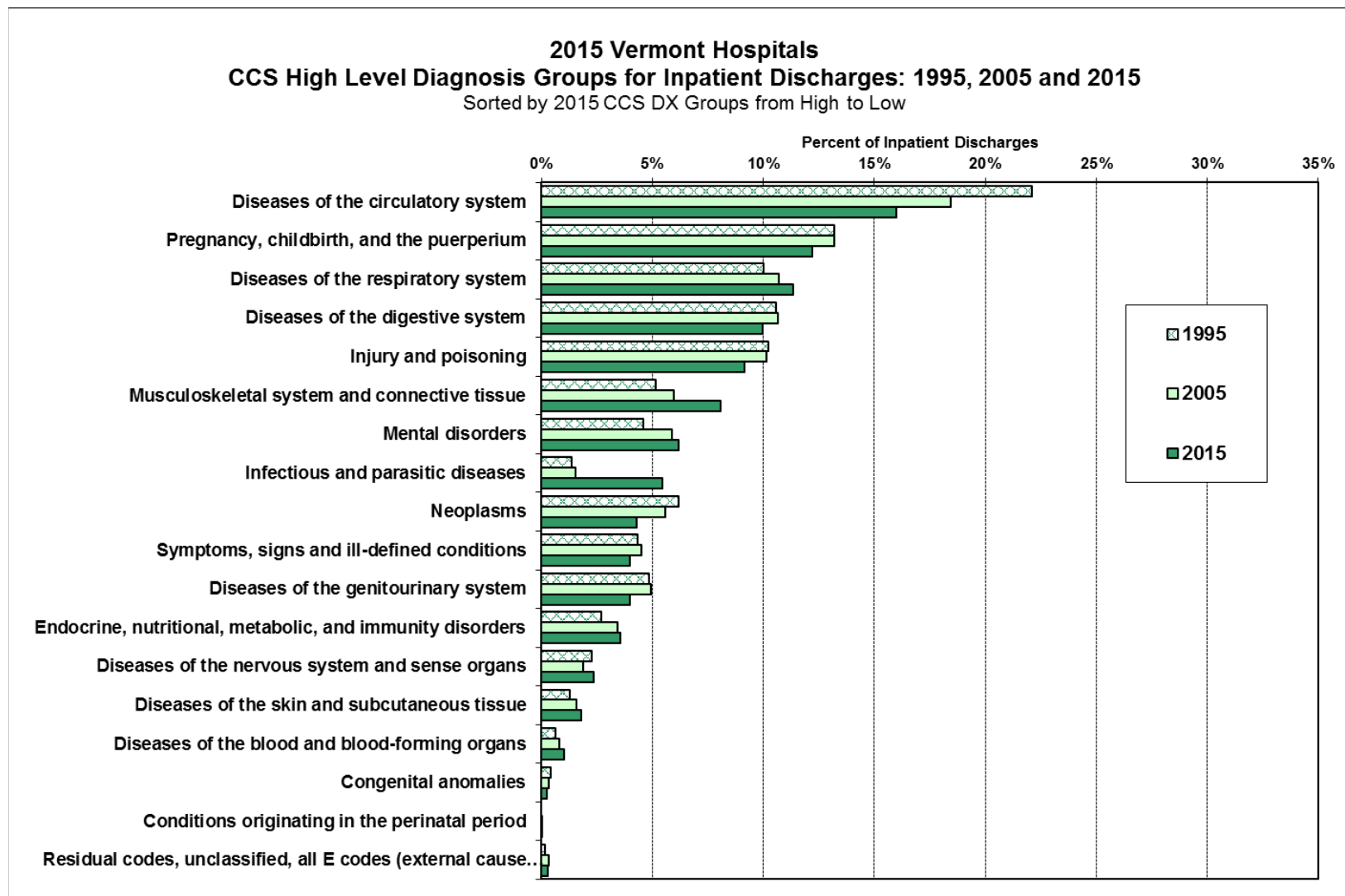
Highlights of Inpatient Discharges from Vermont Hospitals

- **In 2015, there were 46,923 inpatient discharges from Vermont hospitals**, including maternal records but excluding newborns. Of these, 86.9% were Vermont residents, and 13.1% were residents of New Hampshire, Massachusetts, New York or elsewhere.
- **The number of inpatient discharges from Vermont hospitals has declined** 11.2% from 1995, and 3.8% from 2005, including both Vermont residents and non-residents. The average length of stay for these discharges declined from 5.4 days per discharge in 1995 to 4.5 in 2005, and to 4.8 in 2015.
- **Similar to findings in recent years**, more than half of the total inpatient discharges from Vermont hospitals in 2015 originated in the Emergency Department (58.9%).
- **The University of Vermont Medical Center** continued to have the highest number of inpatient discharges at 18,734 in 2015 (39.9% of all inpatient discharges, compared to 39.4% in 1995 and 42.2% in 2005). Rutland followed with 6,105 discharges (13.0%). Grace Cottage Hospital and Mt. Ascutney Hospital and Health Center had the lowest total numbers of inpatient discharges (125 and 1,053 respectively).
- **The University of Vermont Medical Center** continued to have the highest total number of patient days at 107,077 in 2015 (48.0% of 223,155 patient days), followed by Rutland Regional Medical Center with 29,051 (13.0%). Grace Cottage Hospital had the lowest total number of patient days (369).
- **In 2015, average length of stay in Vermont hospitals varied** from 3.0 days per discharge at Grace Cottage 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 8.8, a slight decrease from 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, and again to 1,053 in 2015, and the number of patient days increased from 1,391 in 2013 to 8,873 in 2014, and to 9,295 in 2015. As in 2014, where the increases were found primarily in 540 discharges with diagnoses of symptoms, signs and ill-defined conditions and an average length of stay of 12.8 days (up from 6 discharges and an average of 4.8 patient days in 2013), in 2015 there were 594 discharges in this same diagnosis group with an average of 11.6 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 2015, Medicare continued to be the leading principal payer for inpatient discharges from Vermont hospitals at 50.8% of total discharges, followed by private insurance at 28.3% and Medicaid at 17.9%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.



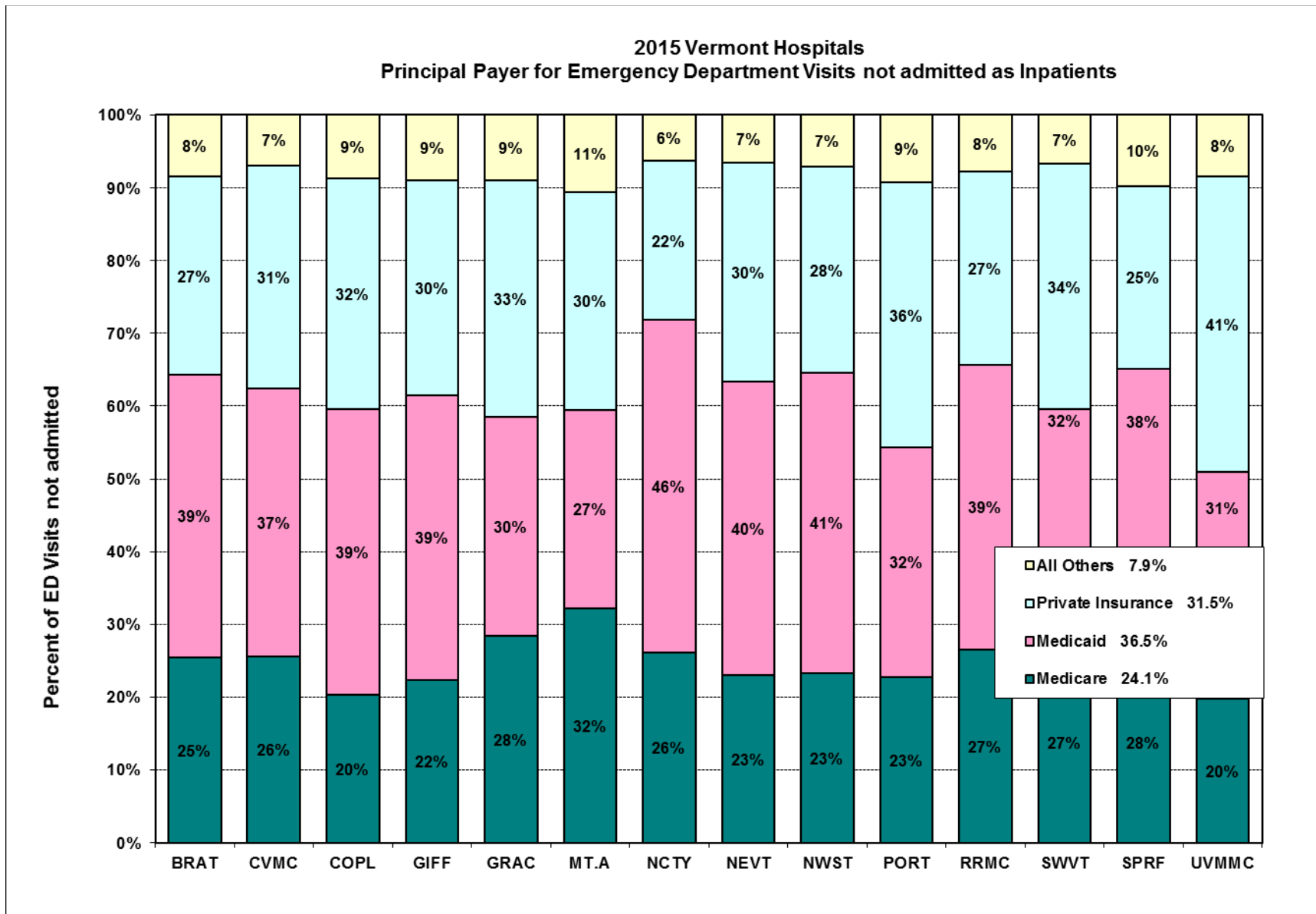
- **The most frequent reasons for hospitalization in 2015** were Diseases of the circulatory system; Pregnancy, childbirth and the puerperium; Diseases of the respiratory system; Diseases of the digestive system; and Injury and poisoning, consistent with recent years. Of note are the decrease in diagnoses of Diseases of the circulatory system, and the substantial increases in the percent of inpatient discharges hospitalized with diagnoses of Musculoskeletal system and connective tissue, and with Infectious and parasitic diseases.



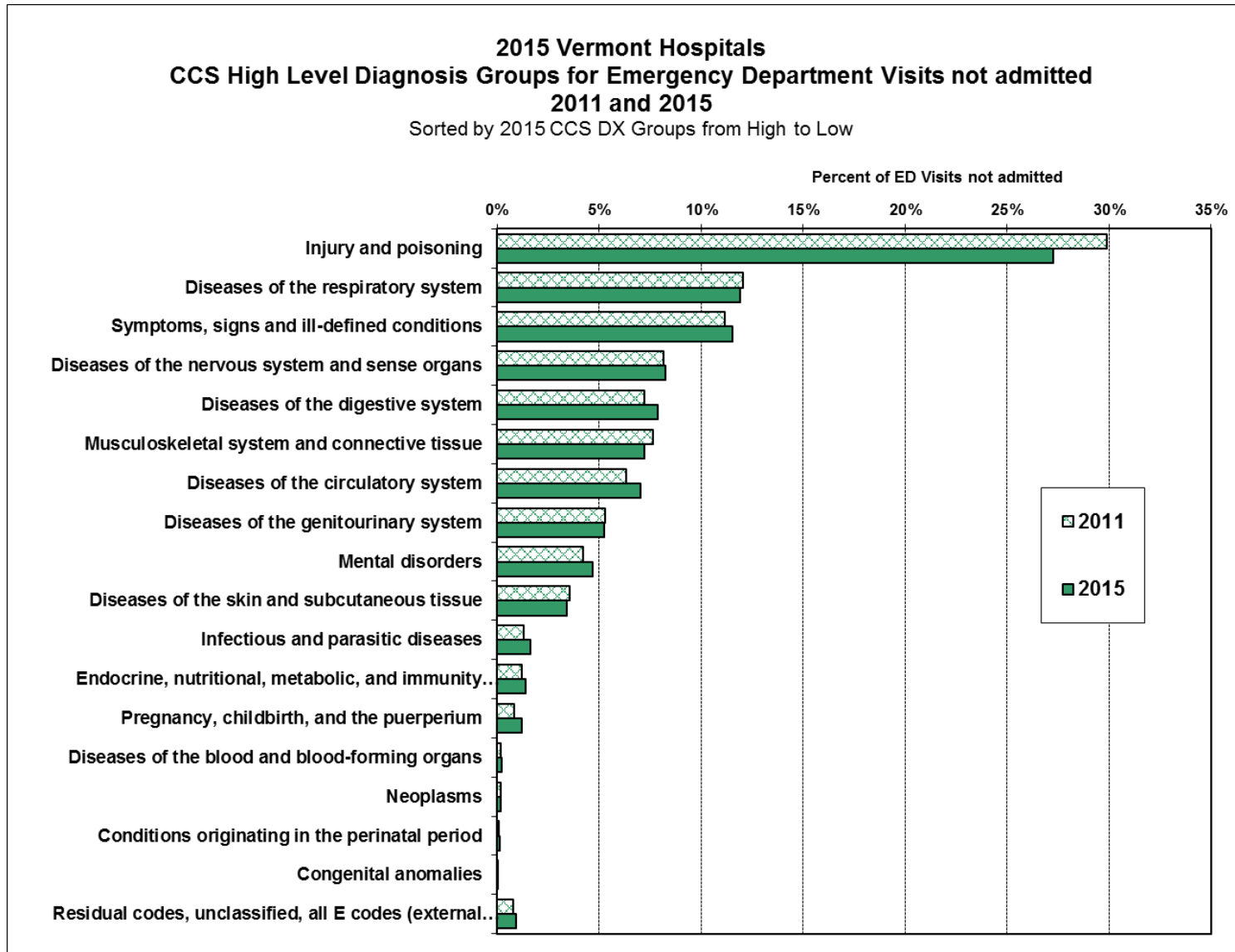
Highlights of Visits to Vermont Hospital Emergency Departments

- **In 2015, there were a total of 268,013 visits to Vermont hospital Emergency Departments**, including both Vermont residents and non-residents, a 1.8% increase from 2014. Similar to recent years, 89.7% (240,356) of these ED visits were not admitted, while the remaining 10.3% (27,657) of ED visits were admitted and categorized as inpatient discharges.
- **Overall, the number of ED visits decreased slightly** from 2011 to 2015 by -0.3% overall (-1.8% for ED visits not admitted, and an increase of 13.9% for those admitted as inpatients).
- **In 2015, 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 3.6% of visits by individuals age 15-44, 11.7% of those aged 45-64, 19.1% of those aged 65-69, 22.4% of those aged 70-74, 26.4% of those aged 75-79, and 32.3% of those aged 80 and older.
- **The University of Vermont Medical Center** continued to have the highest percent of visits to the ED in 2015, leading all Vermont hospitals with 21.2% of all ED visits. Of all ED visits to The University of Vermont Medical Center, 15.4% were admitted as inpatients, consistent with previous years.
- **The percent of ED visits that were admitted in 2015** ranged from highs of 15.4% at The University of Vermont Medical Center, 13.4% at Rutland Regional Medical Center, and 12.9% at Central Vermont Medical Center, to a low of 3.7% at Grace Cottage Hospital.
- **Of all ED visits, those with a primary diagnosis of neoplasms were the most likely to be admitted (62.1%),** followed by those with diseases of the blood and blood-forming organs (42.4%), those with congenital anomalies (40.5%), and those with infectious and parasitic diseases (36.3%). Least likely to be admitted were ED visits for Conditions originating in the perinatal period (1.0%) and for Symptoms, signs and ill-defined conditions (1.8%).

In 2015, Medicaid was the leading principal payer for ED visits not admitted at 36.5% of these visits, followed by private insurance at 31.5% and Medicare at 24.1%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.



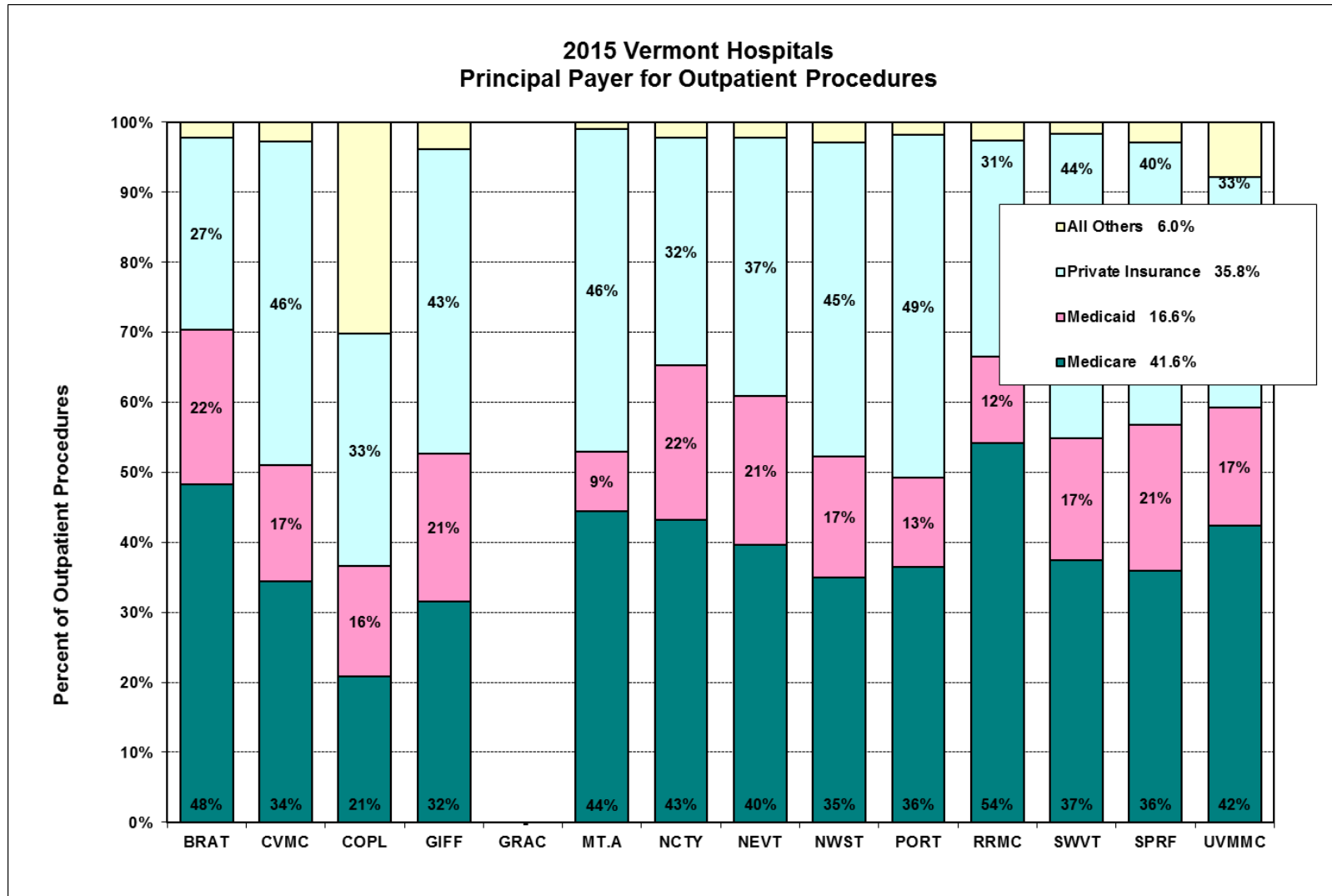
- **The most frequent reasons for ED visits not admitted in 2015** were Injury and poisoning; Diseases of the respiratory system; Symptoms, signs and ill-defined conditions; Diseases of the nervous system and sense organs; Diseases of the digestive system; and Musculoskeletal system & connective tissue, consistent with recent years.



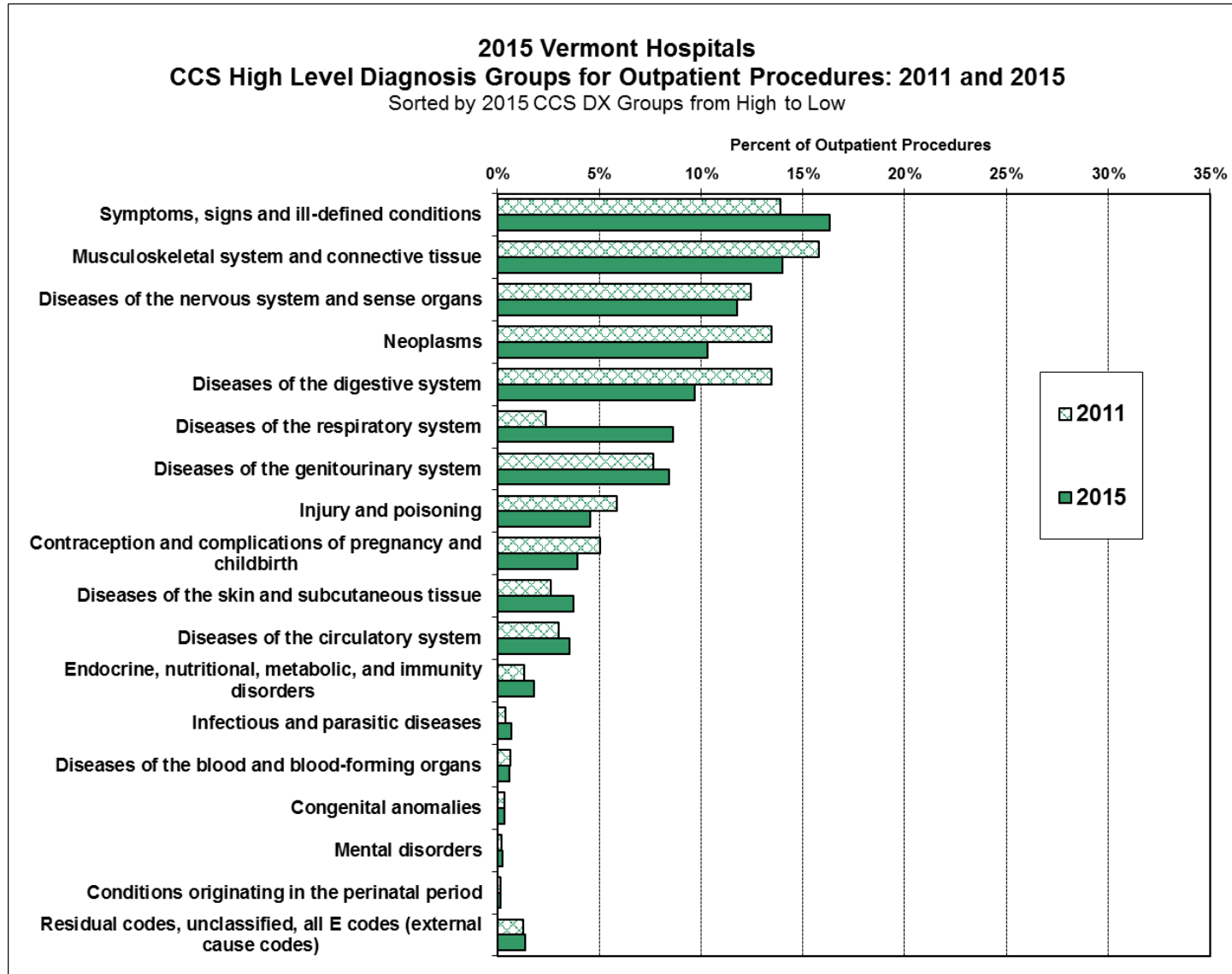
Highlights of Outpatient Procedures and Services in Vermont Hospitals

- **In 2015, there were 128,434 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 no visits for outpatient procedures in this range of CCS procedure groups.
- **The number of outpatient procedures in Vermont hospitals** decreased slightly by -1.9% from 2014 to 2015. The continued 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 9.6% of all visits to Vermont hospitals for outpatient procedures** in 2015. As in previous years, there was wide variation in the percent of non-residents at Vermont hospitals, with non-residents comprising 39.9% of Mt. Ascutney Hospital and Health Center's outpatient visits and 23.8% 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 41.6% of all visits to Vermont hospitals for outpatient procedures in 2015. Rutland Regional Medical Center reported 54.2 % of outpatient visits with Medicare as the primary payer, and Brattleboro Memorial Hospital reported 48.2%, while Copley reported the lowest percent with 20.9%. Consistent with recent years, there was substantial variation by CCS diagnosis group, with Diseases of the nervous system and sense organs (62.2%) and Diseases of the skin and subcutaneous tissue (60.1%) 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 (8.5%), followed by Rutland Regional Medical Center with 12.3%, while North Country Hospital and Brattleboro Memorial Hospital reported the highest percents with Medicaid as primary payer (22.2% and 22.1% respectively).
- **The services most frequently provided in expanded outpatient visits** in 2015 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, Laboratory-Pathological, Physical Therapy, Hematology, Magnetic Resonance Imaging (MRI), and Cytology. These findings are consistent with recent years.
- **The average charge for observation beds in Vermont hospitals has increased each year since 2011** and was 41.5% higher in 2015 than it was in 2011, while the number of these beds in 2015 has fluctuated somewhat over time but changed very little since 2011 (-0.5%). The University of Vermont Medical Center had 31.2% of all observation beds in 2015, followed by Rutland Regional Medical Center (12.2%), and Brattleboro Memorial Hospital (10.5%). The same hospitals consistently have the highest percents of observation beds, but the rank order may change from one year to another.

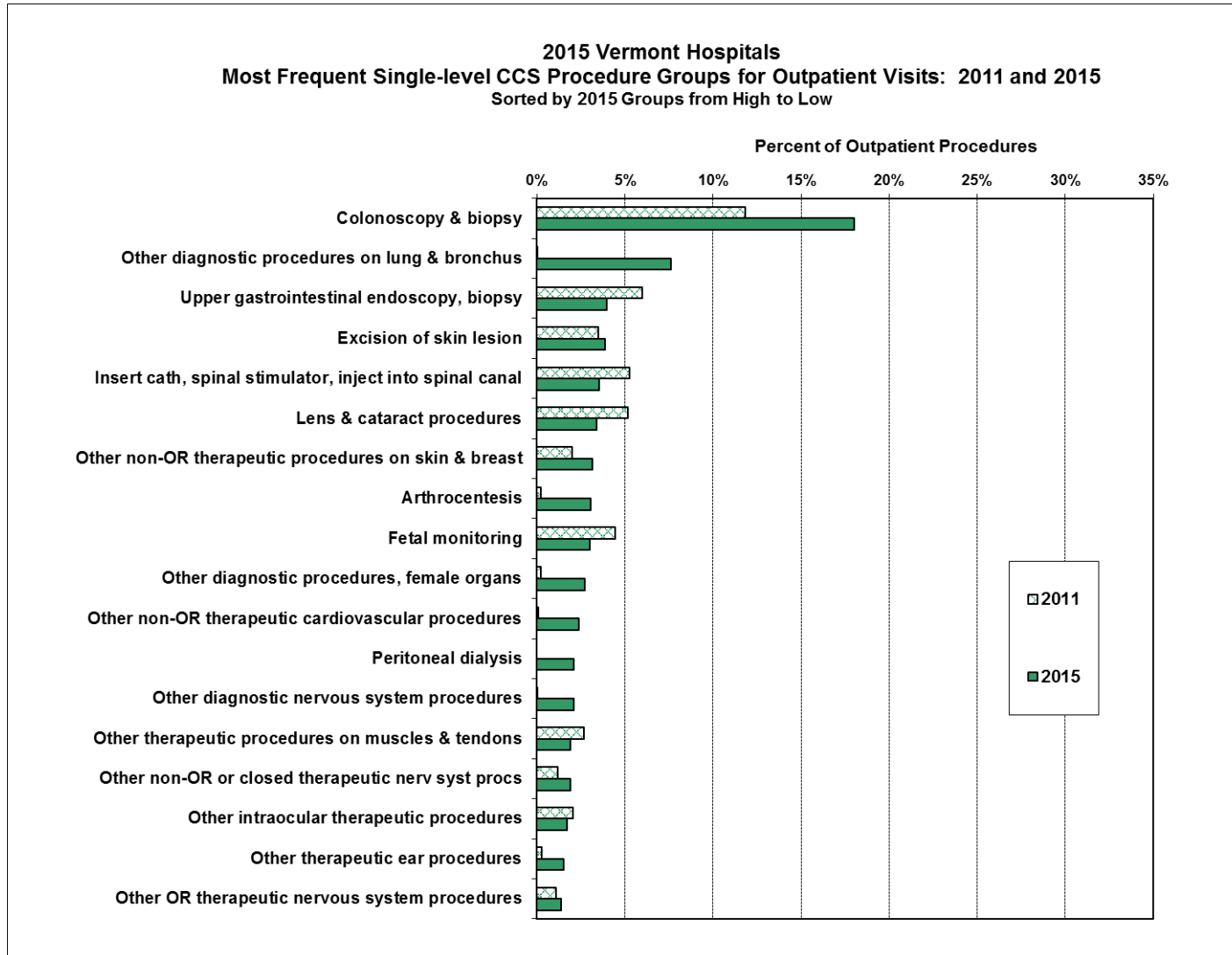
- In 2015, Medicare was the leading principal payer** for 41.6% of outpatient procedures in range, followed by private insurance at 35.8% and Medicaid at 16.6%. These figures are comparable to those in recent years. As in previous years, there was wide variation among hospitals in payer mix.



- **The most frequent reasons for outpatient procedures in range** in 2015 were Symptoms, signs and ill-defined conditions; Musculoskeletal system and connective tissue; Diseases of the nervous system and sense organs; Neoplasms; and Diseases of the digestive system. The most frequent reasons in 2015 are consistent with those in recent years, although their rank order may differ a little. Of note are increases in the *number* of outpatients diagnoses with Symptoms, signs and ill-defined conditions (+50.7%), Diseases of the respiratory system (+360.9%), and Infectious and parasitic diseases (+111.6%) compared to 2011.

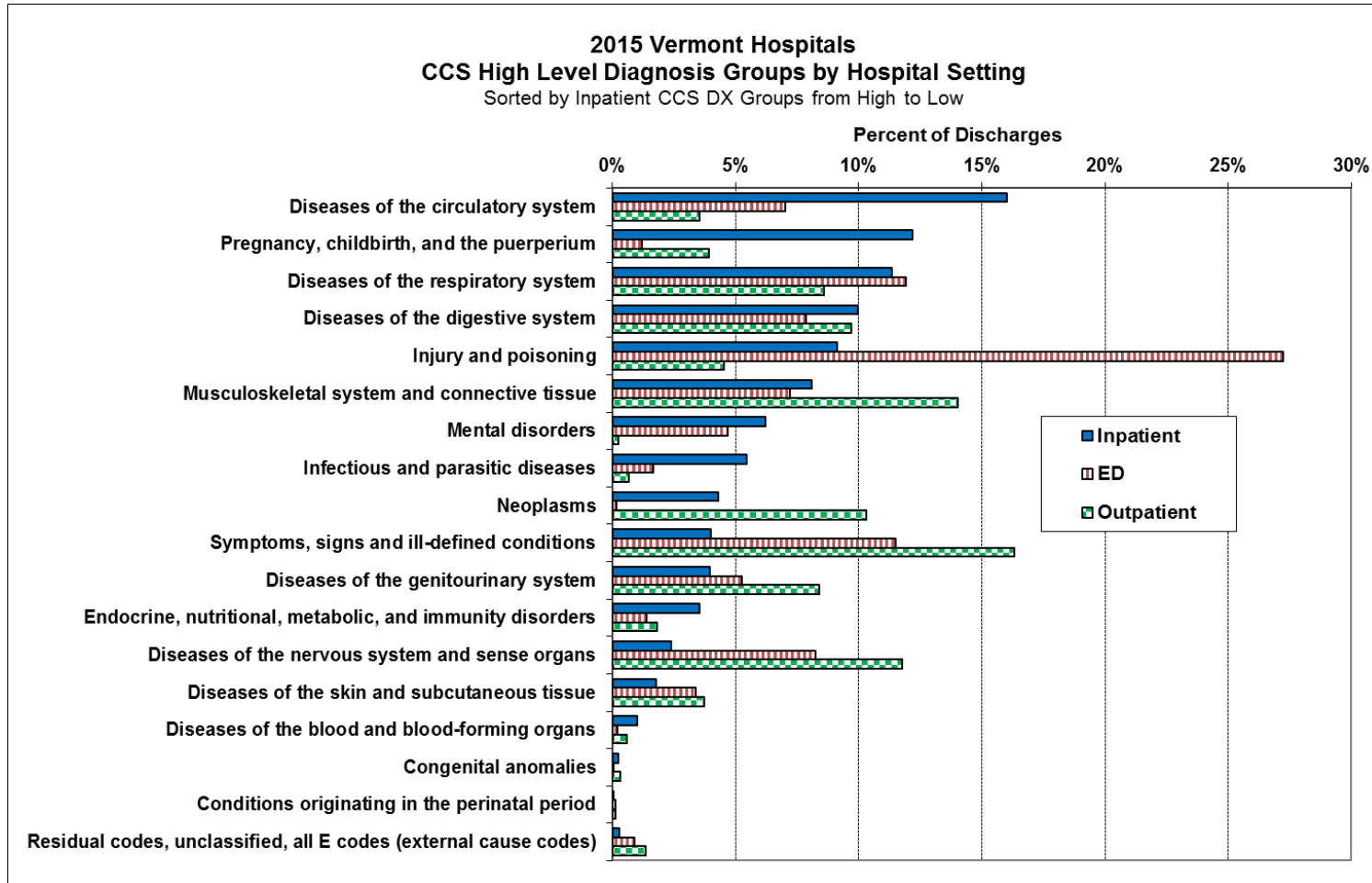


- The leading single-level group of outpatient procedures in high-level CCS procedure groups 1 through 15 in both 2011 and 2015 was Colonoscopy & biopsy. Following this procedure group in 2015 were Other diagnostic procedures on lung & bronchus, and Upper gastrointestinal endoscopy, biopsy. These most frequent procedure groups in 2015 are not consistent 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.

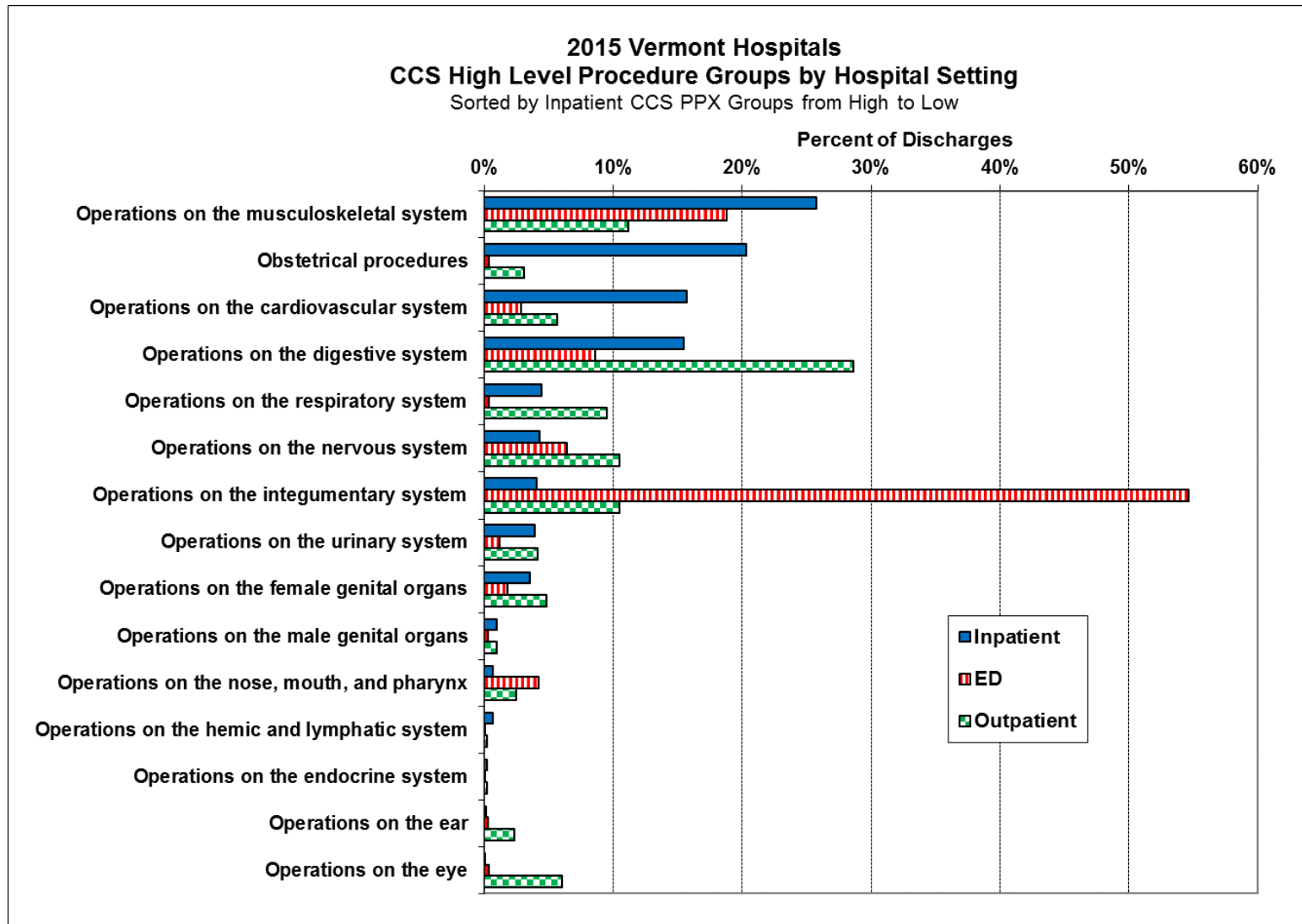


Highlights of Comparisons across Vermont Hospital Settings

- **The most frequent CCS high level diagnosis groups differed across Vermont hospital settings in 2015.** 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 2015.** 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
2015 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	738	47.6%	811	52.4%	1,549	3.3%
Central Vermont Medical Center	711	18.1%	3,218	81.9%	3,929	8.4%
Copley Hospital	796	47.4%	885	52.6%	1,681	3.6%
Gifford Medical Center	492	34.1%	950	65.9%	1,442	3.1%
Grace Cottage Hospital	21	16.8%	104	83.2%	125	0.3%
Mt. Ascutney Hospital and Health Center	778	73.9%	275	26.1%	1,053	2.2%
North Country Hospital	612	37.6%	1,017	62.4%	1,629	3.5%
Northeastern Vermont Regional Hospital	758	60.4%	496	39.6%	1,254	2.7%
Northwestern Medical Center	855	33.0%	1,735	67.0%	2,590	5.5%
Porter Medical Center	599	40.3%	888	59.7%	1,487	3.2%
Rutland Regional Medical Center	1,634	26.8%	4,471	73.2%	6,105	13.0%
Southwestern Vermont Medical Center	801	23.4%	2,620	76.6%	3,421	7.3%
Springfield Hospital	503	26.1%	1,421	73.9%	1,924	4.1%
University of Vermont Medical Center	9,968	53.2%	8,766	46.8%	18,734	39.9%
Total	19,266	41.1%	27,657	58.9%	46,923	100.0%

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

Table I-2

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015**

<u>Vermont Hospital</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>
Brattleboro Memorial Hospital	2,531	2,062	1,549	12,118	9,102	5,021	4.8	4.4	3.2
Central Vermont Medical Center	4,056	3,128	3,929	20,961	13,917	18,282	5.2	4.4	4.7
Copley Hospital	1,587	1,212	1,681	6,322	4,711	4,639	4.0	3.9	2.8
Gifford Medical Center	1,107	978	1,442	4,345	2,942	6,059	3.9	3.0	4.2
Grace Cottage Hospital	207	210	125	646	621	369	3.1	3.0	3.0
Mt. Ascutney Hospital and Health Center	543	480	1,053	2,252	1,749	9,295	4.1	3.6	8.8
North Country Hospital	1,905	1,657	1,629	6,394	4,767	5,397	3.4	2.9	3.3
Northeastern Vermont Regional Hospital	1,782	1,442	1,254	6,354	4,681	4,297	3.6	3.2	3.4
Northwestern Medical Center	2,528	2,028	2,590	12,761	7,607	8,088	5.0	3.8	3.1
Porter Medical Center	1,434	1,498	1,487	6,246	5,162	4,681	4.4	3.4	3.1
Rutland Regional Medical Center	6,856	6,702	6,105	39,172	31,848	29,051	5.7	4.8	4.8
Southwestern Vermont Medical Center	5,027	4,386	3,421	22,714	17,126	12,505	4.5	3.9	3.7
Springfield Hospital	2,469	2,400	1,924	11,151	10,530	8,394	4.5	4.4	4.4
University of Vermont Medical Center	20,833	20,583	18,734	131,698	106,655	107,077	6.3	5.2	5.7
Total	52,865	48,766	46,923	283,134	221,418	223,155	5.4	4.5	4.8

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
All Vermont Hospitals									
Infectious & parasitic diseases	712	765	2,564	4,917	5,372	15,479	6.9	7.0	6.0
Neoplasms	3,267	2,724	2,015	20,056	14,414	11,810	6.1	5.3	5.9
Endocrine, nutritional, metabolic, immunity	1,427	1,674	1,664	8,844	8,238	7,863	6.2	4.9	4.7
Diseases of the blood & blood-forming organs	327	400	480	1,710	1,583	1,833	5.2	4.0	3.8
Mental disorders	2,428	3,096	2,911	21,624	21,233	27,505	8.9	6.9	9.4
Diseases of the nervous system and sense organs	1,200	923	1,115	5,559	3,918	5,646	4.6	4.2	5.1
Diseases of the circulatory system	11,680	9,003	7,507	66,859	35,632	30,661	5.7	4.0	4.1
Diseases of the respiratory system	5,294	5,215	5,327	30,811	25,531	23,408	5.8	4.9	4.4
Diseases of the digestive system	5,583	5,097	4,684	28,423	23,390	19,182	5.1	4.6	4.1
Diseases of the genitourinary system	2,564	2,404	1,864	10,013	7,726	7,400	3.9	3.2	4.0
Pregnancy, childbirth, and the puerperium	6,973	6,362	5,727	14,297	15,993	14,789	2.1	2.5	2.6
Diseases of the skin and subcutaneous tissue	676	781	836	4,940	3,855	4,297	7.3	4.9	5.1
Musculoskeletal system and connective tissue	2,727	2,919	3,797	13,398	11,846	11,669	4.9	4.1	3.1
Congenital anomalies	214	164	119	1,139	592	687	5.3	3.6	5.8
Conditions originating in the perinatal period	-	1	3	-	4	9	-	4.0	3.0
Injury & poisoning	5,408	4,871	4,290	30,399	25,573	22,245	5.6	5.3	5.2
Symptoms, signs & ill-defined conditions	2,293	2,205	1,881	19,789	15,979	18,148	8.6	7.2	9.6
Residual codes, unclassified, all Ecodes	92	162	139	356	539	524	3.9	3.3	3.8
Total	52,865	48,766	46,923	283,134	221,418	223,155	5.4	4.5	4.8

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>
Brattleboro Memorial Hospital									
Infectious & parasitic diseases	30	22	74	182	195	373	6.1	8.9	5.0
Neoplasms	145	97	43	932	547	177	6.4	5.6	4.1
Endocrine, nutritional, metabolic, immunity	88	98	58	547	573	144	6.2	5.8	2.5
Diseases of the blood & blood-forming organs	17	16	16	66	55	39	3.9	3.4	2.4
Mental disorders	28	38	25	110	240	126	3.9	6.3	5.0
Diseases of the nervous system and sense organs	49	39	12	314	200	36	6.4	5.1	3.0
Diseases of the circulatory system	408	322	182	2,050	1,322	553	5.0	4.1	3.0
Diseases of the respiratory system	216	199	186	1,490	1,230	641	6.9	6.2	3.4
Diseases of the digestive system	326	236	157	1,618	1,144	622	5.0	4.8	4.0
Diseases of the genitourinary system	142	125	69	493	466	193	3.5	3.7	2.8
Pregnancy, childbirth, and the puerperium	423	363	357	943	901	853	2.2	2.5	2.4
Diseases of the skin and subcutaneous tissue	24	29	43	207	276	183	8.6	9.5	4.3
Musculoskeletal system and connective tissue	195	175	186	969	755	565	5.0	4.3	3.0
Congenital anomalies	6	1	1	19	6	3	3.2	6.0	3.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	368	240	127	1,896	940	473	5.2	3.9	3.7
Symptoms, signs & ill-defined conditions	62	57	11	277	241	34	4.5	4.2	3.1
Residual codes, unclassified, all Ecodes	4	5	2	5	11	6	1.3	2.2	3.0
Total	2,531	2,062	1,549	12,118	9,102	5,021	4.8	4.4	3.2

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Central Vermont Medical Center									
Infectious & parasitic diseases	45	46	334	337	234	1,805	7.5	5.1	5.4
Neoplasms	232	132	83	1,565	696	562	6.7	5.3	6.8
Endocrine, nutritional, metabolic, immunity	123	120	112	658	428	376	5.3	3.6	3.4
Diseases of the blood & blood-forming organs	14	30	59	89	99	191	6.4	3.3	3.2
Mental disorders	330	477	493	3,390	3,865	4,437	10.3	8.1	9.0
Diseases of the nervous system and sense organs	65	38	75	250	170	294	3.8	4.5	3.9
Diseases of the circulatory system	761	418	602	3,297	1,425	2,095	4.3	3.4	3.5
Diseases of the respiratory system	447	434	565	2,553	2,139	2,738	5.7	4.9	4.8
Diseases of the digestive system	522	374	457	2,536	1,618	1,873	4.9	4.3	4.1
Diseases of the genitourinary system	293	137	148	1,307	368	575	4.5	2.7	3.9
Pregnancy, childbirth, and the puerperium	584	415	359	1,168	912	846	2.0	2.2	2.4
Diseases of the skin and subcutaneous tissue	55	61	96	492	341	544	8.9	5.6	5.7
Musculoskeletal system and connective tissue	153	158	241	994	645	827	6.5	4.1	3.4
Congenital anomalies	5	3	3	34	4	10	6.8	1.3	3.3
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	326	241	264	1,891	864	986	5.8	3.6	3.7
Symptoms, signs & ill-defined conditions	94	41	34	376	98	110	4.0	2.4	3.2
Residual codes, unclassified, all Ecodes	7	3	4	24	11	13	3.4	3.7	3.3
Total	4,056	3,128	3,929	20,961	13,917	18,282	5.2	4.4	4.7

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<u>CCS Diagnosis Groups</u>	<u>Discharges</u>			<u>Patient Days</u>			<u>Average Length of Stay</u>		
	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>
Copley Hospital									
Infectious & parasitic diseases	23	8	37	110	40	137	4.8	5.0	3.7
Neoplasms	59	58	29	293	230	86	5.0	4.0	3.0
Endocrine, nutritional, metabolic, immunity	46	36	42	235	175	109	5.1	4.9	2.6
Diseases of the blood & blood-forming organs	2	6	5	19	26	13	9.5	4.3	2.6
Mental disorders	28	12	26	139	49	98	5.0	4.1	3.8
Diseases of the nervous system and sense organs	21	21	27	87	88	70	4.1	4.2	2.6
Diseases of the circulatory system	298	116	194	1,096	396	480	3.7	3.4	2.5
Diseases of the respiratory system	229	143	208	1,200	649	762	5.2	4.5	3.7
Diseases of the digestive system	228	156	202	899	700	603	3.9	4.5	3.0
Diseases of the genitourinary system	67	66	84	265	211	277	4.0	3.2	3.3
Pregnancy, childbirth, and the puerperium	258	285	218	471	594	391	1.8	2.1	1.8
Diseases of the skin and subcutaneous tissue	21	20	48	154	125	174	7.3	6.3	3.6
Musculoskeletal system and connective tissue	63	93	338	396	439	692	6.3	4.7	2.0
Congenital anomalies	2	-	2	3	-	3	1.5	-	1.5
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	194	169	163	814	915	598	4.2	5.4	3.7
Symptoms, signs & ill-defined conditions	47	20	41	140	63	91	3.0	3.2	2.2
Residual codes, unclassified, all Ecodes	1	3	17	1	11	55	1.0	3.7	3.2
Total	1,587	1,212	1,681	6,322	4,711	4,639	4.0	3.9	2.8

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Gifford Medical Center									
Infectious & parasitic diseases	23	16	15	134	60	83	5.8	3.8	5.5
Neoplasms	48	61	28	220	185	149	4.6	3.0	5.3
Endocrine, nutritional, metabolic, immunity	22	36	66	126	115	343	5.7	3.2	5.2
Diseases of the blood & blood-forming organs	7	5	25	40	20	119	5.7	4.0	4.8
Mental disorders	12	15	99	33	54	478	2.8	3.6	4.8
Diseases of the nervous system and sense organs	15	4	51	46	13	193	3.1	3.3	3.8
Diseases of the circulatory system	215	132	229	843	384	811	3.9	2.9	3.5
Diseases of the respiratory system	172	123	176	855	489	695	5.0	4.0	3.9
Diseases of the digestive system	130	75	135	598	232	547	4.6	3.1	4.1
Diseases of the genitourinary system	50	51	93	148	138	409	3.0	2.7	4.4
Pregnancy, childbirth, and the puerperium	264	304	180	543	678	447	2.1	2.2	2.5
Diseases of the skin and subcutaneous tissue	41	22	38	206	88	218	5.0	4.0	5.7
Musculoskeletal system and connective tissue	32	36	86	168	157	304	5.3	4.4	3.5
Congenital anomalies	1	2	2	5	6	8	5.0	3.0	4.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	68	71	95	366	249	468	5.4	3.5	4.9
Symptoms, signs & ill-defined conditions	7	22	116	14	60	760	2.0	2.7	6.6
Residual codes, unclassified, all Ecodes	-	3	8	-	14	27	-	4.7	3.4
Total	1,107	978	1,442	4,345	2,942	6,059	3.9	3.0	4.2

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>
Grace Cottage Hospital									
Infectious & parasitic diseases	3	1	6	7	2	17	2.3	2.0	2.8
Neoplasms	10	11	3	30	36	8	3.0	3.3	2.7
Endocrine, nutritional, metabolic, immunity	10	11	3	35	27	10	3.5	2.5	3.3
Diseases of the blood & blood-forming organs	1	4	2	3	10	5	3.0	2.5	2.5
Mental disorders	14	11	-	48	45	-	3.4	4.1	-
Diseases of the nervous system and sense organs	7	4	13	23	14	35	3.3	3.5	2.7
Diseases of the circulatory system	41	35	17	138	100	47	3.4	2.9	2.8
Diseases of the respiratory system	44	50	31	132	153	90	3.0	3.1	2.9
Diseases of the digestive system	13	14	10	33	38	33	2.5	2.7	3.3
Diseases of the genitourinary system	7	12	7	19	26	19	2.7	2.2	2.7
Pregnancy, childbirth, and the puerperium	26	-	-	51	-	-	2.0	-	-
Diseases of the skin and subcutaneous tissue	5	7	6	30	19	20	6.0	2.7	3.3
Musculoskeletal system and connective tissue	11	10	4	45	29	14	4.1	2.9	3.5
Congenital anomalies	-	-	-	-	-	-	-	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	8	23	15	32	77	47	4.0	3.3	3.1
Symptoms, signs & ill-defined conditions	6	13	3	17	31	9	2.8	2.4	3.0
Residual codes, unclassified, all Ecodes	1	4	5	3	14	15	3.0	3.5	3.0
Total	207	210	125	646	621	369	3.1	3.0	3.0

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Mt. Ascutney Hospital and Health Center									
Infectious & parasitic diseases	12	8	6	56	46	20	4.7	5.8	3.3
Neoplasms	26	20	22	108	91	152	4.2	4.6	6.9
Endocrine, nutritional, metabolic, immunity	15	32	20	47	104	86	3.1	3.3	4.3
Diseases of the blood & blood-forming organs	2	2	8	7	9	28	3.5	4.5	3.5
Mental disorders	13	11	3	42	30	9	3.2	2.7	3.0
Diseases of the nervous system and sense organs	13	7	15	49	14	107	3.8	2.0	7.1
Diseases of the circulatory system	138	97	89	522	316	396	3.8	3.3	4.4
Diseases of the respiratory system	76	69	89	387	270	482	5.1	3.9	5.4
Diseases of the digestive system	65	71	83	363	289	289	5.6	4.1	3.5
Diseases of the genitourinary system	45	38	45	153	94	263	3.4	2.5	5.8
Pregnancy, childbirth, and the puerperium	-	-	-	-	-	-	-	-	-
Diseases of the skin and subcutaneous tissue	7	15	29	31	63	277	4.4	4.2	9.6
Musculoskeletal system and connective tissue	34	52	9	178	189	35	5.2	3.6	3.9
Congenital anomalies	1	-	-	6	-	-	6.0	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	70	43	37	226	176	220	3.2	4.1	5.9
Symptoms, signs & ill-defined conditions	25	14	594	74	47	6,918	3.0	3.4	11.6
Residual codes, unclassified, all Ecodes	1	1	4	3	11	13	3.0	11.0	3.3
Total	543	480	1,053	2,252	1,749	9,295	4.1	3.6	8.8

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>
North Country Hospital									
Infectious & parasitic diseases	48	40	100	160	139	376	3.3	3.5	3.8
Neoplasms	91	84	39	434	308	213	4.8	3.7	5.5
Endocrine, nutritional, metabolic, immunity	70	59	71	244	189	217	3.5	3.2	3.1
Diseases of the blood & blood-forming organs	12	21	25	33	62	81	2.8	3.0	3.2
Mental disorders	59	25	27	153	63	88	2.6	2.5	3.3
Diseases of the nervous system and sense organs	37	37	33	94	99	89	2.5	2.7	2.7
Diseases of the circulatory system	452	349	241	1,412	827	682	3.1	2.4	2.8
Diseases of the respiratory system	268	293	307	1,095	984	1,048	4.1	3.4	3.4
Diseases of the digestive system	238	195	221	858	664	883	3.6	3.4	4.0
Diseases of the genitourinary system	95	100	77	279	230	285	2.9	2.3	3.7
Pregnancy, childbirth, and the puerperium	252	231	234	524	543	545	2.1	2.4	2.3
Diseases of the skin and subcutaneous tissue	27	43	29	106	175	124	3.9	4.1	4.3
Musculoskeletal system and connective tissue	77	15	65	320	49	209	4.2	3.3	3.2
Congenital anomalies	1	3	-	5	10	-	5.0	3.3	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	130	100	125	517	258	455	4.0	2.6	3.6
Symptoms, signs & ill-defined conditions	45	51	23	145	129	65	3.2	2.5	2.8
Residual codes, unclassified, all Ecodes	3	11	12	15	38	37	5.0	3.5	3.1
Total	1,905	1,657	1,629	6,394	4,767	5,397	3.4	2.9	3.3

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Northeastern Vermont Regional Hospital									
Infectious & parasitic diseases	50	31	31	196	92	143	3.9	3.0	4.6
Neoplasms	70	50	28	341	210	158	4.9	4.2	5.6
Endocrine, nutritional, metabolic, immunity	26	76	49	85	218	163	3.3	2.9	3.3
Diseases of the blood & blood-forming organs	10	6	17	42	20	52	4.2	3.3	3.1
Mental disorders	45	19	42	176	50	144	3.9	2.6	3.4
Diseases of the nervous system and sense organs	32	20	24	103	68	65	3.2	3.4	2.7
Diseases of the circulatory system	347	217	207	1,244	696	668	3.6	3.2	3.2
Diseases of the respiratory system	288	225	144	984	800	523	3.4	3.6	3.6
Diseases of the digestive system	204	230	166	748	833	622	3.7	3.6	3.7
Diseases of the genitourinary system	90	65	55	266	195	213	3.0	3.0	3.9
Pregnancy, childbirth, and the puerperium	267	246	220	558	558	501	2.1	2.3	2.3
Diseases of the skin and subcutaneous tissue	30	40	28	122	188	128	4.1	4.7	4.6
Musculoskeletal system and connective tissue	92	82	85	572	344	337	6.2	4.2	4.0
Congenital anomalies	4	1	-	32	3	-	8.0	3.0	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	176	85	117	731	276	475	4.2	3.2	4.1
Symptoms, signs & ill-defined conditions	47	42	30	141	101	86	3.0	2.4	2.9
Residual codes, unclassified, all Ecodes	4	7	11	13	29	19	3.3	4.1	1.7
Total	1,782	1,442	1,254	6,354	4,681	4,297	3.6	3.2	3.4

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Northwestern Medical Center									
Infectious & parasitic diseases	29	28	117	287	147	451	9.9	5.3	3.9
Neoplasms	114	82	41	671	383	210	5.9	4.7	5.1
Endocrine, nutritional, metabolic, immunity	70	49	70	507	186	179	7.2	3.8	2.6
Diseases of the blood & blood-forming organs	12	18	18	101	76	52	8.4	4.2	2.9
Mental disorders	20	28	73	103	135	324	5.2	4.8	4.4
Diseases of the nervous system and sense organs	25	24	42	74	116	168	3.0	4.8	4.0
Diseases of the circulatory system	630	260	295	3,424	985	907	5.4	3.8	3.1
Diseases of the respiratory system	349	305	395	2,135	1,411	1,331	6.1	4.6	3.4
Diseases of the digestive system	298	259	340	1,447	1,243	1,109	4.9	4.8	3.3
Diseases of the genitourinary system	113	78	150	591	276	522	5.2	3.5	3.5
Pregnancy, childbirth, and the puerperium	463	497	422	838	1,078	924	1.8	2.2	2.2
Diseases of the skin and subcutaneous tissue	37	29	55	200	146	209	5.4	5.0	3.8
Musculoskeletal system and connective tissue	78	176	361	486	684	888	6.2	3.9	2.5
Congenital anomalies	1	-	-	2	-	-	2.0	-	-
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	238	167	180	1,582	683	657	6.6	4.1	3.7
Symptoms, signs & ill-defined conditions	50	25	28	309	54	63	6.2	2.2	2.3
Residual codes, unclassified, all Ecodes	1	3	3	4	4	94	4.0	1.3	31.3
Total	2,528	2,028	2,590	12,761	7,607	8,088	5.0	3.8	3.1

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

<u>CCS Diagnosis Groups</u>	Discharges			Patient Days			Average Length of Stay		
	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>	<u>1995</u>	<u>2005</u>	<u>2015</u>
Porter Medical Center									
Infectious & parasitic diseases	9	22	83	25	127	328	2.8	5.8	4.0
Neoplasms	84	64	23	367	271	87	4.4	4.2	3.8
Endocrine, nutritional, metabolic, immunity	30	47	51	140	184	142	4.7	3.9	2.8
Diseases of the blood & blood-forming organs	2	15	8	7	66	46	3.5	4.4	5.8
Mental disorders	17	24	33	64	76	122	3.8	3.2	3.7
Diseases of the nervous system and sense organs	18	14	38	79	55	122	4.4	3.9	3.2
Diseases of the circulatory system	260	204	131	1,150	721	395	4.4	3.5	3.0
Diseases of the respiratory system	185	225	220	1,121	957	840	6.1	4.3	3.8
Diseases of the digestive system	217	197	152	1,038	786	577	4.8	4.0	3.8
Diseases of the genitourinary system	85	94	61	337	268	179	4.0	2.9	2.9
Pregnancy, childbirth, and the puerperium	314	325	374	581	647	881	1.9	2.0	2.4
Diseases of the skin and subcutaneous tissue	35	35	39	295	142	163	8.4	4.1	4.2
Musculoskeletal system and connective tissue	61	93	166	382	343	428	6.3	3.7	2.6
Congenital anomalies	-	1	1	-	8	3	-	8.0	3.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	90	114	87	569	381	320	6.3	3.3	3.7
Symptoms, signs & ill-defined conditions	26	22	17	89	120	38	3.4	5.5	2.2
Residual codes, unclassified, all Ecodes	1	2	3	2	10	10	2.0	5.0	3.3
Total	1,434	1,498	1,487	6,246	5,162	4,681	4.4	3.4	3.1

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Rutland Regional Medical Center									
Infectious & parasitic diseases	111	116	396	894	856	2,284	8.1	7.4	5.8
Neoplasms	355	329	205	2,430	1,652	1,325	6.8	5.0	6.5
Endocrine, nutritional, metabolic, immunity	212	194	143	1,562	948	478	7.4	4.9	3.3
Diseases of the blood & blood-forming organs	41	37	68	240	121	195	5.9	3.3	2.9
Mental disorders	337	691	895	2,922	3,341	8,882	8.7	4.8	9.9
Diseases of the nervous system and sense organs	148	95	103	670	374	353	4.5	3.9	3.4
Diseases of the circulatory system	1,507	1,031	800	8,255	4,165	2,968	5.5	4.0	3.7
Diseases of the respiratory system	764	930	681	4,783	5,323	2,867	6.3	5.7	4.2
Diseases of the digestive system	659	658	615	3,829	2,973	2,392	5.8	4.5	3.9
Diseases of the genitourinary system	341	426	357	1,027	1,327	1,530	3.0	3.1	4.3
Pregnancy, childbirth, and the puerperium	752	542	412	1,369	1,300	1,030	1.8	2.4	2.5
Diseases of the skin and subcutaneous tissue	77	135	155	458	679	566	5.9	5.0	3.7
Musculoskeletal system and connective tissue	436	447	658	2,124	1,770	1,768	4.9	4.0	2.7
Congenital anomalies	9	4	2	40	11	57	4.4	2.8	28.5
Conditions originating in the perinatal period	-	1	-	-	4	-	-	4.0	-
Injury & poisoning	629	631	540	3,976	3,310	2,149	6.3	5.2	4.0
Symptoms, signs & ill-defined conditions	458	412	72	4,495	3,569	195	9.8	8.7	2.7
Residual codes, unclassified, all Ecodes	20	23	3	98	125	12	4.9	5.4	4.0
Total	6,856	6,702	6,105	39,172	31,848	29,051	5.7	4.8	4.8

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Southwestern Vermont Medical Center									
Infectious & parasitic diseases	86	98	282	515	534	1,265	6.0	5.4	4.5
Neoplasms	292	181	84	1,634	790	331	5.6	4.4	3.9
Endocrine, nutritional, metabolic, immunity	186	153	128	796	576	504	4.3	3.8	3.9
Diseases of the blood & blood-forming organs	24	39	36	100	111	106	4.2	2.8	2.9
Mental disorders	270	65	68	1,775	276	369	6.6	4.2	5.4
Diseases of the nervous system and sense organs	116	65	42	537	247	123	4.6	3.8	2.9
Diseases of the circulatory system	1,133	808	426	4,906	2,645	1,422	4.3	3.3	3.3
Diseases of the respiratory system	628	768	671	3,443	3,480	2,939	5.5	4.5	4.4
Diseases of the digestive system	611	575	390	2,865	2,941	1,425	4.7	5.1	3.7
Diseases of the genitourinary system	241	211	153	872	666	483	3.6	3.2	3.2
Pregnancy, childbirth, and the puerperium	408	515	482	869	1,285	1,164	2.1	2.5	2.4
Diseases of the skin and subcutaneous tissue	64	101	85	359	480	337	5.6	4.8	4.0
Musculoskeletal system and connective tissue	251	225	201	933	765	580	3.7	3.4	2.9
Congenital anomalies	8	-	1	35	-	1	4.4	-	1.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	548	454	322	2,522	1,946	1,320	4.6	4.3	4.1
Symptoms, signs & ill-defined conditions	157	123	40	542	367	110	3.5	3.0	2.8
Residual codes, unclassified, all Ecodes	4	5	10	11	17	26	2.8	3.4	2.6
Total	5,027	4,386	3,421	22,714	17,126	12,505	4.5	3.9	3.7

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

Table I-3

**2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups**

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
Springfield Hospital									
Infectious & parasitic diseases	33	38	35	253	150	129	7.7	3.9	3.7
Neoplasms	111	73	14	550	280	58	5.0	3.8	4.1
Endocrine, nutritional, metabolic, immunity	57	47	51	320	200	204	5.6	4.3	4.0
Diseases of the blood & blood-forming organs	10	19	13	28	40	50	2.8	2.1	3.8
Mental disorders	336	583	411	2,194	4,493	2,582	6.5	7.7	6.3
Diseases of the nervous system and sense organs	38	45	24	119	103	82	3.1	2.3	3.4
Diseases of the circulatory system	536	370	235	2,294	1,039	820	4.3	2.8	3.5
Diseases of the respiratory system	240	296	376	1,263	1,299	1,711	5.3	4.4	4.6
Diseases of the digestive system	261	252	205	1,168	918	912	4.5	3.6	4.4
Diseases of the genitourinary system	184	103	68	562	227	255	3.1	2.2	3.8
Pregnancy, childbirth, and the puerperium	194	193	166	344	435	384	1.8	2.3	2.3
Diseases of the skin and subcutaneous tissue	47	42	27	229	202	134	4.9	4.8	5.0
Musculoskeletal system and connective tissue	104	110	115	500	377	403	4.8	3.4	3.5
Congenital anomalies	1	2	1	1	5	8	1.0	2.5	8.0
Conditions originating in the perinatal period	-	-	-	-	-	-	-	-	-
Injury & poisoning	242	155	127	1,091	557	492	4.5	3.6	3.9
Symptoms, signs & ill-defined conditions	74	68	46	234	187	126	3.2	2.8	2.7
Residual codes, unclassified, all Ecodes	1	4	10	1	18	44	1.0	4.5	4.4
Total	2,469	2,400	1,924	11,151	10,530	8,394	4.5	4.4	4.4

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

Table I-3
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals: Comparison of 1995, 2005 and 2015
Clinical Classifications Software (CCS) High Level Diagnosis Groups

CCS Diagnosis Groups	Discharges			Patient Days			Average Length of Stay		
	1995	2005	2015	1995	2005	2015	1995	2005	2015
University of Vermont Medical Center									
Infectious & parasitic diseases	210	291	1,048	1,761	2,750	8,068	8.4	9.5	7.7
Neoplasms	1,630	1,482	1,373	10,481	8,735	8,294	6.4	5.9	6.0
Endocrine, nutritional, metabolic, immunity	472	716	800	3,542	4,315	4,908	7.5	6.0	6.1
Diseases of the blood & blood-forming organs	173	182	180	935	868	856	5.4	4.8	4.8
Mental disorders	919	1,097	716	10,475	8,516	9,846	11.4	7.8	13.8
Diseases of the nervous system and sense organs	616	510	616	3,114	2,357	3,909	5.1	4.6	6.3
Diseases of the circulatory system	4,954	4,644	3,859	36,228	20,611	18,417	7.3	4.4	4.8
Diseases of the respiratory system	1,388	1,155	1,278	9,370	6,347	6,741	6.8	5.5	5.3
Diseases of the digestive system	1,811	1,805	1,551	10,423	9,011	7,295	5.8	5.0	4.7
Diseases of the genitourinary system	811	898	497	3,694	3,234	2,197	4.6	3.6	4.4
Pregnancy, childbirth, and the puerperium	2,768	2,446	2,303	6,038	7,062	6,823	2.2	2.9	3.0
Diseases of the skin and subcutaneous tissue	206	202	158	2,051	931	1,220	10.0	4.6	7.7
Musculoskeletal system and connective tissue	1,140	1,247	1,282	5,331	5,300	4,619	4.7	4.3	3.6
Congenital anomalies	175	147	106	957	539	594	5.5	3.7	5.6
Conditions originating in the perinatal period	-	-	3	-	-	9	-	-	3.0
Injury & poisoning	2,321	2,378	2,091	14,186	14,941	13,585	6.1	6.3	6.5
Symptoms, signs & ill-defined conditions	1,195	1,295	826	12,936	10,912	9,543	10.8	8.4	11.6
Residual codes, unclassified, all Ecodes	44	88	47	176	226	153	4.0	2.6	3.3
Total	20,833	20,583	18,734	131,698	106,655	107,077	6.3	5.2	5.7

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

Table I-4

**2015 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	10	493	373	126	118	132	297	876	673	1,549
Central Vermont Medical Center	26	915	1,093	340	318	357	880	2,034	1,895	3,929
Copley Hospital	5	363	427	174	174	167	371	795	886	1,681
Gifford Medical Center	6	289	314	120	143	136	434	609	833	1,442
Grace Cottage Hospital	-	7	13	10	16	13	66	20	105	125
Mt. Ascutney Hospital and Health Center	-	39	211	117	123	146	417	250	803	1,053
North Country Hospital	18	363	283	135	181	152	497	664	965	1,629
Northeastern Vermont Regional Hospital	18	336	286	108	130	103	273	640	614	1,254
Northwestern Medical Center	17	685	650	216	223	198	601	1,352	1,238	2,590
Porter Medical Center	4	478	307	113	105	148	332	789	698	1,487
Rutland Regional Medical Center	100	1,335	1,840	565	580	477	1,208	3,275	2,830	6,105
Southwestern Vermont Medical Center	17	730	725	298	350	310	991	1,472	1,949	3,421
Springfield Hospital	3	501	497	181	135	140	467	1,001	923	1,924
University of Vermont Medical Center	842	4,840	5,437	1,967	1,584	1,341	2,723	11,119	7,615	18,734
Total	1,066	11,374	12,456	4,470	4,180	3,820	9,557	24,896	22,027	46,923

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

Table I-4
2015 Vermont Hospital Inpatient Discharges, including VT Residents and Non-residents
Summary Statistics for Vermont Hospitals
Discharges, Patient Days and Average Length of Stay by Age Group

<u>Vermont Hospitals</u>	<u>Patient Days by Age Group</u>									<u>Total</u>
	<u>Under 15</u>	<u>15-44</u>	<u>45-64</u>	<u>65-69</u>	<u>70-74</u>	<u>75-79</u>	<u>80+</u>	<u>0-64</u>	<u>65+</u>	
Brattleboro Memorial Hospital	22	1,278	1,280	386	431	502	1,122	2,580	2,441	5,021
Central Vermont Medical Center	59	3,514	5,257	1,812	1,730	1,734	4,176	8,830	9,452	18,282
Copley Hospital	10	729	1,069	465	519	509	1,338	1,808	2,831	4,639
Gifford Medical Center	8	804	1,226	537	653	649	2,182	2,038	4,021	6,059
Grace Cottage Hospital	-	17	38	36	44	35	199	55	314	369
Mt. Ascutney Hospital and Health Center	-	264	2,212	927	1,137	1,255	3,500	2,476	6,819	9,295
North Country Hospital	49	926	934	445	653	513	1,877	1,909	3,488	5,397
Northeastern Vermont Regional Hospital	27	867	1,083	374	481	438	1,027	1,977	2,320	4,297
Northwestern Medical Center	34	1,576	1,948	850	765	698	2,217	3,558	4,530	8,088
Porter Medical Center	7	1,135	968	367	339	567	1,298	2,110	2,571	4,681
Rutland Regional Medical Center	239	6,634	9,705	2,235	2,744	1,972	5,522	16,578	12,473	29,051
Southwestern Vermont Medical Center	38	1,909	2,914	1,100	1,368	1,221	3,955	4,861	7,644	12,505
Springfield Hospital	6	2,099	2,429	721	586	542	2,011	4,534	3,860	8,394
University of Vermont Medical Center	4,015	24,952	33,791	12,494	9,412	7,676	14,737	62,758	44,319	107,077
Total	4,514	46,704	64,854	22,749	20,862	18,311	45,161	116,072	107,083	223,155

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

Table I-4

**2015 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**

Average Length of Stay by Age Group

<u>Vermont Hospitals</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	2.2	2.6	3.4	3.1	3.7	3.8	3.8	2.9	3.6	3.2
Central Vermont Medical Center	2.3	3.8	4.8	5.3	5.4	4.9	4.7	4.3	5.0	4.7
Copley Hospital	2.0	2.0	2.5	2.7	3.0	3.0	3.6	2.3	3.2	2.8
Gifford Medical Center	1.3	2.8	3.9	4.5	4.6	4.8	5.0	3.3	4.8	4.2
Grace Cottage Hospital	0.0	2.4	2.9	3.6	2.8	2.7	3.0	2.8	3.0	3.0
Mt. Ascutney Hospital and Health Center	0.0	6.8	10.5	7.9	9.2	8.6	8.4	9.9	8.5	8.8
North Country Hospital	2.7	2.6	3.3	3.3	3.6	3.4	3.8	2.9	3.6	3.3
Northeastern Vermont Regional Hospital	1.5	2.6	3.8	3.5	3.7	4.3	3.8	3.1	3.8	3.4
Northwestern Medical Center	2.0	2.3	3.0	3.9	3.4	3.5	3.7	2.6	3.7	3.1
Porter Medical Center	1.8	2.4	3.2	3.2	3.2	3.8	3.9	2.7	3.7	3.1
Rutland Regional Medical Center	2.4	5.0	5.3	4.0	4.7	4.1	4.6	5.1	4.4	4.8
Southwestern Vermont Medical Center	2.2	2.6	4.0	3.7	3.9	3.9	4.0	3.3	3.9	3.7
Springfield Hospital	2.0	4.2	4.9	4.0	4.3	3.9	4.3	4.5	4.2	4.4
University of Vermont Medical Center	4.8	5.2	6.2	6.4	5.9	5.7	5.4	5.6	5.8	5.7
Total	4.2	4.1	5.2	5.1	5.0	4.8	4.7	4.7	4.9	4.8

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

**Table I-5
2015 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	743	48.0%	340	21.9%	5	0.3%	10	0.6%	417	26.9%	23	1.5%	11	0.7%	1,549	3.3%
Central Vermont Medical Center	2,286	58.2%	779	19.8%	29	0.7%	15	0.4%	797	20.3%	23	0.6%	-	0.0%	3,929	8.4%
Copley Hospital	917	54.6%	258	15.3%	10	0.6%	10	0.6%	465	27.7%	21	1.2%	-	0.0%	1,681	3.6%
Gifford Medical Center	915	63.5%	232	16.1%	6	0.4%	1	0.1%	269	18.7%	19	1.3%	-	0.0%	1,442	3.1%
Grace Cottage Hospital	99	79.2%	10	8.0%	-	0.0%	-	0.0%	14	11.2%	2	1.6%	-	0.0%	125	0.3%
Mt. Ascutney Hospital and Health Center	827	78.5%	71	6.7%	-	0.0%	4	0.4%	147	14.0%	4	0.4%	-	0.0%	1,053	2.2%
North Country Hospital	1,052	64.6%	320	19.6%	5	0.3%	5	0.3%	241	14.8%	6	0.4%	-	0.0%	1,629	3.5%
Northeastern Vermont Regional Hospital	629	50.2%	281	22.4%	6	0.5%	4	0.3%	320	25.5%	14	1.1%	-	0.0%	1,254	2.7%
Northwestern Medical Center	1,310	50.6%	536	20.7%	13	0.5%	15	0.6%	689	26.6%	21	0.8%	6	0.2%	2,590	5.5%
Porter Medical Center	777	52.3%	228	15.3%	9	0.6%	2	0.1%	451	30.3%	14	0.9%	6	0.4%	1,487	3.2%
Rutland Regional Medical Center	3,470	56.8%	1,297	21.2%	25	0.4%	18	0.3%	1,223	20.0%	71	1.2%	1	0.0%	6,105	13.0%
Southwestern Vermont Medical Center	1,966	57.5%	526	15.4%	36	1.1%	15	0.4%	858	25.1%	20	0.6%	-	0.0%	3,421	7.3%
Springfield Hospital	1,098	57.1%	447	23.2%	5	0.3%	1	0.1%	314	16.3%	58	3.0%	1	0.1%	1,924	4.1%
University of Vermont Medical Center	7,733	41.3%	3,072	16.4%	248	1.3%	104	0.6%	7,087	37.8%	128	0.7%	362	1.9%	18,734	39.9%
Total	23,822	50.8%	8,397	17.9%	397	0.8%	204	0.4%	13,292	28.3%	424	0.9%	387	0.8%	46,923	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

2015 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	1,706	66.5%	293	11.4%	20	0.8%	1	0.0%	498	19.4%	15	0.6%	31	1.2%	2,564	5.5%
Neoplasms	887	44.0%	215	10.7%	34	1.7%	-	0.0%	856	42.5%	13	0.6%	10	0.5%	2,015	4.3%
Endocrine, nutritional, metabolic, immunity	755	45.4%	432	26.0%	14	0.8%	1	0.1%	411	24.7%	22	1.3%	29	1.7%	1,664	3.5%
Diseases of the blood & blood-forming organs	290	60.4%	49	10.2%	2	0.4%	-	0.0%	128	26.7%	1	0.2%	10	2.1%	480	1.0%
Mental disorders	1,072	36.8%	1,187	40.8%	7	0.2%	1	0.0%	570	19.6%	72	2.5%	2	0.1%	2,911	6.2%
Diseases of the nervous system and sense organs	580	52.0%	214	19.2%	9	0.8%	5	0.4%	284	25.5%	11	1.0%	12	1.1%	1,115	2.4%
Diseases of the circulatory system	5,138	68.4%	562	7.5%	64	0.9%	6	0.1%	1,585	21.1%	65	0.9%	87	1.2%	7,507	16.0%
Diseases of the respiratory system	3,721	69.9%	733	13.8%	31	0.6%	1	0.0%	753	14.1%	36	0.7%	52	1.0%	5,327	11.4%
Diseases of the digestive system	2,410	51.5%	726	15.5%	42	0.9%	5	0.1%	1,399	29.9%	65	1.4%	37	0.8%	4,684	10.0%
Diseases of the genitourinary system	1,238	66.4%	232	12.4%	10	0.5%	2	0.1%	347	18.6%	13	0.7%	22	1.2%	1,864	4.0%
Pregnancy, childbirth, and the puerperium	88	1.5%	2,389	41.7%	83	1.4%	-	0.0%	3,133	54.7%	31	0.5%	3	0.1%	5,727	12.2%
Diseases of the skin and subcutaneous tissue	464	55.5%	165	19.7%	3	0.4%	11	1.3%	177	21.2%	13	1.6%	3	0.4%	836	1.8%
Musculoskeletal system and connective tissue	1,949	51.3%	368	9.7%	30	0.8%	72	1.9%	1,358	35.8%	14	0.4%	6	0.2%	3,797	8.1%
Congenital anomalies	19	16.0%	27	22.7%	2	1.7%	2	1.7%	68	57.1%	-	0.0%	1	0.8%	119	0.3%
Conditions originating in the perinatal period	-	0.0%	1	33.3%	-	0.0%	-	0.0%	2	66.7%	-	0.0%	-	0.0%	3	0.0%
Injury & poisoning	2,215	51.6%	587	13.7%	36	0.8%	90	2.1%	1,254	29.2%	41	1.0%	67	1.6%	4,290	9.1%
Symptoms, signs & ill-defined conditions	1,199	63.7%	199	10.6%	9	0.5%	7	0.4%	441	23.4%	11	0.6%	15	0.8%	1,881	4.0%
Residual codes, unclassified, all Ecodes	91	65.5%	18	12.9%	1	0.7%	-	0.0%	28	20.1%	1	0.7%	-	0.0%	139	0.3%
Total	23,822	50.8%	8,397	17.9%	397	0.8%	204	0.4%	13,292	28.3%	424	0.9%	387	0.8%	46,923	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
2015 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	1,231	\$22,022,804	318	\$5,462,582	1,549	\$27,485,386
Central Vermont Medical Center	3,846	\$77,476,455	83	\$1,387,479	3,929	\$78,863,934
Copley Hospital	1,629	\$30,132,413	52	\$1,142,159	1,681	\$31,274,572
Gifford Medical Center	1,425	\$29,624,842	17	\$445,891	1,442	\$30,070,733
Grace Cottage Hospital	117	\$1,189,483	8	\$81,078	125	\$1,270,561
Mt. Ascutney Hospital and Health Center	767	\$15,704,416	286	\$5,815,328	1,053	\$21,519,744
North Country Hospital	1,588	\$29,265,369	41	\$762,252	1,629	\$30,027,620
Northeastern Vermont Regional Hospital	1,200	\$31,377,808	54	\$1,230,076	1,254	\$32,607,884
Northwestern Medical Center	2,558	\$42,801,022	32	\$503,343	2,590	\$43,304,365
Porter Medical Center	1,372	\$28,820,216	115	\$2,549,008	1,487	\$31,369,224
Rutland Regional Medical Center	5,663	\$154,852,385	442	\$11,519,299	6,105	\$166,371,684
Southwestern Vermont Medical Center	2,511	\$47,299,459	910	\$15,868,880	3,421	\$63,168,340
Springfield Hospital	1,634	\$28,025,036	290	\$5,572,942	1,924	\$33,597,978
University of Vermont Medical Center	15,244	\$568,334,501	3,490	\$183,471,875	18,734	\$751,806,376
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
Total for 2011	40,124	\$824,089,888	6,341	\$187,597,337	46,465	\$1,011,687,225
Total for 2010	40,728	\$807,712,818	6,366	\$179,218,150	47,094	\$986,930,968

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
2015 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	811	6.1%	12,488	93.9%	13,299	5.0%
Central Vermont Medical Center	3,218	12.9%	21,723	87.1%	24,941	9.3%
Copley Hospital	885	6.8%	12,185	93.2%	13,070	4.9%
Gifford Medical Center	950	12.6%	6,611	87.4%	7,561	2.8%
Grace Cottage Hospital	104	3.7%	2,731	96.3%	2,835	1.1%
Mt. Ascutney Hospital and Health Center	275	5.9%	4,387	94.1%	4,662	1.7%
North Country Hospital	1,017	6.1%	15,665	93.9%	16,682	6.2%
Northeastern Vermont Regional Hospital	496	3.6%	13,110	96.4%	13,606	5.1%
Northwestern Medical Center	1,735	6.9%	23,583	93.1%	25,318	9.4%
Porter Medical Center	888	5.8%	14,522	94.2%	15,410	5.7%
Rutland Regional Medical Center	4,471	13.4%	28,923	86.6%	33,394	12.5%
Southwestern Vermont Medical Center	2,620	11.2%	20,700	88.8%	23,320	8.7%
Springfield Hospital	1,421	8.3%	15,611	91.7%	17,032	6.4%
University of Vermont Medical Center	8,766	15.4%	48,117	84.6%	56,883	21.2%
Total	27,657	10.3%	240,356	89.7%	268,013	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

2015 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents

Vermont Hospitals by Setting: Comparison of 2011 through 2015

Inpatient Discharges Originating in ED	2011	2012	2013	2014	2015
Brattleboro Memorial Hospital	949	920	855	823	811
Central Vermont Medical Center	2,370	2,332	2,536	2,813	3,218
Copley Hospital	272	256	316	322	885
Gifford Medical Center	590	608	624	755	950
Grace Cottage Hospital	20	27	27	10	104
Mt. Ascutney Hospital and Health Center	66	94	175	109	275
North Country Hospital	337	253	288	291	1,017
Northeastern Vermont Regional Hospital	318	369	298	291	496
Northwestern Medical Center	1,233	1,293	1,434	1,511	1,735
Porter Medical Center	285	643	948	944	888
Rutland Regional Medical Center	4,535	4,488	4,471	4,149	4,471
Southwestern Vermont Medical Center	2,906	3,044	3,016	2,674	2,620
Springfield Hospital	1,546	1,086	463	379	1,421
University of Vermont Medical Center	8,858	9,566	9,397	8,171	8,766
Total	24,285	24,979	24,848	23,242	27,657
ED Visits Not Admitted	2011	2012	2013	2014	2015
Brattleboro Memorial Hospital	11,836	12,077	11,822	12,796	12,488
Central Vermont Medical Center	26,017	26,766	25,362	22,574	21,723
Copley Hospital	12,807	13,091	13,040	12,966	12,185
Gifford Medical Center	6,372	6,604	6,311	6,464	6,611
Grace Cottage Hospital	2,797	3,091	2,792	2,612	2,731
Mt. Ascutney Hospital and Health Center	4,159	5,338	5,261	4,832	4,387
North Country Hospital	15,377	15,274	14,601	14,903	15,665
Northeastern Vermont Regional Hospital	14,307	13,848	13,572	12,534	13,110
Northwestern Medical Center	26,460	26,340	24,605	23,202	23,583
Porter Medical Center	14,675	14,638	13,783	14,039	14,522
Rutland Regional Medical Center	25,190	27,865	28,729	28,975	28,923
Southwestern Vermont Medical Center	20,897	20,977	19,771	20,698	20,700
Springfield Hospital	14,480	15,777	16,141	15,564	15,611
University of Vermont Medical Center	49,273	48,138	46,776	47,683	48,117
Total	244,647	249,824	242,566	239,842	240,356

Table E-2
2015 Vermont Hospital Emergency Department Visits, including VT Residents and Non-Residents
Vermont Hospitals by Setting: Comparison of 2011 through 2015

All ED Visits, Including Those Admitted	2011	2012	2013	2014	2015
Brattleboro Memorial Hospital	12,785	12,997	12,677	13,619	13,299
Central Vermont Medical Center	28,387	29,098	27,898	25,387	24,941
Copley Hospital	13,079	13,347	13,356	13,288	13,070
Gifford Medical Center	6,962	7,212	6,935	7,219	7,561
Grace Cottage Hospital	2,817	3,118	2,819	2,622	2,835
Mt. Ascutney Hospital and Health Center	4,225	5,432	5,436	4,941	4,662
North Country Hospital	15,714	15,527	14,889	15,194	16,682
Northeastern Vermont Regional Hospital	14,625	14,217	13,870	12,825	13,606
Northwestern Medical Center	27,693	27,633	26,039	24,713	25,318
Porter Medical Center	14,960	15,281	14,731	14,983	15,410
Rutland Regional Medical Center	29,725	32,353	33,200	33,124	33,394
Southwestern Vermont Medical Center	23,803	24,021	22,787	23,372	23,320
Springfield Hospital	16,026	16,863	16,604	15,943	17,032
University of Vermont Medical Center	58,131	57,704	56,173	55,854	56,883
Total	268,932	274,803	267,414	263,084	268,013

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

2015 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	2,256	36.3%	3,953	63.7%	6,209	2.3%
Neoplasms	661	62.1%	403	37.9%	1,064	0.4%
Endocrine, nutritional, metabolic, immunity	1,106	24.8%	3,354	75.2%	4,460	1.7%
Diseases of the blood & blood-forming organs	398	42.4%	541	57.6%	939	0.4%
Mental disorders	1,997	15.1%	11,260	84.9%	13,257	4.9%
Diseases of the nervous system and sense organs	788	3.8%	19,773	96.2%	20,561	7.7%
Diseases of the circulatory system	5,122	23.3%	16,875	76.7%	21,997	8.2%
Diseases of the respiratory system	4,738	14.2%	28,634	85.8%	33,372	12.5%
Diseases of the digestive system	3,764	16.6%	18,919	83.4%	22,683	8.5%
Diseases of the genitourinary system	1,468	10.4%	12,628	89.6%	14,096	5.3%
Pregnancy, childbirth, and the puerperium	134	4.4%	2,905	95.6%	3,039	1.1%
Diseases of the skin and subcutaneous tissue	688	7.8%	8,133	92.2%	8,821	3.3%
Musculoskeletal system and connective tissue	631	3.5%	17,307	96.5%	17,938	6.7%
Congenital anomalies	30	40.5%	44	59.5%	74	0.0%
Conditions originating in the perinatal period	3	1.0%	306	99.0%	309	0.1%
Injury & poisoning	3,265	4.7%	65,476	95.3%	68,741	25.6%
Symptoms, signs & ill-defined conditions	505	1.8%	27,674	98.2%	28,179	10.5%
Residual codes, unclassified, all Ecodes	103	4.5%	2,171	95.5%	2,274	0.8%
Total	27,657	10.3%	240,356	89.7%	268,013	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
2015 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	66	44.9%	81	55.1%	147	1.1%
Neoplasms	13	37.1%	22	62.9%	35	0.3%
Endocrine, nutritional, metabolic, immunity	45	19.3%	188	80.7%	233	1.8%
Diseases of the blood & blood-forming organs	14	28.6%	35	71.4%	49	0.4%
Mental disorders	18	2.1%	856	97.9%	874	6.6%
Diseases of the nervous system and sense organs	10	1.0%	1,001	99.0%	1,011	7.6%
Diseases of the circulatory system	158	14.3%	949	85.7%	1,107	8.3%
Diseases of the respiratory system	162	11.4%	1,257	88.6%	1,419	10.7%
Diseases of the digestive system	126	12.0%	923	88.0%	1,049	7.9%
Diseases of the genitourinary system	42	7.3%	530	92.7%	572	4.3%
Pregnancy, childbirth, and the puerperium	7	6.1%	107	93.9%	114	0.9%
Diseases of the skin and subcutaneous tissue	32	6.9%	430	93.1%	462	3.5%
Musculoskeletal system and connective tissue	13	1.7%	750	98.3%	763	5.7%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	19	100.0%	19	0.1%
Injury & poisoning	94	2.5%	3,640	97.5%	3,734	28.1%
Symptoms, signs & ill-defined conditions	9	0.6%	1,567	99.4%	1,576	11.9%
Residual codes, unclassified, all Ecodes	2	1.5%	132	98.5%	134	1.0%
Total	811	6.1%	12,488	93.9%	13,299	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

2015 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	333	44.9%	409	55.1%	742	3.0%
Neoplasms	66	71.0%	27	29.0%	93	0.4%
Endocrine, nutritional, metabolic, immunity	105	27.3%	280	72.7%	385	1.5%
Diseases of the blood & blood-forming organs	59	54.6%	49	45.4%	108	0.4%
Mental disorders	379	24.6%	1,164	75.4%	1,543	6.2%
Diseases of the nervous system and sense organs	74	4.1%	1,712	95.9%	1,786	7.2%
Diseases of the circulatory system	584	25.7%	1,684	74.3%	2,268	9.1%
Diseases of the respiratory system	564	18.5%	2,488	81.5%	3,052	12.2%
Diseases of the digestive system	443	19.3%	1,852	80.7%	2,295	9.2%
Diseases of the genitourinary system	141	10.7%	1,180	89.3%	1,321	5.3%
Pregnancy, childbirth, and the puerperium	13	6.7%	182	93.3%	195	0.8%
Diseases of the skin and subcutaneous tissue	96	11.8%	719	88.2%	815	3.3%
Musculoskeletal system and connective tissue	80	4.5%	1,683	95.5%	1,763	7.1%
Congenital anomalies	2	40.0%	3	60.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	27	100.0%	27	0.1%
Injury & poisoning	241	4.2%	5,502	95.8%	5,743	23.0%
Symptoms, signs & ill-defined conditions	34	1.3%	2,582	98.7%	2,616	10.5%
Residual codes, unclassified, all Ecodes	4	2.2%	180	97.8%	184	0.7%
Total	3,218	12.9%	21,723	87.1%	24,941	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
2015 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	32	8.8%	331	91.2%	363	2.8%
Neoplasms	14	51.9%	13	48.1%	27	0.2%
Endocrine, nutritional, metabolic, immunity	35	19.3%	146	80.7%	181	1.4%
Diseases of the blood & blood-forming organs	3	20.0%	12	80.0%	15	0.1%
Mental disorders	16	3.8%	407	96.2%	423	3.2%
Diseases of the nervous system and sense organs	23	2.4%	942	97.6%	965	7.4%
Diseases of the circulatory system	145	18.6%	636	81.4%	781	6.0%
Diseases of the respiratory system	184	10.4%	1,585	89.6%	1,769	13.5%
Diseases of the digestive system	165	15.1%	929	84.9%	1,094	8.4%
Diseases of the genitourinary system	60	8.5%	645	91.5%	705	5.4%
Pregnancy, childbirth, and the puerperium	4	3.8%	102	96.2%	106	0.8%
Diseases of the skin and subcutaneous tissue	25	6.6%	355	93.4%	380	2.9%
Musculoskeletal system and connective tissue	23	2.3%	966	97.7%	989	7.6%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	7	100.0%	7	0.1%
Injury & poisoning	108	2.7%	3,946	97.3%	4,054	31.0%
Symptoms, signs & ill-defined conditions	33	3.0%	1,072	97.0%	1,105	8.5%
Residual codes, unclassified, all Ecodes	15	14.4%	89	85.6%	104	0.8%
Total	885	6.8%	12,185	93.2%	13,070	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

2015 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	7.9%	163	92.1%	177	2.3%
Neoplasms	18	64.3%	10	35.7%	28	0.4%
Endocrine, nutritional, metabolic, immunity	46	29.9%	108	70.1%	154	2.0%
Diseases of the blood & blood-forming organs	19	61.3%	12	38.7%	31	0.4%
Mental disorders	85	27.0%	230	73.0%	315	4.2%
Diseases of the nervous system and sense organs	41	6.3%	613	93.7%	654	8.6%
Diseases of the circulatory system	203	34.6%	383	65.4%	586	7.8%
Diseases of the respiratory system	161	16.6%	808	83.4%	969	12.8%
Diseases of the digestive system	112	17.0%	546	83.0%	658	8.7%
Diseases of the genitourinary system	79	20.7%	302	79.3%	381	5.0%
Pregnancy, childbirth, and the puerperium	3	3.8%	76	96.2%	79	1.0%
Diseases of the skin and subcutaneous tissue	31	14.8%	179	85.2%	210	2.8%
Musculoskeletal system and connective tissue	25	4.4%	540	95.6%	565	7.5%
Congenital anomalies	2	100.0%	0	0.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	16	100.0%	16	0.2%
Injury & poisoning	76	3.7%	1,980	96.3%	2,056	27.2%
Symptoms, signs & ill-defined conditions	27	4.4%	588	95.6%	615	8.1%
Residual codes, unclassified, all Ecodes	8	12.3%	57	87.7%	65	0.9%
Total	950	12.6%	6,611	87.4%	7,561	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
2015 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	5	8.8%	52	91.2%	57	2.0%
Neoplasms	1	14.3%	6	85.7%	7	0.2%
Endocrine, nutritional, metabolic, immunity	2	3.5%	55	96.5%	57	2.0%
Diseases of the blood & blood-forming organs	2	16.7%	10	83.3%	12	0.4%
Mental disorders	0	0.0%	96	100.0%	96	3.4%
Diseases of the nervous system and sense organs	8	3.6%	214	96.4%	222	7.8%
Diseases of the circulatory system	15	7.1%	196	92.9%	211	7.4%
Diseases of the respiratory system	27	7.7%	325	92.3%	352	12.4%
Diseases of the digestive system	10	4.6%	208	95.4%	218	7.7%
Diseases of the genitourinary system	7	6.1%	107	93.9%	114	4.0%
Pregnancy, childbirth, and the puerperium	0	0.0%	9	100.0%	9	0.3%
Diseases of the skin and subcutaneous tissue	5	5.3%	89	94.7%	94	3.3%
Musculoskeletal system and connective tissue	3	1.6%	187	98.4%	190	6.7%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	4	100.0%	4	0.1%
Injury & poisoning	13	1.5%	861	98.5%	874	30.8%
Symptoms, signs & ill-defined conditions	3	1.0%	283	99.0%	286	10.1%
Residual codes, unclassified, all Ecodes	3	9.4%	29	90.6%	32	1.1%
Total	104	3.7%	2,731	96.3%	2,835	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

2015 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	4	3.4%	115	96.6%	119	2.6%
Neoplasms	3	21.4%	11	78.6%	14	0.3%
Endocrine, nutritional, metabolic, immunity	13	18.3%	58	81.7%	71	1.5%
Diseases of the blood & blood-forming organs	5	45.5%	6	54.5%	11	0.2%
Mental disorders	2	1.3%	158	98.8%	160	3.4%
Diseases of the nervous system and sense organs	3	1.0%	289	99.0%	292	6.3%
Diseases of the circulatory system	56	14.3%	336	85.7%	392	8.4%
Diseases of the respiratory system	57	10.0%	515	90.0%	572	12.3%
Diseases of the digestive system	53	13.0%	356	87.0%	409	8.8%
Diseases of the genitourinary system	26	10.0%	234	90.0%	260	5.6%
Pregnancy, childbirth, and the puerperium	0	0.0%	14	100.0%	14	0.3%
Diseases of the skin and subcutaneous tissue	16	6.6%	225	93.4%	241	5.2%
Musculoskeletal system and connective tissue	4	1.3%	310	98.7%	314	6.7%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	0	0.0%	0	0.0%
Injury & poisoning	13	1.0%	1,339	99.0%	1,352	29.0%
Symptoms, signs & ill-defined conditions	18	4.5%	381	95.5%	399	8.6%
Residual codes, unclassified, all Ecodes	2	4.8%	40	95.2%	42	0.9%
Total	275	5.9%	4,387	94.1%	4,662	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
2015 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	85	20.9%	321	79.1%	406	2.4%
Neoplasms	11	40.7%	16	59.3%	27	0.2%
Endocrine, nutritional, metabolic, immunity	54	22.5%	186	77.5%	240	1.4%
Diseases of the blood & blood-forming organs	19	29.7%	45	70.3%	64	0.4%
Mental disorders	21	4.1%	488	95.9%	509	3.1%
Diseases of the nervous system and sense organs	23	1.7%	1,306	98.3%	1,329	8.0%
Diseases of the circulatory system	185	17.9%	847	82.1%	1,032	6.2%
Diseases of the respiratory system	241	8.6%	2,550	91.4%	2,791	16.7%
Diseases of the digestive system	174	12.8%	1,183	87.2%	1,357	8.1%
Diseases of the genitourinary system	56	6.3%	827	93.7%	883	5.3%
Pregnancy, childbirth, and the puerperium	9	4.5%	190	95.5%	199	1.2%
Diseases of the skin and subcutaneous tissue	16	2.6%	611	97.4%	627	3.8%
Musculoskeletal system and connective tissue	21	1.7%	1,217	98.3%	1,238	7.4%
Congenital anomalies	0	0.0%	1	100.0%	1	0.0%
Conditions originating in the perinatal period	0	0.0%	9	100.0%	9	0.1%
Injury & poisoning	76	1.8%	4,141	98.2%	4,217	25.3%
Symptoms, signs & ill-defined conditions	17	1.1%	1,589	98.9%	1,606	9.6%
Residual codes, unclassified, all Ecodes	9	6.1%	138	93.9%	147	0.9%
Total	1,017	6.1%	15,665	93.9%	16,682	100.0%

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Table E-3

2015 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	14	8.5%	151	91.5%	165	1.2%
Neoplasms	6	16.2%	31	83.8%	37	0.3%
Endocrine, nutritional, metabolic, immunity	27	11.5%	208	88.5%	235	1.7%
Diseases of the blood & blood-forming organs	13	35.1%	24	64.9%	37	0.3%
Mental disorders	30	6.3%	445	93.7%	475	3.5%
Diseases of the nervous system and sense organs	10	0.9%	1,117	99.1%	1,127	8.3%
Diseases of the circulatory system	87	10.6%	731	89.4%	818	6.0%
Diseases of the respiratory system	76	3.1%	2,358	96.9%	2,434	17.9%
Diseases of the digestive system	86	7.6%	1,041	92.4%	1,127	8.3%
Diseases of the genitourinary system	30	3.8%	764	96.2%	794	5.8%
Pregnancy, childbirth, and the puerperium	6	6.8%	82	93.2%	88	0.6%
Diseases of the skin and subcutaneous tissue	16	3.0%	514	97.0%	530	3.9%
Musculoskeletal system and connective tissue	8	0.9%	915	99.1%	923	6.8%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	0	0.0%	0	0.0%
Injury & poisoning	62	1.7%	3,586	98.3%	3,648	26.8%
Symptoms, signs & ill-defined conditions	18	1.7%	1,024	98.3%	1,042	7.7%
Residual codes, unclassified, all Ecodes	7	5.6%	117	94.4%	124	0.9%
Total	496	3.6%	13,110	96.4%	13,606	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
2015 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	113	27.2%	303	72.8%	416	1.6%
Neoplasms	21	42.0%	29	58.0%	50	0.2%
Endocrine, nutritional, metabolic, immunity	67	20.1%	266	79.9%	333	1.3%
Diseases of the blood & blood-forming organs	18	29.0%	44	71.0%	62	0.2%
Mental disorders	58	8.3%	642	91.7%	700	2.8%
Diseases of the nervous system and sense organs	41	2.1%	1,959	98.0%	2,000	7.9%
Diseases of the circulatory system	292	15.8%	1,555	84.2%	1,847	7.3%
Diseases of the respiratory system	387	11.3%	3,047	88.7%	3,434	13.6%
Diseases of the digestive system	317	13.3%	2,064	86.7%	2,381	9.4%
Diseases of the genitourinary system	142	9.6%	1,335	90.4%	1,477	5.8%
Pregnancy, childbirth, and the puerperium	4	1.1%	363	98.9%	367	1.4%
Diseases of the skin and subcutaneous tissue	52	5.3%	938	94.7%	990	3.9%
Musculoskeletal system and connective tissue	43	2.2%	1,896	97.8%	1,939	7.7%
Congenital anomalies	0	0.0%	2	100.0%	2	0.0%
Conditions originating in the perinatal period	0	0.0%	33	100.0%	33	0.1%
Injury & poisoning	153	2.5%	5,956	97.5%	6,109	24.1%
Symptoms, signs & ill-defined conditions	25	0.8%	2,986	99.2%	3,011	11.9%
Residual codes, unclassified, all Ecodes	2	1.2%	165	98.8%	167	0.7%
Total	1,735	6.9%	23,583	93.1%	25,318	100.0%

ED visits include all hospital records that originated in the ED and did not result in hospital admission.
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Table E-3

2015 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	81	21.8%	290	78.2%	371	2.4%
Neoplasms	4	28.6%	10	71.4%	14	0.1%
Endocrine, nutritional, metabolic, immunity	49	22.0%	174	78.0%	223	1.4%
Diseases of the blood & blood-forming organs	8	25.0%	24	75.0%	32	0.2%
Mental disorders	31	5.9%	496	94.1%	527	3.4%
Diseases of the nervous system and sense organs	38	3.2%	1,161	96.8%	1,199	7.8%
Diseases of the circulatory system	124	12.9%	837	87.1%	961	6.2%
Diseases of the respiratory system	215	10.1%	1,919	89.9%	2,134	13.8%
Diseases of the digestive system	144	11.2%	1,142	88.8%	1,286	8.3%
Diseases of the genitourinary system	40	4.6%	831	95.4%	871	5.7%
Pregnancy, childbirth, and the puerperium	12	13.8%	75	86.2%	87	0.6%
Diseases of the skin and subcutaneous tissue	31	5.7%	516	94.3%	547	3.5%
Musculoskeletal system and connective tissue	19	1.9%	999	98.1%	1,018	6.6%
Congenital anomalies	0	0.0%	0	0.0%	0	0.0%
Conditions originating in the perinatal period	0	0.0%	17	100.0%	17	0.1%
Injury & poisoning	74	1.7%	4,299	98.3%	4,373	28.4%
Symptoms, signs & ill-defined conditions	16	1.0%	1,594	99.0%	1,610	10.4%
Residual codes, unclassified, all Ecodes	2	1.4%	138	98.6%	140	0.9%
Total	888	5.8%	14,522	94.2%	15,410	100.0%

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Table E-3
2015 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	387	46.7%	442	53.3%	829	2.5%
Neoplasms	122	71.8%	48	28.2%	170	0.5%
Endocrine, nutritional, metabolic, immunity	125	24.9%	377	75.1%	502	1.5%
Diseases of the blood & blood-forming organs	56	49.1%	58	50.9%	114	0.3%
Mental disorders	674	30.9%	1,508	69.1%	2,182	6.5%
Diseases of the nervous system and sense organs	84	3.0%	2,684	97.0%	2,768	8.3%
Diseases of the circulatory system	755	26.6%	2,085	73.4%	2,840	8.5%
Diseases of the respiratory system	633	17.0%	3,091	83.0%	3,724	11.2%
Diseases of the digestive system	544	18.8%	2,349	81.2%	2,893	8.7%
Diseases of the genitourinary system	321	18.0%	1,460	82.0%	1,781	5.3%
Pregnancy, childbirth, and the puerperium	20	4.8%	401	95.2%	421	1.3%
Diseases of the skin and subcutaneous tissue	142	12.1%	1,031	87.9%	1,173	3.5%
Musculoskeletal system and connective tissue	92	4.0%	2,211	96.0%	2,303	6.9%
Congenital anomalies	1	14.3%	6	85.7%	7	0.0%
Conditions originating in the perinatal period	0	0.0%	43	100.0%	43	0.1%
Injury & poisoning	452	5.5%	7,726	94.5%	8,178	24.5%
Symptoms, signs & ill-defined conditions	60	1.9%	3,116	98.1%	3,176	9.5%
Residual codes, unclassified, all Ecodes	3	1.0%	287	99.0%	290	0.9%
Total	4,471	13.4%	28,923	86.6%	33,394	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

**2015 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	278	46.4%	321	53.6%	599	2.6%
Neoplasms	52	59.8%	35	40.2%	87	0.4%
Endocrine, nutritional, metabolic, immunity	117	26.6%	323	73.4%	440	1.9%
Diseases of the blood & blood-forming organs	36	33.0%	73	67.0%	109	0.5%
Mental disorders	58	5.4%	1,025	94.6%	1,083	4.6%
Diseases of the nervous system and sense organs	42	2.4%	1,686	97.6%	1,728	7.4%
Diseases of the circulatory system	411	18.1%	1,860	81.9%	2,271	9.7%
Diseases of the respiratory system	659	24.3%	2,053	75.7%	2,712	11.6%
Diseases of the digestive system	342	18.7%	1,485	81.3%	1,827	7.8%
Diseases of the genitourinary system	136	11.3%	1,063	88.7%	1,199	5.1%
Pregnancy, childbirth, and the puerperium	8	1.9%	410	98.1%	418	1.8%
Diseases of the skin and subcutaneous tissue	77	12.5%	538	87.5%	615	2.6%
Musculoskeletal system and connective tissue	60	4.3%	1,343	95.7%	1,403	6.0%
Congenital anomalies	0	0.0%	5	100.0%	5	0.0%
Conditions originating in the perinatal period	0	0.0%	19	100.0%	19	0.1%
Injury & poisoning	297	4.9%	5,707	95.1%	6,004	25.7%
Symptoms, signs & ill-defined conditions	37	1.4%	2,564	98.6%	2,601	11.2%
Residual codes, unclassified, all Ecodes	10	5.0%	190	95.0%	200	0.9%
Total	2,620	11.2%	20,700	88.8%	23,320	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
2015 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	33	9.4%	319	90.6%	352	2.1%
Neoplasms	8	14.5%	47	85.5%	55	0.3%
Endocrine, nutritional, metabolic, immunity	50	20.5%	194	79.5%	244	1.4%
Diseases of the blood & blood-forming organs	10	25.0%	30	75.0%	40	0.2%
Mental disorders	196	23.5%	638	76.5%	834	4.9%
Diseases of the nervous system and sense organs	23	2.3%	996	97.7%	1,019	6.0%
Diseases of the circulatory system	228	17.4%	1,086	82.6%	1,314	7.7%
Diseases of the respiratory system	368	15.8%	1,962	84.2%	2,330	13.7%
Diseases of the digestive system	195	12.7%	1,342	87.3%	1,537	9.0%
Diseases of the genitourinary system	63	8.0%	727	92.0%	790	4.6%
Pregnancy, childbirth, and the puerperium	12	4.8%	239	95.2%	251	1.5%
Diseases of the skin and subcutaneous tissue	27	4.4%	589	95.6%	616	3.6%
Musculoskeletal system and connective tissue	37	4.6%	773	95.4%	810	4.8%
Congenital anomalies	1	33.3%	2	66.7%	3	0.0%
Conditions originating in the perinatal period	0	0.0%	21	100.0%	21	0.1%
Injury & poisoning	115	2.5%	4,480	97.5%	4,595	27.0%
Symptoms, signs & ill-defined conditions	45	2.2%	2,013	97.8%	2,058	12.1%
Residual codes, unclassified, all Ecodes	10	6.1%	153	93.9%	163	1.0%
Total	1,421	8.3%	15,611	91.7%	17,032	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

2015 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	811	55.3%	655	44.7%	1,466	2.6%
Neoplasms	322	76.7%	98	23.3%	420	0.7%
Endocrine, nutritional, metabolic, immunity	371	31.9%	791	68.1%	1,162	2.0%
Diseases of the blood & blood-forming organs	136	53.3%	119	46.7%	255	0.4%
Mental disorders	429	12.1%	3,107	87.9%	3,536	6.2%
Diseases of the nervous system and sense organs	368	8.2%	4,093	91.8%	4,461	7.8%
Diseases of the circulatory system	1,879	33.7%	3,690	66.3%	5,569	9.8%
Diseases of the respiratory system	1,004	17.7%	4,676	82.3%	5,680	10.0%
Diseases of the digestive system	1,053	23.1%	3,499	76.9%	4,552	8.0%
Diseases of the genitourinary system	325	11.0%	2,623	89.0%	2,948	5.2%
Pregnancy, childbirth, and the puerperium	36	5.2%	655	94.8%	691	1.2%
Diseases of the skin and subcutaneous tissue	122	8.0%	1,399	92.0%	1,521	2.7%
Musculoskeletal system and connective tissue	203	5.5%	3,517	94.5%	3,720	6.5%
Congenital anomalies	24	54.5%	20	45.5%	44	0.1%
Conditions originating in the perinatal period	3	3.2%	91	96.8%	94	0.2%
Injury & poisoning	1,491	10.8%	12,313	89.2%	13,804	24.3%
Symptoms, signs & ill-defined conditions	163	2.5%	6,315	97.5%	6,478	11.4%
Residual codes, unclassified, all Ecodes	26	5.4%	456	94.6%	482	0.8%
Total	8,766	15.4%	48,117	84.6%	56,883	100.0%

ED visits include all hospital records that originated in the ED and did not result in hospital admission. Inpatient discharges originating in the ED are reported in the Vermont Hospital Inpatient tables.

Table E-4
2015 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	1,512	5,577	3,155	523	449	363	909	10,244	2,244	12,488
Central Vermont Medical Center	2,944	9,566	5,192	1,089	787	642	1,503	17,702	4,021	21,723
Copley Hospital	2,033	5,602	2,648	536	405	369	592	10,283	1,902	12,185
Gifford Medical Center	1,026	2,934	1,501	330	261	182	377	5,461	1,150	6,611
Grace Cottage Hospital	401	917	673	167	156	118	299	1,991	740	2,731
Mt. Ascutney Hospital and Health Center	515	1,551	1,189	285	222	204	421	3,255	1,132	4,387
North Country Hospital	2,428	6,709	3,491	754	697	524	1,062	12,628	3,037	15,665
Northeastern Vermont Regional Hospital	1,890	5,884	2,974	666	525	360	811	10,748	2,362	13,110
Northwestern Medical Center	3,551	10,625	5,478	1,040	831	674	1,384	19,654	3,929	23,583
Porter Medical Center	2,070	6,586	3,329	640	536	496	865	11,985	2,537	14,522
Rutland Regional Medical Center	3,747	12,995	7,177	1,244	1,037	892	1,831	23,919	5,004	28,923
Southwestern Vermont Medical Center	2,753	8,568	4,930	1,019	899	740	1,791	16,251	4,449	20,700
Springfield Hospital	2,330	6,462	3,804	786	641	508	1,080	12,596	3,015	15,611
University of Vermont Medical Center	6,057	22,540	11,549	2,124	1,611	1,284	2,952	40,146	7,971	48,117
Total	33,257	106,516	57,090	11,203	9,057	7,356	15,877	196,863	43,493	240,356

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

2015 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	3,177	25.4%	4,854	38.9%	60	0.5%	274	2.2%	3,401	27.2%	719	5.8%	3	0.0%	12,488	5.2%
Central Vermont Medical Center	5,546	25.5%	8,023	36.9%	279	1.3%	435	2.0%	6,656	30.6%	784	3.6%	-	0.0%	21,723	9.0%
Copley Hospital	2,470	20.3%	4,784	39.3%	132	1.1%	233	1.9%	3,872	31.8%	687	5.6%	7	0.1%	12,185	5.1%
Gifford Medical Center	1,478	22.4%	2,586	39.1%	64	1.0%	174	2.6%	1,951	29.5%	358	5.4%	-	0.0%	6,611	2.8%
Grace Cottage Hospital	775	28.4%	822	30.1%	15	0.5%	51	1.9%	890	32.6%	177	6.5%	1	0.0%	2,731	1.1%
Mt. Ascutney Hospital and Health Center	1,411	32.2%	1,200	27.4%	-	0.0%	123	2.8%	1,313	29.9%	321	7.3%	19	0.4%	4,387	1.8%
North Country Hospital	4,089	26.1%	7,159	45.7%	120	0.8%	386	2.5%	3,430	21.9%	481	3.1%	-	0.0%	15,665	6.5%
Northeastern Vermont Regional Hospital	3,012	23.0%	5,300	40.4%	52	0.4%	229	1.7%	3,940	30.1%	577	4.4%	-	0.0%	13,110	5.5%
Northwestern Medical Center	5,501	23.3%	9,727	41.2%	285	1.2%	386	1.6%	6,672	28.3%	993	4.2%	19	0.1%	23,583	9.8%
Porter Medical Center	3,307	22.8%	4,579	31.5%	73	0.5%	308	2.1%	5,289	36.4%	765	5.3%	201	1.4%	14,522	6.0%
Rutland Regional Medical Center	7,692	26.6%	11,313	39.1%	173	0.6%	772	2.7%	7,682	26.6%	1,288	4.5%	3	0.0%	28,923	12.0%
Southwestern Vermont Medical Center	5,686	27.5%	6,637	32.1%	147	0.7%	402	1.9%	7,002	33.8%	826	4.0%	-	0.0%	20,700	8.6%
Springfield Hospital	4,295	27.5%	5,863	37.6%	73	0.5%	221	1.4%	3,935	25.2%	1,221	7.8%	3	0.0%	15,611	6.5%
University of Vermont Medical Center	9,535	19.8%	14,949	31.1%	776	1.6%	847	1.8%	19,586	40.7%	2,202	4.6%	222	0.5%	48,117	20.0%
Total	57,974	24.1%	87,796	36.5%	2,249	0.9%	4,841	2.0%	75,619	31.5%	11,399	4.7%	478	0.2%	240,356	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
2015 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	652	16.5%	1,804	45.6%	34	0.9%	17	0.4%	1,235	31.2%	206	5.2%	5	0.1%	3,953	1.6%
Neoplasms	169	41.9%	90	22.3%	6	1.5%	-	0.0%	116	28.8%	22	5.5%	-	0.0%	403	0.2%
Endocrine, nutritional, metabolic, immunity	1,435	42.8%	866	25.8%	38	1.1%	10	0.3%	879	26.2%	103	3.1%	23	0.7%	3,354	1.4%
Diseases of the blood & blood-forming organs	270	49.9%	111	20.5%	5	0.9%	-	0.0%	140	25.9%	13	2.4%	2	0.4%	541	0.2%
Mental disorders	2,703	24.0%	5,343	47.5%	86	0.8%	27	0.2%	2,526	22.4%	565	5.0%	10	0.1%	11,260	4.7%
Diseases of the nervous system and sense organs	4,544	23.0%	7,982	40.4%	212	1.1%	132	0.7%	6,100	30.9%	781	3.9%	22	0.1%	19,773	8.2%
Diseases of the circulatory system	7,323	43.4%	3,200	19.0%	139	0.8%	47	0.3%	5,619	33.3%	503	3.0%	44	0.3%	16,875	7.0%
Diseases of the respiratory system	6,761	23.6%	12,052	42.1%	269	0.9%	39	0.1%	8,157	28.5%	1,318	4.6%	38	0.1%	28,634	11.9%
Diseases of the digestive system	4,399	23.3%	7,755	41.0%	149	0.8%	30	0.2%	5,405	28.6%	1,157	6.1%	24	0.1%	18,919	7.9%
Diseases of the genitourinary system	3,410	27.0%	4,156	32.9%	140	1.1%	13	0.1%	4,344	34.4%	545	4.3%	20	0.2%	12,628	5.3%
Pregnancy, childbirth, and the puerperium	95	3.3%	1,809	62.3%	38	1.3%	13	0.4%	862	29.7%	88	3.0%	-	0.0%	2,905	1.2%
Diseases of the skin and subcutaneous tissue	1,980	24.3%	3,191	39.2%	58	0.7%	77	0.9%	2,308	28.4%	500	6.1%	19	0.2%	8,133	3.4%
Musculoskeletal system and connective tissue	5,142	29.7%	5,861	33.9%	134	0.8%	531	3.1%	4,888	28.2%	715	4.1%	36	0.2%	17,307	7.2%
Congenital anomalies	3	6.8%	20	45.5%	-	0.0%	-	0.0%	21	47.7%	-	0.0%	-	0.0%	44	0.0%
Conditions originating in the perinatal period	-	0.0%	183	59.8%	3	1.0%	-	0.0%	71	23.2%	48	15.7%	1	0.3%	306	0.1%
Injury & poisoning	12,183	18.6%	21,750	33.2%	631	1.0%	3,681	5.6%	23,503	35.9%	3,537	5.4%	191	0.3%	65,476	27.2%
Symptoms, signs & ill-defined conditions	5,971	21.6%	11,044	39.9%	287	1.0%	134	0.5%	8,976	32.4%	1,224	4.4%	38	0.1%	27,674	11.5%
Residual codes, unclassified, all Ecodes	934	43.0%	579	26.7%	20	0.9%	90	4.1%	469	21.6%	74	3.4%	5	0.2%	2,171	0.9%
Total	57,974	24.1%	87,796	36.5%	2,249	0.9%	4,841	2.0%	75,619	31.5%	11,399	4.7%	478	0.2%	240,356	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

**2015 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	9,681	\$21,907,576	2,807	\$6,596,578	12,488	\$28,504,154
Central Vermont Medical Center	20,824	\$46,520,927	899	\$1,999,540	21,723	\$48,520,467
Copley Hospital	11,004	\$9,612,749	1,181	\$994,882	12,185	\$10,607,631
Gifford Medical Center	6,364	\$9,595,309	247	\$362,096	6,611	\$9,957,405
Grace Cottage Hospital	2,353	\$3,764,314	378	\$565,367	2,731	\$4,329,681
Mt. Ascutney Hospital and Health Center	3,418	\$5,295,675	969	\$1,701,327	4,387	\$6,997,002
North Country Hospital	14,796	\$27,250,146	869	\$1,669,127	15,665	\$28,919,273
Northeastern Vermont Regional Hospital	12,315	\$19,460,821	795	\$1,263,506	13,110	\$20,724,327
Northwestern Medical Center	23,078	\$34,077,850	505	\$750,694	23,583	\$34,828,544
Porter Medical Center	12,929	\$20,284,234	1,593	\$2,013,814	14,522	\$22,298,049
Rutland Regional Medical Center	26,269	\$47,726,005	2,654	\$5,245,444	28,923	\$52,971,449
Southwestern Vermont Medical Center	15,166	\$33,221,123	5,534	\$12,558,428	20,700	\$45,779,551
Springfield Hospital	12,845	\$29,444,683	2,766	\$6,561,819	15,611	\$36,006,502
University of Vermont Medical Center	44,822	\$130,588,603	3,295	\$11,115,501	48,117	\$141,704,103
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
Total for 2011	220,622	\$322,541,685	24,025	\$36,962,098	244,647	\$359,503,783
Total for 2010	216,914	\$312,661,204	23,415	\$35,173,398	240,329	\$347,834,603

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
2015 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	3,658	86.3%	579	13.7%	4,237	3.3%
Central Vermont Medical Center	8,744	99.4%	56	0.6%	8,800	6.9%
Copley Hospital	4,405	99.2%	37	0.8%	4,442	3.5%
Gifford Medical Center	1,817	98.5%	28	1.5%	1,845	1.4%
Grace Cottage Hospital	-	0%	-	0%	-	0.0%
Mt. Ascutney Hospital and Health Center	1,098	60.1%	729	39.9%	1,827	1.4%
North Country Hospital	3,933	99.2%	30	0.8%	3,963	3.1%
Northeastern Vermont Regional Hospital	3,432	91.3%	329	8.7%	3,761	2.9%
Northwestern Medical Center	6,140	99.2%	50	0.8%	6,190	4.8%
Porter Medical Center	3,105	89.1%	381	10.9%	3,486	2.7%
Rutland Regional Medical Center	14,896	94.9%	799	5.1%	15,695	12.2%
Southwestern Vermont Medical Center	6,986	76.2%	2,182	23.8%	9,168	7.1%
Springfield Hospital	2,099	84.2%	394	15.8%	2,493	1.9%
University of Vermont Medical Center	55,821	89.3%	6,706	10.7%	62,527	48.7%
Total	116,134	90.4%	12,300	9.6%	128,434	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

**2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Vermont Hospitals by Data Year: Comparison of 2011 through 2015**

Vermont Hospital	2011	2012	2013	2014	2015
Brattleboro Memorial Hospital	3,322	3,376	3,990	5,801	4,237
Central Vermont Medical Center	7,738	7,759	7,653	8,984	8,800
Copley Hospital	3,840	4,078	5,579	7,814	4,442
Gifford Medical Center	2,505	2,455	2,513	2,377	1,845
Grace Cottage Hospital	2	-	-	3	-
Mt. Ascutney Hospital and Health Center	1,034	1,226	1,768	1,863	1,827
North Country Hospital	3,851	3,617	3,976	4,662	3,963
Northeastern Vermont Regional Hospital	3,327	2,863	2,585	4,057	3,761
Northwestern Medical Center	6,097	6,423	5,681	6,212	6,190
Porter Medical Center	3,350	3,301	3,340	3,493	3,486
Rutland Regional Medical Center	8,953	8,525	10,356	14,576	15,695
Southwestern Vermont Medical Center	7,050	6,820	6,053	9,136	9,168
Springfield Hospital	2,302	2,385	2,254	2,635	2,493
University of Vermont Medical Center	46,752	48,006	46,514	59,298	62,527
Total	100,123	100,834	102,262	130,911	128,434

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
2015 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	20	15	4	2	-	2	8	7	19	2	60	18	3	714	874
Neoplasms	319	555	177	134	-	182	600	529	298	152	726	1,537	185	7,830	13,224
Endocrine, nutritional, metabolic, immunity	198	32	174	14	-	7	31	28	26	5	71	37	5	1,705	2,333
Diseases of the blood & blood-forming organs	15	81	28	7	-	18	64	17	67	18	140	41	12	237	745
Mental disorders	9	10	-	2	-	1	18	17	11	4	41	27	8	174	322
Diseases of the nervous system and sense organs	505	863	213	302	-	336	507	640	553	615	2,431	92	220	7,837	15,114
Diseases of the circulatory system	178	203	505	29	-	10	73	44	73	43	408	223	14	2,755	4,558
Diseases of the respiratory system	224	591	89	117	-	77	519	264	391	167	1,939	1,325	242	5,112	11,057
Diseases of the digestive system	490	964	238	185	-	320	567	296	1,192	395	1,354	857	412	5,172	12,442
Diseases of the genitourinary system	299	473	193	166	-	26	166	63	378	221	798	761	211	7,053	10,808
Pregnancy, childbirth, and the puerperium	258	588	430	218	-	-	323	245	147	137	336	325	155	1,873	5,035
Diseases of the skin and subcutaneous tissue	300	85	56	30	-	12	27	197	272	25	216	84	17	3,492	4,813
Musculoskeletal system and connective tissue	690	928	909	155	-	99	391	546	854	161	4,012	652	99	8,499	17,995
Congenital anomalies	12	10	2	5	-	1	5	5	8	8	13	14	4	342	429
Conditions originating in the perinatal period	-	43	-	-	-	-	9	11	19	36	-	11	12	28	169
Injury & poisoning	399	401	403	146	-	38	141	172	306	213	722	303	166	2,420	5,830
Symptoms, signs & ill-defined conditions	303	2,946	1,018	329	-	685	441	677	1,562	1,273	2,367	2,235	719	6,407	20,962
Residual codes, unclassified, all Ecodes	18	12	3	4	-	13	73	3	14	11	61	626	9	877	1,724
Total	4,237	8,800	4,442	1,845	-	1,827	3,963	3,761	6,190	3,486	15,695	9,168	2,493	62,527	128,434

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

**2015 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	242	659	358	93	-	80	301	405	591	97	1,912	393	66	8,261	13,458
Operations on the endocrine system	1	9	-	-	-	1	-	8	-	2	41	16	1	190	269
Operations on the eye	362	643	96	227	-	307	362	514	377	425	376	7	145	3,886	7,727
Operations on the ear	47	49	-	-	-	9	23	17	1	85	1,242	37	17	1,444	2,971
Operations on the nose, mouth, and pharynx	13	128	2	11	-	32	159	54	4	141	854	88	30	1,659	3,175
Operations on the respiratory system	253	603	96	146	-	67	487	258	415	83	1,816	1,772	224	5,956	12,176
Operations on the cardiovascular system	256	359	108	42	-	14	371	435	188	73	775	486	42	4,122	7,271
Operations on the hemic and lymphatic system	9	11	3	5	-	4	13	12	7	3	45	17	1	125	255
Operations on the digestive system	867	3,175	1,022	564	-	1,174	1,275	1,008	2,851	1,704	3,405	3,192	1,213	15,270	36,720
Operations on the urinary system	154	293	126	103	-	8	28	15	119	105	717	154	84	3,368	5,274
Operations on the male genital organs	22	84	18	22	-	1	32	11	34	75	127	39	40	695	1,200
Operations on the female genital organs	248	1,066	116	63	-	4	182	66	336	103	276	1,889	118	1,751	6,218
Obstetrical procedures	214	502	402	205	-	-	296	239	38	114	228	126	135	1,407	3,906
Operations on the musculoskeletal system	919	813	799	272	-	59	337	416	731	365	3,214	538	255	5,591	14,309
Operations on the integumentary system	630	406	1,296	92	-	67	97	303	498	111	667	414	122	8,802	13,505
Total	4,237	8,800	4,442	1,845	-	1,827	3,963	3,761	6,190	3,486	15,695	9,168	2,493	62,527	128,434

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
2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2011 - 2015

CCS High Level Procedure Group CCS Single Level Procedure Group	2011	2012	2013	2014	2015
1 Operations on the nervous system					
1 Incision & excision of CNS	2	-	1	1	-
2 Insertion, replacem, rem of extracranial ventricular shunt	1	5	3	17	16
3 Laminectomy, excision intervertebral disc	394	453	452	401	443
4 Diagnostic spinal tap	136	138	200	124	37
5 Insert cath, spinal stimulator, inject into spinal canal	5,247	4,253	3,360	2,932	4,523
6 Decompression peripheral nerve	1,692	1,772	1,705	1,617	1,585
7 Other diagnostic nervous system procedures	12	15	15	1,813	2,676
8 Other non-OR or closed therapeutic nerv syst procs	1,189	653	473	1,435	2,413
9 Other OR therapeutic nervous system procedures	1,095	1,078	1,111	1,388	1,765
Total	9,768	8,367	7,320	9,728	13,458
2 Operations on the endocrine system					
10 Thyroidectomy, partial or complete	160	195	192	163	160
11 Diagnostic endocrine procedures	381	320	365	227	28
12 Other therapeutic endocrine procedures	69	61	66	97	81
Total	610	576	623	487	269
3 Operations on the eye					
13 Corneal transplant	28	20	20	11	10
14 Glaucoma procedures	210	194	195	180	307
15 Lens & cataract procedures	5,186	4,607	4,670	4,422	4,320
16 Repair of retinal tear, detachment	281	331	263	299	246
17 Destruction of lesion of retina & choroid	244	186	179	122	109
18 Diagnostic procedures on eye	22	21	21	32	37
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	549	375	397	295	391
20 Other intraocular therapeutic procedures	2,054	2,053	2,032	1,947	2,195
21 Other extraocular muscle & orbit therapeutic procedures	163	150	125	114	112
Total	8,737	7,937	7,902	7,422	7,727
4 Operations on the ear					
22 Tympanoplasty	105	93	125	98	69
23 Myringotomy	1,086	1,024	951	817	911
24 Mastoidectomy	27	24	27	29	19
25 Diagnostic procedures on ear	9	16	34	24	1
26 Other therapeutic ear procedures	250	316	475	1,682	1,971
Total	1,477	1,473	1,612	2,650	2,971

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-5

**2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2011 - 2015**

CCS High Level Procedure Group	2011	2012	2013	2014	2015
CCS Single Level Procedure Group					
5 Operations on the nose, mouth, and pharynx					
27 Control of epistaxis	59	85	111	147	145
28 Plastic procedures on nose	265	272	237	238	198
29 Dental procedures	712	628	710	568	55
30 Tonsillectomy and/or adenoidectomy	762	830	759	691	629
31 Diagnostic procedures on nose, mouth & pharynx	351	588	1,065	1,664	1,751
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	324	380	461	210	26
33 Other OR therapeutic procedures on nose, mouth & pharynx	400	478	516	457	371
Total	2,873	3,261	3,859	3,975	3,175
6 Operations on the respiratory system					
34 Tracheostomy, temporary & permanent	-	1	-	-	2
35 Tracheoscopy & laryngoscopy with biopsy	601	922	1,728	1,773	1,747
36 Lobectomy or pneumonectomy	8	10	10	-	-
37 Diagnostic bronchoscopy & biopsy of bronchus	502	538	507	416	295
38 Other diagnostic procedures on lung & bronchus	17	1	2	7,800	9,740
39 Incision of pleura, thoracentesis, chest drainage	167	191	216	229	227
40 Other diagnostic proc of respiratory tract & mediastinum	29	18	31	31	13
41 Other non-OR therapeutic procedures on respiratory system	12	19	24	31	11
42 Other OR therapeutic procedures on respiratory system	83	126	101	129	141
Total	1,419	1,826	2,619	10,409	12,176
7 Operations on the cardiovascular system					
43 Heart valve procedures	1	-	2	2	-
45 Percutaneous transluminal coronary angioplasty (PTCA)	274	336	202	43	23
47 Diagnostic cardiac catheterization, coronary arteriography	823	795	622	1,144	1,081
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	327	332	420	433	483
49 Other OR heart procedures	30	30	98	116	7
51 Endarterectomy, vessel of head & neck	2	-	-	1	-
52 Aortic resection, replacement or anastomosis	-	-	1	-	1
53 Varicose vein stripping, lower limb	149	110	92	165	205
54 Other vascular catheterization, not heart	209	823	680	975	1,098
55 Peripheral vascular bypass	-	-	3	-	-
56 Other vascular bypass & shunt, not heart	1	-	2	5	6
57 Creat, revis, rem of arteriof fistula or cannula for dialys	94	126	112	128	148
58 Hemodialysis	2	2	3	5	12

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-5
2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2011 - 2015

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2011	2012	2013	2014	2015
59 Other OR procedures on vessels of head & neck	8	12	15	54	97
60 Embolectomy & endarterectomy of lower limbs	-	1	-	1	-
61 Other OR procedures on vessels other than head & neck	661	721	702	624	397
62 Other diagnostic cardiovascular procedures	227	228	206	848	677
63 Other non-OR therapeutic cardiovascular procedures	82	64	81	2,729	3,036
Total	2,890	3,580	3,241	7,273	7,271
8 Operations on the hemic and lymphatic system					
64 Bone marrow transplant	12	9	7	23	38
65 Bone marrow biopsy	221	203	250	182	41
66 Procedures on spleen	-	1	2	5	1
67 Other therap procedures, hemic & lymphatic system	354	305	301	296	175
Total	587	518	560	506	255
9 Operations on the digestive system					
68 Injection or ligation of esophageal varices	-	-	-	26	47
69 Esophageal dilatation	419	431	430	466	484
70 Upper gastrointestinal endoscopy, biopsy	6,006	5,589	5,243	5,128	5,109
71 Gastrostomy, temporary & permanent	62	65	58	153	152
72 Colostomy, temporary & permanent	-	-	-	-	2
73 Ileostomy & other enterostomy	-	3	9	19	14
75 Small bowel resection	-	-	-	3	1
76 Colonoscopy & biopsy	11,825	12,290	12,698	17,936	23,156
77 Proctoscopy & anorectal biopsy	537	523	387	548	615
78 Colorectal resection	2	4	3	8	17
79 Local excision of large intestine lesion (not endoscopic)	1	-	2	1	2
80 Appendectomy	48	53	57	44	57
81 Hemorrhoid procedures	235	238	187	204	226
82 Endoscopic retrograde cannulation of pancreas (ERCP)	38	33	33	95	146
83 Biopsy of liver	236	278	242	97	2
84 Cholecystectomy & common duct exploration	1,250	1,302	1,193	1,090	1,052
85 Inguinal & femoral hernia repair	1,318	1,216	1,294	1,174	1,118
86 Other hernia repair	882	787	875	886	865
87 Laparoscopy	105	74	88	78	86
88 Abdominal paracentesis	265	222	254	281	258
89 Exploratory laparotomy	-	1	2	-	4

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-5

**2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2011 - 2015**

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2011	2012	2013	2014	2015
90 Excision, lysis peritoneal adhesions	41	27	36	22	2
91 Peritoneal dialysis	-	-	-	2,806	2,683
92 Other bowel diagnostic procedures	42	31	31	12	-
93 Other non-OR upper GI therapeutic procedures	193	275	342	277	36
94 Other OR upper GI therapeutic procedures	130	91	57	46	33
95 Other non-OR lower GI therapeutic procedures	9,433	9,971	10,308	5,539	58
96 Other OR lower GI therapeutic procedures	263	263	256	248	173
97 Other gastrointestinal diagnostic procedures	94	100	93	258	220
98 Other non-OR gastrointestinal therapeutic procedures	157	179	162	88	15
99 Other OR gastrointestinal therapeutic procedures	79	90	98	117	87
Total	33,661	34,136	34,438	37,650	36,720
10 Operations on the urinary system					
100 Endoscopy & endoscopic biopsy of the urinary tract	1,461	1,787	2,087	2,100	1,667
101 Transurethral excision, drainage, rem urinary obstruction	833	833	851	776	655
102 Ureteral catheterization	279	255	270	300	269
103 Nephrotomy & nephrostomy	15	38	23	19	10
104 Nephrectomy, partial or complete	1	-	1	3	2
106 Genitourinary incontinence procedures	374	238	185	150	159
107 Extracorporeal lithotripsy, urinary	7	8	7	587	780
108 Indwelling catheter	300	211	145	352	518
109 Procedures on the urethra	193	183	163	160	191
110 Other diagnostic procedures of urinary tract	133	124	142	76	9
111 Other non-OR therapeutic procedures of urinary tract	236	186	177	605	739
112 Other OR therapeutic procedures of urinary tract	66	49	75	174	275
Total	3,898	3,912	4,126	5,302	5,274
11 Operations on the male genital organs					
113 Transurethral resection of prostate (TURP)	185	204	140	155	87
114 Open prostatectomy	14	1	6	11	1
115 Circumcision	256	256	228	250	249
116 Diagnostic procedures, male genital	260	267	262	274	223
117 Other non-OR therapeutic procedures, male genital	211	121	124	156	164
118 Other OR therapeutic procedures, male genital	371	328	337	405	476
Total	1,297	1,177	1,097	1,251	1,200

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-5
2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2011 - 2015

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2011	2012	2013	2014	2015
12 Operations on the female genital organs					
119 Oophorectomy, unilateral & bilateral	204	217	194	206	303
120 Other operations on ovary	227	232	183	99	2
121 Ligation of fallopian tubes	304	293	324	280	216
123 Other operations on fallopian tubes	27	36	39	35	28
124 Hysterectomy, abdominal & vaginal	452	573	553	569	554
125 Other excision of cervix & uterus	683	616	630	516	363
126 Abortion (termination of pregnancy)	23	25	32	35	33
127 D&C, aspiration after delivery or abortion	196	230	241	250	210
128 Diagnostic dilatation & curettage (D&C)	622	619	540	338	45
129 Repair cystocele & rectocele, oblit of vaginal vault	136	101	73	87	98
130 Other diagnostic procedures, female organs	227	268	342	3,129	3,478
131 Other non-OR therapeutic procedures, female organs	62	65	124	552	572
132 Other OR therapeutic procedures, female organs	324	336	293	319	316
Total	3,487	3,611	3,568	6,415	6,218
13 Obstetrical procedures					
122 Removal of ectopic pregnancy	9	4	7	6	5
134 Cesarean section	1	1	-	1	-
135 Forceps, vacuum & breech delivery	-	-	-	3	2
137 Other procedures to assist delivery	46	39	26	50	43
138 Diagnostic amniocentesis	6	6	2	-	-
139 Fetal monitoring	4,451	4,552	3,048	5,509	3,833
140 Repair of current obstetric laceration	1	1	2	4	1
141 Other therapeutic obstetrical procedures	19	18	14	16	22
Total	4,533	4,621	3,099	5,589	3,906
14 Operations on the musculoskeletal system					
142 Partial excision bone	362	404	346	423	444
143 Bunionectomy or repair of toe deformities	622	631	706	542	505
144 Treatment, facial fracture or dislocation	61	65	64	58	76
145 Treatment, fracture or disloc of radius & ulna	435	429	445	452	416
146 Treatment, fracture or disloc of hip & femur	57	59	63	33	17
147 Treatment, fracture or disloc of lower extremity	637	618	649	632	460
148 Other fracture & dislocation procedure	587	612	603	542	538
149 Arthroscopy	642	624	548	385	395

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-5

**2015 Vermont Hospital Outpatient Visits, including VT Residents and Non-Residents
Clinical Classifications Software (CCS) Single and High Level Procedure Groups by Data Year: 2011 - 2015**

CCS High Level Procedure Group					
CCS Single Level Procedure Group	2011	2012	2013	2014	2015
150 Division of joint capsule, ligament or cartilage	82	93	72	89	93
151 Excision of semilunar cartilage of knee	1,496	1,505	1,364	1,307	1,284
152 Arthroplasty knee	308	289	260	120	47
153 Hip replacement, total & partial	2	-	2	23	45
154 Arthroplasty other than hip or knee	728	603	499	360	274
155 Arthrocentesis	219	183	203	2,568	3,932
156 Injections & aspirations of muscles, tendons, etc.	464	445	490	1,253	1,284
157 Amputation of lower extremity	105	90	140	141	134
158 Spinal fusion	165	132	133	73	31
159 Other diagnostic procedures on musculoskeletal system	121	110	126	157	87
160 Other therapeutic procedures on muscles & tendons	2,646	2,794	2,693	2,567	2,450
161 Other OR therapeutic procedures on bone	257	267	256	487	650
162 Other OR therapeutic procedures on joints	957	1,025	1,041	1,018	1,051
163 Other non-OR therapeutic procedures on musc system	3,576	4,337	6,187	4,662	16
164 Other OR therapeutic procedures on musc system	71	69	105	74	80
Total	14,600	15,384	16,995	17,966	14,309
15 Operations on the integumentary system					
165 Breast biopsy & other diagnostic procedures on breast	1,483	1,425	1,269	1,243	1,056
166 Lumpectomy, quadrantectomy of breast	744	781	728	626	502
167 Mastectomy	63	81	86	81	64
168 Incision & drainage, skin & subcutaneous tissue	164	169	176	268	280
169 Debridement of wound, infection or burn	173	135	665	1,477	665
170 Excision of skin lesion	3,483	3,503	3,638	4,366	4,968
171 Suture of skin & subcutaneous tissue	152	231	334	619	972
172 Skin graft	64	67	69	277	493
173 Other diagnostic proc on skin & subcutaneous tissue	1,311	1,380	1,435	784	96
174 Other non-OR therapeutic procedures on skin & breast	1,982	2,021	2,005	3,897	4,011
175 Other OR therapeutic procedures on skin & breast	667	662	798	650	398
Total	10,286	10,455	11,203	14,288	13,505

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-6
2015 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	71	810	1,582	493	472	281	528	2,463	1,774	4,237
Central Vermont Medical Center	155	2,167	3,589	1,052	716	563	558	5,911	2,889	8,800
Copley Hospital	26	1,001	1,605	439	434	305	632	2,632	1,810	4,442
Gifford Medical Center	48	495	741	200	159	94	108	1,284	561	1,845
Grace Cottage Hospital	-	-	-	-	-	-	-	-	-	-
Mt. Ascutney Hospital and Health Center	19	162	816	320	253	158	99	997	830	1,827
North Country Hospital	84	870	1,412	517	510	246	324	2,366	1,597	3,963
Northeastern Vermont Regional Hospital	125	658	1,628	445	361	274	270	2,411	1,350	3,761
Northwestern Medical Center	65	1,287	2,749	714	569	430	376	4,101	2,089	6,190
Porter Medical Center	204	522	1,491	464	366	241	198	2,217	1,269	3,486
Rutland Regional Medical Center	199	2,410	5,617	2,143	2,000	1,471	1,855	8,226	7,469	15,695
Southwestern Vermont Medical Center	103	2,123	3,800	1,035	867	584	656	6,026	3,142	9,168
Springfield Hospital	46	565	1,099	286	233	147	117	1,710	783	2,493
University of Vermont Medical Center	3,254	11,469	21,500	7,861	6,398	4,866	7,179	36,223	26,304	62,527
Total	4,399	24,539	47,629	15,969	13,338	9,660	12,900	76,567	51,867	128,434

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

**2015 Vermont Hospital Outpatient 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Col%
Brattleboro Memorial Hospital	2,044	48.2%	936	22.1%	26	0.6%	54	1.3%	1,164	27.5%	9	0.2%	4	0.1%	4,237	3.3%
Central Vermont Medical Center	3,025	34.4%	1,462	16.6%	126	1.4%	84	1.0%	4,066	46.2%	37	0.4%	-	0.0%	8,800	6.9%
Copley Hospital	928	20.9%	695	15.6%	17	0.4%	121	2.7%	1,476	33.2%	1,205	27.1%	-	0.0%	4,442	3.5%
Gifford Medical Center	582	31.5%	390	21.1%	19	1.0%	27	1.5%	801	43.4%	26	1.4%	-	0.0%	1,845	1.4%
Grace Cottage Hospital	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Mt. Ascutney Hospital and Health Center	812	44.4%	156	8.5%	-	0.0%	9	0.5%	841	46.0%	6	0.3%	3	0.2%	1,827	1.4%
North Country Hospital	1,709	43.1%	880	22.2%	23	0.6%	57	1.4%	1,287	32.5%	7	0.2%	-	0.0%	3,963	3.1%
Northeastern Vermont Regional Hospital	1,492	39.7%	800	21.3%	13	0.3%	47	1.2%	1,385	36.8%	24	0.6%	-	0.0%	3,761	2.9%
Northwestern Medical Center	2,160	34.9%	1,077	17.4%	82	1.3%	72	1.2%	2,773	44.8%	24	0.4%	2	0.0%	6,190	4.8%
Porter Medical Center	1,270	36.4%	445	12.8%	10	0.3%	18	0.5%	1,709	49.0%	23	0.7%	11	0.3%	3,486	2.7%
Rutland Regional Medical Center	8,503	54.2%	1,928	12.3%	123	0.8%	197	1.3%	4,852	30.9%	92	0.6%	-	0.0%	15,695	12.2%
Southwestern Vermont Medical Center	3,434	37.5%	1,592	17.4%	59	0.6%	58	0.6%	3,994	43.6%	31	0.3%	-	0.0%	9,168	7.1%
Springfield Hospital	896	35.9%	520	20.9%	7	0.3%	8	0.3%	1,006	40.4%	56	2.2%	-	0.0%	2,493	1.9%
University of Vermont Medical Center	26,511	42.4%	10,493	16.8%	957	1.5%	672	1.1%	20,593	32.9%	208	0.3%	3,093	4.9%	62,527	48.7%
Total	53,366	41.6%	21,374	16.6%	1,462	1.1%	1,424	1.1%	45,947	35.8%	1,748	1.4%	3,113	2.4%	128,434	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
2015 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	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%	N	Row%		N
Infectious & parasitic diseases	429	49.1%	279	31.9%	22	2.5%	-	0.0%	142	16.2%	1	0.1%	1	0.1%	874	0.7%
Neoplasms	6,999	52.9%	1,416	10.7%	154	1.2%	4	0.0%	4,608	34.8%	23	0.2%	20	0.2%	13,224	10.3%
Endocrine, nutritional, metabolic, immunity	1,147	49.2%	529	22.7%	7	0.3%	4	0.2%	458	19.6%	162	6.9%	26	1.1%	2,333	1.8%
Diseases of the blood & blood-forming organs	424	56.9%	103	13.8%	4	0.5%	1	0.1%	211	28.3%	2	0.3%	-	0.0%	745	0.6%
Mental disorders	131	40.7%	136	42.2%	2	0.6%	1	0.3%	49	15.2%	3	0.9%	-	0.0%	322	0.3%
Diseases of the nervous system and sense organs	9,397	62.2%	1,975	13.1%	165	1.1%	191	1.3%	3,322	22.0%	42	0.3%	22	0.1%	15,114	11.8%
Diseases of the circulatory system	2,211	48.5%	430	9.4%	44	1.0%	2	0.0%	1,266	27.8%	484	10.6%	121	2.7%	4,558	3.5%
Diseases of the respiratory system	5,359	48.5%	2,272	20.5%	158	1.4%	16	0.1%	3,195	28.9%	45	0.4%	12	0.1%	11,057	8.6%
Diseases of the digestive system	4,176	33.6%	2,096	16.8%	115	0.9%	72	0.6%	5,886	47.3%	83	0.7%	14	0.1%	12,442	9.7%
Diseases of the genitourinary system	3,541	32.8%	1,328	12.3%	101	0.9%	3	0.0%	3,010	27.8%	37	0.3%	2,788	25.8%	10,808	8.4%
Pregnancy, childbirth, and the puerperium	144	2.9%	2,679	53.2%	68	1.4%	2	0.0%	2,100	41.7%	42	0.8%	-	0.0%	5,035	3.9%
Diseases of the skin and subcutaneous tissue	2,894	60.1%	1,200	24.9%	72	1.5%	6	0.1%	599	12.4%	33	0.7%	9	0.2%	4,813	3.7%
Musculoskeletal system and connective tissue	8,721	48.5%	2,593	14.4%	209	1.2%	706	3.9%	5,466	30.4%	287	1.6%	13	0.1%	17,995	14.0%
Congenital anomalies	53	12.4%	165	38.5%	8	1.9%	4	0.9%	198	46.2%	1	0.2%	-	0.0%	429	0.3%
Conditions originating in the perinatal period	-	0.0%	67	39.6%	1	0.6%	-	0.0%	74	43.8%	27	16.0%	-	0.0%	169	0.1%
Injury & poisoning	1,269	21.8%	1,155	19.8%	86	1.5%	408	7.0%	2,776	47.6%	68	1.2%	68	1.2%	5,830	4.5%
Symptoms, signs & ill-defined conditions	5,945	28.4%	2,634	12.6%	226	1.1%	4	0.0%	11,775	56.2%	364	1.7%	14	0.1%	20,962	16.3%
Residual codes, unclassified, all Ecodes	526	30.5%	317	18.4%	20	1.2%	-	0.0%	812	47.1%	44	2.6%	5	0.3%	1,724	1.3%
Total	53,366	41.6%	21,374	16.6%	1,462	1.1%	1,424	1.1%	45,947	35.8%	1,748	1.4%	3,113	2.4%	128,434	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

2015 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	5,408	40.2%	2,575	19.1%	184	1.4%	617	4.6%	4,631	34.4%	35	0.3%	8	0.1%	13,458	10.5%
Operations on the endocrine system	57	21.2%	41	15.2%	1	0.4%	-	0.0%	168	62.5%	1	0.4%	1	0.4%	269	0.2%
Operations on the eye	5,991	77.5%	531	6.9%	69	0.9%	3	0.0%	1,093	14.1%	6	0.1%	34	0.4%	7,727	6.0%
Operations on the ear	1,629	54.8%	601	20.2%	26	0.9%	-	0.0%	705	23.7%	10	0.3%	-	0.0%	2,971	2.3%
Operations on the nose, mouth, and pharynx	1,128	35.5%	883	27.8%	61	1.9%	4	0.1%	1,087	34.2%	9	0.3%	3	0.1%	3,175	2.5%
Operations on the respiratory system	6,360	52.2%	2,321	19.1%	146	1.2%	15	0.1%	3,255	26.7%	61	0.5%	18	0.1%	12,176	9.5%
Operations on the cardiovascular system	3,637	50.0%	881	12.1%	72	1.0%	3	0.0%	2,314	31.8%	13	0.2%	351	4.8%	7,271	5.7%
Operations on the hemic and lymphatic system	91	35.7%	43	16.9%	8	3.1%	-	0.0%	112	43.9%	1	0.4%	-	0.0%	255	0.2%
Operations on the digestive system	10,977	29.9%	4,075	11.1%	342	0.9%	68	0.2%	18,491	50.4%	135	0.4%	2,632	7.2%	36,720	28.6%
Operations on the urinary system	3,542	67.2%	617	11.7%	57	1.1%	2	0.0%	1,031	19.5%	10	0.2%	15	0.3%	5,274	4.1%
Operations on the male genital organs	379	31.6%	277	23.1%	13	1.1%	6	0.5%	491	40.9%	34	2.8%	-	0.0%	1,200	0.9%
Operations on the female genital organs	854	13.7%	1,613	25.9%	96	1.5%	2	0.0%	3,595	57.8%	56	0.9%	2	0.0%	6,218	4.8%
Obstetrical procedures	103	2.6%	2,193	56.1%	43	1.1%	2	0.1%	1,538	39.4%	27	0.7%	-	0.0%	3,906	3.0%
Operations on the musculoskeletal system	6,160	43.0%	2,141	15.0%	162	1.1%	673	4.7%	5,069	35.4%	83	0.6%	21	0.1%	14,309	11.1%
Operations on the integumentary system	7,050	52.2%	2,582	19.1%	182	1.3%	29	0.2%	2,367	17.5%	1,267	9.4%	28	0.2%	13,505	10.5%
Total	53,366	41.6%	21,374	16.6%	1,462	1.1%	1,424	1.1%	45,947	35.8%	1,748	1.4%	3,113	2.4%	128,434	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
2015 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	-	-	-	-	-	-	-	-	-	-	-	-	-	16	16
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	5,585	\$ 5,585
3 Laminectomy, excision intervertebral disc															
N	11	8	-	-	-	-	-	-	9	-	51	49	-	315	443
Avg\$	\$ 11,733	\$ 20,059	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,914	\$ -	\$ 14,304	\$ 12,620	\$ -	\$ -	15,028	\$ 14,644
4 Diagnostic spinal tap															
N	-	12	3	6	-	-	4	-	2	-	3	-	-	7	37
Avg\$	\$ -	\$ 1,853	\$ 1,295	\$ 3,163	\$ -	\$ -	\$ 4,041	\$ -	\$ 554	\$ -	\$ 2,703	\$ -	\$ -	1,893	\$ 2,263
5 Insert cath, spinal stimulator, inject into spinal canal															
N	58	368	188	18	-	52	143	135	420	-	909	302	-	1,930	4,523
Avg\$	\$ 4,204	\$ 1,849	\$ 902	\$ 2,356	\$ -	\$ 2,283	\$ 2,622	\$ 1,697	\$ 740	\$ -	\$ 2,121	\$ 2,409	\$ -	2,226	\$ 2,017
6 Decompression peripheral nerve															
N	106	120	83	67	-	8	102	85	148	95	161	14	64	532	1,585
Avg\$	\$ 4,434	\$ 5,404	\$ 4,789	\$ 9,533	\$ -	\$ 6,281	\$ 6,684	\$ 6,212	\$ 3,597	\$ 5,505	\$ 3,769	\$ 5,371	\$ 2,859	4,565	\$ 4,898
7 Other diagnostic nervous system procedures															
N	17	6	-	-	-	2	3	-	-	-	422	-	-	2,226	2,676
Avg\$	\$ 158	\$ 10,638	\$ -	\$ -	\$ -	\$ 4,474	\$ 4,515	\$ -	\$ -	\$ -	\$ 497	\$ -	\$ -	2,074	\$ 1,837
8 Other non-OR or closed therapeutic nerv syst procs															
N	48	134	81	-	-	12	48	121	10	1	289	22	1	1,646	2,413
Avg\$	\$ 5,952	\$ 2,863	\$ 1,381	\$ -	\$ -	\$ 1,688	\$ 3,146	\$ 2,524	\$ 1,121	\$ 3,261	\$ 2,645	\$ 2,363	\$ 37	5,174	\$ 4,395
9 Other OR therapeutic nervous system procedures															
N	2	11	3	2	-	6	1	64	2	1	77	6	1	1,589	1,765
Avg\$	\$ 5,412	\$ 8,074	\$ 14,231	\$ 20,051	\$ -	\$ 4,028	\$ 9,302	\$ 3,135	\$ 4,274	\$ 7,103	\$ 6,327	\$ 8,339	\$ 5,473	7,842	\$ 7,612
10 Thyroidectomy, partial or complete															
N	-	8	-	-	-	1	-	-	-	1	13	8	-	129	160
Avg\$	\$ -	\$ 18,816	\$ -	\$ -	\$ -	\$ 20,334	\$ -	\$ -	\$ -	\$ 40,507	\$ 14,208	\$ 18,473	\$ -	14,638	\$ 15,201
11 Diagnostic endocrine procedures															
N	-	-	-	-	-	-	-	8	-	-	18	-	1	1	28
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 371	\$ -	\$ -	\$ 840	\$ -	\$ 2,225	\$ 912	\$ 758
12 Other therapeutic endocrine procedures															
N	1	1	-	-	-	-	-	-	-	1	10	8	-	60	81
Avg\$	\$ 6,781	\$ 6,443	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,581	\$ 7,320	\$ 24,809	\$ -	12,705	\$ 13,133
13 Corneal transplant															
N	-	-	-	-	-	-	-	-	3	-	-	-	-	7	10
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,858	\$ -	\$ -	\$ -	\$ -	24,307	\$ 20,872

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

**2015 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	26	-	5	-	-	8	5	-	1	27	-	3	230	307
Avg\$	\$ 9,439	\$ 2,078	\$ -	\$ 11,833	\$ -	\$ -	\$ 15,137	\$ 2,325	\$ -	\$ 6,568	\$ 1,395	\$ -	\$ 5,060	\$ 2,929	\$ 3,250
15 Lens & cataract procedures															
N	355	598	96	158	-	304	345	507	362	396	338	-	135	726	4,320
Avg\$	\$ 5,843	\$ 4,606	\$ 6,471	\$ 6,999	\$ -	\$ 6,431	\$ 6,633	\$ 9,434	\$ 5,580	\$ 4,118	\$ 5,600	\$ -	\$ 4,211	\$ 5,148	\$ 5,887
16 Repair of retinal tear, detachment															
N	-	14	-	-	-	-	-	-	-	-	-	-	-	232	246
Avg\$	\$ -	\$ 1,102	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,621	\$ 8,193
17 Destruction of lesion of retina & choroid															
N	-	1	-	-	-	-	-	-	-	-	-	-	-	108	109
Avg\$	\$ -	\$ 1,377	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,289	\$ 4,263
18 Diagnostic procedures on eye															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	37	37
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,345	\$ 1,345
19 Other therapeutic procedures on eyelids, conjunctiva, cornea															
N	4	3	-	3	-	3	6	2	7	28	11	7	7	310	391
Avg\$	\$ 4,798	\$ 6,172	\$ -	\$ 8,191	\$ -	\$ 10,285	\$ 2,512	\$ 14,785	\$ 2,308	\$ 4,383	\$ 1,150	\$ 2,082	\$ 4,982	\$ 4,828	\$ 4,695
20 Other intraocular therapeutic procedures															
N	1	1	-	-	-	-	3	-	4	-	-	-	-	2,186	2,195
Avg\$	\$ 7,447	\$ 14,173	\$ -	\$ -	\$ -	\$ -	\$ 11,846	\$ -	\$ 5,180	\$ -	\$ -	\$ -	\$ -	\$ 6,368	\$ 6,378
21 Other extraocular muscle & orbit therapeutic procedures															
N	-	-	-	61	-	-	-	-	1	-	-	-	-	50	112
Avg\$	\$ -	\$ -	\$ -	\$ 13,022	\$ -	\$ -	\$ -	\$ -	\$ 5,062	\$ -	\$ -	\$ -	\$ -	\$ 1,996	\$ 8,029
22 Tympanoplasty															
N	-	7	-	-	-	-	2	2	-	6	10	6	-	36	69
Avg\$	\$ -	\$ 6,399	\$ -	\$ -	\$ -	\$ -	\$ 12,192	\$ 7,322	\$ -	\$ 9,207	\$ 8,491	\$ 5,565	\$ -	\$ 14,516	\$ 11,304
23 Myringotomy															
N	7	39	-	-	-	6	17	14	-	67	80	30	13	638	911
Avg\$	\$ 5,716	\$ 4,188	\$ -	\$ -	\$ -	\$ 5,867	\$ 5,633	\$ 6,925	\$ -	\$ 5,266	\$ 2,399	\$ 2,480	\$ 3,701	\$ 3,214	\$ 3,457
24 Mastoidectomy															
N	-	-	-	-	-	1	1	-	-	1	4	-	-	12	19
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 23,829	\$ 18,512	\$ -	\$ -	\$ 28,144	\$ 16,745	\$ -	\$ -	\$ 23,194	\$ 21,884
25 Diagnostic procedures on ear															
N	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 782	\$ -	\$ -	\$ -	\$ 782

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).
Column headers denote hospitals: see Appendix K.
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Table O-10
2015 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	
26 Other therapeutic ear procedures																
N	40	3	-	-	-	2	3	1	1	11	1,147	1	4	758	1,971	
Avg\$	\$ 179	\$ 3,213	\$ -	\$ -	\$ -	\$ 9,008	\$ 2,277	\$ 5,807	\$ 315	\$ 10,111	\$ 239	\$ 2,422	\$ 4,214	\$ 2,880	\$ 1,338	
27 Control of epistaxis																
N	1	1	-	-	-	2	3	2	-	5	65	-	1	65	145	
Avg\$	\$ 6,682	\$ 5,553	\$ -	\$ -	\$ -	\$ 8,525	\$ 5,865	\$ 4,863	\$ -	\$ 3,505	\$ 745	\$ -	\$ 3,891	\$ 1,429	\$ 1,513	
28 Plastic procedures on nose																
N	-	5	-	-	-	1	12	6	-	18	62	21	9	64	198	
Avg\$	\$ -	\$ 9,774	\$ -	\$ -	\$ -	\$ 11,147	\$ 11,347	\$ 12,353	\$ -	\$ 10,938	\$ 9,172	\$ 5,308	\$ 13,365	\$ 10,933	\$ 9,936	
29 Dental procedures																
N	4	2	-	-	-	-	-	-	-	2	-	1	-	46	55	
Avg\$	\$ 13,813	\$ 7,903	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,523	\$ -	\$ 4,616	\$ -	\$ 14,881	\$ 14,132	
30 Tonsillectomy and/or adenoidectomy																
N	7	66	-	-	-	14	67	25	2	83	112	32	11	210	629	
Avg\$	\$ 8,816	\$ 7,988	\$ -	\$ -	\$ -	\$ 9,177	\$ 7,198	\$ 11,702	\$ 5,887	\$ 8,465	\$ 6,570	\$ 5,314	\$ 7,208	\$ 5,231	\$ 6,821	
31 Diagnostic procedures on nose, mouth & pharynx																
N	-	20	2	11	-	5	38	18	1	4	555	23	1	1,073	1,751	
Avg\$	\$ -	\$ 2,010	\$ 286	\$ 317	\$ -	\$ 3,562	\$ 802	\$ 301	\$ 229	\$ 1,661	\$ 338	\$ 925	\$ 8,217	\$ 1,340	\$ 1,005	
32 Other non-OR therapeutic procedures on nose, mouth & pharynx																
N	-	-	-	-	-	-	2	3	1	4	3	-	-	13	26	
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,518	\$ 3,626	\$ 476	\$ 4,779	\$ 3,450	\$ -	\$ -	\$ 4,611	\$ 4,300	
33 Other OR therapeutic procedures on nose, mouth & pharynx																
N	1	34	-	-	-	10	37	-	-	25	57	11	8	188	371	
Avg\$	\$ 18,118	\$ 11,320	\$ -	\$ -	\$ -	\$ 16,944	\$ 6,518	\$ -	\$ -	\$ 10,277	\$ 6,491	\$ 6,335	\$ 10,213	\$ 12,129	\$ 10,437	
34 Tracheostomy, temporary & permanent																
N	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,513	\$ 10,513	
35 Tracheoscopy & laryngoscopy with biopsy																
N	1	58	-	-	-	1	4	-	-	6	801	2	-	874	1,747	
Avg\$	\$ 6,191	\$ 1,623	\$ -	\$ -	\$ -	\$ 11,682	\$ 6,395	\$ -	\$ -	\$ 6,708	\$ 423	\$ 5,087	\$ -	\$ 932	\$ 768	
37 Diagnostic bronchoscopy & biopsy of bronchus																
N	-	14	-	-	-	-	14	-	2	-	50	24	-	191	295	
Avg\$	\$ -	\$ 6,116	\$ -	\$ -	\$ -	\$ -	\$ 13,549	\$ -	\$ 2,858	\$ -	\$ 5,896	\$ 5,101	\$ -	\$ 6,589	\$ 6,633	
38 Other diagnostic procedures on lung & bronchus																
N	247	527	96	146	-	66	449	248	406	75	938	1,738	218	4,586	9,740	
Avg\$	\$ 465	\$ 887	\$ 609	\$ 965	\$ -	\$ 596	\$ 1,206	\$ 923	\$ 482	\$ 644	\$ 1,043	\$ 283	\$ 500	\$ 993	\$ 818	

Outpatient procedures are outpatient visits with a primary CPT code in CCS high-level groups 1 - 15 (not ED).
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Table O-10

2015 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
39 Incision of pleura, thoracentesis, chest drainage															
N	5	-	-	-	-	-	7	9	1	-	21	8	2	174	227
Avg\$	\$ 3,896	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,229	\$ 4,283	\$ 1,321	\$ -	\$ 3,254	\$ 2,105	\$ 2,958	\$ 3,199	\$ 3,214
40 Other diagnostic proc of respiratory tract & mediastinum															
N	-	-	-	-	-	-	10	-	-	-	-	-	-	3	13
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,826	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 86	\$ 1,425
41 Other non-OR therapeutic procedures on respiratory system															
N	-	1	-	-	-	-	2	1	-	-	2	-	-	5	11
Avg\$	\$ -	\$ 1,329	\$ -	\$ -	\$ -	\$ -	\$ 3,575	\$ 235	\$ -	\$ -	\$ 1,391	\$ -	\$ -	\$ 3,540	\$ 2,654
42 Other OR therapeutic procedures on respiratory system															
N	-	3	-	-	-	-	1	-	6	2	4	-	4	121	141
Avg\$	\$ -	\$ 5,968	\$ -	\$ -	\$ -	\$ -	\$ 6,971	\$ -	\$ 164	\$ 7,752	\$ 9,490	\$ -	\$ 6,531	\$ 10,239	\$ 9,535
45 Percutaneous transluminal coronary angioplasty (PTCA)															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	23	23
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 36,245	\$ 36,245
47 Diagnostic cardiac catheterization, coronary arteriography															
N	-	-	-	-	-	-	-	-	-	-	22	-	-	1,059	1,081
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,714	\$ -	\$ -	\$ 22,605	\$ 22,363
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib															
N	-	36	-	-	-	-	33	2	-	3	55	21	-	333	483
Avg\$	\$ -	\$ 21,180	\$ -	\$ -	\$ -	\$ -	\$ 1,439	\$ 32,356	\$ -	\$ 15,535	\$ 58,675	\$ 19,240	\$ -	\$ 37,640	\$ 35,376
49 Other OR heart procedures															
N	-	1	-	-	-	-	-	-	-	-	-	-	-	6	7
Avg\$	\$ -	\$ 3,579	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 41,997	\$ 36,509
52 Aortic resection, replacement or anastomosis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 32,993	\$ 32,993
53 Varicose vein stripping, lower limb															
N	7	15	1	-	-	1	6	-	1	-	-	4	-	170	205
Avg\$	\$ 7,670	\$ 11,255	\$ 18,123	\$ -	\$ -	\$ 41,807	\$ 9,630	\$ -	\$ 8,578	\$ -	\$ -	\$ 8,688	\$ -	\$ 11,214	\$ 11,170
54 Other vascular catheterization, not heart															
N	64	55	7	6	-	5	32	38	9	-	89	94	7	692	1,098
Avg\$	\$ 4,862	\$ 7,931	\$ 10,724	\$ 16,825	\$ -	\$ 6,355	\$ 9,861	\$ 10,505	\$ 3,108	\$ -	\$ 7,856	\$ 6,575	\$ 8,633	\$ 11,127	\$ 9,814
56 Other vascular bypass & shunt, not heart															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	6	6
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,167	\$ 7,167

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57 Creat, revis, rem of arteriovenous fistula or cannula for dialysis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	-	148
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,915
58 Hemodialysis															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	-	12
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,631
59 Other OR procedures on vessels of head & neck															
N	2	2	1	7	-	4	3	2	5	5	5	15	2	44	97
Avg\$	\$ 1,895	\$ 3,735	\$ 835	\$ 20,960	\$ -	\$ 14,989	\$ 5,939	\$ 7,311	\$ 3,342	\$ 6,871	\$ 3,930	\$ 1,097	\$ 5,666	\$ 5,122	\$ 5,929
61 Other OR procedures on vessels other than head & neck															
N	1	1	1	-	-	-	1	-	-	-	23	1	-	369	397
Avg\$	\$ 258	\$ 13,965	\$ 732	\$ -	\$ -	\$ -	\$ 9,977	\$ -	\$ -	\$ -	\$ 7,765	\$ 14,679	\$ -	\$ 25,816	\$ 24,545
62 Other diagnostic cardiovascular procedures															
N	141	115	13	27	-	-	1	-	-	-	142	71	-	167	677
Avg\$	\$ 643	\$ 1,023	\$ 580	\$ 719	\$ -	\$ -	\$ 186	\$ -	\$ -	\$ -	\$ 4,379	\$ 171	\$ -	\$ 9,874	\$ 3,720
63 Other non-OR therapeutic cardiovascular procedures															
N	41	134	85	2	-	4	295	393	173	65	439	280	33	1,092	3,036
Avg\$	\$ 2,466	\$ 1,438	\$ 390	\$ 679	\$ -	\$ 1,450	\$ 999	\$ 2,161	\$ 490	\$ 1,989	\$ 1,423	\$ 490	\$ 936	\$ 1,603	\$ 1,395
64 Bone marrow transplant															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	-	38
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,902
65 Bone marrow biopsy															
N	2	4	-	-	-	-	-	1	-	-	24	-	-	10	41
Avg\$	\$ 2,952	\$ 3,331	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,722	\$ -	\$ -	\$ 4,601	\$ -	\$ -	\$ 11,115	\$ 6,013
66 Procedures on spleen															
N	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Avg\$	\$ -	\$ 30,095	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 30,095
67 Other therap procedures, hemic & lymphatic system															
N	7	6	3	5	-	4	13	11	7	3	21	17	1	77	175
Avg\$	\$ 7,674	\$ 9,445	\$ 8,149	\$ 29,085	\$ -	\$ 23,933	\$ 10,915	\$ 13,013	\$ 1,959	\$ 13,854	\$ 7,401	\$ 5,596	\$ 8,958	\$ 13,047	\$ 11,316
68 Injection or ligation of esophageal varices															
N	1	5	1	-	-	-	-	-	-	-	5	5	-	30	47
Avg\$	\$ 3,901	\$ 3,676	\$ 2,998	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,874	\$ 4,733	\$ -	\$ 3,242	\$ 3,523
69 Esophageal dilatation															
N	62	40	7	3	-	14	11	5	3	15	82	5	2	235	484
Avg\$	\$ 3,323	\$ 4,610	\$ 2,515	\$ 5,337	\$ -	\$ 1,672	\$ 4,508	\$ 4,485	\$ 4,114	\$ 4,883	\$ 4,542	\$ 2,680	\$ 3,156	\$ 4,514	\$ 4,252

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
70 Upper gastrointestinal endoscopy, biopsy															
N	227	411	134	69	-	178	179	76	589	124	609	227	224	2,062	5,109
Avg\$	\$ 3,067	\$ 3,305	\$ 2,740	\$ 4,725	\$ -	\$ 2,685	\$ 4,685	\$ 3,910	\$ 2,734	\$ 3,617	\$ 4,131	\$ 1,755	\$ 2,079	\$ 3,428	\$ 3,302
71 Gastrostomy, temporary & permanent															
N	8	9	4	-	-	-	1	-	11	-	12	-	2	105	152
Avg\$	\$ 4,916	\$ 2,257	\$ 1,013	\$ -	\$ -	\$ -	\$ 5,209	\$ -	\$ 748	\$ -	\$ 1,668	\$ -	\$ 2,313	\$ 2,824	\$ 2,620
72 Colostomy, temporary & permanent															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,928	\$ 6,928
73 Ileostomy & other enterostomy															
N	-	-	-	-	-	-	-	-	-	-	2	1	-	11	14
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,820	\$ 11,005	\$ -	\$ 4,066	\$ 4,241
75 Small bowel resection															
N	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 92,210	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 92,210
76 Colonoscopy & biopsy															
N	319	2,294	765	394	-	861	870	762	1,799	1,384	2,260	2,341	811	8,296	23,156
Avg\$	\$ 4,651	\$ 3,986	\$ 2,428	\$ 5,699	\$ -	\$ 1,842	\$ 4,683	\$ 4,820	\$ 1,963	\$ 3,867	\$ 4,307	\$ 2,553	\$ 2,089	\$ 3,772	\$ 3,526
77 Proctoscopy & anorectal biopsy															
N	35	39	20	4	-	15	17	6	31	4	34	52	16	342	615
Avg\$	\$ 1,327	\$ 1,800	\$ 1,050	\$ 3,062	\$ -	\$ 1,888	\$ 3,530	\$ 3,397	\$ 743	\$ 1,761	\$ 1,173	\$ 1,568	\$ 1,653	\$ 1,839	\$ 1,732
78 Colorectal resection															
N	2	1	1	-	-	-	3	1	1	-	-	2	1	5	17
Avg\$	\$ 6,414	\$ 15,291	\$ 9,691	\$ -	\$ -	\$ -	\$ 14,471	\$ 25,425	\$ 11,642	\$ -	\$ -	\$ 7,682	\$ 23,076	\$ 8,091	\$ 11,599
79 Local excision of large intestine lesion (not endoscopic)															
N	1	-	-	-	-	-	-	-	-	-	-	-	-	1	2
Avg\$	\$ 4,140	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,662	\$ 6,901
80 Appendectomy															
N	4	4	1	3	-	6	2	3	2	1	5	5	1	20	57
Avg\$	\$ 10,720	\$ 11,633	\$ 18,477	\$ 23,217	\$ -	\$ 16,684	\$ 12,713	\$ 24,537	\$ 9,343	\$ 23,922	\$ 11,631	\$ 10,170	\$ 6,366	\$ 13,128	\$ 13,986
81 Hemorrhoid procedures															
N	16	2	2	4	-	4	12	12	36	7	29	10	6	86	226
Avg\$	\$ 3,325	\$ 5,808	\$ 10,536	\$ 15,048	\$ -	\$ 13,027	\$ 5,818	\$ 10,398	\$ 3,495	\$ 9,447	\$ 5,644	\$ 5,608	\$ 23,652	\$ 3,053	\$ 5,349
82 Endoscopic retrograde cannulation of pancreas (ERCP)															
N	3	-	-	-	-	-	-	-	-	-	-	-	-	143	146
Avg\$	\$ 7,249	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,356	\$ 14,210

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83 Biopsy of liver															
N	1	1	-	-	-	-	-	-	-	-	-	-	-	-	2
Avg\$	\$ 2,810	\$ 1,368	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,089
84 Cholecystectomy & common duct exploration															
N	60	117	42	24	-	32	55	34	146	46	96	93	51	256	1,052
Avg\$	\$ 10,519	\$ 13,731	\$ 16,678	\$ 33,349	\$ -	\$ 17,923	\$ 15,244	\$ 21,668	\$ 9,658	\$ 25,262	\$ 10,088	\$ 8,684	\$ 10,220	\$ 11,293	\$ 12,973
85 Inguinal & femoral hernia repair															
N	54	130	24	31	-	31	49	46	104	61	124	123	43	298	1,118
Avg\$	\$ 8,065	\$ 9,946	\$ 17,686	\$ 22,531	\$ -	\$ 16,982	\$ 12,231	\$ 17,173	\$ 8,550	\$ 19,418	\$ 9,605	\$ 10,806	\$ 8,048	\$ 9,727	\$ 11,275
86 Other hernia repair															
N	36	73	13	23	-	21	35	30	84	51	85	118	27	269	865
Avg\$	\$ 6,840	\$ 9,297	\$ 14,663	\$ 18,589	\$ -	\$ 19,322	\$ 11,972	\$ 22,096	\$ 7,538	\$ 15,732	\$ 10,852	\$ 8,987	\$ 8,917	\$ 11,056	\$ 11,172
87 Laparoscopy															
N	4	2	3	2	-	3	5	6	15	-	3	6	4	33	86
Avg\$	\$ 8,776	\$ 8,484	\$ 11,495	\$ 16,288	\$ -	\$ 17,733	\$ 9,538	\$ 17,993	\$ 7,413	\$ -	\$ 10,474	\$ 8,192	\$ 7,016	\$ 10,576	\$ 10,428
88 Abdominal paracentesis															
N	8	5	-	1	-	-	18	13	8	2	25	88	16	74	258
Avg\$	\$ 4,388	\$ 2,098	\$ -	\$ 2,684	\$ -	\$ -	\$ 1,230	\$ 6,419	\$ 933	\$ 992	\$ 1,969	\$ 2,917	\$ 2,633	\$ 1,640	\$ 2,453
89 Exploratory laparotomy															
N	1	-	-	-	-	-	1	-	1	-	1	-	-	-	4
Avg\$	\$ 10,829	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,508	\$ -	\$ 6,363	\$ -	\$ 11,606	\$ -	\$ -	\$ -	\$ 9,826
90 Excision, lysis peritoneal adhesions															
N	-	-	-	-	-	-	-	1	-	-	1	-	-	-	2
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 14,501	\$ -	\$ -	\$ 4,359	\$ -	\$ -	\$ -	\$ 9,430
91 Peritoneal dialysis															
N	-	-	-	-	-	-	-	-	-	-	-	101	-	2,582	2,683
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 31,600	\$ -	\$ 9,537	\$ 10,367
93 Other non-OR upper GI therapeutic procedures															
N	-	-	-	1	-	-	2	-	-	3	1	3	-	26	36
Avg\$	\$ -	\$ -	\$ -	\$ 5,299	\$ -	\$ -	\$ 5,167	\$ -	\$ -	\$ 5,931	\$ 6,019	\$ 2,819	\$ -	\$ 3,934	\$ 4,172
94 Other OR upper GI therapeutic procedures															
N	-	-	-	-	-	4	-	1	5	-	1	-	-	22	33
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 29,013	\$ -	\$ 35,642	\$ 16,532	\$ -	\$ 1,912	\$ -	\$ -	\$ 13,829	\$ 16,379
95 Other non-OR lower GI therapeutic procedures															
N	3	4	1	-	-	1	1	-	6	1	10	3	2	26	58
Avg\$	\$ 4,360	\$ 4,198	\$ 8,703	\$ -	\$ -	\$ 9,416	\$ 7,387	\$ -	\$ 2,224	\$ 6,525	\$ 5,290	\$ 3,686	\$ 4,222	\$ 2,732	\$ 3,771

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96 Other OR lower GI therapeutic procedures															
N	22	10	4	1	-	3	10	11	8	5	16	7	7	69	173
Avg\$	\$ 5,016	\$ 6,042	\$ 9,280	\$ 17,897	\$ -	\$ 12,348	\$ 7,288	\$ 12,519	\$ 4,201	\$ 11,047	\$ 8,387	\$ 8,229	\$ 7,962	\$ 5,302	\$ 6,795
97 Other gastrointestinal diagnostic procedures															
N	-	23	-	2	-	-	-	-	1	-	-	1	-	193	220
Avg\$	\$ -	\$ 2,172	\$ -	\$ 9,105	\$ -	\$ -	\$ -	\$ -	\$ 4,722	\$ -	\$ -	\$ 6,548	\$ -	\$ 3,747	\$ 3,648
98 Other non-OR gastrointestinal therapeutic procedures															
N	-	3	-	2	-	-	-	-	-	-	-	-	-	10	15
Avg\$	\$ -	\$ 3,676	\$ -	\$ 1,836	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,010	\$ 4,320
99 Other OR gastrointestinal therapeutic procedures															
N	-	2	-	-	-	1	4	-	1	-	4	1	-	74	87
Avg\$	\$ -	\$ 4,931	\$ -	\$ -	\$ -	\$ 12,753	\$ 8,878	\$ -	\$ 383	\$ -	\$ 4,548	\$ 4,289	\$ -	\$ 8,405	\$ 8,080
100 Endoscopy & endoscopic biopsy of the urinary tract															
N	41	126	4	10	-	7	2	3	10	13	301	13	10	1,127	1,667
Avg\$	\$ 2,459	\$ 2,334	\$ 3,992	\$ 9,543	\$ -	\$ 677	\$ 9,906	\$ 10,759	\$ 5,162	\$ 13,152	\$ 1,612	\$ 8,564	\$ 6,212	\$ 2,072	\$ 2,267
101 Transurethral excision, drainage, rem urinary obstruction															
N	26	66	18	15	-	1	4	2	32	15	72	31	28	345	655
Avg\$	\$ 6,911	\$ 8,256	\$ 9,061	\$ 15,367	\$ -	\$ 9,914	\$ 12,184	\$ 13,448	\$ 6,814	\$ 13,560	\$ 4,158	\$ 7,060	\$ 12,067	\$ 4,621	\$ 6,222
102 Ureteral catheterization															
N	16	15	4	11	-	-	-	5	15	11	10	14	9	159	269
Avg\$	\$ 7,601	\$ 10,473	\$ 7,676	\$ 14,060	\$ -	\$ -	\$ -	\$ 7,989	\$ 7,735	\$ 14,511	\$ 9,776	\$ 5,572	\$ 7,120	\$ 8,765	\$ 8,971
103 Nephrotomy & nephrostomy															
N	2	-	-	-	-	-	-	-	-	-	-	3	-	5	10
Avg\$	\$ 18,804	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 18,005	\$ -	\$ 18,260	\$ 18,293
104 Nephrectomy, partial or complete															
N	-	-	-	-	-	-	-	-	-	-	-	1	-	1	2
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 22,422	\$ -	\$ 12,294	\$ 17,358
106 Genitourinary incontinence procedures															
N	-	-	-	7	-	-	14	-	11	7	15	2	1	102	159
Avg\$	\$ -	\$ -	\$ -	\$ 27,720	\$ -	\$ -	\$ 13,240	\$ -	\$ 8,654	\$ 24,640	\$ 11,060	\$ 9,479	\$ 8,221	\$ 15,637	\$ 15,315
107 Extracorporeal lithotripsy, urinary															
N	28	60	32	26	-	-	-	2	41	39	115	83	33	321	780
Avg\$	\$ 14,163	\$ 15,155	\$ 8,765	\$ 12,127	\$ -	\$ -	\$ -	\$ 22,836	\$ 10,970	\$ 16,133	\$ 13,056	\$ 15,615	\$ 9,415	\$ 12,994	\$ 13,212
108 Indwelling catheter															
N	15	-	33	-	-	-	1	-	3	-	48	-	-	418	518
Avg\$	\$ 229	\$ -	\$ 187	\$ -	\$ -	\$ -	\$ 599	\$ -	\$ 256	\$ -	\$ 245	\$ -	\$ -	\$ 581	\$ 513

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109 Procedures on the urethra															
N	2	14	1	2	-	-	4	1	2	-	28	-	1	136	191
Avg\$	\$ 6,467	\$ 6,310	\$ 6,338	\$ 7,104	\$ -	\$ -	\$ 13,620	\$ 5,561	\$ 5,734	\$ -	\$ 1,615	\$ -	\$ 8,157	\$ 3,381	\$ 3,699
110 Other diagnostic procedures of urinary tract															
N	-	-	-	-	-	-	-	-	-	-	5	-	-	4	9
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,981	\$ -	\$ -	\$ 3,171	\$ 3,066
111 Other non-OR therapeutic procedures of urinary tract															
N	16	-	32	-	-	-	2	-	2	2	67	-	-	618	739
Avg\$	\$ 487	\$ -	\$ 170	\$ -	\$ -	\$ -	\$ 342	\$ -	\$ 13,156	\$ 8,213	\$ 487	\$ -	\$ -	\$ 1,188	\$ 1,115
112 Other OR therapeutic procedures of urinary tract															
N	8	12	2	32	-	-	1	2	3	18	56	7	2	132	275
Avg\$	\$ 11,730	\$ 11,433	\$ 4,775	\$ 12,363	\$ -	\$ -	\$ 10,728	\$ 10,448	\$ 7,416	\$ 11,767	\$ 7,262	\$ 8,747	\$ 7,933	\$ 10,155	\$ 9,923
113 Transurethral resection of prostate (TURP)															
N	1	4	7	5	-	-	-	-	1	5	13	9	1	41	87
Avg\$	\$ 9,572	\$ 15,572	\$ 14,036	\$ 27,376	\$ -	\$ -	\$ -	\$ -	\$ 6,135	\$ 15,951	\$ 12,134	\$ 9,475	\$ 9,388	\$ 9,581	\$ 11,932
114 Open prostatectomy															
N	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 28,480	\$ -	\$ -	\$ -	\$ -	\$ 28,480
115 Circumcision															
N	3	45	3	2	-	-	13	9	19	44	11	12	15	73	249
Avg\$	\$ 6,735	\$ 1,705	\$ 3,588	\$ 15,706	\$ -	\$ -	\$ 3,715	\$ 1,262	\$ 320	\$ 1,447	\$ 6,507	\$ 1,578	\$ 1,474	\$ 6,870	\$ 3,545
116 Diagnostic procedures, male genital															
N	2	3	-	1	-	-	10	-	9	1	44	2	-	151	223
Avg\$	\$ 6,403	\$ 7,596	\$ -	\$ 13,315	\$ -	\$ -	\$ 3,602	\$ -	\$ 242	\$ 5,473	\$ 7,300	\$ 3,004	\$ -	\$ 3,547	\$ 4,284
117 Other non-OR therapeutic procedures, male genital															
N	4	19	4	-	-	-	1	-	2	6	36	1	6	85	164
Avg\$	\$ 2,079	\$ 3,484	\$ 763	\$ -	\$ -	\$ -	\$ 12,672	\$ -	\$ 4,446	\$ 1,695	\$ 3,803	\$ 4,147	\$ 4,045	\$ 6,035	\$ 4,802
118 Other OR therapeutic procedures, male genital															
N	12	13	4	14	-	1	8	2	3	18	23	15	18	345	476
Avg\$	\$ 7,823	\$ 11,672	\$ 9,987	\$ 17,175	\$ -	\$ 16,517	\$ 12,883	\$ 11,427	\$ 5,791	\$ 14,001	\$ 23,265	\$ 5,954	\$ 12,065	\$ 10,424	\$ 11,294
119 Oophorectomy, unilateral & bilateral															
N	13	3	11	8	-	-	27	10	23	13	22	17	13	143	303
Avg\$	\$ 11,767	\$ 12,922	\$ 13,890	\$ 32,155	\$ -	\$ -	\$ 12,614	\$ 21,429	\$ 6,905	\$ 22,527	\$ 10,615	\$ 11,628	\$ 19,094	\$ 11,401	\$ 12,931
120 Other operations on ovary															
N	-	-	-	-	-	-	-	-	1	-	-	-	-	1	2
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,620	\$ -	\$ -	\$ -	\$ -	\$ 17,876	\$ 13,248

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Table O-10

**2015 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
121 Ligation of fallopian tubes															
N	18	17	23	10	-	-	5	3	39	3	20	46	12	20	216
Avg\$	\$ 7,257	\$ 8,648	\$ 10,570	\$ 15,973	\$ -	\$ -	\$ 10,256	\$ 11,835	\$ 5,930	\$ 17,474	\$ 8,466	\$ 6,973	\$ 9,135	\$ 7,492	\$ 8,336
122 Removal of ectopic pregnancy															
N	1	-	1	-	-	-	-	-	-	-	-	1	-	2	5
Avg\$	\$ 10,888	\$ -	\$ 17,149	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,439	\$ -	\$ 12,969	\$ 14,083
123 Other operations on fallopian tubes															
N	-	2	-	2	-	-	1	-	13	1	-	-	1	8	28
Avg\$	\$ -	\$ 8,246	\$ -	\$ 27,777	\$ -	\$ -	\$ 10,350	\$ -	\$ 7,697	\$ 16,079	\$ -	\$ -	\$ 12,826	\$ 12,632	\$ 11,158
124 Hysterectomy, abdominal & vaginal															
N	38	10	19	15	-	-	40	19	22	15	36	43	13	284	554
Avg\$	\$ 15,705	\$ 21,884	\$ 23,198	\$ 43,018	\$ -	\$ -	\$ 24,142	\$ 42,286	\$ 11,268	\$ 34,287	\$ 18,438	\$ 15,447	\$ 24,069	\$ 19,500	\$ 20,960
125 Other excision of cervix & uterus															
N	19	14	22	8	-	-	2	11	107	18	24	71	11	56	363
Avg\$	\$ 8,852	\$ 6,926	\$ 11,190	\$ 11,934	\$ -	\$ -	\$ 10,900	\$ 17,918	\$ 5,877	\$ 10,566	\$ 16,769	\$ 8,214	\$ 9,894	\$ 10,314	\$ 9,137
126 Abortion (termination of pregnancy)															
N	1	-	-	-	-	-	-	-	-	1	-	-	-	31	33
Avg\$	\$ 187	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,398	\$ -	\$ -	\$ -	\$ 6,267	\$ 6,027
127 D&C, aspiration after delivery or abortion															
N	17	29	9	3	-	-	7	5	30	10	14	26	7	53	210
Avg\$	\$ 6,490	\$ 5,248	\$ 7,778	\$ 10,706	\$ -	\$ -	\$ 7,912	\$ 8,743	\$ 4,252	\$ 5,917	\$ 6,579	\$ 3,961	\$ 4,825	\$ 5,622	\$ 5,606
128 Diagnostic dilatation & curettage (D&C)															
N	-	3	8	1	-	-	2	1	1	3	18	1	-	7	45
Avg\$	\$ -	\$ 5,197	\$ 4,781	\$ 12,361	\$ -	\$ -	\$ 7,744	\$ 8,265	\$ 3,914	\$ 4,562	\$ 7,240	\$ 13,227	\$ -	\$ 8,661	\$ 6,927
129 Repair cystocele & rectocele, oblit of vaginal vault															
N	2	-	1	4	-	-	8	-	14	1	-	3	4	61	98
Avg\$	\$ 14,062	\$ -	\$ 16,831	\$ 34,852	\$ -	\$ -	\$ 21,028	\$ -	\$ 12,575	\$ 15,867	\$ -	\$ 12,012	\$ 15,946	\$ 12,094	\$ 14,103
130 Other diagnostic procedures, female organs															
N	105	984	19	9	-	4	49	15	62	29	78	1,655	47	422	3,478
Avg\$	\$ 4,535	\$ 645	\$ 5,049	\$ 14,095	\$ -	\$ 146	\$ 3,303	\$ 10,791	\$ 4,545	\$ 6,478	\$ 2,913	\$ 572	\$ 5,617	\$ 4,309	\$ 1,548
131 Other non-OR therapeutic procedures, female organs															
N	11	-	-	-	-	-	-	-	7	-	54	2	1	497	572
Avg\$	\$ 627	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,651	\$ -	\$ 2,350	\$ 6,766	\$ 695	\$ 1,075	\$ 1,250
132 Other OR therapeutic procedures, female organs															
N	24	4	4	3	-	-	41	2	17	9	10	25	9	168	316
Avg\$	\$ 7,198	\$ 12,768	\$ 10,113	\$ 31,252	\$ -	\$ -	\$ 15,536	\$ 18,024	\$ 5,063	\$ 15,399	\$ 8,122	\$ 9,552	\$ 10,683	\$ 9,755	\$ 10,477

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 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
135 Forceps, vacuum & breech delivery															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	20,650	\$ 20,650
137 Other procedures to assist delivery															
N	-	-	2	-	-	-	1	3	1	-	-	4	2	30	43
Avg\$	\$ -	\$ -	\$ 1,184	\$ -	\$ -	\$ -	\$ 1,001	\$ 1,268	\$ 3,599	\$ -	\$ -	\$ 4,111	\$ 454	\$ 2,627	\$ 2,487
139 Fetal monitoring															
N	212	502	399	205	-	-	295	234	37	114	228	121	133	1,353	3,833
Avg\$	\$ 694	\$ 488	\$ 487	\$ 695	\$ -	\$ -	\$ 710	\$ 629	\$ 204	\$ 928	\$ 1,222	\$ 693	\$ 363	\$ 951	\$ 756
140 Repair of current obstetric laceration															
N	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	2,776	\$ 2,776
141 Other therapeutic obstetrical procedures															
N	1	-	-	-	-	-	-	2	-	-	-	-	-	19	22
Avg\$	\$ 12,617	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,284	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,645	\$ 4,383
142 Partial excision bone															
N	24	22	26	13	-	2	8	26	27	9	55	43	5	184	444
Avg\$	\$ 9,760	\$ 9,859	\$ 19,091	\$ 16,492	\$ -	\$ 10,928	\$ 13,436	\$ 15,428	\$ 6,999	\$ 8,660	\$ 9,541	\$ 9,295	\$ 7,027	\$ 9,255	\$ 10,409
143 Bunionectomy or repair of toe deformities															
N	14	38	25	48	-	6	2	44	45	25	29	52	27	150	505
Avg\$	\$ 10,898	\$ 13,886	\$ 22,961	\$ 17,682	\$ -	\$ 13,136	\$ 13,414	\$ 13,630	\$ 6,446	\$ 14,423	\$ 19,521	\$ 11,749	\$ 6,567	\$ 7,009	\$ 11,613
144 Treatment, facial fracture or dislocation															
N	-	4	-	-	-	1	4	-	-	8	15	2	1	41	76
Avg\$	\$ -	\$ 12,794	\$ -	\$ -	\$ -	\$ 6,655	\$ 7,863	\$ -	\$ -	\$ 12,825	\$ 5,483	\$ 23,258	\$ 5,287	\$ 12,296	\$ 10,922
145 Treatment, fracture or disloc of radius & ulna															
N	10	53	32	11	-	1	10	14	27	36	64	31	7	120	416
Avg\$	\$ 10,078	\$ 14,272	\$ 21,933	\$ 29,117	\$ -	\$ 23,385	\$ 17,955	\$ 18,902	\$ 8,916	\$ 17,376	\$ 6,811	\$ 10,706	\$ 16,473	\$ 15,271	\$ 14,252
146 Treatment, fracture or disloc of hip & femur															
N	2	1	-	-	-	-	-	-	-	1	5	1	1	6	17
Avg\$	\$ 23,703	\$ 17,245	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 6,100	\$ 11,672	\$ 13,854	\$ 9,089	\$ 10,156	\$ 12,529
147 Treatment, fracture or disloc of lower extremity															
N	27	51	40	12	-	-	19	20	26	24	59	26	20	136	460
Avg\$	\$ 12,372	\$ 15,310	\$ 25,572	\$ 32,042	\$ -	\$ -	\$ 20,667	\$ 26,014	\$ 9,889	\$ 24,136	\$ 6,986	\$ 11,029	\$ 13,696	\$ 13,488	\$ 15,389
148 Other fracture & dislocation procedure															
N	28	41	50	9	-	1	33	12	35	19	67	22	17	204	538
Avg\$	\$ 14,068	\$ 14,785	\$ 21,608	\$ 40,425	\$ -	\$ 28,010	\$ 13,040	\$ 21,203	\$ 8,652	\$ 24,845	\$ 8,133	\$ 12,730	\$ 11,406	\$ 14,651	\$ 14,758

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Procedure Categories defined by Clinical Classifications Software for Services and Procedures

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
149 Arthroscopy															
N	23	26	38	4	-	8	6	7	8	14	88	23	10	140	395
Avg\$	\$ 14,736	\$ 22,193	\$ 28,580	\$ 48,225	\$ -	\$ 20,836	\$ 30,517	\$ 38,902	\$ 15,663	\$ 37,528	\$ 13,223	\$ 21,250	\$ 18,539	\$ 19,726	\$ 20,423
150 Division of joint capsule, ligament or cartilage															
N	4	4	18	2	-	-	1	5	7	4	6	2	-	40	93
Avg\$	\$ 7,395	\$ 9,841	\$ 14,996	\$ 27,647	\$ -	\$ -	\$ 10,568	\$ 19,611	\$ 9,182	\$ 12,467	\$ 15,108	\$ 8,151	\$ -	\$ 9,547	\$ 11,890
151 Excision of semilunar cartilage of knee															
N	147	79	102	52	-	8	19	56	100	37	152	73	42	417	1,284
Avg\$	\$ 5,362	\$ 8,444	\$ 11,625	\$ 19,282	\$ -	\$ 9,089	\$ 11,862	\$ 16,929	\$ 8,309	\$ 13,768	\$ 6,804	\$ 6,068	\$ 6,054	\$ 9,317	\$ 9,227
152 Arthroplasty knee															
N	17	5	-	2	-	-	-	-	1	3	1	3	-	15	47
Avg\$	\$ 18,538	\$ 24,135	\$ -	\$ 28,681	\$ -	\$ -	\$ -	\$ -	\$ 23,672	\$ 29,719	\$ 13,739	\$ 11,304	\$ -	\$ 20,645	\$ 20,497
153 Hip replacement, total & partial															
N	-	-	-	-	-	1	-	-	6	-	37	-	-	1	45
Avg\$	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 16,858	\$ -	\$ -	\$ 18,283	\$ -	\$ 15,275	\$ -	\$ -	\$ 12,542	\$ 15,651
154 Arthroplasty other than hip or knee															
N	13	23	32	1	-	5	15	12	14	4	18	2	8	127	274
Avg\$	\$ 10,349	\$ 11,861	\$ 34,298	\$ 61,764	\$ -	\$ 17,549	\$ 21,725	\$ 16,856	\$ 13,305	\$ 14,019	\$ 11,979	\$ 18,508	\$ 5,392	\$ 17,624	\$ 18,098
155 Arthrocentesis															
N	300	19	-	-	-	2	52	5	13	42	1,892	6	-	1,601	3,932
Avg\$	\$ 311	\$ 1,402	\$ -	\$ -	\$ -	\$ 233	\$ 2,504	\$ 3,072	\$ 2,622	\$ 183	\$ 725	\$ 1,103	\$ -	\$ 841	\$ 771
156 Injections & aspirations of muscles, tendons, etc.															
N	40	149	38	-	-	2	-	14	15	-	253	11	-	762	1,284
Avg\$	\$ 281	\$ 2,034	\$ 959	\$ -	\$ -	\$ 557	\$ -	\$ 509	\$ 2,769	\$ -	\$ 971	\$ 1,709	\$ -	\$ 1,300	\$ 1,289
157 Amputation of lower extremity															
N	4	10	3	8	-	-	6	18	5	6	4	7	1	62	134
Avg\$	\$ 7,636	\$ 4,988	\$ 9,747	\$ 8,188	\$ -	\$ -	\$ 7,634	\$ 7,566	\$ 4,453	\$ 6,878	\$ 7,099	\$ 6,541	\$ 5,683	\$ 4,909	\$ 6,007
158 Spinal fusion															
N	-	1	-	-	-	-	-	-	11	-	2	4	-	13	31
Avg\$	\$ -	\$ 14,398	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25,555	\$ -	\$ 35,190	\$ 37,581	\$ -	\$ 29,482	\$ 29,015
159 Other diagnostic procedures on musculoskeletal system															
N	3	4	2	2	-	-	-	6	2	1	5	8	-	54	87
Avg\$	\$ 3,272	\$ 8,780	\$ 11,720	\$ 6,910	\$ -	\$ -	\$ -	\$ 10,262	\$ 3,385	\$ 10,199	\$ 2,152	\$ 2,847	\$ -	\$ 7,519	\$ 6,900
160 Other therapeutic procedures on muscles & tendons															
N	150	197	220	72	-	11	107	116	284	76	316	102	45	754	2,450
Avg\$	\$ 7,825	\$ 9,163	\$ 20,988	\$ 26,208	\$ -	\$ 12,615	\$ 13,751	\$ 10,176	\$ 5,023	\$ 14,693	\$ 6,805	\$ 11,603	\$ 4,571	\$ 8,212	\$ 10,020

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
161 Other OR therapeutic procedures on bone															
N	41	39	47	17	-	1	14	17	31	20	38	55	19	311	650
Avg\$	\$ 6,637	\$ 7,901	\$ 9,360	\$ 16,846	\$ -	\$ 6,178	\$ 12,807	\$ 11,297	\$ 6,113	\$ 12,904	\$ 9,255	\$ 8,293	\$ 5,446	\$ 12,991	\$ 10,897
162 Other OR therapeutic procedures on joints															
N	64	45	124	19	-	10	36	42	71	32	101	63	51	393	1,051
Avg\$	\$ 8,827	\$ 12,920	\$ 22,193	\$ 32,056	\$ -	\$ 18,808	\$ 12,098	\$ 16,599	\$ 9,501	\$ 22,175	\$ 9,513	\$ 9,305	\$ 12,910	\$ 12,209	\$ 13,526
163 Other non-OR therapeutic procedures on musc system															
N	1	-	-	-	-	-	-	-	-	-	1	-	-	14	16
Avg\$	\$ 316	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,528	\$ -	\$ -	\$ 1,461	\$ 1,518
164 Other OR therapeutic procedures on musc system															
N	7	2	2	-	-	-	5	2	3	4	6	2	1	46	80
Avg\$	\$ 8,212	\$ 8,742	\$ 3,935	\$ -	\$ -	\$ -	\$ 7,347	\$ 9,092	\$ 3,231	\$ 6,537	\$ 6,576	\$ 7,404	\$ 5,453	\$ 9,791	\$ 8,546
165 Breast biopsy & other diagnostic procedures on breast															
N	43	125	5	25	-	21	11	-	34	33	113	142	53	451	1,056
Avg\$	\$ 7,519	\$ 4,598	\$ 2,866	\$ 5,051	\$ -	\$ 3,278	\$ 3,642	\$ -	\$ 2,839	\$ 2,203	\$ 2,600	\$ 3,011	\$ 3,479	\$ 5,373	\$ 4,399
166 Lumpectomy, quadrantectomy of breast															
N	32	62	2	14	-	13	21	6	26	22	72	57	27	148	502
Avg\$	\$ 10,775	\$ 9,293	\$ 7,069	\$ 27,918	\$ -	\$ 14,680	\$ 9,811	\$ 8,810	\$ 4,527	\$ 13,277	\$ 10,754	\$ 7,567	\$ 10,903	\$ 6,715	\$ 9,321
167 Mastectomy															
N	5	5	-	1	-	-	5	1	1	4	3	5	1	33	64
Avg\$	\$ 15,972	\$ 12,631	\$ -	\$ 31,689	\$ -	\$ -	\$ 19,508	\$ 23,350	\$ 9,406	\$ 34,069	\$ 14,009	\$ 10,712	\$ 5,787	\$ 16,358	\$ 16,913
168 Incision & drainage, skin & subcutaneous tissue															
N	12	3	1	5	-	1	3	3	16	7	17	5	1	206	280
Avg\$	\$ 2,069	\$ 9,739	\$ 1,569	\$ 8,098	\$ -	\$ 888	\$ 8,886	\$ 10,061	\$ 4,034	\$ 8,902	\$ 1,111	\$ 4,731	\$ 5,517	\$ 1,155	\$ 2,024
169 Debridement of wound, infection or burn															
N	420	6	8	4	-	-	1	6	7	2	67	8	1	135	665
Avg\$	\$ 1,269	\$ 6,443	\$ 5,911	\$ 11,740	\$ -	\$ -	\$ 1,275	\$ 9,384	\$ 4,359	\$ 7,387	\$ 1,253	\$ 4,026	\$ 7,868	\$ 2,164	\$ 1,782
170 Excision of skin lesion															
N	82	102	65	23	-	16	37	64	341	23	195	110	23	3,887	4,968
Avg\$	\$ 2,038	\$ 4,387	\$ 2,787	\$ 11,048	\$ -	\$ 5,741	\$ 5,805	\$ 6,784	\$ 1,522	\$ 6,445	\$ 3,545	\$ 3,253	\$ 4,830	\$ 2,006	\$ 2,298
171 Suture of skin & subcutaneous tissue															
N	15	41	1	1	-	7	5	9	4	5	130	30	-	724	972
Avg\$	\$ 4,665	\$ 3,675	\$ 23,087	\$ 10,365	\$ -	\$ 9,196	\$ 7,601	\$ 6,871	\$ 2,650	\$ 7,358	\$ 3,110	\$ 2,909	\$ -	\$ 3,084	\$ 3,282
172 Skin graft															
N	4	22	2	8	-	1	3	12	-	2	22	26	2	389	493
Avg\$	\$ 4,620	\$ 8,615	\$ 12,721	\$ 13,852	\$ -	\$ 1,344	\$ 10,058	\$ 14,779	\$ -	\$ 12,115	\$ 9,557	\$ 6,980	\$ 7,243	\$ 8,277	\$ 8,526

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Outpatient Visits and Average Charges by Vermont Hospitals**

Procedure Categories defined by Clinical Classifications Software for Services and Procedures

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	BRAT	CVMC	COPL	GIFF	GRAC	MTA	NCTY	NEVT	NWST	PORT	RRMC	SWVT	SPRF	UVMC	Total
173 Other diagnostic proc on skin & subcutaneous tissue															
N	1	8	-	-	-	-	5	-	29	-	8	5	1	39	96
Avg\$	\$ 968	\$ 1,581	\$ -	\$ -	\$ -	\$ -	\$ 3,002	\$ -	\$ 852	\$ -	\$ 185	\$ 537	\$ 2,478	\$ 937	\$ 1,005
174 Other non-OR therapeutic procedures on skin & breast															
N	8	8	1,201	8	-	2	2	192	16	6	17	6	1	2,544	4,011
Avg\$	\$ 5,732	\$ 4,531	\$ 43	\$ 9,690	\$ -	\$ 1,668	\$ 1,226	\$ 403	\$ 2,338	\$ 1,886	\$ 3,827	\$ 3,993	\$ 1,669	\$ 754	\$ 586
175 Other OR therapeutic procedures on skin & breast															
N	8	24	11	3	-	6	4	10	24	7	23	20	12	246	398
Avg\$	\$ 3,716	\$ 6,573	\$ 7,692	\$ 10,426	\$ -	\$ 18,031	\$ 3,691	\$ 8,815	\$ 4,368	\$ 9,006	\$ 8,417	\$ 6,351	\$ 12,063	\$ 15,382	\$ 12,391
Total															
N	4,237	8,800	4,442	1,845	-	1,827	3,963	3,761	6,190	3,486	15,695	9,168	2,493	62,527	128,434
Avg\$	\$ 4,291	\$ 4,270	\$ 5,262	\$ 10,344	\$ -	\$ 4,563	\$ 5,490	\$ 6,377	\$ 3,462	\$ 6,814	\$ 3,429	\$ 3,302	\$ 4,194	\$ 5,135	\$ 4,774

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Table O-11
2015 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	35,240	86,718	19,742	10,776	8,105	14,683	29,004	28,188	62,672	36,254	76,874	52,446	36,615	235,874	733,191
4100 Radiology - Diagnostic	13,073	13,839	8,225	1,168	1,235	2,953	4,174	4,624	12,394	7,642	13,842	13,109	1,845	48,878	147,001
5600 Drugs Charged to Patients	6,381	16,058	4,851	979	38	679	2,971	1,411	7,749	1,313	8,541	16,418	2,166	57,768	127,323
3440 Mammography	5,366	8,430	1,987	2,030	-	1,393	3,085	2,688	5,273	3,796	8,756	6,230	3,009	27,327	79,370
Diagnostic	907	896	422	260	-	273	307	474	943	385	1,014	1,220	924	3,133	11,158
Screening	4,463	7,535	1,566	1,770	-	1,121	2,799	2,220	4,331	3,411	7,750	5,012	2,548	24,272	68,798
3180 Chemistry	-	-	-	14	4,887	2,466	4	17,781	2	-	-	44,475	-	432	70,061
3630 Ultra Sound	419	5,921	1,911	1,327	437	531	2,074	970	5,082	2,704	5,259	6,675	2,031	15,642	50,983
3420 Laboratory - Pathological	1,213	1,368	531	259	-	531	450	681	3,960	2,899	3,102	2,708	677	21,505	39,884
5000 Physical Therapy	-	5,458	1,467	1,746	546	1,450	1,306	4,878	1,934	2,209	2,565	1,168	1,066	12,911	38,704
3350 Hematology	-	-	-	-	3,671	-	-	485	-	-	-	32,536	-	-	36,692
3430 Magnetic Resonance Imaging (MRI)	1,850	2,560	1,076	986	-	408	1,194	937	2,187	929	3,499	2,717	1,244	12,308	31,895
3240 Cytology	-	3,195	-	29	-	15	1,255	2,029	-	-	5,450	1,788	11	14,923	28,695
3230 CAT Scan	1,175	2,589	853	502	277	459	1,143	573	2,021	1,080	2,875	2,797	1,010	11,333	28,687
3280 EKG and EEG	1,244	1,519	922	284	325	220	1,098	360	788	305	5,684	1,156	174	7,786	21,865
EKG	1,244	1,377	792	255	325	220	651	312	788	305	4,583	641	174	5,377	17,044
EEG	-	142	132	30	-	-	447	49	-	-	1,103	516	-	2,411	4,830
3050 Bacteriology and Microbiology	-	-	-	2	275	-	-	5,586	100	-	-	14,683	-	-	20,646
3190 Chemotherapy	-	1,466	341	15	-	175	623	-	-	2	870	2,787	356	10,433	17,068
4800 Intravenous Therapy	1,790	2,159	439	102	33	-	1,571	305	648	228	1,729	5,239	513	2,089	16,845
3260 Echocardiography	367	1,366	345	266	-	187	990	323	701	598	1,783	1,968	421	5,466	14,781
3450 Nuclear Medicine - Diagnostic	452	1,183	202	168	-	-	240	263	1,121	383	1,095	959	257	3,506	9,829
PET Scan	-	138	-	-	-	-	-	-	-	-	135	291	-	165	729
All other	452	1,183	202	168	-	-	240	263	1,121	383	1,095	668	257	3,502	9,534
3140 Cardiology	445	645	75	33	-	54	54	583	-	18	2,118	1,298	-	4,487	9,810
3650 Vascular Lab	502	628	252	103	82	126	397	174	-	-	870	717	326	4,667	8,844

Table O-11

2015 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	2,188	-	-	69	-	-	427	-	-	-	5,633	2	-	-	8,319
3620 Stress Test	381	725	341	192	-	-	326	307	1,040	569	1,070	679	216	2,204	8,050
5100 Occupational Therapy	-	955	268	316	78	122	287	6	220	230	338	193	101	3,887	7,001
3550 Psychiatric/Psychological Services	-	43	-	-	-	-	-	-	-	-	1,552	-	-	4,069	5,664
3370 Holter Monitor	-	487	31	63	39	1	519	555	309	1	410	-	108	2,559	5,082
3040 Audiology	2	48	11	2	-	-	7	4	24	41	1,437	-	4	3,308	4,888
3540 Prosthetic Devices	-	311	129	-	-	-	2	42	76	-	-	45	26	2,711	3,342
4000 Anesthesiology	133	18	139	20	-	9	9	35	60	16	105	-	68	2,702	3,314
4200 Radiology - Therapeutic	-	393	-	-	-	-	-	-	-	-	416	152	-	1,780	2,741
4900 Respiratory Therapy	568	28	32	2	-	6	55	18	10	23	140	-	16	1,203	2,101
5200 Speech Pathology	40	235	17	28	8	16	65	106	56	37	351	144	58	803	1,964
3560 Pulmonary Function Testing	24	33	22	12	-	4	43	24	34	51	162	199	4	991	1,603
5700 Renal Dialysis	-	-	-	-	-	-	-	-	-	-	-	53	-	699	752
Total (not including subcategories)	72,408	157,871	44,134	21,460	20,036	26,434	53,319	73,353	108,461	61,310	154,543	212,334	52,322	519,929	1,577,914

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
2015 Vermont Hospital Discharges, including VT Residents and Non-residents
Observation Bed Records and Average Charges by Vermont Hospital and Setting

Vermont Hospital	Inpatient Obs Bed Records		Outpatient Obs Bed Records								Total Obs Bed Records	
	N	Avg\$	with ED revenue code only		with ED revenue code and Proc in Range		with Proc in Range only		with no ED revenue code or Proc in Range		N	Avg\$
			N	Avg\$	N	Avg\$	N	Avg\$	N	Avg\$		
Brattleboro Memorial Hospital	136	\$ 15,388	524	\$ 11,626	31	\$ 18,933	236	\$ 3,281	504	\$ 1,675	1,431	\$ 7,261
Central Vermont Medical Center	198	\$ 20,411	823	\$ 8,492	50	\$ 17,980	31	\$ 16,631	31	\$ 3,701	1,133	\$ 11,085
Copley Hospital	85	\$ 10,088	257	\$ 3,759	28	\$ 12,817	87	\$ 30,159	67	\$ 2,756	524	\$ 9,525
Gifford Medical Center	59	\$ 21,182	175	\$ 10,077	6	\$ 31,649	59	\$ 34,827	42	\$ 5,202	341	\$ 16,059
Grace Cottage Hospital	4	\$ 13,775	88	\$ 5,345	-	\$ -	-	\$ -	6	\$ 2,630	98	\$ 5,523
Mt. Ascutney Hospital and Health Center	1	\$ 90,367	24	\$ 5,020	1	\$ 21,988	26	\$ 25,689	98	\$ 4,034	150	\$ 8,641
North Country Hospital	49	\$ 19,771	340	\$ 9,623	21	\$ 23,839	91	\$ 23,455	31	\$ 5,408	532	\$ 13,239
Northeastern Vermont Regional Hospital	98	\$ 22,271	330	\$ 8,007	40	\$ 24,869	72	\$ 34,721	38	\$ 5,683	578	\$ 14,767
Northwestern Medical Center	81	\$ 14,095	349	\$ 6,297	34	\$ 13,369	84	\$ 14,657	64	\$ 2,425	612	\$ 8,464
Porter Medical Center	166	\$ 15,823	333	\$ 7,401	66	\$ 24,520	134	\$ 14,488	96	\$ 1,428	795	\$ 11,054
Rutland Regional Medical Center	372	\$ 25,998	1,117	\$ 8,114	53	\$ 12,631	41	\$ 19,226	87	\$ 5,297	1,670	\$ 12,367
Southwestern Vermont Medical Center	148	\$ 15,559	810	\$ 8,363	33	\$ 16,800	12	\$ 17,168	30	\$ 5,689	1,033	\$ 9,688
Springfield Hospital	11	\$ 19,896	404	\$ 9,308	55	\$ 18,228	34	\$ 18,685	16	\$ 5,653	520	\$ 10,976
University of Vermont Medical Center	1,538	\$ 26,884	1,773	\$ 9,063	353	\$ 23,019	288	\$ 23,353	312	\$ 7,105	4,264	\$ 17,501
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
Total for 2011	2,061	\$ 17,852	8,037	\$ 6,298	964	\$ 12,779	1,524	\$ 14,084	1,166	\$ 3,199	13,752	\$ 9,084

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

**2015 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	3,658	\$15,166,045	579	\$3,016,443	4,237	\$18,182,488
Central Vermont Medical Center	8,744	\$37,308,280	56	\$267,590	8,800	\$37,575,870
Copley Hospital	4,405	\$22,886,961	37	\$486,443	4,442	\$23,373,403
Gifford Medical Center	1,817	\$18,713,380	28	\$371,475	1,845	\$19,084,855
Grace Cottage Hospital	-	\$0	-	\$0	-	\$0
Mt. Ascutney Hospital and Health Center	1,098	\$5,342,780	729	\$2,993,997	1,827	\$8,336,778
North Country Hospital	3,933	\$21,597,861	30	\$157,256	3,963	\$21,755,117
Northeastern Vermont Regional Hospital	3,432	\$22,441,327	329	\$1,542,635	3,761	\$23,983,961
Northwestern Medical Center	6,140	\$21,202,731	50	\$227,433	6,190	\$21,430,164
Porter Medical Center	3,105	\$21,287,697	381	\$2,464,721	3,486	\$23,752,418
Rutland Regional Medical Center	14,896	\$51,409,955	799	\$2,391,600	15,695	\$53,801,555
Southwestern Vermont Medical Center	6,986	\$22,793,397	2,182	\$7,481,114	9,168	\$30,274,511
Springfield Hospital	2,099	\$8,530,702	394	\$1,924,218	2,493	\$10,454,920
University of Vermont Medical Center	55,821	\$276,969,836	6,706	\$44,124,853	62,527	\$321,094,690
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
Total for 2011	92,068	\$427,448,786	10,334	\$62,155,175	102,402	\$489,603,961
Total for 2010	91,655	\$403,387,969	10,153	\$56,221,922	101,808	\$459,609,892

Table O-13

**2015 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	58,898	\$42,082,041	10,251	\$7,482,005	69,149	\$49,564,046
Central Vermont Medical Center	180,627	\$114,665,437	1,604	\$882,401	182,231	\$115,547,838
Copley Hospital	50,211	\$24,669,031	649	\$235,017	50,860	\$24,904,048
Gifford Medical Center	19,566	\$18,551,278	202	\$241,416	19,768	\$18,792,694
Grace Cottage Hospital	10,024	\$6,115,207	308	\$162,711	10,332	\$6,277,918
Mt. Ascutney Hospital and Health Center	16,793	\$18,146,678	5,165	\$6,325,294	21,958	\$24,471,972
North Country Hospital	47,062	\$47,420,249	532	\$607,031	47,594	\$48,027,280
Northeastern Vermont Regional Hospital	52,125	\$32,059,717	1,344	\$716,326	53,469	\$32,776,042
Northwestern Medical Center	126,673	\$42,881,455	1,105	\$367,060	127,778	\$43,248,515
Porter Medical Center	52,343	\$28,187,651	3,258	\$1,979,542	55,601	\$30,167,193
Rutland Regional Medical Center	145,235	\$117,233,149	8,185	\$6,062,727	153,420	\$123,295,876
Southwestern Vermont Medical Center	138,449	\$81,569,597	28,847	\$23,226,330	167,296	\$104,795,928
Springfield Hospital	43,403	\$23,740,121	6,413	\$3,703,073	49,816	\$27,443,195
University of Vermont Medical Center	517,254	\$516,061,809	32,325	\$58,017,987	549,579	\$574,079,796
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
Total for 2011	1,378,829	\$821,614,254	91,096	\$74,894,930	1,469,925	\$896,509,185
Total for 2010	1,419,401	\$791,965,046	95,475	\$74,765,366	1,514,876	\$866,730,412

Table O-13

**2015 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	62,556	\$57,248,086	10,830	\$10,498,447	73,386	\$67,746,533
Central Vermont Medical Center	189,371	\$151,973,717	1,660	\$1,149,991	191,031	\$153,123,708
Copley Hospital	54,616	\$47,555,992	686	\$721,459	55,302	\$48,277,451
Gifford Medical Center	21,383	\$37,264,658	230	\$612,892	21,613	\$37,877,549
Grace Cottage Hospital	10,024	\$6,115,207	308	\$162,711	10,332	\$6,277,918
Mt. Ascutney Hospital and Health Center	17,891	\$23,489,459	5,894	\$9,319,291	23,785	\$32,808,750
North Country Hospital	50,995	\$69,018,110	562	\$764,288	51,557	\$69,782,397
Northeastern Vermont Regional Hospital	55,557	\$54,501,043	1,673	\$2,258,961	57,230	\$56,760,004
Northwestern Medical Center	132,813	\$64,084,186	1,155	\$594,493	133,968	\$64,678,679
Porter Medical Center	55,448	\$49,475,348	3,639	\$4,444,263	59,087	\$53,919,611
Rutland Regional Medical Center	160,131	\$168,643,104	8,984	\$8,454,327	169,115	\$177,097,431
Southwestern Vermont Medical Center	145,435	\$104,362,994	31,029	\$30,707,444	176,464	\$135,070,438
Springfield Hospital	45,502	\$32,270,824	6,807	\$5,627,292	52,309	\$37,898,115
University of Vermont Medical Center	573,075	\$793,031,645	39,031	\$102,142,840	612,106	\$895,174,486
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
Total for 2011	1,470,897	\$1,249,063,041	101,430	\$137,050,105	1,572,327	\$1,386,113,146
Total for 2010	1,511,056	\$1,195,353,015	105,628	\$130,987,288	1,616,684	\$1,326,340,304

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
2015 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	1,549	3.3%	4,237	3.3%	12,488	5.2%	69,149	4.4%	87,423	4.4%
Central Vermont Medical Center	3,929	8.4%	8,800	6.9%	21,723	9.0%	182,231	11.7%	216,683	11.0%
Copley Hospital	1,681	3.6%	4,442	3.5%	12,185	5.1%	50,860	3.3%	69,168	3.5%
Gifford Medical Center	1,442	3.1%	1,845	1.4%	6,611	2.8%	19,768	1.3%	29,666	1.5%
Grace Cottage Hospital	125	0.3%	0	0.0%	2,731	1.1%	10,332	0.7%	13,188	0.7%
Mt. Ascutney Hospital and Health Center	1,053	2.2%	1,827	1.4%	4,387	1.8%	21,958	1.4%	29,225	1.5%
North Country Hospital	1,629	3.5%	3,963	3.1%	15,665	6.5%	47,594	3.1%	68,851	3.5%
Northeastern Vermont Regional Hospital	1,254	2.7%	3,761	2.9%	13,110	5.5%	53,469	3.4%	71,594	3.6%
Northwestern Medical Center	2,590	5.5%	6,190	4.8%	23,583	9.8%	127,778	8.2%	160,141	8.1%
Porter Medical Center	1,487	3.2%	3,486	2.7%	14,522	6.0%	55,601	3.6%	75,096	3.8%
Rutland Regional Medical Center	6,105	13.0%	15,695	12.2%	28,923	12.0%	153,420	9.8%	204,143	10.3%
Southwestern Vermont Medical Center	3,421	7.3%	9,168	7.1%	20,700	8.6%	167,296	10.7%	200,585	10.2%
Springfield Hospital	1,924	4.1%	2,493	1.9%	15,611	6.5%	49,816	3.2%	69,844	3.5%
University of Vermont Medical Center	18,734	39.9%	62,527	48.7%	48,117	20.0%	549,579	35.3%	678,957	34.4%
Total	46,923	100.0%	128,434	100.0%	240,356	100.0%	1,558,851	100.0%	1,974,564	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

**2015 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	2,564	\$32,386	874	\$1,183	3,953	\$1,411	42,822	\$366	50,213	\$2,116
Neoplasms	2,015	\$40,881	13,224	\$4,818	403	\$5,662	92,229	\$3,021	107,871	\$3,964
Endocrine, nutritional, metabolic, immunity	1,664	\$24,292	2,333	\$2,797	3,354	\$2,492	166,549	\$427	173,900	\$728
Diseases of the blood & blood-forming organs	480	\$21,874	745	\$3,614	541	\$4,131	27,536	\$805	29,302	\$1,287
Mental disorders	2,911	\$23,328	322	\$2,026	11,260	\$1,808	48,252	\$365	62,745	\$1,711
Diseases of the nervous system and sense organs	1,115	\$28,641	15,114	\$4,546	19,773	\$1,916	75,049	\$1,100	111,051	\$1,995
Diseases of the circulatory system	7,507	\$32,107	4,558	\$12,041	16,875	\$3,827	191,212	\$612	220,152	\$2,176
Diseases of the respiratory system	5,327	\$21,383	11,057	\$1,996	28,634	\$1,591	80,304	\$569	125,322	\$1,817
Diseases of the digestive system	4,684	\$23,127	12,442	\$5,874	18,919	\$2,582	47,318	\$1,218	83,363	\$3,465
Diseases of the genitourinary system	1,864	\$19,256	10,808	\$7,868	12,628	\$2,571	123,996	\$573	149,296	\$1,511
Pregnancy, childbirth, and the puerperium	5,727	\$11,386	5,035	\$1,696	2,905	\$2,153	45,039	\$443	58,706	\$1,734
Diseases of the skin and subcutaneous tissue	836	\$17,800	4,813	\$1,365	8,133	\$1,096	33,753	\$490	47,535	\$989
Musculoskeletal system and connective tissue	3,797	\$42,958	17,995	\$4,537	17,307	\$1,567	194,586	\$999	233,685	\$2,010
Congenital anomalies	119	\$55,556	429	\$8,774	44	\$3,317	4,277	\$1,226	4,869	\$3,260
Conditions originating in the perinatal period	3	\$10,436	169	\$1,371	306	\$1,074	1,830	\$239	2,308	\$7,611
Injury & poisoning	4,290	\$37,290	5,830	\$11,345	65,476	\$1,662	57,492	\$663	133,088	\$2,837
Symptoms, signs & ill-defined conditions	1,881	\$28,303	20,962	\$2,952	27,674	\$2,429	294,357	\$485	344,874	\$949
Residual codes, unclassified, all Ecodes	139	\$17,883	1,724	\$3,435	2,171	\$2,394	32,250	\$1,321	36,284	\$1,563
Total Discharges and Average Charges	46,923	\$25,441	128,434	\$4,774	240,356	\$2,048	1,558,851	\$795	1,974,564	\$1,872
Total Charges	\$1,342,738,400		\$613,100,730		\$492,148,138		\$1,223,392,341		\$3,671,379,608	

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
2015 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	896	\$48,955	13,458	\$3,901	677	\$1,209	-	\$0	15,031	\$6,584
Operations on the endocrine system	45	\$44,983	269	\$13,075	1	\$1,993	-	\$0	315	\$17,598
Operations on the eye	10	\$52,530	7,727	\$5,940	34	\$9,017	-	\$0	7,771	\$6,032
Operations on the ear	25	\$41,166	2,971	\$2,351	26	\$1,595	-	\$0	3,022	\$2,666
Operations on the nose, mouth, and pharynx	134	\$25,372	3,175	\$4,094	447	\$1,724	-	\$0	3,756	\$4,946
Operations on the respiratory system	920	\$54,420	12,176	\$1,101	39	\$4,023	-	\$0	13,135	\$4,905
Operations on the cardiovascular system	3,253	\$61,720	7,271	\$10,154	298	\$17,976	-	\$0	10,822	\$26,191
Operations on the hemic and lymphatic system	132	\$68,337	255	\$10,923	3	\$20,424	-	\$0	390	\$30,428
Operations on the digestive system	3,204	\$40,426	36,720	\$4,783	911	\$14,324	-	\$0	40,835	\$7,802
Operations on the urinary system	807	\$34,770	5,274	\$5,266	124	\$9,668	-	\$0	6,205	\$9,192
Operations on the male genital organs	194	\$9,288	1,200	\$7,557	33	\$7,395	-	\$0	1,427	\$8,621
Operations on the female genital organs	730	\$18,340	6,218	\$5,382	187	\$9,084	-	\$0	7,135	\$6,807
Obstetrical procedures	4,221	\$11,260	3,906	\$823	35	\$9,843	-	\$0	8,162	\$6,259
Operations on the musculoskeletal system	5,348	\$47,019	14,309	\$7,944	1,984	\$4,225	-	\$0	21,641	\$17,261
Operations on the integumentary system	836	\$33,862	13,505	\$2,840	5,773	\$1,149	-	\$0	20,114	\$3,650
Miscellaneous diagnostic and therapeutic procs	541	\$45,837	-	\$0	-	\$0	33,536	\$439	34,077	\$1,202
New Categories specific to CPT/HCPCS	-	\$0	-	\$0	-	\$0	9	\$9,618	9	\$9,618
Total Discharges and Average Charges	21,296	\$37,044	128,434	\$4,774	10,572	\$3,695	33,545	\$441	193,847	\$7,821
Total charges	\$865,151,221		\$613,100,730		\$39,066,248		\$14,807,516		\$1,532,125,715	

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.

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

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

* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM				
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
1 Infectious & parasitic diseases																				
1 Tuberculosis	-	-	2	-	2	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2
2 Septicemia (except in labor)	372	352	381	419	1,524	413	407	459	424	1,703	410	476	512	448	1,846	533	620	583	613	2,349
3 Bacterial infection; unspecified site	-	2	4	5	11	5	1	-	2	8	2	6	3	3	14	-	3	1	19	23
4 Mycoses	6	3	7	4	20	6	5	10	12	33	7	5	6	7	25	7	10	8	2	27
5 HIV infection	2	4	-	2	8	4	3	2	4	13	2	1	6	3	12	3	-	-	4	7
6 Hepatitis	15	8	10	9	42	6	5	3	6	20	11	9	10	3	33	7	8	9	6	30
7 Viral infection	16	16	26	18	76	13	20	19	28	80	19	16	14	17	66	21	14	15	23	73
8 Other infections; including parasitic	6	10	9	3	28	2	16	28	14	60	2	9	17	18	46	3	18	24	6	51
9 Sexually transmitted infections (not HIV or hepatitis)	1	-	-	-	1	-	4	2	-	6	-	-	2	1	3	1	-	-	1	2
Total	418	395	439	460	1,712	449	461	523	490	1,923	453	522	570	500	2,045	576	673	641	674	2,564
2 Neoplasms																				
11 Cancer of head and neck	12	10	12	10	44	13	6	8	13	40	13	14	6	12	45	8	13	10	13	44
12 Cancer of esophagus	6	3	7	2	18	10	6	10	5	31	8	13	6	3	30	5	7	3	5	20
13 Cancer of stomach	9	11	8	8	36	3	8	11	3	25	5	5	7	6	23	8	5	8	3	24
14 Cancer of colon	43	37	49	43	172	29	40	32	40	141	35	32	31	38	136	37	30	52	39	158
15 Cancer of rectum and anus	17	15	23	18	73	19	22	14	15	70	16	12	15	12	55	20	10	18	13	61
16 Cancer of liver and intrahepatic bile duct	5	5	3	4	17	5	2	4	7	18	4	3	10	6	23	8	9	3	5	25
17 Cancer of pancreas	13	9	15	10	47	10	13	11	7	41	6	9	12	10	37	8	6	8	4	26
18 Cancer of other GI organs; peritoneum	6	10	8	4	28	7	4	2	5	18	5	11	9	8	33	11	8	11	7	37
19 Cancer of bronchus; lung	52	47	48	36	183	43	46	52	41	182	44	48	51	44	187	49	56	49	59	213
20 Cancer; other respiratory and intrathoracic	-	-	-	-	-	1	-	-	-	1	1	1	1	-	3	1	-	1	-	2
21 Cancer of bone and connective tissue	4	3	3	2	12	5	2	2	2	11	3	3	4	4	14	1	2	1	3	7
22 Melanomas of skin	-	1	2	1	4	3	-	1	1	5	-	1	-	-	1	-	2	2	3	7
23 Other non-epithelial cancer of skin	2	-	4	1	7	2	5	-	2	9	3	-	1	1	5	1	2	-	1	4
24 Cancer of breast	28	27	24	18	97	28	20	17	12	77	13	14	13	12	52	10	17	21	25	73
25 Cancer of uterus	20	13	8	8	49	5	9	7	4	25	6	12	4	3	25	9	4	12	6	31
26 Cancer of cervix	3	3	3	2	11	15	2	2	1	20	1	2	4	4	11	2	2	-	3	7
27 Cancer of ovary	9	10	13	16	48	6	11	14	14	45	8	12	5	14	39	6	9	8	8	31
28 Cancer of other female genital organs	3	8	3	6	20	5	2	3	4	14	4	5	4	4	17	6	4	4	3	17
29 Cancer of prostate	25	32	24	35	116	23	24	29	30	106	37	28	26	26	117	25	27	29	34	115
30 Cancer of testis	-	-	-	2	2	2	1	-	-	3	1	-	-	-	1	-	-	-	1	1
31 Cancer of other male genital organs	-	1	-	-	1	1	-	-	-	1	-	1	-	2	3	-	-	-	-	-
32 Cancer of bladder	14	12	12	11	49	12	6	10	6	34	14	27	13	13	67	13	8	9	13	43

APPENDIX E
Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single and High Level Groups by Discharge Year and Quarter
 * omits newborns

CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM								
	2012					Yearly Total	2013					Yearly Total	2014					Yearly Total	2015					Yearly Total
	Q1	Q2	Q3	Q4	Q1		Q2	Q3	Q4	Q1	Q2		Q3	Q4	Q1	Q2	Q3		Q4					
CCS Single Level Diagnosis Category	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total				
33 Cancer of kidney and renal pelvis	18	25	16	15	74	18	18	14	15	65	21	20	15	27	83	18	18	20	18	74				
34 Cancer of other urinary organs	2	2	2	-	6	-	1	3	2	6	3	3	2	-	8	-	3	1	1	5				
35 Cancer of brain and nervous system	19	23	11	24	77	12	20	15	12	59	17	16	22	17	72	17	16	12	10	55				
36 Cancer of thyroid	5	2	2	3	12	6	3	1	2	12	2	2	4	2	10	4	2	3	3	12				
37 Hodgkin's disease	-	-	-	-	-	1	1	-	-	2	-	-	-	-	-	-	1	2	-	3				
38 Non-Hodgkin's lymphoma	11	14	17	10	52	14	13	14	11	52	8	16	11	10	45	11	14	17	13	55				
39 Leukemias	11	7	10	17	45	14	16	12	13	55	17	14	21	11	63	13	16	17	14	60				
40 Multiple myeloma	4	6	1	9	20	7	5	6	4	22	4	9	12	4	29	8	3	4	2	17				
41 Cancer; other and unspecified primary	1	2	3	4	10	1	-	1	1	3	1	1	-	4	6	3	2	2	2	9				
42 Secondary malignancies	82	52	76	74	284	74	67	82	88	311	58	80	94	82	314	78	91	59	74	302				
43 Malignant neoplasm without specification of site	4	5	7	5	21	5	7	3	5	20	3	6	9	3	21	10	3	8	3	24				
44 Neoplasms of unspecified nature or uncertain behavior	12	19	18	12	61	13	18	9	17	57	14	14	13	11	52	11	13	16	8	48				
45 Maintenance chemotherapy; radiotherapy	62	59	44	54	219	60	44	35	28	167	28	31	30	37	126	41	45	43	53	182				
46 Benign neoplasm of uterus	29	26	19	29	103	31	21	19	20	91	20	26	22	19	87	19	14	21	22	76				
47 Other and unspecified benign neoplasm	39	59	41	44	183	34	36	41	45	156	41	41	39	28	149	35	39	42	31	147				
Total	570	558	536	537	2,201	537	499	484	475	1,995	464	532	516	477	1,989	496	501	516	502	2,015				
3 Endocrine, nutritional, metabolic, immunity																								
48 Thyroid disorders	6	10	6	11	33	5	5	7	6	23	6	2	4	2	14	6	6	7	10	29				
49 Diabetes mellitus without complication	6	1	8	4	19	7	7	5	6	25	4	4	4	3	15	14	2	7	1	24				
50 Diabetes mellitus with complications	171	153	162	179	665	136	164	162	128	590	153	155	156	153	617	137	178	150	147	612				
51 Other endocrine disorders	21	27	26	8	82	16	15	26	19	76	23	19	15	19	76	18	23	31	25	97				
52 Nutritional deficiencies	2	3	6	4	15	10	1	4	8	23	3	6	5	6	20	4	5	3	5	17				
53 Disorders of lipid metabolism	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	2	3				
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				
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				
56 Cystic fibrosis	39	43	46	54	182	50	50	67	42	209	46	57	45	58	206	51	40	45	43	179				
57 Immunity disorders	-	2	2	1	5	-	1	2	-	3	-	3	1	1	5	-	-	-	3	3				
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	76	254				
Total	421	454	434	440	1,749	431	427	486	348	1,692	401	447	391	384	1,623	392	438	405	429	1,664				
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				
60 Acute posthemorrhagic anemia	20	21	20	14	75	12	25	24	9	70	23	19	18	25	85	22	19	24	24	89				
61 Sickle cell anemia	4	8	2	6	20	5	4	6	4	19	9	7	3	3	22	1	4	5	4	14				

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

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CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM				
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
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
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
64 Other hematologic conditions	1	2	2	2	7	1	1	1	3	6	4	3	2	1	10	3	2	1	5	11
Total	124	122	138	131	515	95	119	127	108	449	120	134	130	110	494	116	113	133	118	480
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
651 Anxiety disorders	34	34	33	32	133	22	36	37	26	121	11	31	42	28	112	34	40	34	31	139
652 Attention-deficit conduct and disruptive behavior disorders	3	1	-	-	4	2	-	-	-	2	1	-	1	-	2	-	-	1	-	1
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
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
656 Impulse control disorders NEC	-	-	1	-	1	1	1	-	1	3	1	-	-	-	1	1	-	2	1	4
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
658 Personality disorders	16	20	13	18	67	16	9	22	28	75	12	7	14	20	53	21	27	20	2	70
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
660 Alcohol-related disorders	108	109	126	122	465	97	143	129	104	473	114	122	123	130	489	127	166	165	170	628
661 Substance-related disorders	79	87	66	65	297	70	76	74	73	293	75	59	60	68	262	58	51	58	42	209
662 Suicide and intentional self-inflicted injury	1	-	2	1	4	3	2	4	4	13	3	5	1	-	9	1	-	1	54	56
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	10	81
Total	673	731	684	703	2,791	681	756	772	668	2,877	648	644	682	619	2,593	664	756	735	756	2,911
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
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
78 Other CNS infection and poliomyelitis	10	4	5	4	23	4	-	3	1	8	5	6	2	2	15	2	5	3	6	16
79 Parkinson's disease	3	4	6	6	19	8	5	4	12	29	6	8	6	9	29	7	11	3	3	24
80 Multiple sclerosis	5	4	3	3	15	3	5	5	5	18	2	3	9	11	25	4	5	7	6	22
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
82 Paralysis	1	2	2	1	6	4	-	2	1	7	4	-	3	4	11	2	2	4	11	19
83 Epilepsy; convulsions	80	78	75	68	301	80	88	87	49	304	60	72	60	41	233	60	52	50	75	237
84 Headache; including migraine	14	16	18	17	65	13	10	15	15	53	15	17	15	13	60	21	14	18	26	79
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
87 Retinal detachments; defects; vascular occlusion; and retinopathy	3	-	-	1	4	-	-	-	-	-	1	-	1	1	3	1	1	2	1	5

APPENDIX E
Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single and High Level Groups by Discharge Year and Quarter
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CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM								
	2012					Yearly Total	2013					Yearly Total	2014					Yearly Total	2015					Yearly Total
	Q1	Q2	Q3	Q4	Q1		Q2	Q3	Q4	Q1	Q2		Q3	Q4	Q1	Q2	Q3		Q4					
CCS Single Level Diagnosis Category	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total	Q1	Q2	Q3	Q4	Yearly Total				
89 Blindness and vision defects	3	5	3	4	15	-	1	3	1	5	-	1	1	1	3	2	-	1	1	4				
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				
91 Other eye disorders	1	-	1	3	5	2	-	-	1	3	-	2	2	-	4	-	2	-	1	3				
92 Otitis media and related conditions	2	4	1	-	7	3	1	5	-	9	2	-	-	2	4	5	2	1	4	12				
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				
94 Other ear and sense organ disorders	4	1	3	4	12	2	1	1	-	4	5	-	-	4	9	2	1	3	3	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				
Total	270	282	273	259	1,084	270	287	300	247	1,104	251	257	255	227	990	262	268	273	312	1,115				
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				
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				
98 Essential hypertension	17	11	7	8	43	10	5	6	6	27	5	7	4	7	23	6	9	6	9	30				
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				
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				
101 Coronary atherosclerosis and other heart disease	138	139	131	138	546	113	138	124	107	482	103	119	120	100	442	79	114	127	101	421				
102 Nonspecific chest pain	114	81	72	70	337	71	85	72	36	264	39	40	34	42	155	40	38	61	35	174				
103 Pulmonary heart disease	88	95	92	93	368	91	93	90	84	358	89	73	91	90	343	94	88	88	75	345				
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				
105 Conduction disorders	27	35	33	19	114	18	29	29	23	99	24	23	27	18	92	22	21	19	24	86				
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				
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				
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				
109 Acute cerebrovascular disease	208	220	269	216	913	198	243	222	242	905	226	182	218	222	848	238	243	227	251	959				
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				
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				
112 Transient cerebral ischemia	37	40	35	33	145	33	34	28	26	121	20	26	22	32	100	26	30	34	24	114				
113 Late effects of cerebrovascular disease	7	3	8	6	24	3	5	1	4	13	5	2	1	1	9	5	8	5	67	85				
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				
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				
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				
117 Other circulatory disease	25	40	49	28	142	35	47	37	32	151	24	29	41	28	122	34	28	30	22	114				
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				

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

* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM				
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
119 Varicose veins of lower extremity	1	-	-	1	2	-	-	2	3	5	1	-	3	1	5	-	-	-	2	2
120 Hemorrhoids	5	4	9	8	26	7	11	3	4	25	3	3	1	6	13	3	2	2	4	11
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
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
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	422	1,788
123 Influenza	15	31	-	22	68	131	12	-	12	155	76	25	-	27	128	233	33	-	2	268
124 Acute and chronic tonsillitis	2	6	4	4	16	4	8	4	6	22	6	4	4	2	16	-	2	3	4	9
125 Acute bronchitis	124	19	16	23	182	107	34	6	24	171	59	29	8	22	118	77	32	10	16	135
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
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
128 Asthma	73	74	54	96	297	105	92	57	76	330	76	64	63	66	269	101	81	47	44	273
129 Aspiration pneumonia; food/vomitus	83	87	86	85	341	85	86	96	78	345	82	76	83	80	321	81	95	74	60	310
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
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
132 Lung disease due to external agents	4	5	3	6	18	3	5	4	3	15	3	2	2	7	14	4	3	10	1	18
133 Other lower respiratory disease	48	50	35	40	173	51	50	38	32	171	31	33	43	29	136	38	36	33	36	143
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
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	1,158	5,327
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
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
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
138 Esophageal disorders	33	20	21	23	97	26	19	32	17	94	17	16	13	19	65	16	19	17	20	72
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
140 Gastritis and duodenitis	16	19	13	19	67	15	9	16	9	49	15	12	14	17	58	9	13	13	13	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
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
143 Abdominal hernia	59	87	52	59	257	63	73	61	51	248	44	53	51	49	197	48	46	43	49	186
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
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
146 Diverticulosis and diverticulitis	118	132	137	139	526	122	135	144	119	520	108	143	139	135	525	147	119	137	152	555
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

APPENDIX E
Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single and High Level Groups by Discharge Year and Quarter
 * omits newborns

CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM				
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
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
149 Biliary tract disease	138	121	142	140	541	136	124	154	121	535	96	126	109	113	444	119	116	117	119	471
151 Other liver diseases	60	40	36	50	186	51	42	43	46	182	37	43	43	40	163	44	56	46	50	196
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
153 Gastrointestinal hemorrhage	141	149	167	145	602	137	151	137	135	560	144	129	159	144	576	126	130	126	116	498
154 Noninfectious gastroenteritis	65	48	33	25	171	39	33	27	26	125	24	38	31	21	114	40	57	38	34	169
155 Other gastrointestinal disorders	74	72	72	91	309	91	90	83	64	328	67	56	63	65	251	71	87	81	82	321
Total	1,340	1,273	1,320	1,258	5,191	1,247	1,263	1,305	1,148	4,963	1,090	1,163	1,157	1,123	4,533	1,151	1,221	1,168	1,144	4,684
10 Diseases of the genitourinary system																				
156 Nephritis; nephrosis; renal sclerosis	2	-	2	4	8	1	1	3	1	6	2	5	3	2	12	2	3	2	2	9
157 Acute and unspecified renal failure	130	153	162	161	606	151	149	152	129	581	122	186	188	151	647	163	165	163	137	628
158 Chronic kidney disease	8	10	9	6	33	7	7	4	5	23	5	12	13	7	37	5	6	6	3	20
159 Urinary tract infections	193	179	225	156	753	132	174	172	175	653	163	173	170	186	692	151	154	196	172	673
160 Calculus of urinary tract	53	39	56	51	199	54	56	50	45	205	32	43	35	40	150	38	39	47	17	141
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
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
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
164 Hyperplasia of prostate	21	9	14	14	58	15	14	12	18	59	18	13	10	14	55	13	17	13	23	66
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
166 Other male genital disorders	2	3	1	1	7	4	3	4	2	13	-	3	4	-	7	4	4	2	-	10
167 Nonmalignant breast conditions	5	3	3	2	13	3	1	3	5	12	2	4	4	1	11	3	3	-	6	12
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
169 Endometriosis	10	6	1	7	24	2	9	3	3	17	2	9	2	-	13	2	1	2	4	9
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
171 Menstrual disorders	16	16	12	12	56	6	12	9	6	33	8	9	7	7	31	8	9	5	9	31
172 Ovarian cyst	5	2	6	11	24	10	6	3	5	24	4	4	4	1	13	4	4	3	2	13
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
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
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
178 Induced abortion	-	1	-	3	4	1	1	1	3	6	1	2	3	2	8	1	1	2	1	5

APPENDIX E
Primary Diagnoses of Inpatients in Vermont Hospitals: CCS Single and High Level Groups by Discharge Year and Quarter
 * omits newborns

CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM							
	2012					Yearly Total	2013					Yearly Total	2014					Yearly Total	2015				Yearly Total
	Q1	Q2	Q3	Q4	Q1		Q2	Q3	Q4	Q1	Q2		Q3	Q4	Q1	Q2	Q3		Q4				
207 Pathological fracture	31	21	24	14	90	21	20	20	25	86	17	18	17	30	82	29	29	38	38	134			
208 Acquired foot deformities	5	-	1	3	9	3	2	4	-	9	2	2	1	-	5	1	1	1	-	3			
209 Other acquired deformities	26	28	24	22	100	31	18	32	20	101	36	36	27	31	130	40	30	39	57	166			
210 Systemic lupus erythematosus and connective tissue disorders	-	2	-	3	5	2	-	2	1	5	2	2	-	3	7	3	3	1	5	12			
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			
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			
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			
14 Congenital anomalies																							
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			
214 Digestive congenital anomalies	4	3	8	12	27	10	7	3	14	34	5	5	11	9	30	5	10	5	4	24			
215 Genitourinary congenital anomalies	7	7	4	9	27	4	7	8	1	20	-	5	5	2	12	4	5	5	5	19			
216 Nervous system congenital anomalies	2	4	2	1	9	2	2	6	-	10	6	4	2	2	14	2	3	4	4	13			
217 Other congenital anomalies	16	20	17	19	72	19	15	21	10	65	11	13	10	9	43	9	8	11	6	34			
Total	40	43	32	43	158	39	33	42	29	143	31	29	36	30	126	23	35	29	32	119			
15 Conditions originating in the perinatal period																							
218 Liveborn	-	1	-	-	1	-	-	-	-	-	-	1	-	1	2	-	-	-	-	-			
224 Other perinatal conditions	2	-	2	-	4	1	-	1	1	3	-	-	-	2	2	-	1	-	2	3			
Total	2	1	2	-	5	1	-	1	1	3	-	1	-	3	4	-	1	-	2	3			
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			
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			
227 Spinal cord injury	2	3	7	4	16	7	4	9	2	22	2	3	7	3	15	11	6	8	10	35			
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			
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			
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			
231 Other fractures	102	111	106	83	402	105	96	113	103	417	96	97	118	110	421	86	110	116	158	470			
232 Sprains and strains	14	7	11	9	41	12	7	12	8	39	10	8	8	7	33	9	5	8	8	30			
233 Intracranial injury	91	80	99	81	351	77	73	100	67	317	67	67	83	56	273	61	70	76	67	274			
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			
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			
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			
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			
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			

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

* omits newborns

CCS High Level Diagnosis Group	ICD-9-CM															ICD-10-CM				
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4		Q1	Q2	Q3	Q4	
239 Superficial injury; contusion	14	16	9	13	52	11	14	16	13	54	9	9	11	14	43	10	13	18	19	60
240 Burns	9	10	8	9	36	11	11	9	8	39	8	9	12	5	34	7	15	9	10	41
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
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
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
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
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
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
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
247 Lymphadenitis	5	4	4	3	16	1	-	2	8	11	2	2	2	8	5	1	4	1	11	
248 Gangrene	3	11	6	5	25	7	10	10	3	30	5	8	2	6	21	17	8	11	10	46
249 Shock	1	-	-	-	1	-	1	-	-	1	-	1	-	1	2	-	-	-	5	5
250 Nausea and vomiting	19	21	15	24	79	17	14	18	21	70	11	16	15	7	49	14	14	18	14	60
251 Abdominal pain	41	41	51	31	164	47	34	51	35	167	23	33	28	33	117	32	25	32	35	124
252 Malaise and fatigue	11	16	15	21	63	11	11	16	11	49	11	9	11	8	39	11	25	15	21	72
253 Allergic reactions	6	2	10	7	25	7	5	9	3	24	2	9	6	2	19	2	8	9	7	26
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
255 Administrative/social admission	5	5	2	6	18	8	2	4	1	15	1	2	1	1	5	1	-	2	1	4
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
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	-	5	10
Total	402	399	436	382	1,619	333	328	339	290	1,290	374	429	447	452	1,702	473	509	543	356	1,881
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
2617 Adverse effects of medical drugs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	9
Total	41	48	51	47	187	35	29	35	34	133	25	36	35	34	130	28	36	25	50	139
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	10,897	44,159	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
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	
1 Infectious & parasitic diseases																				
1 Tuberculosis	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2	-	-	1	1	2
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
4 Mycoses	13	19	11	12	55	13	27	39	50	129	49	76	67	56	248	55	86	86	77	304
5 HIV infection	1	1	1	1	4	2	-	-	-	2	2	1	3	1	7	2	-	6	2	10
6 Hepatitis	42	30	28	37	137	30	27	30	27	114	29	15	4	3	51	8	6	9	4	27
7 Viral infection	55	49	39	37	180	33	32	41	38	144	45	58	79	79	261	69	75	72	73	289
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
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
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
Total	124	116	88	97	425	88	98	139	138	463	188	213	233	214	848	198	239	243	194	874
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
12 Cancer of esophagus	27	24	15	25	91	20	23	23	21	87	28	33	26	21	108	39	29	31	25	124
13 Cancer of stomach	20	13	10	13	56	14	9	20	13	56	10	8	11	10	39	20	10	10	9	49
14 Cancer of colon	75	75	74	77	301	79	84	88	102	353	132	143	141	118	534	109	91	130	96	426
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
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
17 Cancer of pancreas	18	18	13	12	61	25	17	23	13	78	34	27	37	37	135	21	25	28	36	110
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
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
20 Cancer; other respiratory and intrathoracic	-	-	-	-	-	-	-	-	1	1	1	-	3	-	4	-	-	1	-	1
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
22 Melanomas of skin	63	76	64	92	295	63	69	74	76	282	66	65	57	68	256	43	47	82	72	244
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
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
25 Cancer of uterus	35	31	36	34	136	27	41	41	34	143	44	67	59	50	220	47	71	85	72	275
26 Cancer of cervix	21	15	17	22	75	19	21	24	20	84	29	33	32	39	133	27	37	21	31	116
27 Cancer of ovary	13	5	13	16	47	9	18	5	9	41	21	38	43	35	137	45	46	43	37	171
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
29 Cancer of prostate	49	51	50	58	208	47	59	53	65	224	71	82	69	47	269	38	54	58	76	226
30 Cancer of testis	2	1	2	3	8	10	10	5	6	31	13	13	13	4	43	7	2	3	2	14
31 Cancer of other male genital organs	-	3	2	1	6	-	2	-	2	4	1	2	-	2	5	5	8	4	4	21
32 Cancer of bladder	199	213	182	218	812	206	209	220	253	888	226	302	226	238	992	184	233	184	208	809
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
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
35 Cancer of brain and nervous system	-	2	-	2	4	-	1	-	4	5	4	7	4	9	24	3	3	3	3	12
36 Cancer of thyroid	19	22	17	19	77	27	18	14	18	77	18	18	12	13	61	10	18	16	24	68
37 Hodgkin's disease	3	2	14	6	25	12	11	18	11	52	9	20	9	7	45	11	7	8	11	37
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
39 Leukemias	35	43	37	60	175	57	45	54	47	203	75	83	89	79	326	53	61	78	81	273
40 Multiple myeloma	31	36	21	16	104	16	10	19	20	65	43	31	33	43	150	27	19	31	20	97
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
42 Secondary malignancies	26	29	28	29	112	31	23	33	29	116	20	36	46	46	148	24	35	23	34	116
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
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

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
	1	2	3	4	1		2	3	4	1	2		3	4	1	2	3		4					
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count				
45 Maintenance chemotherapy; radiotherapy	16	14	9	10	49	8	3	8	4	23	65	86	55	23	229	21	16	20	5	62				
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 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				
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 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				
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				
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				
51 Other endocrine disorders	11	17	17	12	57	14	17	12	13	56	10	21	7	17	55	10	15	12	10	47				
52 Nutritional deficiencies	3	1	-	1	5	1	2	-	-	3	5	2	3	4	14	2	3	1	2	8				
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				
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				
55 Fluid and electrolyte disorders	1	3	-	2	6	2	3	-	2	7	1	1	4	3	9	2	2	3	3	10				
56 Cystic fibrosis	13	9	6	3	31	7	9	7	4	27	83	84	89	90	346	103	96	101	109	409				
57 Immunity disorders	1	3	2	1	7	-	1	5	5	11	3	5	5	3	16	4	4	4	40	52				
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				
Total	338	365	275	286	1,264	325	398	400	369	1,492	565	590	651	617	2,423	550	582	577	624	2,333				
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				
60 Acute posthemorrhagic anemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	-	3				
61 Sickle cell anemia	-	1	-	-	1	1	-	1	1	3	3	-	-	1	4	-	-	2	-	2				
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				
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				
64 Other hematologic conditions	3	4	-	2	9	1	1	2	-	4	8	-	1	2	11	1	1	1	3	6				
Total	177	177	169	142	665	138	148	199	173	658	196	211	194	195	796	176	192	207	170	745				
5 Mental disorders																								
650 Adjustment disorders	-	-	-	1	1	-	-	-	1	1	5	1	1	1	8	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				
652 Attention-deficit conduct and disruptive behavior disorders	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3	3	3	-	7	13				
653 Delirium dementia and amnesic and other cognitive disorders	1	-	1	-	2	-	1	2	4	7	1	-	-	2	3	3	1	2	4	10				
654 Developmental disorders	-	-	-	-	-	-	-	1	-	1	-	1	-	2	3	-	-	1	2	3				
655 Disorders usually diagnosed in infancy childhood or adolescence	-	-	-	-	-	-	-	-	-	-	1	-	1	1	3	-	1	2	-	3				
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				
658 Personality disorders	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-				
659 Schizophrenia and other psychotic disorders	-	-	-	-	-	-	-	1	-	1	3	2	3	2	10	2	1	4	3	10				
660 Alcohol-related disorders	-	-	-	-	-	-	1	-	-	1	1	4	3	4	12	2	1	4	22	29				
661 Substance-related disorders	2	5	1	4	12	2	1	-	2	5	6	8	5	4	23	5	8	8	34	55				
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				
670 Miscellaneous disorders	6	3	9	20	38	22	23	18	14	77	8	14	16	16	54	16	22	15	25	78				
Total	64	60	47	54	225	64	72	65	68	269	82	93	94	99	368	57	66	72	127	322				
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	-	-	-	-	-				
77 Encephalitis (except that caused by TB or STD)	-	-	-	-	-	1	-	-	-	1	1	4	-	-	5	2	1	1	-	4				

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
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count
78 Other CNS infection and poliomyelitis	-	1	1	-	2	-	-	-	-	-	1	-	3	2	6	3	-	-	-	3
79 Parkinson's disease	1	1	6	2	10	2	1	1	6	10	12	17	35	10	74	19	23	27	18	87
80 Multiple sclerosis	9	9	8	8	34	10	7	13	12	42	16	25	16	12	69	24	22	27	18	91
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
82 Paralysis	29	28	22	33	112	25	33	39	22	119	28	42	69	81	220	64	80	68	63	275
83 Epilepsy; convulsions	1	2	1	2	6	1	3	1	1	6	8	11	15	12	46	7	10	12	15	44
84 Headache; including migraine	50	51	45	42	188	54	63	66	46	229	74	86	84	87	331	95	91	111	107	404
85 Coma; stupor; and brain damage	-	-	-	1	1	-	-	1	-	1	-	-	-	-	-	1	-	9	3	13
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
87 Retinal detachments; defects; vascular occlusion; and retinopathy	592	551	612	437	2,192	378	567	562	479	1,986	458	492	485	421	1,856	453	471	538	487	1,949
88 Glaucoma	65	90	66	90	311	100	92	86	49	327	45	45	81	72	243	47	92	80	116	335
89 Blindness and vision defects	8	7	7	11	33	1	6	10	19	36	22	18	9	11	60	15	18	16	18	67
90 Inflammation; infection of eye (except that caused by TB or sexually transmitted disease)	8	12	6	12	38	10	6	4	3	23	8	5	1	8	22	4	10	17	10	41
91 Other eye disorders	107	123	82	109	421	130	116	118	99	463	89	86	108	92	375	104	110	111	134	459
92 Otitis media and related conditions	304	308	236	310	1,158	310	320	282	256	1,168	277	274	252	264	1,067	272	291	305	247	1,115
93 Conditions associated with dizziness or vertigo	4	1	3	4	12	2	9	3	8	22	12	21	24	28	85	17	15	34	38	104
94 Other ear and sense organ disorders	43	48	44	83	218	73	88	68	67	296	326	468	486	481	1,761	426	501	563	545	2,035
95 Other nervous system disorders	592	567	502	614	2,275	602	566	436	575	2,179	875	732	784	796	3,187	843	832	797	912	3,384
Total	3,147	2,983	2,752	2,907	11,789	2,851	3,104	2,950	2,806	11,711	3,305	3,499	3,747	3,585	14,136	3,412	3,814	3,910	3,978	15,114
7 Diseases of the circulatory system																				
96 Heart valve disorders	32	35	37	18	122	26	17	18	4	65	31	36	30	30	127	31	19	29	30	109
97 Peri-, endo-, and myocarditis; cardiomyopathy (except that caused by TB or STD)	13	14	12	11	50	15	16	17	10	58	16	11	28	14	69	19	10	8	19	56
98 Essential hypertension	4	15	8	9	36	13	13	20	10	56	28	42	27	23	120	21	21	16	26	84
99 Hypertension with complications and secondary hypertension	15	25	27	20	87	21	25	20	10	76	17	11	16	15	59	15	23	29	15	82
100 Acute myocardial infarction	1	1	2	4	8	5	2	3	7	17	8	15	19	17	59	9	9	20	13	51
101 Coronary atherosclerosis and other heart disease	175	198	164	168	705	166	217	124	70	577	233	266	243	263	1,005	224	254	240	189	907
102 Nonspecific chest pain	76	78	73	43	270	38	39	56	31	164	45	39	52	49	185	42	29	34	29	134
103 Pulmonary heart disease	5	7	3	7	22	9	13	2	2	26	16	12	23	21	72	28	24	34	23	109
104 Other and ill-defined heart disease	1	2	-	3	6	-	1	2	1	4	7	11	4	5	27	4	4	7	3	18
105 Conduction disorders	39	48	57	34	178	29	73	56	42	200	37	47	40	61	185	47	77	50	37	211
106 Cardiac dysrhythmias	68	72	76	62	278	74	80	98	84	336	185	194	145	114	638	134	144	148	177	603
107 Cardiac arrest and ventricular fibrillation	-	1	-	-	1	-	-	-	1	1	1	1	1	2	5	1	1	1	1	4
108 Congestive heart failure; nonhypertensive	7	4	6	12	29	9	14	11	14	48	12	18	20	19	69	20	13	15	19	67
109 Acute cerebrovascular disease	2	1	2	1	6	-	3	1	3	7	9	10	12	12	43	7	9	10	6	32
110 Occlusion or stenosis of precerebral arteries	-	-	2	1	3	2	1	1	3	7	6	1	6	4	17	3	8	2	5	18
111 Other and ill-defined cerebrovascular disease	1	1	1	-	3	-	1	-	-	1	6	18	9	12	45	10	30	11	16	67
112 Transient cerebral ischemia	-	-	1	1	1	-	2	2	1	5	1	2	2	-	5	2	-	1	1	4
113 Late effects of cerebrovascular disease	-	1	-	-	1	-	2	2	3	7	1	3	5	15	24	11	7	9	5	32
114 Peripheral and visceral atherosclerosis	33	41	46	32	152	25	46	42	30	143	277	318	349	256	1,200	247	284	302	113	946
115 Aortic; peripheral; and visceral artery aneurysms	4	2	4	2	12	5	6	4	7	22	9	4	7	9	29	4	5	8	7	24
116 Aortic and peripheral arterial embolism or thrombosis	1	1	-	1	3	-	2	-	-	2	3	5	2	2	12	-	4	1	2	7
117 Other circulatory disease	30	29	34	21	114	32	14	45	43	134	49	53	47	40	189	38	35	37	26	136

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					2013					2014					2015				
	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count
118 Phlebitis; thrombophlebitis and thromboembolism	7	2	7	3	19	3	4	9	8	24	7	14	15	17	53	10	11	10	11	42
119 Varicose veins of lower extremity	25	34	24	32	115	23	44	27	43	137	42	33	34	61	170	28	41	44	48	161
120 Hemorrhoids	177	152	103	121	553	96	106	70	68	340	89	109	78	69	345	67	77	87	95	326
121 Other diseases of veins and lymphatics	93	80	97	104	374	84	59	95	88	326	83	106	80	94	363	72	92	70	94	328
Total	809	844	785	710	3,148	675	800	725	583	2,783	1,218	1,379	1,294	1,224	5,115	1,094	1,231	1,223	1,010	4,558
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
123 Influenza	-	-	-	-	-	-	1	-	1	2	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
125 Acute bronchitis	2	2	-	2	6	-	1	-	1	2	6	6	5	7	24	9	4	10	7	30
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
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
128 Asthma	-	5	-	4	9	4	5	3	7	19	234	252	274	351	1,111	353	408	373	367	1,501
129 Aspiration pneumonitis; food/vomitus	-	-	-	-	-	-	-	1	-	1	-	1	-	1	2	2	1	2	3	8
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
131 Respiratory failure; insufficiency; arrest (adult)	1	-	2	-	3	1	-	1	-	2	11	6	10	11	38	11	11	11	13	46
132 Lung disease due to external agents	-	-	-	-	-	-	1	-	-	1	11	8	7	8	34	7	7	11	8	33
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
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
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
9 Diseases of the digestive system																				
135 Intestinal infection	-	1	-	-	1	2	-	-	-	2	-	-	-	3	3	6	5	6	5	22
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
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
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
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
140 Gastritis and duodenitis	250	173	188	177	788	146	137	102	109	494	123	128	126	180	557	146	165	184	152	647
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
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
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
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
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
146 Diverticulosis and diverticulitis	189	156	179	136	660	108	98	81	94	381	126	156	80	76	438	62	61	91	78	292
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
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
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
151 Other liver diseases	78	73	77	89	317	86	85	91	93	355	102	105	71	73	351	75	55	78	30	238
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
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
154 Noninfectious gastroenteritis	84	63	68	68	283	60	60	36	35	191	49	47	58	70	224	57	62	82	88	289
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
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
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
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
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

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
	1	2	3	4	1		2	3	4	1		2	3	4	1		2	3	4		
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	
159 Urinary tract infections	59	67	63	67	256	58	48	51	47	204	71	67	114	94	346	104	84	91	100	379	
160 Calculus of urinary tract	170	173	194	163	700	183	204	209	171	767	300	298	338	319	1,255	315	297	348	306	1,266	
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	
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	
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	
164 Hyperplasia of prostate	120	89	77	99	385	83	81	77	93	334	123	157	92	97	469	89	85	87	76	337	
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	
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	
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	
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	
169 Endometriosis	39	33	33	21	126	26	40	28	36	130	41	36	31	30	138	29	13	24	32	98	
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	
171 Menstrual disorders	175	195	164	177	711	170	168	190	168	696	158	186	181	181	706	162	202	178	100	642	
172 Ovarian cyst	35	38	28	38	139	26	26	34	30	116	35	24	20	22	101	33	19	32	34	118	
173 Menopausal disorders	56	66	55	55	232	76	83	61	63	283	79	84	79	78	320	76	74	88	79	317	
174 Female infertility	60	52	51	52	215	50	50	35	48	183	123	127	81	23	354	9	16	5	37	67	
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	
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	
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	
177 Spontaneous abortion	9	10	9	7	35	8	11	10	12	41	9	7	4	11	31	11	4	8	16	39	
178 Induced abortion	7	6	11	3	27	8	11	6	7	32	4	8	10	12	34	9	5	7	6	27	
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	
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	
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	
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	
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	
185 Prolonged pregnancy	55	61	66	56	238	13	14	19	19	65	32	39	55	41	167	32	49	43	31	155	
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	
187 Malposition; malpresentation	10	12	11	11	44	7	5	6	5	23	14	8	12	11	45	11	14	13	3	41	
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	
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	
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	
192 Umbilical cord complication	-	1	-	4	5	-	1	-	1	2	7	1	7	-	15	4	4	-	2	10	
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	
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	
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	
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	
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	

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
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count
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
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
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
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
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
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
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
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
206 Osteoporosis	1	5	1	4	11	2	5	2	5	14	7	4	7	8	26	3	1	2	2	8
207 Pathological fracture	18	17	9	11	55	16	11	18	14	59	18	22	13	15	68	13	20	18	13	64
208 Acquired foot deformities	197	205	160	238	800	227	212	177	243	859	186	157	171	199	713	175	195	142	200	712
209 Other acquired deformities	25	20	19	20	84	23	19	20	24	86	34	26	35	25	120	27	30	38	57	152
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
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
212 Other bone disease and musculoskeletal deformities	87	73	75	83	318	93	80	81	83	337	87	86	59	82	314	64	67	62	49	242
Total	3,900	3,944	3,265	4,051	15,160	3,916	4,156	3,623	4,080	15,775	4,424	5,057	4,416	4,587	18,484	3,997	4,572	4,462	4,964	17,995
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
214 Digestive congenital anomalies	6	5	10	14	35	10	9	7	4	30	23	9	13	5	50	6	8	3	4	21
215 Genitourinary congenital anomalies	20	26	29	31	106	36	33	28	33	130	38	35	31	30	134	28	30	50	29	137
216 Nervous system congenital anomalies	-	-	1	-	1	1	3	4	1	9	-	3	1	1	5	-	1	1	4	6
217 Other congenital anomalies	42	52	45	47	186	46	40	50	41	177	46	54	56	47	203	50	59	71	51	231
Total	79	89	95	104	367	102	90	95	81	368	118	113	114	93	438	93	106	134	96	429
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
220 Intrauterine hypoxia and birth asphyxia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
222 Hemolytic jaundice and perinatal jaundice	-	-	-	-	-	-	-	-	-	-	2	-	2	-	4	1	2	1	-	4
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
Total	32	45	28	38	143	30	30	47	27	134	37	40	43	37	157	45	53	47	24	169
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
226 Fracture of neck of femur (hip)	-	-	-	-	-	-	1	1	1	3	-	2	1	1	4	1	1	1	1	4
227 Spinal cord injury	1	2	1	1	5	-	-	-	1	1	-	3	1	1	5	1	-	1	-	2
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
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
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
231 Other fractures	25	29	24	26	104	26	28	31	22	107	23	31	20	21	95	14	23	25	5	67
232 Sprains and strains	208	242	192	219	861	211	227	173	198	809	241	238	202	234	915	231	258	189	238	916
233 Intracranial injury	1	4	3	1	9	1	-	3	3	7	1	2	5	3	11	4	3	3	1	11
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
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
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

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
	1	2	3	4	1		2	3	4	1	2		3	4	1	2	3		4					
CCS Single Level Group	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count			
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				
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				
239 Superficial injury; contusion	9	11	15	17	52	13	21	24	28	86	19	26	15	23	83	18	33	26	18	95				
240 Burns	-	3	1	3	7	2	2	3	3	10	1	19	8	5	33	6	5	9	9	29				
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	-	-	-	-	-				
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				
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				
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				
246 Fever of unknown origin	-	1	-	1	2	2	1	1	4	8	-	1	3	3	7	2	-	1	2	5				
247 Lymphadenitis	37	41	36	39	153	57	45	39	40	181	52	57	42	22	173	30	22	20	30	102				
248 Gangrene	2	4	5	4	15	10	2	6	5	23	2	5	9	3	19	10	14	1	7	32				
250 Nausea and vomiting	22	32	37	33	124	37	33	32	33	135	36	40	40	35	151	36	39	36	33	144				
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				
252 Malaise and fatigue	4	-	2	3	9	2	3	8	2	15	11	9	16	9	45	13	23	21	16	73				
253 Allergic reactions	15	23	19	20	77	27	22	22	28	99	65	96	62	99	322	75	162	120	90	447				
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				
255 Administrative/social admission	-	1	-	-	1	1	-	-	-	1	1	14	8	10	33	41	91	90	10	232				
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				
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				
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				
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				
18 Residual codes, unclassified, all Ecodes																								
259 Residual codes; unclassified	307	381	322	400	1,410	384	374	354	344	1,456	374	441	364	440	1,619	397	463	446	418	1,724				
Total	307	381	322	400	1,410	384	374	354	344	1,456	374	441	364	440	1,619	397	463	446	418	1,724				
Quarter/Yearly Total	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				

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										CPT										
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total	
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4		
CCS Single Level Procedure Category	1	2	3	4	Total	1	2	3	4	Total	1	2	3	4	Total	1	2	3	4	Total	
1 Operations on the nervous system																					
1 Incision & excision of CNS	33	42	33	38	146	27	40	46	42	155	46	43	37	37	163	26	34	31	27	118	
2 Insertion, replacem, rem of extracranial ventricular shunt	5	7	9	3	24	7	7	7	11	32	12	4	9	7	32	8	7	8	3	26	
3 Laminectomy, excision intervertebral disc	53	41	33	49	176	46	29	38	40	153	25	30	26	34	115	27	29	43	27	126	
4 Diagnostic spinal tap	81	98	100	85	364	70	93	124	94	381	60	65	104	75	304	74	85	72	89	320	
5 Insert cath, spinal stimulator, inject into spinal canal	17	16	25	15	73	24	9	15	15	63	17	19	24	14	74	29	40	26	28	123	
6 Decompression peripheral nerve	-	1	-	1	2	1	-	1	1	3	1	-	1	-	2	-	1	-	16	17	
7 Other diagnostic nervous system procedures	8	6	1	10	25	7	11	4	10	32	8	6	10	10	34	7	6	6	6	25	
8 Other non-OR or closed therapeutic nerv syst procs	7	9	11	6	33	6	8	6	6	26	6	4	4	8	22	12	4	4	10	30	
9 Other OR therapeutic nervous system procedures	39	32	35	22	128	28	24	31	27	110	36	25	24	17	102	29	25	16	41	111	
Total	243	252	247	229	971	216	221	272	246	955	211	196	239	202	848	212	231	206	247	896	
2 Operations on the endocrine system																					
10 Thyroidectomy, partial or complete	9	11	3	6	29	8	6	6	4	24	2	-	5	2	9	5	3	2	6	16	
11 Diagnostic endocrine procedures	2	-	1	1	4	1	-	1	1	3	-	1	1	-	2	1	-	-	2	3	
12 Other therapeutic endocrine procedures	8	16	4	10	38	8	3	7	7	25	8	3	3	7	21	5	9	8	4	26	
Total	19	27	8	17	71	17	9	14	12	52	10	4	9	9	32	11	12	10	12	45	
3 Operations on the eye																					
14 Glaucoma procedures	-	-	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	
16 Repair of retinal tear, detachment	-	1	-	-	1	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	
18 Diagnostic procedures on eye	2	-	-	-	2	-	-	-	-	-	-	2	-	-	2	-	-	-	-	-	
19 Other therapeutic procedures on eyelids, conjunctiva, cornea	1	1	3	5	10	-	4	6	3	13	4	5	3	2	14	2	3	-	1	6	
20 Other intraocular therapeutic procedures	1	-	1	-	2	-	-	-	-	-	-	-	2	1	3	-	1	1	-	2	
21 Other extraocular muscle & orbit therapeutic procedures	-	4	-	2	6	1	1	-	-	2	1	1	-	-	2	1	-	-	-	1	
Total	4	6	6	7	23	1	5	6	3	15	6	8	5	3	22	3	4	1	2	10	
4 Operations on the ear																					
23 Myringotomy	5	-	1	1	7	2	-	3	2	7	1	-	1	2	4	4	-	-	-	4	
24 Mastoidectomy	-	1	-	-	1	1	-	-	-	1	3	-	-	1	4	1	-	1	-	2	
25 Diagnostic procedures on ear	-	-	-	-	-	-	-	1	-	1	-	1	-	-	1	-	-	-	2	2	
26 Other therapeutic ear procedures	1	-	1	3	5	-	1	4	1	6	-	-	3	2	5	-	2	3	12	17	
Total	6	1	2	4	13	3	1	8	3	15	4	1	4	5	14	5	2	4	14	25	
5 Operations on the nose, mouth, and pharynx																					
27 Control of epistaxis	10	12	5	9	36	13	6	8	7	34	7	6	5	3	21	12	7	4	-	23	
28 Plastic procedures on nose	1	1	3	1	6	1	1	2	1	5	1	3	2	2	8	2	2	2	-	6	
29 Dental procedures	1	-	-	1	2	3	2	-	1	6	2	2	3	-	7	3	1	1	2	7	
30 Tonsillectomy and/or adenoidectomy	3	3	3	3	12	-	6	6	2	14	5	1	-	-	6	4	1	6	3	14	

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										CPT									
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Procedure Category																				
31 Diagnostic procedures on nose, mouth & pharynx	5	10	7	4	26	1	7	6	3	17	6	7	3	10	26	4	7	5	13	29
32 Other non-OR therapeutic procedures on nose, mouth & pharynx	-	6	5	6	17	5	5	4	7	21	2	2	5	4	13	1	3	5	1	10
33 Other OR therapeutic procedures on nose, mouth & pharynx	21	25	29	20	95	25	17	20	22	84	15	13	17	16	61	10	14	8	13	45
Total	41	57	52	44	194	48	44	46	43	181	38	34	35	35	142	36	35	31	32	134
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
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
36 Lobectomy or pneumonectomy	29	24	24	15	92	21	21	32	23	97	16	22	28	24	90	23	31	21	25	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
38 Other diagnostic procedures on lung & bronchus	6	-	4	5	15	1	6	1	2	10	1	-	-	3	4	1	2	2	1	6
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
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
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
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
Total	255	219	239	236	949	252	241	220	216	929	227	220	233	219	899	246	239	228	207	920
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
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
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
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
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
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
50 Extracorporeal circ auxiliary to open heart procedures	-	-	-	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
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
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
55 Peripheral vascular bypass	15	24	19	12	70	20	24	21	10	75	17	18	21	14	70	13	14	17	23	67
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
57 Creat, revis, rem of arterioy 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
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
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
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
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
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

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										CPT									
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Procedure Category	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
8 Operations on the hemic and lymphatic system																				
64 Bone marrow transplant	-	1	-	1	2	2	1	1	1	5	-	4	-	-	4	-	-	1	-	1
65 Bone marrow biopsy	9	18	19	19	65	24	14	24	15	77	25	26	19	14	84	19	18	21	15	73
66 Procedures on spleen	3	4	5	3	15	4	4	4	3	15	2	4	1	6	13	3	1	4	6	14
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
Total	41	50	53	41	185	45	29	36	28	138	38	49	28	33	148	32	30	41	29	132
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
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
71 Gastrostomy, temporary & permanent	16	17	15	13	61	18	16	12	13	59	10	18	17	17	62	17	16	16	9	58
72 Colostomy, temporary & permanent	9	2	2	5	18	3	5	4	3	15	-	3	3	2	8	4	1	4	11	20
73 Ileostomy & other enterostomy	1	5	3	3	12	5	8	3	4	20	1	1	1	4	7	4	1	3	1	9
74 Gastrectomy, partial & total	17	25	27	19	88	20	19	26	22	87	20	39	22	27	108	35	30	22	44	131
75 Small bowel resection	23	24	23	16	86	23	14	23	18	78	17	10	15	15	57	15	29	19	1	64
76 Colonoscopy & biopsy	55	49	54	45	203	64	52	55	43	214	36	54	47	39	176	50	51	73	22	196
77 Proctoscopy & anorectal biopsy	6	5	8	6	25	6	6	4	6	22	10	6	5	1	22	7	1	4	5	17
78 Colorectal resection	118	108	147	138	511	96	131	105	113	445	100	110	85	123	418	110	104	128	59	401
79 Local excision of large intestine lesion (not endoscopic)	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-	-	-	-	29	29
80 Appendectomy	94	117	112	96	419	95	93	99	73	360	72	74	85	73	304	47	58	56	41	202
81 Hemorrhoid procedures	1	-	3	1	5	-	2	-	-	2	1	1	-	2	4	1	-	-	1	2
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
83 Biopsy of liver	6	7	9	4	26	8	6	6	9	29	4	6	11	11	32	8	7	10	14	39
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
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
86 Other hernia repair	30	52	31	40	153	43	46	42	43	174	25	41	32	31	129	30	31	22	6	89
87 Laparoscopy	3	5	7	4	19	2	1	3	4	10	-	1	2	1	4	4	4	1	-	9
88 Abdominal paracentesis	60	53	62	67	242	58	60	62	60	240	79	55	67	71	272	57	66	55	1	179
89 Exploratory laparotomy	2	6	7	6	21	5	4	6	3	18	2	2	5	3	12	6	3	3	3	15
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
91 Peritoneal dialysis	1	3	2	5	11	-	1	3	4	8	-	-	-	4	4	-	4	3	-	7
92 Other bowel diagnostic procedures	2	2	1	-	5	-	-	-	2	2	-	-	-	-	-	1	-	1	78	80
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
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
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

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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										CPT									
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Procedure Category	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total
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
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
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
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
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
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
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
102 Ureteral catheterization	25	15	35	24	99	20	17	15	24	76	20	21	32	26	99	29	33	26	30	118
103 Nephrotomy & nephrostomy	12	13	12	21	58	13	9	12	19	53	18	13	13	18	62	11	10	8	7	36
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
105 Kidney transplant	2	7	5	7	21	7	6	5	7	25	7	7	9	4	27	2	7	3	5	17
106 Genitourinary incontinence procedures	5	1	-	2	8	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
107 Extracorporeal lithotripsy, urinary	1	-	-	1	2	-	1	-	-	1	-	-	-	-	-	1	2	1	4	8
108 Indwelling catheter	63	58	44	62	227	75	79	56	67	277	68	55	85	93	301	93	79	48	38	258
109 Procedures on the urethra	5	3	1	-	9	5	5	1	1	12	1	1	6	4	12	3	2	3	1	9
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
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
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
Total	215	196	194	204	809	214	217	181	218	830	207	207	239	246	899	220	214	174	199	807
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
114 Open prostatectomy	27	28	22	30	107	24	24	27	32	107	37	25	26	25	113	21	28	27	33	109
115 Circumcision	-	-	1	-	1	-	-	1	-	1	-	3	-	-	3	-	1	-	-	1
116 Diagnostic procedures, male genital	-	-	-	1	1	-	1	2	-	3	-	-	1	1	2	3	1	-	1	5
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
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
Total	48	45	43	53	189	45	47	52	47	191	55	43	43	44	185	43	51	46	54	194
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
120 Other operations on ovary	5	4	4	3	16	1	3	1	1	6	1	-	-	3	4	2	1	-	7	10
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
123 Other operations on fallopian tubes	-	1	2	-	3	-	1	2	-	3	-	1	1	2	4	1	-	1	42	44
124 Hysterectomy, abdominal & vaginal	103	82	53	79	317	56	53	56	45	210	44	60	47	36	187	42	35	43	49	169
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

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Inpatient Procedures in Vermont Hospitals: CCS Single and High Level Groups by Discharge Year and Quarter
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CCS High Level Procedure Group	ICD-9-CM										CPT									
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Procedure Category	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total	1	2	3	4	Yearly Total
126 Abortion (termination of pregnancy)	-	-	-	-	-	1	-	-	-	1	-	1	-	-	1	-	-	-	-	-
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
128 Diagnostic dilatation & curettage (D&C)	3	2	1	2	8	-	2	-	1	3	1	-	1	1	3	-	1	1	3	5
129 Repair cystocele & rectocele, oblit of vaginal vault	1	5	-	1	7	1	3	1	-	5	2	-	1	2	5	-	-	1	-	1
130 Other diagnostic procedures, female organs	5	1	4	4	14	-	2	-	2	4	4	3	1	-	8	1	-	-	4	5
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
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
Total	170	138	112	143	563	99	112	89	80	380	81	107	88	75	351	84	72	73	501	730
13 Obstetrical procedures																				
122 Removal of ectopic pregnancy	4	3	1	3	11	-	1	1	-	2	2	2	-	1	5	-	1	5	-	6
133 Episiotomy	31	41	33	24	129	25	25	29	18	97	27	18	14	20	79	19	20	21	28	88
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
135 Forceps, vacuum & breech delivery	44	61	42	45	192	36	36	42	42	156	44	55	34	48	181	46	49	58	-	153
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
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
138 Diagnostic amniocentesis	-	2	1	-	3	-	-	2	1	3	1	-	-	-	1	-	1	-	-	1
139 Fetal monitoring	142	121	134	158	555	134	128	118	97	477	88	113	109	101	411	69	65	83	-	217
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
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
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
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
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
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
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
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
149 Arthroscopy	1	1	-	1	3	2	1	-	3	6	-	1	-	-	1	-	-	1	1	2
150 Division of joint capsule, ligament or cartilage	3	-	-	2	5	2	1	-	-	3	-	1	-	-	1	-	-	-	1	1
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
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
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
155 Arthrocentesis	16	23	22	27	88	18	22	26	17	83	18	23	17	20	78	17	21	18	10	66

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										CPT									
	2012				Yearly Total	2013				Yearly Total	2014				Yearly Total	2015				Yearly Total
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
CCS Single Level Procedure Category																				
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
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
158 Spinal fusion	135	144	129	168	576	164	155	132	118	569	140	157	145	174	616	160	159	145	187	651
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
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
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
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
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
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
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
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
166 Lumpectomy, quadrantectomy of breast	1	1	-	1	3	2	2	2	2	8	2	-	-	1	3	2	-	2	2	6
167 Mastectomy	9	13	8	10	40	19	17	10	7	53	9	10	10	11	40	8	13	15	14	50
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
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
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
172 Skin graft	16	13	20	17	66	10	14	7	8	39	8	7	10	7	32	6	10	6	10	32
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
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
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
Total	175	189	206	185	755	211	212	220	167	810	161	176	209	157	703	184	202	224	226	836
16 Miscellaneous diagnostic and therapeutic procs																				
176 Other organ transplantation	-	-	2	-	2	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-
216 Respiratory intubation & mechanical ventilation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	127	127
221 Nasogastric tube	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	54	54
224 Cancer chemotherapy	1	1	-	1	3	-	-	-	-	-	-	-	1	1	2	1	-	-	-	1
226 Other diagnostic radiology & related techniques	-	2	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
227 Other diagnostic procedures (interview, eval, consult)	1	-	1	2	4	2	-	2	3	7	1	2	1	1	5	2	3	2	1	8
229 Nonoperative removal of foreign body	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7	7
231 Other therapeutic procedures	56	37	51	51	195	55	55	53	63	226	59	62	61	52	234	64	80	54	146	344
Total	58	40	54	54	206	57	55	55	66	233	60	64	63	55	242	67	83	56	335	541
Totals by Quarter/Year	5,742	5,762	5,773	5,736	23,013	5,591	5,586	5,750	5,289	22,216	5,320	5,421	5,411	5,346	21,498	5,415	5,471	5,576	4,834	21,296

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
	1	2	3	4		1	2	3	4		1	2	3	4		1	2	3	4	
41 Other non-OR therapeutic procedures on respiratory system	4	7	5	3	19	6	5	5	8	24	9	15	5	2	31	2	2	4	3	11
42 Other OR therapeutic procedures on respiratory system	28	34	28	36	126	22	26	34	19	101	19	30	35	45	129	40	30	36	35	141
Total	355	393	374	704	1,826	627	708	633	651	2,619	2,270	2,604	2,589	2,946	10,409	2,856	3,087	3,158	3,075	12,176
7 Operations on the cardiovascular system																				
43 Heart valve procedures	-	-	-	-	-	-	2	-	-	2	-	-	1	1	2	-	-	-	-	-
45 Percutaneous transluminal coronary angioplasty (PTCA)	91	96	75	74	336	70	91	35	6	202	14	18	4	7	43	6	9	4	4	23
47 Diagnostic cardiac catheterization, coronary arteriography	217	219	192	167	795	190	180	171	81	622	260	294	295	295	1,144	276	253	298	254	1,081
48 Insert, revis, replacet, rem pacemaker or cardioverter/defib	76	78	105	73	332	73	123	114	110	420	100	117	102	114	433	78	110	97	198	483
49 Other OR heart procedures	5	1	5	19	30	9	29	13	47	98	57	53	3	3	116	1	1	1	4	7
51 Endarterectomy, vessel of head & neck	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
52 Aortic resection, replacement or anastomosis	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	1	-	1
53 Varicose vein stripping, lower limb	18	36	26	30	110	28	23	17	24	92	28	19	46	72	165	50	56	46	53	205
54 Other vascular catheterization, not heart	196	235	197	195	823	184	147	164	185	680	195	214	283	283	975	276	284	257	281	1,098
55 Peripheral vascular bypass	-	-	-	-	-	-	3	-	-	3	-	-	-	-	-	-	-	-	-	-
56 Other vascular bypass & shunt, not heart	-	-	-	-	-	1	1	-	-	2	1	-	1	3	5	1	2	2	1	6
57 Creat, revis, rem of arterioy fistula or cannula for dialys	23	33	40	30	126	34	32	25	21	112	33	31	35	29	128	32	44	42	30	148
58 Hemodialysis	1	-	-	1	2	-	-	-	3	3	4	1	-	-	5	-	-	-	12	12
59 Other OR procedures on vessels of head & neck	1	3	5	3	12	1	4	5	5	15	9	5	24	16	54	21	21	28	27	97
60 Embolectomy & endarterectomy of lower limbs	-	1	-	-	1	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-
61 Other OR procedures on vessels other than head & neck	185	160	187	189	721	164	153	199	186	702	190	214	118	102	624	75	105	114	103	397
62 Other diagnostic cardiovascular procedures	63	65	61	39	228	53	45	71	37	206	207	230	246	165	848	149	185	169	174	677
63 Other non-OR therapeutic cardiovascular procedures	16	18	15	15	64	26	14	19	22	81	570	672	765	722	2,729	729	711	817	779	3,036
Total	892	945	908	835	3,580	833	847	833	728	3,241	1,668	1,868	1,924	1,813	7,273	1,694	1,781	1,876	1,920	7,271
8 Operations on the hemic and lymphatic system																				
64 Bone marrow transplant	3	5	1	-	9	1	3	1	2	7	7	4	6	6	23	13	2	9	14	38
65 Bone marrow biopsy	57	47	45	54	203	62	59	70	59	250	52	49	49	32	182	11	11	7	12	41
66 Procedures on spleen	-	1	-	-	1	-	-	1	1	2	1	1	2	1	5	-	-	-	1	1
67 Other therap procedures, hemic & lymphatic system	69	90	80	66	305	83	72	78	68	301	72	86	88	50	296	54	44	31	46	175
Total	129	143	126	120	518	146	134	150	130	560	132	140	145	89	506	78	57	47	73	255
9 Operations on the digestive system																				
68 Injection or ligation of esophageal varices	-	-	-	-	-	-	-	-	-	-	1	-	13	12	26	14	15	9	9	47
69 Esophageal dilatation	100	116	102	113	431	106	112	111	101	430	85	111	119	151	466	116	118	123	127	484
70 Upper gastrointestinal endoscopy, biopsy	1,492	1,416	1,393	1,288	5,589	1,328	1,365	1,338	1,212	5,243	1,262	1,320	1,278	1,268	5,128	1,194	1,317	1,324	1,274	5,109
71 Gastrostomy, temporary & permanent	14	19	13	19	65	10	17	14	17	58	35	29	51	38	153	33	41	38	40	152
72 Colostomy, temporary & permanent	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	2
73 Ileostomy & other enterostomy	1	1	1	-	3	1	3	4	1	9	4	8	2	5	19	3	2	3	6	14
75 Small bowel resection	-	-	-	-	-	-	-	-	-	-	1	-	-	2	3	-	1	-	-	1
76 Colonoscopy & biopsy	3,146	3,134	2,893	3,117	12,290	3,061	3,182	3,186	3,269	12,698	3,029	3,202	5,694	6,011	17,936	5,501	6,106	5,662	5,887	23,156
77 Proctoscopy & anorectal biopsy	128	160	128	107	523	98	101	100	88	387	115	150	154	129	548	130	152	159	174	615
78 Colorectal resection	-	-	3	1	4	-	1	1	1	3	-	-	5	3	8	8	3	2	4	17
79 Local excision of large intestine lesion (not endoscopic)	-	-	-	-	-	1	-	1	-	2	-	1	-	-	1	1	-	-	1	2
80 Appendectomy	10	13	13	17	53	14	13	15	15	57	11	16	9	8	44	16	20	8	13	57
81 Hemorrhoid procedures	73	55	46	64	238	52	47	45	43	187	51	49	46	58	204	47	58	55	66	226
82 Endoscopic retrograde cannulation of pancreas (ERCP)	10	8	3	12	33	5	9	6	13	33	2	10	37	46	95	27	32	58	29	146
83 Biopsy of liver	84	63	60	71	278	53	65	67	57	242	49	45	2	1	97	1	1	-	-	2
84 Cholecystectomy & common duct exploration	306	337	327	332	1,302	314	295	298	286	1,193	261	287	266	276	1,090	241	290	256	265	1,052
85 Inguinal & femoral hernia repair	341	306	258	311	1,216	334	328	307	325	1,294	322	305	249	298	1,174	277	283	256	302	1,118
86 Other hernia repair	199	203	180	205	787	203	217	216	239	875	214	206	224	242	886	229	227	167	242	865
87 Laparoscopy	22	18	9	25	74	22	22	19	25	88	22	13	17	26	78	15	34	19	18	86
88 Abdominal paracentesis	51	38	61	72	222	69	52	70	63	254	79	74	61	67	281	64	55	73	66	258

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