



Program for Evaluating Payment Patterns Electronic Report

Short-Term Hospital State-Level Surgical DRG Report

Q2FY21

A decorative graphic at the bottom of the page consists of several overlapping, light green rectangular and square outlines of varying sizes and orientations, creating a complex, abstract shape.

**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Alaska, 8 Hospitals

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	131	529	24.8%	2.8
483 : Major joint or limb reattachment procs of upper extremities	87	134	64.9%	2.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	73	89	82.0%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	43	147	29.3%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	35	65	53.8%	5.2
274 : Percutaneous and other intracardiac procs w/o MCC	27	46	58.7%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	25	56	44.6%	2.3
039 : Extracranial procs w/o CC/MCC	14	36	38.9%	1.9
460 : Spinal fusion except cervical w/o MCC	14	69	20.3%	2.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	13	20	65.0%	2.3
Top Surgical DRGs	462	1,191	38.8%	2.7
All Surgical DRGs	744	4,325	17.2%	7.1

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Alabama, 82 Hospitals

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	846	2,560	33.0%	2.4
483 : Major joint or limb reattachment procs of upper extremities	554	751	73.8%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	383	481	79.6%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	263	360	73.1%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	261	421	62.0%	2.8
039 : Extracranial procs w/o CC/MCC	228	322	70.8%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	213	1,019	20.9%	2.5
460 : Spinal fusion except cervical w/o MCC	200	751	26.6%	2.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	130	215	60.5%	2.1
473 : Cervical spinal fusion w/o CC/MCC	117	152	77.0%	1.5
472 : Cervical spinal fusion w CC	102	205	49.8%	2.8
621 : OR procs for obesity w/o CC/MCC	93	118	78.8%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	86	188	45.7%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	74	116	63.8%	2.2
036 : Carotid artery stent procs w/o CC/MCC	68	79	86.1%	1.2
038 : Extracranial procs w CC	66	168	39.3%	3.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	59	324	18.2%	2.6
254 : Other vascular procs w/o CC/MCC	58	146	39.7%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	56	628	8.9%	5.1
467 : Revision of hip or knee replacement w CC	47	354	13.3%	3.9
Top Surgical DRGs	3,904	9,358	41.7%	2.5
All Surgical DRGs	5,480	31,161	17.6%	6.0

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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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Arkansas, 46 Hospitals

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	551	2,252	24.5%	2.4
483 : Major joint or limb reattachment procs of upper extremities	544	699	77.8%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	375	477	78.6%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	297	880	33.8%	2.2
039 : Extracranial procs w/o CC/MCC	208	267	77.9%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	201	237	84.8%	1.3
621 : OR procs for obesity w/o CC/MCC	159	191	83.2%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	141	205	68.8%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	123	221	55.7%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	111	173	64.2%	2.0
460 : Spinal fusion except cervical w/o MCC	81	325	24.9%	2.8
038 : Extracranial procs w CC	79	153	51.6%	2.7
473 : Cervical spinal fusion w/o CC/MCC	73	126	57.9%	1.8
472 : Cervical spinal fusion w CC	58	131	44.3%	2.5
036 : Carotid artery stent procs w/o CC/MCC	57	68	83.8%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	53	533	9.9%	4.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	51	138	37.0%	2.1
253 : Other vascular procs w CC	42	204	20.6%	3.8
467 : Revision of hip or knee replacement w CC	42	230	18.3%	3.6
215 : Other heart assist system implant	40	147	27.2%	5.8
Top Surgical DRGs	3,286	7,657	42.9%	2.4
All Surgical DRGs	4,559	22,991	19.8%	5.2

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Arizona, 64 Hospitals

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	1,187	2,901	40.9%	2.1
483 : Major joint or limb reattachment procs of upper extremities	1,045	1,267	82.5%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	722	885	81.6%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	685	956	71.7%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	288	1,129	25.5%	2.3
039 : Extracranial procs w/o CC/MCC	269	323	83.3%	1.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	220	628	35.0%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	197	285	69.1%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	184	362	50.8%	1.9
460 : Spinal fusion except cervical w/o MCC	154	635	24.3%	3.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	142	408	34.8%	5.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	115	241	47.7%	2.0
036 : Carotid artery stent procs w/o CC/MCC	91	113	80.5%	1.3
473 : Cervical spinal fusion w/o CC/MCC	90	175	51.4%	1.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	77	216	35.6%	2.1
472 : Cervical spinal fusion w CC	71	272	26.1%	3.3
621 : OR procs for obesity w/o CC/MCC	66	109	60.6%	1.5
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	65	262	24.8%	4.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	63	675	9.3%	4.9
038 : Extracranial procs w CC	62	166	37.3%	3.0
Top Surgical DRGs	5,793	12,008	48.2%	2.3
All Surgical DRGs	7,927	38,531	20.6%	5.3

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**Discharges for most recent 4 quarters, ending Q2FY21
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Top Surgical DRGs for Same- and 1-Day Stays - California, 288 Hospitals

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	2,618	9,450	27.7%	2.5
483 : Major joint or limb reattachment procs of upper extremities	2,042	2,968	68.8%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,813	2,516	72.1%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	1,272	1,646	77.3%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	867	3,451	25.1%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	777	1,858	41.8%	4.6
039 : Extracranial procs w/o CC/MCC	598	761	78.6%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	361	814	44.3%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	333	556	59.9%	2.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	271	605	44.8%	2.3
472 : Cervical spinal fusion w CC	266	1,133	23.5%	3.3
038 : Extracranial procs w CC	233	468	49.8%	2.7
460 : Spinal fusion except cervical w/o MCC	229	2,030	11.3%	3.6
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	219	1,376	15.9%	2.9
621 : OR procs for obesity w/o CC/MCC	210	346	60.7%	1.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	201	2,535	7.9%	4.9
467 : Revision of hip or knee replacement w CC	168	1,300	12.9%	4.0
036 : Carotid artery stent procs w/o CC/MCC	163	225	72.4%	1.5
473 : Cervical spinal fusion w/o CC/MCC	152	405	37.5%	2.3
708 : Major male pelvic procs w/o CC/MCC	148	261	56.7%	1.6
Top Surgical DRGs	12,941	34,704	37.3%	2.7
All Surgical DRGs	19,538	135,386	14.4%	6.3

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Top Surgical DRGs for Same- and 1-Day Stays - Colorado, 50 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	1,012	1,259	80.4%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	880	2,179	40.4%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	305	376	81.1%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	281	371	75.7%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	248	768	32.3%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	142	274	51.8%	1.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	113	182	62.1%	1.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	101	180	56.1%	2.3
039 : Extracranial procs w/o CC/MCC	100	120	83.3%	1.3
460 : Spinal fusion except cervical w/o MCC	91	511	17.8%	3.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	88	211	41.7%	4.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	76	694	11.0%	2.7
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	75	263	28.5%	3.8
473 : Cervical spinal fusion w/o CC/MCC	69	128	53.9%	2.1
472 : Cervical spinal fusion w CC	62	252	24.6%	3.1
467 : Revision of hip or knee replacement w CC	49	333	14.7%	3.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	46	436	10.6%	4.6
621 : OR procs for obesity w/o CC/MCC	45	97	46.4%	1.7
038 : Extracranial procs w CC	41	77	53.2%	2.1
331 : Major small and large bowel procs w/o CC/MCC	41	341	12.0%	3.4
Top Surgical DRGs	3,865	9,052	42.7%	2.4
All Surgical DRGs	5,292	25,694	20.6%	5.4

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Connecticut, 27 Hospitals

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	982	2,030	48.4%	2.0
483 : Major joint or limb reattachment procs of upper extremities	350	465	75.3%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	158	249	63.5%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	107	144	74.3%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	91	228	39.9%	4.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	89	467	19.1%	2.6
039 : Extracranial procs w/o CC/MCC	67	91	73.6%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	57	98	58.2%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	52	95	54.7%	2.4
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	36	82	43.9%	1.8
460 : Spinal fusion except cervical w/o MCC	35	330	10.6%	3.5
036 : Carotid artery stent procs w/o CC/MCC	32	44	72.7%	1.6
621 : OR procs for obesity w/o CC/MCC	32	65	49.2%	1.7
467 : Revision of hip or knee replacement w CC	26	180	14.4%	4.2
244 : Permanent cardiac pacemaker implant w/o CC/MCC	24	93	25.8%	2.3
472 : Cervical spinal fusion w CC	24	122	19.7%	3.5
473 : Cervical spinal fusion w/o CC/MCC	24	49	49.0%	1.9
038 : Extracranial procs w CC	23	52	44.2%	2.9
243 : Permanent cardiac pacemaker implant w CC	23	224	10.3%	3.5
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	23	158	14.6%	5.0
Top Surgical DRGs	2,255	5,266	42.8%	2.5
All Surgical DRGs	3,039	18,419	16.5%	6.4

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In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - District of Columbia, 6 Hospitals

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
274 : Percutaneous and other intracardiac procs w/o MCC	82	121	67.8%	1.9
483 : Major joint or limb reattachment procs of upper extremities	59	75	78.7%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	52	193	26.9%	2.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	45	163	27.6%	3.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	33	133	24.8%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	30	52	57.7%	2.4
460 : Spinal fusion except cervical w/o MCC	26	278	9.4%	4.3
472 : Cervical spinal fusion w CC	25	94	26.6%	3.9
036 : Carotid artery stent procs w/o CC/MCC	17	25	68.0%	2.1
708 : Major male pelvic procs w/o CC/MCC	17	19	89.5%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	14	56	25.0%	3.3
039 : Extracranial procs w/o CC/MCC	13	16	81.3%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	12	35	34.3%	4.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	11	124	8.9%	5.0
621 : OR procs for obesity w/o CC/MCC	11	18	61.1%	1.8
Top Surgical DRGs	447	1,402	31.9%	3.2
All Surgical DRGs	812	7,390	11.0%	9.0

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Top Surgical DRGs for Same- and 1-Day Stays - Delaware, 6 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	180	212	84.9%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	165	367	45.0%	2.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	123	160	76.9%	2.0
039 : Extracranial procs w/o CC/MCC	101	113	89.4%	1.2
274 : Percutaneous and other intracardiac procs w/o MCC	65	85	76.5%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	56	71	78.9%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	49	235	20.9%	2.6
621 : OR procs for obesity w/o CC/MCC	37	46	80.4%	1.2
165 : Major chest procs w/o CC/MCC	33	56	58.9%	2.1
036 : Carotid artery stent procs w/o CC/MCC	26	30	86.7%	1.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	21	45	46.7%	2.5
460 : Spinal fusion except cervical w/o MCC	19	144	13.2%	3.0
038 : Extracranial procs w CC	18	34	52.9%	3.1
164 : Major chest procs w CC	18	59	30.5%	3.4
254 : Other vascular procs w/o CC/MCC	17	42	40.5%	3.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	15	100	15.0%	2.7
467 : Revision of hip or knee replacement w CC	12	52	23.1%	4.1
244 : Permanent cardiac pacemaker implant w/o CC/MCC	11	66	16.7%	3.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	11	27	40.7%	6.8
454 : Combined anterior and posterior spinal fusion w CC	11	86	12.8%	4.5
Top Surgical DRGs	988	2,030	48.7%	2.5
All Surgical DRGs	1,294	7,300	17.7%	6.8

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Top Surgical DRGs for Same- and 1-Day Stays - Florida, 165 Hospitals

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	2,788	9,309	29.9%	2.5
483 : Major joint or limb reattachment procs of upper extremities	2,633	3,668	71.8%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	1,639	2,593	63.2%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,116	2,049	54.5%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	1,047	4,398	23.8%	2.6
039 : Extracranial procs w/o CC/MCC	867	1,080	80.3%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	614	1,562	39.3%	4.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	497	793	62.7%	2.2
460 : Spinal fusion except cervical w/o MCC	412	2,288	18.0%	3.3
468 : Revision of hip or knee replacement w/o CC/MCC	360	841	42.8%	2.1
036 : Carotid artery stent procs w/o CC/MCC	342	414	82.6%	1.3
472 : Cervical spinal fusion w CC	302	835	36.2%	3.1
038 : Extracranial procs w CC	297	658	45.1%	3.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	278	496	56.0%	2.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	275	979	28.1%	2.3
621 : OR procs for obesity w/o CC/MCC	263	463	56.8%	1.5
473 : Cervical spinal fusion w/o CC/MCC	260	489	53.2%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	194	2,887	6.7%	5.5
467 : Revision of hip or knee replacement w CC	190	1,370	13.9%	4.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	179	971	18.4%	2.7
Top Surgical DRGs	14,553	38,143	38.2%	2.7
All Surgical DRGs	21,380	139,490	15.3%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Georgia, 99 Hospitals

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	832	2,077	40.1%	2.9
483 : Major joint or limb reattachment procs of upper extremities	686	838	81.9%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	495	675	73.3%	1.8
039 : Extracranial procs w/o CC/MCC	358	434	82.5%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	354	443	79.9%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	305	1,483	20.6%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	239	544	43.9%	3.9
460 : Spinal fusion except cervical w/o MCC	199	868	22.9%	3.3
621 : OR procs for obesity w/o CC/MCC	181	212	85.4%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	169	316	53.5%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	167	259	64.5%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	124	417	29.7%	2.6
038 : Extracranial procs w CC	116	229	50.7%	3.0
473 : Cervical spinal fusion w/o CC/MCC	103	197	52.3%	2.1
472 : Cervical spinal fusion w CC	86	284	30.3%	3.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	77	153	50.3%	2.3
036 : Carotid artery stent procs w/o CC/MCC	67	80	83.8%	1.4
254 : Other vascular procs w/o CC/MCC	67	182	36.8%	2.3
253 : Other vascular procs w CC	57	404	14.1%	5.0
252 : Other vascular procs w MCC	55	900	6.1%	6.9
Top Surgical DRGs	4,737	10,995	43.1%	2.9
All Surgical DRGs	6,807	44,848	15.2%	6.9

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Hawaii, 12 Hospitals

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	97	243	39.9%	2.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	54	77	70.1%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	23	27	85.2%	1.4
483 : Major joint or limb reattachment procs of upper extremities	23	44	52.3%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	19	100	19.0%	2.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	13	22	59.1%	2.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	11	33	33.3%	2.7
Top Surgical DRGs	240	546	44.0%	2.4
All Surgical DRGs	508	4,409	11.5%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Iowa, 33 Hospitals

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	856	2,013	42.5%	2.2
483 : Major joint or limb reattachment procs of upper extremities	591	735	80.4%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	222	704	31.5%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	222	338	65.7%	1.6
039 : Extracranial procs w/o CC/MCC	188	214	87.9%	1.2
274 : Percutaneous and other intracardiac procs w/o MCC	124	152	81.6%	1.5
460 : Spinal fusion except cervical w/o MCC	101	403	25.1%	2.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	95	228	41.7%	3.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	95	126	75.4%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	77	140	55.0%	2.0
708 : Major male pelvic procs w/o CC/MCC	56	75	74.7%	1.3
036 : Carotid artery stent procs w/o CC/MCC	49	56	87.5%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	42	80	52.5%	2.4
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	41	203	20.2%	5.0
038 : Extracranial procs w CC	39	63	61.9%	2.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	37	417	8.9%	5.1
467 : Revision of hip or knee replacement w CC	36	208	17.3%	3.8
254 : Other vascular procs w/o CC/MCC	32	73	43.8%	1.8
621 : OR procs for obesity w/o CC/MCC	32	47	68.1%	1.4
035 : Carotid artery stent procs w CC	26	45	57.8%	2.7
Top Surgical DRGs	2,961	6,320	46.9%	2.4
All Surgical DRGs	3,924	18,930	20.7%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Idaho, 16 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	283	346	81.8%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	227	478	47.5%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	174	210	82.9%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	130	167	77.8%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	121	360	33.6%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	67	100	67.0%	1.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	49	58	84.5%	1.2
039 : Extracranial procs w/o CC/MCC	43	53	81.1%	1.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	34	216	15.7%	2.5
621 : OR procs for obesity w/o CC/MCC	34	52	65.4%	1.4
472 : Cervical spinal fusion w CC	31	71	43.7%	2.4
460 : Spinal fusion except cervical w/o MCC	28	165	17.0%	2.8
254 : Other vascular procs w/o CC/MCC	27	43	62.8%	1.5
473 : Cervical spinal fusion w/o CC/MCC	27	43	62.8%	1.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	25	67	37.3%	4.5
467 : Revision of hip or knee replacement w CC	23	88	26.1%	3.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	20	170	11.8%	3.6
454 : Combined anterior and posterior spinal fusion w CC	19	163	11.7%	3.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	15	27	55.6%	2.2
244 : Permanent cardiac pacemaker implant w/o CC/MCC	12	48	25.0%	2.1
Top Surgical DRGs	1,389	2,925	47.5%	2.1
All Surgical DRGs	1,876	8,014	23.4%	4.5

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Illinois, 122 Hospitals

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	1,812	5,541	32.7%	2.4
483 : Major joint or limb reattachment procs of upper extremities	1,192	1,624	73.4%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	842	1,300	64.8%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	528	2,088	25.3%	2.4
274 : Percutaneous and other intracardiac procs w/o MCC	471	692	68.1%	1.8
039 : Extracranial procs w/o CC/MCC	389	487	79.9%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	284	450	63.1%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	203	412	49.3%	2.0
460 : Spinal fusion except cervical w/o MCC	201	1,074	18.7%	3.4
038 : Extracranial procs w CC	180	357	50.4%	2.9
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	147	411	35.8%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	140	467	30.0%	5.0
165 : Major chest procs w/o CC/MCC	128	294	43.5%	2.2
036 : Carotid artery stent procs w/o CC/MCC	125	170	73.5%	1.5
473 : Cervical spinal fusion w/o CC/MCC	125	210	59.5%	1.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	119	238	50.0%	2.2
472 : Cervical spinal fusion w CC	112	433	25.9%	3.6
467 : Revision of hip or knee replacement w CC	108	743	14.5%	4.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	100	320	31.3%	2.2
660 : Kidney and ureter procs for non-neoplasm w CC	97	698	13.9%	3.8
Top Surgical DRGs	7,303	18,009	40.6%	2.5
All Surgical DRGs	10,754	68,875	15.6%	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: 19JUL2021

**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Indiana, 81 Hospitals

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	2,095	3,966	52.8%	2.0
483 : Major joint or limb reattachment procs of upper extremities	1,054	1,331	79.2%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	387	507	76.3%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	365	561	65.1%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	342	1,415	24.2%	2.4
039 : Extracranial procs w/o CC/MCC	313	371	84.4%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	214	345	62.0%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	178	432	41.2%	3.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	178	273	65.2%	2.3
038 : Extracranial procs w CC	133	216	61.6%	2.3
460 : Spinal fusion except cervical w/o MCC	130	971	13.4%	3.2
708 : Major male pelvic procs w/o CC/MCC	130	177	73.4%	1.4
036 : Carotid artery stent procs w/o CC/MCC	120	161	74.5%	1.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	111	454	24.4%	2.4
467 : Revision of hip or knee replacement w CC	96	438	21.9%	3.8
473 : Cervical spinal fusion w/o CC/MCC	79	130	60.8%	1.8
254 : Other vascular procs w/o CC/MCC	78	175	44.6%	2.1
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	74	870	8.5%	5.2
472 : Cervical spinal fusion w CC	70	227	30.8%	3.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	70	219	32.0%	2.2
Top Surgical DRGs	6,217	13,239	47.0%	2.3
All Surgical DRGs	8,422	41,690	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: 19JUL2021

**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Kansas, 49 Hospitals

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	643	3,569	18.0%	2.3
483 : Major joint or limb reattachment procs of upper extremities	439	843	52.1%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	298	419	71.1%	1.6
039 : Extracranial procs w/o CC/MCC	266	319	83.4%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	167	712	23.5%	2.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	137	368	37.2%	3.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	106	262	40.5%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	101	152	66.4%	2.2
621 : OR procs for obesity w/o CC/MCC	89	128	69.5%	1.3
473 : Cervical spinal fusion w/o CC/MCC	57	112	50.9%	1.9
038 : Extracranial procs w CC	52	98	53.1%	2.3
460 : Spinal fusion except cervical w/o MCC	51	551	9.3%	3.0
708 : Major male pelvic procs w/o CC/MCC	49	72	68.1%	1.4
036 : Carotid artery stent procs w/o CC/MCC	47	47	100%	1.0
472 : Cervical spinal fusion w CC	41	147	27.9%	3.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	38	86	44.2%	2.9
468 : Revision of hip or knee replacement w/o CC/MCC	37	166	22.3%	2.3
254 : Other vascular procs w/o CC/MCC	36	68	52.9%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	34	469	7.2%	4.9
660 : Kidney and ureter procs for non-neoplasm w CC	34	158	21.5%	3.2
Top Surgical DRGs	2,722	8,746	31.1%	2.4
All Surgical DRGs	3,995	24,879	16.1%	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: 19JUL2021

**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Kentucky, 63 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	674	887	76.0%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	477	1,562	30.5%	2.8
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	293	1,090	26.9%	2.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	272	319	85.3%	1.3
039 : Extracranial procs w/o CC/MCC	209	274	76.3%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	178	266	66.9%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	148	221	67.0%	1.8
621 : OR procs for obesity w/o CC/MCC	109	139	78.4%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	104	204	51.0%	2.0
038 : Extracranial procs w CC	88	173	50.9%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	87	181	48.1%	3.9
036 : Carotid artery stent procs w/o CC/MCC	77	98	78.6%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	62	661	9.4%	4.9
467 : Revision of hip or knee replacement w CC	56	267	21.0%	4.0
460 : Spinal fusion except cervical w/o MCC	55	329	16.7%	3.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	51	94	54.3%	2.4
473 : Cervical spinal fusion w/o CC/MCC	48	80	60.0%	2.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	46	147	31.3%	2.3
035 : Carotid artery stent procs w CC	44	75	58.7%	2.5
254 : Other vascular procs w/o CC/MCC	43	118	36.4%	2.4
Top Surgical DRGs	3,121	7,185	43.4%	2.6
All Surgical DRGs	4,449	28,463	15.6%	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: 19JUL2021

**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Louisiana, 87 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	482	656	73.5%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	359	1,530	23.5%	2.8
039 : Extracranial procs w/o CC/MCC	284	357	79.6%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	235	325	72.3%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	180	748	24.1%	2.5
473 : Cervical spinal fusion w/o CC/MCC	169	272	62.1%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	166	244	68.0%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	111	227	48.9%	3.4
621 : OR procs for obesity w/o CC/MCC	102	149	68.5%	1.4
460 : Spinal fusion except cervical w/o MCC	96	508	18.9%	3.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	93	150	62.0%	2.1
472 : Cervical spinal fusion w CC	92	210	43.8%	2.8
036 : Carotid artery stent procs w/o CC/MCC	84	103	81.6%	1.2
038 : Extracranial procs w CC	66	157	42.0%	3.1
468 : Revision of hip or knee replacement w/o CC/MCC	57	152	37.5%	2.1
708 : Major male pelvic procs w/o CC/MCC	57	103	55.3%	1.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	54	127	42.5%	2.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	50	475	10.5%	2.6
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	40	125	32.0%	2.4
252 : Other vascular procs w MCC	38	428	8.9%	6.8
Top Surgical DRGs	2,815	7,046	40.0%	2.6
All Surgical DRGs	4,163	26,296	15.8%	6.0

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Massachusetts, 55 Hospitals

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	1,855	5,830	31.8%	2.3
483 : Major joint or limb reattachment procs of upper extremities	733	1,091	67.2%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	482	917	52.6%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	334	476	70.2%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	284	1,462	19.4%	2.7
039 : Extracranial procs w/o CC/MCC	269	367	73.3%	1.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	126	255	49.4%	2.8
621 : OR procs for obesity w/o CC/MCC	115	190	60.5%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	113	312	36.2%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	102	292	34.9%	2.5
038 : Extracranial procs w CC	101	222	45.5%	2.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	94	214	43.9%	2.3
460 : Spinal fusion except cervical w/o MCC	91	881	10.3%	3.7
165 : Major chest procs w/o CC/MCC	72	300	24.0%	2.4
708 : Major male pelvic procs w/o CC/MCC	71	114	62.3%	1.5
660 : Kidney and ureter procs for non-neoplasm w CC	66	469	14.1%	3.7
254 : Other vascular procs w/o CC/MCC	60	217	27.6%	2.7
331 : Major small and large bowel procs w/o CC/MCC	59	481	12.3%	3.3
164 : Major chest procs w CC	58	636	9.1%	4.3
517 : Other musculoskeletal system and connective tissue OR procs w/o CC/MCC	57	230	24.8%	2.9
Top Surgical DRGs	5,142	14,956	34.4%	2.5
All Surgical DRGs	7,547	50,496	14.9%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Maryland, 46 Hospitals

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	916	2,060	44.5%	2.5
483 : Major joint or limb reattachment procs of upper extremities	550	747	73.6%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	332	578	57.4%	2.2
039 : Extracranial procs w/o CC/MCC	263	318	82.7%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	190	876	21.7%	2.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	143	226	63.3%	2.2
038 : Extracranial procs w CC	138	214	64.5%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	135	276	48.9%	2.1
460 : Spinal fusion except cervical w/o MCC	129	883	14.6%	3.7
274 : Percutaneous and other intracardiac procs w/o MCC	124	197	62.9%	2.1
472 : Cervical spinal fusion w CC	96	329	29.2%	3.3
621 : OR procs for obesity w/o CC/MCC	74	110	67.3%	1.5
467 : Revision of hip or knee replacement w CC	72	314	22.9%	4.2
473 : Cervical spinal fusion w/o CC/MCC	72	139	51.8%	1.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	57	123	46.3%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	55	580	9.5%	4.9
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	53	243	21.8%	5.8
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	51	110	46.4%	1.9
253 : Other vascular procs w CC	47	422	11.1%	5.4
036 : Carotid artery stent procs w/o CC/MCC	45	57	78.9%	1.4
Top Surgical DRGs	3,542	8,802	40.2%	2.9
All Surgical DRGs	5,402	33,876	15.9%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Maine, 17 Hospitals

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	322	570	56.5%	2.1
483 : Major joint or limb reattachment procs of upper extremities	169	198	85.4%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	99	167	59.3%	1.9
039 : Extracranial procs w/o CC/MCC	38	43	88.4%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	36	306	11.8%	2.7
274 : Percutaneous and other intracardiac procs w/o MCC	31	51	60.8%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	30	43	69.8%	1.6
460 : Spinal fusion except cervical w/o MCC	29	61	47.5%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	24	38	63.2%	1.9
038 : Extracranial procs w CC	19	35	54.3%	2.4
621 : OR procs for obesity w/o CC/MCC	17	23	73.9%	1.3
036 : Carotid artery stent procs w/o CC/MCC	16	18	88.9%	1.1
328 : Stomach, esophageal and duodenal procs w/o CC/MCC	14	24	58.3%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	13	22	59.1%	2.2
467 : Revision of hip or knee replacement w CC	13	59	22.0%	3.4
253 : Other vascular procs w CC	11	99	11.1%	4.6
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	11	40	27.5%	2.7
494 : Lower extremity and humerus procs except hip, foot and femur w/o CC/MCC	11	42	26.2%	3.2
Top Surgical DRGs	903	1,839	49.1%	2.3
All Surgical DRGs	1,318	6,911	19.1%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Michigan, 93 Hospitals

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	1,745	3,419	51.0%	2.1
483 : Major joint or limb reattachment procs of upper extremities	1,078	1,402	76.9%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	605	1,065	56.8%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	562	762	73.8%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	319	1,737	18.4%	2.7
039 : Extracranial procs w/o CC/MCC	309	382	80.9%	1.3
460 : Spinal fusion except cervical w/o MCC	199	928	21.4%	3.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	191	324	59.0%	2.4
468 : Revision of hip or knee replacement w/o CC/MCC	183	312	58.7%	1.8
621 : OR procs for obesity w/o CC/MCC	142	226	62.8%	1.5
038 : Extracranial procs w CC	126	242	52.1%	2.8
472 : Cervical spinal fusion w CC	109	408	26.7%	3.4
036 : Carotid artery stent procs w/o CC/MCC	108	146	74.0%	1.5
473 : Cervical spinal fusion w/o CC/MCC	107	220	48.6%	2.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	98	276	35.5%	2.1
252 : Other vascular procs w MCC	83	763	10.9%	7.2
254 : Other vascular procs w/o CC/MCC	76	229	33.2%	2.4
467 : Revision of hip or knee replacement w CC	76	441	17.2%	4.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	74	155	47.7%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	72	345	20.9%	6.0
Top Surgical DRGs	6,262	13,782	45.4%	2.6
All Surgical DRGs	8,827	51,066	17.3%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Minnesota, 48 Hospitals

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	1,105	2,613	42.3%	2.2
483 : Major joint or limb reattachment procs of upper extremities	780	1,018	76.6%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	638	911	70.0%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	343	482	71.2%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	218	932	23.4%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	133	210	63.3%	2.0
039 : Extracranial procs w/o CC/MCC	124	155	80.0%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	109	187	58.3%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	95	198	48.0%	1.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	94	347	27.1%	5.1
472 : Cervical spinal fusion w CC	76	260	29.2%	3.0
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	70	260	26.9%	4.5
467 : Revision of hip or knee replacement w CC	67	448	15.0%	3.4
038 : Extracranial procs w CC	66	146	45.2%	2.5
660 : Kidney and ureter procs for non-neoplasm w CC	60	291	20.6%	3.5
253 : Other vascular procs w CC	53	395	13.4%	4.5
036 : Carotid artery stent procs w/o CC/MCC	50	55	90.9%	1.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	48	683	7.0%	4.9
164 : Major chest procs w CC	47	319	14.7%	4.5
517 : Other musculoskeletal system and connective tissue OR procs w/o CC/MCC	42	94	44.7%	2.4
Top Surgical DRGs	4,218	10,004	42.2%	2.6
All Surgical DRGs	6,038	31,563	19.1%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Missouri, 68 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	927	1,248	74.3%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	619	2,788	22.2%	2.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	535	742	72.1%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	343	1,350	25.4%	2.4
274 : Percutaneous and other intracardiac procs w/o MCC	304	399	76.2%	1.7
039 : Extracranial procs w/o CC/MCC	294	378	77.8%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	212	311	68.2%	1.9
038 : Extracranial procs w CC	129	237	54.4%	2.5
621 : OR procs for obesity w/o CC/MCC	120	201	59.7%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	116	279	41.6%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	105	310	33.9%	4.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	99	173	57.2%	2.2
460 : Spinal fusion except cervical w/o MCC	95	653	14.5%	3.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	85	950	8.9%	4.9
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	82	442	18.6%	2.8
253 : Other vascular procs w CC	80	514	15.6%	4.9
473 : Cervical spinal fusion w/o CC/MCC	76	154	49.4%	2.0
036 : Carotid artery stent procs w/o CC/MCC	70	87	80.5%	1.3
472 : Cervical spinal fusion w CC	62	235	26.4%	3.6
467 : Revision of hip or knee replacement w CC	57	374	15.2%	4.2
Top Surgical DRGs	4,410	11,825	37.3%	2.8
All Surgical DRGs	6,558	41,745	15.7%	6.0

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Mississippi, 59 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	330	436	75.7%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	307	1,215	25.3%	2.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	234	293	79.9%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	230	306	75.2%	1.7
039 : Extracranial procs w/o CC/MCC	210	249	84.3%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	210	762	27.6%	2.2
460 : Spinal fusion except cervical w/o MCC	124	345	35.9%	2.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	102	133	76.7%	1.9
621 : OR procs for obesity w/o CC/MCC	94	155	60.6%	1.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	92	169	54.4%	1.8
038 : Extracranial procs w CC	77	131	58.8%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	68	156	43.6%	3.9
468 : Revision of hip or knee replacement w/o CC/MCC	57	108	52.8%	1.9
036 : Carotid artery stent procs w/o CC/MCC	56	62	90.3%	1.2
473 : Cervical spinal fusion w/o CC/MCC	52	86	60.5%	2.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	48	461	10.4%	4.9
254 : Other vascular procs w/o CC/MCC	47	102	46.1%	2.4
472 : Cervical spinal fusion w CC	37	106	34.9%	3.4
272 : Other major cardiovascular procs w/o CC/MCC	30	57	52.6%	2.1
467 : Revision of hip or knee replacement w CC	30	171	17.5%	4.4
Top Surgical DRGs	2,435	5,503	44.2%	2.5
All Surgical DRGs	3,509	21,524	16.3%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Montana, 13 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	294	359	81.9%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	290	625	46.4%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	142	173	82.1%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	125	149	83.9%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	113	361	31.3%	2.2
039 : Extracranial procs w/o CC/MCC	103	121	85.1%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	95	167	56.9%	3.1
460 : Spinal fusion except cervical w/o MCC	81	255	31.8%	2.7
468 : Revision of hip or knee replacement w/o CC/MCC	57	110	51.8%	1.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	30	57	52.6%	2.3
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	27	85	31.8%	4.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	26	51	51.0%	2.3
254 : Other vascular procs w/o CC/MCC	25	55	45.5%	2.1
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	24	195	12.3%	4.5
708 : Major male pelvic procs w/o CC/MCC	22	30	73.3%	1.4
473 : Cervical spinal fusion w/o CC/MCC	20	31	64.5%	1.6
243 : Permanent cardiac pacemaker implant w CC	16	83	19.3%	2.7
472 : Cervical spinal fusion w CC	16	44	36.4%	3.0
244 : Permanent cardiac pacemaker implant w/o CC/MCC	15	58	25.9%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	15	37	40.5%	2.3
Top Surgical DRGs	1,536	3,046	50.4%	2.3
All Surgical DRGs	1,995	8,361	23.9%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - North Carolina, 85 Hospitals

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	1,714	4,876	35.2%	2.5
483 : Major joint or limb reattachment procs of upper extremities	1,210	1,675	72.2%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	456	787	57.9%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	444	1,985	22.4%	2.5
039 : Extracranial procs w/o CC/MCC	409	505	81.0%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	407	655	62.1%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	239	404	59.2%	2.4
468 : Revision of hip or knee replacement w/o CC/MCC	236	533	44.3%	2.1
460 : Spinal fusion except cervical w/o MCC	168	1,101	15.3%	3.3
621 : OR procs for obesity w/o CC/MCC	153	226	67.7%	1.4
038 : Extracranial procs w CC	140	260	53.8%	2.6
473 : Cervical spinal fusion w/o CC/MCC	140	250	56.0%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	135	403	33.5%	4.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	129	867	14.9%	2.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	128	272	47.1%	2.2
472 : Cervical spinal fusion w CC	124	403	30.8%	3.7
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	118	514	23.0%	5.5
036 : Carotid artery stent procs w/o CC/MCC	102	129	79.1%	1.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	90	1,157	7.8%	5.1
254 : Other vascular procs w/o CC/MCC	86	261	33.0%	2.6
Top Surgical DRGs	6,628	17,263	38.4%	2.7
All Surgical DRGs	9,577	60,944	15.7%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - North Dakota, 8 Hospitals

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	284	537	52.9%	2.1
483 : Major joint or limb reattachment procs of upper extremities	241	283	85.2%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	193	277	69.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	110	118	93.2%	1.2
039 : Extracranial procs w/o CC/MCC	105	125	84.0%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	83	239	34.7%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	65	86	75.6%	1.7
038 : Extracranial procs w CC	51	83	61.4%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	37	67	55.2%	1.7
467 : Revision of hip or knee replacement w CC	25	114	21.9%	3.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	21	178	11.8%	4.4
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	18	78	23.1%	5.2
253 : Other vascular procs w CC	17	95	17.9%	4.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	15	64	23.4%	3.6
243 : Permanent cardiac pacemaker implant w CC	13	74	17.6%	3.4
660 : Kidney and ureter procs for non-neoplasm w CC	13	69	18.8%	3.6
271 : Other major cardiovascular procs w CC	12	58	20.7%	4.1
472 : Cervical spinal fusion w CC	12	29	41.4%	3.4
Top Surgical DRGs	1,315	2,574	51.1%	2.4
All Surgical DRGs	1,640	7,154	22.9%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Nebraska, 24 Hospitals

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	497	1,378	36.1%	2.2
274 : Percutaneous and other intracardiac procs w/o MCC	420	451	93.1%	1.1
483 : Major joint or limb reattachment procs of upper extremities	374	534	70.0%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	137	339	40.4%	1.8
039 : Extracranial procs w/o CC/MCC	114	132	86.4%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	109	378	28.8%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	77	106	72.6%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	67	114	58.8%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	66	144	45.8%	4.2
036 : Carotid artery stent procs w/o CC/MCC	61	68	89.7%	1.1
038 : Extracranial procs w CC	57	88	64.8%	2.4
229 : Other cardiothoracic procs w/o MCC	48	80	60.0%	2.3
467 : Revision of hip or knee replacement w CC	35	208	16.8%	3.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	31	59	52.5%	2.6
253 : Other vascular procs w CC	29	152	19.1%	4.0
473 : Cervical spinal fusion w/o CC/MCC	28	43	65.1%	1.6
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	28	60	46.7%	1.9
254 : Other vascular procs w/o CC/MCC	27	77	35.1%	2.1
460 : Spinal fusion except cervical w/o MCC	27	255	10.6%	3.2
472 : Cervical spinal fusion w CC	25	76	32.9%	3.7
Top Surgical DRGs	2,257	4,742	47.6%	2.2
All Surgical DRGs	3,012	14,852	20.3%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New Hampshire, 13 Hospitals

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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	203	300	67.7%	1.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	164	440	37.3%	2.7
483 : Major joint or limb reattachment procs of upper extremities	156	222	70.3%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	131	156	84.0%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	100	500	20.0%	2.5
039 : Extracranial procs w/o CC/MCC	70	98	71.4%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	53	76	69.7%	1.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	41	150	27.3%	6.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	37	71	52.1%	2.3
621 : OR procs for obesity w/o CC/MCC	30	52	57.7%	1.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	24	39	61.5%	2.3
038 : Extracranial procs w CC	21	53	39.6%	3.4
460 : Spinal fusion except cervical w/o MCC	20	127	15.7%	3.6
243 : Permanent cardiac pacemaker implant w CC	18	115	15.7%	3.3
467 : Revision of hip or knee replacement w CC	18	125	14.4%	4.0
164 : Major chest procs w CC	17	99	17.2%	4.6
244 : Permanent cardiac pacemaker implant w/o CC/MCC	17	81	21.0%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	17	257	6.6%	5.1
165 : Major chest procs w/o CC/MCC	16	39	41.0%	2.4
254 : Other vascular procs w/o CC/MCC	16	49	32.7%	2.5
Top Surgical DRGs	1,169	3,049	38.3%	2.9
All Surgical DRGs	1,723	9,573	18.0%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New Jersey, 63 Hospitals

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	962	2,977	32.3%	2.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	577	921	62.6%	1.9
483 : Major joint or limb reattachment procs of upper extremities	437	618	70.7%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	363	541	67.1%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	264	1,412	18.7%	2.8
039 : Extracranial procs w/o CC/MCC	216	279	77.4%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	158	244	64.8%	2.3
621 : OR procs for obesity w/o CC/MCC	146	222	65.8%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	81	173	46.8%	2.0
165 : Major chest procs w/o CC/MCC	72	169	42.6%	2.2
038 : Extracranial procs w CC	68	165	41.2%	3.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	61	356	17.1%	7.1
460 : Spinal fusion except cervical w/o MCC	60	474	12.7%	3.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	59	915	6.4%	5.8
036 : Carotid artery stent procs w/o CC/MCC	56	79	70.9%	1.6
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	54	255	21.2%	2.6
473 : Cervical spinal fusion w/o CC/MCC	53	103	51.5%	2.2
254 : Other vascular procs w/o CC/MCC	50	150	33.3%	2.9
164 : Major chest procs w CC	48	314	15.3%	4.1
244 : Permanent cardiac pacemaker implant w/o CC/MCC	46	270	17.0%	2.7
Top Surgical DRGs	3,831	10,637	36.0%	2.9
All Surgical DRGs	5,626	43,716	12.9%	6.9

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New Mexico, 31 Hospitals

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	336	615	54.6%	2.1
483 : Major joint or limb reattachment procs of upper extremities	147	177	83.1%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	87	353	24.6%	2.3
274 : Percutaneous and other intracardiac procs w/o MCC	69	98	70.4%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	33	43	76.7%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	31	43	72.1%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	31	50	62.0%	1.6
460 : Spinal fusion except cervical w/o MCC	30	78	38.5%	2.7
039 : Extracranial procs w/o CC/MCC	24	30	80.0%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	20	56	35.7%	5.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	16	190	8.4%	4.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	15	50	30.0%	2.3
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	14	70	20.0%	2.8
254 : Other vascular procs w/o CC/MCC	13	25	52.0%	1.9
660 : Kidney and ureter procs for non-neoplasm w CC	13	63	20.6%	3.1
243 : Permanent cardiac pacemaker implant w CC	12	83	14.5%	3.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	12	55	21.8%	2.6
467 : Revision of hip or knee replacement w CC	12	74	16.2%	4.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	11	38	28.9%	2.2
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	11	76	14.5%	5.1
Top Surgical DRGs	937	2,267	41.3%	2.6
All Surgical DRGs	1,263	8,012	15.8%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Nevada, 22 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	273	349	78.2%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	172	948	18.1%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	123	202	60.9%	3.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	117	162	72.2%	1.5
039 : Extracranial procs w/o CC/MCC	87	117	74.4%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	84	409	20.5%	2.3
621 : OR procs for obesity w/o CC/MCC	68	86	79.1%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	62	134	46.3%	2.1
473 : Cervical spinal fusion w/o CC/MCC	52	77	67.5%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	47	85	55.3%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	41	87	47.1%	3.1
472 : Cervical spinal fusion w CC	39	140	27.9%	3.2
460 : Spinal fusion except cervical w/o MCC	37	323	11.5%	3.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	34	166	20.5%	2.8
708 : Major male pelvic procs w/o CC/MCC	31	50	62.0%	1.4
038 : Extracranial procs w CC	28	64	43.8%	2.5
254 : Other vascular procs w/o CC/MCC	27	73	37.0%	2.3
660 : Kidney and ureter procs for non-neoplasm w CC	25	101	24.8%	3.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	24	84	28.6%	2.1
517 : Other musculoskeletal system and connective tissue OR procs w/o CC/MCC	23	63	36.5%	2.1
Top Surgical DRGs	1,394	3,720	37.5%	2.5
All Surgical DRGs	2,125	14,421	14.7%	6.5

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New York, 139 Hospitals

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	2,805	9,100	30.8%	2.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,218	2,285	53.3%	2.0
483 : Major joint or limb reattachment procs of upper extremities	1,213	1,672	72.5%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	1,052	1,572	66.9%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	1,036	3,241	32.0%	2.5
039 : Extracranial procs w/o CC/MCC	488	619	78.8%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	357	1,244	28.7%	5.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	300	491	61.1%	2.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	228	370	61.6%	2.1
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	225	1,695	13.3%	5.5
621 : OR procs for obesity w/o CC/MCC	220	345	63.8%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	201	533	37.7%	2.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	171	529	32.3%	2.2
038 : Extracranial procs w CC	156	343	45.5%	3.4
036 : Carotid artery stent procs w/o CC/MCC	152	186	81.7%	1.4
708 : Major male pelvic procs w/o CC/MCC	145	222	65.3%	1.5
472 : Cervical spinal fusion w CC	144	530	27.2%	3.8
165 : Major chest procs w/o CC/MCC	141	464	30.4%	2.6
460 : Spinal fusion except cervical w/o MCC	141	1,110	12.7%	4.1
254 : Other vascular procs w/o CC/MCC	136	376	36.2%	2.6
Top Surgical DRGs	10,529	26,927	39.1%	2.7
All Surgical DRGs	16,076	94,460	17.0%	7.1

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Ohio, 124 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	1,751	2,208	79.3%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	1,468	3,730	39.4%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	947	1,234	76.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	823	1,133	72.6%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	608	2,337	26.0%	2.5
039 : Extracranial procs w/o CC/MCC	422	530	79.6%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	285	424	67.2%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	263	477	55.1%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	245	623	39.3%	5.7
038 : Extracranial procs w CC	179	334	53.6%	2.6
460 : Spinal fusion except cervical w/o MCC	158	1,376	11.5%	3.4
467 : Revision of hip or knee replacement w CC	138	690	20.0%	3.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	134	283	47.3%	2.4
621 : OR procs for obesity w/o CC/MCC	134	250	53.6%	1.6
036 : Carotid artery stent procs w/o CC/MCC	131	155	84.5%	1.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	129	369	35.0%	2.1
254 : Other vascular procs w/o CC/MCC	108	259	41.7%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	106	1,453	7.3%	5.3
472 : Cervical spinal fusion w CC	104	428	24.3%	3.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	103	549	18.8%	2.9
Top Surgical DRGs	8,236	18,842	43.7%	2.6
All Surgical DRGs	11,743	65,866	17.8%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Oklahoma, 78 Hospitals

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	1,132	4,331	26.1%	2.3
483 : Major joint or limb reattachment procs of upper extremities	541	933	58.0%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	321	438	73.3%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	238	293	81.2%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	235	722	32.5%	2.3
039 : Extracranial procs w/o CC/MCC	220	259	84.9%	1.2
460 : Spinal fusion except cervical w/o MCC	144	829	17.4%	2.8
473 : Cervical spinal fusion w/o CC/MCC	127	193	65.8%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	113	169	66.9%	1.9
036 : Carotid artery stent procs w/o CC/MCC	83	101	82.2%	1.3
038 : Extracranial procs w CC	78	137	56.9%	2.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	74	177	41.8%	4.7
468 : Revision of hip or knee replacement w/o CC/MCC	73	215	34.0%	2.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	69	426	16.2%	2.5
472 : Cervical spinal fusion w CC	59	166	35.5%	3.3
621 : OR procs for obesity w/o CC/MCC	56	111	50.5%	1.6
035 : Carotid artery stent procs w CC	50	75	66.7%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	45	467	9.6%	4.7
253 : Other vascular procs w CC	41	239	17.2%	4.6
467 : Revision of hip or knee replacement w CC	40	349	11.5%	3.7
Top Surgical DRGs	3,739	10,630	35.2%	2.4
All Surgical DRGs	5,013	28,431	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Oregon, 34 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	518	641	80.8%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	371	1,027	36.1%	2.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	217	376	57.7%	1.8
039 : Extracranial procs w/o CC/MCC	133	169	78.7%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	120	155	77.4%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	113	512	22.1%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	90	213	42.3%	4.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	83	125	66.4%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	73	143	51.0%	1.9
460 : Spinal fusion except cervical w/o MCC	46	205	22.4%	3.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	45	215	20.9%	2.6
038 : Extracranial procs w CC	43	85	50.6%	2.8
254 : Other vascular procs w/o CC/MCC	38	117	32.5%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	35	70	50.0%	2.3
473 : Cervical spinal fusion w/o CC/MCC	33	70	47.1%	2.0
036 : Carotid artery stent procs w/o CC/MCC	31	41	75.6%	1.8
253 : Other vascular procs w CC	31	217	14.3%	4.6
467 : Revision of hip or knee replacement w CC	30	182	16.5%	4.5
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	30	158	19.0%	5.2
660 : Kidney and ureter procs for non-neoplasm w CC	30	142	21.1%	3.3
Top Surgical DRGs	2,110	4,863	43.4%	2.5
All Surgical DRGs	3,183	17,854	17.8%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Pennsylvania, 143 Hospitals

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	3,791	7,940	47.7%	2.0
483 : Major joint or limb reattachment procs of upper extremities	1,411	1,878	75.1%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	778	1,361	57.2%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	602	939	64.1%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	459	2,398	19.1%	2.6
039 : Extracranial procs w/o CC/MCC	372	475	78.3%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	270	770	35.1%	4.8
468 : Revision of hip or knee replacement w/o CC/MCC	260	563	46.2%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	250	423	59.1%	2.4
460 : Spinal fusion except cervical w/o MCC	154	1,336	11.5%	3.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	143	269	53.2%	2.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	141	480	29.4%	2.3
036 : Carotid artery stent procs w/o CC/MCC	135	176	76.7%	1.5
038 : Extracranial procs w CC	128	290	44.1%	3.0
467 : Revision of hip or knee replacement w CC	118	800	14.8%	4.3
621 : OR procs for obesity w/o CC/MCC	116	236	49.2%	1.6
660 : Kidney and ureter procs for non-neoplasm w CC	114	798	14.3%	3.9
473 : Cervical spinal fusion w/o CC/MCC	112	212	52.8%	2.0
708 : Major male pelvic procs w/o CC/MCC	102	180	56.7%	1.7
472 : Cervical spinal fusion w CC	94	454	20.7%	3.8
Top Surgical DRGs	9,550	21,978	43.5%	2.4
All Surgical DRGs	13,026	74,118	17.6%	6.0

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Puerto Rico, 50 Hospitals

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	98	334	29.3%	2.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	61	230	26.5%	3.5
483 : Major joint or limb reattachment procs of upper extremities	27	45	60.0%	2.0
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	13	49	26.5%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	11	84	13.1%	6.0
581 : Other skin, subcutaneous tissue and breast procs w/o CC/MCC	11	33	33.3%	2.9
Top Surgical DRGs	221	775	28.5%	3.2
All Surgical DRGs	469	4,266	11.0%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Rhode Island, 10 Hospitals

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	243	544	44.7%	2.1
483 : Major joint or limb reattachment procs of upper extremities	77	104	74.0%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	49	78	62.8%	1.9
039 : Extracranial procs w/o CC/MCC	33	41	80.5%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	22	25	88.0%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	16	37	43.2%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	15	133	11.3%	2.6
621 : OR procs for obesity w/o CC/MCC	15	23	65.2%	1.6
460 : Spinal fusion except cervical w/o MCC	11	157	7.0%	4.1
Top Surgical DRGs	481	1,142	42.1%	2.3
All Surgical DRGs	725	4,995	14.5%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - South Carolina, 54 Hospitals

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	969	2,047	47.3%	2.3
483 : Major joint or limb reattachment procs of upper extremities	806	1,000	80.6%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	450	616	73.1%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	310	400	77.5%	1.4
039 : Extracranial procs w/o CC/MCC	285	346	82.4%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	274	1,028	26.7%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	246	402	61.2%	3.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	174	238	73.1%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	141	258	54.7%	2.0
460 : Spinal fusion except cervical w/o MCC	135	564	23.9%	3.1
036 : Carotid artery stent procs w/o CC/MCC	114	143	79.7%	1.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	108	349	30.9%	2.3
473 : Cervical spinal fusion w/o CC/MCC	100	159	62.9%	1.7
472 : Cervical spinal fusion w CC	85	239	35.6%	3.0
621 : OR procs for obesity w/o CC/MCC	81	165	49.1%	1.6
254 : Other vascular procs w/o CC/MCC	79	185	42.7%	2.5
038 : Extracranial procs w CC	76	130	58.5%	2.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	70	147	47.6%	2.5
273 : Percutaneous and other intracardiac procs w MCC	63	171	36.8%	4.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	59	592	10.0%	4.8
Top Surgical DRGs	4,625	9,179	50.4%	2.3
All Surgical DRGs	6,279	31,338	20.0%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - South Dakota, 19 Hospitals

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	727	1,728	42.1%	2.0
483 : Major joint or limb reattachment procs of upper extremities	390	495	78.8%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	103	346	29.8%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	95	146	65.1%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	74	101	73.3%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	70	85	82.4%	1.6
039 : Extracranial procs w/o CC/MCC	64	71	90.1%	1.1
468 : Revision of hip or knee replacement w/o CC/MCC	56	119	47.1%	1.9
036 : Carotid artery stent procs w/o CC/MCC	51	62	82.3%	1.4
473 : Cervical spinal fusion w/o CC/MCC	37	57	64.9%	1.5
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	35	92	38.0%	4.0
621 : OR procs for obesity w/o CC/MCC	35	47	74.5%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	32	92	34.8%	3.6
038 : Extracranial procs w CC	26	39	66.7%	2.1
489 : Knee procs w/o PDx of infection w/o CC/MCC	26	29	89.7%	1.1
467 : Revision of hip or knee replacement w CC	21	126	16.7%	4.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	19	185	10.3%	2.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	16	216	7.4%	4.6
460 : Spinal fusion except cervical w/o MCC	15	202	7.4%	3.0
660 : Kidney and ureter procs for non-neoplasm w CC	15	85	17.6%	3.2
Top Surgical DRGs	1,907	4,323	44.1%	2.2
All Surgical DRGs	2,378	10,449	22.8%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Tennessee, 83 Hospitals

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	1,317	3,172	41.5%	2.4
483 : Major joint or limb reattachment procs of upper extremities	1,054	1,291	81.6%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	546	742	73.6%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	423	637	66.4%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	397	1,483	26.8%	2.3
039 : Extracranial procs w/o CC/MCC	343	445	77.1%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	241	560	43.0%	4.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	194	310	62.6%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	163	316	51.6%	2.1
460 : Spinal fusion except cervical w/o MCC	142	826	17.2%	3.4
473 : Cervical spinal fusion w/o CC/MCC	136	208	65.4%	1.7
036 : Carotid artery stent procs w/o CC/MCC	134	158	84.8%	1.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	129	211	61.1%	2.2
467 : Revision of hip or knee replacement w CC	108	486	22.2%	3.8
621 : OR procs for obesity w/o CC/MCC	106	172	61.6%	1.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	88	994	8.9%	4.9
038 : Extracranial procs w CC	78	201	38.8%	3.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	77	494	15.6%	3.0
472 : Cervical spinal fusion w CC	76	256	29.7%	3.4
254 : Other vascular procs w/o CC/MCC	67	213	31.5%	2.4
Top Surgical DRGs	5,819	13,175	44.2%	2.6
All Surgical DRGs	8,444	46,646	18.1%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Texas, 292 Hospitals

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	3,473	10,529	33.0%	2.3
483 : Major joint or limb reattachment procs of upper extremities	2,068	2,912	71.0%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	1,327	1,958	67.8%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	940	1,359	69.2%	1.7
039 : Extracranial procs w/o CC/MCC	801	1,018	78.7%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	790	3,533	22.4%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	498	1,291	38.6%	4.2
621 : OR procs for obesity w/o CC/MCC	448	630	71.1%	1.4
460 : Spinal fusion except cervical w/o MCC	425	2,298	18.5%	3.1
473 : Cervical spinal fusion w/o CC/MCC	397	667	59.5%	1.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	377	598	63.0%	2.3
472 : Cervical spinal fusion w CC	341	974	35.0%	2.8
036 : Carotid artery stent procs w/o CC/MCC	304	365	83.3%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	289	767	37.7%	2.2
038 : Extracranial procs w CC	260	553	47.0%	3.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	229	1,250	18.3%	2.6
467 : Revision of hip or knee replacement w CC	212	1,299	16.3%	4.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	199	437	45.5%	2.5
254 : Other vascular procs w/o CC/MCC	180	506	35.6%	2.4
252 : Other vascular procs w MCC	174	2,441	7.1%	6.9
Top Surgical DRGs	13,732	35,385	38.8%	2.7
All Surgical DRGs	19,916	129,288	15.4%	6.0

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Utah, 32 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	582	700	83.1%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	190	869	21.9%	2.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	163	448	36.4%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	148	184	80.4%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	142	237	59.9%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	122	242	50.4%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	59	371	15.9%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	55	156	35.3%	4.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	54	318	17.0%	3.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	51	68	75.0%	1.6
467 : Revision of hip or knee replacement w CC	50	219	22.8%	3.2
460 : Spinal fusion except cervical w/o MCC	46	346	13.3%	3.0
039 : Extracranial procs w/o CC/MCC	45	57	78.9%	1.4
621 : OR procs for obesity w/o CC/MCC	38	55	69.1%	1.3
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	32	104	30.8%	3.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	29	58	50.0%	2.4
036 : Carotid artery stent procs w/o CC/MCC	28	33	84.8%	1.2
243 : Permanent cardiac pacemaker implant w CC	24	99	24.2%	2.6
244 : Permanent cardiac pacemaker implant w/o CC/MCC	24	57	42.1%	1.8
038 : Extracranial procs w CC	23	36	63.9%	1.8
Top Surgical DRGs	1,905	4,657	40.9%	2.3
All Surgical DRGs	2,743	12,796	21.4%	4.5

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Virginia, 73 Hospitals

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	1,926	3,683	52.3%	2.2
483 : Major joint or limb reattachment procs of upper extremities	1,113	1,380	80.7%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	705	1,089	64.7%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	512	712	71.9%	1.7
039 : Extracranial procs w/o CC/MCC	370	431	85.8%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	346	1,611	21.5%	2.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	223	345	64.6%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	183	357	51.3%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	162	553	29.3%	5.6
460 : Spinal fusion except cervical w/o MCC	153	904	16.9%	3.3
036 : Carotid artery stent procs w/o CC/MCC	137	169	81.1%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	126	209	60.3%	1.9
038 : Extracranial procs w CC	104	194	53.6%	2.5
472 : Cervical spinal fusion w CC	104	330	31.5%	3.1
621 : OR procs for obesity w/o CC/MCC	92	141	65.2%	1.4
473 : Cervical spinal fusion w/o CC/MCC	90	179	50.3%	2.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	85	591	14.4%	2.9
467 : Revision of hip or knee replacement w CC	78	420	18.6%	3.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	72	209	34.4%	2.0
254 : Other vascular procs w/o CC/MCC	71	243	29.2%	2.4
Top Surgical DRGs	6,652	13,750	48.4%	2.4
All Surgical DRGs	9,085	48,647	18.7%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Vermont, 6 Hospitals

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	112	302	37.1%	2.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	80	148	54.1%	2.1
483 : Major joint or limb reattachment procs of upper extremities	54	71	76.1%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	27	165	16.4%	2.5
039 : Extracranial procs w/o CC/MCC	23	30	76.7%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	18	37	48.6%	2.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	12	23	52.2%	2.3
460 : Spinal fusion except cervical w/o MCC	12	75	16.0%	4.2
Top Surgical DRGs	338	851	39.7%	2.4
All Surgical DRGs	525	3,392	15.5%	6.5

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Washington, 47 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	796	1,015	78.4%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	729	1,677	43.5%	2.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	536	697	76.9%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	405	493	82.2%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	342	1,221	28.0%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	294	627	46.9%	3.8
039 : Extracranial procs w/o CC/MCC	183	221	82.8%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	179	264	67.8%	1.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	140	233	60.1%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	140	259	54.1%	1.9
036 : Carotid artery stent procs w/o CC/MCC	88	110	80.0%	1.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	88	465	18.9%	2.7
621 : OR procs for obesity w/o CC/MCC	81	116	69.8%	1.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	78	826	9.4%	5.0
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	74	297	24.9%	5.6
460 : Spinal fusion except cervical w/o MCC	72	381	18.9%	3.6
038 : Extracranial procs w CC	68	137	49.6%	2.6
467 : Revision of hip or knee replacement w CC	66	375	17.6%	4.4
254 : Other vascular procs w/o CC/MCC	65	171	38.0%	2.3
331 : Major small and large bowel procs w/o CC/MCC	64	439	14.6%	3.2
Top Surgical DRGs	4,488	10,024	44.8%	2.7
All Surgical DRGs	6,660	33,802	19.7%	6.0

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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Wisconsin, 66 Hospitals

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	965	2,263	42.6%	2.2
483 : Major joint or limb reattachment procs of upper extremities	623	787	79.2%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	340	560	60.7%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	261	981	26.6%	2.3
039 : Extracranial procs w/o CC/MCC	184	235	78.3%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	119	199	59.8%	2.6
274 : Percutaneous and other intracardiac procs w/o MCC	112	188	59.6%	2.0
038 : Extracranial procs w CC	108	186	58.1%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	99	303	32.7%	5.1
468 : Revision of hip or knee replacement w/o CC/MCC	74	145	51.0%	1.8
467 : Revision of hip or knee replacement w CC	53	338	15.7%	3.7
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	51	616	8.3%	4.8
460 : Spinal fusion except cervical w/o MCC	43	362	11.9%	3.4
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	43	208	20.7%	5.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	40	163	24.5%	2.5
164 : Major chest procs w CC	37	204	18.1%	4.0
243 : Permanent cardiac pacemaker implant w CC	37	288	12.8%	3.1
254 : Other vascular procs w/o CC/MCC	37	88	42.0%	2.4
660 : Kidney and ureter procs for non-neoplasm w CC	37	213	17.4%	3.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	35	90	38.9%	2.6
Top Surgical DRGs	3,298	8,417	39.2%	2.7
All Surgical DRGs	4,684	27,434	17.1%	6.0

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*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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - West Virginia, 26 Hospitals

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	490	1,209	40.5%	2.3
483 : Major joint or limb reattachment procs of upper extremities	227	294	77.2%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	144	809	17.8%	2.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	140	240	58.3%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	134	206	65.0%	2.2
039 : Extracranial procs w/o CC/MCC	108	137	78.8%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	70	107	65.4%	2.1
036 : Carotid artery stent procs w/o CC/MCC	59	73	80.8%	1.5
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	30	480	6.3%	5.6
035 : Carotid artery stent procs w CC	29	54	53.7%	2.6
038 : Extracranial procs w CC	29	72	40.3%	3.8
254 : Other vascular procs w/o CC/MCC	28	90	31.1%	3.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	27	46	58.7%	2.3
243 : Permanent cardiac pacemaker implant w CC	22	196	11.2%	4.5
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	22	41	53.7%	1.9
460 : Spinal fusion except cervical w/o MCC	21	120	17.5%	4.5
621 : OR procs for obesity w/o CC/MCC	21	34	61.8%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	20	114	17.5%	8.5
468 : Revision of hip or knee replacement w/o CC/MCC	20	66	30.3%	2.9
660 : Kidney and ureter procs for non-neoplasm w CC	19	140	13.6%	4.3
Top Surgical DRGs	1,660	4,528	36.7%	3.1
All Surgical DRGs	2,275	15,252	14.9%	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.

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**Discharges for most recent 4 quarters, ending Q2FY21
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Wyoming, 10 Hospitals

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
483 : Major joint or limb reattachment procs of upper extremities	110	133	82.7%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	103	232	44.4%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	49	122	40.2%	1.9
039 : Extracranial procs w/o CC/MCC	16	41	39.0%	1.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	14	34	41.2%	2.4
460 : Spinal fusion except cervical w/o MCC	14	70	20.0%	2.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	13	42	31.0%	2.4
Top Surgical DRGs	319	674	47.3%	2.1
All Surgical DRGs	553	2,652	20.9%	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.

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