



Short-Term Hospital State-Level Surgical DRG Report

Q2FY23

A large, faint, light green outline of the word "REPORT" is visible in the background of the lower section of the page, positioned behind the horizontal line and the "Q2FY23" text.

**Discharges for most recent 4 quarters, ending Q2FY23
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
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	103	114	90.4%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	54	72	75.0%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	43	238	18.1%	2.9
468 : Revision of hip or knee replacement w/o CC/MCC	41	76	53.9%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	35	71	49.3%	4.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	28	123	22.8%	2.7
483 : Major joint or limb reattachment procs of upper extremities	26	43	60.5%	3.5
472 : Cervical spinal fusion w CC	20	80	25.0%	3.2
460 : Spinal fusion except cervical w/o MCC	15	94	16.0%	3.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	14	77	18.2%	3.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	13	101	12.9%	4.8
621 : OR procs for obesity w/o CC/MCC	13	16	81.3%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	12	20	60.0%	2.2
036 : Carotid artery stent procs w/o CC/MCC	12	16	75.0%	1.4
Top Surgical DRGs	429	1,141	37.6%	3.0
All Surgical DRGs	685	4,289	16.0%	8.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	757	838	90.3%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	410	497	82.5%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	400	979	40.9%	2.2
039 : Extracranial procs w/o CC/MCC	267	333	80.2%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	230	364	63.2%	2.6
460 : Spinal fusion except cervical w/o MCC	222	657	33.8%	2.8
468 : Revision of hip or knee replacement w/o CC/MCC	164	271	60.5%	1.8
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	157	795	19.7%	2.6
036 : Carotid artery stent procs w/o CC/MCC	127	142	89.4%	1.2
472 : Cervical spinal fusion w CC	125	268	46.6%	2.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	112	202	55.4%	2.6
473 : Cervical spinal fusion w/o CC/MCC	104	154	67.5%	1.8
483 : Major joint or limb reattachment procs of upper extremities	104	196	53.1%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	89	129	69.0%	1.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	89	398	22.4%	2.4
621 : OR procs for obesity w/o CC/MCC	82	111	73.9%	1.4
467 : Revision of hip or knee replacement w CC	74	307	24.1%	3.9
038 : Extracranial procs w CC	56	130	43.1%	2.9
254 : Other vascular procs w/o CC/MCC	53	135	39.3%	2.2
253 : Other vascular procs w CC	43	268	16.0%	5.4
Top Surgical DRGs	3,665	7,174	51.1%	2.3
All Surgical DRGs	5,296	26,966	19.6%	6.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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
274 : Percutaneous and other intracardiac procs w/o MCC	663	742	89.4%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	486	1,132	42.9%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	260	317	82.0%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	244	739	33.0%	2.1
039 : Extracranial procs w/o CC/MCC	213	262	81.3%	1.4
621 : OR procs for obesity w/o CC/MCC	181	235	77.0%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	174	240	72.5%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	171	280	61.1%	1.7
483 : Major joint or limb reattachment procs of upper extremities	141	215	65.6%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	115	154	74.7%	1.7
036 : Carotid artery stent procs w/o CC/MCC	113	137	82.5%	1.4
460 : Spinal fusion except cervical w/o MCC	85	303	28.1%	3.1
472 : Cervical spinal fusion w CC	61	145	42.1%	2.8
467 : Revision of hip or knee replacement w CC	59	234	25.2%	3.4
473 : Cervical spinal fusion w/o CC/MCC	55	88	62.5%	1.6
035 : Carotid artery stent procs w CC	48	76	63.2%	2.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	46	460	10.0%	4.7
038 : Extracranial procs w CC	45	89	50.6%	2.6
243 : Permanent cardiac pacemaker implant w CC	42	239	17.6%	3.1
620 : OR procs for obesity w CC	41	65	63.1%	1.4
Top Surgical DRGs	3,243	6,152	52.7%	2.2
All Surgical DRGs	4,473	20,681	21.6%	5.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Arizona, 65 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	1,345	1,474	91.2%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	718	945	76.0%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	568	1,290	44.0%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	283	1,045	27.1%	2.4
039 : Extracranial procs w/o CC/MCC	255	318	80.2%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	231	399	57.9%	1.7
483 : Major joint or limb reattachment procs of upper extremities	192	313	61.3%	2.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	182	273	66.7%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	164	390	42.1%	4.7
036 : Carotid artery stent procs w/o CC/MCC	163	193	84.5%	1.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	155	571	27.1%	2.4
460 : Spinal fusion except cervical w/o MCC	147	600	24.5%	3.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	112	210	53.3%	2.0
473 : Cervical spinal fusion w/o CC/MCC	106	179	59.2%	1.6
621 : OR procs for obesity w/o CC/MCC	87	117	74.4%	1.3
467 : Revision of hip or knee replacement w CC	79	412	19.2%	4.0
472 : Cervical spinal fusion w CC	77	305	25.2%	3.2
254 : Other vascular procs w/o CC/MCC	61	132	46.2%	2.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	61	192	31.8%	2.2
273 : Percutaneous and other intracardiac procs w MCC	57	174	32.8%	4.8
Top Surgical DRGs	5,043	9,532	52.9%	2.2
All Surgical DRGs	7,260	36,329	20.0%	5.3

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - California, 283 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	2,914	3,415	85.3%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	2,885	7,141	40.4%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	2,495	3,315	75.3%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	795	1,892	42.0%	5.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	763	3,210	23.8%	2.4
039 : Extracranial procs w/o CC/MCC	578	740	78.1%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	550	984	55.9%	1.9
483 : Major joint or limb reattachment procs of upper extremities	537	1,282	41.9%	2.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	378	605	62.5%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	372	708	52.5%	2.1
036 : Carotid artery stent procs w/o CC/MCC	354	471	75.2%	1.5
621 : OR procs for obesity w/o CC/MCC	346	514	67.3%	1.4
472 : Cervical spinal fusion w CC	302	1,257	24.0%	3.5
460 : Spinal fusion except cervical w/o MCC	301	2,315	13.0%	3.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	259	1,691	15.3%	2.9
038 : Extracranial procs w CC	217	451	48.1%	2.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	206	2,775	7.4%	5.3
467 : Revision of hip or knee replacement w CC	193	1,283	15.0%	4.3
473 : Cervical spinal fusion w/o CC/MCC	191	481	39.7%	2.2
273 : Percutaneous and other intracardiac procs w MCC	175	589	29.7%	5.7
Top Surgical DRGs	14,811	35,119	42.2%	2.7
All Surgical DRGs	22,594	142,417	15.9%	6.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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	783	872	89.8%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	348	426	81.7%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	208	336	61.9%	2.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	206	664	31.0%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	175	292	59.9%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	175	493	35.5%	2.3
483 : Major joint or limb reattachment procs of upper extremities	125	260	48.1%	2.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	113	596	19.0%	2.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	95	138	68.8%	1.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	94	154	61.0%	2.0
460 : Spinal fusion except cervical w/o MCC	83	425	19.5%	3.2
039 : Extracranial procs w/o CC/MCC	77	95	81.1%	1.4
467 : Revision of hip or knee replacement w CC	76	340	22.4%	3.6
472 : Cervical spinal fusion w CC	70	259	27.0%	3.0
621 : OR procs for obesity w/o CC/MCC	70	110	63.6%	1.5
036 : Carotid artery stent procs w/o CC/MCC	63	87	72.4%	1.5
473 : Cervical spinal fusion w/o CC/MCC	57	120	47.5%	1.9
454 : Combined anterior and posterior spinal fusion w CC	46	738	6.2%	4.1
038 : Extracranial procs w CC	44	81	54.3%	3.0
253 : Other vascular procs w CC	38	179	21.2%	4.2
Top Surgical DRGs	2,946	6,665	44.2%	2.4
All Surgical DRGs	4,371	22,744	19.2%	5.7

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	387	695	55.7%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	257	344	74.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	212	271	78.2%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	106	254	41.7%	4.7
483 : Major joint or limb reattachment procs of upper extremities	104	150	69.3%	1.8
468 : Revision of hip or knee replacement w/o CC/MCC	81	145	55.9%	1.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	70	384	18.2%	2.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	61	95	64.2%	1.8
039 : Extracranial procs w/o CC/MCC	60	74	81.1%	1.4
036 : Carotid artery stent procs w/o CC/MCC	54	63	85.7%	1.4
460 : Spinal fusion except cervical w/o MCC	50	355	14.1%	3.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	41	93	44.1%	1.9
621 : OR procs for obesity w/o CC/MCC	37	62	59.7%	1.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	32	61	52.5%	2.0
660 : Kidney and ureter procs for non-neoplasm w CC	31	162	19.1%	3.5
243 : Permanent cardiac pacemaker implant w CC	28	209	13.4%	3.3
254 : Other vascular procs w/o CC/MCC	28	64	43.8%	2.2
472 : Cervical spinal fusion w CC	27	115	23.5%	3.5
467 : Revision of hip or knee replacement w CC	26	172	15.1%	4.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	25	160	15.6%	2.5
Top Surgical DRGs	1,717	3,928	43.7%	2.5
All Surgical DRGs	2,556	16,333	15.6%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	112	143	78.3%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	107	240	44.6%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	43	135	31.9%	2.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	39	124	31.5%	3.0
468 : Revision of hip or knee replacement w/o CC/MCC	23	71	32.4%	2.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	22	43	51.2%	2.3
036 : Carotid artery stent procs w/o CC/MCC	21	27	77.8%	1.4
472 : Cervical spinal fusion w CC	21	100	21.0%	4.3
483 : Major joint or limb reattachment procs of upper extremities	17	32	53.1%	3.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	16	35	45.7%	3.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	14	133	10.5%	5.3
460 : Spinal fusion except cervical w/o MCC	14	299	4.7%	4.4
039 : Extracranial procs w/o CC/MCC	12	17	70.6%	1.7
165 : Major chest procs w/o CC/MCC	12	42	28.6%	3.0
254 : Other vascular procs w/o CC/MCC	12	32	37.5%	3.3
035 : Carotid artery stent procs w CC	11	24	45.8%	3.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	11	99	11.1%	5.1
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	11	31	35.5%	1.7
Top Surgical DRGs	518	1,627	31.8%	3.3
All Surgical DRGs	893	7,273	12.3%	8.9

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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
274 : Percutaneous and other intracardiac procs w/o MCC	168	183	91.8%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	141	181	77.9%	1.6
468 : Revision of hip or knee replacement w/o CC/MCC	57	68	83.8%	1.4
039 : Extracranial procs w/o CC/MCC	53	66	80.3%	1.5
036 : Carotid artery stent procs w/o CC/MCC	42	49	85.7%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	35	227	15.4%	2.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	34	51	66.7%	2.2
460 : Spinal fusion except cervical w/o MCC	30	134	22.4%	3.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	27	81	33.3%	2.4
467 : Revision of hip or knee replacement w CC	26	75	34.7%	4.6
621 : OR procs for obesity w/o CC/MCC	24	32	75.0%	1.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	19	64	29.7%	7.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	17	77	22.1%	3.0
254 : Other vascular procs w/o CC/MCC	16	27	59.3%	1.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	15	28	53.6%	2.7
038 : Extracranial procs w CC	15	39	38.5%	4.1
165 : Major chest procs w/o CC/MCC	15	44	34.1%	2.1
472 : Cervical spinal fusion w CC	13	50	26.0%	4.9
473 : Cervical spinal fusion w/o CC/MCC	13	31	41.9%	2.1
164 : Major chest procs w CC	12	73	16.4%	4.5
Top Surgical DRGs	772	1,580	48.9%	2.8
All Surgical DRGs	1,059	6,675	15.9%	7.7

**Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023**

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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	3,791	4,708	80.5%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,637	2,359	69.4%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	1,484	4,062	36.5%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	783	3,657	21.4%	2.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	736	1,631	45.1%	4.4
039 : Extracranial procs w/o CC/MCC	726	893	81.3%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	525	869	60.4%	1.7
483 : Major joint or limb reattachment procs of upper extremities	524	1,173	44.7%	2.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	473	752	62.9%	2.2
036 : Carotid artery stent procs w/o CC/MCC	451	595	75.8%	1.5
460 : Spinal fusion except cervical w/o MCC	398	2,106	18.9%	3.4
472 : Cervical spinal fusion w CC	375	1,044	35.9%	2.9
621 : OR procs for obesity w/o CC/MCC	320	463	69.1%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	315	481	65.5%	1.8
467 : Revision of hip or knee replacement w CC	296	1,426	20.8%	4.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	272	1,212	22.4%	2.7
473 : Cervical spinal fusion w/o CC/MCC	253	486	52.1%	2.0
038 : Extracranial procs w CC	235	520	45.2%	3.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	212	1,000	21.2%	2.4
254 : Other vascular procs w/o CC/MCC	202	423	47.8%	2.2
Top Surgical DRGs	14,008	29,860	46.9%	2.4
All Surgical DRGs	20,830	129,834	16.0%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	1,133	1,311	86.4%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	482	600	80.3%	1.4
039 : Extracranial procs w/o CC/MCC	356	418	85.2%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	247	1,264	19.5%	2.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	247	495	49.9%	4.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	220	735	29.9%	2.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	165	235	70.2%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	164	282	58.2%	1.9
621 : OR procs for obesity w/o CC/MCC	139	173	80.3%	1.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	130	486	26.7%	2.7
483 : Major joint or limb reattachment procs of upper extremities	127	250	50.8%	2.6
460 : Spinal fusion except cervical w/o MCC	125	667	18.7%	3.5
038 : Extracranial procs w CC	121	242	50.0%	3.0
473 : Cervical spinal fusion w/o CC/MCC	121	213	56.8%	1.9
036 : Carotid artery stent procs w/o CC/MCC	118	137	86.1%	1.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	82	150	54.7%	2.6
472 : Cervical spinal fusion w CC	81	307	26.4%	3.8
254 : Other vascular procs w/o CC/MCC	76	186	40.9%	2.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	65	1,041	6.2%	5.6
253 : Other vascular procs w CC	60	365	16.4%	5.1
Top Surgical DRGs	4,259	9,557	44.6%	2.9
All Surgical DRGs	6,426	41,504	15.5%	7.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.**
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

12

Top Surgical DRGs for Same- and 1-Day Stays - Guam, 3 Hospitals

**Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths),
07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient
admission),
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission)
with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023**

**Discharges for most recent 4 quarters, ending Q2FY23
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	89	104	85.6%	1.2
274 : Percutaneous and other intracardiac procs w/o MCC	42	49	85.7%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	25	118	21.2%	2.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	17	26	65.4%	2.0
039 : Extracranial procs w/o CC/MCC	16	29	55.2%	1.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	13	20	65.0%	1.7
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	12	14	85.7%	1.1
Top Surgical DRGs	214	360	59.4%	1.9
All Surgical DRGs	494	4,356	11.3%	8.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	728	1,279	56.9%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	411	491	83.7%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	299	335	89.3%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	235	598	39.3%	2.1
483 : Major joint or limb reattachment procs of upper extremities	214	333	64.3%	2.1
039 : Extracranial procs w/o CC/MCC	152	166	91.6%	1.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	121	147	82.3%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	100	165	60.6%	1.8
460 : Spinal fusion except cervical w/o MCC	88	403	21.8%	3.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	81	191	42.4%	3.3
036 : Carotid artery stent procs w/o CC/MCC	69	77	89.6%	1.2
038 : Extracranial procs w CC	62	90	68.9%	1.7
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	51	375	13.6%	4.6
467 : Revision of hip or knee replacement w CC	51	199	25.6%	4.4
243 : Permanent cardiac pacemaker implant w CC	41	182	22.5%	3.1
254 : Other vascular procs w/o CC/MCC	40	77	51.9%	1.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	38	72	52.8%	2.0
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	34	58	58.6%	1.6
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	34	74	45.9%	2.0
621 : OR procs for obesity w/o CC/MCC	32	41	78.0%	1.3
Top Surgical DRGs	2,881	5,353	53.8%	2.2
All Surgical DRGs	3,914	17,029	23.0%	5.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	355	372	95.4%	1.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	201	237	84.8%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	99	312	31.7%	2.0
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	86	174	49.4%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	65	97	67.0%	1.8
483 : Major joint or limb reattachment procs of upper extremities	48	81	59.3%	2.4
039 : Extracranial procs w/o CC/MCC	46	49	93.9%	1.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	41	47	87.2%	1.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	41	210	19.5%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	40	73	54.8%	4.1
621 : OR procs for obesity w/o CC/MCC	39	44	88.6%	1.1
467 : Revision of hip or knee replacement w CC	36	96	37.5%	3.4
472 : Cervical spinal fusion w CC	32	82	39.0%	3.0
473 : Cervical spinal fusion w/o CC/MCC	30	47	63.8%	1.5
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	29	220	13.2%	4.1
460 : Spinal fusion except cervical w/o MCC	29	136	21.3%	2.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	28	48	58.3%	1.7
038 : Extracranial procs w CC	25	43	58.1%	2.3
454 : Combined anterior and posterior spinal fusion w CC	24	202	11.9%	3.2
036 : Carotid artery stent procs w/o CC/MCC	21	23	91.3%	1.1
Top Surgical DRGs	1,315	2,593	50.7%	2.2
All Surgical DRGs	1,894	7,808	24.3%	4.9

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Illinois, 119 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	1,158	1,533	75.5%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	1,122	3,117	36.0%	2.3
274 : Percutaneous and other intracardiac procs w/o MCC	1,070	1,300	82.3%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	444	1,850	24.0%	2.5
039 : Extracranial procs w/o CC/MCC	373	449	83.1%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	329	468	70.3%	1.9
483 : Major joint or limb reattachment procs of upper extremities	291	533	54.6%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	239	406	58.9%	1.9
460 : Spinal fusion except cervical w/o MCC	200	1,099	18.2%	3.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	192	534	36.0%	5.4
036 : Carotid artery stent procs w/o CC/MCC	162	204	79.4%	1.4
038 : Extracranial procs w CC	156	282	55.3%	2.5
467 : Revision of hip or knee replacement w CC	148	709	20.9%	3.9
621 : OR procs for obesity w/o CC/MCC	138	199	69.3%	1.4
165 : Major chest procs w/o CC/MCC	131	286	45.8%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	110	219	50.2%	2.4
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	105	326	32.2%	2.2
472 : Cervical spinal fusion w CC	103	460	22.4%	3.5
164 : Major chest procs w CC	101	570	17.7%	4.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	96	347	27.7%	2.4
Top Surgical DRGs	6,668	14,891	44.8%	2.4
All Surgical DRGs	10,150	62,735	16.2%	6.3

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	1,016	1,149	88.4%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	1,005	1,871	53.7%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	559	729	76.7%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	372	1,321	28.2%	2.3
039 : Extracranial procs w/o CC/MCC	357	402	88.8%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	231	354	65.3%	1.7
483 : Major joint or limb reattachment procs of upper extremities	227	359	63.2%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	218	388	56.2%	3.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	210	293	71.7%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	134	510	26.3%	2.5
036 : Carotid artery stent procs w/o CC/MCC	132	161	82.0%	1.3
460 : Spinal fusion except cervical w/o MCC	131	883	14.8%	3.5
467 : Revision of hip or knee replacement w CC	128	432	29.6%	3.3
038 : Extracranial procs w CC	110	195	56.4%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	77	122	63.1%	1.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	77	221	34.8%	2.1
660 : Kidney and ureter procs for non-neoplasm w CC	74	423	17.5%	3.5
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	73	889	8.2%	4.9
473 : Cervical spinal fusion w/o CC/MCC	73	129	56.6%	2.0
035 : Carotid artery stent procs w CC	68	122	55.7%	2.4
Top Surgical DRGs	5,272	10,953	48.1%	2.4
All Surgical DRGs	7,818	38,902	20.1%	5.5

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	822	964	85.3%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	338	1,894	17.8%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	229	337	68.0%	1.6
039 : Extracranial procs w/o CC/MCC	219	257	85.2%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	142	324	43.8%	3.8
483 : Major joint or limb reattachment procs of upper extremities	140	369	37.9%	2.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	125	559	22.4%	2.4
468 : Revision of hip or knee replacement w/o CC/MCC	93	207	44.9%	1.9
621 : OR procs for obesity w/o CC/MCC	92	123	74.8%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	90	116	77.6%	1.5
473 : Cervical spinal fusion w/o CC/MCC	62	101	61.4%	1.7
038 : Extracranial procs w CC	57	98	58.2%	1.9
460 : Spinal fusion except cervical w/o MCC	55	527	10.4%	3.2
331 : Major small and large bowel procs w/o CC/MCC	49	310	15.8%	3.0
467 : Revision of hip or knee replacement w CC	46	307	15.0%	3.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	45	87	51.7%	2.2
036 : Carotid artery stent procs w/o CC/MCC	45	46	97.8%	1.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	43	452	9.5%	4.5
472 : Cervical spinal fusion w CC	42	172	24.4%	3.4
517 : Other musculoskeletal system and connective tissue OR procs w/o CC/MCC	40	148	27.0%	2.7
Top Surgical DRGs	2,774	7,398	37.5%	2.4
All Surgical DRGs	4,001	22,392	17.9%	5.2

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	385	462	83.3%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	335	409	81.9%	1.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	248	913	27.2%	2.4
039 : Extracranial procs w/o CC/MCC	188	220	85.5%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	181	522	34.7%	2.7
036 : Carotid artery stent procs w/o CC/MCC	161	187	86.1%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	141	198	71.2%	1.7
468 : Revision of hip or knee replacement w/o CC/MCC	138	222	62.2%	1.9
035 : Carotid artery stent procs w CC	105	170	61.8%	2.4
621 : OR procs for obesity w/o CC/MCC	92	116	79.3%	1.3
483 : Major joint or limb reattachment procs of upper extremities	79	179	44.1%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	72	100	72.0%	1.9
266 : Endovascular cardiac valve replacement and supplement procs w MCC	62	143	43.4%	5.8
038 : Extracranial procs w CC	57	118	48.3%	3.7
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	57	654	8.7%	5.3
472 : Cervical spinal fusion w CC	46	145	31.7%	3.3
253 : Other vascular procs w CC	44	309	14.2%	5.3
254 : Other vascular procs w/o CC/MCC	40	96	41.7%	2.1
467 : Revision of hip or knee replacement w CC	39	267	14.6%	4.5
460 : Spinal fusion except cervical w/o MCC	32	300	10.7%	4.1
Top Surgical DRGs	2,502	5,730	43.7%	2.9
All Surgical DRGs	3,728	24,630	15.1%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Louisiana, 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
274 : Percutaneous and other intracardiac procs w/o MCC	420	476	88.2%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	346	456	75.9%	1.4
039 : Extracranial procs w/o CC/MCC	251	329	76.3%	1.5
473 : Cervical spinal fusion w/o CC/MCC	179	245	73.1%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	171	743	23.0%	2.4
621 : OR procs for obesity w/o CC/MCC	121	159	76.1%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	117	222	52.7%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	113	219	51.6%	3.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	111	628	17.7%	2.6
472 : Cervical spinal fusion w CC	105	258	40.7%	3.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	80	139	57.6%	2.4
483 : Major joint or limb reattachment procs of upper extremities	77	169	45.6%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	75	125	60.0%	2.0
036 : Carotid artery stent procs w/o CC/MCC	68	88	77.3%	1.4
460 : Spinal fusion except cervical w/o MCC	67	399	16.8%	3.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	60	537	11.2%	2.5
038 : Extracranial procs w CC	56	135	41.5%	3.1
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	43	116	37.1%	2.2
489 : Knee procs w/o PDx of infection w/o CC/MCC	39	49	79.6%	1.5
033 : Ventricular shunt procs w/o CC/MCC	31	44	70.5%	1.6
Top Surgical DRGs	2,530	5,536	45.7%	2.2
All Surgical DRGs	3,807	22,898	16.6%	5.9

**Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
*Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023**

**Discharges for most recent 4 quarters, ending Q2FY23
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	1,774	4,425	40.1%	2.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	746	1,137	65.6%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	610	768	79.4%	1.7
039 : Extracranial procs w/o CC/MCC	253	347	72.9%	1.5
483 : Major joint or limb reattachment procs of upper extremities	248	537	46.2%	2.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	223	1,274	17.5%	2.9
468 : Revision of hip or knee replacement w/o CC/MCC	158	331	47.7%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	157	575	27.3%	7.5
621 : OR procs for obesity w/o CC/MCC	156	222	70.3%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	154	281	54.8%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	122	254	48.0%	2.0
165 : Major chest procs w/o CC/MCC	114	362	31.5%	2.2
036 : Carotid artery stent procs w/o CC/MCC	111	141	78.7%	1.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	109	299	36.5%	2.2
038 : Extracranial procs w CC	108	244	44.3%	2.7
164 : Major chest procs w CC	82	686	12.0%	4.2
708 : Major male pelvic procs w/o CC/MCC	82	127	64.6%	1.5
460 : Spinal fusion except cervical w/o MCC	80	933	8.6%	3.7
660 : Kidney and ureter procs for non-neoplasm w CC	76	442	17.2%	3.7
026 : Craniotomy and endovascular intracranial procs w CC	75	231	32.5%	3.8
Top Surgical DRGs	5,438	13,616	39.9%	2.6
All Surgical DRGs	8,210	50,323	16.3%	6.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.**
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Maryland, 44 Hospitals

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	533	749	71.2%	1.8
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	422	972	43.4%	2.4
039 : Extracranial procs w/o CC/MCC	258	301	85.7%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	245	298	82.2%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	199	851	23.4%	2.6
483 : Major joint or limb reattachment procs of upper extremities	197	395	49.9%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	166	280	59.3%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	150	209	71.8%	1.9
036 : Carotid artery stent procs w/o CC/MCC	143	167	85.6%	1.2
460 : Spinal fusion except cervical w/o MCC	131	940	13.9%	3.9
621 : OR procs for obesity w/o CC/MCC	110	155	71.0%	1.4
038 : Extracranial procs w CC	104	186	55.9%	2.6
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	67	144	46.5%	2.4
472 : Cervical spinal fusion w CC	61	294	20.7%	4.3
467 : Revision of hip or knee replacement w CC	59	282	20.9%	4.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	56	614	9.1%	5.6
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	55	297	18.5%	3.1
035 : Carotid artery stent procs w CC	54	100	54.0%	3.1
243 : Permanent cardiac pacemaker implant w CC	52	331	15.7%	3.8
473 : Cervical spinal fusion w/o CC/MCC	51	112	45.5%	2.1
Top Surgical DRGs	3,113	7,677	40.5%	2.9
All Surgical DRGs	5,095	33,150	15.4%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	79	116	68.1%	1.7
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	58	109	53.2%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	54	75	72.0%	1.9
483 : Major joint or limb reattachment procs of upper extremities	47	63	74.6%	1.8
039 : Extracranial procs w/o CC/MCC	32	37	86.5%	1.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	32	215	14.9%	2.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	28	49	57.1%	2.6
621 : OR procs for obesity w/o CC/MCC	28	31	90.3%	1.1
468 : Revision of hip or knee replacement w/o CC/MCC	20	40	50.0%	1.9
036 : Carotid artery stent procs w/o CC/MCC	18	21	85.7%	1.3
254 : Other vascular procs w/o CC/MCC	14	31	45.2%	1.9
620 : OR procs for obesity w CC	13	18	72.2%	1.4
658 : Kidney and ureter procs for neoplasm w/o CC/MCC	12	17	70.6%	1.6
481 : Hip and femur procs except major joint w CC	11	245	4.5%	5.0
Top Surgical DRGs	446	1,067	41.8%	2.7
All Surgical DRGs	816	4,967	16.4%	7.0

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Michigan, 92 Hospitals

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	1,166	1,331	87.6%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	828	1,220	67.9%	1.6
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	612	1,164	52.6%	2.0
039 : Extracranial procs w/o CC/MCC	311	373	83.4%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	235	1,361	17.3%	2.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	211	322	65.5%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	201	323	62.2%	1.9
483 : Major joint or limb reattachment procs of upper extremities	180	365	49.3%	2.5
036 : Carotid artery stent procs w/o CC/MCC	152	185	82.2%	1.4
621 : OR procs for obesity w/o CC/MCC	148	225	65.8%	1.4
460 : Spinal fusion except cervical w/o MCC	146	919	15.9%	3.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	140	504	27.8%	6.1
038 : Extracranial procs w CC	127	239	53.1%	3.2
467 : Revision of hip or knee replacement w CC	111	481	23.1%	4.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	96	154	62.3%	2.0
472 : Cervical spinal fusion w CC	96	395	24.3%	3.7
473 : Cervical spinal fusion w/o CC/MCC	91	192	47.4%	2.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	78	221	35.3%	2.1
254 : Other vascular procs w/o CC/MCC	76	213	35.7%	2.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	65	317	20.5%	2.8
Top Surgical DRGs	5,070	10,504	48.3%	2.5
All Surgical DRGs	7,274	43,553	16.7%	6.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	764	1,389	55.0%	2.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	730	991	73.7%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	501	614	81.6%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	207	844	24.5%	2.3
483 : Major joint or limb reattachment procs of upper extremities	173	314	55.1%	2.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	136	367	37.1%	5.4
467 : Revision of hip or knee replacement w CC	132	495	26.7%	3.9
468 : Revision of hip or knee replacement w/o CC/MCC	128	211	60.7%	1.7
039 : Extracranial procs w/o CC/MCC	127	163	77.9%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	116	175	66.3%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	99	182	54.4%	2.5
038 : Extracranial procs w CC	80	142	56.3%	2.4
026 : Craniotomy and endovascular intracranial procs w CC	57	151	37.7%	3.6
165 : Major chest procs w/o CC/MCC	55	132	41.7%	2.2
164 : Major chest procs w CC	54	342	15.8%	4.1
331 : Major small and large bowel procs w/o CC/MCC	52	253	20.6%	2.9
472 : Cervical spinal fusion w CC	52	222	23.4%	3.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	50	603	8.3%	5.0
621 : OR procs for obesity w/o CC/MCC	40	55	72.7%	1.3
660 : Kidney and ureter procs for non-neoplasm w CC	40	219	18.3%	3.3
Top Surgical DRGs	3,593	7,864	45.7%	2.7
All Surgical DRGs	5,354	28,534	18.8%	6.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	718	797	90.1%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	659	835	78.9%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	425	1,093	38.9%	2.4
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	243	1,071	22.7%	2.5
039 : Extracranial procs w/o CC/MCC	233	291	80.1%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	196	309	63.4%	2.1
468 : Revision of hip or knee replacement w/o CC/MCC	182	292	62.3%	1.8
266 : Endovascular cardiac valve replacement and supplement procs w MCC	173	378	45.8%	4.6
483 : Major joint or limb reattachment procs of upper extremities	153	366	41.8%	2.6
621 : OR procs for obesity w/o CC/MCC	153	195	78.5%	1.3
036 : Carotid artery stent procs w/o CC/MCC	131	168	78.0%	1.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	115	412	27.9%	2.6
038 : Extracranial procs w CC	97	176	55.1%	2.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	96	162	59.3%	1.9
460 : Spinal fusion except cervical w/o MCC	94	565	16.6%	3.6
467 : Revision of hip or knee replacement w CC	90	379	23.7%	4.0
472 : Cervical spinal fusion w CC	74	248	29.8%	3.4
473 : Cervical spinal fusion w/o CC/MCC	73	136	53.7%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	69	953	7.2%	5.5
331 : Major small and large bowel procs w/o CC/MCC	60	429	14.0%	3.2
Top Surgical DRGs	4,034	9,255	43.6%	2.7
All Surgical DRGs	6,150	36,588	16.8%	6.3

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	553	638	86.7%	1.4
039 : Extracranial procs w/o CC/MCC	222	254	87.4%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	204	229	89.1%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	185	831	22.3%	2.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	146	579	25.2%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	121	206	58.7%	3.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	111	123	90.2%	1.3
621 : OR procs for obesity w/o CC/MCC	88	133	66.2%	1.4
460 : Spinal fusion except cervical w/o MCC	70	225	31.1%	3.4
036 : Carotid artery stent procs w/o CC/MCC	68	70	97.1%	1.0
468 : Revision of hip or knee replacement w/o CC/MCC	66	116	56.9%	1.8
038 : Extracranial procs w CC	64	116	55.2%	2.9
483 : Major joint or limb reattachment procs of upper extremities	57	129	44.2%	2.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	47	117	40.2%	2.3
473 : Cervical spinal fusion w/o CC/MCC	46	76	60.5%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	42	453	9.3%	4.9
472 : Cervical spinal fusion w CC	42	109	38.5%	4.1
467 : Revision of hip or knee replacement w CC	34	154	22.1%	3.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	29	48	60.4%	1.9
035 : Carotid artery stent procs w CC	29	40	72.5%	2.0
Top Surgical DRGs	2,224	4,646	47.9%	2.5
All Surgical DRGs	3,125	18,369	17.0%	6.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	276	292	94.5%	1.1
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	136	298	45.6%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	128	153	83.7%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	104	164	63.4%	2.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	99	311	31.8%	2.1
460 : Spinal fusion except cervical w/o MCC	95	279	34.1%	2.8
468 : Revision of hip or knee replacement w/o CC/MCC	75	111	67.6%	1.6
039 : Extracranial procs w/o CC/MCC	71	88	80.7%	1.3
483 : Major joint or limb reattachment procs of upper extremities	69	104	66.3%	1.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	41	68	60.3%	1.7
473 : Cervical spinal fusion w/o CC/MCC	31	56	55.4%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	30	44	68.2%	1.7
467 : Revision of hip or knee replacement w CC	29	103	28.2%	3.9
331 : Major small and large bowel procs w/o CC/MCC	28	120	23.3%	2.9
038 : Extracranial procs w CC	26	51	51.0%	2.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	26	190	13.7%	4.3
472 : Cervical spinal fusion w CC	26	71	36.6%	3.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	25	107	23.4%	2.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	24	49	49.0%	1.8
244 : Permanent cardiac pacemaker implant w/o CC/MCC	22	50	44.0%	2.0
Top Surgical DRGs	1,361	2,709	50.2%	2.3
All Surgical DRGs	2,018	8,069	25.0%	5.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - North Carolina, 84 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	1,109	2,545	43.6%	2.2
274 : Percutaneous and other intracardiac procs w/o MCC	894	1,156	77.3%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	733	1,072	68.4%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	353	1,518	23.3%	2.5
468 : Revision of hip or knee replacement w/o CC/MCC	330	555	59.5%	1.9
039 : Extracranial procs w/o CC/MCC	307	374	82.1%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	272	415	65.5%	2.2
483 : Major joint or limb reattachment procs of upper extremities	208	432	48.1%	2.7
036 : Carotid artery stent procs w/o CC/MCC	194	236	82.2%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	163	275	59.3%	2.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	151	763	19.8%	2.9
621 : OR procs for obesity w/o CC/MCC	149	191	78.0%	1.3
460 : Spinal fusion except cervical w/o MCC	137	940	14.6%	3.6
473 : Cervical spinal fusion w/o CC/MCC	137	243	56.4%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	133	395	33.7%	5.4
472 : Cervical spinal fusion w CC	116	403	28.8%	3.4
038 : Extracranial procs w CC	108	196	55.1%	2.9
467 : Revision of hip or knee replacement w CC	102	559	18.2%	4.7
035 : Carotid artery stent procs w CC	90	164	54.9%	2.8
331 : Major small and large bowel procs w/o CC/MCC	82	712	11.5%	3.3
Top Surgical DRGs	5,768	13,144	43.9%	2.5
All Surgical DRGs	8,466	52,044	16.3%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - North Dakota, 7 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	202	263	76.8%	1.3
274 : Percutaneous and other intracardiac procs w/o MCC	189	199	95.0%	1.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	71	210	33.8%	2.1
039 : Extracranial procs w/o CC/MCC	68	82	82.9%	1.3
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	45	63	71.4%	2.6
038 : Extracranial procs w CC	44	68	64.7%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	32	48	66.7%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	30	96	31.3%	4.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	28	179	15.6%	5.5
467 : Revision of hip or knee replacement w CC	27	93	29.0%	3.5
036 : Carotid artery stent procs w/o CC/MCC	22	29	75.9%	1.5
035 : Carotid artery stent procs w CC	17	26	65.4%	1.7
253 : Other vascular procs w CC	17	88	19.3%	4.2
254 : Other vascular procs w/o CC/MCC	13	25	52.0%	2.0
229 : Other cardiothoracic procs w/o MCC	11	13	84.6%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	11	46	23.9%	3.1
483 : Major joint or limb reattachment procs of upper extremities	11	21	52.4%	3.1
660 : Kidney and ureter procs for non-neoplasm w CC	11	58	19.0%	3.1
Top Surgical DRGs	849	1,607	52.8%	2.6
All Surgical DRGs	1,130	6,012	18.8%	6.2

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	980	1,011	96.9%	1.1
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	291	455	64.0%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	202	535	37.8%	2.4
039 : Extracranial procs w/o CC/MCC	133	154	86.4%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	96	186	51.6%	3.4
468 : Revision of hip or knee replacement w/o CC/MCC	96	152	63.2%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	94	335	28.1%	2.1
038 : Extracranial procs w CC	76	109	69.7%	2.0
229 : Other cardiothoracic procs w/o MCC	73	100	73.0%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	71	108	65.7%	1.8
036 : Carotid artery stent procs w/o CC/MCC	55	66	83.3%	1.3
467 : Revision of hip or knee replacement w CC	48	199	24.1%	4.6
483 : Major joint or limb reattachment procs of upper extremities	48	106	45.3%	2.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	46	77	59.7%	2.3
254 : Other vascular procs w/o CC/MCC	42	71	59.2%	1.8
460 : Spinal fusion except cervical w/o MCC	36	261	13.8%	3.0
621 : OR procs for obesity w/o CC/MCC	29	46	63.0%	1.4
035 : Carotid artery stent procs w CC	27	53	50.9%	2.7
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	25	229	10.9%	4.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	25	41	61.0%	1.6
Top Surgical DRGs	2,493	4,294	58.1%	2.1
All Surgical DRGs	3,283	14,541	22.6%	5.6

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	260	349	74.5%	1.5
274 : Percutaneous and other intracardiac procs w/o MCC	195	227	85.9%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	76	348	21.8%	2.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	76	172	44.2%	2.5
039 : Extracranial procs w/o CC/MCC	59	82	72.0%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	45	63	71.4%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	41	60	68.3%	1.6
467 : Revision of hip or knee replacement w CC	39	130	30.0%	3.4
621 : OR procs for obesity w/o CC/MCC	39	60	65.0%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	38	135	28.1%	5.9
036 : Carotid artery stent procs w/o CC/MCC	37	44	84.1%	1.3
165 : Major chest procs w/o CC/MCC	29	56	51.8%	1.9
254 : Other vascular procs w/o CC/MCC	21	43	48.8%	2.0
483 : Major joint or limb reattachment procs of upper extremities	21	56	37.5%	2.8
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	19	31	61.3%	1.8
164 : Major chest procs w CC	19	102	18.6%	3.8
035 : Carotid artery stent procs w CC	17	34	50.0%	2.3
038 : Extracranial procs w CC	17	33	51.5%	2.4
024 : Craniotomy w major device implant or acute complex cns PDx w/o MCC	16	25	64.0%	2.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	16	34	47.1%	1.8
Top Surgical DRGs	1,080	2,084	51.8%	2.3
All Surgical DRGs	1,634	8,602	19.0%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	929	1,340	69.3%	1.8
274 : Percutaneous and other intracardiac procs w/o MCC	666	829	80.3%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	644	1,278	50.4%	1.9
039 : Extracranial procs w/o CC/MCC	231	295	78.3%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	208	1,230	16.9%	3.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	149	244	61.1%	2.5
621 : OR procs for obesity w/o CC/MCC	145	210	69.0%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	135	213	63.4%	1.8
038 : Extracranial procs w CC	96	193	49.7%	3.0
036 : Carotid artery stent procs w/o CC/MCC	91	126	72.2%	1.5
483 : Major joint or limb reattachment procs of upper extremities	86	200	43.0%	3.4
165 : Major chest procs w/o CC/MCC	77	199	38.7%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	76	399	19.0%	7.9
460 : Spinal fusion except cervical w/o MCC	75	485	15.5%	3.7
467 : Revision of hip or knee replacement w CC	75	380	19.7%	4.5
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	67	1,023	6.5%	6.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	64	249	25.7%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	60	138	43.5%	2.7
254 : Other vascular procs w/o CC/MCC	54	125	43.2%	2.3
620 : OR procs for obesity w CC	50	81	61.7%	1.6
Top Surgical DRGs	3,978	9,237	43.1%	3.0
All Surgical DRGs	5,929	42,645	13.9%	7.2

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	143	204	70.1%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	76	96	79.2%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	59	261	22.6%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	35	57	61.4%	1.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	34	47	72.3%	1.7
039 : Extracranial procs w/o CC/MCC	29	38	76.3%	1.5
483 : Major joint or limb reattachment procs of upper extremities	29	39	74.4%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	28	35	80.0%	1.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	23	185	12.4%	4.7
460 : Spinal fusion except cervical w/o MCC	22	98	22.4%	3.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	17	49	34.7%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	16	42	38.1%	4.1
036 : Carotid artery stent procs w/o CC/MCC	13	16	81.3%	1.2
467 : Revision of hip or knee replacement w CC	13	64	20.3%	4.3
035 : Carotid artery stent procs w CC	12	19	63.2%	2.8
331 : Major small and large bowel procs w/o CC/MCC	12	89	13.5%	3.0
621 : OR procs for obesity w/o CC/MCC	12	22	54.5%	1.5
Top Surgical DRGs	573	1,361	42.1%	2.6
All Surgical DRGs	863	6,531	13.2%	6.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	193	264	73.1%	1.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	115	195	59.0%	4.3
274 : Percutaneous and other intracardiac procs w/o MCC	107	147	72.8%	1.6
039 : Extracranial procs w/o CC/MCC	85	112	75.9%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	71	375	18.9%	2.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	66	418	15.8%	2.7
468 : Revision of hip or knee replacement w/o CC/MCC	62	111	55.9%	1.9
483 : Major joint or limb reattachment procs of upper extremities	58	106	54.7%	2.9
621 : OR procs for obesity w/o CC/MCC	52	67	77.6%	1.3
472 : Cervical spinal fusion w CC	51	151	33.8%	3.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	47	81	58.0%	2.7
473 : Cervical spinal fusion w/o CC/MCC	43	65	66.2%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	37	178	20.8%	3.0
460 : Spinal fusion except cervical w/o MCC	31	169	18.3%	3.6
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	28	425	6.6%	5.4
244 : Permanent cardiac pacemaker implant w/o CC/MCC	26	79	32.9%	2.2
467 : Revision of hip or knee replacement w CC	26	144	18.1%	4.2
331 : Major small and large bowel procs w/o CC/MCC	22	150	14.7%	2.9
660 : Kidney and ureter procs for non-neoplasm w CC	22	115	19.1%	3.5
038 : Extracranial procs w CC	20	54	37.0%	3.4
Top Surgical DRGs	1,162	3,406	34.1%	3.1
All Surgical DRGs	1,847	13,624	13.6%	7.3

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - New York, 134 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	2,478	6,837	36.2%	2.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,988	2,953	67.3%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	1,859	2,377	78.2%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	890	2,855	31.2%	2.6
483 : Major joint or limb reattachment procs of upper extremities	503	874	57.6%	2.1
039 : Extracranial procs w/o CC/MCC	451	562	80.2%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	389	1,275	30.5%	5.8
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	337	505	66.7%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	330	745	44.3%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	271	414	65.5%	1.8
621 : OR procs for obesity w/o CC/MCC	249	351	70.9%	1.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	203	1,790	11.3%	5.6
036 : Carotid artery stent procs w/o CC/MCC	189	247	76.5%	1.6
165 : Major chest procs w/o CC/MCC	169	481	35.1%	2.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	164	483	34.0%	2.2
038 : Extracranial procs w CC	156	341	45.7%	3.2
164 : Major chest procs w CC	142	985	14.4%	4.2
271 : Other major cardiovascular procs w CC	139	702	19.8%	5.6
467 : Revision of hip or knee replacement w CC	134	942	14.2%	4.9
254 : Other vascular procs w/o CC/MCC	130	339	38.3%	2.6
Top Surgical DRGs	11,171	26,058	42.9%	2.8
All Surgical DRGs	16,753	94,367	17.8%	7.3

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Ohio, 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
274 : Percutaneous and other intracardiac procs w/o MCC	1,365	1,656	82.4%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,061	1,376	77.1%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	608	1,388	43.8%	2.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	554	1,925	28.8%	2.4
039 : Extracranial procs w/o CC/MCC	353	445	79.3%	1.4
483 : Major joint or limb reattachment procs of upper extremities	322	591	54.5%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	321	480	66.9%	2.0
468 : Revision of hip or knee replacement w/o CC/MCC	309	470	65.7%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	264	571	46.2%	4.5
467 : Revision of hip or knee replacement w CC	155	621	25.0%	3.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	153	281	54.4%	2.1
038 : Extracranial procs w CC	147	269	54.6%	2.4
036 : Carotid artery stent procs w/o CC/MCC	146	178	82.0%	1.3
460 : Spinal fusion except cervical w/o MCC	145	1,288	11.3%	3.5
621 : OR procs for obesity w/o CC/MCC	141	224	62.9%	1.5
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	134	353	38.0%	2.0
472 : Cervical spinal fusion w CC	127	489	26.0%	3.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	123	609	20.2%	2.7
254 : Other vascular procs w/o CC/MCC	107	277	38.6%	2.2
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	102	1,375	7.4%	5.2
Top Surgical DRGs	6,637	14,866	44.6%	2.6
All Surgical DRGs	10,079	58,758	17.2%	5.9

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	797	3,200	24.9%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	521	564	92.4%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	381	482	79.0%	1.3
039 : Extracranial procs w/o CC/MCC	215	249	86.3%	1.3
483 : Major joint or limb reattachment procs of upper extremities	150	373	40.2%	2.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	148	523	28.3%	2.3
460 : Spinal fusion except cervical w/o MCC	138	809	17.1%	2.7
473 : Cervical spinal fusion w/o CC/MCC	117	197	59.4%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	110	168	65.5%	1.9
036 : Carotid artery stent procs w/o CC/MCC	109	125	87.2%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	106	298	35.6%	2.1
038 : Extracranial procs w CC	97	139	69.8%	2.1
472 : Cervical spinal fusion w CC	73	174	42.0%	2.6
035 : Carotid artery stent procs w CC	63	103	61.2%	2.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	58	159	36.5%	5.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	56	477	11.7%	2.5
621 : OR procs for obesity w/o CC/MCC	49	74	66.2%	1.4
254 : Other vascular procs w/o CC/MCC	48	94	51.1%	2.1
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	47	78	60.3%	1.9
467 : Revision of hip or knee replacement w CC	47	322	14.6%	4.0
Top Surgical DRGs	3,330	8,608	38.7%	2.2
All Surgical DRGs	4,672	25,709	18.2%	5.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Oregon, 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	364	608	59.9%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	291	419	69.5%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	242	278	87.1%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	157	326	48.2%	4.3
483 : Major joint or limb reattachment procs of upper extremities	132	198	66.7%	2.0
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	112	147	76.2%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	110	464	23.7%	2.2
039 : Extracranial procs w/o CC/MCC	103	120	85.8%	1.5
036 : Carotid artery stent procs w/o CC/MCC	90	104	86.5%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	89	151	58.9%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	77	237	32.5%	2.6
621 : OR procs for obesity w/o CC/MCC	59	87	67.8%	1.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	51	83	61.4%	1.9
038 : Extracranial procs w CC	42	74	56.8%	2.5
472 : Cervical spinal fusion w CC	42	139	30.2%	3.3
253 : Other vascular procs w CC	40	209	19.1%	4.3
328 : Stomach, esophageal and duodenal procs w/o CC/MCC	40	120	33.3%	2.7
243 : Permanent cardiac pacemaker implant w CC	38	180	21.1%	3.1
035 : Carotid artery stent procs w CC	37	58	63.8%	2.3
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	37	343	10.8%	5.1
Top Surgical DRGs	2,153	4,345	49.6%	2.6
All Surgical DRGs	3,436	16,464	20.9%	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.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Pennsylvania, 140 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	1,877	3,725	50.4%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,233	1,827	67.5%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	1,190	1,551	76.7%	1.7
483 : Major joint or limb reattachment procs of upper extremities	480	763	62.9%	2.0
266 : Endovascular cardiac valve replacement and supplement procs w MCC	473	1,018	46.5%	4.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	390	1,973	19.8%	2.6
039 : Extracranial procs w/o CC/MCC	384	492	78.0%	1.5
468 : Revision of hip or knee replacement w/o CC/MCC	324	585	55.4%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	289	473	61.1%	2.1
460 : Spinal fusion except cervical w/o MCC	178	1,288	13.8%	3.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	175	281	62.3%	1.9
467 : Revision of hip or knee replacement w CC	175	788	22.2%	4.2
621 : OR procs for obesity w/o CC/MCC	160	225	71.1%	1.4
036 : Carotid artery stent procs w/o CC/MCC	159	204	77.9%	1.4
038 : Extracranial procs w CC	151	285	53.0%	2.8
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	112	384	29.2%	2.1
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	100	492	20.3%	2.8
253 : Other vascular procs w CC	91	746	12.2%	5.6
035 : Carotid artery stent procs w CC	88	176	50.0%	3.0
473 : Cervical spinal fusion w/o CC/MCC	84	200	42.0%	2.2
Top Surgical DRGs	8,113	17,476	46.4%	2.5
All Surgical DRGs	11,469	68,610	16.7%	6.2

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Puerto Rico, 51 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	166	418	39.7%	2.1
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	41	185	22.2%	3.8
483 : Major joint or limb reattachment procs of upper extremities	34	53	64.2%	1.6
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	24	54	44.4%	3.1
743 : Uterine and adnexa procs for non-malignancy w/o CC/MCC	17	54	31.5%	2.1
274 : Percutaneous and other intracardiac procs w/o MCC	15	30	50.0%	4.2
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	14	50	28.0%	4.5
419 : Laparoscopic cholecystectomy w/o CDE w/o CC/MCC	13	70	18.6%	4.3
Top Surgical DRGs	324	914	35.4%	2.8
All Surgical DRGs	575	3,704	15.5%	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.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	144	296	48.6%	1.7
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	94	129	72.9%	1.6
274 : Percutaneous and other intracardiac procs w/o MCC	57	66	86.4%	1.4
036 : Carotid artery stent procs w/o CC/MCC	34	43	79.1%	1.4
468 : Revision of hip or knee replacement w/o CC/MCC	29	44	65.9%	1.7
039 : Extracranial procs w/o CC/MCC	17	22	77.3%	1.5
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	16	118	13.6%	2.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	14	19	73.7%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	14	50	28.0%	4.4
483 : Major joint or limb reattachment procs of upper extremities	14	31	45.2%	1.8
621 : OR procs for obesity w/o CC/MCC	14	26	53.8%	1.6
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	13	22	59.1%	1.5
035 : Carotid artery stent procs w CC	12	27	44.4%	2.9
033 : Ventricular shunt procs w/o CC/MCC	11	13	84.6%	1.3
Top Surgical DRGs	483	906	53.3%	2.0
All Surgical DRGs	692	4,585	15.1%	6.2

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
 *Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission), excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	1,175	1,343	87.5%	1.3
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	414	508	81.5%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	414	843	49.1%	2.1
266 : Endovascular cardiac valve replacement and supplement procs w MCC	305	435	70.1%	2.9
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	261	923	28.3%	2.3
039 : Extracranial procs w/o CC/MCC	224	266	84.2%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	189	292	64.7%	1.8
460 : Spinal fusion except cervical w/o MCC	169	623	27.1%	3.1
036 : Carotid artery stent procs w/o CC/MCC	155	182	85.2%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	150	209	71.8%	2.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	133	427	31.1%	2.3
483 : Major joint or limb reattachment procs of upper extremities	120	225	53.3%	2.4
621 : OR procs for obesity w/o CC/MCC	112	156	71.8%	1.4
472 : Cervical spinal fusion w CC	87	269	32.3%	3.0
473 : Cervical spinal fusion w/o CC/MCC	87	167	52.1%	2.0
254 : Other vascular procs w/o CC/MCC	82	161	50.9%	2.2
244 : Permanent cardiac pacemaker implant w/o CC/MCC	77	231	33.3%	2.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	71	160	44.4%	2.0
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	68	600	11.3%	4.7
038 : Extracranial procs w CC	59	104	56.7%	3.2
Top Surgical DRGs	4,352	8,124	53.6%	2.2
All Surgical DRGs	6,250	29,886	20.9%	5.8

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - South Dakota, 18 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	408	1,072	38.1%	2.1
483 : Major joint or limb reattachment procs of upper extremities	189	240	78.8%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	186	250	74.4%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	172	197	87.3%	1.3
039 : Extracranial procs w/o CC/MCC	81	95	85.3%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	73	140	52.1%	1.9
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	61	73	83.6%	1.4
036 : Carotid artery stent procs w/o CC/MCC	59	66	89.4%	1.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	50	267	18.7%	2.4
621 : OR procs for obesity w/o CC/MCC	40	46	87.0%	1.2
266 : Endovascular cardiac valve replacement and supplement procs w MCC	34	80	42.5%	4.0
467 : Revision of hip or knee replacement w CC	33	125	26.4%	3.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	30	44	68.2%	1.9
038 : Extracranial procs w CC	27	47	57.4%	2.0
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	27	144	18.8%	2.3
473 : Cervical spinal fusion w/o CC/MCC	27	38	71.1%	1.3
035 : Carotid artery stent procs w CC	22	60	36.7%	2.8
460 : Spinal fusion except cervical w/o MCC	21	223	9.4%	3.0
489 : Knee procs w/o PDx of infection w/o CC/MCC	21	25	84.0%	1.2
254 : Other vascular procs w/o CC/MCC	20	45	44.4%	2.0
Top Surgical DRGs	1,581	3,277	48.2%	2.1
All Surgical DRGs	2,106	9,172	23.0%	5.0

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Tennessee, 77 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	1,073	1,223	87.7%	1.4
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	697	906	76.9%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	662	1,499	44.2%	2.3
039 : Extracranial procs w/o CC/MCC	313	369	84.8%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	313	439	71.3%	1.7
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	280	1,181	23.7%	2.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	261	348	75.0%	1.7
036 : Carotid artery stent procs w/o CC/MCC	246	292	84.2%	1.3
483 : Major joint or limb reattachment procs of upper extremities	240	407	59.0%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	182	432	42.1%	4.7
460 : Spinal fusion except cervical w/o MCC	141	766	18.4%	3.3
467 : Revision of hip or knee replacement w CC	137	476	28.8%	4.0
254 : Other vascular procs w/o CC/MCC	114	236	48.3%	2.2
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	110	390	28.2%	2.5
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	109	177	61.6%	1.9
038 : Extracranial procs w CC	101	176	57.4%	2.6
621 : OR procs for obesity w/o CC/MCC	96	150	64.0%	1.4
473 : Cervical spinal fusion w/o CC/MCC	83	147	56.5%	1.8
472 : Cervical spinal fusion w CC	81	275	29.5%	3.4
035 : Carotid artery stent procs w CC	76	148	51.4%	2.9
Top Surgical DRGs	5,315	10,037	53.0%	2.3
All Surgical DRGs	7,924	41,857	18.9%	5.9

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Texas, 290 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	3,473	4,141	83.9%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	2,225	5,710	39.0%	2.0
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	1,492	2,081	71.7%	1.6
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	754	3,072	24.5%	2.5
039 : Extracranial procs w/o CC/MCC	710	899	79.0%	1.4
483 : Major joint or limb reattachment procs of upper extremities	646	1,196	54.0%	2.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	619	1,470	42.1%	4.2
621 : OR procs for obesity w/o CC/MCC	531	663	80.1%	1.2
468 : Revision of hip or knee replacement w/o CC/MCC	469	866	54.2%	1.9
460 : Spinal fusion except cervical w/o MCC	463	2,406	19.2%	3.2
473 : Cervical spinal fusion w/o CC/MCC	429	671	63.9%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	423	642	65.9%	2.0
472 : Cervical spinal fusion w CC	421	1,204	35.0%	3.2
036 : Carotid artery stent procs w/o CC/MCC	416	500	83.2%	1.3
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	315	1,454	21.7%	2.5
467 : Revision of hip or knee replacement w CC	288	1,366	21.1%	3.9
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	279	481	58.0%	2.1
038 : Extracranial procs w CC	252	538	46.8%	2.9
035 : Carotid artery stent procs w CC	215	392	54.8%	2.8
273 : Percutaneous and other intracardiac procs w MCC	198	692	28.6%	5.3
Top Surgical DRGs	14,618	30,444	48.0%	2.4
All Surgical DRGs	21,481	125,792	17.1%	6.0

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

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

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1-Day Stays to Total Discharges	Average Length of Stay for DRG
274 : Percutaneous and other intracardiac procs w/o MCC	334	376	88.8%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	259	357	72.5%	1.5
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	174	524	33.2%	2.2
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	139	397	35.0%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	130	218	59.6%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	81	331	24.5%	2.5
483 : Major joint or limb reattachment procs of upper extremities	78	157	49.7%	2.3
266 : Endovascular cardiac valve replacement and supplement procs w MCC	61	174	35.1%	5.0
460 : Spinal fusion except cervical w/o MCC	58	334	17.4%	3.1
039 : Extracranial procs w/o CC/MCC	52	59	88.1%	1.3
467 : Revision of hip or knee replacement w CC	50	217	23.0%	3.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	40	326	12.3%	3.9
454 : Combined anterior and posterior spinal fusion w CC	40	290	13.8%	3.2
472 : Cervical spinal fusion w CC	40	103	38.8%	2.5
473 : Cervical spinal fusion w/o CC/MCC	38	54	70.4%	1.4
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	35	68	51.5%	2.3
621 : OR procs for obesity w/o CC/MCC	35	46	76.1%	1.3
243 : Permanent cardiac pacemaker implant w CC	30	119	25.2%	2.5
489 : Knee procs w/o PDx of infection w/o CC/MCC	29	37	78.4%	1.4
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	26	46	56.5%	2.2
Top Surgical DRGs	1,729	4,233	40.8%	2.5
All Surgical DRGs	2,704	12,697	21.3%	4.7

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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
274 : Percutaneous and other intracardiac procs w/o MCC	1,025	1,178	87.0%	1.4
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	902	1,490	60.5%	1.8
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	896	1,186	75.5%	1.5
039 : Extracranial procs w/o CC/MCC	316	363	87.1%	1.3
468 : Revision of hip or knee replacement w/o CC/MCC	300	456	65.8%	1.7
266 : Endovascular cardiac valve replacement and supplement procs w MCC	235	588	40.0%	5.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	233	1,313	17.7%	2.6
036 : Carotid artery stent procs w/o CC/MCC	231	273	84.6%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	225	335	67.2%	2.0
483 : Major joint or limb reattachment procs of upper extremities	190	318	59.7%	2.3
460 : Spinal fusion except cervical w/o MCC	147	895	16.4%	3.2
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	134	195	68.7%	1.8
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	119	623	19.1%	2.7
038 : Extracranial procs w CC	110	188	58.5%	2.3
254 : Other vascular procs w/o CC/MCC	105	233	45.1%	2.2
472 : Cervical spinal fusion w CC	104	324	32.1%	3.3
621 : OR procs for obesity w/o CC/MCC	96	123	78.0%	1.2
467 : Revision of hip or knee replacement w CC	90	386	23.3%	4.2
473 : Cervical spinal fusion w/o CC/MCC	85	169	50.3%	2.1
035 : Carotid artery stent procs w CC	71	132	53.8%	3.1
Top Surgical DRGs	5,614	10,768	52.1%	2.3
All Surgical DRGs	7,901	43,156	18.3%	6.0

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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	113	181	62.4%	1.9
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	108	144	75.0%	1.4
274 : Percutaneous and other intracardiac procs w/o MCC	29	36	80.6%	1.7
039 : Extracranial procs w/o CC/MCC	20	26	76.9%	2.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	20	111	18.0%	2.3
468 : Revision of hip or knee replacement w/o CC/MCC	16	29	55.2%	2.6
483 : Major joint or limb reattachment procs of upper extremities	16	24	66.7%	1.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	11	18	61.1%	2.6
Top Surgical DRGs	333	569	58.5%	1.9
All Surgical DRGs	532	3,066	17.4%	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.
 Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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
274 : Percutaneous and other intracardiac procs w/o MCC	796	871	91.4%	1.2
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	671	828	81.0%	1.5
266 : Endovascular cardiac valve replacement and supplement procs w MCC	462	795	58.1%	3.8
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	343	1,017	33.7%	2.1
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	343	692	49.6%	2.2
468 : Revision of hip or knee replacement w/o CC/MCC	221	310	71.3%	1.5
039 : Extracranial procs w/o CC/MCC	194	225	86.2%	1.2
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	184	243	75.7%	1.6
483 : Major joint or limb reattachment procs of upper extremities	146	264	55.3%	2.7
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	143	238	60.1%	1.9
036 : Carotid artery stent procs w/o CC/MCC	131	162	80.9%	1.4
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	131	505	25.9%	2.7
467 : Revision of hip or knee replacement w CC	129	374	34.5%	4.0
460 : Spinal fusion except cervical w/o MCC	101	416	24.3%	3.6
165 : Major chest procs w/o CC/MCC	98	177	55.4%	1.9
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	94	817	11.5%	4.9
331 : Major small and large bowel procs w/o CC/MCC	92	383	24.0%	3.0
038 : Extracranial procs w CC	85	151	56.3%	2.5
254 : Other vascular procs w/o CC/MCC	76	150	50.7%	1.9
621 : OR procs for obesity w/o CC/MCC	72	105	68.6%	1.4
Top Surgical DRGs	4,512	8,723	51.7%	2.5
All Surgical DRGs	6,909	32,010	21.6%	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.**
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - Wisconsin, 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	476	721	66.0%	1.7
274 : Percutaneous and other intracardiac procs w/o MCC	447	516	86.6%	1.3
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	435	999	43.5%	2.0
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	225	771	29.2%	2.2
039 : Extracranial procs w/o CC/MCC	184	231	79.7%	1.4
266 : Endovascular cardiac valve replacement and supplement procs w MCC	182	398	45.7%	4.3
483 : Major joint or limb reattachment procs of upper extremities	132	207	63.8%	2.1
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	131	186	70.4%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	124	167	74.3%	1.5
038 : Extracranial procs w CC	110	178	61.8%	2.1
467 : Revision of hip or knee replacement w CC	94	353	26.6%	3.7
036 : Carotid artery stent procs w/o CC/MCC	56	67	83.6%	1.3
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	55	98	56.1%	2.1
253 : Other vascular procs w CC	52	338	15.4%	4.6
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	50	129	38.8%	2.2
254 : Other vascular procs w/o CC/MCC	46	97	47.4%	2.4
165 : Major chest procs w/o CC/MCC	45	85	52.9%	1.8
164 : Major chest procs w CC	43	227	18.9%	3.6
460 : Spinal fusion except cervical w/o MCC	37	356	10.4%	3.5
621 : OR procs for obesity w/o CC/MCC	35	57	61.4%	1.5
Top Surgical DRGs	2,959	6,181	47.9%	2.4
All Surgical DRGs	4,308	24,559	17.5%	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.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
In Descending Order by Same- and 1-Day Stay Counts Per DRG**

Top Surgical DRGs for Same- and 1-Day Stays - West Virginia, 25 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	326	645	50.5%	1.9
274 : Percutaneous and other intracardiac procs w/o MCC	223	278	80.2%	1.5
267 : Endovascular cardiac valve replacement and supplement procs w/o MCC	200	234	85.5%	1.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	120	615	19.5%	2.8
039 : Extracranial procs w/o CC/MCC	103	148	69.6%	1.6
036 : Carotid artery stent procs w/o CC/MCC	90	113	79.6%	1.5
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	56	89	62.9%	2.3
472 : Cervical spinal fusion w CC	37	97	38.1%	3.7
468 : Revision of hip or knee replacement w/o CC/MCC	35	67	52.2%	2.0
027 : Craniotomy and endovascular intracranial procs w/o CC/MCC	33	50	66.0%	1.7
035 : Carotid artery stent procs w CC	33	66	50.0%	3.6
266 : Endovascular cardiac valve replacement and supplement procs w MCC	32	75	42.7%	6.8
483 : Major joint or limb reattachment procs of upper extremities	28	58	48.3%	2.8
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	27	403	6.7%	6.0
460 : Spinal fusion except cervical w/o MCC	26	165	15.8%	3.8
254 : Other vascular procs w/o CC/MCC	24	63	38.1%	2.2
038 : Extracranial procs w CC	22	67	32.8%	3.7
621 : OR procs for obesity w/o CC/MCC	21	28	75.0%	1.3
661 : Kidney and ureter procs for non-neoplasm w/o CC/MCC	20	75	26.7%	2.5
273 : Percutaneous and other intracardiac procs w MCC	16	56	28.6%	6.2
Top Surgical DRGs	1,472	3,392	43.4%	2.9
All Surgical DRGs	1,968	13,093	15.0%	6.4

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023

**Discharges for most recent 4 quarters, ending Q2FY23
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
274 : Percutaneous and other intracardiac procs w/o MCC	71	79	89.9%	1.2
470 : Major hip and knee joint replacement or reattachment of lower extremity w/o	40	130	30.8%	2.3
247 : Percutaneous cardiovascular procs w drug-eluting stent w/o MCC	35	126	27.8%	2.5
483 : Major joint or limb reattachment procs of upper extremities	25	49	51.0%	1.9
468 : Revision of hip or knee replacement w/o CC/MCC	21	31	67.7%	1.7
455 : Combined anterior and posterior spinal fusion w/o CC/MCC	18	54	33.3%	2.7
269 : Aortic and heart assist procs except pulsation balloon w/o MCC	14	16	87.5%	1.4
246 : Percutaneous cardiovascular procs w drug-eluting stent w MCC or 4+ arteries	12	70	17.1%	3.5
Top Surgical DRGs	236	555	42.5%	2.3
All Surgical DRGs	466	2,464	18.9%	5.1

Note: Statistics are only displayed when there are 3 or more providers in the state and the DRG count is greater than 10.
***Excludes claims w/patient discharge status codes: 02 (transfers to short-term hospital for inpatient care), 20 (deaths), 07 (leaves against medical advice), 82 (transfers to a short-term general hospital with planned acute care hospital inpatient admission),**
excludes claims with occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with through date on or day prior to inpatient admission.
Date prepared: 24AUG2023