



Short-Term Hospital State-Level Surgical DRG Report

Q2FY22

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**Discharges for most recent 4 quarters, ending Q2FY22
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	78	389	20.1%	2.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	67	79	84.8%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	38	155	24.5%	2.6
274 : Percutaneous and other intracardiac procs w/o MCC	36	64	56.3%	2.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	29	57	50.9%	6.6
483 : Major joint or limb reattachment procs of upper extremities	22	44	50.0%	3.5
468 : Revision of hip or knee replacement w/o CC/MCC	17	46	37.0%	2.4
039 : Extracranial procs w/o CC/MCC	14	47	29.8%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	14	24	58.3%	1.9
243 : Permanent cardiac pacemaker implant w CC	12	35	34.3%	3.8
Top Surgical DRGs	327	940	34.8%	2.7
All Surgical DRGs	629	4,229	14.9%	7.5

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 Q2FY22
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	672	738	91.1%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	628	1,415	44.4%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	330	464	71.1%	1.6
039 : Extracranial procs w/o CC/MCC	298	386	77.2%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	235	367	64.0%	2.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	159	798	19.9%	2.7
460 : Spinal fusion except cervical w/o MCC	138	619	22.3%	3.1
483 : Major joint or limb reattachment procs of upper extremities	129	238	54.2%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	112	214	52.3%	2.8
621 : OR procs for obesity w/o CC/MCC	89	123	72.4%	1.4
038 : Extracranial procs w CC	78	164	47.6%	3.1
036 : Carotid artery stent procs w/o CC/MCC	76	89	85.4%	1.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	75	342	21.9%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	70	125	56.0%	2.3
472 : Cervical spinal fusion w CC	66	150	44.0%	3.1
468 : Revision of hip or knee replacement w/o CC/MCC	65	175	37.1%	2.2
254 : Other vascular procs w/o CC/MCC	58	127	45.7%	2.2
473 : Cervical spinal fusion w/o CC/MCC	50	77	64.9%	1.6
253 : Other vascular procs w CC	43	320	13.4%	5.1
331 : Major small and large bowel procs w/o CC/MCC	38	421	9.0%	3.6
Top Surgical DRGs	3,409	7,352	46.4%	2.4
All Surgical DRGs	4,841	27,619	17.5%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Arkansas, 45 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	523	1,686	31.0%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	473	534	88.6%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	261	302	86.4%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	230	749	30.7%	2.3
039 : Extracranial procs w/o CC/MCC	190	251	75.7%	1.4
621 : OR procs for obesity w/o CC/MCC	161	212	75.9%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	158	241	65.6%	2.7
483 : Major joint or limb reattachment procs of upper extremities	145	237	61.2%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	99	143	69.2%	1.9
038 : Extracranial procs w CC	74	136	54.4%	2.5
036 : Carotid artery stent procs w/o CC/MCC	57	72	79.2%	1.4
460 : Spinal fusion except cervical w/o MCC	57	303	18.8%	2.9
468 : Revision of hip or knee replacement w/o CC/MCC	54	126	42.9%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	46	553	8.3%	4.5
472 : Cervical spinal fusion w CC	43	110	39.1%	2.5
254 : Other vascular procs w/o CC/MCC	42	83	50.6%	2.0
244 : Permanent cardiac pacemaker implant w/o CC/MCC	39	112	34.8%	2.1
035 : Carotid artery stent procs w CC	38	55	69.1%	1.8
473 : Cervical spinal fusion w/o CC/MCC	37	75	49.3%	2.1
253 : Other vascular procs w CC	34	205	16.6%	4.0
Top Surgical DRGs	2,761	6,185	44.6%	2.2
All Surgical DRGs	3,852	21,563	17.9%	5.4

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	1,161	1,297	89.5%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	859	1,938	44.3%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	788	1,015	77.6%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	279	1,044	26.7%	2.3
483 : Major joint or limb reattachment procs of upper extremities	263	392	67.1%	1.9
039 : Extracranial procs w/o CC/MCC	236	284	83.1%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	181	283	64.0%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	163	394	41.4%	4.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	134	245	54.7%	2.1
460 : Spinal fusion except cervical w/o MCC	107	547	19.6%	3.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	104	440	23.6%	2.6
036 : Carotid artery stent procs w/o CC/MCC	103	129	79.8%	1.4
621 : OR procs for obesity w/o CC/MCC	85	118	72.0%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	75	209	35.9%	2.2
472 : Cervical spinal fusion w CC	64	251	25.5%	3.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	63	205	30.7%	2.0
038 : Extracranial procs w CC	62	146	42.5%	3.0
660 : Kidney and ureter procs for non-neoplasm w CC	60	329	18.2%	3.7
244 : Permanent cardiac pacemaker implant w/o CC/MCC	59	236	25.0%	2.3
473 : Cervical spinal fusion w/o CC/MCC	59	116	50.9%	1.9
Top Surgical DRGs	4,905	9,618	51.0%	2.1
All Surgical DRGs	7,018	36,537	19.2%	5.5

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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	3,592	9,138	39.3%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	2,297	2,757	83.3%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	2,116	2,945	71.9%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	838	3,568	23.5%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	830	1,983	41.9%	4.7
039 : Extracranial procs w/o CC/MCC	615	804	76.5%	1.4
483 : Major joint or limb reattachment procs of upper extremities	569	1,245	45.7%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	372	605	61.5%	2.1
621 : OR procs for obesity w/o CC/MCC	287	460	62.4%	1.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	272	605	45.0%	2.2
036 : Carotid artery stent procs w/o CC/MCC	271	365	74.2%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	227	611	37.2%	2.2
038 : Extracranial procs w CC	209	480	43.5%	2.9
460 : Spinal fusion except cervical w/o MCC	198	2,265	8.7%	3.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	195	2,812	6.9%	5.2
472 : Cervical spinal fusion w CC	189	1,058	17.9%	3.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	167	525	31.8%	2.3
273 : Percutaneous and other intracardiac procs w MCC	161	529	30.4%	4.9
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	156	1,511	10.3%	3.0
252 : Other vascular procs w MCC	145	2,158	6.7%	6.9
Top Surgical DRGs	13,706	36,424	37.6%	2.9
All Surgical DRGs	20,990	143,499	14.6%	6.3

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	568	644	88.2%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	443	899	49.3%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	286	359	79.7%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	236	751	31.4%	2.1
483 : Major joint or limb reattachment procs of upper extremities	220	383	57.4%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	167	278	60.1%	3.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	109	160	68.1%	1.8
039 : Extracranial procs w/o CC/MCC	108	135	80.0%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	77	156	49.4%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	69	161	42.9%	2.1
460 : Spinal fusion except cervical w/o MCC	63	482	13.1%	3.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	61	543	11.2%	2.9
621 : OR procs for obesity w/o CC/MCC	60	108	55.6%	1.5
472 : Cervical spinal fusion w CC	50	219	22.8%	3.4
036 : Carotid artery stent procs w/o CC/MCC	42	58	72.4%	1.6
708 : Major male pelvic procs w/o CC/MCC	42	56	75.0%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	40	449	8.9%	4.2
038 : Extracranial procs w CC	35	60	58.3%	2.3
467 : Revision of hip or knee replacement w CC	33	242	13.6%	3.9
454 : Combined anterior and posterior spinal fusion w CC	32	640	5.0%	4.3
Top Surgical DRGs	2,741	6,783	40.4%	2.6
All Surgical DRGs	4,059	23,169	17.5%	6.0

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**Discharges for most recent 4 quarters, ending Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	726	1,355	53.6%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	212	303	70.0%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	172	242	71.1%	1.9
483 : Major joint or limb reattachment procs of upper extremities	128	181	70.7%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	94	235	40.0%	4.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	90	435	20.7%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	77	109	70.6%	1.8
039 : Extracranial procs w/o CC/MCC	63	85	74.1%	1.4
621 : OR procs for obesity w/o CC/MCC	48	83	57.8%	1.6
036 : Carotid artery stent procs w/o CC/MCC	42	60	70.0%	1.5
460 : Spinal fusion except cervical w/o MCC	34	356	9.6%	3.3
468 : Revision of hip or knee replacement w/o CC/MCC	34	78	43.6%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	34	100	34.0%	2.3
038 : Extracranial procs w CC	33	58	56.9%	2.8
660 : Kidney and ureter procs for non-neoplasm w CC	32	173	18.5%	3.8
254 : Other vascular procs w/o CC/MCC	30	63	47.6%	2.2
244 : Permanent cardiac pacemaker implant w/o CC/MCC	29	125	23.2%	2.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	25	57	43.9%	2.4
243 : Permanent cardiac pacemaker implant w CC	24	234	10.3%	3.5
253 : Other vascular procs w CC	24	172	14.0%	5.0
Top Surgical DRGs	1,951	4,504	43.3%	2.4
All Surgical DRGs	2,694	17,797	15.1%	6.9

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**Discharges for most recent 4 quarters, ending Q2FY22
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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	121	157	77.1%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	85	248	34.3%	2.1
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	38	145	26.2%	2.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	33	126	26.2%	2.6
708 : Major male pelvic procs w/o CC/MCC	27	30	90.0%	1.3
472 : Cervical spinal fusion w CC	26	129	20.2%	4.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	22	51	43.1%	2.7
483 : Major joint or limb reattachment procs of upper extremities	22	40	55.0%	3.5
039 : Extracranial procs w/o CC/MCC	20	25	80.0%	1.5
460 : Spinal fusion except cervical w/o MCC	19	317	6.0%	4.7
036 : Carotid artery stent procs w/o CC/MCC	16	23	69.6%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	15	36	41.7%	2.8
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	15	49	30.6%	2.0
035 : Carotid artery stent procs w CC	13	21	61.9%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	12	63	19.0%	2.8
Top Surgical DRGs	484	1,460	33.2%	3.0
All Surgical DRGs	893	7,794	11.5%	8.7

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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	162	198	81.8%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	106	128	82.8%	1.8
039 : Extracranial procs w/o CC/MCC	73	91	80.2%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	56	131	42.7%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	38	203	18.7%	2.8
621 : OR procs for obesity w/o CC/MCC	25	29	86.2%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	23	44	52.3%	2.1
036 : Carotid artery stent procs w/o CC/MCC	22	29	75.9%	1.6
165 : Major chest procs w/o CC/MCC	18	43	41.9%	2.4
254 : Other vascular procs w/o CC/MCC	18	33	54.5%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	17	49	34.7%	8.7
038 : Extracranial procs w CC	16	37	43.2%	4.5
164 : Major chest procs w CC	14	60	23.3%	3.9
460 : Spinal fusion except cervical w/o MCC	13	98	13.3%	3.9
Top Surgical DRGs	601	1,173	51.2%	2.6
All Surgical DRGs	861	6,580	13.1%	8.0

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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	2,639	3,618	72.9%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	2,044	5,557	36.8%	2.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,436	2,328	61.7%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	953	4,111	23.2%	2.6
039 : Extracranial procs w/o CC/MCC	792	989	80.1%	1.4
483 : Major joint or limb reattachment procs of upper extremities	742	1,411	52.6%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	732	1,701	43.0%	4.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	453	727	62.3%	2.2
036 : Carotid artery stent procs w/o CC/MCC	378	468	80.8%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	313	520	60.2%	2.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	277	985	28.1%	2.4
038 : Extracranial procs w CC	252	556	45.3%	3.2
621 : OR procs for obesity w/o CC/MCC	245	421	58.2%	1.5
472 : Cervical spinal fusion w CC	240	858	28.0%	3.5
460 : Spinal fusion except cervical w/o MCC	238	2,070	11.5%	3.5
468 : Revision of hip or knee replacement w/o CC/MCC	228	577	39.5%	2.2
473 : Cervical spinal fusion w/o CC/MCC	180	380	47.4%	2.0
660 : Kidney and ureter procs for non-neoplasm w CC	180	1,422	12.7%	4.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	176	2,984	5.9%	5.7
254 : Other vascular procs w/o CC/MCC	174	414	42.0%	2.3
Top Surgical DRGs	12,672	32,097	39.5%	2.8
All Surgical DRGs	18,829	131,579	14.3%	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 Q2FY22
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	899	1,050	85.6%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	387	491	78.8%	1.5
039 : Extracranial procs w/o CC/MCC	350	420	83.3%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	323	1,413	22.9%	2.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	284	769	36.9%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	227	525	43.2%	4.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	179	246	72.8%	1.8
621 : OR procs for obesity w/o CC/MCC	149	178	83.7%	1.2
483 : Major joint or limb reattachment procs of upper extremities	139	248	56.0%	2.4
038 : Extracranial procs w CC	115	225	51.1%	2.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	96	422	22.7%	2.8
036 : Carotid artery stent procs w/o CC/MCC	90	102	88.2%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	84	195	43.1%	2.4
460 : Spinal fusion except cervical w/o MCC	82	737	11.1%	3.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	67	163	41.1%	2.8
473 : Cervical spinal fusion w/o CC/MCC	67	136	49.3%	2.3
254 : Other vascular procs w/o CC/MCC	66	180	36.7%	2.5
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	59	1,034	5.7%	5.5
272 : Other major cardiovascular procs w/o CC/MCC	50	102	49.0%	2.5
165 : Major chest procs w/o CC/MCC	49	207	23.7%	2.8
Top Surgical DRGs	3,762	8,843	42.5%	2.8
All Surgical DRGs	5,708	41,659	13.7%	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 Q2FY22
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	66	78	84.6%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	44	129	34.1%	3.0
274 : Percutaneous and other intracardiac procs w/o MCC	26	32	81.3%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	21	113	18.6%	3.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	21	40	52.5%	2.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	16	42	38.1%	2.3
039 : Extracranial procs w/o CC/MCC	13	22	59.1%	1.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	12	115	10.4%	5.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	12	33	36.4%	6.5
Top Surgical DRGs	231	604	38.2%	3.3
All Surgical DRGs	463	4,380	10.6%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	740	1,498	49.4%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	344	439	78.4%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	271	302	89.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	250	375	66.7%	1.8
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	235	683	34.4%	2.3
039 : Extracranial procs w/o CC/MCC	177	206	85.9%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	118	146	80.8%	1.5
038 : Extracranial procs w CC	77	119	64.7%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	69	176	39.2%	4.6
708 : Major male pelvic procs w/o CC/MCC	69	94	73.4%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	68	118	57.6%	2.0
036 : Carotid artery stent procs w/o CC/MCC	66	75	88.0%	1.2
460 : Spinal fusion except cervical w/o MCC	58	363	16.0%	3.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	55	432	12.7%	4.6
254 : Other vascular procs w/o CC/MCC	40	76	52.6%	1.8
621 : OR procs for obesity w/o CC/MCC	37	56	66.1%	1.4
035 : Carotid artery stent procs w CC	32	41	78.0%	1.9
467 : Revision of hip or knee replacement w CC	32	188	17.0%	4.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	30	79	38.0%	2.6
660 : Kidney and ureter procs for non-neoplasm w CC	30	181	16.6%	4.2
Top Surgical DRGs	2,798	5,647	49.5%	2.4
All Surgical DRGs	3,736	18,160	20.6%	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 Q2FY22
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	263	275	95.6%	1.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	161	187	86.1%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	125	341	36.7%	1.9
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	82	175	46.9%	2.0
483 : Major joint or limb reattachment procs of upper extremities	63	92	68.5%	1.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	49	61	80.3%	1.4
039 : Extracranial procs w/o CC/MCC	41	50	82.0%	1.4
621 : OR procs for obesity w/o CC/MCC	35	45	77.8%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	29	176	16.5%	4.1
468 : Revision of hip or knee replacement w/o CC/MCC	26	42	61.9%	1.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	24	38	63.2%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	22	147	15.0%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	21	56	37.5%	4.4
460 : Spinal fusion except cervical w/o MCC	20	97	20.6%	3.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	19	51	37.3%	1.9
253 : Other vascular procs w CC	18	65	27.7%	3.2
472 : Cervical spinal fusion w CC	18	50	36.0%	2.7
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	18	31	58.1%	1.5
038 : Extracranial procs w CC	17	30	56.7%	2.2
473 : Cervical spinal fusion w/o CC/MCC	17	27	63.0%	1.9
Top Surgical DRGs	1,068	2,036	52.5%	2.1
All Surgical DRGs	1,557	7,096	21.9%	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 Q2FY22
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	1,644	4,160	39.5%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,069	1,487	71.9%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	853	1,063	80.2%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	460	1,964	23.4%	2.5
039 : Extracranial procs w/o CC/MCC	380	465	81.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	338	619	54.6%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	297	447	66.4%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	198	558	35.5%	5.4
038 : Extracranial procs w CC	160	320	50.0%	2.6
460 : Spinal fusion except cervical w/o MCC	157	1,016	15.5%	3.6
165 : Major chest procs w/o CC/MCC	138	330	41.8%	2.1
036 : Carotid artery stent procs w/o CC/MCC	134	161	83.2%	1.3
660 : Kidney and ureter procs for non-neoplasm w CC	117	678	17.3%	3.8
621 : OR procs for obesity w/o CC/MCC	113	189	59.8%	1.6
468 : Revision of hip or knee replacement w/o CC/MCC	108	238	45.4%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	107	341	31.4%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	98	353	27.8%	2.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	96	211	45.5%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	94	1,390	6.8%	5.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	91	321	28.3%	2.4
Top Surgical DRGs	6,652	16,311	40.8%	2.6
All Surgical DRGs	9,846	65,717	15.0%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	1,063	1,954	54.4%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	739	881	83.9%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	477	663	71.9%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	336	1,312	25.6%	2.4
039 : Extracranial procs w/o CC/MCC	314	362	86.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	264	444	59.5%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	230	311	74.0%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	191	373	51.2%	3.7
038 : Extracranial procs w CC	124	197	62.9%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	121	197	61.4%	1.7
036 : Carotid artery stent procs w/o CC/MCC	104	138	75.4%	1.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	104	405	25.7%	2.4
460 : Spinal fusion except cervical w/o MCC	104	816	12.7%	3.4
254 : Other vascular procs w/o CC/MCC	77	176	43.8%	2.5
708 : Major male pelvic procs w/o CC/MCC	77	106	72.6%	1.4
467 : Revision of hip or knee replacement w CC	64	347	18.4%	3.9
331 : Major small and large bowel procs w/o CC/MCC	63	458	13.8%	3.3
035 : Carotid artery stent procs w CC	61	118	51.7%	3.2
621 : OR procs for obesity w/o CC/MCC	59	105	56.2%	1.5
660 : Kidney and ureter procs for non-neoplasm w CC	59	417	14.1%	3.7
Top Surgical DRGs	4,631	9,780	47.4%	2.3
All Surgical DRGs	6,676	37,418	17.8%	5.8

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	769	863	89.1%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	565	3,074	18.4%	2.1
039 : Extracranial procs w/o CC/MCC	281	342	82.2%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	205	339	60.5%	1.8
483 : Major joint or limb reattachment procs of upper extremities	202	565	35.8%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	194	428	45.3%	3.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	143	599	23.9%	2.5
621 : OR procs for obesity w/o CC/MCC	94	149	63.1%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	88	134	65.7%	1.9
038 : Extracranial procs w CC	58	110	52.7%	2.3
331 : Major small and large bowel procs w/o CC/MCC	51	297	17.2%	2.9
460 : Spinal fusion except cervical w/o MCC	44	458	9.6%	3.3
708 : Major male pelvic procs w/o CC/MCC	44	73	60.3%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	39	99	39.4%	2.0
036 : Carotid artery stent procs w/o CC/MCC	38	46	82.6%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	34	77	44.2%	3.0
229 : Other cardiothoracic procs w/o MCC	33	90	36.7%	3.3
273 : Percutaneous and other intracardiac procs w MCC	33	88	37.5%	4.5
254 : Other vascular procs w/o CC/MCC	32	57	56.1%	1.6
660 : Kidney and ureter procs for non-neoplasm w CC	32	158	20.3%	3.8
Top Surgical DRGs	2,979	8,046	37.0%	2.2
All Surgical DRGs	4,165	23,855	17.5%	5.0

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	349	420	83.1%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	300	378	79.4%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	241	976	24.7%	2.4
039 : Extracranial procs w/o CC/MCC	195	251	77.7%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	178	240	74.2%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	133	577	23.1%	2.6
036 : Carotid artery stent procs w/o CC/MCC	112	135	83.0%	1.4
621 : OR procs for obesity w/o CC/MCC	101	141	71.6%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	88	187	47.1%	4.4
038 : Extracranial procs w CC	73	158	46.2%	2.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	66	677	9.7%	5.3
035 : Carotid artery stent procs w CC	65	119	54.6%	3.0
483 : Major joint or limb reattachment procs of upper extremities	64	179	35.8%	3.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	47	80	58.8%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	45	91	49.5%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	36	109	33.0%	2.4
254 : Other vascular procs w/o CC/MCC	35	96	36.5%	2.3
026 : Craniotomy and endovascular intracranial procs w CC	30	105	28.6%	5.9
253 : Other vascular procs w CC	30	303	9.9%	5.0
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	30	71	42.3%	2.1
Top Surgical DRGs	2,218	5,293	41.9%	2.9
All Surgical DRGs	3,376	25,245	13.4%	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 Q2FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	294	385	76.4%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	291	986	29.5%	2.2
274 : Percutaneous and other intracardiac procs w/o MCC	286	346	82.7%	1.3
039 : Extracranial procs w/o CC/MCC	254	338	75.1%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	153	685	22.3%	2.5
473 : Cervical spinal fusion w/o CC/MCC	134	199	67.3%	1.7
483 : Major joint or limb reattachment procs of upper extremities	104	211	49.3%	2.5
621 : OR procs for obesity w/o CC/MCC	102	148	68.9%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	99	210	47.1%	3.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	84	144	58.3%	2.4
038 : Extracranial procs w CC	75	146	51.4%	2.9
472 : Cervical spinal fusion w CC	71	214	33.2%	3.6
036 : Carotid artery stent procs w/o CC/MCC	67	78	85.9%	1.2
460 : Spinal fusion except cervical w/o MCC	63	448	14.1%	3.6
254 : Other vascular procs w/o CC/MCC	44	131	33.6%	2.6
328 : Stomach, esophageal and duodenal procs w/o CC/MCC	42	114	36.8%	2.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	41	478	8.6%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	39	119	32.8%	3.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	39	120	32.5%	2.4
331 : Major small and large bowel procs w/o CC/MCC	37	349	10.6%	3.6
Top Surgical DRGs	2,319	5,849	39.6%	2.5
All Surgical DRGs	3,466	23,771	14.6%	6.0

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	1,651	5,080	32.5%	2.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	655	1,104	59.3%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	502	664	75.6%	1.8
039 : Extracranial procs w/o CC/MCC	241	333	72.4%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	203	1,330	15.3%	3.1
483 : Major joint or limb reattachment procs of upper extremities	202	559	36.1%	2.3
621 : OR procs for obesity w/o CC/MCC	156	230	67.8%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	146	288	50.7%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	122	602	20.3%	7.3
165 : Major chest procs w/o CC/MCC	106	437	24.3%	2.4
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	97	306	31.7%	2.2
038 : Extracranial procs w CC	89	246	36.2%	3.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	88	228	38.6%	2.2
036 : Carotid artery stent procs w/o CC/MCC	88	108	81.5%	1.3
708 : Major male pelvic procs w/o CC/MCC	87	126	69.0%	1.5
254 : Other vascular procs w/o CC/MCC	73	229	31.9%	2.8
328 : Stomach, esophageal and duodenal procs w/o CC/MCC	71	225	31.6%	2.6
164 : Major chest procs w CC	65	713	9.1%	4.3
331 : Major small and large bowel procs w/o CC/MCC	65	600	10.8%	3.3
460 : Spinal fusion except cervical w/o MCC	65	984	6.6%	3.7
Top Surgical DRGs	4,772	14,392	33.2%	2.7
All Surgical DRGs	7,188	51,399	14.0%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Maryland, 45 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	467	1,059	44.1%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	441	693	63.6%	2.0
483 : Major joint or limb reattachment procs of upper extremities	302	469	64.4%	1.9
039 : Extracranial procs w/o CC/MCC	255	303	84.2%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	241	937	25.7%	2.5
274 : Percutaneous and other intracardiac procs w/o MCC	200	263	76.0%	1.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	159	237	67.1%	2.2
460 : Spinal fusion except cervical w/o MCC	138	899	15.4%	3.7
036 : Carotid artery stent procs w/o CC/MCC	120	142	84.5%	1.4
038 : Extracranial procs w CC	118	187	63.1%	2.5
472 : Cervical spinal fusion w CC	101	344	29.4%	3.6
621 : OR procs for obesity w/o CC/MCC	78	121	64.5%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	77	181	42.5%	2.4
473 : Cervical spinal fusion w/o CC/MCC	63	129	48.8%	2.2
033 : Ventricular shunt procs w/o CC/MCC	58	82	70.7%	1.6
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	57	161	35.4%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	56	615	9.1%	5.5
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	50	102	49.0%	1.8
467 : Revision of hip or knee replacement w CC	48	286	16.8%	5.1
035 : Carotid artery stent procs w CC	46	76	60.5%	2.3
Top Surgical DRGs	3,075	7,286	42.2%	2.8
All Surgical DRGs	4,795	33,219	14.4%	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 Q2FY22
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	101	159	63.5%	1.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	91	165	55.2%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	49	66	74.2%	1.7
039 : Extracranial procs w/o CC/MCC	38	48	79.2%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	32	238	13.4%	3.0
038 : Extracranial procs w CC	29	40	72.5%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	27	34	79.4%	1.7
483 : Major joint or limb reattachment procs of upper extremities	26	36	72.2%	2.1
036 : Carotid artery stent procs w/o CC/MCC	20	22	90.9%	1.1
621 : OR procs for obesity w/o CC/MCC	20	23	87.0%	1.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	16	29	55.2%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	15	27	55.6%	2.0
460 : Spinal fusion except cervical w/o MCC	14	45	31.1%	3.0
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	11	25	44.0%	1.9
660 : Kidney and ureter procs for non-neoplasm w CC	11	57	19.3%	4.6
Top Surgical DRGs	500	1,014	49.3%	2.3
All Surgical DRGs	836	5,446	15.4%	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 Q2FY22
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	985	1,163	84.7%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	943	1,655	57.0%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	834	1,272	65.6%	1.6
039 : Extracranial procs w/o CC/MCC	293	347	84.4%	1.3
483 : Major joint or limb reattachment procs of upper extremities	267	464	57.5%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	264	1,527	17.3%	2.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	214	321	66.7%	2.1
621 : OR procs for obesity w/o CC/MCC	126	207	60.9%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	125	462	27.1%	6.0
038 : Extracranial procs w CC	122	234	52.1%	3.2
468 : Revision of hip or knee replacement w/o CC/MCC	117	204	57.4%	1.9
036 : Carotid artery stent procs w/o CC/MCC	111	137	81.0%	1.4
460 : Spinal fusion except cervical w/o MCC	100	781	12.8%	3.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	78	179	43.6%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	78	220	35.5%	2.1
254 : Other vascular procs w/o CC/MCC	77	182	42.3%	2.2
472 : Cervical spinal fusion w CC	70	336	20.8%	4.0
660 : Kidney and ureter procs for non-neoplasm w CC	70	463	15.1%	4.0
473 : Cervical spinal fusion w/o CC/MCC	66	128	51.6%	2.1
253 : Other vascular procs w CC	59	489	12.1%	5.4
Top Surgical DRGs	4,999	10,771	46.4%	2.6
All Surgical DRGs	7,195	45,506	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 Q2FY22
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	795	1,039	76.5%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	795	1,495	53.2%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	504	616	81.8%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	221	898	24.6%	2.3
483 : Major joint or limb reattachment procs of upper extremities	184	304	60.5%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	159	393	40.5%	5.1
039 : Extracranial procs w/o CC/MCC	143	182	78.6%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	126	212	59.4%	2.3
038 : Extracranial procs w CC	84	166	50.6%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	80	137	58.4%	2.0
253 : Other vascular procs w CC	56	320	17.5%	4.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	53	709	7.5%	5.0
472 : Cervical spinal fusion w CC	52	212	24.5%	3.5
467 : Revision of hip or knee replacement w CC	50	355	14.1%	3.7
165 : Major chest procs w/o CC/MCC	47	141	33.3%	2.5
254 : Other vascular procs w/o CC/MCC	46	95	48.4%	2.0
621 : OR procs for obesity w/o CC/MCC	44	70	62.9%	1.5
660 : Kidney and ureter procs for non-neoplasm w CC	44	253	17.4%	3.3
026 : Craniotomy and endovascular intracranial procs w CC	43	135	31.9%	3.8
468 : Revision of hip or knee replacement w/o CC/MCC	43	110	39.1%	2.1
Top Surgical DRGs	3,569	7,842	45.5%	2.6
All Surgical DRGs	5,217	28,982	18.0%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	630	809	77.9%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	532	640	83.1%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	493	1,583	31.1%	2.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	319	1,214	26.3%	2.5
039 : Extracranial procs w/o CC/MCC	251	324	77.5%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	198	306	64.7%	2.0
621 : OR procs for obesity w/o CC/MCC	176	241	73.0%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	156	386	40.4%	4.5
038 : Extracranial procs w CC	110	217	50.7%	2.7
036 : Carotid artery stent procs w/o CC/MCC	106	137	77.4%	1.3
483 : Major joint or limb reattachment procs of upper extremities	106	278	38.1%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	84	155	54.2%	2.0
254 : Other vascular procs w/o CC/MCC	84	215	39.1%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	73	916	8.0%	4.9
620 : OR procs for obesity w CC	73	129	56.6%	1.7
460 : Spinal fusion except cervical w/o MCC	68	552	12.3%	3.7
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	60	187	32.1%	2.4
660 : Kidney and ureter procs for non-neoplasm w CC	57	364	15.7%	4.1
468 : Revision of hip or knee replacement w/o CC/MCC	54	181	29.8%	2.5
035 : Carotid artery stent procs w CC	51	103	49.5%	3.0
Top Surgical DRGs	3,681	8,937	41.2%	2.6
All Surgical DRGs	5,486	37,655	14.6%	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 Q2FY22
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	366	426	85.9%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	295	353	83.6%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	263	964	27.3%	2.5
039 : Extracranial procs w/o CC/MCC	217	262	82.8%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	189	669	28.3%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	113	143	79.0%	1.5
621 : OR procs for obesity w/o CC/MCC	107	158	67.7%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	84	149	56.4%	3.5
038 : Extracranial procs w CC	79	146	54.1%	2.7
483 : Major joint or limb reattachment procs of upper extremities	78	151	51.7%	2.2
460 : Spinal fusion except cervical w/o MCC	53	195	27.2%	3.0
036 : Carotid artery stent procs w/o CC/MCC	51	58	87.9%	1.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	47	480	9.8%	5.0
472 : Cervical spinal fusion w CC	43	136	31.6%	3.5
254 : Other vascular procs w/o CC/MCC	36	71	50.7%	2.1
473 : Cervical spinal fusion w/o CC/MCC	34	65	52.3%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	33	108	30.6%	2.3
035 : Carotid artery stent procs w CC	28	45	62.2%	2.7
468 : Revision of hip or knee replacement w/o CC/MCC	26	72	36.1%	2.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	25	118	21.2%	2.8
Top Surgical DRGs	2,167	4,769	45.4%	2.5
All Surgical DRGs	3,218	20,040	16.1%	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 Q2FY22
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
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	250	495	50.5%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	201	226	88.9%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	148	170	87.1%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	137	204	67.2%	2.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	126	345	36.5%	2.0
460 : Spinal fusion except cervical w/o MCC	97	252	38.5%	2.7
039 : Extracranial procs w/o CC/MCC	84	100	84.0%	1.3
483 : Major joint or limb reattachment procs of upper extremities	74	122	60.7%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	47	74	63.5%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	31	69	44.9%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	30	56	53.6%	2.0
254 : Other vascular procs w/o CC/MCC	29	62	46.8%	2.2
038 : Extracranial procs w CC	26	49	53.1%	2.4
708 : Major male pelvic procs w/o CC/MCC	21	23	91.3%	1.1
165 : Major chest procs w/o CC/MCC	20	43	46.5%	2.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	19	46	41.3%	2.0
331 : Major small and large bowel procs w/o CC/MCC	17	122	13.9%	3.2
243 : Permanent cardiac pacemaker implant w CC	16	86	18.6%	3.5
660 : Kidney and ureter procs for non-neoplasm w CC	16	61	26.2%	3.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	15	178	8.4%	4.2
Top Surgical DRGs	1,404	2,783	50.4%	2.3
All Surgical DRGs	1,907	7,983	23.9%	5.4

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	1,245	3,018	41.3%	2.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	630	978	64.4%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	613	886	69.2%	1.8
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	417	1,813	23.0%	2.5
039 : Extracranial procs w/o CC/MCC	402	493	81.5%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	274	440	62.3%	2.2
483 : Major joint or limb reattachment procs of upper extremities	177	413	42.9%	3.0
621 : OR procs for obesity w/o CC/MCC	158	215	73.5%	1.4
038 : Extracranial procs w CC	146	272	53.7%	2.8
036 : Carotid artery stent procs w/o CC/MCC	133	174	76.4%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	123	308	39.9%	2.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	116	272	42.6%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	115	362	31.8%	4.8
331 : Major small and large bowel procs w/o CC/MCC	84	796	10.6%	3.4
460 : Spinal fusion except cervical w/o MCC	83	948	8.8%	3.9
033 : Ventricular shunt procs w/o CC/MCC	78	108	72.2%	2.0
253 : Other vascular procs w CC	78	627	12.4%	5.2
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	78	213	36.6%	2.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	76	1,214	6.3%	5.2
708 : Major male pelvic procs w/o CC/MCC	71	125	56.8%	1.6
Top Surgical DRGs	5,097	13,675	37.3%	2.8
All Surgical DRGs	7,585	54,186	14.0%	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 Q2FY22
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	193	307	62.9%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	183	263	69.6%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	149	159	93.7%	1.1
039 : Extracranial procs w/o CC/MCC	80	97	82.5%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	77	230	33.5%	2.1
038 : Extracranial procs w CC	52	80	65.0%	1.8
483 : Major joint or limb reattachment procs of upper extremities	49	72	68.1%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	47	66	71.2%	1.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	32	206	15.5%	4.5
467 : Revision of hip or knee replacement w CC	21	101	20.8%	3.8
254 : Other vascular procs w/o CC/MCC	19	41	46.3%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	19	44	43.2%	2.3
036 : Carotid artery stent procs w/o CC/MCC	17	20	85.0%	1.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	15	22	68.2%	1.7
273 : Percutaneous and other intracardiac procs w MCC	14	23	60.9%	3.7
035 : Carotid artery stent procs w CC	13	28	46.4%	2.3
253 : Other vascular procs w CC	12	76	15.8%	3.9
660 : Kidney and ureter procs for non-neoplasm w CC	12	64	18.8%	3.4
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	12	23	52.2%	1.8
252 : Other vascular procs w MCC	11	61	18.0%	6.2
Top Surgical DRGs	1,027	1,983	51.8%	2.4
All Surgical DRGs	1,309	6,697	19.5%	5.7

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	795	830	95.8%	1.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	235	465	50.5%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	217	564	38.5%	2.0
483 : Major joint or limb reattachment procs of upper extremities	143	226	63.3%	1.8
039 : Extracranial procs w/o CC/MCC	129	145	89.0%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	103	356	28.9%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	81	116	69.8%	1.9
229 : Other cardiothoracic procs w/o MCC	79	119	66.4%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	75	147	51.0%	2.8
038 : Extracranial procs w CC	66	102	64.7%	1.9
036 : Carotid artery stent procs w/o CC/MCC	60	68	88.2%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	47	80	58.8%	1.8
254 : Other vascular procs w/o CC/MCC	40	65	61.5%	1.5
253 : Other vascular procs w CC	34	166	20.5%	4.1
035 : Carotid artery stent procs w CC	30	50	60.0%	1.8
243 : Permanent cardiac pacemaker implant w CC	27	123	22.0%	2.9
467 : Revision of hip or knee replacement w CC	26	150	17.3%	4.2
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	23	50	46.0%	3.8
244 : Permanent cardiac pacemaker implant w/o CC/MCC	21	64	32.8%	2.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	20	39	51.3%	2.3
Top Surgical DRGs	2,251	3,925	57.4%	2.0
All Surgical DRGs	2,936	14,078	20.9%	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 Q2FY22
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	229	317	72.2%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	149	177	84.2%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	92	191	48.2%	2.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	76	414	18.4%	2.4
039 : Extracranial procs w/o CC/MCC	67	96	69.8%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	50	147	34.0%	6.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	46	78	59.0%	1.8
621 : OR procs for obesity w/o CC/MCC	38	55	69.1%	1.3
483 : Major joint or limb reattachment procs of upper extremities	26	53	49.1%	3.0
038 : Extracranial procs w CC	24	59	40.7%	3.5
165 : Major chest procs w/o CC/MCC	23	53	43.4%	2.1
660 : Kidney and ureter procs for non-neoplasm w CC	20	88	22.7%	3.2
036 : Carotid artery stent procs w/o CC/MCC	19	29	65.5%	1.8
272 : Other major cardiovascular procs w/o CC/MCC	18	31	58.1%	2.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	18	43	41.9%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	17	36	47.2%	2.1
253 : Other vascular procs w CC	16	121	13.2%	5.5
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	16	57	28.1%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	14	30	46.7%	2.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	14	250	5.6%	5.0
Top Surgical DRGs	972	2,325	41.8%	2.8
All Surgical DRGs	1,488	8,771	17.0%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1- Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	914	1,982	46.1%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	913	1,341	68.1%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	579	782	74.0%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	271	1,435	18.9%	2.9
039 : Extracranial procs w/o CC/MCC	228	280	81.4%	1.4
621 : OR procs for obesity w/o CC/MCC	181	265	68.3%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	169	260	65.0%	2.1
483 : Major joint or limb reattachment procs of upper extremities	105	227	46.3%	3.3
165 : Major chest procs w/o CC/MCC	95	218	43.6%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	79	411	19.2%	7.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	75	983	7.6%	5.9
038 : Extracranial procs w CC	74	189	39.2%	3.7
036 : Carotid artery stent procs w/o CC/MCC	67	87	77.0%	1.4
164 : Major chest procs w CC	61	398	15.3%	4.4
460 : Spinal fusion except cervical w/o MCC	54	559	9.7%	3.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	54	253	21.3%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	52	118	44.1%	2.4
243 : Permanent cardiac pacemaker implant w CC	52	600	8.7%	4.1
468 : Revision of hip or knee replacement w/o CC/MCC	47	112	42.0%	2.3
660 : Kidney and ureter procs for non-neoplasm w CC	45	534	8.4%	4.6
Top Surgical DRGs	4,115	11,034	37.3%	3.1
All Surgical DRGs	5,955	44,993	13.2%	6.9

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	205	317	64.7%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	68	330	20.6%	2.4
274 : Percutaneous and other intracardiac procs w/o MCC	44	66	66.7%	1.9
483 : Major joint or limb reattachment procs of upper extremities	35	50	70.0%	1.7
039 : Extracranial procs w/o CC/MCC	24	33	72.7%	1.4
460 : Spinal fusion except cervical w/o MCC	24	78	30.8%	2.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	21	54	38.9%	5.0
244 : Permanent cardiac pacemaker implant w/o CC/MCC	17	67	25.4%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	17	28	60.7%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	16	22	72.7%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	16	32	50.0%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	13	212	6.1%	5.1
243 : Permanent cardiac pacemaker implant w CC	11	68	16.2%	3.0
Top Surgical DRGs	511	1,357	37.7%	2.7
All Surgical DRGs	807	7,113	11.3%	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.

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**Discharges for most recent 4 quarters, ending Q2FY22
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	189	234	80.8%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	173	677	25.6%	2.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	126	225	56.0%	3.3
274 : Percutaneous and other intracardiac procs w/o MCC	110	146	75.3%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	95	427	22.2%	2.6
039 : Extracranial procs w/o CC/MCC	80	100	80.0%	1.4
621 : OR procs for obesity w/o CC/MCC	77	89	86.5%	1.2
483 : Major joint or limb reattachment procs of upper extremities	58	120	48.3%	2.5
473 : Cervical spinal fusion w/o CC/MCC	47	76	61.8%	1.7
460 : Spinal fusion except cervical w/o MCC	40	232	17.2%	3.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	37	167	22.2%	3.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	35	78	44.9%	2.6
472 : Cervical spinal fusion w CC	28	117	23.9%	3.0
254 : Other vascular procs w/o CC/MCC	27	60	45.0%	2.1
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	26	347	7.5%	5.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	24	49	49.0%	2.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	24	75	32.0%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	24	62	38.7%	2.2
331 : Major small and large bowel procs w/o CC/MCC	22	143	15.4%	3.1
036 : Carotid artery stent procs w/o CC/MCC	21	25	84.0%	1.6
Top Surgical DRGs	1,263	3,449	36.6%	2.8
All Surgical DRGs	1,986	13,925	14.3%	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 Q2FY22
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	2,920	8,880	32.9%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,787	3,002	59.5%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	1,478	2,110	70.0%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	1,004	3,168	31.7%	2.5
483 : Major joint or limb reattachment procs of upper extremities	707	1,168	60.5%	2.1
039 : Extracranial procs w/o CC/MCC	462	614	75.2%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	412	1,430	28.8%	5.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	337	529	63.7%	2.3
621 : OR procs for obesity w/o CC/MCC	257	372	69.1%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	207	350	59.1%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	206	1,856	11.1%	5.6
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	191	559	34.2%	2.3
038 : Extracranial procs w CC	162	345	47.0%	3.2
468 : Revision of hip or knee replacement w/o CC/MCC	158	472	33.5%	2.6
036 : Carotid artery stent procs w/o CC/MCC	137	190	72.1%	1.6
253 : Other vascular procs w CC	133	1,136	11.7%	6.1
254 : Other vascular procs w/o CC/MCC	130	385	33.8%	2.6
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	130	247	52.6%	1.7
165 : Major chest procs w/o CC/MCC	127	447	28.4%	2.5
271 : Other major cardiovascular procs w CC	125	754	16.6%	5.9
Top Surgical DRGs	11,070	28,014	39.5%	2.9
All Surgical DRGs	16,281	98,616	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.

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**Discharges for most recent 4 quarters, ending Q2FY22
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	1,103	1,423	77.5%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,037	1,312	79.0%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	977	2,016	48.5%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	559	2,106	26.5%	2.5
483 : Major joint or limb reattachment procs of upper extremities	422	661	63.8%	1.9
039 : Extracranial procs w/o CC/MCC	416	506	82.2%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	350	703	49.8%	4.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	317	481	65.9%	2.2
038 : Extracranial procs w CC	162	302	53.6%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	158	285	55.4%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	136	279	48.7%	2.0
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	135	345	39.1%	2.0
036 : Carotid artery stent procs w/o CC/MCC	128	148	86.5%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	117	1,412	8.3%	5.1
460 : Spinal fusion except cervical w/o MCC	114	1,245	9.2%	3.6
621 : OR procs for obesity w/o CC/MCC	112	199	56.3%	1.6
254 : Other vascular procs w/o CC/MCC	110	269	40.9%	2.3
660 : Kidney and ureter procs for non-neoplasm w CC	98	619	15.8%	3.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	96	502	19.1%	2.7
253 : Other vascular procs w CC	84	589	14.3%	4.8
Top Surgical DRGs	6,631	15,402	43.1%	2.7
All Surgical DRGs	9,723	60,060	16.2%	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 Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Oklahoma, 79 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	1,020	3,638	28.0%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	341	473	72.1%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	322	367	87.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	265	559	47.4%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	215	618	34.8%	2.2
039 : Extracranial procs w/o CC/MCC	185	214	86.4%	1.2
036 : Carotid artery stent procs w/o CC/MCC	118	132	89.4%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	117	167	70.1%	1.9
038 : Extracranial procs w CC	89	151	58.9%	2.6
473 : Cervical spinal fusion w/o CC/MCC	77	163	47.2%	1.9
035 : Carotid artery stent procs w CC	73	107	68.2%	1.8
460 : Spinal fusion except cervical w/o MCC	68	721	9.4%	3.0
621 : OR procs for obesity w/o CC/MCC	64	95	67.4%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	62	108	57.4%	2.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	59	460	12.8%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	56	204	27.5%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	49	163	30.1%	4.7
472 : Cervical spinal fusion w CC	47	166	28.3%	3.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	44	478	9.2%	5.0
254 : Other vascular procs w/o CC/MCC	40	89	44.9%	2.1
Top Surgical DRGs	3,311	9,073	36.5%	2.3
All Surgical DRGs	4,525	26,327	17.2%	5.3

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	364	621	58.6%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	254	366	69.4%	1.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	160	306	52.3%	3.4
274 : Percutaneous and other intracardiac procs w/o MCC	157	193	81.3%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	141	536	26.3%	2.2
039 : Extracranial procs w/o CC/MCC	136	160	85.0%	1.3
483 : Major joint or limb reattachment procs of upper extremities	126	200	63.0%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	113	155	72.9%	1.9
621 : OR procs for obesity w/o CC/MCC	53	74	71.6%	1.4
036 : Carotid artery stent procs w/o CC/MCC	51	60	85.0%	1.3
254 : Other vascular procs w/o CC/MCC	46	104	44.2%	2.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	41	147	27.9%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	38	71	53.5%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	38	79	48.1%	2.1
038 : Extracranial procs w CC	34	62	54.8%	2.5
253 : Other vascular procs w CC	33	189	17.5%	4.6
035 : Carotid artery stent procs w CC	32	58	55.2%	3.4
331 : Major small and large bowel procs w/o CC/MCC	31	232	13.4%	3.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	30	350	8.6%	4.9
460 : Spinal fusion except cervical w/o MCC	30	143	21.0%	3.4
Top Surgical DRGs	1,908	4,106	46.5%	2.6
All Surgical DRGs	2,917	15,778	18.5%	6.5

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Pennsylvania, 144 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	3,216	5,850	55.0%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	1,042	1,401	74.4%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,037	1,628	63.7%	1.8
483 : Major joint or limb reattachment procs of upper extremities	551	874	63.0%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	421	1,005	41.9%	4.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	411	2,219	18.5%	2.7
039 : Extracranial procs w/o CC/MCC	381	456	83.6%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	300	483	62.1%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	191	443	43.1%	2.2
460 : Spinal fusion except cervical w/o MCC	164	1,343	12.2%	3.5
036 : Carotid artery stent procs w/o CC/MCC	153	205	74.6%	1.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	145	269	53.9%	2.1
621 : OR procs for obesity w/o CC/MCC	144	249	57.8%	1.6
038 : Extracranial procs w CC	141	294	48.0%	3.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	112	442	25.3%	2.2
708 : Major male pelvic procs w/o CC/MCC	94	174	54.0%	1.6
035 : Carotid artery stent procs w CC	87	190	45.8%	3.2
254 : Other vascular procs w/o CC/MCC	87	280	31.1%	2.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	86	1,377	6.2%	5.5
467 : Revision of hip or knee replacement w CC	85	669	12.7%	4.4
Top Surgical DRGs	8,848	19,851	44.6%	2.5
All Surgical DRGs	11,983	72,577	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 Q2FY22
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	150	408	36.8%	2.0
483 : Major joint or limb reattachment procs of upper extremities	33	53	62.3%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	31	207	15.0%	3.7
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	21	52	40.4%	2.0
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	13	72	18.1%	4.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	11	34	32.4%	2.1
581 : Other skin, subcutaneous tissue and breast procs w/o CC/MCC	11	29	37.9%	3.8
714 : Transurethral prostatectomy w/o CC/MCC	11	21	52.4%	2.2
Top Surgical DRGs	281	876	32.1%	2.6
All Surgical DRGs	519	3,792	13.7%	7.9

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	297	494	60.1%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	76	100	76.0%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	48	55	87.3%	1.3
483 : Major joint or limb reattachment procs of upper extremities	23	54	42.6%	2.4
036 : Carotid artery stent procs w/o CC/MCC	22	32	68.8%	1.6
039 : Extracranial procs w/o CC/MCC	21	30	70.0%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	17	26	65.4%	1.9
035 : Carotid artery stent procs w CC	12	29	41.4%	3.2
038 : Extracranial procs w CC	11	17	64.7%	2.8
460 : Spinal fusion except cervical w/o MCC	11	153	7.2%	3.4
468 : Revision of hip or knee replacement w/o CC/MCC	11	39	28.2%	2.5
473 : Cervical spinal fusion w/o CC/MCC	11	21	52.4%	1.6
Top Surgical DRGs	560	1,050	53.3%	2.0
All Surgical DRGs	736	4,763	15.5%	5.6

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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	782	943	82.9%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	360	818	44.0%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	357	450	79.3%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	278	427	65.1%	3.4
039 : Extracranial procs w/o CC/MCC	268	329	81.5%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	235	875	26.9%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	170	235	72.3%	1.8
036 : Carotid artery stent procs w/o CC/MCC	146	174	83.9%	1.3
621 : OR procs for obesity w/o CC/MCC	92	146	63.0%	1.5
483 : Major joint or limb reattachment procs of upper extremities	91	202	45.0%	2.5
473 : Cervical spinal fusion w/o CC/MCC	80	126	63.5%	1.7
460 : Spinal fusion except cervical w/o MCC	77	478	16.1%	3.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	68	174	39.1%	2.6
038 : Extracranial procs w CC	68	126	54.0%	2.5
254 : Other vascular procs w/o CC/MCC	68	153	44.4%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	68	158	43.0%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	66	615	10.7%	4.5
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	65	304	21.4%	2.6
273 : Percutaneous and other intracardiac procs w MCC	62	148	41.9%	4.5
033 : Ventricular shunt procs w/o CC/MCC	52	68	76.5%	1.4
Top Surgical DRGs	3,453	6,949	49.7%	2.4
All Surgical DRGs	4,978	28,528	17.4%	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 Q2FY22
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	480	1,445	33.2%	2.0
483 : Major joint or limb reattachment procs of upper extremities	233	315	74.0%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	152	224	67.9%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	143	178	80.3%	1.5
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	81	94	86.2%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	78	334	23.4%	2.4
036 : Carotid artery stent procs w/o CC/MCC	52	72	72.2%	1.6
621 : OR procs for obesity w/o CC/MCC	46	56	82.1%	1.2
038 : Extracranial procs w CC	30	55	54.5%	2.5
469 : Major hip and knee joint replacement or reattachment of lower extremity w MC	29	64	45.3%	3.3
468 : Revision of hip or knee replacement w/o CC/MCC	26	80	32.5%	2.1
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	24	235	10.2%	4.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	23	91	25.3%	3.7
331 : Major small and large bowel procs w/o CC/MCC	19	150	12.7%	2.9
254 : Other vascular procs w/o CC/MCC	18	42	42.9%	2.0
467 : Revision of hip or knee replacement w CC	18	104	17.3%	3.9
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	17	44	38.6%	1.9
035 : Carotid artery stent procs w CC	15	60	25.0%	4.0
489 : Knee procs w/o PDx of infection w/o CC/MCC	14	24	58.3%	1.8
Top Surgical DRGs	1,580	3,766	42.0%	2.3
All Surgical DRGs	2,082	10,133	20.5%	4.8

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

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

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**Discharges for most recent 4 quarters, ending Q2FY22
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
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	890	1,755	50.7%	2.0
274 : Percutaneous and other intracardiac procs w/o MCC	781	931	83.9%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	552	718	76.9%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	347	1,289	26.9%	2.4
039 : Extracranial procs w/o CC/MCC	318	402	79.1%	1.4
483 : Major joint or limb reattachment procs of upper extremities	277	442	62.7%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	223	477	46.8%	4.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	217	299	72.6%	1.8
036 : Carotid artery stent procs w/o CC/MCC	202	239	84.5%	1.2
460 : Spinal fusion except cervical w/o MCC	187	901	20.8%	3.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	129	496	26.0%	2.7
468 : Revision of hip or knee replacement w/o CC/MCC	115	203	56.7%	1.9
621 : OR procs for obesity w/o CC/MCC	105	153	68.6%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	101	181	55.8%	2.2
038 : Extracranial procs w CC	101	187	54.0%	2.6
254 : Other vascular procs w/o CC/MCC	88	213	41.3%	2.3
035 : Carotid artery stent procs w CC	72	136	52.9%	3.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	71	930	7.6%	5.1
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	68	159	42.8%	1.9
473 : Cervical spinal fusion w/o CC/MCC	66	130	50.8%	2.1
Top Surgical DRGs	4,910	10,241	47.9%	2.5
All Surgical DRGs	7,433	41,942	17.7%	6.1

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

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**Discharges for most recent 4 quarters, ending Q2FY22
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	3,139	7,706	40.7%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	2,443	3,067	79.7%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,300	1,847	70.4%	1.6
039 : Extracranial procs w/o CC/MCC	826	1,008	81.9%	1.4
483 : Major joint or limb reattachment procs of upper extremities	749	1,358	55.2%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	718	3,267	22.0%	2.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	528	1,377	38.3%	4.2
621 : OR procs for obesity w/o CC/MCC	510	684	74.6%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	420	634	66.2%	2.2
036 : Carotid artery stent procs w/o CC/MCC	382	462	82.7%	1.3
473 : Cervical spinal fusion w/o CC/MCC	338	577	58.6%	1.8
460 : Spinal fusion except cervical w/o MCC	330	2,247	14.7%	3.3
472 : Cervical spinal fusion w CC	305	1,011	30.2%	3.3
038 : Extracranial procs w CC	289	577	50.1%	2.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	268	526	51.0%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	219	571	38.4%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	195	2,834	6.9%	5.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	191	1,405	13.6%	2.7
254 : Other vascular procs w/o CC/MCC	170	463	36.7%	2.3
035 : Carotid artery stent procs w CC	168	300	56.0%	2.5
Top Surgical DRGs	13,488	31,921	42.3%	2.5
All Surgical DRGs	19,648	126,685	15.5%	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 Q2FY22
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	246	274	89.8%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	234	329	71.1%	1.5
483 : Major joint or limb reattachment procs of upper extremities	175	244	71.7%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	161	419	38.4%	1.9
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	157	528	29.7%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	66	115	57.4%	1.6
460 : Spinal fusion except cervical w/o MCC	58	335	17.3%	3.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	56	153	36.6%	4.3
039 : Extracranial procs w/o CC/MCC	53	66	80.3%	1.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	53	301	17.6%	4.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	43	56	76.8%	1.4
621 : OR procs for obesity w/o CC/MCC	39	51	76.5%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	37	78	47.4%	2.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	35	238	14.7%	2.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	29	64	45.3%	1.8
038 : Extracranial procs w CC	28	43	65.1%	1.8
331 : Major small and large bowel procs w/o CC/MCC	27	151	17.9%	3.0
243 : Permanent cardiac pacemaker implant w CC	26	119	21.8%	2.9
330 : Major small and large bowel procs w CC	26	290	9.0%	5.0
467 : Revision of hip or knee replacement w CC	26	189	13.8%	3.5
Top Surgical DRGs	1,575	4,043	39.0%	2.5
All Surgical DRGs	2,483	12,059	20.6%	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 Q2FY22
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	1,265	2,011	62.9%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	840	1,243	67.6%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	798	1,000	79.8%	1.5
039 : Extracranial procs w/o CC/MCC	347	397	87.4%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	304	1,452	20.9%	2.5
483 : Major joint or limb reattachment procs of upper extremities	247	394	62.7%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	196	319	61.4%	2.3
036 : Carotid artery stent procs w/o CC/MCC	183	222	82.4%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	181	574	31.5%	5.2
468 : Revision of hip or knee replacement w/o CC/MCC	107	239	44.8%	2.1
621 : OR procs for obesity w/o CC/MCC	99	135	73.3%	1.3
038 : Extracranial procs w CC	98	185	53.0%	2.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	95	185	51.4%	2.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	86	598	14.4%	2.8
254 : Other vascular procs w/o CC/MCC	85	247	34.4%	2.4
035 : Carotid artery stent procs w CC	84	150	56.0%	2.7
460 : Spinal fusion except cervical w/o MCC	78	739	10.6%	3.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	74	225	32.9%	2.2
472 : Cervical spinal fusion w CC	69	275	25.1%	3.5
253 : Other vascular procs w CC	63	516	12.2%	4.6
Top Surgical DRGs	5,299	11,106	47.7%	2.4
All Surgical DRGs	7,312	44,206	16.5%	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 Q2FY22
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	90	178	50.6%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	88	141	62.4%	1.7
483 : Major joint or limb reattachment procs of upper extremities	34	44	77.3%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	32	49	65.3%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	25	123	20.3%	2.6
039 : Extracranial procs w/o CC/MCC	21	24	87.5%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	13	18	72.2%	1.6
460 : Spinal fusion except cervical w/o MCC	12	74	16.2%	5.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	11	44	25.0%	5.4
Top Surgical DRGs	326	695	46.9%	2.5
All Surgical DRGs	527	3,173	16.6%	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 Q2FY22
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	869	80.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	654	743	88.0%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	426	760	56.1%	3.9
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	329	665	49.5%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	314	1,110	28.3%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	180	258	69.8%	1.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	160	252	63.5%	1.8
039 : Extracranial procs w/o CC/MCC	159	195	81.5%	1.4
483 : Major joint or limb reattachment procs of upper extremities	126	219	57.5%	2.4
036 : Carotid artery stent procs w/o CC/MCC	103	122	84.4%	1.4
038 : Extracranial procs w CC	92	164	56.1%	2.7
331 : Major small and large bowel procs w/o CC/MCC	84	406	20.7%	3.1
165 : Major chest procs w/o CC/MCC	78	165	47.3%	2.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	77	395	19.5%	2.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	69	803	8.6%	4.9
035 : Carotid artery stent procs w CC	68	115	59.1%	2.8
254 : Other vascular procs w/o CC/MCC	66	148	44.6%	2.2
253 : Other vascular procs w CC	58	327	17.7%	4.7
621 : OR procs for obesity w/o CC/MCC	58	79	73.4%	1.4
164 : Major chest procs w CC	56	314	17.8%	3.7
Top Surgical DRGs	3,858	8,109	47.6%	2.7
All Surgical DRGs	5,891	31,163	18.9%	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 Q2FY22
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	654	1,423	46.0%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	439	686	64.0%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	250	313	79.9%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	244	893	27.3%	2.3
039 : Extracranial procs w/o CC/MCC	201	249	80.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	156	259	60.2%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	129	191	67.5%	2.3
038 : Extracranial procs w CC	96	165	58.2%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	86	289	29.8%	5.6
468 : Revision of hip or knee replacement w/o CC/MCC	63	121	52.1%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	59	628	9.4%	4.9
165 : Major chest procs w/o CC/MCC	46	105	43.8%	2.2
036 : Carotid artery stent procs w/o CC/MCC	45	54	83.3%	1.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	44	89	49.4%	2.6
164 : Major chest procs w CC	41	239	17.2%	4.0
253 : Other vascular procs w CC	40	338	11.8%	5.0
660 : Kidney and ureter procs for non-neoplasm w CC	38	245	15.5%	3.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	37	126	29.4%	2.5
467 : Revision of hip or knee replacement w CC	34	268	12.7%	4.2
026 : Craniotomy and endovascular intracranial procs w CC	33	108	30.6%	4.5
Top Surgical DRGs	2,735	6,789	40.3%	2.8
All Surgical DRGs	3,971	25,634	15.5%	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 Q2FY22
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	478	850	56.2%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	203	266	76.3%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	191	239	79.9%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	142	641	22.2%	2.7
039 : Extracranial procs w/o CC/MCC	100	133	75.2%	1.5
036 : Carotid artery stent procs w/o CC/MCC	76	92	82.6%	1.5
483 : Major joint or limb reattachment procs of upper extremities	52	90	57.8%	2.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	47	91	51.6%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	41	56	73.2%	1.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	36	382	9.4%	5.6
254 : Other vascular procs w/o CC/MCC	33	81	40.7%	2.3
244 : Permanent cardiac pacemaker implant w/o CC/MCC	32	105	30.5%	2.7
038 : Extracranial procs w CC	31	73	42.5%	3.5
035 : Carotid artery stent procs w CC	25	59	42.4%	3.2
462 : Bilateral or multiple major joint procs of lower extremity w/o MCC	24	34	70.6%	1.6
460 : Spinal fusion except cervical w/o MCC	22	116	19.0%	4.0
472 : Cervical spinal fusion w CC	22	79	27.8%	4.1
621 : OR procs for obesity w/o CC/MCC	21	41	51.2%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	21	72	29.2%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	20	67	29.9%	6.8
Top Surgical DRGs	1,617	3,567	45.3%	2.7
All Surgical DRGs	2,169	13,452	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 Q2FY22
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	82	172	47.7%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	40	116	34.5%	2.2
483 : Major joint or limb reattachment procs of upper extremities	27	43	62.8%	2.5
039 : Extracranial procs w/o CC/MCC	24	37	64.9%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	12	25	48.0%	2.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	11	17	64.7%	1.7
Top Surgical DRGs	196	410	47.8%	2.1
All Surgical DRGs	422	2,465	17.1%	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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