

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Alaska
8 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 172 | 788 | 21.8% | 3.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 119 | 181 | 65.7% | 1.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 56 | 65 | 86.2% | 1.2 |
| 247 : Perc cardiovascular proc w drug-eluting stent w/o MCC | 34 | 148 | 23.0% | 2.4 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 30 | 45 | 66.7% | 2.7 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 17 | 40 | 42.5% | 2.5 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 13 | 25 | 52.0% | 2.0 |
| 473 : Cervical spinal fusion w/o CC/MCC | 13 | 32 | 40.6% | 1.9 |
| 039 : Extracranial procedures w/o CC/MCC | 11 | 42 | 26.2% | 2.0 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 11 | 22 | 50.0% | 2.2 |
| Top Surgical DRGs | 476 | 1,388 | 34.3% | 2.6 |
| All Surgical DRGs | 748 | 4,623 | 16.2% | 6.8 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Alabama
81 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,520 | 6,296 | 24.1% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 764 | 1,135 | 67.3% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 430 | 577 | 74.5% | 1.4 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 303 | 424 | 71.5% | 1.9 |
| 460 : Spinal fusion except cervical w/o MCC | 256 | 1,117 | 22.9% | 2.7 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 250 | 1,423 | 17.6% | 2.7 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 221 | 468 | 47.2% | 3.8 |
| 473 : Cervical spinal fusion w/o CC/MCC | 192 | 250 | 76.8% | 1.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 188 | 373 | 50.4% | 2.1 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 168 | 301 | 55.8% | 2.5 |
| 472 : Cervical spinal fusion w CC | 147 | 344 | 42.7% | 2.8 |
| 621 : OR procedures for obesity w/o CC/MCC | 128 | 188 | 68.1% | 1.4 |
| 038 : Extracranial procedures w CC | 107 | 244 | 43.9% | 3.0 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 96 | 182 | 52.7% | 2.3 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 88 | 110 | 80.0% | 1.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 86 | 144 | 59.7% | 2.3 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 74 | 242 | 30.6% | 2.2 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 72 | 438 | 16.4% | 2.8 |
| 254 : Other vascular procedures w/o CC/MCC | 68 | 209 | 32.5% | 2.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 64 | 192 | 33.3% | 2.3 |
| Top Surgical DRGs | 5,222 | 14,657 | 35.6% | 2.4 |
| All Surgical DRGs | 7,315 | 42,423 | 17.2% | 5.6 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Arkansas
45 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 958 | 4,348 | 22.0% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 725 | 990 | 73.2% | 1.5 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 428 | 591 | 72.4% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 325 | 1,079 | 30.1% | 2.2 |
| 039 : Extracranial procedures w/o CC/MCC | 296 | 359 | 82.5% | 1.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 188 | 266 | 70.7% | 1.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 169 | 221 | 76.5% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 169 | 327 | 51.7% | 1.8 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 156 | 221 | 70.6% | 1.8 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 142 | 236 | 60.2% | 2.5 |
| 473 : Cervical spinal fusion w/o CC/MCC | 112 | 155 | 72.3% | 1.5 |
| 038 : Extracranial procedures w CC | 103 | 186 | 55.4% | 2.3 |
| 460 : Spinal fusion except cervical w/o MCC | 102 | 441 | 23.1% | 2.6 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 97 | 234 | 41.5% | 2.0 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 75 | 94 | 79.8% | 1.4 |
| 467 : Revision of hip or knee replacement w CC | 64 | 271 | 23.6% | 3.3 |
| 472 : Cervical spinal fusion w CC | 64 | 165 | 38.8% | 2.7 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 58 | 598 | 9.7% | 4.4 |
| 253 : Other vascular procedures w CC | 51 | 244 | 20.9% | 4.1 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 50 | 139 | 36.0% | 2.6 |
| Top Surgical DRGs | 4,332 | 11,165 | 38.8% | 2.3 |
| All Surgical DRGs | 5,805 | 29,031 | 20.0% | 4.9 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Arizona
61 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,930 | 7,522 | 39.0% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,499 | 1,875 | 79.9% | 1.4 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 653 | 830 | 78.7% | 1.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 516 | 803 | 64.3% | 1.7 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 365 | 1,428 | 25.6% | 2.3 |
| 039 : Extracranial procedures w/o CC/MCC | 317 | 409 | 77.5% | 1.4 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 244 | 778 | 31.4% | 2.3 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 224 | 372 | 60.2% | 2.1 |
| 460 : Spinal fusion except cervical w/o MCC | 211 | 976 | 21.6% | 3.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 200 | 514 | 38.9% | 2.1 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 148 | 280 | 52.9% | 2.0 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 120 | 397 | 30.2% | 4.7 |
| 621 : OR procedures for obesity w/o CC/MCC | 113 | 187 | 60.4% | 1.5 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 111 | 139 | 79.9% | 1.3 |
| 473 : Cervical spinal fusion w/o CC/MCC | 100 | 213 | 46.9% | 1.9 |
| 229 : Other cardiothoracic procedures w/o MCC | 96 | 211 | 45.5% | 3.3 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 88 | 258 | 34.1% | 2.2 |
| 472 : Cervical spinal fusion w CC | 71 | 345 | 20.6% | 3.4 |
| 038 : Extracranial procedures w CC | 69 | 181 | 38.1% | 2.8 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 69 | 481 | 14.3% | 5.3 |
| Top Surgical DRGs | 8,144 | 18,199 | 44.7% | 2.2 |
| All Surgical DRGs | 10,667 | 49,745 | 21.4% | 4.9 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
California
290 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 7,445 | 24,792 | 30.0% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 2,608 | 4,125 | 63.2% | 1.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 1,543 | 2,551 | 60.5% | 1.8 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 1,259 | 1,731 | 72.7% | 1.8 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 992 | 4,204 | 23.6% | 2.5 |
| 039 : Extracranial procedures w/o CC/MCC | 861 | 1,141 | 75.5% | 1.5 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 656 | 1,795 | 36.5% | 4.7 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 414 | 1,237 | 33.5% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 404 | 726 | 55.6% | 2.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 350 | 633 | 55.3% | 1.6 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 342 | 802 | 42.6% | 2.4 |
| 460 : Spinal fusion except cervical w/o MCC | 326 | 2,832 | 11.5% | 3.5 |
| 472 : Cervical spinal fusion w CC | 272 | 1,354 | 20.1% | 3.5 |
| 038 : Extracranial procedures w CC | 238 | 655 | 36.3% | 3.2 |
| 473 : Cervical spinal fusion w/o CC/MCC | 236 | 659 | 35.8% | 2.3 |
| 229 : Other cardiothoracic procedures w/o MCC | 222 | 658 | 33.7% | 3.4 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 208 | 1,581 | 13.2% | 3.0 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 204 | 3,098 | 6.6% | 5.3 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 192 | 936 | 20.5% | 2.8 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 186 | 264 | 70.5% | 1.5 |
| Top Surgical DRGs | 18,958 | 55,774 | 34.0% | 2.6 |
| All Surgical DRGs | 26,766 | 175,083 | 15.3% | 5.9 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Colorado
50 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,560 | 6,489 | 39.5% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,142 | 1,643 | 69.5% | 1.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 291 | 386 | 75.4% | 1.6 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 282 | 925 | 30.5% | 2.1 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 247 | 394 | 62.7% | 1.7 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 154 | 389 | 39.6% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 136 | 788 | 17.3% | 3.1 |
| 039 : Extracranial procedures w/o CC/MCC | 129 | 168 | 76.8% | 1.5 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 109 | 188 | 58.0% | 2.1 |
| 472 : Cervical spinal fusion w CC | 105 | 315 | 33.3% | 3.0 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 92 | 419 | 22.0% | 4.2 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 89 | 243 | 36.6% | 4.1 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 88 | 743 | 11.8% | 2.8 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 86 | 187 | 46.0% | 2.4 |
| 473 : Cervical spinal fusion w/o CC/MCC | 82 | 199 | 41.2% | 2.1 |
| 467 : Revision of hip or knee replacement w CC | 60 | 404 | 14.9% | 4.0 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 58 | 141 | 41.1% | 2.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 54 | 146 | 37.0% | 1.8 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 49 | 155 | 31.6% | 2.1 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 45 | 57 | 78.9% | 1.3 |
| Top Surgical DRGs | 5,858 | 14,379 | 40.7% | 2.3 |
| All Surgical DRGs | 7,735 | 34,551 | 22.4% | 4.8 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Connecticut
30 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,901 | 4,261 | 44.6% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 428 | 606 | 70.6% | 1.6 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 155 | 281 | 55.2% | 1.8 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 108 | 607 | 17.8% | 2.7 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 104 | 175 | 59.4% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 87 | 131 | 66.4% | 2.1 |
| 039 : Extracranial procedures w/o CC/MCC | 80 | 111 | 72.1% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 72 | 160 | 45.0% | 2.0 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 59 | 289 | 20.4% | 5.6 |
| 621 : OR procedures for obesity w/o CC/MCC | 51 | 120 | 42.5% | 1.8 |
| 460 : Spinal fusion except cervical w/o MCC | 47 | 491 | 9.6% | 3.3 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 47 | 127 | 37.0% | 2.1 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 39 | 49 | 79.6% | 1.4 |
| 473 : Cervical spinal fusion w/o CC/MCC | 37 | 73 | 50.7% | 2.0 |
| 467 : Revision of hip or knee replacement w CC | 35 | 245 | 14.3% | 3.9 |
| 243 : Permanent cardiac pacemaker implant w CC | 33 | 290 | 11.4% | 3.7 |
| 660 : Kidney & ureter procedures for non-neoplasm w CC | 33 | 186 | 17.7% | 3.8 |
| 254 : Other vascular procedures w/o CC/MCC | 31 | 96 | 32.3% | 2.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 30 | 70 | 42.9% | 2.7 |
| 038 : Extracranial procedures w CC | 30 | 72 | 41.7% | 3.5 |
| Top Surgical DRGs | 3,407 | 8,440 | 40.4% | 2.4 |
| All Surgical DRGs | 4,394 | 24,015 | 18.3% | 5.8 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

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Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
District of Columbia
7 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 226 | 616 | 36.7% | 2.7 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 82 | 134 | 61.2% | 2.1 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 62 | 119 | 52.1% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 43 | 242 | 17.8% | 2.9 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 30 | 52 | 57.7% | 2.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 26 | 151 | 17.2% | 2.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 26 | 64 | 40.6% | 3.5 |
| 039 : Extracranial procedures w/o CC/MCC | 22 | 30 | 73.3% | 1.6 |
| 473 : Cervical spinal fusion w/o CC/MCC | 20 | 47 | 42.6% | 2.2 |
| 708 : Major male pelvic procedures w/o CC/MCC | 20 | 24 | 83.3% | 1.2 |
| 472 : Cervical spinal fusion w CC | 19 | 107 | 17.8% | 5.0 |
| 165 : Major chest procedures w/o CC/MCC | 16 | 49 | 32.7% | 2.7 |
| 460 : Spinal fusion except cervical w/o MCC | 15 | 301 | 5.0% | 4.3 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 15 | 91 | 16.5% | 3.2 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 14 | 151 | 9.3% | 5.8 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 13 | 109 | 11.9% | 5.6 |
| 252 : Other vascular procedures w MCC | 12 | 206 | 5.8% | 10.5 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 11 | 31 | 35.5% | 3.6 |
| 747 : Vagina, cervix & vulva procedures w/o CC/MCC | 11 | 15 | 73.3% | 1.3 |
| Top Surgical DRGs | 683 | 2,539 | 26.9% | 3.9 |
| All Surgical DRGs | 1,056 | 9,191 | 11.5% | 8.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Delaware
6 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 619 | 1,134 | 54.6% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 245 | 287 | 85.4% | 1.3 |
| 039 : Extracranial procedures w/o CC/MCC | 111 | 133 | 83.5% | 1.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 94 | 149 | 63.1% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 77 | 110 | 70.0% | 1.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 62 | 91 | 68.1% | 2.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 47 | 63 | 74.6% | 1.3 |
| 460 : Spinal fusion except cervical w/o MCC | 41 | 221 | 18.6% | 3.0 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 38 | 82 | 46.3% | 2.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 35 | 270 | 13.0% | 2.9 |
| 467 : Revision of hip or knee replacement w CC | 25 | 86 | 29.1% | 4.1 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 23 | 157 | 14.6% | 2.9 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 21 | 29 | 72.4% | 1.5 |
| 165 : Major chest procedures w/o CC/MCC | 21 | 61 | 34.4% | 2.5 |
| 473 : Cervical spinal fusion w/o CC/MCC | 16 | 57 | 28.1% | 2.4 |
| 038 : Extracranial procedures w CC | 14 | 40 | 35.0% | 4.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 12 | 32 | 37.5% | 3.1 |
| 254 : Other vascular procedures w/o CC/MCC | 11 | 53 | 20.8% | 3.0 |
| Top Surgical DRGs | 1,512 | 3,055 | 49.5% | 2.3 |
| All Surgical DRGs | 1,841 | 9,248 | 19.9% | 6.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Florida
165 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 6,202 | 23,239 | 26.7% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 2,978 | 4,918 | 60.6% | 1.9 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 1,397 | 2,593 | 53.9% | 2.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 1,119 | 5,413 | 20.7% | 2.7 |
| 039 : Extracranial procedures w/o CC/MCC | 1,104 | 1,484 | 74.4% | 1.6 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 837 | 1,994 | 42.0% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 595 | 1,064 | 55.9% | 2.3 |
| 460 : Spinal fusion except cervical w/o MCC | 567 | 3,118 | 18.2% | 3.2 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 538 | 1,578 | 34.1% | 5.0 |
| 473 : Cervical spinal fusion w/o CC/MCC | 396 | 768 | 51.6% | 1.9 |
| 621 : OR procedures for obesity w/o CC/MCC | 369 | 674 | 54.7% | 1.6 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 349 | 1,098 | 31.8% | 2.3 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 320 | 1,293 | 24.7% | 2.5 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 297 | 374 | 79.4% | 1.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 290 | 577 | 50.3% | 2.4 |
| 472 : Cervical spinal fusion w CC | 281 | 998 | 28.2% | 3.5 |
| 038 : Extracranial procedures w CC | 266 | 770 | 34.5% | 3.5 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 224 | 1,300 | 17.2% | 2.8 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 220 | 3,291 | 6.7% | 5.6 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 214 | 985 | 21.7% | 3.0 |
| Top Surgical DRGs | 18,563 | 57,529 | 32.3% | 2.7 |
| All Surgical DRGs | 25,641 | 174,291 | 14.7% | 5.8 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Georgia
99 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 3,233 | 6,901 | 46.8% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,086 | 1,385 | 78.4% | 1.5 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 603 | 823 | 73.3% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 492 | 623 | 79.0% | 1.4 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 346 | 1,902 | 18.2% | 2.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 327 | 450 | 72.7% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 287 | 594 | 48.3% | 2.1 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 270 | 698 | 38.7% | 3.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 254 | 377 | 67.4% | 2.2 |
| 460 : Spinal fusion except cervical w/o MCC | 251 | 1,271 | 19.7% | 3.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 216 | 814 | 26.5% | 2.6 |
| 621 : OR procedures for obesity w/o CC/MCC | 189 | 281 | 67.3% | 1.4 |
| 473 : Cervical spinal fusion w/o CC/MCC | 179 | 323 | 55.4% | 2.2 |
| 038 : Extracranial procedures w CC | 165 | 336 | 49.1% | 3.0 |
| 472 : Cervical spinal fusion w CC | 106 | 389 | 27.2% | 3.9 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 102 | 230 | 44.3% | 2.7 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 96 | 1,298 | 7.4% | 5.4 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 90 | 102 | 88.2% | 1.2 |
| 254 : Other vascular procedures w/o CC/MCC | 81 | 246 | 32.9% | 2.6 |
| 467 : Revision of hip or knee replacement w CC | 69 | 464 | 14.9% | 5.1 |
| Top Surgical DRGs | 8,442 | 19,507 | 43.3% | 2.7 |
| All Surgical DRGs | 11,067 | 60,826 | 18.2% | 6.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Hawaii
12 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 199 | 551 | 36.1% | 2.8 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 44 | 67 | 65.7% | 2.1 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 39 | 69 | 56.5% | 2.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 27 | 124 | 21.8% | 2.5 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 21 | 39 | 53.8% | 2.9 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 19 | 23 | 82.6% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 19 | 38 | 50.0% | 2.3 |
| 039 : Extracranial procedures w/o CC/MCC | 16 | 22 | 72.7% | 1.9 |
| 462 : Bilateral or multiple major joint procs of lower extremity w/o MCC | 16 | 27 | 59.3% | 2.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 15 | 41 | 36.6% | 1.8 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 11 | 31 | 35.5% | 2.3 |
| 708 : Major male pelvic procedures w/o CC/MCC | 11 | 46 | 23.9% | 1.9 |
| Top Surgical DRGs | 437 | 1,078 | 40.5% | 2.5 |
| All Surgical DRGs | 660 | 5,099 | 12.9% | 7.4 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Iowa
34 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,934 | 5,181 | 37.3% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 692 | 1,005 | 68.9% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 232 | 265 | 87.5% | 1.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 219 | 853 | 25.7% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 149 | 249 | 59.8% | 1.7 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 119 | 165 | 72.1% | 1.9 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 117 | 167 | 70.1% | 1.9 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 107 | 292 | 36.6% | 3.8 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 97 | 222 | 43.7% | 2.3 |
| 460 : Spinal fusion except cervical w/o MCC | 93 | 471 | 19.7% | 2.9 |
| 038 : Extracranial procedures w CC | 76 | 113 | 67.3% | 2.2 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 66 | 77 | 85.7% | 1.3 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 65 | 117 | 55.6% | 2.4 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 53 | 502 | 10.6% | 4.7 |
| 621 : OR procedures for obesity w/o CC/MCC | 49 | 73 | 67.1% | 1.4 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 43 | 416 | 10.3% | 5.3 |
| 254 : Other vascular procedures w/o CC/MCC | 40 | 96 | 41.7% | 2.2 |
| 467 : Revision of hip or knee replacement w CC | 39 | 314 | 12.4% | 4.4 |
| 708 : Major male pelvic procedures w/o CC/MCC | 39 | 62 | 62.9% | 1.5 |
| 215 : Other heart assist system implant | 35 | 115 | 30.4% | 5.8 |
| Top Surgical DRGs | 4,264 | 10,755 | 39.6% | 2.5 |
| All Surgical DRGs | 5,362 | 25,040 | 21.4% | 4.9 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Idaho
16 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 861 | 1,726 | 49.9% | 2.0 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 366 | 498 | 73.5% | 1.5 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 185 | 217 | 85.3% | 1.3 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 111 | 392 | 28.3% | 2.0 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 102 | 153 | 66.7% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 87 | 145 | 60.0% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 66 | 75 | 88.0% | 1.2 |
| 621 : OR procedures for obesity w/o CC/MCC | 54 | 83 | 65.1% | 1.5 |
| 473 : Cervical spinal fusion w/o CC/MCC | 52 | 84 | 61.9% | 1.6 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 44 | 69 | 63.8% | 1.9 |
| 472 : Cervical spinal fusion w CC | 42 | 108 | 38.9% | 2.5 |
| 467 : Revision of hip or knee replacement w CC | 35 | 115 | 30.4% | 3.1 |
| 460 : Spinal fusion except cervical w/o MCC | 34 | 218 | 15.6% | 2.8 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 33 | 61 | 54.1% | 2.1 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 32 | 252 | 12.7% | 2.8 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 25 | 63 | 39.7% | 2.1 |
| 520 : Back & neck proc exc spinal fusion w/o CC/MCC | 24 | 55 | 43.6% | 1.9 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 21 | 134 | 15.7% | 4.9 |
| 419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC | 19 | 47 | 40.4% | 2.1 |
| 254 : Other vascular procedures w/o CC/MCC | 18 | 44 | 40.9% | 2.1 |
| Top Surgical DRGs | 2,211 | 4,539 | 48.7% | 2.1 |
| All Surgical DRGs | 2,879 | 10,827 | 26.6% | 4.1 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Illinois
124 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 4,382 | 15,664 | 28.0% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,619 | 2,489 | 65.0% | 1.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 708 | 1,239 | 57.1% | 1.8 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 675 | 2,851 | 23.7% | 2.5 |
| 039 : Extracranial procedures w/o CC/MCC | 553 | 677 | 81.7% | 1.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 529 | 853 | 62.0% | 2.1 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 356 | 565 | 63.0% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 260 | 1,526 | 17.0% | 3.3 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 220 | 556 | 39.6% | 2.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 195 | 576 | 33.9% | 2.4 |
| 038 : Extracranial procedures w CC | 184 | 396 | 46.5% | 2.7 |
| 473 : Cervical spinal fusion w/o CC/MCC | 172 | 346 | 49.7% | 2.0 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 155 | 481 | 32.2% | 2.2 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 147 | 313 | 47.0% | 2.6 |
| 621 : OR procedures for obesity w/o CC/MCC | 126 | 270 | 46.7% | 1.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 125 | 425 | 29.4% | 2.8 |
| 472 : Cervical spinal fusion w CC | 122 | 579 | 21.1% | 3.6 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 118 | 568 | 20.8% | 4.9 |
| 467 : Revision of hip or knee replacement w CC | 115 | 996 | 11.5% | 4.1 |
| 708 : Major male pelvic procedures w/o CC/MCC | 112 | 193 | 58.0% | 1.7 |
| Top Surgical DRGs | 10,873 | 31,563 | 34.4% | 2.5 |
| All Surgical DRGs | 15,375 | 93,468 | 16.4% | 5.5 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Indiana
84 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 3,872 | 9,031 | 42.9% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,258 | 1,747 | 72.0% | 1.5 |
| 039 : Extracranial procedures w/o CC/MCC | 455 | 563 | 80.8% | 1.4 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 438 | 1,888 | 23.2% | 2.5 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 393 | 548 | 71.7% | 1.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 289 | 574 | 50.3% | 1.9 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 283 | 400 | 70.8% | 1.9 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 209 | 425 | 49.2% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 180 | 1,299 | 13.9% | 3.1 |
| 038 : Extracranial procedures w CC | 173 | 296 | 58.4% | 2.3 |
| 473 : Cervical spinal fusion w/o CC/MCC | 140 | 223 | 62.8% | 1.7 |
| 708 : Major male pelvic procedures w/o CC/MCC | 122 | 200 | 61.0% | 1.6 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 120 | 418 | 28.7% | 4.1 |
| 472 : Cervical spinal fusion w CC | 110 | 323 | 34.1% | 3.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 108 | 652 | 16.6% | 2.6 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 100 | 118 | 84.7% | 1.3 |
| 467 : Revision of hip or knee replacement w CC | 91 | 572 | 15.9% | 3.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 91 | 222 | 41.0% | 2.7 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 82 | 1,015 | 8.1% | 5.1 |
| 254 : Other vascular procedures w/o CC/MCC | 80 | 253 | 31.6% | 2.6 |
| Top Surgical DRGs | 8,594 | 20,767 | 41.4% | 2.4 |
| All Surgical DRGs | 11,160 | 54,930 | 20.3% | 5.1 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Kansas
50 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 909 | 6,021 | 15.1% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 457 | 1,066 | 42.9% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 314 | 366 | 85.8% | 1.2 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 311 | 421 | 73.9% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 179 | 839 | 21.3% | 2.5 |
| 621 : OR procedures for obesity w/o CC/MCC | 118 | 178 | 66.3% | 1.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 103 | 183 | 56.3% | 2.0 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 75 | 354 | 21.2% | 4.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 72 | 304 | 23.7% | 2.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 70 | 216 | 32.4% | 2.6 |
| 038 : Extracranial procedures w CC | 58 | 124 | 46.8% | 2.7 |
| 473 : Cervical spinal fusion w/o CC/MCC | 58 | 137 | 42.3% | 1.8 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 54 | 515 | 10.5% | 4.8 |
| 472 : Cervical spinal fusion w CC | 54 | 190 | 28.4% | 3.1 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 52 | 113 | 46.0% | 2.8 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 47 | 180 | 26.1% | 2.4 |
| 254 : Other vascular procedures w/o CC/MCC | 42 | 104 | 40.4% | 2.2 |
| 708 : Major male pelvic procedures w/o CC/MCC | 42 | 74 | 56.8% | 1.5 |
| 460 : Spinal fusion except cervical w/o MCC | 41 | 581 | 7.1% | 3.3 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 40 | 103 | 38.8% | 2.1 |
| Top Surgical DRGs | 3,096 | 12,069 | 25.7% | 2.5 |
| All Surgical DRGs | 4,422 | 29,838 | 14.8% | 4.8 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Kentucky
65 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,539 | 4,708 | 32.7% | 2.6 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 871 | 1,288 | 67.6% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 335 | 438 | 76.5% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 322 | 1,335 | 24.1% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 198 | 288 | 68.8% | 1.6 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 189 | 308 | 61.4% | 2.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 157 | 268 | 58.6% | 2.0 |
| 621 : OR procedures for obesity w/o CC/MCC | 153 | 237 | 64.6% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 115 | 286 | 40.2% | 2.2 |
| 038 : Extracranial procedures w CC | 103 | 229 | 45.0% | 2.8 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 98 | 166 | 59.0% | 2.2 |
| 460 : Spinal fusion except cervical w/o MCC | 88 | 483 | 18.2% | 3.1 |
| 473 : Cervical spinal fusion w/o CC/MCC | 84 | 138 | 60.9% | 1.7 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 72 | 91 | 79.1% | 1.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 67 | 186 | 36.0% | 2.2 |
| 472 : Cervical spinal fusion w CC | 66 | 223 | 29.6% | 3.1 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 65 | 182 | 35.7% | 4.6 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 58 | 828 | 7.0% | 4.9 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 56 | 143 | 39.2% | 2.7 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 54 | 236 | 22.9% | 2.5 |
| Top Surgical DRGs | 4,690 | 12,061 | 38.9% | 2.6 |
| All Surgical DRGs | 6,277 | 37,906 | 16.6% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Louisiana
85 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,126 | 3,841 | 29.3% | 2.6 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 686 | 973 | 70.5% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 359 | 492 | 73.0% | 1.5 |
| 473 : Cervical spinal fusion w/o CC/MCC | 225 | 330 | 68.2% | 1.7 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 214 | 1,044 | 20.5% | 2.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 162 | 252 | 64.3% | 1.9 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 155 | 300 | 51.7% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 151 | 640 | 23.6% | 3.2 |
| 621 : OR procedures for obesity w/o CC/MCC | 149 | 232 | 64.2% | 1.4 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 125 | 265 | 47.2% | 3.9 |
| 472 : Cervical spinal fusion w CC | 109 | 273 | 39.9% | 2.9 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 97 | 196 | 49.5% | 2.5 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 92 | 103 | 89.3% | 1.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 88 | 246 | 35.8% | 2.4 |
| 038 : Extracranial procedures w CC | 73 | 184 | 39.7% | 2.8 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 68 | 155 | 43.9% | 2.7 |
| 708 : Major male pelvic procedures w/o CC/MCC | 58 | 99 | 58.6% | 1.6 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 57 | 131 | 43.5% | 2.4 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 42 | 626 | 6.7% | 5.4 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 40 | 135 | 29.6% | 2.5 |
| Top Surgical DRGs | 4,076 | 10,517 | 38.8% | 2.6 |
| All Surgical DRGs | 5,664 | 34,263 | 16.5% | 5.8 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Massachusetts
55 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,313 | 11,047 | 20.9% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 769 | 1,396 | 55.1% | 1.9 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 503 | 1,059 | 47.5% | 2.2 |
| 039 : Extracranial procedures w/o CC/MCC | 385 | 549 | 70.1% | 1.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 353 | 561 | 62.9% | 2.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 255 | 1,560 | 16.3% | 3.0 |
| 621 : OR procedures for obesity w/o CC/MCC | 178 | 359 | 49.6% | 1.6 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 174 | 376 | 46.3% | 2.7 |
| 460 : Spinal fusion except cervical w/o MCC | 138 | 1,204 | 11.5% | 3.5 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 125 | 290 | 43.1% | 2.4 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 112 | 361 | 31.0% | 2.5 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 112 | 361 | 31.0% | 2.2 |
| 708 : Major male pelvic procedures w/o CC/MCC | 110 | 174 | 63.2% | 1.5 |
| 038 : Extracranial procedures w CC | 107 | 293 | 36.5% | 3.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 96 | 399 | 24.1% | 2.6 |
| 165 : Major chest procedures w/o CC/MCC | 83 | 458 | 18.1% | 2.7 |
| 473 : Cervical spinal fusion w/o CC/MCC | 75 | 222 | 33.8% | 2.2 |
| 419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC | 64 | 345 | 18.6% | 2.7 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 63 | 503 | 12.5% | 8.2 |
| 472 : Cervical spinal fusion w CC | 62 | 411 | 15.1% | 3.4 |
| Top Surgical DRGs | 6,077 | 21,928 | 27.7% | 2.6 |
| All Surgical DRGs | 8,586 | 63,415 | 13.5% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Maryland
46 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 3,155 | 6,855 | 46.0% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 901 | 1,211 | 74.4% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 369 | 442 | 83.5% | 1.3 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 368 | 638 | 57.7% | 2.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 240 | 1,161 | 20.7% | 2.7 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 216 | 468 | 46.2% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 167 | 277 | 60.3% | 2.4 |
| 460 : Spinal fusion except cervical w/o MCC | 167 | 1,186 | 14.1% | 3.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 143 | 221 | 64.7% | 2.0 |
| 038 : Extracranial procedures w CC | 141 | 245 | 57.6% | 2.5 |
| 621 : OR procedures for obesity w/o CC/MCC | 131 | 203 | 64.5% | 1.5 |
| 472 : Cervical spinal fusion w CC | 111 | 433 | 25.6% | 3.3 |
| 473 : Cervical spinal fusion w/o CC/MCC | 93 | 232 | 40.1% | 2.2 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 82 | 199 | 41.2% | 2.4 |
| 708 : Major male pelvic procedures w/o CC/MCC | 80 | 120 | 66.7% | 1.5 |
| 467 : Revision of hip or knee replacement w CC | 74 | 381 | 19.4% | 4.1 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 71 | 200 | 35.5% | 2.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 67 | 331 | 20.2% | 2.9 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 60 | 633 | 9.5% | 5.3 |
| 254 : Other vascular procedures w/o CC/MCC | 58 | 232 | 25.0% | 3.1 |
| Top Surgical DRGs | 6,694 | 15,668 | 42.7% | 2.5 |
| All Surgical DRGs | 8,941 | 45,805 | 19.5% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Maine
17 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 713 | 1,588 | 44.9% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 269 | 345 | 78.0% | 1.6 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 71 | 156 | 45.5% | 2.2 |
| 039 : Extracranial procedures w/o CC/MCC | 55 | 67 | 82.1% | 1.4 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 49 | 75 | 65.3% | 1.6 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 39 | 395 | 9.9% | 3.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 34 | 56 | 60.7% | 2.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 33 | 70 | 47.1% | 3.2 |
| 621 : OR procedures for obesity w/o CC/MCC | 29 | 46 | 63.0% | 1.4 |
| 460 : Spinal fusion except cervical w/o MCC | 27 | 86 | 31.4% | 2.7 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 26 | 66 | 39.4% | 2.2 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 25 | 43 | 58.1% | 1.9 |
| 473 : Cervical spinal fusion w/o CC/MCC | 24 | 33 | 72.7% | 1.7 |
| 472 : Cervical spinal fusion w CC | 21 | 35 | 60.0% | 4.6 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 19 | 21 | 90.5% | 1.2 |
| 254 : Other vascular procedures w/o CC/MCC | 19 | 53 | 35.8% | 2.7 |
| 038 : Extracranial procedures w CC | 17 | 46 | 37.0% | 3.7 |
| 355 : Hernia procedures except inguinal & femoral w/o CC/MCC | 14 | 26 | 53.8% | 2.2 |
| 520 : Back & neck proc exc spinal fusion w/o CC/MCC | 14 | 22 | 63.6% | 2.3 |
| 481 : Hip & femur procedures except major joint w CC | 13 | 386 | 3.4% | 4.3 |
| Top Surgical DRGs | 1,511 | 3,615 | 41.8% | 2.5 |
| All Surgical DRGs | 2,036 | 9,635 | 21.1% | 5.5 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Michigan
93 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 4,282 | 9,495 | 45.1% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,497 | 2,129 | 70.3% | 1.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 483 | 707 | 68.3% | 2.1 |
| 039 : Extracranial procedures w/o CC/MCC | 447 | 560 | 79.8% | 1.4 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 383 | 2,322 | 16.5% | 2.8 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 375 | 1,051 | 35.7% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 280 | 475 | 58.9% | 2.2 |
| 460 : Spinal fusion except cervical w/o MCC | 272 | 1,345 | 20.2% | 3.2 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 264 | 500 | 52.8% | 1.9 |
| 473 : Cervical spinal fusion w/o CC/MCC | 197 | 425 | 46.4% | 2.1 |
| 621 : OR procedures for obesity w/o CC/MCC | 176 | 354 | 49.7% | 1.6 |
| 038 : Extracranial procedures w CC | 171 | 364 | 47.0% | 2.9 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 163 | 200 | 81.5% | 1.4 |
| 472 : Cervical spinal fusion w CC | 139 | 549 | 25.3% | 3.4 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 137 | 371 | 36.9% | 2.2 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 134 | 283 | 47.3% | 2.5 |
| 254 : Other vascular procedures w/o CC/MCC | 112 | 337 | 33.2% | 2.7 |
| 467 : Revision of hip or knee replacement w CC | 112 | 747 | 15.0% | 3.8 |
| 252 : Other vascular procedures w MCC | 105 | 1,135 | 9.3% | 7.0 |
| 660 : Kidney & ureter procedures for non-neoplasm w CC | 94 | 572 | 16.4% | 3.8 |
| Top Surgical DRGs | 9,823 | 23,921 | 41.1% | 2.6 |
| All Surgical DRGs | 12,972 | 70,935 | 18.3% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Minnesota
49 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,890 | 7,176 | 26.3% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,037 | 1,623 | 63.9% | 1.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 476 | 795 | 59.9% | 1.7 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 424 | 587 | 72.2% | 1.7 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 302 | 1,264 | 23.9% | 2.4 |
| 039 : Extracranial procedures w/o CC/MCC | 212 | 278 | 76.3% | 1.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 163 | 263 | 62.0% | 2.3 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 141 | 237 | 59.5% | 2.0 |
| 038 : Extracranial procedures w CC | 102 | 194 | 52.6% | 2.4 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 93 | 502 | 18.5% | 4.7 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 79 | 311 | 25.4% | 2.3 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 75 | 908 | 8.3% | 4.5 |
| 660 : Kidney & ureter procedures for non-neoplasm w CC | 70 | 319 | 21.9% | 3.2 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 69 | 232 | 29.7% | 2.4 |
| 472 : Cervical spinal fusion w CC | 68 | 272 | 25.0% | 3.2 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 66 | 159 | 41.5% | 2.0 |
| 229 : Other cardiothoracic procedures w/o MCC | 59 | 177 | 33.3% | 3.9 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 58 | 350 | 16.6% | 5.3 |
| 254 : Other vascular procedures w/o CC/MCC | 56 | 143 | 39.2% | 2.5 |
| 473 : Cervical spinal fusion w/o CC/MCC | 56 | 135 | 41.5% | 2.3 |
| Top Surgical DRGs | 5,496 | 15,925 | 34.5% | 2.5 |
| All Surgical DRGs | 7,863 | 42,554 | 18.5% | 5.0 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Missouri
70 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,665 | 7,624 | 21.8% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,248 | 1,905 | 65.5% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 416 | 529 | 78.6% | 1.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 407 | 730 | 55.8% | 1.8 |
| 247 : Perc cardiovascular proc w drug-eluting stent w/o MCC | 392 | 1,684 | 23.3% | 2.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 293 | 461 | 63.6% | 2.1 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 277 | 399 | 69.4% | 2.2 |
| 621 : OR procedures for obesity w/o CC/MCC | 160 | 344 | 46.5% | 1.6 |
| 038 : Extracranial procedures w CC | 145 | 289 | 50.2% | 2.7 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 134 | 635 | 21.1% | 2.8 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 131 | 368 | 35.6% | 2.2 |
| 460 : Spinal fusion except cervical w/o MCC | 130 | 878 | 14.8% | 3.5 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 124 | 225 | 55.1% | 2.4 |
| 473 : Cervical spinal fusion w/o CC/MCC | 120 | 235 | 51.1% | 1.8 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 114 | 156 | 73.1% | 1.5 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 95 | 325 | 29.2% | 4.6 |
| 472 : Cervical spinal fusion w CC | 90 | 310 | 29.0% | 3.5 |
| 254 : Other vascular procedures w/o CC/MCC | 75 | 276 | 27.2% | 2.6 |
| 253 : Other vascular procedures w CC | 73 | 598 | 12.2% | 4.8 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 71 | 1,158 | 6.1% | 5.2 |
| Top Surgical DRGs | 6,160 | 19,129 | 32.2% | 2.7 |
| All Surgical DRGs | 8,672 | 54,386 | 15.9% | 5.6 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Mississippi
59 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,041 | 3,945 | 26.4% | 2.6 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 464 | 663 | 70.0% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 265 | 347 | 76.4% | 1.4 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 217 | 965 | 22.5% | 2.5 |
| 460 : Spinal fusion except cervical w/o MCC | 151 | 431 | 35.0% | 2.9 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 150 | 230 | 65.2% | 2.0 |
| 621 : OR procedures for obesity w/o CC/MCC | 131 | 198 | 66.2% | 1.3 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 125 | 182 | 68.7% | 1.9 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 121 | 252 | 48.0% | 1.9 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 112 | 207 | 54.1% | 1.8 |
| 038 : Extracranial procedures w CC | 105 | 181 | 58.0% | 2.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 78 | 176 | 44.3% | 1.9 |
| 473 : Cervical spinal fusion w/o CC/MCC | 73 | 113 | 64.6% | 1.9 |
| 472 : Cervical spinal fusion w CC | 63 | 159 | 39.6% | 2.9 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 43 | 48 | 89.6% | 1.1 |
| 254 : Other vascular procedures w/o CC/MCC | 41 | 112 | 36.6% | 2.3 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 36 | 552 | 6.5% | 5.2 |
| 467 : Revision of hip or knee replacement w CC | 32 | 208 | 15.4% | 3.9 |
| 494 : Lower extrem & humer proc except hip, foot, femur w/o CC/MCC | 30 | 148 | 20.3% | 3.2 |
| 520 : Back & neck proc exc spinal fusion w/o CC/MCC | 29 | 61 | 47.5% | 2.3 |
| Top Surgical DRGs | 3,307 | 9,178 | 36.0% | 2.6 |
| All Surgical DRGs | 4,482 | 28,366 | 15.8% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Montana
14 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 753 | 2,121 | 35.5% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 371 | 479 | 77.5% | 1.4 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 156 | 450 | 34.7% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 121 | 138 | 87.7% | 1.2 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 117 | 195 | 60.0% | 3.0 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 102 | 122 | 83.6% | 1.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 92 | 135 | 68.1% | 1.6 |
| 460 : Spinal fusion except cervical w/o MCC | 63 | 233 | 27.0% | 2.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 43 | 63 | 68.3% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 43 | 145 | 29.7% | 2.3 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 40 | 68 | 58.8% | 2.2 |
| 254 : Other vascular procedures w/o CC/MCC | 36 | 70 | 51.4% | 2.3 |
| 038 : Extracranial procedures w CC | 27 | 56 | 48.2% | 2.7 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 25 | 130 | 19.2% | 5.6 |
| 472 : Cervical spinal fusion w CC | 23 | 63 | 36.5% | 3.5 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 22 | 156 | 14.1% | 3.2 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 21 | 202 | 10.4% | 4.1 |
| 473 : Cervical spinal fusion w/o CC/MCC | 21 | 44 | 47.7% | 1.8 |
| 660 : Kidney & ureter procedures for non-neoplasm w CC | 19 | 83 | 22.9% | 4.0 |
| 243 : Permanent cardiac pacemaker implant w CC | 15 | 83 | 18.1% | 3.4 |
| Top Surgical DRGs | 2,110 | 5,036 | 41.9% | 2.3 |
| All Surgical DRGs | 2,609 | 10,901 | 23.9% | 4.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
North Carolina
85 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 4,109 | 12,208 | 33.7% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,619 | 2,425 | 66.8% | 1.8 |
| 039 : Extracranial procedures w/o CC/MCC | 557 | 693 | 80.4% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 552 | 2,459 | 22.4% | 2.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 394 | 708 | 55.6% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 359 | 596 | 60.2% | 2.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 354 | 841 | 42.1% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 250 | 691 | 36.2% | 2.3 |
| 473 : Cervical spinal fusion w/o CC/MCC | 241 | 399 | 60.4% | 1.8 |
| 460 : Spinal fusion except cervical w/o MCC | 228 | 1,547 | 14.7% | 3.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 191 | 313 | 61.0% | 1.6 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 180 | 378 | 47.6% | 2.4 |
| 472 : Cervical spinal fusion w CC | 173 | 506 | 34.2% | 3.3 |
| 038 : Extracranial procedures w CC | 172 | 320 | 53.8% | 2.8 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 167 | 983 | 17.0% | 2.8 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 131 | 848 | 15.4% | 5.6 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 119 | 161 | 73.9% | 1.6 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 112 | 311 | 36.0% | 2.7 |
| 708 : Major male pelvic procedures w/o CC/MCC | 109 | 186 | 58.6% | 1.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 105 | 342 | 30.7% | 2.4 |
| Top Surgical DRGs | 10,122 | 26,915 | 37.6% | 2.5 |
| All Surgical DRGs | 13,679 | 78,720 | 17.4% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
North Dakota
7 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 910 | 1,514 | 60.1% | 2.0 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 317 | 398 | 79.6% | 1.4 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 123 | 221 | 55.7% | 1.8 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 114 | 323 | 35.3% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 87 | 109 | 79.8% | 1.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 69 | 80 | 86.3% | 1.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 65 | 91 | 71.4% | 1.8 |
| 038 : Extracranial procedures w CC | 44 | 84 | 52.4% | 2.2 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 43 | 78 | 55.1% | 2.0 |
| 467 : Revision of hip or knee replacement w CC | 29 | 131 | 22.1% | 3.7 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 28 | 227 | 12.3% | 4.1 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 21 | 80 | 26.3% | 2.4 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 20 | 132 | 15.2% | 5.8 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 18 | 34 | 52.9% | 2.0 |
| 621 : OR procedures for obesity w/o CC/MCC | 18 | 24 | 75.0% | 1.3 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 16 | 66 | 24.2% | 5.5 |
| 243 : Permanent cardiac pacemaker implant w CC | 15 | 88 | 17.0% | 3.5 |
| 229 : Other cardiothoracic procedures w/o MCC | 13 | 24 | 54.2% | 3.0 |
| 253 : Other vascular procedures w CC | 13 | 92 | 14.1% | 4.4 |
| 254 : Other vascular procedures w/o CC/MCC | 13 | 37 | 35.1% | 2.4 |
| Top Surgical DRGs | 1,976 | 3,833 | 51.6% | 2.4 |
| All Surgical DRGs | 2,393 | 9,013 | 26.6% | 4.9 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Nebraska
23 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,324 | 3,577 | 37.0% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 468 | 691 | 67.7% | 1.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 291 | 319 | 91.2% | 1.2 |
| 039 : Extracranial procedures w/o CC/MCC | 163 | 188 | 86.7% | 1.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 159 | 519 | 30.6% | 2.2 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 90 | 132 | 68.2% | 1.8 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 89 | 297 | 30.0% | 2.0 |
| 038 : Extracranial procedures w CC | 73 | 125 | 58.4% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 65 | 163 | 39.9% | 2.0 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 63 | 77 | 81.8% | 1.3 |
| 229 : Other cardiothoracic procedures w/o MCC | 62 | 100 | 62.0% | 2.3 |
| 460 : Spinal fusion except cervical w/o MCC | 53 | 369 | 14.4% | 2.9 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 49 | 107 | 45.8% | 2.1 |
| 708 : Major male pelvic procedures w/o CC/MCC | 35 | 81 | 43.2% | 1.9 |
| 254 : Other vascular procedures w/o CC/MCC | 34 | 77 | 44.2% | 2.2 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 31 | 267 | 11.6% | 4.9 |
| 473 : Cervical spinal fusion w/o CC/MCC | 31 | 53 | 58.5% | 1.9 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 30 | 85 | 35.3% | 1.9 |
| 467 : Revision of hip or knee replacement w CC | 30 | 218 | 13.8% | 4.1 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 29 | 67 | 43.3% | 2.4 |
| Top Surgical DRGs | 3,169 | 7,512 | 42.2% | 2.2 |
| All Surgical DRGs | 4,125 | 19,535 | 21.1% | 4.9 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
New Hampshire
13 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 897 | 1,831 | 49.0% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 202 | 345 | 58.6% | 2.0 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 118 | 161 | 73.3% | 1.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 115 | 312 | 36.9% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 103 | 144 | 71.5% | 1.6 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 93 | 508 | 18.3% | 2.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 50 | 97 | 51.5% | 2.4 |
| 621 : OR procedures for obesity w/o CC/MCC | 43 | 70 | 61.4% | 1.4 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 42 | 97 | 43.3% | 2.0 |
| 038 : Extracranial procedures w CC | 30 | 78 | 38.5% | 3.1 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 26 | 66 | 39.4% | 1.9 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 23 | 49 | 46.9% | 2.6 |
| 165 : Major chest procedures w/o CC/MCC | 23 | 51 | 45.1% | 2.4 |
| 467 : Revision of hip or knee replacement w CC | 23 | 129 | 17.8% | 4.3 |
| 460 : Spinal fusion except cervical w/o MCC | 22 | 210 | 10.5% | 3.3 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 17 | 254 | 6.7% | 5.4 |
| 419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC | 17 | 64 | 26.6% | 2.8 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 16 | 28 | 57.1% | 2.0 |
| 253 : Other vascular procedures w CC | 16 | 162 | 9.9% | 6.5 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 15 | 94 | 16.0% | 2.5 |
| Top Surgical DRGs | 1,891 | 4,750 | 39.8% | 2.6 |
| All Surgical DRGs | 2,446 | 12,192 | 20.1% | 5.5 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
New Jersey
64 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,157 | 8,390 | 25.7% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 533 | 819 | 65.1% | 1.9 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 504 | 1,231 | 40.9% | 2.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 418 | 634 | 65.9% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 364 | 458 | 79.5% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 341 | 1,734 | 19.7% | 3.0 |
| 621 : OR procedures for obesity w/o CC/MCC | 255 | 400 | 63.8% | 1.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 227 | 361 | 62.9% | 2.5 |
| 038 : Extracranial procedures w CC | 102 | 224 | 45.5% | 3.1 |
| 165 : Major chest procedures w/o CC/MCC | 87 | 261 | 33.3% | 2.4 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 84 | 455 | 18.5% | 2.8 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 82 | 284 | 28.9% | 2.3 |
| 229 : Other cardiothoracic procedures w/o MCC | 78 | 172 | 45.3% | 3.8 |
| 254 : Other vascular procedures w/o CC/MCC | 78 | 213 | 36.6% | 2.7 |
| 460 : Spinal fusion except cervical w/o MCC | 77 | 753 | 10.2% | 3.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 73 | 337 | 21.7% | 2.5 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 67 | 1,070 | 6.3% | 6.1 |
| 743 : Uterine & adnexa proc for non-malignancy w/o CC/MCC | 64 | 150 | 42.7% | 1.9 |
| 164 : Major chest procedures w CC | 59 | 412 | 14.3% | 4.6 |
| 473 : Cervical spinal fusion w/o CC/MCC | 55 | 141 | 39.0% | 2.2 |
| Top Surgical DRGs | 5,705 | 18,499 | 30.8% | 2.7 |
| All Surgical DRGs | 7,848 | 58,949 | 13.3% | 6.4 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
New Mexico
31 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 687 | 1,974 | 34.8% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 269 | 340 | 79.1% | 1.4 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 116 | 486 | 23.9% | 2.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 80 | 111 | 72.1% | 1.8 |
| 460 : Spinal fusion except cervical w/o MCC | 47 | 114 | 41.2% | 2.9 |
| 039 : Extracranial procedures w/o CC/MCC | 35 | 51 | 68.6% | 1.6 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 32 | 42 | 76.2% | 1.7 |
| 621 : OR procedures for obesity w/o CC/MCC | 32 | 71 | 45.1% | 1.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 29 | 61 | 47.5% | 2.6 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 27 | 60 | 45.0% | 2.0 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 23 | 53 | 43.4% | 3.8 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 22 | 272 | 8.1% | 4.5 |
| 419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC | 20 | 81 | 24.7% | 2.7 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 17 | 55 | 30.9% | 2.4 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 16 | 66 | 24.2% | 2.2 |
| 708 : Major male pelvic procedures w/o CC/MCC | 16 | 50 | 32.0% | 2.1 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 15 | 17 | 88.2% | 1.4 |
| 038 : Extracranial procedures w CC | 15 | 31 | 48.4% | 3.0 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 15 | 150 | 10.0% | 5.4 |
| 243 : Permanent cardiac pacemaker implant w CC | 14 | 103 | 13.6% | 3.5 |
| Top Surgical DRGs | 1,527 | 4,188 | 36.5% | 2.5 |
| All Surgical DRGs | 1,978 | 11,258 | 17.6% | 5.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Nevada
22 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 636 | 2,331 | 27.3% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 344 | 476 | 72.3% | 1.5 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 115 | 233 | 49.4% | 4.3 |
| 039 : Extracranial procedures w/o CC/MCC | 104 | 145 | 71.7% | 1.6 |
| 621 : OR procedures for obesity w/o CC/MCC | 89 | 110 | 80.9% | 1.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 85 | 526 | 16.2% | 2.8 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 83 | 138 | 60.1% | 1.7 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 76 | 169 | 45.0% | 2.1 |
| 473 : Cervical spinal fusion w/o CC/MCC | 72 | 132 | 54.5% | 1.8 |
| 472 : Cervical spinal fusion w CC | 71 | 190 | 37.4% | 2.9 |
| 460 : Spinal fusion except cervical w/o MCC | 59 | 467 | 12.6% | 3.1 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 54 | 116 | 46.6% | 2.5 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 39 | 78 | 50.0% | 2.6 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 39 | 213 | 18.3% | 5.1 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 38 | 108 | 35.2% | 2.1 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 35 | 230 | 15.2% | 2.8 |
| 254 : Other vascular procedures w/o CC/MCC | 33 | 110 | 30.0% | 2.3 |
| 038 : Extracranial procedures w CC | 29 | 75 | 38.7% | 3.4 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 29 | 96 | 30.2% | 2.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 28 | 60 | 46.7% | 2.5 |
| Top Surgical DRGs | 2,058 | 6,003 | 34.3% | 2.6 |
| All Surgical DRGs | 2,880 | 18,674 | 15.4% | 6.1 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
New York
142 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 4,335 | 19,319 | 22.4% | 2.6 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,480 | 2,355 | 62.8% | 1.9 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 1,415 | 4,231 | 33.4% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 1,207 | 2,472 | 48.8% | 2.1 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 1,092 | 1,907 | 57.3% | 2.2 |
| 039 : Extracranial procedures w/o CC/MCC | 623 | 834 | 74.7% | 1.5 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 421 | 697 | 60.4% | 2.3 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 349 | 1,461 | 23.9% | 6.1 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 314 | 573 | 54.8% | 2.2 |
| 621 : OR procedures for obesity w/o CC/MCC | 298 | 555 | 53.7% | 1.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 253 | 720 | 35.1% | 2.3 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 227 | 2,162 | 10.5% | 5.4 |
| 038 : Extracranial procedures w CC | 209 | 469 | 44.6% | 3.3 |
| 743 : Uterine & adnexa proc for non-malignancy w/o CC/MCC | 202 | 362 | 55.8% | 1.6 |
| 708 : Major male pelvic procedures w/o CC/MCC | 186 | 282 | 66.0% | 1.5 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 178 | 652 | 27.3% | 2.6 |
| 472 : Cervical spinal fusion w CC | 173 | 703 | 24.6% | 3.7 |
| 460 : Spinal fusion except cervical w/o MCC | 169 | 1,600 | 10.6% | 4.0 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 167 | 727 | 23.0% | 2.7 |
| 165 : Major chest procedures w/o CC/MCC | 160 | 621 | 25.8% | 2.7 |
| Top Surgical DRGs | 13,458 | 42,702 | 31.5% | 2.8 |
| All Surgical DRGs | 19,777 | 125,225 | 15.8% | 6.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Ohio
126 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 5,610 | 12,821 | 43.8% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 2,123 | 2,906 | 73.1% | 1.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 833 | 1,252 | 66.5% | 1.7 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 726 | 1,092 | 66.5% | 1.9 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 602 | 2,769 | 21.7% | 2.6 |
| 039 : Extracranial procedures w/o CC/MCC | 596 | 755 | 78.9% | 1.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 361 | 582 | 62.0% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 281 | 669 | 42.0% | 2.1 |
| 038 : Extracranial procedures w CC | 208 | 420 | 49.5% | 2.7 |
| 460 : Spinal fusion except cervical w/o MCC | 194 | 1,733 | 11.2% | 3.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 192 | 367 | 52.3% | 2.2 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 185 | 516 | 35.9% | 5.2 |
| 621 : OR procedures for obesity w/o CC/MCC | 174 | 361 | 48.2% | 1.7 |
| 472 : Cervical spinal fusion w CC | 153 | 637 | 24.0% | 3.3 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 148 | 420 | 35.2% | 2.0 |
| 467 : Revision of hip or knee replacement w CC | 139 | 891 | 15.6% | 3.6 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 137 | 687 | 19.9% | 2.7 |
| 473 : Cervical spinal fusion w/o CC/MCC | 134 | 346 | 38.7% | 2.2 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 130 | 165 | 78.8% | 1.5 |
| 254 : Other vascular procedures w/o CC/MCC | 124 | 335 | 37.0% | 2.4 |
| Top Surgical DRGs | 13,050 | 29,724 | 43.9% | 2.3 |
| All Surgical DRGs | 17,085 | 85,866 | 19.9% | 5.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Oklahoma
78 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,495 | 7,239 | 20.7% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 640 | 1,214 | 52.7% | 1.9 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 308 | 497 | 62.0% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 297 | 349 | 85.1% | 1.2 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 265 | 955 | 27.7% | 2.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 166 | 249 | 66.7% | 1.9 |
| 460 : Spinal fusion except cervical w/o MCC | 155 | 896 | 17.3% | 3.0 |
| 473 : Cervical spinal fusion w/o CC/MCC | 152 | 269 | 56.5% | 1.7 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 144 | 230 | 62.6% | 1.8 |
| 038 : Extracranial procedures w CC | 127 | 210 | 60.5% | 2.6 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 113 | 136 | 83.1% | 1.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 103 | 582 | 17.7% | 2.6 |
| 472 : Cervical spinal fusion w CC | 78 | 214 | 36.4% | 3.1 |
| 708 : Major male pelvic procedures w/o CC/MCC | 74 | 103 | 71.8% | 1.5 |
| 621 : OR procedures for obesity w/o CC/MCC | 72 | 131 | 55.0% | 1.6 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 66 | 616 | 10.7% | 4.9 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 64 | 202 | 31.7% | 2.5 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 60 | 128 | 46.9% | 2.4 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 58 | 279 | 20.8% | 2.5 |
| 035 : Carotid artery stent procedure w CC | 52 | 105 | 49.5% | 2.9 |
| Top Surgical DRGs | 4,489 | 14,604 | 30.7% | 2.5 |
| All Surgical DRGs | 6,051 | 36,415 | 16.6% | 5.1 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Oregon
34 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,566 | 3,339 | 46.9% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 731 | 964 | 75.8% | 1.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 218 | 403 | 54.1% | 1.9 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 161 | 658 | 24.5% | 2.3 |
| 039 : Extracranial procedures w/o CC/MCC | 133 | 183 | 72.7% | 1.4 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 129 | 169 | 76.3% | 1.5 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 114 | 401 | 28.4% | 2.5 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 97 | 147 | 66.0% | 2.2 |
| 460 : Spinal fusion except cervical w/o MCC | 90 | 377 | 23.9% | 3.0 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 78 | 137 | 56.9% | 1.9 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 75 | 193 | 38.9% | 2.2 |
| 473 : Cervical spinal fusion w/o CC/MCC | 73 | 131 | 55.7% | 1.8 |
| 621 : OR procedures for obesity w/o CC/MCC | 67 | 130 | 51.5% | 1.6 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 62 | 204 | 30.4% | 6.1 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 46 | 63 | 73.0% | 1.4 |
| 038 : Extracranial procedures w CC | 44 | 99 | 44.4% | 2.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 40 | 96 | 41.7% | 2.8 |
| 254 : Other vascular procedures w/o CC/MCC | 38 | 131 | 29.0% | 2.5 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 38 | 282 | 13.5% | 5.3 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 34 | 423 | 8.0% | 4.8 |
| Top Surgical DRGs | 3,834 | 8,530 | 44.9% | 2.4 |
| All Surgical DRGs | 5,062 | 23,339 | 21.7% | 5.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Pennsylvania
146 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 5,459 | 14,482 | 37.7% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,780 | 2,511 | 70.9% | 1.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 680 | 1,139 | 59.7% | 2.1 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 642 | 1,382 | 46.5% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 485 | 641 | 75.7% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 477 | 2,751 | 17.3% | 2.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 340 | 582 | 58.4% | 2.4 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 315 | 776 | 40.6% | 2.1 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 216 | 730 | 29.6% | 5.4 |
| 621 : OR procedures for obesity w/o CC/MCC | 188 | 376 | 50.0% | 1.6 |
| 473 : Cervical spinal fusion w/o CC/MCC | 174 | 348 | 50.0% | 2.1 |
| 038 : Extracranial procedures w CC | 173 | 367 | 47.1% | 2.9 |
| 460 : Spinal fusion except cervical w/o MCC | 167 | 1,628 | 10.3% | 3.3 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 163 | 204 | 79.9% | 1.4 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 150 | 325 | 46.2% | 2.3 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 148 | 548 | 27.0% | 2.3 |
| 472 : Cervical spinal fusion w CC | 134 | 556 | 24.1% | 3.4 |
| 467 : Revision of hip or knee replacement w CC | 133 | 985 | 13.5% | 4.2 |
| 660 : Kidney & ureter procedures for non-neoplasm w CC | 117 | 844 | 13.9% | 4.0 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 112 | 352 | 31.8% | 2.6 |
| Top Surgical DRGs | 12,053 | 31,527 | 38.2% | 2.4 |
| All Surgical DRGs | 16,039 | 92,581 | 17.3% | 5.6 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Puerto Rico
49 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 62 | 246 | 25.2% | 3.7 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 41 | 63 | 65.1% | 2.8 |
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 33 | 549 | 6.0% | 3.3 |
| 419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC | 24 | 112 | 21.4% | 3.8 |
| 627 : Thyroid, parathyroid & thyroglossal procedures w/o CC/MCC | 20 | 26 | 76.9% | 1.5 |
| 743 : Uterine & adnexa proc for non-malignancy w/o CC/MCC | 19 | 79 | 24.1% | 2.1 |
| 244 : Permanent cardiac pacemaker implant w/o CC/MCC | 16 | 66 | 24.2% | 4.0 |
| 581 : Other skin, subcut tiss & breast proc w/o CC/MCC | 16 | 59 | 27.1% | 4.3 |
| 252 : Other vascular procedures w MCC | 14 | 193 | 7.3% | 8.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 14 | 66 | 21.2% | 2.7 |
| 494 : Lower extrem & humer proc except hip, foot, femur w/o CC/MCC | 13 | 67 | 19.4% | 3.4 |
| 343 : Appendectomy w/o complicated principal diag w/o CC/MCC | 11 | 31 | 35.5% | 2.1 |
| 352 : Inguinal & femoral hernia procedures w/o CC/MCC | 11 | 30 | 36.7% | 2.5 |
| Top Surgical DRGs | 294 | 1,587 | 18.5% | 3.9 |
| All Surgical DRGs | 519 | 5,237 | 9.9% | 8.5 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Rhode Island
10 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 290 | 996 | 29.1% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 94 | 146 | 64.4% | 1.9 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 65 | 92 | 70.7% | 1.7 |
| 039 : Extracranial procedures w/o CC/MCC | 35 | 45 | 77.8% | 1.3 |
| 460 : Spinal fusion except cervical w/o MCC | 25 | 219 | 11.4% | 3.6 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 23 | 35 | 65.7% | 2.1 |
| 621 : OR procedures for obesity w/o CC/MCC | 21 | 41 | 51.2% | 1.6 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 20 | 39 | 51.3% | 2.7 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 14 | 197 | 7.1% | 2.9 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 12 | 21 | 57.1% | 2.0 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 12 | 55 | 21.8% | 2.5 |
| 473 : Cervical spinal fusion w/o CC/MCC | 12 | 27 | 44.4% | 1.8 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 12 | 50 | 24.0% | 2.5 |
| Top Surgical DRGs | 635 | 1,963 | 32.3% | 2.4 |
| All Surgical DRGs | 868 | 6,354 | 13.7% | 5.6 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
South Carolina
54 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,781 | 6,059 | 45.9% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,014 | 1,385 | 73.2% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 430 | 524 | 82.1% | 1.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 408 | 605 | 67.4% | 1.9 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 285 | 1,273 | 22.4% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 253 | 386 | 65.5% | 1.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 207 | 300 | 69.0% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 204 | 870 | 23.4% | 3.0 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 177 | 377 | 46.9% | 3.1 |
| 473 : Cervical spinal fusion w/o CC/MCC | 158 | 275 | 57.5% | 1.9 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 156 | 350 | 44.6% | 2.1 |
| 621 : OR procedures for obesity w/o CC/MCC | 121 | 242 | 50.0% | 1.7 |
| 472 : Cervical spinal fusion w CC | 113 | 306 | 36.9% | 3.0 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 102 | 201 | 50.7% | 2.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 102 | 484 | 21.1% | 2.6 |
| 254 : Other vascular procedures w/o CC/MCC | 93 | 224 | 41.5% | 2.4 |
| 038 : Extracranial procedures w CC | 91 | 194 | 46.9% | 3.3 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 85 | 108 | 78.7% | 1.4 |
| 489 : Knee procedures w/o PDx of infection w/o CC/MCC | 79 | 116 | 68.1% | 1.6 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 74 | 163 | 45.4% | 2.5 |
| Top Surgical DRGs | 6,933 | 14,442 | 48.0% | 2.2 |
| All Surgical DRGs | 8,810 | 40,511 | 21.7% | 5.6 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
South Dakota
18 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 1,018 | 3,105 | 32.8% | 2.2 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 424 | 618 | 68.6% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 146 | 449 | 32.5% | 2.3 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 94 | 115 | 81.7% | 1.4 |
| 039 : Extracranial procedures w/o CC/MCC | 92 | 104 | 88.5% | 1.1 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 86 | 102 | 84.3% | 1.3 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 78 | 130 | 60.0% | 1.9 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 46 | 139 | 33.1% | 2.2 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 45 | 64 | 70.3% | 1.5 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 39 | 186 | 21.0% | 5.0 |
| 473 : Cervical spinal fusion w/o CC/MCC | 37 | 61 | 60.7% | 1.7 |
| 621 : OR procedures for obesity w/o CC/MCC | 32 | 46 | 69.6% | 1.4 |
| 460 : Spinal fusion except cervical w/o MCC | 28 | 244 | 11.5% | 3.0 |
| 038 : Extracranial procedures w CC | 27 | 41 | 65.9% | 1.6 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 27 | 51 | 52.9% | 2.1 |
| 254 : Other vascular procedures w/o CC/MCC | 26 | 66 | 39.4% | 2.3 |
| 489 : Knee procedures w/o PDx of infection w/o CC/MCC | 26 | 34 | 76.5% | 1.4 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 23 | 198 | 11.6% | 2.5 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 22 | 287 | 7.7% | 4.5 |
| 467 : Revision of hip or knee replacement w CC | 20 | 147 | 13.6% | 3.8 |
| Top Surgical DRGs | 2,336 | 6,187 | 37.8% | 2.3 |
| All Surgical DRGs | 2,911 | 12,950 | 22.5% | 4.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Tennessee
84 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 3,740 | 9,131 | 41.0% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,445 | 1,904 | 75.9% | 1.5 |
| 039 : Extracranial procedures w/o CC/MCC | 534 | 691 | 77.3% | 1.4 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 528 | 777 | 68.0% | 1.9 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 485 | 1,925 | 25.2% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 402 | 747 | 53.8% | 2.0 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 286 | 449 | 63.7% | 2.2 |
| 460 : Spinal fusion except cervical w/o MCC | 225 | 1,141 | 19.7% | 3.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 222 | 459 | 48.4% | 2.0 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 202 | 530 | 38.1% | 4.4 |
| 473 : Cervical spinal fusion w/o CC/MCC | 196 | 304 | 64.5% | 1.7 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 152 | 198 | 76.8% | 1.4 |
| 621 : OR procedures for obesity w/o CC/MCC | 133 | 244 | 54.5% | 1.6 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 132 | 254 | 52.0% | 2.4 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 114 | 305 | 37.4% | 2.4 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 111 | 662 | 16.8% | 2.9 |
| 467 : Revision of hip or knee replacement w CC | 103 | 614 | 16.8% | 4.0 |
| 254 : Other vascular procedures w/o CC/MCC | 101 | 312 | 32.4% | 2.5 |
| 038 : Extracranial procedures w CC | 100 | 279 | 35.8% | 3.7 |
| 472 : Cervical spinal fusion w CC | 96 | 322 | 29.8% | 3.3 |
| Top Surgical DRGs | 9,307 | 21,248 | 43.8% | 2.3 |
| All Surgical DRGs | 12,397 | 61,387 | 20.2% | 5.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Texas
297 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 6,287 | 22,821 | 27.5% | 2.4 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 2,487 | 3,991 | 62.3% | 1.8 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 1,178 | 1,939 | 60.8% | 2.0 |
| 039 : Extracranial procedures w/o CC/MCC | 1,107 | 1,465 | 75.6% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 919 | 4,584 | 20.0% | 2.7 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 872 | 1,508 | 57.8% | 1.9 |
| 621 : OR procedures for obesity w/o CC/MCC | 599 | 933 | 64.2% | 1.5 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 529 | 892 | 59.3% | 2.2 |
| 473 : Cervical spinal fusion w/o CC/MCC | 515 | 965 | 53.4% | 1.8 |
| 460 : Spinal fusion except cervical w/o MCC | 491 | 3,211 | 15.3% | 3.2 |
| 472 : Cervical spinal fusion w CC | 371 | 1,238 | 30.0% | 3.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 362 | 1,040 | 34.8% | 2.2 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 335 | 412 | 81.3% | 1.3 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 332 | 1,212 | 27.4% | 4.7 |
| 038 : Extracranial procedures w CC | 322 | 794 | 40.6% | 3.0 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 301 | 1,634 | 18.4% | 2.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 275 | 887 | 31.0% | 2.7 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 265 | 585 | 45.3% | 2.5 |
| 467 : Revision of hip or knee replacement w CC | 212 | 1,596 | 13.3% | 4.3 |
| 254 : Other vascular procedures w/o CC/MCC | 199 | 631 | 31.5% | 2.6 |
| Top Surgical DRGs | 17,958 | 52,338 | 34.3% | 2.5 |
| All Surgical DRGs | 25,187 | 165,976 | 15.2% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Utah
32 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 779 | 2,814 | 27.7% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 683 | 958 | 71.3% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 170 | 556 | 30.6% | 2.1 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 117 | 149 | 78.5% | 1.6 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 109 | 263 | 41.4% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 89 | 297 | 30.0% | 2.3 |
| 039 : Extracranial procedures w/o CC/MCC | 84 | 104 | 80.8% | 1.4 |
| 460 : Spinal fusion except cervical w/o MCC | 74 | 534 | 13.9% | 3.0 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 67 | 86 | 77.9% | 1.6 |
| 621 : OR procedures for obesity w/o CC/MCC | 56 | 90 | 62.2% | 1.4 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 51 | 455 | 11.2% | 2.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 45 | 77 | 58.4% | 1.9 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 44 | 89 | 49.4% | 2.2 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 43 | 323 | 13.3% | 4.2 |
| 467 : Revision of hip or knee replacement w CC | 43 | 247 | 17.4% | 3.1 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 38 | 146 | 26.0% | 5.2 |
| 472 : Cervical spinal fusion w CC | 36 | 105 | 34.3% | 3.1 |
| 243 : Permanent cardiac pacemaker implant w CC | 32 | 115 | 27.8% | 2.5 |
| 038 : Extracranial procedures w CC | 28 | 48 | 58.3% | 2.6 |
| 473 : Cervical spinal fusion w/o CC/MCC | 28 | 55 | 50.9% | 2.0 |
| Top Surgical DRGs | 2,616 | 7,511 | 34.8% | 2.4 |
| All Surgical DRGs | 3,509 | 16,761 | 20.9% | 4.2 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Virginia
73 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 5,524 | 11,853 | 46.6% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,517 | 2,021 | 75.1% | 1.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 605 | 1,109 | 54.6% | 2.1 |
| 039 : Extracranial procedures w/o CC/MCC | 488 | 589 | 82.9% | 1.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 423 | 670 | 63.1% | 2.1 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 338 | 1,850 | 18.3% | 2.7 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 267 | 428 | 62.4% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 257 | 607 | 42.3% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 208 | 1,276 | 16.3% | 3.3 |
| 473 : Cervical spinal fusion w/o CC/MCC | 158 | 324 | 48.8% | 2.0 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 156 | 296 | 52.7% | 2.4 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 151 | 527 | 28.7% | 5.5 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 138 | 159 | 86.8% | 1.4 |
| 472 : Cervical spinal fusion w CC | 132 | 428 | 30.8% | 3.1 |
| 038 : Extracranial procedures w CC | 129 | 282 | 45.7% | 3.0 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 107 | 754 | 14.2% | 2.9 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 104 | 320 | 32.5% | 2.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 96 | 198 | 48.5% | 1.7 |
| 254 : Other vascular procedures w/o CC/MCC | 95 | 341 | 27.9% | 2.7 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 89 | 296 | 30.1% | 2.7 |
| Top Surgical DRGs | 10,982 | 24,328 | 45.1% | 2.3 |
| All Surgical DRGs | 13,811 | 65,234 | 21.2% | 5.3 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Vermont
6 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 261 | 718 | 36.4% | 2.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 74 | 172 | 43.0% | 2.0 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 68 | 102 | 66.7% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 29 | 40 | 72.5% | 2.1 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 20 | 41 | 48.8% | 2.1 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 17 | 183 | 9.3% | 2.6 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 13 | 21 | 61.9% | 1.8 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 11 | 29 | 37.9% | 2.8 |
| 621 : OR procedures for obesity w/o CC/MCC | 11 | 15 | 73.3% | 1.3 |
| Top Surgical DRGs | 504 | 1,321 | 38.2% | 2.4 |
| All Surgical DRGs | 707 | 4,149 | 17.0% | 5.7 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Washington
49 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,616 | 5,749 | 45.5% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 1,161 | 1,535 | 75.6% | 1.5 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 465 | 712 | 65.3% | 1.8 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 345 | 1,378 | 25.0% | 2.3 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 326 | 448 | 72.8% | 1.8 |
| 039 : Extracranial procedures w/o CC/MCC | 226 | 295 | 76.6% | 1.4 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 210 | 594 | 35.4% | 5.0 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 199 | 308 | 64.6% | 2.0 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 150 | 274 | 54.7% | 2.1 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 150 | 349 | 43.0% | 2.1 |
| 460 : Spinal fusion except cervical w/o MCC | 141 | 670 | 21.0% | 3.3 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 135 | 701 | 19.3% | 2.8 |
| 467 : Revision of hip or knee replacement w CC | 97 | 482 | 20.1% | 3.5 |
| 469 : Major hip and knee joint replacement or reattachment of lower extremity w MC | 96 | 573 | 16.8% | 5.8 |
| 038 : Extracranial procedures w CC | 93 | 213 | 43.7% | 2.4 |
| 517 : Other musculoskelet sys & conn tiss OR proc w/o CC/MCC | 80 | 163 | 49.1% | 2.2 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 79 | 112 | 70.5% | 1.6 |
| 473 : Cervical spinal fusion w/o CC/MCC | 79 | 143 | 55.2% | 1.8 |
| 254 : Other vascular procedures w/o CC/MCC | 78 | 199 | 39.2% | 2.3 |
| 331 : Major small & large bowel procedures w/o CC/MCC | 76 | 575 | 13.2% | 3.3 |
| Top Surgical DRGs | 6,802 | 15,473 | 44.0% | 2.5 |
| All Surgical DRGs | 9,281 | 43,654 | 21.3% | 5.5 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Wisconsin
64 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1-Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|-----------------------------|---------------------------|---|--------------------------------|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 2,840 | 6,356 | 44.7% | 2.1 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 966 | 1,297 | 74.5% | 1.6 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 375 | 671 | 55.9% | 2.0 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 294 | 1,227 | 24.0% | 2.5 |
| 039 : Extracranial procedures w/o CC/MCC | 290 | 365 | 79.5% | 1.3 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 166 | 280 | 59.3% | 2.2 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 166 | 253 | 65.6% | 1.8 |
| 038 : Extracranial procedures w CC | 141 | 244 | 57.8% | 2.4 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 127 | 370 | 34.3% | 4.6 |
| 468 : Revision of hip or knee replacement w/o CC/MCC | 117 | 260 | 45.0% | 2.0 |
| 460 : Spinal fusion except cervical w/o MCC | 80 | 587 | 13.6% | 3.2 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 67 | 141 | 47.5% | 2.5 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 61 | 726 | 8.4% | 4.8 |
| 165 : Major chest procedures w/o CC/MCC | 53 | 157 | 33.8% | 2.4 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 52 | 140 | 37.1% | 2.1 |
| 472 : Cervical spinal fusion w CC | 51 | 170 | 30.0% | 3.2 |
| 419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC | 49 | 186 | 26.3% | 2.5 |
| 467 : Revision of hip or knee replacement w CC | 49 | 453 | 10.8% | 3.8 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 47 | 195 | 24.1% | 2.6 |
| 473 : Cervical spinal fusion w/o CC/MCC | 47 | 97 | 48.5% | 2.0 |
| Top Surgical DRGs | 6,038 | 14,175 | 42.6% | 2.4 |
| All Surgical DRGs | 7,811 | 38,053 | 20.5% | 5.4 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
West Virginia
29 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|--|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 817 | 2,501 | 32.7% | 2.5 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 296 | 395 | 74.9% | 1.6 |
| 039 : Extracranial procedures w/o CC/MCC | 184 | 258 | 71.3% | 1.6 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 153 | 929 | 16.5% | 3.0 |
| 267 : Endovascular cardiac valve replacement & supplement procedures w/o MCC | 142 | 262 | 54.2% | 2.5 |
| 274 : Percutaneous intracardiac procedures w/o MCC | 138 | 242 | 57.0% | 2.4 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 86 | 149 | 57.7% | 2.3 |
| 460 : Spinal fusion except cervical w/o MCC | 69 | 195 | 35.4% | 3.3 |
| 621 : OR procedures for obesity w/o CC/MCC | 60 | 86 | 69.8% | 1.4 |
| 036 : Carotid artery stent procedure w/o CC/MCC | 54 | 71 | 76.1% | 1.6 |
| 027 : Craniotomy & endovascular intracranial procedures w/o CC/MCC | 52 | 76 | 68.4% | 1.6 |
| 661 : Kidney & ureter procedures for non-neoplasm w/o CC/MCC | 47 | 123 | 38.2% | 2.2 |
| 038 : Extracranial procedures w CC | 43 | 106 | 40.6% | 3.6 |
| 472 : Cervical spinal fusion w CC | 38 | 115 | 33.0% | 4.0 |
| 254 : Other vascular procedures w/o CC/MCC | 26 | 107 | 24.3% | 3.2 |
| 266 : Endovascular cardiac valve replacement & supplement procedures w MCC | 26 | 112 | 23.2% | 7.6 |
| 660 : Kidney & ureter procedures for non-neoplasm w CC | 26 | 194 | 13.4% | 4.3 |
| 252 : Other vascular procedures w MCC | 24 | 222 | 10.8% | 8.0 |
| 253 : Other vascular procedures w CC | 23 | 251 | 9.2% | 6.0 |
| 246 : Percutaneous cardiovascular procedures w drug-eluting stent w MCC or 4+ arte | 22 | 500 | 4.4% | 5.9 |
| Top Surgical DRGs | 2,326 | 6,894 | 33.7% | 3.2 |
| All Surgical DRGs | 3,139 | 19,383 | 16.2% | 6.2 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020

Short-Term State-Level DRG Report Q2FY20
Top 20 Surgical DRGs for Same- and 1-Day Stays
Wyoming
10 Hospitals
Discharges for most recent 4 quarters, ending Q2FY20
In Descending Order by Same- and 1-Day Stay Counts Per DRG

| DRG Code and Description | Same- and 1-Day Stay Count* | Total Discharges for DRG* | Proportion of Same- and 1- Day Stays to Total Discharges | Average Length of Stay for DRG |
|---|---|---------------------------------|---|---|
| 470 : Major hip and knee joint replacement or reattachment of lower extremity w/o | 174 | 508 | 34.3% | 2.3 |
| 483 : Major joint/limb reattachment procedure of upper extremities | 117 | 171 | 68.4% | 1.5 |
| 247 : Perc cardiovasc proc w drug-eluting stent w/o MCC | 58 | 163 | 35.6% | 2.1 |
| 455 : Combined anterior/posterior spinal fusion w/o CC/MCC | 20 | 58 | 34.5% | 2.3 |
| 460 : Spinal fusion except cervical w/o MCC | 20 | 81 | 24.7% | 3.0 |
| 039 : Extracranial procedures w/o CC/MCC | 19 | 41 | 46.3% | 1.8 |
| 473 : Cervical spinal fusion w/o CC/MCC | 16 | 30 | 53.3% | 1.6 |
| 269 : Aortic and heart assist procedures except pulsation balloon w/o MCC | 12 | 18 | 66.7% | 1.7 |
| Top Surgical DRGs | 436 | 1,070 | 40.7% | 2.1 |
| All Surgical DRGs | 656 | 3,156 | 20.8% | 4.4 |

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.

*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.

Date prepared: 03SEP2020