



Program for Evaluating Payment Patterns Electronic Report

Short-Term Hospital State-Level Surgical DRG Report

Q3FY22

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 Q3FY22
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	68	335	20.3%	2.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	66	78	84.6%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	39	52	75.0%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	33	152	21.7%	2.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	33	63	52.4%	6.3
483 : Major joint or limb reattachment procs of upper extremities	27	46	58.7%	4.2
468 : Revision of hip or knee replacement w/o CC/MCC	20	50	40.0%	2.9
621 : OR procs for obesity w/o CC/MCC	15	16	93.8%	1.1
460 : Spinal fusion except cervical w/o MCC	14	84	16.7%	4.3
472 : Cervical spinal fusion w CC	13	59	22.0%	3.7
039 : Extracranial procs w/o CC/MCC	12	45	26.7%	1.9
036 : Carotid artery stent procs w/o CC/MCC	11	15	73.3%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	11	103	10.7%	5.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	11	25	44.0%	3.2
Top Surgical DRGs	373	1,123	33.2%	3.1
All Surgical DRGs	626	4,115	15.2%	7.6

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	659	732	90.0%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	508	1,168	43.5%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	336	468	71.8%	1.6
039 : Extracranial procs w/o CC/MCC	292	381	76.6%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	223	350	63.7%	2.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	164	778	21.1%	2.7
460 : Spinal fusion except cervical w/o MCC	157	621	25.3%	3.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	113	208	54.3%	2.8
483 : Major joint or limb reattachment procs of upper extremities	101	196	51.5%	2.5
036 : Carotid artery stent procs w/o CC/MCC	95	110	86.4%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	86	202	42.6%	2.1
621 : OR procs for obesity w/o CC/MCC	79	111	71.2%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	75	119	63.0%	2.1
472 : Cervical spinal fusion w CC	71	157	45.2%	3.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	69	330	20.9%	2.4
038 : Extracranial procs w CC	62	142	43.7%	3.3
473 : Cervical spinal fusion w/o CC/MCC	58	85	68.2%	1.6
253 : Other vascular procs w CC	51	313	16.3%	4.8
254 : Other vascular procs w/o CC/MCC	48	128	37.5%	2.3
467 : Revision of hip or knee replacement w CC	48	279	17.2%	4.0
Top Surgical DRGs	3,295	6,878	47.9%	2.4
All Surgical DRGs	4,712	26,615	17.7%	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 Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	530	602	88.0%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	518	1,545	33.5%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	274	320	85.6%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	224	750	29.9%	2.3
039 : Extracranial procs w/o CC/MCC	212	263	80.6%	1.3
621 : OR procs for obesity w/o CC/MCC	165	227	72.7%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	158	238	66.4%	2.7
483 : Major joint or limb reattachment procs of upper extremities	139	231	60.2%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	96	130	73.8%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	94	178	52.8%	1.8
036 : Carotid artery stent procs w/o CC/MCC	71	83	85.5%	1.2
038 : Extracranial procs w CC	70	130	53.8%	2.6
460 : Spinal fusion except cervical w/o MCC	62	307	20.2%	3.0
472 : Cervical spinal fusion w CC	53	124	42.7%	2.6
254 : Other vascular procs w/o CC/MCC	39	79	49.4%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	38	511	7.4%	4.7
473 : Cervical spinal fusion w/o CC/MCC	37	81	45.7%	2.0
035 : Carotid artery stent procs w CC	35	51	68.6%	1.9
244 : Permanent cardiac pacemaker implant w/o CC/MCC	33	101	32.7%	2.1
253 : Other vascular procs w CC	32	181	17.7%	4.0
Top Surgical DRGs	2,880	6,132	47.0%	2.2
All Surgical DRGs	4,009	21,128	19.0%	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 Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	1,176	1,315	89.4%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	765	1,712	44.7%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	724	919	78.8%	1.4
039 : Extracranial procs w/o CC/MCC	265	320	82.8%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	260	988	26.3%	2.3
483 : Major joint or limb reattachment procs of upper extremities	256	376	68.1%	1.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	172	377	45.6%	4.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	165	251	65.7%	2.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	127	454	28.0%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	119	219	54.3%	2.1
460 : Spinal fusion except cervical w/o MCC	112	535	20.9%	3.2
036 : Carotid artery stent procs w/o CC/MCC	107	130	82.3%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	106	247	42.9%	2.0
621 : OR procs for obesity w/o CC/MCC	85	122	69.7%	1.4
473 : Cervical spinal fusion w/o CC/MCC	81	138	58.7%	1.8
472 : Cervical spinal fusion w CC	74	252	29.4%	3.2
038 : Extracranial procs w CC	66	143	46.2%	2.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	62	183	33.9%	2.0
254 : Other vascular procs w/o CC/MCC	58	119	48.7%	2.0
244 : Permanent cardiac pacemaker implant w/o CC/MCC	55	202	27.2%	2.3
Top Surgical DRGs	4,835	9,002	53.7%	2.1
All Surgical DRGs	6,926	35,560	19.5%	5.5

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**Discharges for most recent 4 quarters, ending Q3FY22
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Top Surgical DRGs for Same- and 1-Day Stays - California, 285 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	3,539	8,571	41.3%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	2,435	2,926	83.2%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	2,187	2,984	73.3%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	846	3,478	24.3%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	785	1,907	41.2%	4.9
039 : Extracranial procs w/o CC/MCC	628	806	77.9%	1.4
483 : Major joint or limb reattachment procs of upper extremities	539	1,204	44.8%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	368	596	61.7%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	328	708	46.3%	2.0
036 : Carotid artery stent procs w/o CC/MCC	326	429	76.0%	1.5
621 : OR procs for obesity w/o CC/MCC	313	485	64.5%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	303	647	46.8%	2.2
472 : Cervical spinal fusion w CC	229	1,084	21.1%	3.6
460 : Spinal fusion except cervical w/o MCC	227	2,305	9.8%	3.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	200	2,814	7.1%	5.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	196	1,574	12.5%	3.0
038 : Extracranial procs w CC	189	450	42.0%	3.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	169	533	31.7%	2.2
273 : Percutaneous and other intracardiac procs w MCC	163	551	29.6%	5.1
252 : Other vascular procs w MCC	158	2,179	7.3%	6.9
Top Surgical DRGs	14,128	36,231	39.0%	2.9
All Surgical DRGs	21,571	141,805	15.2%	6.4

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**Discharges for most recent 4 quarters, ending Q3FY22
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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
274 : Percutaneous and other intracardiac procs w/o MCC	636	713	89.2%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	372	745	49.9%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	288	351	82.1%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	232	703	33.0%	2.1
483 : Major joint or limb reattachment procs of upper extremities	182	315	57.8%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	170	284	59.9%	3.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	105	148	70.9%	1.7
039 : Extracranial procs w/o CC/MCC	104	127	81.9%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	91	162	56.2%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	89	193	46.1%	2.1
460 : Spinal fusion except cervical w/o MCC	74	466	15.9%	3.4
621 : OR procs for obesity w/o CC/MCC	66	117	56.4%	1.6
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	65	534	12.2%	2.8
472 : Cervical spinal fusion w CC	61	224	27.2%	3.2
038 : Extracranial procs w CC	50	76	65.8%	1.9
036 : Carotid artery stent procs w/o CC/MCC	44	64	68.8%	1.7
473 : Cervical spinal fusion w/o CC/MCC	41	102	40.2%	2.4
467 : Revision of hip or knee replacement w CC	40	262	15.3%	3.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	39	440	8.9%	4.3
454 : Combined anterior and posterior spinal fusion w CC	39	649	6.0%	4.2
Top Surgical DRGs	2,788	6,675	41.8%	2.6
All Surgical DRGs	4,136	22,606	18.3%	6.1

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**Discharges for most recent 4 quarters, ending Q3FY22
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	608	1,123	54.1%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	224	311	72.0%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	181	241	75.1%	1.7
483 : Major joint or limb reattachment procs of upper extremities	127	174	73.0%	1.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	93	223	41.7%	4.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	84	413	20.3%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	70	106	66.0%	1.9
039 : Extracranial procs w/o CC/MCC	56	79	70.9%	1.5
621 : OR procs for obesity w/o CC/MCC	55	85	64.7%	1.5
036 : Carotid artery stent procs w/o CC/MCC	45	61	73.8%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	44	89	49.4%	2.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	40	109	36.7%	2.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	31	116	26.7%	2.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	30	62	48.4%	2.2
660 : Kidney and ureter procs for non-neoplasm w CC	30	158	19.0%	3.8
038 : Extracranial procs w CC	29	57	50.9%	2.9
460 : Spinal fusion except cervical w/o MCC	28	334	8.4%	3.4
254 : Other vascular procs w/o CC/MCC	26	63	41.3%	2.5
243 : Permanent cardiac pacemaker implant w CC	25	233	10.7%	3.3
472 : Cervical spinal fusion w CC	25	112	22.3%	3.3
Top Surgical DRGs	1,851	4,149	44.6%	2.4
All Surgical DRGs	2,598	17,218	15.1%	7.0

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**Discharges for most recent 4 quarters, ending Q3FY22
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	120	152	78.9%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	79	246	32.1%	2.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	50	138	36.2%	2.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	24	120	20.0%	2.8
708 : Major male pelvic procs w/o CC/MCC	23	26	88.5%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	21	47	44.7%	2.6
472 : Cervical spinal fusion w CC	19	114	16.7%	4.3
483 : Major joint or limb reattachment procs of upper extremities	19	36	52.8%	3.4
036 : Carotid artery stent procs w/o CC/MCC	17	20	85.0%	1.6
460 : Spinal fusion except cervical w/o MCC	16	318	5.0%	4.7
039 : Extracranial procs w/o CC/MCC	15	20	75.0%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	13	33	39.4%	2.8
468 : Revision of hip or knee replacement w/o CC/MCC	13	65	20.0%	2.7
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	13	41	31.7%	2.0
Top Surgical DRGs	442	1,376	32.1%	3.0
All Surgical DRGs	845	7,626	11.1%	8.9

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**Discharges for most recent 4 quarters, ending Q3FY22
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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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	157	185	84.9%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	117	142	82.4%	1.7
039 : Extracranial procs w/o CC/MCC	57	76	75.0%	1.8
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	38	215	17.7%	2.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	36	98	36.7%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	28	51	54.9%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	25	41	61.0%	2.2
621 : OR procs for obesity w/o CC/MCC	23	25	92.0%	1.1
036 : Carotid artery stent procs w/o CC/MCC	22	28	78.6%	1.6
460 : Spinal fusion except cervical w/o MCC	21	99	21.2%	3.9
164 : Major chest procs w CC	19	71	26.8%	4.1
254 : Other vascular procs w/o CC/MCC	18	32	56.3%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	17	52	32.7%	8.7
038 : Extracranial procs w CC	16	39	41.0%	4.4
165 : Major chest procs w/o CC/MCC	16	36	44.4%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	14	87	16.1%	2.9
467 : Revision of hip or knee replacement w CC	14	50	28.0%	6.7
244 : Permanent cardiac pacemaker implant w/o CC/MCC	11	59	18.6%	2.7
272 : Other major cardiovascular procs w/o CC/MCC	11	21	52.4%	2.1
Top Surgical DRGs	660	1,407	46.9%	2.8
All Surgical DRGs	924	6,481	14.3%	7.9

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Top Surgical DRGs for Same- and 1-Day Stays - Florida, 167 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	2,884	3,798	75.9%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	1,857	4,928	37.7%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,526	2,376	64.2%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	915	3,983	23.0%	2.6
039 : Extracranial procs w/o CC/MCC	804	1,017	79.1%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	739	1,667	44.3%	4.7
483 : Major joint or limb reattachment procs of upper extremities	713	1,359	52.5%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	448	711	63.0%	2.2
036 : Carotid artery stent procs w/o CC/MCC	396	495	80.0%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	328	664	49.4%	2.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	293	489	59.9%	2.0
472 : Cervical spinal fusion w CC	291	942	30.9%	3.4
460 : Spinal fusion except cervical w/o MCC	282	2,106	13.4%	3.5
621 : OR procs for obesity w/o CC/MCC	252	418	60.3%	1.5
038 : Extracranial procs w CC	248	532	46.6%	3.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	244	941	25.9%	2.4
473 : Cervical spinal fusion w/o CC/MCC	207	419	49.4%	2.1
467 : Revision of hip or knee replacement w CC	186	1,238	15.0%	4.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	181	2,956	6.1%	5.7
660 : Kidney and ureter procs for non-neoplasm w CC	175	1,440	12.2%	4.1
Top Surgical DRGs	12,969	32,479	39.9%	2.8
All Surgical DRGs	19,190	129,638	14.8%	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 Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	945	1,099	86.0%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	389	492	79.1%	1.5
039 : Extracranial procs w/o CC/MCC	351	407	86.2%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	305	1,366	22.3%	2.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	250	707	35.4%	2.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	233	528	44.1%	4.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	169	234	72.2%	2.0
621 : OR procs for obesity w/o CC/MCC	148	175	84.6%	1.2
483 : Major joint or limb reattachment procs of upper extremities	122	227	53.7%	2.6
038 : Extracranial procs w CC	121	236	51.3%	3.0
468 : Revision of hip or knee replacement w/o CC/MCC	117	229	51.1%	2.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	110	459	24.0%	2.7
460 : Spinal fusion except cervical w/o MCC	99	736	13.5%	3.6
036 : Carotid artery stent procs w/o CC/MCC	97	113	85.8%	1.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	79	168	47.0%	2.4
473 : Cervical spinal fusion w/o CC/MCC	72	145	49.7%	2.3
254 : Other vascular procs w/o CC/MCC	71	181	39.2%	2.5
472 : Cervical spinal fusion w CC	65	278	23.4%	4.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	59	1,008	5.9%	5.6
165 : Major chest procs w/o CC/MCC	55	202	27.2%	2.8
Top Surgical DRGs	3,857	8,990	42.9%	2.9
All Surgical DRGs	5,848	40,899	14.3%	7.2

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 Q3FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	68	77	88.3%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	31	114	27.2%	3.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	22	41	53.7%	2.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	21	117	17.9%	2.9
274 : Percutaneous and other intracardiac procs w/o MCC	19	24	79.2%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	15	34	44.1%	2.1
039 : Extracranial procs w/o CC/MCC	13	22	59.1%	1.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	12	30	40.0%	4.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	11	106	10.4%	5.2
Top Surgical DRGs	212	565	37.5%	3.1
All Surgical DRGs	430	4,210	10.2%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Iowa, 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
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	745	1,419	52.5%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	340	424	80.2%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	309	349	88.5%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	249	652	38.2%	2.2
483 : Major joint or limb reattachment procs of upper extremities	224	333	67.3%	1.9
039 : Extracranial procs w/o CC/MCC	158	184	85.9%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	117	145	80.7%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	79	135	58.5%	1.8
038 : Extracranial procs w CC	78	117	66.7%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	77	184	41.8%	4.1
460 : Spinal fusion except cervical w/o MCC	72	387	18.6%	3.2
708 : Major male pelvic procs w/o CC/MCC	70	91	76.9%	1.3
036 : Carotid artery stent procs w/o CC/MCC	65	71	91.5%	1.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	52	421	12.4%	4.8
254 : Other vascular procs w/o CC/MCC	45	83	54.2%	1.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	37	80	46.3%	2.3
660 : Kidney and ureter procs for non-neoplasm w CC	36	166	21.7%	4.5
035 : Carotid artery stent procs w CC	34	42	81.0%	2.0
467 : Revision of hip or knee replacement w CC	33	197	16.8%	4.0
243 : Permanent cardiac pacemaker implant w CC	31	173	17.9%	3.6
Top Surgical DRGs	2,851	5,653	50.4%	2.4
All Surgical DRGs	3,802	17,576	21.6%	5.5

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	282	297	94.9%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	168	194	86.6%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	119	327	36.4%	1.9
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	90	182	49.5%	2.0
483 : Major joint or limb reattachment procs of upper extremities	68	96	70.8%	1.6
621 : OR procs for obesity w/o CC/MCC	48	53	90.6%	1.1
039 : Extracranial procs w/o CC/MCC	44	52	84.6%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	43	53	81.1%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	36	53	67.9%	1.7
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	29	185	15.7%	4.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	26	142	18.3%	2.4
472 : Cervical spinal fusion w CC	24	67	35.8%	2.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	22	32	68.8%	1.7
460 : Spinal fusion except cervical w/o MCC	22	104	21.2%	2.8
473 : Cervical spinal fusion w/o CC/MCC	22	34	64.7%	1.8
026 : Craniotomy and endovascular intracranial procs w CC	20	41	48.8%	3.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	20	55	36.4%	4.4
454 : Combined anterior and posterior spinal fusion w CC	19	163	11.7%	3.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	17	48	35.4%	1.9
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	17	32	53.1%	1.6
Top Surgical DRGs	1,136	2,210	51.4%	2.2
All Surgical DRGs	1,629	7,028	23.2%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Illinois, 120 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	1,519	3,849	39.5%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,061	1,480	71.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	875	1,093	80.1%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	447	1,935	23.1%	2.4
039 : Extracranial procs w/o CC/MCC	348	426	81.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	328	597	54.9%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	280	410	68.3%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	195	534	36.5%	5.3
460 : Spinal fusion except cervical w/o MCC	170	1,006	16.9%	3.5
038 : Extracranial procs w CC	157	301	52.2%	2.6
468 : Revision of hip or knee replacement w/o CC/MCC	144	277	52.0%	2.1
165 : Major chest procs w/o CC/MCC	137	326	42.0%	2.1
036 : Carotid artery stent procs w/o CC/MCC	136	164	82.9%	1.4
621 : OR procs for obesity w/o CC/MCC	119	181	65.7%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	106	355	29.9%	2.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	104	335	31.0%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	96	1,412	6.8%	5.3
660 : Kidney and ureter procs for non-neoplasm w CC	95	646	14.7%	3.9
467 : Revision of hip or knee replacement w CC	93	624	14.9%	4.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	92	212	43.4%	2.5
Top Surgical DRGs	6,502	16,163	40.2%	2.7
All Surgical DRGs	9,665	64,278	15.0%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Indiana, 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	956	1,777	53.8%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	775	903	85.8%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	492	670	73.4%	1.5
039 : Extracranial procs w/o CC/MCC	328	372	88.2%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	293	1,242	23.6%	2.4
483 : Major joint or limb reattachment procs of upper extremities	228	392	58.2%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	221	297	74.4%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	190	367	51.8%	3.6
468 : Revision of hip or knee replacement w/o CC/MCC	155	231	67.1%	1.6
038 : Extracranial procs w CC	117	193	60.6%	2.4
036 : Carotid artery stent procs w/o CC/MCC	113	141	80.1%	1.4
460 : Spinal fusion except cervical w/o MCC	109	825	13.2%	3.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	105	427	24.6%	2.3
254 : Other vascular procs w/o CC/MCC	74	166	44.6%	2.4
467 : Revision of hip or knee replacement w CC	72	347	20.7%	3.6
035 : Carotid artery stent procs w CC	65	118	55.1%	2.9
331 : Major small and large bowel procs w/o CC/MCC	65	438	14.8%	3.3
708 : Major male pelvic procs w/o CC/MCC	65	97	67.0%	1.5
473 : Cervical spinal fusion w/o CC/MCC	63	111	56.8%	1.9
621 : OR procs for obesity w/o CC/MCC	59	111	53.2%	1.6
Top Surgical DRGs	4,545	9,225	49.3%	2.2
All Surgical DRGs	6,674	36,742	18.2%	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 Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	832	927	89.8%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	490	2,781	17.6%	2.1
039 : Extracranial procs w/o CC/MCC	264	318	83.0%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	218	337	64.7%	1.7
483 : Major joint or limb reattachment procs of upper extremities	178	505	35.2%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	167	395	42.3%	3.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	138	584	23.6%	2.4
621 : OR procs for obesity w/o CC/MCC	99	144	68.8%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	89	128	69.5%	1.8
331 : Major small and large bowel procs w/o CC/MCC	59	301	19.6%	2.8
038 : Extracranial procs w CC	50	92	54.3%	2.4
460 : Spinal fusion except cervical w/o MCC	48	477	10.1%	3.2
468 : Revision of hip or knee replacement w/o CC/MCC	43	144	29.9%	2.3
473 : Cervical spinal fusion w/o CC/MCC	43	63	68.3%	1.5
708 : Major male pelvic procs w/o CC/MCC	39	63	61.9%	1.5
254 : Other vascular procs w/o CC/MCC	35	62	56.5%	1.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	34	79	43.0%	2.8
036 : Carotid artery stent procs w/o CC/MCC	34	40	85.0%	1.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	34	438	7.8%	4.6
229 : Other cardiothoracic procs w/o MCC	33	79	41.8%	3.2
Top Surgical DRGs	2,927	7,957	36.8%	2.3
All Surgical DRGs	4,121	23,015	17.9%	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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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Kentucky, 62 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	350	409	85.6%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	306	373	82.0%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	220	915	24.0%	2.4
039 : Extracranial procs w/o CC/MCC	194	240	80.8%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	164	225	72.9%	1.9
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	127	494	25.7%	2.6
036 : Carotid artery stent procs w/o CC/MCC	99	118	83.9%	1.4
621 : OR procs for obesity w/o CC/MCC	95	131	72.5%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	78	175	44.6%	4.9
038 : Extracranial procs w CC	70	149	47.0%	2.8
468 : Revision of hip or knee replacement w/o CC/MCC	69	111	62.2%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	67	689	9.7%	5.4
483 : Major joint or limb reattachment procs of upper extremities	67	160	41.9%	3.8
035 : Carotid artery stent procs w CC	61	113	54.0%	3.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	47	79	59.5%	2.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	35	111	31.5%	2.4
254 : Other vascular procs w/o CC/MCC	34	93	36.6%	2.3
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	32	71	45.1%	2.1
026 : Craniotomy and endovascular intracranial procs w CC	31	104	29.8%	5.5
253 : Other vascular procs w CC	31	284	10.9%	5.2
Top Surgical DRGs	2,177	5,044	43.2%	2.9
All Surgical DRGs	3,338	24,578	13.6%	6.8

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Louisiana, 86 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	301	360	83.6%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	276	362	76.2%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	262	934	28.1%	2.2
039 : Extracranial procs w/o CC/MCC	238	323	73.7%	1.5
473 : Cervical spinal fusion w/o CC/MCC	134	200	67.0%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	130	660	19.7%	2.5
621 : OR procs for obesity w/o CC/MCC	109	153	71.2%	1.3
483 : Major joint or limb reattachment procs of upper extremities	106	198	53.5%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	105	217	48.4%	3.3
472 : Cervical spinal fusion w CC	90	231	39.0%	3.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	87	149	58.4%	2.6
038 : Extracranial procs w CC	67	134	50.0%	2.9
460 : Spinal fusion except cervical w/o MCC	65	439	14.8%	3.5
036 : Carotid artery stent procs w/o CC/MCC	57	72	79.2%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	51	130	39.2%	2.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	48	119	40.3%	2.8
328 : Stomach, esophageal and duodenal procs w/o CC/MCC	41	105	39.0%	2.6
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	40	489	8.2%	2.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	37	475	7.8%	5.1
254 : Other vascular procs w/o CC/MCC	37	120	30.8%	2.9
Top Surgical DRGs	2,281	5,870	38.9%	2.6
All Surgical DRGs	3,421	23,128	14.8%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Massachusetts, 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	1,681	4,705	35.7%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	666	1,084	61.4%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	535	684	78.2%	1.7
039 : Extracranial procs w/o CC/MCC	244	333	73.3%	1.6
483 : Major joint or limb reattachment procs of upper extremities	194	525	37.0%	2.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	190	1,303	14.6%	3.1
621 : OR procs for obesity w/o CC/MCC	153	226	67.7%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	145	273	53.1%	2.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	138	578	23.9%	7.5
038 : Extracranial procs w CC	100	239	41.8%	3.2
036 : Carotid artery stent procs w/o CC/MCC	97	119	81.5%	1.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	96	298	32.2%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	93	280	33.2%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	92	235	39.1%	2.2
165 : Major chest procs w/o CC/MCC	92	400	23.0%	2.4
708 : Major male pelvic procs w/o CC/MCC	83	122	68.0%	1.5
328 : Stomach, esophageal and duodenal procs w/o CC/MCC	67	219	30.6%	2.6
331 : Major small and large bowel procs w/o CC/MCC	67	586	11.4%	3.3
164 : Major chest procs w CC	65	716	9.1%	4.2
254 : Other vascular procs w/o CC/MCC	65	223	29.1%	2.9
Top Surgical DRGs	4,863	13,148	37.0%	2.6
All Surgical DRGs	7,355	50,487	14.6%	6.4

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

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

Date prepared: 26OCT2022

**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Maryland, 44 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	466	691	67.4%	1.9
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	417	946	44.1%	2.3
483 : Major joint or limb reattachment procs of upper extremities	263	433	60.7%	2.0
039 : Extracranial procs w/o CC/MCC	242	293	82.6%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	231	911	25.4%	2.5
274 : Percutaneous and other intracardiac procs w/o MCC	205	265	77.4%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	149	216	69.0%	2.1
460 : Spinal fusion except cervical w/o MCC	131	870	15.1%	3.8
038 : Extracranial procs w CC	122	181	67.4%	2.3
036 : Carotid artery stent procs w/o CC/MCC	117	135	86.7%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	91	186	48.9%	2.3
621 : OR procs for obesity w/o CC/MCC	91	128	71.1%	1.4
472 : Cervical spinal fusion w CC	71	308	23.1%	3.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	58	601	9.7%	5.8
033 : Ventricular shunt procs w/o CC/MCC	52	73	71.2%	1.7
473 : Cervical spinal fusion w/o CC/MCC	51	117	43.6%	2.4
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	50	144	34.7%	2.4
035 : Carotid artery stent procs w CC	49	82	59.8%	2.4
243 : Permanent cardiac pacemaker implant w CC	46	304	15.1%	4.0
467 : Revision of hip or knee replacement w CC	46	281	16.4%	5.2
Top Surgical DRGs	2,948	7,165	41.1%	2.9
All Surgical DRGs	4,684	32,432	14.4%	6.8

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

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

Date prepared: 26OCT2022

**Discharges for most recent 4 quarters, ending Q3FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	96	154	62.3%	1.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	89	143	62.2%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	50	71	70.4%	1.8
039 : Extracranial procs w/o CC/MCC	37	47	78.7%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	34	230	14.8%	2.9
038 : Extracranial procs w CC	26	34	76.5%	2.2
483 : Major joint or limb reattachment procs of upper extremities	25	37	67.6%	2.3
621 : OR procs for obesity w/o CC/MCC	25	27	92.6%	1.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	23	30	76.7%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	19	33	57.6%	1.9
036 : Carotid artery stent procs w/o CC/MCC	18	20	90.0%	1.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	16	28	57.1%	2.1
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	16	25	64.0%	1.7
460 : Spinal fusion except cervical w/o MCC	15	49	30.6%	3.1
254 : Other vascular procs w/o CC/MCC	12	43	27.9%	2.4
272 : Other major cardiovascular procs w/o CC/MCC	12	15	80.0%	1.6
035 : Carotid artery stent procs w CC	11	20	55.0%	2.4
Top Surgical DRGs	524	1,006	52.1%	2.2
All Surgical DRGs	842	5,228	16.1%	7.4

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Michigan, 92 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	1,005	1,176	85.5%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	844	1,270	66.5%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	817	1,503	54.4%	1.9
039 : Extracranial procs w/o CC/MCC	287	343	83.7%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	242	1,445	16.7%	2.7
483 : Major joint or limb reattachment procs of upper extremities	227	397	57.2%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	206	303	68.0%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	141	238	59.2%	1.9
038 : Extracranial procs w CC	132	246	53.7%	3.0
036 : Carotid artery stent procs w/o CC/MCC	126	151	83.4%	1.4
621 : OR procs for obesity w/o CC/MCC	121	198	61.1%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	112	445	25.2%	6.2
460 : Spinal fusion except cervical w/o MCC	111	819	13.6%	3.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	79	167	47.3%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	74	214	34.6%	2.1
467 : Revision of hip or knee replacement w CC	68	400	17.0%	4.1
472 : Cervical spinal fusion w CC	68	331	20.5%	4.0
473 : Cervical spinal fusion w/o CC/MCC	68	136	50.0%	2.2
253 : Other vascular procs w CC	65	475	13.7%	5.2
254 : Other vascular procs w/o CC/MCC	63	169	37.3%	2.3
Top Surgical DRGs	4,856	10,426	46.6%	2.6
All Surgical DRGs	7,032	44,496	15.8%	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 Q3FY22
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	771	1,373	56.2%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	762	1,006	75.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	522	635	82.2%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	233	855	27.3%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	165	377	43.8%	5.1
483 : Major joint or limb reattachment procs of upper extremities	160	262	61.1%	1.9
039 : Extracranial procs w/o CC/MCC	131	166	78.9%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	107	184	58.2%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	85	138	61.6%	1.8
038 : Extracranial procs w CC	82	164	50.0%	2.5
467 : Revision of hip or knee replacement w CC	77	385	20.0%	3.7
468 : Revision of hip or knee replacement w/o CC/MCC	66	126	52.4%	2.0
253 : Other vascular procs w CC	54	297	18.2%	4.5
472 : Cervical spinal fusion w CC	51	212	24.1%	3.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	46	647	7.1%	5.2
165 : Major chest procs w/o CC/MCC	45	138	32.6%	2.5
026 : Craniotomy and endovascular intracranial procs w CC	44	134	32.8%	3.6
620 : OR procs for obesity w CC	44	74	59.5%	1.8
164 : Major chest procs w CC	43	279	15.4%	4.3
254 : Other vascular procs w/o CC/MCC	41	93	44.1%	2.3
Top Surgical DRGs	3,529	7,545	46.8%	2.7
All Surgical DRGs	5,164	28,127	18.4%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Missouri, 67 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	635	803	79.1%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	573	675	84.9%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	479	1,426	33.6%	2.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	310	1,179	26.3%	2.4
039 : Extracranial procs w/o CC/MCC	249	320	77.8%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	184	298	61.7%	2.2
621 : OR procs for obesity w/o CC/MCC	177	235	75.3%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	159	375	42.4%	4.6
036 : Carotid artery stent procs w/o CC/MCC	118	148	79.7%	1.3
038 : Extracranial procs w CC	115	209	55.0%	2.5
483 : Major joint or limb reattachment procs of upper extremities	103	269	38.3%	2.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	83	145	57.2%	2.0
460 : Spinal fusion except cervical w/o MCC	80	520	15.4%	3.5
468 : Revision of hip or knee replacement w/o CC/MCC	80	208	38.5%	2.2
254 : Other vascular procs w/o CC/MCC	79	210	37.6%	2.4
620 : OR procs for obesity w CC	77	120	64.2%	1.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	69	942	7.3%	5.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	69	407	17.0%	2.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	60	184	32.6%	2.3
660 : Kidney and ureter procs for non-neoplasm w CC	59	364	16.2%	3.9
Top Surgical DRGs	3,758	9,037	41.6%	2.6
All Surgical DRGs	5,633	36,824	15.3%	6.4

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	401	476	84.2%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	289	331	87.3%	1.2
039 : Extracranial procs w/o CC/MCC	233	271	86.0%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	232	945	24.6%	2.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	162	609	26.6%	2.4
621 : OR procs for obesity w/o CC/MCC	112	163	68.7%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	110	137	80.3%	1.6
483 : Major joint or limb reattachment procs of upper extremities	75	141	53.2%	2.2
038 : Extracranial procs w CC	73	128	57.0%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	72	143	50.3%	4.0
460 : Spinal fusion except cervical w/o MCC	60	207	29.0%	2.9
036 : Carotid artery stent procs w/o CC/MCC	59	63	93.7%	1.1
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	48	464	10.3%	4.9
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	46	108	42.6%	2.1
472 : Cervical spinal fusion w CC	46	136	33.8%	3.6
473 : Cervical spinal fusion w/o CC/MCC	41	66	62.1%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	36	87	41.4%	2.2
254 : Other vascular procs w/o CC/MCC	28	59	47.5%	2.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	27	60	45.0%	2.6
035 : Carotid artery stent procs w CC	25	40	62.5%	2.4
Top Surgical DRGs	2,175	4,634	46.9%	2.4
All Surgical DRGs	3,180	19,407	16.4%	6.1

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Montana, 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
274 : Percutaneous and other intracardiac procs w/o MCC	230	251	91.6%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	216	443	48.8%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	140	159	88.1%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	129	188	68.6%	2.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	124	334	37.1%	2.0
460 : Spinal fusion except cervical w/o MCC	87	258	33.7%	2.8
039 : Extracranial procs w/o CC/MCC	75	92	81.5%	1.3
483 : Major joint or limb reattachment procs of upper extremities	65	106	61.3%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	43	62	69.4%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	37	72	51.4%	1.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	29	55	52.7%	2.0
254 : Other vascular procs w/o CC/MCC	27	53	50.9%	1.8
038 : Extracranial procs w CC	25	47	53.2%	2.4
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	23	47	48.9%	2.0
708 : Major male pelvic procs w/o CC/MCC	20	24	83.3%	1.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	19	94	20.2%	2.8
331 : Major small and large bowel procs w/o CC/MCC	18	107	16.8%	3.0
165 : Major chest procs w/o CC/MCC	17	41	41.5%	2.6
243 : Permanent cardiac pacemaker implant w CC	15	79	19.0%	3.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	15	172	8.7%	4.5
Top Surgical DRGs	1,354	2,684	50.4%	2.3
All Surgical DRGs	1,907	7,769	24.5%	5.4

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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	1,181	2,760	42.8%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	669	1,018	65.7%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	652	927	70.3%	1.8
039 : Extracranial procs w/o CC/MCC	390	481	81.1%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	381	1,685	22.6%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	279	444	62.8%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	182	378	48.1%	2.1
483 : Major joint or limb reattachment procs of upper extremities	176	400	44.0%	3.0
621 : OR procs for obesity w/o CC/MCC	150	198	75.8%	1.4
038 : Extracranial procs w CC	137	245	55.9%	2.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	130	283	45.9%	2.3
036 : Carotid artery stent procs w/o CC/MCC	129	164	78.7%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	112	355	31.5%	4.8
460 : Spinal fusion except cervical w/o MCC	103	937	11.0%	3.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	88	754	11.7%	3.0
472 : Cervical spinal fusion w CC	83	358	23.2%	4.1
254 : Other vascular procs w/o CC/MCC	78	215	36.3%	2.6
331 : Major small and large bowel procs w/o CC/MCC	76	782	9.7%	3.4
473 : Cervical spinal fusion w/o CC/MCC	75	148	50.7%	2.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	75	237	31.6%	2.2
Top Surgical DRGs	5,146	12,769	40.3%	2.5
All Surgical DRGs	7,745	52,790	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 Q3FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	177	267	66.3%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	166	172	96.5%	1.1
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	113	170	66.5%	1.9
039 : Extracranial procs w/o CC/MCC	68	79	86.1%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	61	201	30.3%	2.1
038 : Extracranial procs w CC	51	76	67.1%	1.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	51	69	73.9%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	33	199	16.6%	4.8
483 : Major joint or limb reattachment procs of upper extremities	29	37	78.4%	1.5
467 : Revision of hip or knee replacement w CC	25	111	22.5%	3.8
468 : Revision of hip or knee replacement w/o CC/MCC	22	47	46.8%	2.3
036 : Carotid artery stent procs w/o CC/MCC	19	21	90.5%	1.1
254 : Other vascular procs w/o CC/MCC	15	34	44.1%	2.1
035 : Carotid artery stent procs w CC	14	28	50.0%	2.1
253 : Other vascular procs w CC	13	78	16.7%	3.9
Top Surgical DRGs	857	1,589	53.9%	2.3
All Surgical DRGs	1,171	6,353	18.4%	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 Q3FY22
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
274 : Percutaneous and other intracardiac procs w/o MCC	807	838	96.3%	1.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	260	457	56.9%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	201	493	40.8%	2.1
039 : Extracranial procs w/o CC/MCC	117	130	90.0%	1.2
483 : Major joint or limb reattachment procs of upper extremities	112	177	63.3%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	99	331	29.9%	2.0
229 : Other cardiothoracic procs w/o MCC	87	124	70.2%	1.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	84	160	52.5%	2.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	75	115	65.2%	1.9
036 : Carotid artery stent procs w/o CC/MCC	66	73	90.4%	1.1
038 : Extracranial procs w CC	66	101	65.3%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	54	97	55.7%	1.9
254 : Other vascular procs w/o CC/MCC	42	69	60.9%	1.6
253 : Other vascular procs w CC	36	163	22.1%	4.1
467 : Revision of hip or knee replacement w CC	36	172	20.9%	4.3
243 : Permanent cardiac pacemaker implant w CC	32	125	25.6%	3.1
035 : Carotid artery stent procs w CC	30	55	54.5%	1.8
244 : Permanent cardiac pacemaker implant w/o CC/MCC	21	68	30.9%	2.1
460 : Spinal fusion except cervical w/o MCC	21	227	9.3%	3.2
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	21	49	42.9%	4.5
Top Surgical DRGs	2,267	4,024	56.3%	2.1
All Surgical DRGs	2,929	13,927	21.0%	5.7

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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	226	321	70.4%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	161	185	87.0%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	78	379	20.6%	2.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	74	169	43.8%	2.2
039 : Extracranial procs w/o CC/MCC	68	97	70.1%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	47	151	31.1%	5.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	45	71	63.4%	1.7
621 : OR procs for obesity w/o CC/MCC	41	62	66.1%	1.4
038 : Extracranial procs w CC	28	57	49.1%	3.4
468 : Revision of hip or knee replacement w/o CC/MCC	26	48	54.2%	2.1
165 : Major chest procs w/o CC/MCC	22	55	40.0%	2.1
036 : Carotid artery stent procs w/o CC/MCC	21	29	72.4%	1.7
483 : Major joint or limb reattachment procs of upper extremities	21	51	41.2%	3.4
253 : Other vascular procs w CC	19	135	14.1%	5.8
467 : Revision of hip or knee replacement w CC	19	80	23.8%	3.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	18	42	42.9%	2.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	17	29	58.6%	2.7
272 : Other major cardiovascular procs w/o CC/MCC	16	27	59.3%	2.2
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	16	55	29.1%	2.5
660 : Kidney and ureter procs for non-neoplasm w CC	16	75	21.3%	3.6
Top Surgical DRGs	979	2,118	46.2%	2.7
All Surgical DRGs	1,502	8,581	17.5%	6.6

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	933	1,366	68.3%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	846	1,762	48.0%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	584	768	76.0%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	228	1,334	17.1%	3.0
039 : Extracranial procs w/o CC/MCC	226	288	78.5%	1.5
621 : OR procs for obesity w/o CC/MCC	179	261	68.6%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	177	269	65.8%	2.3
483 : Major joint or limb reattachment procs of upper extremities	114	227	50.2%	3.3
165 : Major chest procs w/o CC/MCC	84	208	40.4%	2.1
038 : Extracranial procs w CC	82	186	44.1%	3.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	75	1,021	7.3%	6.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	74	410	18.0%	7.4
468 : Revision of hip or knee replacement w/o CC/MCC	72	148	48.6%	2.1
036 : Carotid artery stent procs w/o CC/MCC	71	94	75.5%	1.4
164 : Major chest procs w CC	58	412	14.1%	4.3
460 : Spinal fusion except cervical w/o MCC	56	497	11.3%	3.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	54	121	44.6%	2.5
467 : Revision of hip or knee replacement w CC	51	335	15.2%	4.4
243 : Permanent cardiac pacemaker implant w CC	49	555	8.8%	4.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	48	245	19.6%	2.5
Top Surgical DRGs	4,061	10,507	38.7%	3.1
All Surgical DRGs	5,935	43,742	13.6%	7.0

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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New Mexico, 29 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	183	261	70.1%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	62	314	19.7%	2.3
274 : Percutaneous and other intracardiac procs w/o MCC	50	70	71.4%	1.7
483 : Major joint or limb reattachment procs of upper extremities	34	41	82.9%	1.9
039 : Extracranial procs w/o CC/MCC	24	31	77.4%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	22	34	64.7%	1.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	21	53	39.6%	4.7
468 : Revision of hip or knee replacement w/o CC/MCC	19	35	54.3%	1.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	17	186	9.1%	5.0
460 : Spinal fusion except cervical w/o MCC	17	65	26.2%	3.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	15	60	25.0%	2.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	13	36	36.1%	2.0
036 : Carotid artery stent procs w/o CC/MCC	12	12	100%	1.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	12	17	70.6%	2.0
621 : OR procs for obesity w/o CC/MCC	11	23	47.8%	1.7
Top Surgical DRGs	512	1,238	41.4%	2.6
All Surgical DRGs	796	6,709	11.9%	6.6

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Nevada, 21 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	184	233	79.0%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	132	544	24.3%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	118	206	57.3%	3.5
274 : Percutaneous and other intracardiac procs w/o MCC	112	146	76.7%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	90	419	21.5%	2.6
039 : Extracranial procs w/o CC/MCC	80	97	82.5%	1.4
621 : OR procs for obesity w/o CC/MCC	72	90	80.0%	1.3
483 : Major joint or limb reattachment procs of upper extremities	68	130	52.3%	2.4
473 : Cervical spinal fusion w/o CC/MCC	44	73	60.3%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	41	76	53.9%	2.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	37	159	23.3%	2.9
468 : Revision of hip or knee replacement w/o CC/MCC	37	81	45.7%	2.1
460 : Spinal fusion except cervical w/o MCC	36	189	19.0%	3.2
472 : Cervical spinal fusion w CC	31	123	25.2%	3.0
244 : Permanent cardiac pacemaker implant w/o CC/MCC	28	78	35.9%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	26	348	7.5%	5.5
254 : Other vascular procs w/o CC/MCC	25	50	50.0%	1.9
038 : Extracranial procs w CC	24	61	39.3%	3.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	23	47	48.9%	2.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	20	71	28.2%	2.4
Top Surgical DRGs	1,228	3,221	38.1%	2.7
All Surgical DRGs	1,934	13,396	14.4%	7.0

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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New York, 135 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	2,681	8,186	32.8%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,829	2,950	62.0%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	1,518	2,130	71.3%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	999	3,041	32.9%	2.5
483 : Major joint or limb reattachment procs of upper extremities	618	1,047	59.0%	2.2
039 : Extracranial procs w/o CC/MCC	439	591	74.3%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	390	1,375	28.4%	6.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	320	516	62.0%	2.3
621 : OR procs for obesity w/o CC/MCC	267	376	71.0%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	211	336	62.8%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	210	1,829	11.5%	5.6
468 : Revision of hip or knee replacement w/o CC/MCC	184	508	36.2%	2.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	177	540	32.8%	2.3
038 : Extracranial procs w CC	151	332	45.5%	3.4
036 : Carotid artery stent procs w/o CC/MCC	149	199	74.9%	1.5
254 : Other vascular procs w/o CC/MCC	144	387	37.2%	2.6
165 : Major chest procs w/o CC/MCC	138	445	31.0%	2.5
253 : Other vascular procs w CC	137	1,114	12.3%	6.2
164 : Major chest procs w CC	131	909	14.4%	4.3
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	114	215	53.0%	1.7
Top Surgical DRGs	10,807	27,026	40.0%	2.9
All Surgical DRGs	15,941	96,346	16.5%	7.2

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

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

Date prepared: 26OCT2022

**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Ohio, 123 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	1,119	1,430	78.3%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	993	1,259	78.9%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	871	1,814	48.0%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	540	1,973	27.4%	2.5
039 : Extracranial procs w/o CC/MCC	388	468	82.9%	1.4
483 : Major joint or limb reattachment procs of upper extremities	355	586	60.6%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	339	676	50.1%	4.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	314	477	65.8%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	199	341	58.4%	1.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	171	281	60.9%	2.1
038 : Extracranial procs w CC	154	273	56.4%	2.5
036 : Carotid artery stent procs w/o CC/MCC	132	150	88.0%	1.3
460 : Spinal fusion except cervical w/o MCC	131	1,263	10.4%	3.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	124	339	36.6%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	115	528	21.8%	2.7
621 : OR procs for obesity w/o CC/MCC	115	203	56.7%	1.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	111	1,373	8.1%	5.1
254 : Other vascular procs w/o CC/MCC	101	268	37.7%	2.3
467 : Revision of hip or knee replacement w CC	94	518	18.1%	3.9
660 : Kidney and ureter procs for non-neoplasm w CC	90	588	15.3%	3.6
Top Surgical DRGs	6,456	14,808	43.6%	2.7
All Surgical DRGs	9,586	58,395	16.4%	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.

Date prepared: 26OCT2022

**Discharges for most recent 4 quarters, ending Q3FY22
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	940	3,533	26.6%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	381	429	88.8%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	346	471	73.5%	1.5
483 : Major joint or limb reattachment procs of upper extremities	217	452	48.0%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	199	577	34.5%	2.2
039 : Extracranial procs w/o CC/MCC	195	227	85.9%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	120	169	71.0%	1.8
036 : Carotid artery stent procs w/o CC/MCC	102	116	87.9%	1.2
473 : Cervical spinal fusion w/o CC/MCC	92	177	52.0%	1.7
038 : Extracranial procs w CC	90	143	62.9%	2.4
460 : Spinal fusion except cervical w/o MCC	85	743	11.4%	2.9
035 : Carotid artery stent procs w CC	72	96	75.0%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	70	233	30.0%	2.3
621 : OR procs for obesity w/o CC/MCC	59	89	66.3%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	58	97	59.8%	2.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	58	443	13.1%	2.5
472 : Cervical spinal fusion w CC	47	157	29.9%	3.1
253 : Other vascular procs w CC	44	233	18.9%	4.5
254 : Other vascular procs w/o CC/MCC	44	89	49.4%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	42	153	27.5%	5.0
Top Surgical DRGs	3,261	8,627	37.8%	2.2
All Surgical DRGs	4,518	25,725	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 Q3FY22
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
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	349	557	62.7%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	266	377	70.6%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	170	204	83.3%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	158	310	51.0%	3.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	133	516	25.8%	2.2
039 : Extracranial procs w/o CC/MCC	131	149	87.9%	1.2
483 : Major joint or limb reattachment procs of upper extremities	118	182	64.8%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	108	149	72.5%	1.9
036 : Carotid artery stent procs w/o CC/MCC	71	83	85.5%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	59	107	55.1%	1.9
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	55	172	32.0%	2.4
621 : OR procs for obesity w/o CC/MCC	46	66	69.7%	1.6
254 : Other vascular procs w/o CC/MCC	42	98	42.9%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	39	70	55.7%	2.2
035 : Carotid artery stent procs w CC	37	59	62.7%	3.2
253 : Other vascular procs w CC	35	195	17.9%	4.4
460 : Spinal fusion except cervical w/o MCC	34	149	22.8%	3.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	33	353	9.3%	4.8
038 : Extracranial procs w CC	32	60	53.3%	2.8
330 : Major small and large bowel procs w CC	28	408	6.9%	5.7
Top Surgical DRGs	1,944	4,264	45.6%	2.8
All Surgical DRGs	2,975	15,510	19.2%	6.6

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Pennsylvania, 141 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	2,849	5,247	54.3%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,105	1,668	66.2%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	1,081	1,439	75.1%	1.7
483 : Major joint or limb reattachment procs of upper extremities	486	771	63.0%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	432	1,012	42.7%	4.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	407	2,139	19.0%	2.6
039 : Extracranial procs w/o CC/MCC	372	453	82.1%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	293	477	61.4%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	206	453	45.5%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	159	277	57.4%	2.0
460 : Spinal fusion except cervical w/o MCC	159	1,243	12.8%	3.5
038 : Extracranial procs w CC	153	305	50.2%	3.1
036 : Carotid artery stent procs w/o CC/MCC	149	195	76.4%	1.5
621 : OR procs for obesity w/o CC/MCC	149	247	60.3%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	103	416	24.8%	2.2
467 : Revision of hip or knee replacement w CC	100	693	14.4%	4.4
035 : Carotid artery stent procs w CC	88	194	45.4%	3.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	84	462	18.2%	2.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	82	1,388	5.9%	5.5
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	82	139	59.0%	1.6
Top Surgical DRGs	8,539	19,218	44.4%	2.6
All Surgical DRGs	11,667	70,728	16.5%	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 Q3FY22
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	156	412	37.9%	2.0
483 : Major joint or limb reattachment procs of upper extremities	36	53	67.9%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	28	174	16.1%	3.7
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	20	50	40.0%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	13	47	27.7%	3.3
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	11	71	15.5%	4.4
714 : Transurethral prostatectomy w/o CC/MCC	11	19	57.9%	2.1
Top Surgical DRGs	275	826	33.3%	2.6
All Surgical DRGs	501	3,612	13.9%	7.8

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 Q3FY22
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	288	457	63.0%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	86	114	75.4%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	45	51	88.2%	1.3
036 : Carotid artery stent procs w/o CC/MCC	21	31	67.7%	1.6
039 : Extracranial procs w/o CC/MCC	21	30	70.0%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	19	46	41.3%	2.1
483 : Major joint or limb reattachment procs of upper extremities	16	42	38.1%	2.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	14	22	63.6%	1.5
035 : Carotid artery stent procs w CC	12	29	41.4%	3.0
621 : OR procs for obesity w/o CC/MCC	11	19	57.9%	1.6
Top Surgical DRGs	533	841	63.4%	1.6
All Surgical DRGs	730	4,664	15.7%	5.8

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - South Carolina, 53 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	873	1,016	85.9%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	378	464	81.5%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	293	711	41.2%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	292	429	68.1%	3.0
039 : Extracranial procs w/o CC/MCC	250	307	81.4%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	248	873	28.4%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	162	216	75.0%	1.8
036 : Carotid artery stent procs w/o CC/MCC	155	179	86.6%	1.3
460 : Spinal fusion except cervical w/o MCC	105	516	20.3%	3.2
483 : Major joint or limb reattachment procs of upper extremities	104	210	49.5%	2.4
621 : OR procs for obesity w/o CC/MCC	100	153	65.4%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	90	179	50.3%	2.1
473 : Cervical spinal fusion w/o CC/MCC	85	139	61.2%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	80	320	25.0%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	69	178	38.8%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	69	607	11.4%	4.5
254 : Other vascular procs w/o CC/MCC	67	138	48.6%	2.3
472 : Cervical spinal fusion w CC	65	218	29.8%	3.3
038 : Extracranial procs w CC	62	107	57.9%	2.7
273 : Percutaneous and other intracardiac procs w MCC	53	139	38.1%	4.6
Top Surgical DRGs	3,600	7,099	50.7%	2.4
All Surgical DRGs	5,218	28,247	18.5%	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 Q3FY22
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	432	1,378	31.3%	2.1
483 : Major joint or limb reattachment procs of upper extremities	215	292	73.6%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	171	246	69.5%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	150	178	84.3%	1.4
039 : Extracranial procs w/o CC/MCC	82	99	82.8%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	79	92	85.9%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	66	313	21.1%	2.5
036 : Carotid artery stent procs w/o CC/MCC	50	68	73.5%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	43	101	42.6%	1.8
621 : OR procs for obesity w/o CC/MCC	42	50	84.0%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	29	81	35.8%	3.7
467 : Revision of hip or knee replacement w CC	25	108	23.1%	3.8
038 : Extracranial procs w CC	24	43	55.8%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	24	233	10.3%	4.6
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	23	58	39.7%	3.7
254 : Other vascular procs w/o CC/MCC	20	44	45.5%	1.9
331 : Major small and large bowel procs w/o CC/MCC	19	147	12.9%	2.9
253 : Other vascular procs w CC	17	81	21.0%	4.4
660 : Kidney and ureter procs for non-neoplasm w CC	16	65	24.6%	3.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	15	30	50.0%	2.6
Top Surgical DRGs	1,542	3,707	41.6%	2.3
All Surgical DRGs	2,071	9,775	21.2%	4.7

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Tennessee, 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
274 : Percutaneous and other intracardiac procs w/o MCC	826	962	85.9%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	779	1,581	49.3%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	536	702	76.4%	1.5
039 : Extracranial procs w/o CC/MCC	325	399	81.5%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	311	1,215	25.6%	2.4
483 : Major joint or limb reattachment procs of upper extremities	276	426	64.8%	2.2
036 : Carotid artery stent procs w/o CC/MCC	211	250	84.4%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	211	293	72.0%	1.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	209	456	45.8%	4.2
460 : Spinal fusion except cervical w/o MCC	196	882	22.2%	3.2
468 : Revision of hip or knee replacement w/o CC/MCC	166	265	62.6%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	130	461	28.2%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	102	180	56.7%	2.0
038 : Extracranial procs w CC	99	181	54.7%	2.6
254 : Other vascular procs w/o CC/MCC	98	212	46.2%	2.2
621 : OR procs for obesity w/o CC/MCC	97	153	63.4%	1.5
467 : Revision of hip or knee replacement w CC	82	374	21.9%	4.0
473 : Cervical spinal fusion w/o CC/MCC	81	142	57.0%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	65	949	6.8%	5.1
035 : Carotid artery stent procs w CC	63	125	50.4%	3.4
Top Surgical DRGs	4,863	10,208	47.6%	2.5
All Surgical DRGs	7,375	40,781	18.1%	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 Q3FY22
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	2,881	7,054	40.8%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	2,642	3,250	81.3%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,305	1,853	70.4%	1.6
039 : Extracranial procs w/o CC/MCC	815	1,002	81.3%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	715	3,084	23.2%	2.5
483 : Major joint or limb reattachment procs of upper extremities	687	1,234	55.7%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	548	1,386	39.5%	3.9
621 : OR procs for obesity w/o CC/MCC	512	675	75.9%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	414	632	65.5%	2.2
036 : Carotid artery stent procs w/o CC/MCC	402	473	85.0%	1.3
473 : Cervical spinal fusion w/o CC/MCC	348	575	60.5%	1.8
460 : Spinal fusion except cervical w/o MCC	342	2,258	15.1%	3.3
472 : Cervical spinal fusion w CC	314	1,027	30.6%	3.4
038 : Extracranial procs w CC	303	597	50.8%	2.9
468 : Revision of hip or knee replacement w/o CC/MCC	296	650	45.5%	2.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	262	500	52.4%	2.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	223	1,433	15.6%	2.6
467 : Revision of hip or knee replacement w CC	211	1,204	17.5%	4.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	189	2,790	6.8%	5.2
254 : Other vascular procs w/o CC/MCC	176	446	39.5%	2.4
Top Surgical DRGs	13,585	32,123	42.3%	2.6
All Surgical DRGs	19,797	124,024	16.0%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Utah, 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
274 : Percutaneous and other intracardiac procs w/o MCC	268	301	89.0%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	235	334	70.4%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	167	409	40.8%	1.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	152	504	30.2%	2.1
483 : Major joint or limb reattachment procs of upper extremities	113	180	62.8%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	80	136	58.8%	1.6
039 : Extracranial procs w/o CC/MCC	64	78	82.1%	1.4
460 : Spinal fusion except cervical w/o MCC	59	347	17.0%	3.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	51	311	16.4%	4.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	49	243	20.2%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	46	134	34.3%	4.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	44	89	49.4%	2.3
621 : OR procs for obesity w/o CC/MCC	37	50	74.0%	1.3
467 : Revision of hip or knee replacement w CC	36	207	17.4%	3.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	34	45	75.6%	1.6
454 : Combined anterior and posterior spinal fusion w CC	33	271	12.2%	3.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	29	60	48.3%	1.8
243 : Permanent cardiac pacemaker implant w CC	28	119	23.5%	2.8
330 : Major small and large bowel procs w CC	28	296	9.5%	5.2
026 : Craniotomy and endovascular intracranial procs w CC	24	78	30.8%	3.4
Top Surgical DRGs	1,577	4,192	37.6%	2.6
All Surgical DRGs	2,482	11,965	20.7%	4.7

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Virginia, 71 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	1,250	1,924	65.0%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	881	1,245	70.8%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	852	1,048	81.3%	1.5
039 : Extracranial procs w/o CC/MCC	325	374	86.9%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	282	1,426	19.8%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	216	344	62.8%	2.2
483 : Major joint or limb reattachment procs of upper extremities	214	349	61.3%	2.2
036 : Carotid artery stent procs w/o CC/MCC	173	208	83.2%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	173	533	32.5%	5.1
468 : Revision of hip or knee replacement w/o CC/MCC	155	294	52.7%	2.0
038 : Extracranial procs w CC	102	181	56.4%	2.4
621 : OR procs for obesity w/o CC/MCC	99	127	78.0%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	98	181	54.1%	2.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	98	616	15.9%	2.8
254 : Other vascular procs w/o CC/MCC	90	246	36.6%	2.4
460 : Spinal fusion except cervical w/o MCC	85	752	11.3%	3.2
472 : Cervical spinal fusion w CC	80	286	28.0%	3.6
035 : Carotid artery stent procs w CC	78	143	54.5%	2.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	61	198	30.8%	2.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	59	226	26.1%	2.4
Top Surgical DRGs	5,371	10,701	50.2%	2.3
All Surgical DRGs	7,419	43,355	17.1%	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 Q3FY22
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	99	183	54.1%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	87	129	67.4%	1.6
483 : Major joint or limb reattachment procs of upper extremities	27	34	79.4%	1.2
274 : Percutaneous and other intracardiac procs w/o MCC	24	42	57.1%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	22	114	19.3%	2.5
039 : Extracranial procs w/o CC/MCC	21	25	84.0%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	12	52	23.1%	6.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	11	17	64.7%	1.6
Top Surgical DRGs	303	596	50.8%	2.3
All Surgical DRGs	506	3,076	16.4%	6.6

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	701	865	81.0%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	675	756	89.3%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	432	777	55.6%	4.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	309	1,105	28.0%	2.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	278	587	47.4%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	178	242	73.6%	1.6
039 : Extracranial procs w/o CC/MCC	166	203	81.8%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	154	238	64.7%	1.7
483 : Major joint or limb reattachment procs of upper extremities	120	217	55.3%	2.8
036 : Carotid artery stent procs w/o CC/MCC	107	133	80.5%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	104	182	57.1%	1.9
331 : Major small and large bowel procs w/o CC/MCC	94	395	23.8%	3.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	92	403	22.8%	2.8
165 : Major chest procs w/o CC/MCC	88	170	51.8%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	81	791	10.2%	5.0
038 : Extracranial procs w CC	78	156	50.0%	2.8
467 : Revision of hip or knee replacement w CC	77	310	24.8%	4.5
460 : Spinal fusion except cervical w/o MCC	75	381	19.7%	3.8
035 : Carotid artery stent procs w CC	72	120	60.0%	2.6
254 : Other vascular procs w/o CC/MCC	70	149	47.0%	2.1
Top Surgical DRGs	3,951	8,180	48.3%	2.7
All Surgical DRGs	6,040	30,950	19.5%	6.7

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

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

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**Discharges for most recent 4 quarters, ending Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Wisconsin, 67 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	590	1,287	45.8%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	443	683	64.9%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	282	352	80.1%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	230	851	27.0%	2.3
039 : Extracranial procs w/o CC/MCC	201	258	77.9%	1.4
483 : Major joint or limb reattachment procs of upper extremities	146	242	60.3%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	112	177	63.3%	2.2
038 : Extracranial procs w CC	99	171	57.9%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	99	288	34.4%	5.3
468 : Revision of hip or knee replacement w/o CC/MCC	87	140	62.1%	1.7
036 : Carotid artery stent procs w/o CC/MCC	54	59	91.5%	1.1
467 : Revision of hip or knee replacement w CC	54	300	18.0%	4.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	52	593	8.8%	4.7
165 : Major chest procs w/o CC/MCC	48	101	47.5%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	47	98	48.0%	2.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	40	133	30.1%	2.4
164 : Major chest procs w CC	38	227	16.7%	3.8
660 : Kidney and ureter procs for non-neoplasm w CC	38	230	16.5%	3.5
253 : Other vascular procs w CC	37	325	11.4%	4.9
254 : Other vascular procs w/o CC/MCC	36	97	37.1%	2.3
Top Surgical DRGs	2,733	6,612	41.3%	2.7
All Surgical DRGs	4,000	25,034	16.0%	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 Q3FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - West Virginia, 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	466	800	58.3%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	209	249	83.9%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	209	262	79.8%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	137	608	22.5%	2.7
039 : Extracranial procs w/o CC/MCC	104	144	72.2%	1.5
036 : Carotid artery stent procs w/o CC/MCC	75	93	80.6%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	51	89	57.3%	2.3
483 : Major joint or limb reattachment procs of upper extremities	40	74	54.1%	3.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	36	47	76.6%	1.9
254 : Other vascular procs w/o CC/MCC	32	78	41.0%	2.3
038 : Extracranial procs w CC	29	74	39.2%	3.7
035 : Carotid artery stent procs w CC	26	60	43.3%	3.9
244 : Permanent cardiac pacemaker implant w/o CC/MCC	25	101	24.8%	2.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	25	369	6.8%	5.7
472 : Cervical spinal fusion w CC	23	81	28.4%	4.0
621 : OR procs for obesity w/o CC/MCC	23	36	63.9%	1.4
462 : Bilateral or multiple major joint procs of lower extremity w/o MCC	22	30	73.3%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	21	55	38.2%	2.6
460 : Spinal fusion except cervical w/o MCC	19	125	15.2%	4.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	19	61	31.1%	2.3
Top Surgical DRGs	1,591	3,436	46.3%	2.6
All Surgical DRGs	2,127	13,173	16.1%	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 Q3FY22
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
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	80	166	48.2%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	35	110	31.8%	2.2
483 : Major joint or limb reattachment procs of upper extremities	28	46	60.9%	2.4
039 : Extracranial procs w/o CC/MCC	22	40	55.0%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	20	25	80.0%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	12	18	66.7%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	11	21	52.4%	2.8
Top Surgical DRGs	208	426	48.8%	2.0
All Surgical DRGs	436	2,405	18.1%	5.1

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