



---

# Short-Term Hospital State-Level Target Area Summary Report

---

Q4FY22

---

## State-Level Target Area Summary Report Q4FY22 - Alaska, 8 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	112	111	137	121
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	123	123	152	135
	Proportion of Target to Denominator Discharges	91.1%	90.2%	90.1%	89.6%
	Average Length of Stay for Target	7.5	9.2	6.3	6.2
	Average Medicare Payment for Target	\$16,774	\$16,045	\$15,049	\$15,800
	Sum of Medicare Payments for Target	\$1,878,706	\$1,780,978	\$2,061,734	\$1,911,775
Respiratory Infections	DRGs 177, 178	352	201	97	171
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	395	259	165	234
	Proportion of Target to Denominator Discharges	89.1%	77.6%	58.8%	73.1%
	Average Length of Stay for Target	8.5	8.5	9.2	5.9
	Average Medicare Payment for Target	\$27,874	\$28,170	\$26,144	\$22,878
	Sum of Medicare Payments for Target	\$9,811,554	\$5,662,123	\$2,536,014	\$3,912,104
Simple Pneumonia	DRGs 193, 194	40	56	59	52
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	77	92	108	111
	Proportion of Target to Denominator Discharges	51.9%	60.9%	54.6%	46.8%
	Average Length of Stay for Target	4.8	4.3	5.9	4.9
	Average Medicare Payment for Target	\$13,613	\$14,319	\$15,164	\$13,489
	Sum of Medicare Payments for Target	\$544,526	\$801,883	\$894,704	\$701,431
Septicemia	DRGs 870, 871, 872	381	302	325	357
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	512	416	450	474
	Proportion of Target to Denominator Discharges	74.4%	72.6%	72.2%	75.3%
	Average Length of Stay for Target	7.6	8.1	7.7	8.2
	Average Medicare Payment for Target	\$22,989	\$22,246	\$20,769	\$20,278
	Sum of Medicare Payments for Target	\$8,758,757	\$6,718,192	\$6,749,846	\$7,239,194
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	17	35	24	17
	All Discharges for Surgical DRGs	1,060	1,154	1,140	1,135
	Proportion of Target to Denominator Discharges	1.6%	3.0%	2.1%	1.5%
	Average Length of Stay for Target	13.9	13.3	14.8	18.9
	Average Medicare Payment for Target	\$41,745	\$43,093	\$44,256	\$47,166
	Sum of Medicare Payments for Target	\$709,666	\$1,508,258	\$1,062,151	\$801,823
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	1,696	1,503	1,551	1,597
	All Discharges for Medical DRGs w/ or w/o CC or MCC	2,051	1,905	1,949	2,076
	Proportion of Target to Denominator Discharges	82.7%	78.9%	79.6%	76.9%
	Average Length of Stay for Target	7.2	7.3	6.6	6.9
	Average Medicare Payment for Target	\$19,351	\$18,638	\$17,157	\$17,558

# Target Area Summary Report Alaska

2

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Sum of Medicare Payments for Target	\$32,820,080	\$28,013,202	\$26,610,469	\$28,040,590
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	563	646	618	668
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	977	1,075	1,073	1,071
	Proportion of Target to Denominator Discharges	57.6%	60.1%	57.6%	62.4%
	Average Length of Stay for Target	10.5	10.9	10.7	11.4
	Average Medicare Payment for Target	\$37,300	\$39,085	\$37,886	\$38,579
	Sum of Medicare Payments for Target	\$21,000,081	\$25,248,597	\$23,413,594	\$25,770,609
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,011	1,032	993	1,042
	All Discharges with one or more CC or MCC coded on the claim	2,251	2,145	2,166	2,265
	Proportion of Target to Denominator Discharges	44.9%	48.1%	45.8%	46.0%
	Average Length of Stay for Target	6.9	6.6	6.0	6.5
	Average Medicare Payment for Target	\$23,762	\$24,008	\$21,613	\$23,188
	Sum of Medicare Payments for Target	\$24,023,267	\$24,776,172	\$21,461,990	\$24,162,277
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	48	41	53	42
	All Discharges with one or more MCCs including severe malnutrition	163	137	143	141
	Proportion of Target to Denominator Discharges	29.4%	29.9%	37.1%	29.8%
	Average Length of Stay for Target	11.2	9.6	10.4	11.3
	Average Medicare Payment for Target	\$25,960	\$22,551	\$21,885	\$28,077
	Sum of Medicare Payments for Target	\$1,246,080	\$924,585	\$1,159,925	\$1,179,244
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	58	32	15	15
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	462	347	359	388
	Proportion of Target to Denominator Discharges	12.6%	9.2%	4.2%	3.9%
	Average Length of Stay for Target	18.3	28.8	17.3	13.6
	Average Medicare Payment for Target	\$111,665	\$128,989	\$99,495	\$71,731
	Sum of Medicare Payments for Target	\$6,476,560	\$4,127,640	\$1,492,422	\$1,075,966
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	62	75	63	51
	All DRGs 246-249 Discharges + outpatient claims	130	142	138	123
	Proportion of Target to Denominator Discharges	47.7%	52.8%	45.7%	41.5%
	Average Length of Stay for Target	3.8	3.9	3.8	3.5
	Average Medicare Payment for Target	\$26,004	\$23,305	\$24,078	\$25,580
	Sum of Medicare Payments for Target	\$1,612,261	\$1,747,890	\$1,516,899	\$1,304,601

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Alaska

3

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Total Knee Replacement	Inpatient discharges with knee replacement px codes	78	91	76	74
	Inpatient discharges + outpatient claims with knee replacement px codes	189	174	167	184
	Proportion of Target to Denominator Discharges	41.3%	52.3%	45.5%	40.2%
	Average Medicare Payment for Target	\$21,477	\$24,694	\$20,846	\$21,630
	Sum of Medicare Payments for Target	\$1,675,177	\$2,247,175	\$1,584,288	\$1,600,643
Syncope	DRG 312	14	11	*	12
	All medical DRGs in MDC 05 Discharges	323	343	*	352
	Proportion of Target to Denominator Discharges	4.3%	3.2%	*	3.4%
	Average Length of Stay for Target	3.3	2.8	*	6.3
	Average Medicare Payment for Target	\$8,798	\$8,549	*	\$9,551
	Sum of Medicare Payments for Target	\$123,176	\$94,036	*	\$114,617
Other Circulatory System Diagnoses	DRGs 314, 315, 316	19	17	24	24
	All medical DRGs in MDC 05 Discharges	323	343	352	352
	Proportion of Target to Denominator Discharges	5.9%	5.0%	6.8%	6.8%
	Average Length of Stay for Target	4.2	7.1	4.8	6.6
	Average Medicare Payment for Target	\$19,793	\$16,663	\$15,779	\$19,282
	Sum of Medicare Payments for Target	\$376,068	\$283,275	\$378,694	\$462,757
Other Digestive System Diagnoses	DRGs 393, 394, 395	24	23	15	25
	All medical DRGs in MDC 06 Discharges	186	200	261	215
	Proportion of Target to Denominator Discharges	12.9%	11.5%	5.7%	11.6%
	Average Length of Stay for Target	4.0	4.2	5.3	6.5
	Average Medicare Payment for Target	\$11,462	\$11,737	\$13,897	\$14,489
	Sum of Medicare Payments for Target	\$275,077	\$269,941	\$208,451	\$362,220
Medical Back Problems	DRGs 551, 552	14	11	16	26
	All medical DRGs in MDC 08 Discharges	79	78	84	109
	Proportion of Target to Denominator Discharges	17.7%	14.1%	19.0%	23.9%
	Average Length of Stay for Target	9.0	14.0	8.2	9.8
	Average Medicare Payment for Target	\$12,083	\$19,841	\$11,376	\$13,305
	Sum of Medicare Payments for Target	\$169,159	\$218,255	\$182,020	\$345,926
Spinal Fusion	Claims with spinal fusion procedure codes	79	109	101	104
	Claims with spinal procedure codes	154	188	198	193
	Proportion of Target to Denominator Discharges	51.3%	58.0%	51.0%	53.9%
	Average Length of Stay for Target	4.1	5.2	3.8	6.5
	Average Medicare Payment for Target	\$38,930	\$42,944	\$43,998	\$47,308

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Alaska

4

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Spinal Fusion	Sum of Medicare Payments for Target	\$3,075,444	\$4,680,880	\$4,443,776	\$4,920,080
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	19	13	23	*
	All Discharges with Transfer to SNF	232	199	239	*
	Proportion of Target to Denominator Discharges	8.2%	6.5%	9.6%	*
	Average Length of Stay for Target	3.0	3.0	3.0	*
	Average Medicare Payment for Target	\$19,148	\$14,529	\$17,006	*
	Sum of Medicare Payments for Target	\$363,810	\$188,871	\$391,134	*
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	398	412	384	414
	All Discharges excl dc status 02,82,07,20	2,909	2,922	2,999	3,094
	Proportion of Target to Denominator Discharges	13.7%	14.1%	12.8%	13.4%
	Average Length of Stay for Target	7.7	7.5	7.7	7.3
	Average Medicare Payment for Target	\$23,066	\$23,111	\$21,107	\$21,185
	Sum of Medicare Payments for Target	\$9,180,246	\$9,521,856	\$8,105,009	\$8,770,585
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	296	314	274	263
	All Discharges excl dc status 02,82,07,20	2,909	2,922	2,999	3,094
	Proportion of Target to Denominator Discharges	10.2%	10.7%	9.1%	8.5%
	Average Length of Stay for Target	7.2	7.6	7.2	6.3
	Average Medicare Payment for Target	\$22,957	\$23,689	\$20,091	\$20,548
	Sum of Medicare Payments for Target	\$6,795,193	\$7,438,235	\$5,504,826	\$5,404,168
Two-Day Stays for Medical DRGs	Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	325	331	389	389
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	1,956	1,861	1,963	2,063
	Proportion of Target to Denominator Discharges	16.6%	17.8%	19.8%	18.9%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$13,329	\$12,784	\$12,669	\$13,283
	Sum of Medicare Payments for Target	\$4,332,042	\$4,231,441	\$4,928,205	\$5,167,199
Two-Day Stays for Surgical DRGs	Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	167	187	197	148
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	983	1,074	1,054	1,044
	Proportion of Target to Denominator Discharges	17.0%	17.4%	18.7%	14.2%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$23,733	\$23,434	\$22,807	\$22,911
	Sum of Medicare Payments for Target	\$3,963,465	\$4,382,232	\$4,493,066	\$3,390,839

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Alaska

5

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
One-Day Stays for Medical DRGs	One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	187	181	223	234
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	1,956	1,861	1,963	2,063
	Proportion of Target to Denominator Discharges	9.6%	9.7%	11.4%	11.3%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$13,375	\$12,086	\$11,691	\$12,524
	Sum of Medicare Payments for Target	\$2,501,078	\$2,187,607	\$2,607,119	\$2,930,693
One-Day Stays for Surgical DRGs	One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	158	154	162	175
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	983	1,074	1,054	1,044
	Proportion of Target to Denominator Discharges	16.1%	14.3%	15.4%	16.8%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$27,911	\$28,818	\$27,311	\$31,079
	Sum of Medicare Payments for Target	\$4,409,958	\$4,438,001	\$4,424,308	\$5,438,798

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Alabama, 81 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	799	724	744	792
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	980	917	918	949
	Proportion of Target to Denominator Discharges	81.5%	79.0%	81.0%	83.5%
	Average Length of Stay for Target	5.2	5.2	4.8	5.1
	Average Medicare Payment for Target	\$8,175	\$8,744	\$8,021	\$8,135
	Sum of Medicare Payments for Target	\$6,531,452	\$6,330,755	\$5,967,294	\$6,442,584
Respiratory Infections	DRGs 177, 178	1,048	2,637	641	1,422
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,013	3,494	1,439	2,104
	Proportion of Target to Denominator Discharges	52.1%	75.5%	44.5%	67.6%
	Average Length of Stay for Target	7.9	6.8	7.1	6.0
	Average Medicare Payment for Target	\$12,677	\$12,441	\$10,823	\$11,290
	Sum of Medicare Payments for Target	\$13,284,984	\$32,806,313	\$6,937,597	\$16,054,735
Simple Pneumonia	DRGs 193, 194	869	758	719	580
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,529	1,264	1,263	1,013
	Proportion of Target to Denominator Discharges	56.8%	60.0%	56.9%	57.3%
	Average Length of Stay for Target	4.9	5.5	4.8	5.1
	Average Medicare Payment for Target	\$6,770	\$6,966	\$6,548	\$6,624
	Sum of Medicare Payments for Target	\$5,882,894	\$5,279,951	\$4,707,959	\$3,842,119
Septicemia	DRGs 870, 871, 872	2,297	2,225	1,910	1,949
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	4,362	4,102	3,657	3,579
	Proportion of Target to Denominator Discharges	52.7%	54.2%	52.2%	54.5%
	Average Length of Stay for Target	7.5	8.0	7.2	7.1
	Average Medicare Payment for Target	\$13,033	\$14,149	\$12,039	\$12,151
	Sum of Medicare Payments for Target	\$29,936,615	\$31,482,038	\$22,995,332	\$23,682,261
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	212	213	232	179
	All Discharges for Surgical DRGs	7,565	6,828	7,282	7,163
	Proportion of Target to Denominator Discharges	2.8%	3.1%	3.2%	2.5%
	Average Length of Stay for Target	10.0	11.4	10.1	10.2
	Average Medicare Payment for Target	\$21,295	\$28,677	\$21,219	\$22,858
	Sum of Medicare Payments for Target	\$4,514,551	\$6,108,139	\$4,922,893	\$4,091,595

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Alabama

7

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	13,617	14,329	12,353	12,774
	All Discharges for Medical DRGs w/ or w/o CC or MCC	18,121	18,271	16,905	17,210
	Proportion of Target to Denominator Discharges	75.1%	78.4%	73.1%	74.2%
	Average Length of Stay for Target	5.8	6.2	5.7	5.8
	Average Medicare Payment for Target	\$9,025	\$9,642	\$8,630	\$8,987
	Sum of Medicare Payments for Target	\$122,894,371	\$138,159,717	\$106,609,712	\$114,799,456
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,353	3,944	4,230	4,071
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	7,025	6,347	6,811	6,706
	Proportion of Target to Denominator Discharges	62.0%	62.1%	62.1%	60.7%
	Average Length of Stay for Target	7.8	8.4	7.9	7.7
	Average Medicare Payment for Target	\$23,017	\$23,307	\$22,143	\$22,355
	Sum of Medicare Payments for Target	\$100,193,180	\$91,922,858	\$93,665,509	\$91,005,873
Single CC or MCC	Discharges with one CC or MCC coded on the claim	8,316	8,288	7,820	7,920
	All Discharges with one or more CC or MCC coded on the claim	17,937	18,163	16,569	16,811
	Proportion of Target to Denominator Discharges	46.4%	45.6%	47.2%	47.1%
	Average Length of Stay for Target	5.1	5.3	5.1	5.1
	Average Medicare Payment for Target	\$11,991	\$12,061	\$11,727	\$11,916
	Sum of Medicare Payments for Target	\$99,718,390	\$99,961,082	\$91,706,282	\$94,377,096
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	328	282	338	353
	All Discharges with one or more MCCs including severe malnutrition	886	882	871	930
	Proportion of Target to Denominator Discharges	37.0%	32.0%	38.8%	38.0%
	Average Length of Stay for Target	6.7	6.8	7.2	6.8
	Average Medicare Payment for Target	\$12,166	\$12,237	\$12,221	\$11,337
	Sum of Medicare Payments for Target	\$3,990,503	\$3,450,751	\$4,130,635	\$4,002,057
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	389	470	238	248
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,735	2,707	2,166	2,217
	Proportion of Target to Denominator Discharges	14.2%	17.4%	11.0%	11.2%
	Average Length of Stay for Target	22.3	22.2	24.6	21.6
	Average Medicare Payment for Target	\$61,597	\$62,132	\$65,113	\$59,044
	Sum of Medicare Payments for Target	\$23,961,254	\$29,202,219	\$15,496,997	\$14,642,870

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Alabama

8

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	414	349	407	379
	All DRGs 246-249 Discharges + outpatient claims	971	847	954	893
	Proportion of Target to Denominator Discharges	42.6%	41.2%	42.7%	42.4%
	Average Length of Stay for Target	4.2	3.9	3.8	4.0
	Average Medicare Payment for Target	\$15,123	\$14,893	\$14,791	\$14,699
	Sum of Medicare Payments for Target	\$6,260,975	\$5,197,788	\$6,020,058	\$5,570,794
Total Knee Replacement	Inpatient discharges with knee replacement px codes	302	290	299	312
	Inpatient discharges + outpatient claims with knee replacement px codes	1,158	1,212	1,194	1,114
	Proportion of Target to Denominator Discharges	26.1%	23.9%	25.0%	28.0%
	Average Medicare Payment for Target	\$13,163	\$13,713	\$13,571	\$13,414
	Sum of Medicare Payments for Target	\$3,975,141	\$3,976,830	\$4,057,588	\$4,185,089
Syncope	DRG 312	238	190	224	227
	All medical DRGs in MDC 05 Discharges	3,968	3,535	3,870	3,587
	Proportion of Target to Denominator Discharges	6.0%	5.4%	5.8%	6.3%
	Average Length of Stay for Target	3.4	3.3	3.3	3.7
	Average Medicare Payment for Target	\$4,972	\$5,129	\$4,939	\$5,145
	Sum of Medicare Payments for Target	\$1,183,267	\$974,486	\$1,106,304	\$1,167,849
Other Circulatory System Diagnoses	DRGs 314, 315, 316	163	156	166	152
	All medical DRGs in MDC 05 Discharges	3,968	3,535	3,870	3,587
	Proportion of Target to Denominator Discharges	4.1%	4.4%	4.3%	4.2%
	Average Length of Stay for Target	5.2	5.7	5.7	6.0
	Average Medicare Payment for Target	\$10,760	\$10,333	\$9,969	\$10,124
	Sum of Medicare Payments for Target	\$1,753,852	\$1,611,949	\$1,654,894	\$1,538,779
Other Digestive System Diagnoses	DRGs 393, 394, 395	224	202	221	206
	All medical DRGs in MDC 06 Discharges	1,995	1,798	1,960	1,993
	Proportion of Target to Denominator Discharges	11.2%	11.2%	11.3%	10.3%
	Average Length of Stay for Target	5.0	4.9	4.5	4.6
	Average Medicare Payment for Target	\$7,490	\$7,346	\$7,355	\$7,100
	Sum of Medicare Payments for Target	\$1,677,776	\$1,483,911	\$1,625,398	\$1,462,536

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Alabama

9

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	170	170	192	194
	All medical DRGs in MDC 08 Discharges	643	632	691	660
	Proportion of Target to Denominator Discharges	26.4%	26.9%	27.8%	29.4%
	Average Length of Stay for Target	5.3	5.4	4.4	4.3
	Average Medicare Payment for Target	\$6,882	\$6,808	\$6,541	\$6,568
	Sum of Medicare Payments for Target	\$1,169,883	\$1,157,443	\$1,255,857	\$1,274,221
Spinal Fusion	Claims with spinal fusion procedure codes	735	676	697	797
	Claims with spinal procedure codes	1,336	1,204	1,308	1,395
	Proportion of Target to Denominator Discharges	55.0%	56.1%	53.3%	57.1%
	Average Length of Stay for Target	2.9	3.3	2.9	2.6
	Average Medicare Payment for Target	\$21,095	\$22,215	\$20,116	\$20,476
	Sum of Medicare Payments for Target	\$15,505,065	\$15,017,077	\$14,020,667	\$16,319,682
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	583	507	579	539
	All Discharges with Transfer to SNF	4,511	4,333	4,339	4,273
	Proportion of Target to Denominator Discharges	12.9%	11.7%	13.3%	12.6%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,665	\$8,736	\$8,234	\$8,331
	Sum of Medicare Payments for Target	\$5,051,807	\$4,428,917	\$4,767,570	\$4,490,341
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	4,187	3,940	3,938	4,067
	All Discharges excl dc status 02,82,07,20	25,535	24,645	24,302	24,530
	Proportion of Target to Denominator Discharges	16.4%	16.0%	16.2%	16.6%
	Average Length of Stay for Target	6.4	6.6	6.4	6.5
	Average Medicare Payment for Target	\$12,208	\$12,264	\$11,874	\$12,155
	Sum of Medicare Payments for Target	\$51,116,466	\$48,321,809	\$46,758,475	\$49,433,858
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	3,006	2,848	2,833	2,926
	All Discharges excl dc status 02,82,07,20	25,535	24,645	24,302	24,530
	Proportion of Target to Denominator Discharges	11.8%	11.6%	11.7%	11.9%
	Average Length of Stay for Target	6.4	6.6	6.5	6.3
	Average Medicare Payment for Target	\$12,328	\$12,170	\$12,114	\$11,866
	Sum of Medicare Payments for Target	\$37,057,677	\$34,661,557	\$34,319,585	\$34,719,454

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Alabama

10

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,307	2,841	3,192	3,190
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	18,031	17,827	16,997	17,266
	<b>Proportion of Target to Denominator Discharges</b>	18.3%	15.9%	18.8%	18.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,143	\$6,486	\$5,939	\$6,121
	<b>Sum of Medicare Payments for Target</b>	\$20,316,549	\$18,427,877	\$18,957,943	\$19,526,430
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,033	852	1,004	976
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,973	6,327	6,860	6,727
	<b>Proportion of Target to Denominator Discharges</b>	14.8%	13.5%	14.6%	14.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$14,591	\$15,668	\$14,255	\$14,890
	<b>Sum of Medicare Payments for Target</b>	\$15,072,244	\$13,349,297	\$14,312,364	\$14,533,073
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,401	1,214	1,284	1,271
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	18,031	17,827	16,997	17,266
	<b>Proportion of Target to Denominator Discharges</b>	7.8%	6.8%	7.6%	7.4%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$5,819	\$6,191	\$5,542	\$5,683
	<b>Sum of Medicare Payments for Target</b>	\$8,152,172	\$7,515,369	\$7,115,626	\$7,223,685
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,199	1,225	1,227	1,348
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,973	6,327	6,860	6,727
	<b>Proportion of Target to Denominator Discharges</b>	17.2%	19.4%	17.9%	20.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$16,641	\$17,065	\$16,967	\$17,001
	<b>Sum of Medicare Payments for Target</b>	\$19,952,740	\$20,904,798	\$20,818,085	\$22,917,472

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Arkansas, 45 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	613	564	580	516
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	710	656	673	605
	Proportion of Target to Denominator Discharges	86.3%	86.0%	86.2%	85.3%
	Average Length of Stay for Target	4.2	4.2	3.8	3.9
	Average Medicare Payment for Target	\$7,847	\$7,992	\$7,302	\$7,744
	Sum of Medicare Payments for Target	\$4,810,370	\$4,507,674	\$4,235,446	\$3,995,829
Respiratory Infections	DRGs 177, 178	914	1,687	432	964
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,691	2,374	1,102	1,509
	Proportion of Target to Denominator Discharges	54.1%	71.1%	39.2%	63.9%
	Average Length of Stay for Target	6.3	6.0	5.4	5.1
	Average Medicare Payment for Target	\$12,529	\$12,515	\$10,695	\$11,493
	Sum of Medicare Payments for Target	\$11,451,584	\$21,112,145	\$4,620,224	\$11,079,005
Simple Pneumonia	DRGs 193, 194	713	611	612	485
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,104	916	986	758
	Proportion of Target to Denominator Discharges	64.6%	66.7%	62.1%	64.0%
	Average Length of Stay for Target	4.5	4.7	4.6	4.5
	Average Medicare Payment for Target	\$6,885	\$6,707	\$6,517	\$6,634
	Sum of Medicare Payments for Target	\$4,908,805	\$4,097,806	\$3,988,356	\$3,217,533
Septicemia	DRGs 870, 871, 872	2,038	2,073	1,755	1,940
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	3,663	3,538	3,159	3,199
	Proportion of Target to Denominator Discharges	55.6%	58.6%	55.6%	60.6%
	Average Length of Stay for Target	6.5	6.7	5.9	5.9
	Average Medicare Payment for Target	\$12,286	\$13,732	\$11,424	\$11,612
	Sum of Medicare Payments for Target	\$25,038,849	\$28,465,856	\$20,049,881	\$22,527,517
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	162	157	134	149
	All Discharges for Surgical DRGs	6,051	5,837	5,831	5,909
	Proportion of Target to Denominator Discharges	2.7%	2.7%	2.3%	2.5%
	Average Length of Stay for Target	8.6	9.9	9.0	8.6
	Average Medicare Payment for Target	\$21,559	\$22,988	\$20,843	\$21,556
	Sum of Medicare Payments for Target	\$3,492,548	\$3,609,174	\$2,792,963	\$3,211,822

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arkansas

12

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	10,872	11,007	9,715	10,390
	All Discharges for Medical DRGs w/ or w/o CC or MCC	14,028	13,618	12,832	13,400
	Proportion of Target to Denominator Discharges	77.5%	80.8%	75.7%	77.5%
	Average Length of Stay for Target	5.1	5.4	4.9	4.8
	Average Medicare Payment for Target	\$8,952	\$9,468	\$8,403	\$8,729
	Sum of Medicare Payments for Target	\$97,323,054	\$104,214,901	\$81,633,620	\$90,698,940
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	3,290	3,094	3,154	3,274
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	5,597	5,347	5,448	5,506
	Proportion of Target to Denominator Discharges	58.8%	57.9%	57.9%	59.5%
	Average Length of Stay for Target	6.9	7.4	6.7	6.6
	Average Medicare Payment for Target	\$21,870	\$22,309	\$21,226	\$21,453
	Sum of Medicare Payments for Target	\$71,953,321	\$69,024,355	\$66,946,526	\$70,237,966
Single CC or MCC	Discharges with one CC or MCC coded on the claim	6,509	6,407	5,953	6,434
	All Discharges with one or more CC or MCC coded on the claim	14,137	14,068	12,860	13,648
	Proportion of Target to Denominator Discharges	46.0%	45.5%	46.3%	47.1%
	Average Length of Stay for Target	4.6	4.7	4.4	4.3
	Average Medicare Payment for Target	\$11,643	\$11,766	\$11,210	\$11,381
	Sum of Medicare Payments for Target	\$75,785,130	\$75,386,549	\$66,732,428	\$73,226,437
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	253	226	305	329
	All Discharges with one or more MCCs including severe malnutrition	747	747	774	869
	Proportion of Target to Denominator Discharges	33.9%	30.3%	39.4%	37.9%
	Average Length of Stay for Target	5.2	6.4	5.4	5.3
	Average Medicare Payment for Target	\$11,899	\$12,286	\$11,986	\$12,539
	Sum of Medicare Payments for Target	\$3,010,477	\$2,776,672	\$3,655,607	\$4,125,219
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	284	368	163	170
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,388	2,492	1,976	2,149
	Proportion of Target to Denominator Discharges	11.9%	14.8%	8.2%	7.9%
	Average Length of Stay for Target	18.6	18.7	16.9	16.4
	Average Medicare Payment for Target	\$57,032	\$58,207	\$53,226	\$54,047
	Sum of Medicare Payments for Target	\$16,197,059	\$21,420,095	\$8,675,820	\$9,187,924

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arkansas

13

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	401	371	370	362
	All DRGs 246-249 Discharges + outpatient claims	1,214	1,114	1,210	1,167
	Proportion of Target to Denominator Discharges	33.0%	33.3%	30.6%	31.0%
	Average Length of Stay for Target	3.0	3.6	3.3	2.7
	Average Medicare Payment for Target	\$14,123	\$15,101	\$13,834	\$13,998
	Sum of Medicare Payments for Target	\$5,663,515	\$5,602,460	\$5,118,734	\$5,067,403
Total Knee Replacement	Inpatient discharges with knee replacement px codes	325	395	327	278
	Inpatient discharges + outpatient claims with knee replacement px codes	877	997	987	882
	Proportion of Target to Denominator Discharges	37.1%	39.6%	33.1%	31.5%
	Average Medicare Payment for Target	\$11,793	\$11,580	\$12,643	\$12,401
	Sum of Medicare Payments for Target	\$3,832,574	\$4,574,125	\$4,134,378	\$3,447,404
Syncope	DRG 312	105	96	121	129
	All medical DRGs in MDC 05 Discharges	2,939	2,669	2,819	2,858
	Proportion of Target to Denominator Discharges	3.6%	3.6%	4.3%	4.5%
	Average Length of Stay for Target	2.5	3.5	2.7	2.7
	Average Medicare Payment for Target	\$4,734	\$5,010	\$4,470	\$4,851
	Sum of Medicare Payments for Target	\$497,025	\$480,938	\$540,853	\$625,796
Other Circulatory System Diagnoses	DRGs 314, 315, 316	126	130	111	142
	All medical DRGs in MDC 05 Discharges	2,939	2,669	2,819	2,858
	Proportion of Target to Denominator Discharges	4.3%	4.9%	3.9%	5.0%
	Average Length of Stay for Target	6.6	5.1	6.5	4.9
	Average Medicare Payment for Target	\$10,860	\$9,442	\$10,370	\$9,316
	Sum of Medicare Payments for Target	\$1,368,355	\$1,227,493	\$1,151,088	\$1,322,886
Other Digestive System Diagnoses	DRGs 393, 394, 395	134	116	129	142
	All medical DRGs in MDC 06 Discharges	1,559	1,362	1,533	1,455
	Proportion of Target to Denominator Discharges	8.6%	8.5%	8.4%	9.8%
	Average Length of Stay for Target	5.0	4.6	3.7	4.4
	Average Medicare Payment for Target	\$7,208	\$6,942	\$6,712	\$6,703
	Sum of Medicare Payments for Target	\$965,841	\$805,272	\$865,826	\$951,884

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arkansas

14

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	101	123	114	135
	All medical DRGs in MDC 08 Discharges	439	424	423	439
	Proportion of Target to Denominator Discharges	23.0%	29.0%	27.0%	30.8%
	Average Length of Stay for Target	3.4	4.3	3.9	3.7
	Average Medicare Payment for Target	\$5,601	\$6,399	\$5,722	\$6,210
	Sum of Medicare Payments for Target	\$565,722	\$787,038	\$652,348	\$838,389
Spinal Fusion	Claims with spinal fusion procedure codes	424	418	393	399
	Claims with spinal procedure codes	944	929	918	885
	Proportion of Target to Denominator Discharges	44.9%	45.0%	42.8%	45.1%
	Average Length of Stay for Target	2.7	2.8	2.9	3.0
	Average Medicare Payment for Target	\$20,820	\$21,382	\$21,704	\$21,271
	Sum of Medicare Payments for Target	\$8,827,526	\$8,937,794	\$8,529,489	\$8,487,162
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	493	452	519	537
	All Discharges with Transfer to SNF	2,963	3,035	2,825	3,057
	Proportion of Target to Denominator Discharges	16.6%	14.9%	18.4%	17.6%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,294	\$8,139	\$8,017	\$8,398
	Sum of Medicare Payments for Target	\$4,088,759	\$3,678,801	\$4,161,068	\$4,509,892
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,292	3,177	3,024	3,116
	All Discharges excl dc status 02,82,07,20	19,905	19,161	18,788	19,301
	Proportion of Target to Denominator Discharges	16.5%	16.6%	16.1%	16.1%
	Average Length of Stay for Target	5.7	6.0	5.4	5.6
	Average Medicare Payment for Target	\$11,678	\$12,413	\$11,361	\$11,493
	Sum of Medicare Payments for Target	\$38,442,953	\$39,437,371	\$34,355,169	\$35,813,086
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,421	2,315	2,167	2,242
	All Discharges excl dc status 02,82,07,20	19,905	19,161	18,788	19,301
	Proportion of Target to Denominator Discharges	12.2%	12.1%	11.5%	11.6%
	Average Length of Stay for Target	5.7	6.0	5.3	5.5
	Average Medicare Payment for Target	\$11,831	\$12,561	\$11,115	\$11,439
	Sum of Medicare Payments for Target	\$28,643,728	\$29,078,149	\$24,086,106	\$25,646,141

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arkansas

15

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	2,604	2,430	2,550	2,609
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	13,061	12,647	12,044	12,418
	Proportion of Target to Denominator Discharges	19.9%	19.2%	21.2%	21.0%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$6,326	\$6,550	\$5,901	\$6,088
	Sum of Medicare Payments for Target	\$16,471,957	\$15,917,594	\$15,048,674	\$15,882,970
Two-Day Stays for Surgical DRGs	Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	950	915	899	872
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	5,437	5,298	5,264	5,338
	Proportion of Target to Denominator Discharges	17.5%	17.3%	17.1%	16.3%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$13,475	\$13,404	\$13,576	\$14,029
	Sum of Medicare Payments for Target	\$12,801,393	\$12,264,722	\$12,204,527	\$12,233,170
One-Day Stays for Medical DRGs	One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	1,194	1,082	1,166	1,208
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	13,061	12,647	12,044	12,418
	Proportion of Target to Denominator Discharges	9.1%	8.6%	9.7%	9.7%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$5,592	\$5,757	\$5,137	\$5,299
	Sum of Medicare Payments for Target	\$6,676,414	\$6,228,587	\$5,989,724	\$6,401,726
One-Day Stays for Surgical DRGs	One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	977	1,040	1,107	1,172
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	5,437	5,298	5,264	5,338
	Proportion of Target to Denominator Discharges	18.0%	19.6%	21.0%	22.0%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$16,438	\$15,691	\$16,137	\$16,162
	Sum of Medicare Payments for Target	\$16,060,340	\$16,318,341	\$17,863,578	\$18,941,639

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - Arizona, 64 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	881	925	825	784
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	994	1,021	936	927
	Proportion of Target to Denominator Discharges	88.6%	90.6%	88.1%	84.6%
	Average Length of Stay for Target	3.9	4.1	4.1	3.8
	Average Medicare Payment for Target	\$9,551	\$10,018	\$9,453	\$9,372
	Sum of Medicare Payments for Target	\$8,414,808	\$9,266,826	\$7,798,991	\$7,347,824
Respiratory Infections	DRGs 177, 178	3,010	2,788	861	972
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	3,722	3,581	1,695	1,554
	Proportion of Target to Denominator Discharges	80.9%	77.9%	50.8%	62.5%
	Average Length of Stay for Target	6.8	6.5	5.1	4.9
	Average Medicare Payment for Target	\$16,252	\$15,702	\$13,484	\$13,271
	Sum of Medicare Payments for Target	\$48,917,325	\$43,776,244	\$11,609,928	\$12,899,705
Simple Pneumonia	DRGs 193, 194	650	713	756	515
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	991	1,089	1,155	766
	Proportion of Target to Denominator Discharges	65.6%	65.5%	65.5%	67.2%
	Average Length of Stay for Target	4.5	4.5	4.3	4.2
	Average Medicare Payment for Target	\$8,138	\$8,591	\$8,301	\$7,846
	Sum of Medicare Payments for Target	\$5,289,800	\$6,125,596	\$6,275,812	\$4,040,898
Septicemia	DRGs 870, 871, 872	3,779	3,619	3,037	2,844
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	5,445	5,263	4,578	4,148
	Proportion of Target to Denominator Discharges	69.4%	68.8%	66.3%	68.6%
	Average Length of Stay for Target	7.0	7.2	6.0	6.0
	Average Medicare Payment for Target	\$15,586	\$15,373	\$13,252	\$12,885
	Sum of Medicare Payments for Target	\$58,900,476	\$55,634,004	\$40,246,783	\$36,645,151
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	251	243	223	231
	All Discharges for Surgical DRGs	9,690	10,240	10,035	9,427
	Proportion of Target to Denominator Discharges	2.6%	2.4%	2.2%	2.5%
	Average Length of Stay for Target	9.3	9.1	8.1	7.2
	Average Medicare Payment for Target	\$27,381	\$27,916	\$24,464	\$23,938
	Sum of Medicare Payments for Target	\$6,872,587	\$6,783,668	\$5,455,534	\$5,529,614

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arizona

17

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	17,366	17,296	14,731	13,933
	All Discharges for Medical DRGs w/ or w/o CC or MCC	21,878	21,431	19,265	18,361
	Proportion of Target to Denominator Discharges	79.4%	80.7%	76.5%	75.9%
	Average Length of Stay for Target	5.5	5.6	5.0	5.0
	Average Medicare Payment for Target	\$11,667	\$11,553	\$10,298	\$10,485
	Sum of Medicare Payments for Target	\$202,602,790	\$199,825,346	\$151,704,784	\$146,087,840
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	5,569	5,861	5,730	5,462
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	8,951	9,465	9,344	8,805
	Proportion of Target to Denominator Discharges	62.2%	61.9%	61.3%	62.0%
	Average Length of Stay for Target	7.3	7.1	6.8	6.7
	Average Medicare Payment for Target	\$27,343	\$27,235	\$26,656	\$26,395
	Sum of Medicare Payments for Target	\$152,274,979	\$159,622,651	\$152,741,202	\$144,170,843
Single CC or MCC	Discharges with one CC or MCC coded on the claim	10,527	10,389	9,412	8,892
	All Discharges with one or more CC or MCC coded on the claim	22,878	23,105	20,450	19,381
	Proportion of Target to Denominator Discharges	46.0%	45.0%	46.0%	45.9%
	Average Length of Stay for Target	4.8	4.7	4.4	4.4
	Average Medicare Payment for Target	\$14,891	\$14,880	\$14,476	\$14,752
	Sum of Medicare Payments for Target	\$156,761,212	\$154,587,121	\$136,251,681	\$131,179,051
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	418	406	456	488
	All Discharges with one or more MCCs including severe malnutrition	1,253	1,300	1,234	1,303
	Proportion of Target to Denominator Discharges	33.4%	31.2%	37.0%	37.5%
	Average Length of Stay for Target	6.4	5.8	5.6	5.9
	Average Medicare Payment for Target	\$15,527	\$14,917	\$14,468	\$14,664
	Sum of Medicare Payments for Target	\$6,490,197	\$6,056,211	\$6,597,549	\$7,156,271
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	574	492	226	175
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	4,348	4,101	3,273	3,059
	Proportion of Target to Denominator Discharges	13.2%	12.0%	6.9%	5.7%
	Average Length of Stay for Target	19.5	21.1	17.1	18.8
	Average Medicare Payment for Target	\$71,681	\$71,469	\$77,009	\$81,692
	Sum of Medicare Payments for Target	\$41,144,756	\$35,162,661	\$17,404,088	\$14,296,157

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arizona

18

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	506	536	467	479
	All DRGs 246-249 Discharges + outpatient claims	1,111	1,195	1,118	1,035
	Proportion of Target to Denominator Discharges	45.5%	44.9%	41.8%	46.3%
	Average Length of Stay for Target	3.3	3.5	3.0	3.1
	Average Medicare Payment for Target	\$16,998	\$17,841	\$16,682	\$16,795
	Sum of Medicare Payments for Target	\$8,600,767	\$9,562,563	\$7,790,424	\$8,044,834
Total Knee Replacement	Inpatient discharges with knee replacement px codes	393	420	369	327
	Inpatient discharges + outpatient claims with knee replacement px codes	1,620	1,829	1,547	1,514
	Proportion of Target to Denominator Discharges	24.3%	23.0%	23.9%	21.6%
	Average Medicare Payment for Target	\$14,451	\$14,313	\$14,942	\$15,736
	Sum of Medicare Payments for Target	\$5,679,158	\$6,011,489	\$5,513,494	\$5,145,621
Syncope	DRG 312	166	168	165	176
	All medical DRGs in MDC 05 Discharges	3,666	3,721	3,765	3,339
	Proportion of Target to Denominator Discharges	4.5%	4.5%	4.4%	5.3%
	Average Length of Stay for Target	2.6	2.8	3.1	2.7
	Average Medicare Payment for Target	\$5,269	\$5,387	\$5,205	\$5,337
	Sum of Medicare Payments for Target	\$874,635	\$905,034	\$858,769	\$939,362
Other Circulatory System Diagnoses	DRGs 314, 315, 316	219	222	258	226
	All medical DRGs in MDC 05 Discharges	3,666	3,721	3,765	3,339
	Proportion of Target to Denominator Discharges	6.0%	6.0%	6.9%	6.8%
	Average Length of Stay for Target	6.0	5.4	5.2	5.7
	Average Medicare Payment for Target	\$12,183	\$11,606	\$11,562	\$11,744
	Sum of Medicare Payments for Target	\$2,668,162	\$2,576,608	\$2,983,107	\$2,654,159
Other Digestive System Diagnoses	DRGs 393, 394, 395	243	245	247	234
	All medical DRGs in MDC 06 Discharges	2,174	2,141	2,173	2,084
	Proportion of Target to Denominator Discharges	11.2%	11.4%	11.4%	11.2%
	Average Length of Stay for Target	4.2	4.0	3.9	4.4
	Average Medicare Payment for Target	\$8,854	\$7,928	\$7,799	\$7,919
	Sum of Medicare Payments for Target	\$2,151,531	\$1,942,320	\$1,926,464	\$1,853,061

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arizona

19

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	235	213	243	228
	All medical DRGs in MDC 08 Discharges	857	848	871	862
	Proportion of Target to Denominator Discharges	27.4%	25.1%	27.9%	26.5%
	Average Length of Stay for Target	3.8	3.8	3.6	3.6
	Average Medicare Payment for Target	\$7,019	\$7,190	\$6,975	\$6,903
	Sum of Medicare Payments for Target	\$1,649,472	\$1,531,420	\$1,694,962	\$1,573,855
Spinal Fusion	Claims with spinal fusion procedure codes	873	935	896	863
	Claims with spinal procedure codes	1,855	1,743	1,586	1,554
	Proportion of Target to Denominator Discharges	47.1%	53.6%	56.5%	55.5%
	Average Length of Stay for Target	3.1	3.2	3.2	3.3
	Average Medicare Payment for Target	\$27,600	\$29,520	\$30,106	\$29,240
	Sum of Medicare Payments for Target	\$24,094,659	\$27,600,991	\$26,974,845	\$25,234,069
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	640	626	656	688
	All Discharges with Transfer to SNF	5,130	5,091	5,109	4,905
	Proportion of Target to Denominator Discharges	12.5%	12.3%	12.8%	14.0%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,033	\$10,717	\$10,664	\$10,807
	Sum of Medicare Payments for Target	\$7,061,407	\$6,708,941	\$6,995,887	\$7,435,026
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	4,742	4,728	4,486	4,267
	All Discharges excl dc status 02,82,07,20	30,437	30,573	28,888	27,456
	Proportion of Target to Denominator Discharges	15.6%	15.5%	15.5%	15.5%
	Average Length of Stay for Target	6.4	6.3	5.9	5.8
	Average Medicare Payment for Target	\$15,448	\$15,632	\$15,143	\$14,881
	Sum of Medicare Payments for Target	\$73,253,982	\$73,908,221	\$67,930,241	\$63,495,773
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	3,109	3,187	3,031	2,875
	All Discharges excl dc status 02,82,07,20	30,437	30,573	28,888	27,456
	Proportion of Target to Denominator Discharges	10.2%	10.4%	10.5%	10.5%
	Average Length of Stay for Target	6.2	6.1	5.9	5.7
	Average Medicare Payment for Target	\$15,536	\$15,657	\$15,318	\$15,305
	Sum of Medicare Payments for Target	\$48,302,109	\$49,897,473	\$46,428,815	\$44,001,207

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Arizona

20

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,474	3,403	3,464	3,413
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	18,513	18,332	16,894	15,952
	<b>Proportion of Target to Denominator Discharges</b>	18.8%	18.6%	20.5%	21.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,166	\$8,252	\$7,658	\$7,555
	<b>Sum of Medicare Payments for Target</b>	\$28,367,946	\$28,082,934	\$26,527,134	\$25,784,150
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,323	1,430	1,434	1,296
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,630	9,162	9,003	8,461
	<b>Proportion of Target to Denominator Discharges</b>	15.3%	15.6%	15.9%	15.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,717	\$17,312	\$17,396	\$17,558
	<b>Sum of Medicare Payments for Target</b>	\$23,439,949	\$24,756,331	\$24,946,326	\$22,755,767
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,575	1,652	1,658	1,514
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	18,513	18,332	16,894	15,952
	<b>Proportion of Target to Denominator Discharges</b>	8.5%	9.0%	9.8%	9.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,553	\$7,735	\$6,992	\$6,981
	<b>Sum of Medicare Payments for Target</b>	\$11,895,708	\$12,778,934	\$11,591,934	\$10,569,362
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,614	1,832	1,809	1,708
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,630	9,162	9,003	8,461
	<b>Proportion of Target to Denominator Discharges</b>	18.7%	20.0%	20.1%	20.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,255	\$20,023	\$20,086	\$20,618
	<b>Sum of Medicare Payments for Target</b>	\$32,691,598	\$36,681,870	\$36,335,138	\$35,216,006

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - California, 288 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	4,295	3,946	4,086	3,939
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	4,997	4,711	4,758	4,611
	Proportion of Target to Denominator Discharges	86.0%	83.8%	85.9%	85.4%
	Average Length of Stay for Target	4.7	4.9	4.6	4.8
	Average Medicare Payment for Target	\$13,969	\$14,578	\$13,718	\$13,879
	Sum of Medicare Payments for Target	\$59,995,102	\$57,523,102	\$56,050,716	\$54,669,153
Respiratory Infections	DRGs 177, 178	5,177	9,892	3,879	5,931
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	7,984	12,655	6,745	8,387
	Proportion of Target to Denominator Discharges	64.8%	78.2%	57.5%	70.7%
	Average Length of Stay for Target	7.2	6.6	5.7	5.8
	Average Medicare Payment for Target	\$20,679	\$21,076	\$18,404	\$18,478
	Sum of Medicare Payments for Target	\$107,057,499	\$208,486,422	\$71,387,685	\$109,595,375
Simple Pneumonia	DRGs 193, 194	2,606	2,496	2,610	2,179
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	4,419	4,059	4,368	3,623
	Proportion of Target to Denominator Discharges	59.0%	61.5%	59.8%	60.1%
	Average Length of Stay for Target	4.8	5.2	4.6	4.9
	Average Medicare Payment for Target	\$10,535	\$11,000	\$10,658	\$10,544
	Sum of Medicare Payments for Target	\$27,454,250	\$27,455,478	\$27,818,611	\$22,974,362
Septicemia	DRGs 870, 871, 872	18,970	19,788	18,136	18,746
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	26,210	26,742	24,948	25,176
	Proportion of Target to Denominator Discharges	72.4%	74.0%	72.7%	74.5%
	Average Length of Stay for Target	6.7	7.2	6.5	6.7
	Average Medicare Payment for Target	\$20,259	\$22,393	\$19,149	\$19,764
	Sum of Medicare Payments for Target	\$384,318,945	\$443,121,601	\$347,295,171	\$370,486,704
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	935	943	866	882
	All Discharges for Surgical DRGs	39,979	38,391	40,353	38,604
	Proportion of Target to Denominator Discharges	2.3%	2.5%	2.1%	2.3%
	Average Length of Stay for Target	10.0	10.4	9.8	10.2
	Average Medicare Payment for Target	\$40,315	\$39,317	\$37,422	\$39,498

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report California

22

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Unrelated OR Procedure	Sum of Medicare Payments for Target	\$37,694,855	\$37,075,674	\$32,407,077	\$34,837,293
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	77,420	81,827	74,810	77,207
	All Discharges for Medical DRGs w/ or w/o CC or MCC	99,274	100,683	96,833	98,847
	Proportion of Target to Denominator Discharges	78.0%	81.3%	77.3%	78.1%
	Average Length of Stay for Target	5.5	5.8	5.3	5.5
	Average Medicare Payment for Target	\$15,214	\$16,193	\$14,773	\$15,093
	Sum of Medicare Payments for Target	\$1,177,835,269	\$1,325,021,840	\$1,105,163,903	\$1,165,318,507
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	24,324	23,504	24,504	23,831
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	37,011	35,320	37,438	35,859
	Proportion of Target to Denominator Discharges	65.7%	66.5%	65.5%	66.5%
	Average Length of Stay for Target	7.9	8.1	7.8	8.0
	Average Medicare Payment for Target	\$39,970	\$40,264	\$38,995	\$39,649
	Sum of Medicare Payments for Target	\$972,231,428	\$946,365,103	\$955,538,789	\$944,882,394
Single CC or MCC	Discharges with one CC or MCC coded on the claim	44,889	45,667	44,501	45,316
	All Discharges with one or more CC or MCC coded on the claim	101,628	105,137	99,249	100,924
	Proportion of Target to Denominator Discharges	44.2%	43.4%	44.8%	44.9%
	Average Length of Stay for Target	4.8	4.9	4.7	4.8
	Average Medicare Payment for Target	\$19,416	\$19,567	\$19,071	\$18,991
	Sum of Medicare Payments for Target	\$871,545,160	\$893,545,635	\$848,667,296	\$860,613,385
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	2,318	2,054	2,385	2,559
	All Discharges with one or more MCCs including severe malnutrition	7,147	7,119	7,223	7,653
	Proportion of Target to Denominator Discharges	32.4%	28.9%	33.0%	33.4%
	Average Length of Stay for Target	6.4	6.4	6.3	6.1
	Average Medicare Payment for Target	\$20,169	\$19,840	\$19,651	\$19,197
	Sum of Medicare Payments for Target	\$46,752,192	\$40,751,380	\$46,868,125	\$49,125,260

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report California

23

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	2,192	2,676	1,727	1,747
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	21,030	22,172	19,708	20,222
	Proportion of Target to Denominator Discharges	10.4%	12.1%	8.8%	8.6%
	Average Length of Stay for Target	20.9	22.0	20.2	20.2
	Average Medicare Payment for Target	\$108,074	\$108,767	\$104,311	\$101,301
	Sum of Medicare Payments for Target	\$236,898,280	\$291,061,742	\$180,145,231	\$176,972,804
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	1,849	1,775	1,779	1,602
	All DRGs 246-249 Discharges + outpatient claims	3,904	3,837	3,943	3,554
	Proportion of Target to Denominator Discharges	47.4%	46.3%	45.1%	45.1%
	Average Length of Stay for Target	3.7	3.7	3.6	3.7
	Average Medicare Payment for Target	\$24,374	\$24,733	\$24,468	\$24,554
	Sum of Medicare Payments for Target	\$45,066,993	\$43,901,707	\$43,527,745	\$39,335,776
Total Knee Replacement	Inpatient discharges with knee replacement px codes	1,885	1,681	1,857	1,664
	Inpatient discharges + outpatient claims with knee replacement px codes	4,925	4,987	5,173	4,899
	Proportion of Target to Denominator Discharges	38.3%	33.7%	35.9%	34.0%
	Average Medicare Payment for Target	\$20,007	\$20,171	\$19,915	\$20,799
	Sum of Medicare Payments for Target	\$37,713,137	\$33,908,239	\$36,982,567	\$34,609,674
Syncope	DRG 312	1,085	983	1,100	1,094
	All medical DRGs in MDC 05 Discharges	19,053	18,572	18,731	17,646
	Proportion of Target to Denominator Discharges	5.7%	5.3%	5.9%	6.2%
	Average Length of Stay for Target	3.0	3.1	2.8	2.9
	Average Medicare Payment for Target	\$7,874	\$7,858	\$7,746	\$7,564
	Sum of Medicare Payments for Target	\$8,543,549	\$7,724,270	\$8,520,552	\$8,275,413
Other Circulatory System Diagnoses	DRGs 314, 315, 316	1,119	1,104	1,166	1,181
	All medical DRGs in MDC 05 Discharges	19,053	18,572	18,731	17,646
	Proportion of Target to Denominator Discharges	5.9%	5.9%	6.2%	6.7%
	Average Length of Stay for Target	6.3	6.1	5.8	6.0
	Average Medicare Payment for Target	\$18,881	\$18,236	\$17,830	\$17,754
	Sum of Medicare Payments for Target	\$21,128,026	\$20,131,994	\$20,790,099	\$20,967,027

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report California

24

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Other Digestive System Diagnoses	DRGs 393, 394, 395	1,431	1,372	1,349	1,465
	All medical DRGs in MDC 06 Discharges	10,972	10,425	10,932	10,951
	Proportion of Target to Denominator Discharges	13.0%	13.2%	12.3%	13.4%
	Average Length of Stay for Target	4.6	4.8	4.8	4.5
	Average Medicare Payment for Target	\$12,076	\$12,811	\$12,246	\$11,890
	Sum of Medicare Payments for Target	\$17,280,941	\$17,576,140	\$16,520,419	\$17,418,857
Medical Back Problems	DRGs 551, 552	1,193	1,107	1,227	1,193
	All medical DRGs in MDC 08 Discharges	4,232	3,841	4,121	4,175
	Proportion of Target to Denominator Discharges	28.2%	28.8%	29.8%	28.6%
	Average Length of Stay for Target	4.2	4.4	4.1	4.1
	Average Medicare Payment for Target	\$10,076	\$10,110	\$9,709	\$9,898
	Sum of Medicare Payments for Target	\$12,021,161	\$11,192,021	\$11,913,167	\$11,808,784
Spinal Fusion	Claims with spinal fusion procedure codes	2,997	2,735	2,862	2,871
	Claims with spinal procedure codes	6,105	5,677	5,907	5,777
	Proportion of Target to Denominator Discharges	49.1%	48.2%	48.5%	49.7%
	Average Length of Stay for Target	4.9	4.9	4.9	5.0
	Average Medicare Payment for Target	\$49,028	\$50,961	\$48,665	\$50,326
	Sum of Medicare Payments for Target	\$146,937,407	\$139,378,318	\$139,277,875	\$144,485,561
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	5,067	4,268	4,919	4,904
	All Discharges with Transfer to SNF	32,283	31,242	32,031	33,159
	Proportion of Target to Denominator Discharges	15.7%	13.7%	15.4%	14.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$13,042	\$13,317	\$13,115	\$12,963
	Sum of Medicare Payments for Target	\$66,081,436	\$56,838,735	\$64,511,137	\$63,570,262
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	23,957	24,275	23,919	23,824
	All Discharges excl dc status 02,82,07,20	136,066	134,993	135,308	135,118
	Proportion of Target to Denominator Discharges	17.6%	18.0%	17.7%	17.6%
	Average Length of Stay for Target	6.4	6.6	6.3	6.4
	Average Medicare Payment for Target	\$20,745	\$21,733	\$20,978	\$20,620
	Sum of Medicare Payments for Target	\$496,996,391	\$527,568,692	\$501,776,624	\$491,258,376

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report California

25

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	16,412	16,656	16,696	16,215
	All Discharges excl dc status 02,82,07,20	136,066	134,993	135,308	135,118
	Proportion of Target to Denominator Discharges	12.1%	12.3%	12.3%	12.0%
	Average Length of Stay for Target	6.3	6.5	6.2	6.3
	Average Medicare Payment for Target	\$20,409	\$21,445	\$20,624	\$20,402
	Sum of Medicare Payments for Target	\$334,956,239	\$357,193,737	\$344,344,326	\$330,813,204
Two-Day Stays for Medical DRGs	Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	17,869	17,255	17,894	17,865
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	91,314	91,874	89,452	90,300
	Proportion of Target to Denominator Discharges	19.6%	18.8%	20.0%	19.8%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$10,214	\$10,615	\$9,884	\$9,918
	Sum of Medicare Payments for Target	\$182,514,523	\$183,157,209	\$176,859,941	\$177,184,747
Two-Day Stays for Surgical DRGs	Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	5,555	5,184	5,563	5,268
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	35,913	34,488	36,268	34,562
	Proportion of Target to Denominator Discharges	15.5%	15.0%	15.3%	15.2%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$23,845	\$24,043	\$24,080	\$23,823
	Sum of Medicare Payments for Target	\$132,460,440	\$124,639,594	\$133,959,768	\$125,501,835
One-Day Stays for Medical DRGs	One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	7,055	6,869	7,155	6,986
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	91,314	91,874	89,452	90,300
	Proportion of Target to Denominator Discharges	7.7%	7.5%	8.0%	7.7%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$9,410	\$9,694	\$9,005	\$9,049
	Sum of Medicare Payments for Target	\$66,386,003	\$66,590,783	\$64,433,519	\$63,217,280

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report California

26

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	5,248	5,392	5,792	5,451
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	35,913	34,488	36,268	34,562
	<b>Proportion of Target to Denominator Discharges</b>	14.6%	15.6%	16.0%	15.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$26,681	\$26,676	\$26,015	\$26,703
	<b>Sum of Medicare Payments for Target</b>	\$140,021,149	\$143,836,740	\$150,679,069	\$145,557,429

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Colorado, 50 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	476	437	480	505
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	511	480	533	551
	Proportion of Target to Denominator Discharges	93.2%	91.0%	90.1%	91.7%
	Average Length of Stay for Target	4.6	4.3	4.3	4.0
	Average Medicare Payment for Target	\$10,438	\$10,345	\$9,449	\$9,346
	Sum of Medicare Payments for Target	\$4,968,273	\$4,520,950	\$4,535,750	\$4,719,479
Respiratory Infections	DRGs 177, 178	1,719	1,205	507	639
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,033	1,551	954	927
	Proportion of Target to Denominator Discharges	84.6%	77.7%	53.1%	68.9%
	Average Length of Stay for Target	6.8	6.4	4.9	4.5
	Average Medicare Payment for Target	\$16,414	\$15,394	\$13,301	\$13,385
	Sum of Medicare Payments for Target	\$28,216,493	\$18,549,547	\$6,743,496	\$8,552,763
Simple Pneumonia	DRGs 193, 194	293	320	417	263
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	438	472	618	417
	Proportion of Target to Denominator Discharges	66.9%	67.8%	67.5%	63.1%
	Average Length of Stay for Target	3.9	4.0	3.9	4.1
	Average Medicare Payment for Target	\$8,568	\$8,230	\$8,071	\$8,550
	Sum of Medicare Payments for Target	\$2,510,472	\$2,633,500	\$3,365,400	\$2,248,694
Septicemia	DRGs 870, 871, 872	2,247	1,961	1,885	1,811
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	3,088	2,764	2,706	2,505
	Proportion of Target to Denominator Discharges	72.8%	70.9%	69.7%	72.3%
	Average Length of Stay for Target	6.6	6.5	5.6	5.8
	Average Medicare Payment for Target	\$16,355	\$14,549	\$13,049	\$13,243
	Sum of Medicare Payments for Target	\$36,748,971	\$28,530,762	\$24,597,603	\$23,982,842
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	129	149	128	145
	All Discharges for Surgical DRGs	6,133	6,289	6,369	6,644
	Proportion of Target to Denominator Discharges	2.1%	2.4%	2.0%	2.2%
	Average Length of Stay for Target	9.1	9.2	8.9	7.9
	Average Medicare Payment for Target	\$28,176	\$26,850	\$25,952	\$25,528
	Sum of Medicare Payments for Target	\$3,634,764	\$4,000,657	\$3,321,876	\$3,701,567

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Colorado

28

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	9,835	9,283	8,804	8,747
	All Discharges for Medical DRGs w/ or w/o CC or MCC	12,079	11,559	11,360	11,405
	Proportion of Target to Denominator Discharges	81.4%	80.3%	77.5%	76.7%
	Average Length of Stay for Target	5.4	5.4	4.9	4.9
	Average Medicare Payment for Target	\$12,154	\$11,506	\$10,659	\$10,668
	Sum of Medicare Payments for Target	\$119,537,068	\$106,809,926	\$93,844,703	\$93,309,932
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	3,617	3,628	3,748	3,922
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	5,631	5,766	5,922	6,222
	Proportion of Target to Denominator Discharges	64.2%	62.9%	63.3%	63.0%
	Average Length of Stay for Target	7.7	7.3	7.1	7.1
	Average Medicare Payment for Target	\$29,753	\$28,812	\$28,719	\$27,923
	Sum of Medicare Payments for Target	\$107,617,182	\$104,530,365	\$107,637,368	\$109,515,229
Single CC or MCC	Discharges with one CC or MCC coded on the claim	6,025	5,743	5,567	5,685
	All Discharges with one or more CC or MCC coded on the claim	13,421	12,893	12,548	12,650
	Proportion of Target to Denominator Discharges	44.9%	44.5%	44.4%	44.9%
	Average Length of Stay for Target	4.9	4.7	4.4	4.4
	Average Medicare Payment for Target	\$16,403	\$15,726	\$15,568	\$15,643
	Sum of Medicare Payments for Target	\$98,827,560	\$90,311,608	\$86,665,263	\$88,932,151
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	301	279	315	374
	All Discharges with one or more MCCs including severe malnutrition	766	815	803	924
	Proportion of Target to Denominator Discharges	39.3%	34.2%	39.2%	40.5%
	Average Length of Stay for Target	6.3	7.1	6.0	6.1
	Average Medicare Payment for Target	\$15,197	\$15,806	\$15,525	\$14,561
	Sum of Medicare Payments for Target	\$4,574,301	\$4,409,885	\$4,890,263	\$5,445,662
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	420	291	129	118
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,657	2,274	2,039	1,973
	Proportion of Target to Denominator Discharges	15.8%	12.8%	6.3%	6.0%
	Average Length of Stay for Target	23.6	28.2	25.2	22.8
	Average Medicare Payment for Target	\$89,743	\$89,692	\$78,710	\$79,319
	Sum of Medicare Payments for Target	\$37,692,124	\$26,100,432	\$10,153,648	\$9,359,669

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Colorado

29

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	357	338	305	341
	All DRGs 246-249 Discharges + outpatient claims	651	621	619	643
	Proportion of Target to Denominator Discharges	54.8%	54.4%	49.3%	53.0%
	Average Length of Stay for Target	2.8	2.9	2.9	2.5
	Average Medicare Payment for Target	\$17,608	\$17,519	\$17,395	\$16,369
	Sum of Medicare Payments for Target	\$6,286,173	\$5,921,283	\$5,305,436	\$5,581,803
Total Knee Replacement	Inpatient discharges with knee replacement px codes	196	269	245	244
	Inpatient discharges + outpatient claims with knee replacement px codes	1,148	1,270	1,350	1,388
	Proportion of Target to Denominator Discharges	17.1%	21.2%	18.1%	17.6%
	Average Medicare Payment for Target	\$16,917	\$17,944	\$17,281	\$19,067
	Sum of Medicare Payments for Target	\$3,315,749	\$4,827,003	\$4,233,849	\$4,652,267
Syncope	DRG 312	80	84	92	96
	All medical DRGs in MDC 05 Discharges	1,719	1,884	1,922	1,838
	Proportion of Target to Denominator Discharges	4.7%	4.5%	4.8%	5.2%
	Average Length of Stay for Target	2.8	2.7	3.2	2.8
	Average Medicare Payment for Target	\$5,569	\$5,581	\$5,236	\$5,495
	Sum of Medicare Payments for Target	\$445,550	\$468,791	\$481,748	\$527,507
Other Circulatory System Diagnoses	DRGs 314, 315, 316	109	111	124	120
	All medical DRGs in MDC 05 Discharges	1,719	1,884	1,922	1,838
	Proportion of Target to Denominator Discharges	6.3%	5.9%	6.5%	6.5%
	Average Length of Stay for Target	4.3	5.4	4.5	5.0
	Average Medicare Payment for Target	\$12,590	\$11,690	\$11,821	\$11,507
	Sum of Medicare Payments for Target	\$1,372,286	\$1,297,591	\$1,465,748	\$1,380,788
Other Digestive System Diagnoses	DRGs 393, 394, 395	157	136	169	147
	All medical DRGs in MDC 06 Discharges	1,201	1,169	1,296	1,236
	Proportion of Target to Denominator Discharges	13.1%	11.6%	13.0%	11.9%
	Average Length of Stay for Target	4.6	3.4	4.7	4.1
	Average Medicare Payment for Target	\$8,390	\$8,135	\$8,893	\$7,771
	Sum of Medicare Payments for Target	\$1,317,301	\$1,106,380	\$1,502,931	\$1,142,336

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Colorado

30

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	174	145	146	188
	All medical DRGs in MDC 08 Discharges	523	507	565	608
	Proportion of Target to Denominator Discharges	33.3%	28.6%	25.8%	30.9%
	Average Length of Stay for Target	3.5	3.9	3.8	4.0
	Average Medicare Payment for Target	\$7,226	\$6,910	\$7,085	\$6,992
	Sum of Medicare Payments for Target	\$1,257,258	\$1,001,899	\$1,034,407	\$1,314,505
Spinal Fusion	Claims with spinal fusion procedure codes	771	779	814	850
	Claims with spinal procedure codes	1,297	1,331	1,385	1,472
	Proportion of Target to Denominator Discharges	59.4%	58.5%	58.8%	57.7%
	Average Length of Stay for Target	4.3	4.1	3.8	3.9
	Average Medicare Payment for Target	\$35,644	\$36,229	\$35,956	\$35,921
	Sum of Medicare Payments for Target	\$27,481,648	\$28,222,670	\$29,268,425	\$30,532,666
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	470	475	533	563
	All Discharges with Transfer to SNF	3,416	3,473	3,388	3,537
	Proportion of Target to Denominator Discharges	13.8%	13.7%	15.7%	15.9%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,394	\$11,531	\$11,700	\$11,173
	Sum of Medicare Payments for Target	\$5,355,131	\$5,477,314	\$6,236,262	\$6,290,573
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	2,531	2,598	2,550	2,595
	All Discharges excl dc status 02,82,07,20	17,803	17,499	17,742	18,023
	Proportion of Target to Denominator Discharges	14.2%	14.8%	14.4%	14.4%
	Average Length of Stay for Target	6.4	5.9	5.9	5.8
	Average Medicare Payment for Target	\$16,949	\$16,407	\$15,687	\$15,528
	Sum of Medicare Payments for Target	\$42,897,530	\$42,626,260	\$40,001,424	\$40,294,819
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,664	1,832	1,773	1,827
	All Discharges excl dc status 02,82,07,20	17,803	17,499	17,742	18,023
	Proportion of Target to Denominator Discharges	9.3%	10.5%	10.0%	10.1%
	Average Length of Stay for Target	6.2	5.6	5.9	5.7
	Average Medicare Payment for Target	\$16,946	\$15,956	\$15,667	\$15,594
	Sum of Medicare Payments for Target	\$28,197,575	\$29,231,209	\$27,776,719	\$28,490,443

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Colorado

31

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,146	2,063	2,193	2,092
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,445	9,937	9,777	9,727
	<b>Proportion of Target to Denominator Discharges</b>	20.5%	20.8%	22.4%	21.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,709	\$8,304	\$7,917	\$7,878
	<b>Sum of Medicare Payments for Target</b>	\$18,688,664	\$17,130,130	\$17,360,967	\$16,481,045
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	886	834	849	999
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,446	5,532	5,649	5,816
	<b>Proportion of Target to Denominator Discharges</b>	16.3%	15.1%	15.0%	17.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$19,286	\$19,910	\$19,597	\$19,739
	<b>Sum of Medicare Payments for Target</b>	\$17,087,178	\$16,604,771	\$16,637,468	\$19,719,679
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	940	923	904	900
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,445	9,937	9,777	9,727
	<b>Proportion of Target to Denominator Discharges</b>	9.0%	9.3%	9.2%	9.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,939	\$7,530	\$7,305	\$7,155
	<b>Sum of Medicare Payments for Target</b>	\$7,462,208	\$6,949,738	\$6,603,961	\$6,439,074
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	948	1,092	1,125	1,024
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,446	5,532	5,649	5,816
	<b>Proportion of Target to Denominator Discharges</b>	17.4%	19.7%	19.9%	17.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,606	\$21,036	\$20,618	\$21,940
	<b>Sum of Medicare Payments for Target</b>	\$19,534,757	\$22,971,364	\$23,195,159	\$22,466,091

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - Connecticut, 27 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	519	475	525	480
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	593	542	593	551
	Proportion of Target to Denominator Discharges	87.5%	87.6%	88.5%	87.1%
	Average Length of Stay for Target	4.9	5.3	4.5	4.5
	Average Medicare Payment for Target	\$12,473	\$13,411	\$12,265	\$12,369
	Sum of Medicare Payments for Target	\$6,473,615	\$6,370,084	\$6,439,221	\$5,936,880
Respiratory Infections	DRGs 177, 178	936	1,446	802	863
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,381	1,762	1,313	1,286
	Proportion of Target to Denominator Discharges	67.8%	82.1%	61.1%	67.1%
	Average Length of Stay for Target	6.8	7.2	5.5	5.3
	Average Medicare Payment for Target	\$18,138	\$18,775	\$15,990	\$15,491
	Sum of Medicare Payments for Target	\$16,977,360	\$27,148,877	\$12,823,917	\$13,368,825
Simple Pneumonia	DRGs 193, 194	407	283	464	365
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	683	509	756	587
	Proportion of Target to Denominator Discharges	59.6%	55.6%	61.4%	62.2%
	Average Length of Stay for Target	4.5	4.9	4.9	4.6
	Average Medicare Payment for Target	\$9,657	\$10,074	\$9,724	\$9,261
	Sum of Medicare Payments for Target	\$3,930,206	\$2,850,858	\$4,511,753	\$3,380,403
Septicemia	DRGs 870, 871, 872	2,162	2,103	2,000	2,104
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	3,285	3,003	3,038	3,066
	Proportion of Target to Denominator Discharges	65.8%	70.0%	65.8%	68.6%
	Average Length of Stay for Target	7.2	7.9	6.6	6.6
	Average Medicare Payment for Target	\$18,293	\$19,737	\$16,462	\$16,258
	Sum of Medicare Payments for Target	\$39,550,118	\$41,505,903	\$32,924,469	\$34,206,769
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	134	138	141	134
	All Discharges for Surgical DRGs	4,838	4,360	4,512	4,503
	Proportion of Target to Denominator Discharges	2.8%	3.2%	3.1%	3.0%
	Average Length of Stay for Target	10.4	13.8	10.7	10.2
	Average Medicare Payment for Target	\$32,426	\$34,048	\$31,227	\$27,458
	Sum of Medicare Payments for Target	\$4,345,124	\$4,698,685	\$4,403,017	\$3,679,406

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Connecticut

33

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	10,800	10,658	10,400	10,308
	All Discharges for Medical DRGs w/ or w/o CC or MCC	13,666	13,020	13,058	13,093
	Proportion of Target to Denominator Discharges	79.0%	81.9%	79.6%	78.7%
	Average Length of Stay for Target	5.9	6.3	5.6	5.7
	Average Medicare Payment for Target	\$13,443	\$14,129	\$12,863	\$12,907
	Sum of Medicare Payments for Target	\$145,180,130	\$150,585,842	\$133,778,292	\$133,041,272
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	2,938	2,841	2,903	2,871
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	4,521	4,031	4,189	4,195
	Proportion of Target to Denominator Discharges	65.0%	70.5%	69.3%	68.4%
	Average Length of Stay for Target	8.7	8.9	8.5	8.1
	Average Medicare Payment for Target	\$34,465	\$35,776	\$33,607	\$31,958
	Sum of Medicare Payments for Target	\$101,258,644	\$101,641,004	\$97,561,999	\$91,750,411
Single CC or MCC	Discharges with one CC or MCC coded on the claim	6,111	5,861	5,907	5,953
	All Discharges with one or more CC or MCC coded on the claim	13,716	13,480	13,293	13,164
	Proportion of Target to Denominator Discharges	44.6%	43.5%	44.4%	45.2%
	Average Length of Stay for Target	5.2	5.2	4.9	4.8
	Average Medicare Payment for Target	\$16,812	\$17,031	\$16,459	\$16,154
	Sum of Medicare Payments for Target	\$102,735,215	\$99,815,860	\$97,224,326	\$96,165,648
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	298	261	341	334
	All Discharges with one or more MCCs including severe malnutrition	834	902	947	973
	Proportion of Target to Denominator Discharges	35.7%	28.9%	36.0%	34.3%
	Average Length of Stay for Target	7.2	7.5	6.7	6.9
	Average Medicare Payment for Target	\$17,426	\$17,484	\$17,493	\$16,643
	Sum of Medicare Payments for Target	\$5,192,974	\$4,563,220	\$5,965,070	\$5,558,756
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	201	246	161	140
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,371	2,328	2,164	2,247
	Proportion of Target to Denominator Discharges	8.5%	10.6%	7.4%	6.2%
	Average Length of Stay for Target	30.1	33.8	29.5	27.5
	Average Medicare Payment for Target	\$103,212	\$107,607	\$96,694	\$89,428
	Sum of Medicare Payments for Target	\$20,745,527	\$26,471,363	\$15,567,699	\$12,519,898

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Connecticut

34

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	218	204	184	190
	All DRGs 246-249 Discharges + outpatient claims	364	347	305	343
	Proportion of Target to Denominator Discharges	59.9%	58.8%	60.3%	55.4%
	Average Length of Stay for Target	4.1	4.4	4.6	3.4
	Average Medicare Payment for Target	\$22,547	\$24,133	\$23,939	\$21,670
	Sum of Medicare Payments for Target	\$4,915,275	\$4,923,108	\$4,404,706	\$4,117,311
Total Knee Replacement	Inpatient discharges with knee replacement px codes	215	133	143	138
	Inpatient discharges + outpatient claims with knee replacement px codes	640	644	610	619
	Proportion of Target to Denominator Discharges	33.6%	20.7%	23.4%	22.3%
	Average Medicare Payment for Target	\$18,739	\$17,450	\$17,702	\$18,192
	Sum of Medicare Payments for Target	\$4,028,804	\$2,320,823	\$2,531,318	\$2,510,467
Syncope	DRG 312	146	128	143	177
	All medical DRGs in MDC 05 Discharges	2,838	2,578	2,637	2,484
	Proportion of Target to Denominator Discharges	5.1%	5.0%	5.4%	7.1%
	Average Length of Stay for Target	3.2	3.1	3.2	2.9
	Average Medicare Payment for Target	\$6,709	\$6,707	\$6,476	\$6,608
	Sum of Medicare Payments for Target	\$979,572	\$858,483	\$926,127	\$1,169,685
Other Circulatory System Diagnoses	DRGs 314, 315, 316	145	126	144	138
	All medical DRGs in MDC 05 Discharges	2,838	2,578	2,637	2,484
	Proportion of Target to Denominator Discharges	5.1%	4.9%	5.5%	5.6%
	Average Length of Stay for Target	6.4	6.2	6.5	5.3
	Average Medicare Payment for Target	\$15,912	\$15,351	\$14,977	\$13,884
	Sum of Medicare Payments for Target	\$2,307,310	\$1,934,243	\$2,156,662	\$1,916,015
Other Digestive System Diagnoses	DRGs 393, 394, 395	161	145	169	172
	All medical DRGs in MDC 06 Discharges	1,465	1,341	1,409	1,447
	Proportion of Target to Denominator Discharges	11.0%	10.8%	12.0%	11.9%
	Average Length of Stay for Target	4.5	5.0	4.5	4.6
	Average Medicare Payment for Target	\$9,879	\$9,816	\$10,553	\$11,063
	Sum of Medicare Payments for Target	\$1,590,580	\$1,423,335	\$1,783,415	\$1,902,806

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Connecticut

35

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	139	125	127	119
	All medical DRGs in MDC 08 Discharges	514	478	498	478
	Proportion of Target to Denominator Discharges	27.0%	26.2%	25.5%	24.9%
	Average Length of Stay for Target	4.6	4.2	4.4	4.5
	Average Medicare Payment for Target	\$9,252	\$9,852	\$9,612	\$9,322
	Sum of Medicare Payments for Target	\$1,286,005	\$1,231,496	\$1,220,753	\$1,109,275
Spinal Fusion	Claims with spinal fusion procedure codes	350	334	330	339
	Claims with spinal procedure codes	670	616	633	642
	Proportion of Target to Denominator Discharges	52.2%	54.2%	52.1%	52.8%
	Average Length of Stay for Target	4.9	4.3	4.6	3.9
	Average Medicare Payment for Target	\$40,590	\$40,094	\$40,181	\$39,478
	Sum of Medicare Payments for Target	\$14,206,613	\$13,391,297	\$13,259,785	\$13,383,050
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	757	734	801	781
	All Discharges with Transfer to SNF	5,505	5,455	5,328	5,405
	Proportion of Target to Denominator Discharges	13.8%	13.5%	15.0%	14.4%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$12,226	\$12,116	\$12,215	\$12,153
	Sum of Medicare Payments for Target	\$9,255,066	\$8,893,430	\$9,784,250	\$9,491,188
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,246	3,070	3,290	3,199
	All Discharges excl dc status 02,82,07,20	18,241	16,978	17,483	17,495
	Proportion of Target to Denominator Discharges	17.8%	18.1%	18.8%	18.3%
	Average Length of Stay for Target	6.9	7.2	6.6	6.6
	Average Medicare Payment for Target	\$17,648	\$18,631	\$17,339	\$16,679
	Sum of Medicare Payments for Target	\$57,285,484	\$57,197,991	\$57,045,302	\$53,355,493
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,550	2,510	2,627	2,507
	All Discharges excl dc status 02,82,07,20	18,241	16,978	17,483	17,495
	Proportion of Target to Denominator Discharges	14.0%	14.8%	15.0%	14.3%
	Average Length of Stay for Target	6.6	6.9	6.5	6.5
	Average Medicare Payment for Target	\$17,026	\$18,177	\$16,954	\$16,690
	Sum of Medicare Payments for Target	\$43,416,367	\$45,624,642	\$44,537,246	\$41,842,252

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Connecticut

36

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,338	2,066	2,316	2,338
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,885	12,161	12,436	12,384
	<b>Proportion of Target to Denominator Discharges</b>	18.1%	17.0%	18.6%	18.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,017	\$9,152	\$8,787	\$8,590
	<b>Sum of Medicare Payments for Target</b>	\$21,080,605	\$18,908,637	\$20,350,297	\$20,082,654
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	649	556	595	612
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	4,486	4,014	4,167	4,176
	<b>Proportion of Target to Denominator Discharges</b>	14.5%	13.9%	14.3%	14.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$21,074	\$23,247	\$22,524	\$23,096
	<b>Sum of Medicare Payments for Target</b>	\$13,677,192	\$12,925,422	\$13,401,591	\$14,134,502
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	879	825	966	932
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,885	12,161	12,436	12,384
	<b>Proportion of Target to Denominator Discharges</b>	6.8%	6.8%	7.8%	7.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,993	\$8,170	\$7,741	\$7,588
	<b>Sum of Medicare Payments for Target</b>	\$7,025,843	\$6,740,070	\$7,477,360	\$7,072,286
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	652	600	628	649
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	4,486	4,014	4,167	4,176
	<b>Proportion of Target to Denominator Discharges</b>	14.5%	14.9%	15.1%	15.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$21,966	\$25,128	\$24,179	\$24,459
	<b>Sum of Medicare Payments for Target</b>	\$14,321,904	\$15,076,820	\$15,184,250	\$15,874,076

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - District of Columbia, 6 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	181	148	151	123
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	192	157	160	139
	Proportion of Target to Denominator Discharges	94.3%	94.3%	94.4%	88.5%
	Average Length of Stay for Target	7.3	7.2	7.1	7.1
	Average Medicare Payment for Target	\$14,214	\$15,393	\$15,673	\$14,991
	Sum of Medicare Payments for Target	\$2,572,747	\$2,278,207	\$2,366,574	\$1,843,922
Respiratory Infections	DRGs 177, 178	120	226	101	133
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	206	277	164	184
	Proportion of Target to Denominator Discharges	58.3%	81.6%	61.6%	72.3%
	Average Length of Stay for Target	7.4	8.9	6.6	7.0
	Average Medicare Payment for Target	\$17,767	\$19,797	\$17,117	\$17,347
	Sum of Medicare Payments for Target	\$2,132,097	\$4,474,031	\$1,728,810	\$2,307,112
Simple Pneumonia	DRGs 193, 194	80	42	57	44
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	139	84	107	90
	Proportion of Target to Denominator Discharges	57.6%	50.0%	53.3%	48.9%
	Average Length of Stay for Target	5.5	6.7	7.4	6.7
	Average Medicare Payment for Target	\$9,530	\$11,185	\$9,882	\$10,292
	Sum of Medicare Payments for Target	\$762,438	\$469,772	\$563,256	\$452,847
Septicemia	DRGs 870, 871, 872	443	483	445	433
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	648	671	607	592
	Proportion of Target to Denominator Discharges	68.4%	72.0%	73.3%	73.1%
	Average Length of Stay for Target	9.4	11.4	9.8	9.9
	Average Medicare Payment for Target	\$20,598	\$25,581	\$19,922	\$20,778
	Sum of Medicare Payments for Target	\$9,124,939	\$12,355,683	\$8,865,081	\$8,997,067
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	52	60	63	49
	All Discharges for Surgical DRGs	2,167	1,929	2,066	1,905
	Proportion of Target to Denominator Discharges	2.4%	3.1%	3.0%	2.6%
	Average Length of Stay for Target	13.9	14.1	11.7	10.9
	Average Medicare Payment for Target	\$35,514	\$43,751	\$37,470	\$32,609
	Sum of Medicare Payments for Target	\$1,846,738	\$2,625,056	\$2,360,621	\$1,597,822

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report District of Columbia

38

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	2,850	2,687	2,693	2,580
	All Discharges for Medical DRGs w/ or w/o CC or MCC	3,558	3,262	3,362	3,203
	Proportion of Target to Denominator Discharges	80.1%	82.4%	80.1%	80.5%
	Average Length of Stay for Target	7.2	7.8	7.3	7.7
	Average Medicare Payment for Target	\$14,145	\$15,256	\$14,037	\$14,627
	Sum of Medicare Payments for Target	\$40,313,286	\$40,992,379	\$37,802,523	\$37,736,656
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,369	1,250	1,305	1,197
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	2,011	1,770	1,890	1,739
	Proportion of Target to Denominator Discharges	68.1%	70.6%	69.0%	68.8%
	Average Length of Stay for Target	11.1	11.4	10.7	11.4
	Average Medicare Payment for Target	\$43,614	\$43,351	\$41,822	\$40,843
	Sum of Medicare Payments for Target	\$59,707,451	\$54,188,234	\$54,577,608	\$48,889,631
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,887	1,673	1,796	1,690
	All Discharges with one or more CC or MCC coded on the claim	4,218	3,936	3,997	3,776
	Proportion of Target to Denominator Discharges	44.7%	42.5%	44.9%	44.8%
	Average Length of Stay for Target	6.4	6.5	6.2	6.5
	Average Medicare Payment for Target	\$20,967	\$21,686	\$21,174	\$20,843
	Sum of Medicare Payments for Target	\$39,565,618	\$36,281,476	\$38,029,181	\$35,224,595
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	117	84	119	111
	All Discharges with one or more MCCs including severe malnutrition	376	320	378	364
	Proportion of Target to Denominator Discharges	31.1%	26.3%	31.5%	30.5%
	Average Length of Stay for Target	9.7	8.5	7.4	9.4
	Average Medicare Payment for Target	\$20,052	\$18,950	\$17,395	\$18,541
	Sum of Medicare Payments for Target	\$2,346,044	\$1,591,822	\$2,070,023	\$2,058,057
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	95	144	70	78
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	543	613	520	511
	Proportion of Target to Denominator Discharges	17.5%	23.5%	13.5%	15.3%
	Average Length of Stay for Target	26.2	26.4	32.3	25.6
	Average Medicare Payment for Target	\$114,849	\$99,561	\$125,380	\$107,934
	Sum of Medicare Payments for Target	\$10,910,694	\$14,336,790	\$8,776,590	\$8,418,852

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	63	68	65	69
	All DRGs 246-249 Discharges + outpatient claims	135	130	146	132
	Proportion of Target to Denominator Discharges	46.7%	52.3%	44.5%	52.3%
	Average Length of Stay for Target	5.1	3.4	3.8	4.1
	Average Medicare Payment for Target	\$24,690	\$24,043	\$23,153	\$24,024
	Sum of Medicare Payments for Target	\$1,555,491	\$1,634,908	\$1,504,933	\$1,657,633
Total Knee Replacement	Inpatient discharges with knee replacement px codes	50	37	50	36
	Inpatient discharges + outpatient claims with knee replacement px codes	130	100	133	115
	Proportion of Target to Denominator Discharges	38.5%	37.0%	37.6%	31.3%
	Average Medicare Payment for Target	\$20,568	\$19,736	\$20,326	\$20,842
	Sum of Medicare Payments for Target	\$1,028,395	\$730,243	\$1,016,297	\$750,298
Syncope	DRG 312	41	24	45	34
	All medical DRGs in MDC 05 Discharges	781	661	752	689
	Proportion of Target to Denominator Discharges	5.2%	3.6%	6.0%	4.9%
	Average Length of Stay for Target	3.8	4.5	6.1	4.5
	Average Medicare Payment for Target	\$7,336	\$7,166	\$8,726	\$6,796
	Sum of Medicare Payments for Target	\$300,792	\$171,978	\$392,688	\$231,063
Other Circulatory System Diagnoses	DRGs 314, 315, 316	78	58	67	61
	All medical DRGs in MDC 05 Discharges	781	661	752	689
	Proportion of Target to Denominator Discharges	10.0%	8.8%	8.9%	8.9%
	Average Length of Stay for Target	8.1	8.4	8.1	7.6
	Average Medicare Payment for Target	\$17,166	\$16,834	\$16,554	\$17,313
	Sum of Medicare Payments for Target	\$1,338,971	\$976,360	\$1,109,124	\$1,056,085
Other Digestive System Diagnoses	DRGs 393, 394, 395	50	51	48	45
	All medical DRGs in MDC 06 Discharges	379	330	316	326
	Proportion of Target to Denominator Discharges	13.2%	15.5%	15.2%	13.8%
	Average Length of Stay for Target	6.5	6.4	7.1	6.5
	Average Medicare Payment for Target	\$11,248	\$10,625	\$13,199	\$9,698
	Sum of Medicare Payments for Target	\$562,413	\$541,866	\$633,556	\$436,398

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	48	24	46	35
	All medical DRGs in MDC 08 Discharges	174	120	162	136
	Proportion of Target to Denominator Discharges	27.6%	20.0%	28.4%	25.7%
	Average Length of Stay for Target	6.4	4.5	5.3	7.4
	Average Medicare Payment for Target	\$8,917	\$9,368	\$8,834	\$10,885
	Sum of Medicare Payments for Target	\$427,997	\$224,831	\$406,361	\$380,960
Spinal Fusion	Claims with spinal fusion procedure codes	270	243	269	226
	Claims with spinal procedure codes	395	365	382	328
	Proportion of Target to Denominator Discharges	68.4%	66.6%	70.4%	68.9%
	Average Length of Stay for Target	5.3	5.7	6.3	6.1
	Average Medicare Payment for Target	\$40,967	\$43,311	\$44,589	\$44,399
	Sum of Medicare Payments for Target	\$11,061,019	\$10,524,537	\$11,994,339	\$10,034,089
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	65	51	60	44
	All Discharges with Transfer to SNF	945	927	924	832
	Proportion of Target to Denominator Discharges	6.9%	5.5%	6.5%	5.3%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,581	\$12,334	\$13,513	\$11,697
	Sum of Medicare Payments for Target	\$752,791	\$629,035	\$810,788	\$514,665
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,019	923	1,029	875
	All Discharges excl dc status 02,82,07,20	5,535	5,015	5,310	4,931
	Proportion of Target to Denominator Discharges	18.4%	18.4%	19.4%	17.7%
	Average Length of Stay for Target	9.5	9.6	8.9	8.9
	Average Medicare Payment for Target	\$26,590	\$24,041	\$22,519	\$22,267
	Sum of Medicare Payments for Target	\$27,095,222	\$22,189,671	\$23,172,288	\$19,483,911
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	535	495	579	488
	All Discharges excl dc status 02,82,07,20	5,535	5,015	5,310	4,931
	Proportion of Target to Denominator Discharges	9.7%	9.9%	10.9%	9.9%
	Average Length of Stay for Target	9.3	9.0	8.6	8.5
	Average Medicare Payment for Target	\$29,112	\$23,155	\$22,071	\$21,891
	Sum of Medicare Payments for Target	\$15,574,960	\$11,461,953	\$12,779,311	\$10,682,575

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	475	417	430	433
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,345	3,110	3,251	2,988
	<b>Proportion of Target to Denominator Discharges</b>	14.2%	13.4%	13.2%	14.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,485	\$9,603	\$9,672	\$9,471
	<b>Sum of Medicare Payments for Target</b>	\$4,505,540	\$4,004,329	\$4,158,834	\$4,100,802
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	238	202	220	202
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,996	1,780	1,909	1,749
	<b>Proportion of Target to Denominator Discharges</b>	11.9%	11.3%	11.5%	11.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$27,890	\$26,306	\$27,410	\$26,248
	<b>Sum of Medicare Payments for Target</b>	\$6,637,748	\$5,313,853	\$6,030,093	\$5,302,042
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	263	236	254	248
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,345	3,110	3,251	2,988
	<b>Proportion of Target to Denominator Discharges</b>	7.9%	7.6%	7.8%	8.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$8,947	\$9,586	\$8,722	\$9,060
	<b>Sum of Medicare Payments for Target</b>	\$2,353,132	\$2,262,203	\$2,215,428	\$2,246,898
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	225	214	215	216
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,996	1,780	1,909	1,749
	<b>Proportion of Target to Denominator Discharges</b>	11.3%	12.0%	11.3%	12.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$24,742	\$25,322	\$23,737	\$26,150
	<b>Sum of Medicare Payments for Target</b>	\$5,567,014	\$5,418,940	\$5,103,369	\$5,648,315

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Delaware, 6 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	247	240	233	221
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	287	283	272	272
	Proportion of Target to Denominator Discharges	86.1%	84.8%	85.7%	81.3%
	Average Length of Stay for Target	5.8	5.8	6.1	6.3
	Average Medicare Payment for Target	\$10,528	\$10,576	\$10,400	\$10,147
	Sum of Medicare Payments for Target	\$2,600,393	\$2,538,182	\$2,423,194	\$2,242,509
Respiratory Infections	DRGs 177, 178	579	698	308	428
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	814	859	574	658
	Proportion of Target to Denominator Discharges	71.1%	81.3%	53.7%	65.0%
	Average Length of Stay for Target	9.4	9.6	7.7	7.4
	Average Medicare Payment for Target	\$19,816	\$19,399	\$15,776	\$15,667
	Sum of Medicare Payments for Target	\$11,473,284	\$13,540,389	\$4,859,151	\$6,705,289
Simple Pneumonia	DRGs 193, 194	212	141	235	194
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	336	262	386	315
	Proportion of Target to Denominator Discharges	63.1%	53.8%	60.9%	61.6%
	Average Length of Stay for Target	6.3	5.6	5.9	5.9
	Average Medicare Payment for Target	\$8,737	\$8,595	\$8,270	\$7,832
	Sum of Medicare Payments for Target	\$1,852,292	\$1,211,949	\$1,943,336	\$1,519,374
Septicemia	DRGs 870, 871, 872	554	585	488	518
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	1,121	1,011	1,020	985
	Proportion of Target to Denominator Discharges	49.4%	57.9%	47.8%	52.6%
	Average Length of Stay for Target	9.2	8.9	8.6	8.0
	Average Medicare Payment for Target	\$19,804	\$18,911	\$15,465	\$15,516
	Sum of Medicare Payments for Target	\$10,971,636	\$11,062,962	\$7,546,930	\$8,037,402
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	47	59	55	58
	All Discharges for Surgical DRGs	1,751	1,680	1,878	1,853
	Proportion of Target to Denominator Discharges	2.7%	3.5%	2.9%	3.1%
	Average Length of Stay for Target	13.3	16.2	13.2	15.3
	Average Medicare Payment for Target	\$36,498	\$40,073	\$37,234	\$33,967
	Sum of Medicare Payments for Target	\$1,715,401	\$2,364,318	\$2,047,865	\$1,970,061

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Delaware

43

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	4,174	4,088	3,878	3,881
	All Discharges for Medical DRGs w/ or w/o CC or MCC	5,578	5,151	5,229	5,281
	Proportion of Target to Denominator Discharges	74.8%	79.4%	74.2%	73.5%
	Average Length of Stay for Target	7.4	7.8	6.9	7.0
	Average Medicare Payment for Target	\$12,459	\$13,242	\$11,156	\$11,331
	Sum of Medicare Payments for Target	\$52,002,697	\$54,131,256	\$43,263,385	\$43,976,097
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,060	989	1,071	1,117
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,643	1,535	1,749	1,738
	Proportion of Target to Denominator Discharges	64.5%	64.4%	61.2%	64.3%
	Average Length of Stay for Target	9.6	10.0	9.4	10.3
	Average Medicare Payment for Target	\$29,337	\$30,834	\$29,499	\$31,209
	Sum of Medicare Payments for Target	\$31,097,532	\$30,494,738	\$31,593,296	\$34,860,026
Single CC or MCC	Discharges with one CC or MCC coded on the claim	2,448	2,339	2,308	2,294
	All Discharges with one or more CC or MCC coded on the claim	5,213	5,058	4,947	4,995
	Proportion of Target to Denominator Discharges	47.0%	46.2%	46.7%	45.9%
	Average Length of Stay for Target	6.9	6.8	6.0	6.2
	Average Medicare Payment for Target	\$14,949	\$15,232	\$14,078	\$14,417
	Sum of Medicare Payments for Target	\$36,595,879	\$35,627,147	\$32,491,746	\$33,073,582
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	79	56	56	82
	All Discharges with one or more MCCs including severe malnutrition	188	151	159	190
	Proportion of Target to Denominator Discharges	42.0%	37.1%	35.2%	43.2%
	Average Length of Stay for Target	10.1	7.2	8.4	7.7
	Average Medicare Payment for Target	\$14,611	\$15,827	\$12,470	\$14,770
	Sum of Medicare Payments for Target	\$1,154,299	\$886,312	\$698,325	\$1,211,167
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	123	107	59	69
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	685	715	566	592
	Proportion of Target to Denominator Discharges	18.0%	15.0%	10.4%	11.7%
	Average Length of Stay for Target	20.7	25.7	25.5	26.0
	Average Medicare Payment for Target	\$76,020	\$88,639	\$88,974	\$87,796
	Sum of Medicare Payments for Target	\$9,350,479	\$9,484,413	\$5,249,454	\$6,057,923

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Delaware

44

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	92	94	119	101
	All DRGs 246-249 Discharges + outpatient claims	167	193	213	193
	Proportion of Target to Denominator Discharges	55.1%	48.7%	55.9%	52.3%
	Average Length of Stay for Target	3.7	4.4	3.8	3.6
	Average Medicare Payment for Target	\$20,048	\$21,164	\$19,291	\$18,716
	Sum of Medicare Payments for Target	\$1,844,382	\$1,989,388	\$2,295,634	\$1,890,273
Total Knee Replacement	Inpatient discharges with knee replacement px codes	27	17	33	26
	Inpatient discharges + outpatient claims with knee replacement px codes	426	329	470	384
	Proportion of Target to Denominator Discharges	6.3%	5.2%	7.0%	6.8%
	Average Medicare Payment for Target	\$18,316	\$24,528	\$18,852	\$23,626
	Sum of Medicare Payments for Target	\$494,519	\$416,978	\$622,101	\$614,286
Syncope	DRG 312	78	60	83	93
	All medical DRGs in MDC 05 Discharges	1,065	959	1,028	982
	Proportion of Target to Denominator Discharges	7.3%	6.3%	8.1%	9.5%
	Average Length of Stay for Target	3.6	5.2	5.5	3.6
	Average Medicare Payment for Target	\$6,077	\$6,232	\$5,941	\$5,690
	Sum of Medicare Payments for Target	\$473,983	\$373,939	\$493,062	\$529,131
Other Circulatory System Diagnoses	DRGs 314, 315, 316	43	35	51	59
	All medical DRGs in MDC 05 Discharges	1,065	959	1,028	982
	Proportion of Target to Denominator Discharges	4.0%	3.6%	5.0%	6.0%
	Average Length of Stay for Target	7.7	5.9	6.1	7.2
	Average Medicare Payment for Target	\$12,343	\$10,897	\$10,721	\$12,335
	Sum of Medicare Payments for Target	\$530,739	\$381,391	\$546,750	\$727,782
Other Digestive System Diagnoses	DRGs 393, 394, 395	60	48	60	58
	All medical DRGs in MDC 06 Discharges	654	534	629	614
	Proportion of Target to Denominator Discharges	9.2%	9.0%	9.5%	9.4%
	Average Length of Stay for Target	4.8	5.0	5.7	5.0
	Average Medicare Payment for Target	\$8,177	\$9,327	\$8,714	\$8,416
	Sum of Medicare Payments for Target	\$490,639	\$447,718	\$522,849	\$488,129

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Delaware

45

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	78	67	94	78
	All medical DRGs in MDC 08 Discharges	232	226	254	251
	Proportion of Target to Denominator Discharges	33.6%	29.6%	37.0%	31.1%
	Average Length of Stay for Target	5.8	5.9	5.7	6.1
	Average Medicare Payment for Target	\$7,469	\$8,058	\$7,282	\$8,319
	Sum of Medicare Payments for Target	\$582,564	\$539,869	\$684,544	\$648,854
Spinal Fusion	Claims with spinal fusion procedure codes	212	183	231	185
	Claims with spinal procedure codes	333	271	358	304
	Proportion of Target to Denominator Discharges	63.7%	67.5%	64.5%	60.9%
	Average Length of Stay for Target	3.4	3.8	3.5	4.6
	Average Medicare Payment for Target	\$26,830	\$29,317	\$29,775	\$33,674
	Sum of Medicare Payments for Target	\$5,687,984	\$5,365,097	\$6,878,115	\$6,229,606
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	102	107	143	96
	All Discharges with Transfer to SNF	1,364	1,395	1,404	1,417
	Proportion of Target to Denominator Discharges	7.5%	7.7%	10.2%	6.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,005	\$10,367	\$9,452	\$9,384
	Sum of Medicare Payments for Target	\$918,493	\$1,109,284	\$1,351,687	\$900,835
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,159	1,124	1,136	1,092
	All Discharges excl dc status 02,82,07,20	7,416	6,841	7,279	7,231
	Proportion of Target to Denominator Discharges	15.6%	16.4%	15.6%	15.1%
	Average Length of Stay for Target	8.0	8.5	7.9	7.9
	Average Medicare Payment for Target	\$14,556	\$16,610	\$15,073	\$14,918
	Sum of Medicare Payments for Target	\$16,870,102	\$18,669,113	\$17,122,970	\$16,290,881
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	955	915	930	874
	All Discharges excl dc status 02,82,07,20	7,416	6,841	7,279	7,231
	Proportion of Target to Denominator Discharges	12.9%	13.4%	12.8%	12.1%
	Average Length of Stay for Target	7.8	8.3	8.0	7.9
	Average Medicare Payment for Target	\$14,206	\$16,425	\$14,910	\$14,736
	Sum of Medicare Payments for Target	\$13,566,329	\$15,028,465	\$13,865,981	\$12,879,217

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Delaware

46

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	743	675	772	780
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,075	4,625	4,832	4,839
	<b>Proportion of Target to Denominator Discharges</b>	14.6%	14.6%	16.0%	16.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,072	\$7,230	\$6,942	\$7,025
	<b>Sum of Medicare Payments for Target</b>	\$5,254,551	\$4,880,404	\$5,359,558	\$5,479,130
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	201	168	201	196
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,566	1,509	1,701	1,656
	<b>Proportion of Target to Denominator Discharges</b>	12.8%	11.1%	11.8%	11.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$18,819	\$18,769	\$19,217	\$20,316
	<b>Sum of Medicare Payments for Target</b>	\$3,782,629	\$3,153,201	\$3,862,528	\$3,981,923
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	201	158	196	197
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,075	4,625	4,832	4,839
	<b>Proportion of Target to Denominator Discharges</b>	4.0%	3.4%	4.1%	4.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,385	\$7,436	\$6,413	\$6,275
	<b>Sum of Medicare Payments for Target</b>	\$1,283,334	\$1,174,930	\$1,256,935	\$1,236,250
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	208	216	289	249
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,566	1,509	1,701	1,656
	<b>Proportion of Target to Denominator Discharges</b>	13.3%	14.3%	17.0%	15.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$24,351	\$24,128	\$22,314	\$24,483
	<b>Sum of Medicare Payments for Target</b>	\$5,065,058	\$5,211,711	\$6,448,788	\$6,096,303

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Florida, 169 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	3,332	3,613	3,149	2,975
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	4,277	4,593	4,025	3,923
	Proportion of Target to Denominator Discharges	77.9%	78.7%	78.2%	75.8%
	Average Length of Stay for Target	4.6	4.7	4.5	4.5
	Average Medicare Payment for Target	\$9,473	\$9,536	\$9,294	\$9,396
	Sum of Medicare Payments for Target	\$31,564,788	\$34,452,583	\$29,265,624	\$27,954,215
Respiratory Infections	DRGs 177, 178	3,713	9,858	4,472	6,787
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	7,201	13,468	8,153	9,914
	Proportion of Target to Denominator Discharges	51.6%	73.2%	54.9%	68.5%
	Average Length of Stay for Target	7.1	6.4	5.7	5.5
	Average Medicare Payment for Target	\$13,158	\$13,525	\$12,105	\$12,179
	Sum of Medicare Payments for Target	\$48,856,882	\$133,333,336	\$54,135,225	\$82,656,527
Simple Pneumonia	DRGs 193, 194	3,182	3,194	3,283	2,682
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	5,358	5,038	5,194	4,241
	Proportion of Target to Denominator Discharges	59.4%	63.4%	63.2%	63.2%
	Average Length of Stay for Target	4.9	5.2	4.9	4.8
	Average Medicare Payment for Target	\$7,497	\$7,463	\$7,420	\$7,394
	Sum of Medicare Payments for Target	\$23,856,457	\$23,837,134	\$24,359,659	\$19,830,522
Septicemia	DRGs 870, 871, 872	12,963	14,503	12,632	12,931
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	21,143	22,717	20,789	20,416
	Proportion of Target to Denominator Discharges	61.3%	63.8%	60.8%	63.3%
	Average Length of Stay for Target	6.9	7.1	6.5	6.6
	Average Medicare Payment for Target	\$12,927	\$13,687	\$12,199	\$12,555
	Sum of Medicare Payments for Target	\$167,572,637	\$198,501,655	\$154,099,613	\$162,346,635
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	932	936	868	798
	All Discharges for Surgical DRGs	36,616	37,904	36,988	33,779
	Proportion of Target to Denominator Discharges	2.5%	2.5%	2.3%	2.4%
	Average Length of Stay for Target	9.3	9.3	9.5	8.9
	Average Medicare Payment for Target	\$23,799	\$23,239	\$23,154	\$22,966
	Sum of Medicare Payments for Target	\$22,180,901	\$21,752,024	\$20,097,520	\$18,326,671

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Florida

48

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	68,290	76,981	69,085	69,279
	All Discharges for Medical DRGs w/ or w/o CC or MCC	92,071	99,510	92,718	91,408
	Proportion of Target to Denominator Discharges	74.2%	77.4%	74.5%	75.8%
	Average Length of Stay for Target	5.3	5.6	5.3	5.3
	Average Medicare Payment for Target	\$9,643	\$10,197	\$9,509	\$9,725
	Sum of Medicare Payments for Target	\$658,524,351	\$784,949,939	\$656,910,696	\$673,756,221
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	21,860	22,680	22,205	20,700
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	33,738	34,912	34,222	31,340
	Proportion of Target to Denominator Discharges	64.8%	65.0%	64.9%	66.0%
	Average Length of Stay for Target	7.8	8.0	7.7	7.7
	Average Medicare Payment for Target	\$24,075	\$24,291	\$23,795	\$23,709
	Sum of Medicare Payments for Target	\$526,277,041	\$550,910,328	\$528,370,008	\$490,780,921
Single CC or MCC	Discharges with one CC or MCC coded on the claim	41,847	45,433	42,793	41,940
	All Discharges with one or more CC or MCC coded on the claim	90,069	99,391	91,201	89,847
	Proportion of Target to Denominator Discharges	46.5%	45.7%	46.9%	46.7%
	Average Length of Stay for Target	4.8	4.9	4.7	4.7
	Average Medicare Payment for Target	\$12,584	\$12,820	\$12,433	\$12,391
	Sum of Medicare Payments for Target	\$526,608,371	\$582,452,896	\$532,061,863	\$519,667,773
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	2,269	2,084	2,125	2,036
	All Discharges with one or more MCCs including severe malnutrition	6,168	6,324	6,051	5,996
	Proportion of Target to Denominator Discharges	36.8%	33.0%	35.1%	34.0%
	Average Length of Stay for Target	6.1	6.5	6.1	6.0
	Average Medicare Payment for Target	\$13,304	\$13,151	\$12,948	\$12,757
	Sum of Medicare Payments for Target	\$30,187,243	\$27,407,365	\$27,514,512	\$25,973,112
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	1,332	1,592	955	963
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	14,447	16,271	13,802	14,123
	Proportion of Target to Denominator Discharges	9.2%	9.8%	6.9%	6.8%
	Average Length of Stay for Target	23.1	20.9	21.8	20.2
	Average Medicare Payment for Target	\$71,535	\$65,436	\$67,929	\$63,716
	Sum of Medicare Payments for Target	\$95,284,076	\$104,174,591	\$64,872,184	\$61,358,510

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Florida

49

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	2,147	2,214	2,022	1,793
	All DRGs 246-249 Discharges + outpatient claims	4,306	4,389	4,165	3,687
	Proportion of Target to Denominator Discharges	49.9%	50.4%	48.5%	48.6%
	Average Length of Stay for Target	3.7	3.9	4.1	3.8
	Average Medicare Payment for Target	\$16,046	\$16,210	\$16,119	\$16,355
	Sum of Medicare Payments for Target	\$34,450,830	\$35,889,587	\$32,592,030	\$29,324,561
Total Knee Replacement	Inpatient discharges with knee replacement px codes	1,183	1,371	1,244	1,164
	Inpatient discharges + outpatient claims with knee replacement px codes	4,019	4,873	4,300	4,070
	Proportion of Target to Denominator Discharges	29.4%	28.1%	28.9%	28.6%
	Average Medicare Payment for Target	\$14,330	\$14,421	\$14,498	\$15,006
	Sum of Medicare Payments for Target	\$16,952,349	\$19,771,040	\$18,035,452	\$17,467,188
Syncope	DRG 312	1,546	1,519	1,565	1,518
	All medical DRGs in MDC 05 Discharges	20,524	20,607	20,202	19,014
	Proportion of Target to Denominator Discharges	7.5%	7.4%	7.7%	8.0%
	Average Length of Stay for Target	2.7	2.7	2.8	2.8
	Average Medicare Payment for Target	\$5,257	\$5,336	\$5,204	\$5,211
	Sum of Medicare Payments for Target	\$8,127,153	\$8,104,671	\$8,144,783	\$7,910,153
Other Circulatory System Diagnoses	DRGs 314, 315, 316	995	936	975	1,029
	All medical DRGs in MDC 05 Discharges	20,524	20,607	20,202	19,014
	Proportion of Target to Denominator Discharges	4.8%	4.5%	4.8%	5.4%
	Average Length of Stay for Target	5.4	5.6	5.7	5.4
	Average Medicare Payment for Target	\$11,065	\$11,198	\$11,148	\$10,871
	Sum of Medicare Payments for Target	\$11,009,732	\$10,481,697	\$10,868,942	\$11,186,691
Other Digestive System Diagnoses	DRGs 393, 394, 395	1,367	1,349	1,414	1,329
	All medical DRGs in MDC 06 Discharges	10,912	11,114	11,076	10,467
	Proportion of Target to Denominator Discharges	12.5%	12.1%	12.8%	12.7%
	Average Length of Stay for Target	4.1	4.2	4.4	4.5
	Average Medicare Payment for Target	\$7,721	\$7,934	\$7,729	\$7,978
	Sum of Medicare Payments for Target	\$10,555,163	\$10,702,516	\$10,928,221	\$10,603,368

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Florida

50

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	1,384	1,431	1,400	1,352
	All medical DRGs in MDC 08 Discharges	4,496	4,551	4,460	4,338
	Proportion of Target to Denominator Discharges	30.8%	31.4%	31.4%	31.2%
	Average Length of Stay for Target	3.8	4.0	3.8	3.9
	Average Medicare Payment for Target	\$6,835	\$6,820	\$6,524	\$6,613
	Sum of Medicare Payments for Target	\$9,459,281	\$9,760,087	\$9,133,085	\$8,941,302
Spinal Fusion	Claims with spinal fusion procedure codes	2,350	2,465	2,467	2,249
	Claims with spinal procedure codes	4,531	4,817	4,784	4,308
	Proportion of Target to Denominator Discharges	51.9%	51.2%	51.6%	52.2%
	Average Length of Stay for Target	4.0	3.9	3.8	3.8
	Average Medicare Payment for Target	\$27,220	\$27,950	\$27,625	\$27,493
	Sum of Medicare Payments for Target	\$63,967,442	\$68,897,432	\$68,149,901	\$61,832,599
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	3,779	3,502	3,768	3,764
	All Discharges with Transfer to SNF	27,204	28,325	27,714	27,930
	Proportion of Target to Denominator Discharges	13.9%	12.4%	13.6%	13.5%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,781	\$9,195	\$8,896	\$9,034
	Sum of Medicare Payments for Target	\$33,183,078	\$32,201,103	\$33,521,384	\$34,005,685
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	23,361	24,541	23,430	23,124
	All Discharges excl dc status 02,82,07,20	129,886	137,455	130,851	126,235
	Proportion of Target to Denominator Discharges	18.0%	17.9%	17.9%	18.3%
	Average Length of Stay for Target	6.2	6.3	6.0	6.0
	Average Medicare Payment for Target	\$12,837	\$13,194	\$12,669	\$12,494
	Sum of Medicare Payments for Target	\$299,888,874	\$323,792,807	\$296,842,066	\$288,907,807
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	16,779	17,241	16,722	16,437
	All Discharges excl dc status 02,82,07,20	129,886	137,455	130,851	126,235
	Proportion of Target to Denominator Discharges	12.9%	12.5%	12.8%	13.0%
	Average Length of Stay for Target	6.1	6.2	6.0	5.9
	Average Medicare Payment for Target	\$12,836	\$13,240	\$12,743	\$12,554
	Sum of Medicare Payments for Target	\$215,377,534	\$228,263,300	\$213,096,076	\$206,342,938

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Florida

51

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	17,359	17,531	17,383	16,137
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	86,547	92,304	86,221	81,975
	<b>Proportion of Target to Denominator Discharges</b>	20.1%	19.0%	20.2%	19.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,704	\$6,961	\$6,616	\$6,698
	<b>Sum of Medicare Payments for Target</b>	\$116,373,444	\$122,031,863	\$115,003,544	\$108,084,720
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,949	4,831	4,944	4,255
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	33,366	34,445	33,751	30,119
	<b>Proportion of Target to Denominator Discharges</b>	14.8%	14.0%	14.6%	14.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$15,863	\$15,915	\$15,949	\$16,000
	<b>Sum of Medicare Payments for Target</b>	\$78,506,038	\$76,885,962	\$78,854,227	\$68,080,370
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	7,499	7,520	7,147	6,284
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	86,547	92,304	86,221	81,975
	<b>Proportion of Target to Denominator Discharges</b>	8.7%	8.1%	8.3%	7.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$5,976	\$6,131	\$5,882	\$5,973
	<b>Sum of Medicare Payments for Target</b>	\$44,811,304	\$46,104,528	\$42,040,398	\$37,535,248
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,710	5,350	5,431	4,766
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	33,366	34,445	33,751	30,119
	<b>Proportion of Target to Denominator Discharges</b>	14.1%	15.5%	16.1%	15.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$17,933	\$18,146	\$18,319	\$18,081
	<b>Sum of Medicare Payments for Target</b>	\$84,466,000	\$97,079,727	\$99,492,374	\$86,175,825

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Georgia, 99 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,367	1,309	1,332	1,329
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,632	1,537	1,618	1,607
	Proportion of Target to Denominator Discharges	83.8%	85.2%	82.3%	82.7%
	Average Length of Stay for Target	5.3	5.9	5.2	5.2
	Average Medicare Payment for Target	\$10,475	\$10,574	\$10,125	\$10,248
	Sum of Medicare Payments for Target	\$14,319,572	\$13,841,402	\$13,486,966	\$13,620,008
Respiratory Infections	DRGs 177, 178	1,748	4,056	1,045	2,120
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	3,215	5,242	2,254	3,171
	Proportion of Target to Denominator Discharges	54.4%	77.4%	46.4%	66.9%
	Average Length of Stay for Target	8.4	7.1	6.1	6.2
	Average Medicare Payment for Target	\$16,040	\$15,217	\$12,954	\$13,670
	Sum of Medicare Payments for Target	\$28,038,554	\$61,721,951	\$13,536,760	\$28,980,178
Simple Pneumonia	DRGs 193, 194	1,367	1,085	1,098	942
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,206	1,699	1,784	1,583
	Proportion of Target to Denominator Discharges	62.0%	63.9%	61.5%	59.5%
	Average Length of Stay for Target	4.8	5.5	5.1	5.6
	Average Medicare Payment for Target	\$8,294	\$8,398	\$8,119	\$8,262
	Sum of Medicare Payments for Target	\$11,337,598	\$9,111,968	\$8,914,221	\$7,782,812
Septicemia	DRGs 870, 871, 872	4,587	4,944	3,989	4,359
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	7,602	7,639	6,528	6,728
	Proportion of Target to Denominator Discharges	60.3%	64.7%	61.1%	64.8%
	Average Length of Stay for Target	7.2	7.9	6.9	7.2
	Average Medicare Payment for Target	\$14,901	\$15,702	\$13,427	\$14,095
	Sum of Medicare Payments for Target	\$68,349,403	\$77,633,055	\$53,559,281	\$61,438,997
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	348	374	345	346
	All Discharges for Surgical DRGs	11,893	11,639	12,010	11,540
	Proportion of Target to Denominator Discharges	2.9%	3.2%	2.9%	3.0%
	Average Length of Stay for Target	9.8	11.0	10.1	9.0
	Average Medicare Payment for Target	\$27,011	\$27,921	\$25,088	\$34,946
	Sum of Medicare Payments for Target	\$9,399,908	\$10,442,316	\$8,655,256	\$12,091,345

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Georgia

53

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	24,954	25,978	22,901	23,886
	All Discharges for Medical DRGs w/ or w/o CC or MCC	31,755	31,749	29,816	30,508
	Proportion of Target to Denominator Discharges	78.6%	81.8%	76.8%	78.3%
	Average Length of Stay for Target	5.9	6.2	5.7	5.9
	Average Medicare Payment for Target	\$11,054	\$11,662	\$10,449	\$10,813
	Sum of Medicare Payments for Target	\$275,831,032	\$302,966,770	\$239,281,738	\$258,278,956
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	7,270	7,064	7,448	7,126
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	10,856	10,723	11,134	10,714
	Proportion of Target to Denominator Discharges	67.0%	65.9%	66.9%	66.5%
	Average Length of Stay for Target	8.3	9.0	8.5	8.4
	Average Medicare Payment for Target	\$26,535	\$27,214	\$26,261	\$26,429
	Sum of Medicare Payments for Target	\$192,912,611	\$192,237,756	\$195,590,272	\$188,334,586
Single CC or MCC	Discharges with one CC or MCC coded on the claim	14,599	14,585	13,662	14,010
	All Discharges with one or more CC or MCC coded on the claim	32,189	32,947	30,336	30,976
	Proportion of Target to Denominator Discharges	45.4%	44.3%	45.0%	45.2%
	Average Length of Stay for Target	5.2	5.4	5.2	5.2
	Average Medicare Payment for Target	\$13,911	\$14,032	\$13,915	\$13,627
	Sum of Medicare Payments for Target	\$203,086,505	\$204,651,710	\$190,108,347	\$190,907,510
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	650	584	695	724
	All Discharges with one or more MCCs including severe malnutrition	1,993	1,992	1,930	2,098
	Proportion of Target to Denominator Discharges	32.6%	29.3%	36.0%	34.5%
	Average Length of Stay for Target	6.9	6.9	6.9	7.3
	Average Medicare Payment for Target	\$14,303	\$14,234	\$14,630	\$14,385
	Sum of Medicare Payments for Target	\$9,297,213	\$8,312,764	\$10,167,792	\$10,414,952
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	685	768	376	386
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	5,301	5,765	4,430	4,775
	Proportion of Target to Denominator Discharges	12.9%	13.3%	8.5%	8.1%
	Average Length of Stay for Target	22.6	23.7	23.5	24.0
	Average Medicare Payment for Target	\$77,114	\$73,401	\$77,879	\$77,692
	Sum of Medicare Payments for Target	\$52,822,832	\$56,371,881	\$29,282,626	\$29,989,075

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Georgia

54

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	749	647	690	631
	All DRGs 246-249 Discharges + outpatient claims	1,588	1,398	1,455	1,382
	Proportion of Target to Denominator Discharges	47.2%	46.3%	47.4%	45.7%
	Average Length of Stay for Target	3.8	4.0	3.9	3.9
	Average Medicare Payment for Target	\$17,233	\$17,269	\$16,953	\$17,389
	Sum of Medicare Payments for Target	\$12,907,413	\$11,173,328	\$11,697,776	\$10,972,592
Total Knee Replacement	Inpatient discharges with knee replacement px codes	206	237	228	230
	Inpatient discharges + outpatient claims with knee replacement px codes	1,472	1,671	1,530	1,409
	Proportion of Target to Denominator Discharges	14.0%	14.2%	14.9%	16.3%
	Average Medicare Payment for Target	\$17,079	\$17,010	\$17,598	\$15,746
	Sum of Medicare Payments for Target	\$3,518,354	\$4,031,266	\$4,012,410	\$3,621,606
Syncope	DRG 312	399	353	365	391
	All medical DRGs in MDC 05 Discharges	7,135	6,436	6,930	6,510
	Proportion of Target to Denominator Discharges	5.6%	5.5%	5.3%	6.0%
	Average Length of Stay for Target	3.4	3.4	3.4	3.2
	Average Medicare Payment for Target	\$6,249	\$6,081	\$6,029	\$6,048
	Sum of Medicare Payments for Target	\$2,493,168	\$2,146,641	\$2,200,743	\$2,364,692
Other Circulatory System Diagnoses	DRGs 314, 315, 316	336	310	410	362
	All medical DRGs in MDC 05 Discharges	7,135	6,436	6,930	6,510
	Proportion of Target to Denominator Discharges	4.7%	4.8%	5.9%	5.6%
	Average Length of Stay for Target	6.1	6.6	6.1	6.0
	Average Medicare Payment for Target	\$13,262	\$13,552	\$12,656	\$12,670
	Sum of Medicare Payments for Target	\$4,455,984	\$4,201,173	\$5,189,038	\$4,586,370
Other Digestive System Diagnoses	DRGs 393, 394, 395	351	305	345	356
	All medical DRGs in MDC 06 Discharges	3,393	3,067	3,321	3,260
	Proportion of Target to Denominator Discharges	10.3%	9.9%	10.4%	10.9%
	Average Length of Stay for Target	4.6	4.8	5.1	5.6
	Average Medicare Payment for Target	\$8,875	\$8,941	\$8,615	\$9,114
	Sum of Medicare Payments for Target	\$3,115,040	\$2,726,894	\$2,972,281	\$3,244,519

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Georgia

55

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	317	289	338	335
	All medical DRGs in MDC 08 Discharges	1,115	1,040	1,217	1,164
	Proportion of Target to Denominator Discharges	28.4%	27.8%	27.8%	28.8%
	Average Length of Stay for Target	4.9	5.2	5.2	5.1
	Average Medicare Payment for Target	\$8,418	\$8,316	\$8,295	\$8,357
	Sum of Medicare Payments for Target	\$2,668,402	\$2,403,221	\$2,803,800	\$2,799,483
Spinal Fusion	Claims with spinal fusion procedure codes	1,037	1,017	1,007	921
	Claims with spinal procedure codes	1,868	1,825	1,850	1,815
	Proportion of Target to Denominator Discharges	55.5%	55.7%	54.4%	50.7%
	Average Length of Stay for Target	3.3	4.0	3.8	3.7
	Average Medicare Payment for Target	\$25,744	\$29,890	\$29,855	\$29,205
	Sum of Medicare Payments for Target	\$26,696,701	\$30,398,566	\$30,064,345	\$26,898,016
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	692	634	666	652
	All Discharges with Transfer to SNF	6,771	6,907	6,609	6,795
	Proportion of Target to Denominator Discharges	10.2%	9.2%	10.1%	9.6%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,028	\$9,615	\$9,569	\$9,824
	Sum of Medicare Payments for Target	\$6,939,047	\$6,095,914	\$6,372,901	\$6,405,086
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	7,602	7,429	7,366	7,300
	All Discharges excl dc status 02,82,07,20	43,621	42,841	42,087	42,305
	Proportion of Target to Denominator Discharges	17.4%	17.3%	17.5%	17.3%
	Average Length of Stay for Target	6.7	7.1	6.7	6.9
	Average Medicare Payment for Target	\$14,115	\$15,092	\$14,171	\$14,859
	Sum of Medicare Payments for Target	\$107,304,391	\$112,116,181	\$104,387,199	\$108,469,288
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	5,326	5,274	5,133	5,029
	All Discharges excl dc status 02,82,07,20	43,621	42,841	42,087	42,305
	Proportion of Target to Denominator Discharges	12.2%	12.3%	12.2%	11.9%
	Average Length of Stay for Target	6.4	6.8	6.5	6.7
	Average Medicare Payment for Target	\$13,771	\$14,699	\$13,833	\$14,234
	Sum of Medicare Payments for Target	\$73,346,774	\$77,522,843	\$71,003,451	\$71,582,365

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Georgia

56

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	5,340	4,816	5,247	5,097
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	30,097	29,388	28,312	28,727
	<b>Proportion of Target to Denominator Discharges</b>	17.7%	16.4%	18.5%	17.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,867	\$8,077	\$7,520	\$7,558
	<b>Sum of Medicare Payments for Target</b>	\$42,011,462	\$38,900,652	\$39,455,623	\$38,522,441
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,323	1,171	1,263	1,304
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,495	10,294	10,668	10,261
	<b>Proportion of Target to Denominator Discharges</b>	12.6%	11.4%	11.8%	12.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,964	\$18,706	\$18,772	\$18,465
	<b>Sum of Medicare Payments for Target</b>	\$23,765,916	\$21,904,224	\$23,709,341	\$24,078,339
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,026	1,806	1,928	2,146
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	30,097	29,388	28,312	28,727
	<b>Proportion of Target to Denominator Discharges</b>	6.7%	6.1%	6.8%	7.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,481	\$7,863	\$7,261	\$7,164
	<b>Sum of Medicare Payments for Target</b>	\$15,155,932	\$14,201,161	\$13,999,498	\$15,373,515
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,396	1,598	1,634	1,563
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,495	10,294	10,668	10,261
	<b>Proportion of Target to Denominator Discharges</b>	13.3%	15.5%	15.3%	15.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$19,733	\$19,955	\$20,668	\$19,973
	<b>Sum of Medicare Payments for Target</b>	\$27,547,282	\$31,887,430	\$33,771,943	\$31,218,424

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Hawaii, 12 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	187	164	169	150
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	203	184	181	166
	Proportion of Target to Denominator Discharges	92.1%	89.1%	93.4%	90.4%
	Average Length of Stay for Target	7.9	6.7	5.2	5.8
	Average Medicare Payment for Target	\$13,709	\$14,634	\$13,840	\$14,422
	Sum of Medicare Payments for Target	\$2,563,585	\$2,399,986	\$2,338,932	\$2,163,233
Respiratory Infections	DRGs 177, 178	125	224	202	190
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	202	323	327	285
	Proportion of Target to Denominator Discharges	61.9%	69.3%	61.8%	66.7%
	Average Length of Stay for Target	8.6	7.5	6.5	8.4
	Average Medicare Payment for Target	\$24,094	\$22,124	\$19,889	\$22,204
	Sum of Medicare Payments for Target	\$3,011,742	\$4,955,840	\$4,017,642	\$4,218,811
Simple Pneumonia	DRGs 193, 194	71	90	116	90
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	114	132	161	117
	Proportion of Target to Denominator Discharges	62.3%	68.2%	72.0%	76.9%
	Average Length of Stay for Target	5.8	5.1	5.8	5.1
	Average Medicare Payment for Target	\$13,994	\$13,315	\$11,410	\$10,893
	Sum of Medicare Payments for Target	\$993,601	\$1,198,344	\$1,323,552	\$980,339
Septicemia	DRGs 870, 871, 872	429	393	428	472
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	611	598	660	667
	Proportion of Target to Denominator Discharges	70.2%	65.7%	64.8%	70.8%
	Average Length of Stay for Target	8.6	8.8	7.7	8.0
	Average Medicare Payment for Target	\$20,866	\$20,091	\$19,375	\$19,660
	Sum of Medicare Payments for Target	\$8,951,493	\$7,895,680	\$8,292,368	\$9,279,630
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	26	36	26	39
	All Discharges for Surgical DRGs	1,168	1,132	1,144	1,133
	Proportion of Target to Denominator Discharges	2.2%	3.2%	2.3%	3.4%
	Average Length of Stay for Target	12.8	12.1	12.3	9.2
	Average Medicare Payment for Target	\$46,316	\$42,372	\$39,805	\$33,677
	Sum of Medicare Payments for Target	\$1,204,213	\$1,525,376	\$1,034,920	\$1,313,388

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Hawaii

58

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	2,039	2,083	2,092	2,097
	All Discharges for Medical DRGs w/ or w/o CC or MCC	2,597	2,559	2,572	2,588
	Proportion of Target to Denominator Discharges	78.5%	81.4%	81.3%	81.0%
	Average Length of Stay for Target	6.6	7.2	6.6	6.5
	Average Medicare Payment for Target	\$15,641	\$16,699	\$15,593	\$15,759
	Sum of Medicare Payments for Target	\$31,891,967	\$34,783,233	\$32,621,380	\$33,046,361
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	772	763	735	727
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,084	1,064	1,054	1,052
	Proportion of Target to Denominator Discharges	71.2%	71.7%	69.7%	69.1%
	Average Length of Stay for Target	9.4	11.4	10.4	10.8
	Average Medicare Payment for Target	\$36,901	\$38,380	\$39,570	\$38,307
	Sum of Medicare Payments for Target	\$28,487,770	\$29,284,067	\$29,084,135	\$27,849,275
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,207	1,206	1,237	1,202
	All Discharges with one or more CC or MCC coded on the claim	2,807	2,837	2,825	2,819
	Proportion of Target to Denominator Discharges	43.0%	42.5%	43.8%	42.6%
	Average Length of Stay for Target	6.2	6.0	6.0	5.7
	Average Medicare Payment for Target	\$20,692	\$20,776	\$20,548	\$19,767
	Sum of Medicare Payments for Target	\$24,975,827	\$25,055,901	\$25,417,563	\$23,760,189
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	77	65	72	83
	All Discharges with one or more MCCs including severe malnutrition	219	214	245	276
	Proportion of Target to Denominator Discharges	35.2%	30.4%	29.4%	30.1%
	Average Length of Stay for Target	10.4	8.4	12.4	6.2
	Average Medicare Payment for Target	\$19,887	\$21,097	\$20,621	\$19,952
	Sum of Medicare Payments for Target	\$1,531,331	\$1,371,286	\$1,484,691	\$1,655,983
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	48	36	38	29
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	480	443	471	507
	Proportion of Target to Denominator Discharges	10.0%	8.1%	8.1%	5.7%
	Average Length of Stay for Target	33.4	23.2	29.3	34.2
	Average Medicare Payment for Target	\$125,198	\$98,643	\$111,959	\$133,582
	Sum of Medicare Payments for Target	\$6,009,514	\$3,551,140	\$4,254,456	\$3,873,872

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Hawaii

59

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	62	54	64	56
	All DRGs 246-249 Discharges + outpatient claims	113	94	93	107
	Proportion of Target to Denominator Discharges	54.9%	57.4%	68.8%	52.3%
	Average Length of Stay for Target	4.1	3.7	3.3	3.5
	Average Medicare Payment for Target	\$23,752	\$25,076	\$23,459	\$22,357
	Sum of Medicare Payments for Target	\$1,472,625	\$1,354,080	\$1,501,388	\$1,251,977
Total Knee Replacement	Inpatient discharges with knee replacement px codes	31	27	21	27
	Inpatient discharges + outpatient claims with knee replacement px codes	116	120	91	119
	Proportion of Target to Denominator Discharges	26.7%	22.5%	23.1%	22.7%
	Average Medicare Payment for Target	\$19,759	\$20,267	\$28,874	\$19,396
	Sum of Medicare Payments for Target	\$612,520	\$547,199	\$606,361	\$523,685
Syncope	DRG 312	22	15	30	19
	All medical DRGs in MDC 05 Discharges	505	484	433	446
	Proportion of Target to Denominator Discharges	4.4%	3.1%	6.9%	4.3%
	Average Length of Stay for Target	5.2	3.9	2.2	7.3
	Average Medicare Payment for Target	\$9,549	\$7,995	\$7,942	\$8,418
	Sum of Medicare Payments for Target	\$210,089	\$119,926	\$238,253	\$159,935
Other Circulatory System Diagnoses	DRGs 314, 315, 316	22	22	26	27
	All medical DRGs in MDC 05 Discharges	505	484	433	446
	Proportion of Target to Denominator Discharges	4.4%	4.5%	6.0%	6.1%
	Average Length of Stay for Target	5.7	5.5	6.0	5.9
	Average Medicare Payment for Target	\$19,929	\$16,154	\$19,751	\$17,783
	Sum of Medicare Payments for Target	\$438,434	\$355,381	\$513,514	\$480,146
Other Digestive System Diagnoses	DRGs 393, 394, 395	33	23	24	41
	All medical DRGs in MDC 06 Discharges	283	291	278	313
	Proportion of Target to Denominator Discharges	11.7%	7.9%	8.6%	13.1%
	Average Length of Stay for Target	4.6	4.3	7.2	4.9
	Average Medicare Payment for Target	\$12,042	\$11,698	\$12,172	\$12,037
	Sum of Medicare Payments for Target	\$397,392	\$269,059	\$292,122	\$493,510

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Hawaii

60

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	31	22	25	21
	All medical DRGs in MDC 08 Discharges	108	109	101	82
	Proportion of Target to Denominator Discharges	28.7%	20.2%	24.8%	25.6%
	Average Length of Stay for Target	6.2	5.7	5.0	4.1
	Average Medicare Payment for Target	\$14,723	\$10,723	\$10,174	\$9,530
	Sum of Medicare Payments for Target	\$456,400	\$235,898	\$254,353	\$200,130
Spinal Fusion	Claims with spinal fusion procedure codes	69	65	77	71
	Claims with spinal procedure codes	134	133	147	146
	Proportion of Target to Denominator Discharges	51.5%	48.9%	52.4%	48.6%
	Average Length of Stay for Target	7.2	6.6	5.0	5.7
	Average Medicare Payment for Target	\$43,292	\$41,785	\$42,020	\$43,849
	Sum of Medicare Payments for Target	\$2,987,177	\$2,716,017	\$3,235,563	\$3,113,298
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	66	54	81	84
	All Discharges with Transfer to SNF	700	629	659	679
	Proportion of Target to Denominator Discharges	9.4%	8.6%	12.3%	12.4%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$12,644	\$12,532	\$15,144	\$14,110
	Sum of Medicare Payments for Target	\$834,524	\$676,702	\$1,226,663	\$1,185,237
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	512	521	510	511
	All Discharges excl dc status 02,82,07,20	3,663	3,568	3,621	3,645
	Proportion of Target to Denominator Discharges	14.0%	14.6%	14.1%	14.0%
	Average Length of Stay for Target	7.9	8.5	7.2	8.2
	Average Medicare Payment for Target	\$22,347	\$21,479	\$21,070	\$22,029
	Sum of Medicare Payments for Target	\$11,441,635	\$11,190,452	\$10,745,600	\$11,256,654
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	374	392	382	384
	All Discharges excl dc status 02,82,07,20	3,663	3,568	3,621	3,645
	Proportion of Target to Denominator Discharges	10.2%	11.0%	10.5%	10.5%
	Average Length of Stay for Target	7.5	8.0	6.9	7.7
	Average Medicare Payment for Target	\$21,804	\$20,447	\$21,117	\$22,416
	Sum of Medicare Payments for Target	\$8,154,762	\$8,015,165	\$8,066,544	\$8,607,620

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Hawaii

61

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	439	375	358	367
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,458	2,375	2,400	2,418
	<b>Proportion of Target to Denominator Discharges</b>	17.9%	15.8%	14.9%	15.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$10,555	\$10,634	\$11,402	\$10,946
	<b>Sum of Medicare Payments for Target</b>	\$4,633,605	\$3,987,932	\$4,082,054	\$4,017,308
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	135	119	115	130
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,070	1,036	1,061	1,054
	<b>Proportion of Target to Denominator Discharges</b>	12.6%	11.5%	10.8%	12.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$21,195	\$22,779	\$24,569	\$23,018
	<b>Sum of Medicare Payments for Target</b>	\$2,861,304	\$2,710,732	\$2,825,385	\$2,992,390
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	182	178	179	186
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,458	2,375	2,400	2,418
	<b>Proportion of Target to Denominator Discharges</b>	7.4%	7.5%	7.5%	7.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$8,937	\$9,897	\$9,763	\$10,441
	<b>Sum of Medicare Payments for Target</b>	\$1,626,519	\$1,761,652	\$1,747,574	\$1,942,033
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	122	100	106	134
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,070	1,036	1,061	1,054
	<b>Proportion of Target to Denominator Discharges</b>	11.4%	9.7%	10.0%	12.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$26,718	\$29,642	\$28,703	\$25,912
	<b>Sum of Medicare Payments for Target</b>	\$3,259,654	\$2,964,157	\$3,042,509	\$3,472,258

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Iowa, 32 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	446	473	477	426
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	502	522	532	492
	Proportion of Target to Denominator Discharges	88.8%	90.6%	89.7%	86.6%
	Average Length of Stay for Target	4.7	4.5	4.3	4.2
	Average Medicare Payment for Target	\$8,732	\$8,656	\$8,166	\$8,330
	Sum of Medicare Payments for Target	\$3,894,503	\$4,094,349	\$3,895,194	\$3,548,378
Respiratory Infections	DRGs 177, 178	1,320	1,041	412	766
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,870	1,585	912	1,151
	Proportion of Target to Denominator Discharges	70.6%	65.7%	45.2%	66.6%
	Average Length of Stay for Target	6.9	7.3	5.1	4.9
	Average Medicare Payment for Target	\$14,037	\$13,792	\$11,229	\$11,688
	Sum of Medicare Payments for Target	\$18,528,986	\$14,357,387	\$4,626,550	\$8,952,941
Simple Pneumonia	DRGs 193, 194	501	502	457	334
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	743	729	691	516
	Proportion of Target to Denominator Discharges	67.4%	68.9%	66.1%	64.7%
	Average Length of Stay for Target	4.5	4.4	4.4	4.6
	Average Medicare Payment for Target	\$7,134	\$6,851	\$6,713	\$7,172
	Sum of Medicare Payments for Target	\$3,574,027	\$3,439,412	\$3,068,043	\$2,395,425
Septicemia	DRGs 870, 871, 872	1,523	1,471	1,350	1,366
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	2,638	2,490	2,250	2,148
	Proportion of Target to Denominator Discharges	57.7%	59.1%	60.0%	63.6%
	Average Length of Stay for Target	6.5	6.6	6.1	5.9
	Average Medicare Payment for Target	\$12,810	\$12,670	\$11,521	\$11,278
	Sum of Medicare Payments for Target	\$19,509,634	\$18,637,208	\$15,553,137	\$15,405,220
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	145	122	132	111
	All Discharges for Surgical DRGs	4,808	4,726	5,071	4,838
	Proportion of Target to Denominator Discharges	3.0%	2.6%	2.6%	2.3%
	Average Length of Stay for Target	7.8	9.7	8.4	7.2
	Average Medicare Payment for Target	\$22,972	\$24,936	\$23,004	\$21,234
	Sum of Medicare Payments for Target	\$3,330,872	\$3,042,242	\$3,036,556	\$2,356,928

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Iowa

63

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	8,888	8,196	7,795	7,801
	All Discharges for Medical DRGs w/ or w/o CC or MCC	11,014	10,196	10,171	10,122
	Proportion of Target to Denominator Discharges	80.7%	80.4%	76.6%	77.1%
	Average Length of Stay for Target	5.6	5.8	5.2	5.2
	Average Medicare Payment for Target	\$10,113	\$9,796	\$8,975	\$9,257
	Sum of Medicare Payments for Target	\$89,885,822	\$80,289,904	\$69,959,742	\$72,215,050
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	2,743	2,712	2,949	2,746
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	4,410	4,345	4,728	4,483
	Proportion of Target to Denominator Discharges	62.2%	62.4%	62.4%	61.3%
	Average Length of Stay for Target	7.3	7.8	7.2	7.4
	Average Medicare Payment for Target	\$24,273	\$24,649	\$23,712	\$24,218
	Sum of Medicare Payments for Target	\$66,580,321	\$66,847,475	\$69,927,259	\$66,503,031
Single CC or MCC	Discharges with one CC or MCC coded on the claim	5,229	4,811	4,883	4,690
	All Discharges with one or more CC or MCC coded on the claim	11,600	10,891	10,741	10,536
	Proportion of Target to Denominator Discharges	45.1%	44.2%	45.5%	44.5%
	Average Length of Stay for Target	5.0	5.2	4.8	4.8
	Average Medicare Payment for Target	\$13,064	\$13,275	\$13,123	\$12,957
	Sum of Medicare Payments for Target	\$68,310,671	\$63,864,706	\$64,080,977	\$60,770,106
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	303	248	276	258
	All Discharges with one or more MCCs including severe malnutrition	827	757	707	752
	Proportion of Target to Denominator Discharges	36.6%	32.8%	39.0%	34.3%
	Average Length of Stay for Target	6.9	7.9	6.9	6.2
	Average Medicare Payment for Target	\$14,838	\$14,054	\$13,800	\$14,818
	Sum of Medicare Payments for Target	\$4,495,996	\$3,485,362	\$3,808,900	\$3,823,014
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	197	152	83	63
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	1,820	1,704	1,473	1,476
	Proportion of Target to Denominator Discharges	10.8%	8.9%	5.6%	4.3%
	Average Length of Stay for Target	20.9	22.8	19.1	19.8
	Average Medicare Payment for Target	\$66,386	\$68,131	\$59,165	\$64,360
	Sum of Medicare Payments for Target	\$13,078,112	\$10,355,908	\$4,910,714	\$4,054,692

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Iowa

64

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	287	314	323	301
	All DRGs 246-249 Discharges + outpatient claims	647	672	714	689
	Proportion of Target to Denominator Discharges	44.4%	46.7%	45.2%	43.7%
	Average Length of Stay for Target	3.0	3.3	3.1	2.9
	Average Medicare Payment for Target	\$15,337	\$15,512	\$15,156	\$15,315
	Sum of Medicare Payments for Target	\$4,401,704	\$4,870,922	\$4,895,409	\$4,609,950
Total Knee Replacement	Inpatient discharges with knee replacement px codes	287	282	285	287
	Inpatient discharges + outpatient claims with knee replacement px codes	1,056	1,058	1,024	1,024
	Proportion of Target to Denominator Discharges	27.2%	26.7%	27.8%	28.0%
	Average Medicare Payment for Target	\$13,038	\$13,504	\$13,397	\$13,149
	Sum of Medicare Payments for Target	\$3,742,014	\$3,808,032	\$3,818,060	\$3,773,706
Syncope	DRG 312	93	66	111	73
	All medical DRGs in MDC 05 Discharges	2,149	2,027	2,221	1,992
	Proportion of Target to Denominator Discharges	4.3%	3.3%	5.0%	3.7%
	Average Length of Stay for Target	3.5	3.2	3.2	2.7
	Average Medicare Payment for Target	\$4,903	\$4,682	\$4,507	\$4,593
	Sum of Medicare Payments for Target	\$456,005	\$308,982	\$500,238	\$335,299
Other Circulatory System Diagnoses	DRGs 314, 315, 316	120	84	103	91
	All medical DRGs in MDC 05 Discharges	2,149	2,027	2,221	1,992
	Proportion of Target to Denominator Discharges	5.6%	4.1%	4.6%	4.6%
	Average Length of Stay for Target	5.2	5.2	6.1	5.2
	Average Medicare Payment for Target	\$11,495	\$9,778	\$11,185	\$10,682
	Sum of Medicare Payments for Target	\$1,379,432	\$821,348	\$1,152,060	\$972,081
Other Digestive System Diagnoses	DRGs 393, 394, 395	93	119	135	107
	All medical DRGs in MDC 06 Discharges	1,161	1,097	1,241	1,114
	Proportion of Target to Denominator Discharges	8.0%	10.8%	10.9%	9.6%
	Average Length of Stay for Target	5.5	5.3	4.7	4.4
	Average Medicare Payment for Target	\$7,595	\$7,503	\$7,289	\$7,367
	Sum of Medicare Payments for Target	\$706,319	\$892,842	\$984,009	\$788,253

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Iowa

65

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	100	101	147	133
	All medical DRGs in MDC 08 Discharges	438	440	501	527
	Proportion of Target to Denominator Discharges	22.8%	23.0%	29.3%	25.2%
	Average Length of Stay for Target	4.7	4.5	4.2	4.5
	Average Medicare Payment for Target	\$7,016	\$6,275	\$6,049	\$6,173
	Sum of Medicare Payments for Target	\$701,550	\$633,815	\$889,152	\$820,952
Spinal Fusion	Claims with spinal fusion procedure codes	358	329	338	327
	Claims with spinal procedure codes	695	664	641	638
	Proportion of Target to Denominator Discharges	51.5%	49.5%	52.7%	51.3%
	Average Length of Stay for Target	3.1	3.5	3.7	3.5
	Average Medicare Payment for Target	\$25,165	\$27,037	\$26,507	\$25,183
	Sum of Medicare Payments for Target	\$9,009,045	\$8,895,311	\$8,959,321	\$8,234,722
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	426	427	504	476
	All Discharges with Transfer to SNF	3,288	3,279	3,341	3,302
	Proportion of Target to Denominator Discharges	13.0%	13.0%	15.1%	14.4%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,503	\$8,708	\$8,813	\$9,304
	Sum of Medicare Payments for Target	\$4,048,175	\$3,718,120	\$4,441,503	\$4,428,828
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	2,156	1,900	2,091	2,032
	All Discharges excl dc status 02,82,07,20	15,576	14,625	15,171	14,809
	Proportion of Target to Denominator Discharges	13.8%	13.0%	13.8%	13.7%
	Average Length of Stay for Target	6.0	6.2	5.8	5.8
	Average Medicare Payment for Target	\$13,033	\$13,440	\$12,676	\$13,471
	Sum of Medicare Payments for Target	\$28,098,858	\$25,536,795	\$26,506,134	\$27,372,548
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,724	1,521	1,703	1,621
	All Discharges excl dc status 02,82,07,20	15,576	14,625	15,171	14,809
	Proportion of Target to Denominator Discharges	11.1%	10.4%	11.2%	10.9%
	Average Length of Stay for Target	5.8	6.0	5.8	5.9
	Average Medicare Payment for Target	\$12,588	\$13,275	\$12,542	\$13,355
	Sum of Medicare Payments for Target	\$21,702,003	\$20,191,857	\$21,359,055	\$21,647,855

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Iowa

66

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,850	1,610	1,851	1,690
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	9,627	8,999	9,140	8,856
	<b>Proportion of Target to Denominator Discharges</b>	19.2%	17.9%	20.3%	19.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,956	\$6,807	\$6,420	\$6,621
	<b>Sum of Medicare Payments for Target</b>	\$12,868,262	\$10,958,514	\$11,883,621	\$11,189,285
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	588	585	631	574
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	4,236	4,240	4,480	4,275
	<b>Proportion of Target to Denominator Discharges</b>	13.9%	13.8%	14.1%	13.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$16,790	\$16,723	\$17,134	\$16,450
	<b>Sum of Medicare Payments for Target</b>	\$9,872,281	\$9,782,979	\$10,811,757	\$9,442,534
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	799	753	797	845
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	9,627	8,999	9,140	8,856
	<b>Proportion of Target to Denominator Discharges</b>	8.3%	8.4%	8.7%	9.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,427	\$6,036	\$5,645	\$5,816
	<b>Sum of Medicare Payments for Target</b>	\$5,135,293	\$4,545,452	\$4,498,799	\$4,914,354
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	874	937	1,021	1,011
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	4,236	4,240	4,480	4,275
	<b>Proportion of Target to Denominator Discharges</b>	20.6%	22.1%	22.8%	23.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$17,065	\$17,667	\$17,062	\$17,474
	<b>Sum of Medicare Payments for Target</b>	\$14,914,993	\$16,554,164	\$17,419,931	\$17,666,162

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Idaho, 16 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	181	169	219	210
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	193	188	237	235
	Proportion of Target to Denominator Discharges	93.8%	89.9%	92.4%	89.4%
	Average Length of Stay for Target	3.9	5.3	4.0	4.1
	Average Medicare Payment for Target	\$10,003	\$10,461	\$9,328	\$9,453
	Sum of Medicare Payments for Target	\$1,810,542	\$1,767,837	\$2,042,759	\$1,985,228
Respiratory Infections	DRGs 177, 178	669	508	149	261
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	781	623	271	363
	Proportion of Target to Denominator Discharges	85.7%	81.5%	55.0%	71.9%
	Average Length of Stay for Target	7.4	6.5	4.8	5.5
	Average Medicare Payment for Target	\$16,333	\$16,195	\$12,887	\$14,133
	Sum of Medicare Payments for Target	\$10,926,789	\$8,227,208	\$1,920,212	\$3,688,809
Simple Pneumonia	DRGs 193, 194	107	112	115	92
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	167	153	163	127
	Proportion of Target to Denominator Discharges	64.1%	73.2%	70.6%	72.4%
	Average Length of Stay for Target	4.8	3.9	4.3	4.3
	Average Medicare Payment for Target	\$8,358	\$8,649	\$8,502	\$8,348
	Sum of Medicare Payments for Target	\$894,265	\$968,641	\$977,716	\$768,008
Septicemia	DRGs 870, 871, 872	718	625	580	622
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	995	871	815	834
	Proportion of Target to Denominator Discharges	72.2%	71.8%	71.2%	74.6%
	Average Length of Stay for Target	6.7	7.1	5.7	5.4
	Average Medicare Payment for Target	\$17,793	\$16,568	\$13,780	\$12,477
	Sum of Medicare Payments for Target	\$12,775,105	\$10,355,246	\$7,992,537	\$7,760,439
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	46	33	51	49
	All Discharges for Surgical DRGs	1,945	1,909	2,085	2,170
	Proportion of Target to Denominator Discharges	2.4%	1.7%	2.4%	2.3%
	Average Length of Stay for Target	9.0	8.5	5.4	5.8
	Average Medicare Payment for Target	\$29,044	\$26,469	\$22,005	\$23,619
	Sum of Medicare Payments for Target	\$1,336,044	\$873,484	\$1,122,263	\$1,157,326

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Idaho

68

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	3,246	3,109	2,869	2,919
	All Discharges for Medical DRGs w/ or w/o CC or MCC	3,806	3,689	3,605	3,635
	Proportion of Target to Denominator Discharges	85.3%	84.3%	79.6%	80.3%
	Average Length of Stay for Target	5.8	5.5	5.0	5.0
	Average Medicare Payment for Target	\$12,155	\$11,869	\$10,741	\$11,036
	Sum of Medicare Payments for Target	\$39,453,674	\$36,899,563	\$30,815,145	\$32,215,092
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,098	1,046	1,165	1,211
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,808	1,771	1,932	2,029
	Proportion of Target to Denominator Discharges	60.7%	59.1%	60.3%	59.7%
	Average Length of Stay for Target	6.7	6.5	6.5	6.5
	Average Medicare Payment for Target	\$26,157	\$26,897	\$27,303	\$26,983
	Sum of Medicare Payments for Target	\$28,720,515	\$28,134,752	\$31,808,086	\$32,676,406
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,800	1,772	1,728	1,769
	All Discharges with one or more CC or MCC coded on the claim	4,337	4,150	4,031	4,128
	Proportion of Target to Denominator Discharges	41.5%	42.7%	42.9%	42.9%
	Average Length of Stay for Target	5.1	4.8	4.5	4.4
	Average Medicare Payment for Target	\$15,257	\$15,124	\$15,089	\$15,578
	Sum of Medicare Payments for Target	\$27,461,777	\$26,800,150	\$26,073,968	\$27,557,717
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	89	81	120	119
	All Discharges with one or more MCCs including severe malnutrition	330	311	317	332
	Proportion of Target to Denominator Discharges	27.0%	26.0%	37.9%	35.8%
	Average Length of Stay for Target	7.5	6.2	6.1	6.0
	Average Medicare Payment for Target	\$14,222	\$14,894	\$15,963	\$15,642
	Sum of Medicare Payments for Target	\$1,265,767	\$1,206,430	\$1,915,599	\$1,861,442
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	144	75	38	19
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	850	706	631	671
	Proportion of Target to Denominator Discharges	16.9%	10.6%	6.0%	2.8%
	Average Length of Stay for Target	19.5	21.2	19.3	19.8
	Average Medicare Payment for Target	\$75,046	\$93,023	\$76,271	\$70,153
	Sum of Medicare Payments for Target	\$10,806,598	\$6,976,762	\$2,898,312	\$1,332,907

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Idaho

69

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	148	131	167	147
	All DRGs 246-249 Discharges + outpatient claims	251	232	291	266
	Proportion of Target to Denominator Discharges	59.0%	56.5%	57.4%	55.3%
	Average Length of Stay for Target	2.7	2.8	2.6	3.0
	Average Medicare Payment for Target	\$17,937	\$17,836	\$17,961	\$18,353
	Sum of Medicare Payments for Target	\$2,654,642	\$2,336,534	\$2,999,536	\$2,697,938
Total Knee Replacement	Inpatient discharges with knee replacement px codes	34	56	64	55
	Inpatient discharges + outpatient claims with knee replacement px codes	378	483	432	407
	Proportion of Target to Denominator Discharges	9.0%	11.6%	14.8%	13.5%
	Average Medicare Payment for Target	\$17,381	\$16,611	\$20,114	\$16,422
	Sum of Medicare Payments for Target	\$590,954	\$930,212	\$1,287,324	\$903,187
Syncope	DRG 312	17	15	19	22
	All medical DRGs in MDC 05 Discharges	621	668	728	690
	Proportion of Target to Denominator Discharges	2.7%	2.2%	2.6%	3.2%
	Average Length of Stay for Target	3.6	3.3	3.3	3.5
	Average Medicare Payment for Target	\$5,743	\$6,094	\$5,591	\$5,889
	Sum of Medicare Payments for Target	\$97,626	\$91,408	\$106,233	\$129,565
Other Circulatory System Diagnoses	DRGs 314, 315, 316	41	30	30	34
	All medical DRGs in MDC 05 Discharges	621	668	728	690
	Proportion of Target to Denominator Discharges	6.6%	4.5%	4.1%	4.9%
	Average Length of Stay for Target	5.1	4.6	7.9	4.7
	Average Medicare Payment for Target	\$11,029	\$12,066	\$14,015	\$13,367
	Sum of Medicare Payments for Target	\$452,187	\$361,977	\$420,452	\$454,481
Other Digestive System Diagnoses	DRGs 393, 394, 395	35	51	48	36
	All medical DRGs in MDC 06 Discharges	342	375	453	393
	Proportion of Target to Denominator Discharges	10.2%	13.6%	10.6%	9.2%
	Average Length of Stay for Target	5.0	3.3	4.3	3.9
	Average Medicare Payment for Target	\$8,056	\$7,889	\$9,300	\$8,410
	Sum of Medicare Payments for Target	\$281,972	\$402,337	\$446,385	\$302,766

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Idaho

70

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	40	33	25	46
	All medical DRGs in MDC 08 Discharges	130	131	136	155
	Proportion of Target to Denominator Discharges	30.8%	25.2%	18.4%	29.7%
	Average Length of Stay for Target	4.2	3.9	5.2	3.2
	Average Medicare Payment for Target	\$8,492	\$8,282	\$8,165	\$7,522
	Sum of Medicare Payments for Target	\$339,686	\$273,294	\$204,116	\$346,020
Spinal Fusion	Claims with spinal fusion procedure codes	239	231	238	247
	Claims with spinal procedure codes	438	466	443	451
	Proportion of Target to Denominator Discharges	54.6%	49.6%	53.7%	54.8%
	Average Length of Stay for Target	3.0	2.7	2.7	3.0
	Average Medicare Payment for Target	\$26,303	\$28,571	\$28,135	\$30,952
	Sum of Medicare Payments for Target	\$6,286,534	\$6,599,844	\$6,696,081	\$7,645,234
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	117	108	128	125
	All Discharges with Transfer to SNF	963	944	913	969
	Proportion of Target to Denominator Discharges	12.1%	11.4%	14.0%	12.9%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,674	\$11,399	\$13,012	\$11,454
	Sum of Medicare Payments for Target	\$1,248,843	\$1,231,063	\$1,665,527	\$1,431,688
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	646	599	645	727
	All Discharges excl dc status 02,82,07,20	5,577	5,456	5,692	5,732
	Proportion of Target to Denominator Discharges	11.6%	11.0%	11.3%	12.7%
	Average Length of Stay for Target	5.5	5.7	5.4	5.6
	Average Medicare Payment for Target	\$15,668	\$15,823	\$15,480	\$16,271
	Sum of Medicare Payments for Target	\$10,121,765	\$9,478,075	\$9,984,790	\$11,829,376
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	506	464	513	552
	All Discharges excl dc status 02,82,07,20	5,577	5,456	5,692	5,732
	Proportion of Target to Denominator Discharges	9.1%	8.5%	9.0%	9.6%
	Average Length of Stay for Target	5.5	5.7	5.1	5.5
	Average Medicare Payment for Target	\$15,821	\$15,476	\$15,625	\$16,141
	Sum of Medicare Payments for Target	\$8,005,212	\$7,181,004	\$8,015,782	\$8,909,651

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Idaho

71

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	696	730	773	728
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,487	3,365	3,324	3,242
	<b>Proportion of Target to Denominator Discharges</b>	20.0%	21.7%	23.3%	22.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,614	\$8,487	\$7,899	\$8,080
	<b>Sum of Medicare Payments for Target</b>	\$5,995,360	\$6,195,212	\$6,106,030	\$5,881,977
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	305	279	337	312
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,767	1,747	1,908	1,967
	<b>Proportion of Target to Denominator Discharges</b>	17.3%	16.0%	17.7%	15.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$18,569	\$19,408	\$20,146	\$19,152
	<b>Sum of Medicare Payments for Target</b>	\$5,663,410	\$5,414,933	\$6,789,156	\$5,975,443
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	295	273	319	302
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,487	3,365	3,324	3,242
	<b>Proportion of Target to Denominator Discharges</b>	8.5%	8.1%	9.6%	9.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,156	\$7,440	\$6,782	\$7,377
	<b>Sum of Medicare Payments for Target</b>	\$2,110,934	\$2,031,066	\$2,163,439	\$2,227,814
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	381	442	460	496
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,767	1,747	1,908	1,967
	<b>Proportion of Target to Denominator Discharges</b>	21.6%	25.3%	24.1%	25.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,666	\$19,859	\$20,624	\$20,618
	<b>Sum of Medicare Payments for Target</b>	\$7,873,756	\$8,777,645	\$9,487,021	\$10,226,378

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - Illinois, 120 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,959	1,858	1,878	1,839
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	2,229	2,111	2,169	2,121
	Proportion of Target to Denominator Discharges	87.9%	88.0%	86.6%	86.7%
	Average Length of Stay for Target	4.6	5.1	4.6	4.7
	Average Medicare Payment for Target	\$10,058	\$10,707	\$9,822	\$10,374
	Sum of Medicare Payments for Target	\$19,704,443	\$19,894,463	\$18,446,472	\$19,077,490
Respiratory Infections	DRGs 177, 178	5,262	6,166	2,743	3,651
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	7,101	7,825	4,766	5,307
	Proportion of Target to Denominator Discharges	74.1%	78.8%	57.6%	68.8%
	Average Length of Stay for Target	6.4	7.2	5.4	5.2
	Average Medicare Payment for Target	\$15,273	\$15,697	\$13,080	\$13,183
	Sum of Medicare Payments for Target	\$80,365,573	\$96,789,267	\$35,877,574	\$48,132,350
Simple Pneumonia	DRGs 193, 194	1,680	1,473	1,795	1,407
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,930	2,437	3,080	2,391
	Proportion of Target to Denominator Discharges	57.3%	60.4%	58.3%	58.8%
	Average Length of Stay for Target	4.8	5.0	4.5	4.9
	Average Medicare Payment for Target	\$8,014	\$7,924	\$7,534	\$7,697
	Sum of Medicare Payments for Target	\$13,463,202	\$11,672,133	\$13,523,426	\$10,829,808
Septicemia	DRGs 870, 871, 872	7,445	7,110	6,625	6,670
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	11,991	11,177	10,870	10,567
	Proportion of Target to Denominator Discharges	62.1%	63.6%	60.9%	63.1%
	Average Length of Stay for Target	6.9	7.5	6.6	6.5
	Average Medicare Payment for Target	\$14,895	\$16,187	\$13,769	\$13,640
	Sum of Medicare Payments for Target	\$110,891,923	\$115,089,870	\$91,216,611	\$90,977,310
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	543	537	583	546
	All Discharges for Surgical DRGs	18,993	17,408	18,777	18,246
	Proportion of Target to Denominator Discharges	2.9%	3.1%	3.1%	3.0%
	Average Length of Stay for Target	9.0	10.5	9.3	9.1
	Average Medicare Payment for Target	\$27,684	\$29,419	\$25,928	\$25,941
	Sum of Medicare Payments for Target	\$15,032,297	\$15,798,086	\$15,115,855	\$14,163,583

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Illinois

73

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	43,125	41,112	39,542	39,604
	All Discharges for Medical DRGs w/ or w/o CC or MCC	54,790	50,904	51,199	51,236
	Proportion of Target to Denominator Discharges	78.7%	80.8%	77.2%	77.3%
	Average Length of Stay for Target	5.5	5.9	5.3	5.3
	Average Medicare Payment for Target	\$11,375	\$11,821	\$10,669	\$10,777
	Sum of Medicare Payments for Target	\$490,550,819	\$485,995,274	\$421,888,121	\$426,823,290
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	11,826	11,094	11,825	11,541
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	17,644	16,053	17,430	16,999
	Proportion of Target to Denominator Discharges	67.0%	69.1%	67.8%	67.9%
	Average Length of Stay for Target	7.8	8.1	7.9	7.8
	Average Medicare Payment for Target	\$28,194	\$28,523	\$27,738	\$26,870
	Sum of Medicare Payments for Target	\$333,423,595	\$316,429,214	\$327,998,941	\$310,105,851
Single CC or MCC	Discharges with one CC or MCC coded on the claim	24,507	22,362	23,064	22,958
	All Discharges with one or more CC or MCC coded on the claim	54,789	52,081	51,311	51,092
	Proportion of Target to Denominator Discharges	44.7%	42.9%	44.9%	44.9%
	Average Length of Stay for Target	4.9	5.1	4.7	4.8
	Average Medicare Payment for Target	\$14,182	\$14,254	\$13,805	\$13,645
	Sum of Medicare Payments for Target	\$347,555,257	\$318,755,107	\$318,388,330	\$313,252,852
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	1,463	1,254	1,567	1,573
	All Discharges with one or more MCCs including severe malnutrition	4,313	4,081	4,050	4,256
	Proportion of Target to Denominator Discharges	33.9%	30.7%	38.7%	37.0%
	Average Length of Stay for Target	5.9	6.3	5.8	5.7
	Average Medicare Payment for Target	\$14,940	\$15,010	\$15,388	\$14,083
	Sum of Medicare Payments for Target	\$21,857,830	\$18,822,168	\$24,113,529	\$22,153,263
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	855	1,074	542	514
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	8,515	8,325	7,283	7,326
	Proportion of Target to Denominator Discharges	10.0%	12.9%	7.4%	7.0%
	Average Length of Stay for Target	19.8	22.8	19.7	18.6
	Average Medicare Payment for Target	\$69,944	\$80,613	\$74,549	\$74,958
	Sum of Medicare Payments for Target	\$59,802,012	\$86,578,291	\$40,405,568	\$38,528,199

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Illinois

74

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	1,022	883	1,041	915
	All DRGs 246-249 Discharges + outpatient claims	2,147	2,014	2,260	2,102
	Proportion of Target to Denominator Discharges	47.6%	43.8%	46.1%	43.5%
	Average Length of Stay for Target	3.8	3.5	3.8	3.6
	Average Medicare Payment for Target	\$17,874	\$17,800	\$18,037	\$17,418
	Sum of Medicare Payments for Target	\$18,267,606	\$15,717,640	\$18,776,429	\$15,937,657
Total Knee Replacement	Inpatient discharges with knee replacement px codes	896	674	875	736
	Inpatient discharges + outpatient claims with knee replacement px codes	3,013	2,673	2,978	2,818
	Proportion of Target to Denominator Discharges	29.7%	25.2%	29.4%	26.1%
	Average Medicare Payment for Target	\$14,621	\$15,996	\$15,711	\$15,748
	Sum of Medicare Payments for Target	\$13,100,500	\$10,781,585	\$13,747,408	\$11,590,436
Syncope	DRG 312	516	452	546	518
	All medical DRGs in MDC 05 Discharges	10,887	9,968	10,906	10,233
	Proportion of Target to Denominator Discharges	4.7%	4.5%	5.0%	5.1%
	Average Length of Stay for Target	3.1	3.1	3.1	3.1
	Average Medicare Payment for Target	\$6,597	\$6,041	\$5,582	\$6,324
	Sum of Medicare Payments for Target	\$3,404,142	\$2,730,337	\$3,047,720	\$3,275,733
Other Circulatory System Diagnoses	DRGs 314, 315, 316	602	538	539	594
	All medical DRGs in MDC 05 Discharges	10,887	9,968	10,906	10,233
	Proportion of Target to Denominator Discharges	5.5%	5.4%	4.9%	5.8%
	Average Length of Stay for Target	5.8	5.6	5.5	5.7
	Average Medicare Payment for Target	\$13,726	\$13,457	\$12,617	\$12,771
	Sum of Medicare Payments for Target	\$8,263,268	\$7,239,610	\$6,800,677	\$7,585,935
Other Digestive System Diagnoses	DRGs 393, 394, 395	700	655	680	734
	All medical DRGs in MDC 06 Discharges	5,872	5,414	5,746	5,760
	Proportion of Target to Denominator Discharges	11.9%	12.1%	11.8%	12.7%
	Average Length of Stay for Target	4.6	4.5	4.7	4.3
	Average Medicare Payment for Target	\$9,106	\$9,296	\$9,014	\$8,747
	Sum of Medicare Payments for Target	\$6,374,313	\$6,089,198	\$6,129,730	\$6,420,574

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Illinois

75

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	681	544	746	708
	All medical DRGs in MDC 08 Discharges	2,484	2,066	2,565	2,533
	Proportion of Target to Denominator Discharges	27.4%	26.3%	29.1%	28.0%
	Average Length of Stay for Target	3.9	4.5	4.2	4.3
	Average Medicare Payment for Target	\$7,777	\$8,077	\$7,455	\$7,659
	Sum of Medicare Payments for Target	\$5,296,132	\$4,393,978	\$5,561,077	\$5,422,470
Spinal Fusion	Claims with spinal fusion procedure codes	1,175	1,011	1,119	1,087
	Claims with spinal procedure codes	2,532	2,197	2,411	2,372
	Proportion of Target to Denominator Discharges	46.4%	46.0%	46.4%	45.8%
	Average Length of Stay for Target	4.3	4.4	4.3	4.5
	Average Medicare Payment for Target	\$32,283	\$33,283	\$32,607	\$33,711
	Sum of Medicare Payments for Target	\$37,931,955	\$33,649,501	\$36,487,777	\$36,643,625
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	2,293	2,029	2,433	2,306
	All Discharges with Transfer to SNF	17,196	17,028	17,481	17,233
	Proportion of Target to Denominator Discharges	13.3%	11.9%	13.9%	13.4%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,578	\$9,684	\$9,585	\$9,434
	Sum of Medicare Payments for Target	\$21,962,789	\$19,649,751	\$23,319,228	\$21,754,009
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	13,681	12,797	12,938	12,931
	All Discharges excl dc status 02,82,07,20	73,249	67,277	70,214	69,420
	Proportion of Target to Denominator Discharges	18.7%	19.0%	18.4%	18.6%
	Average Length of Stay for Target	6.3	6.7	6.2	6.3
	Average Medicare Payment for Target	\$14,857	\$15,700	\$14,648	\$14,542
	Sum of Medicare Payments for Target	\$203,254,819	\$200,911,761	\$189,520,307	\$188,044,888
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	9,896	9,447	9,427	9,488
	All Discharges excl dc status 02,82,07,20	73,249	67,277	70,214	69,420
	Proportion of Target to Denominator Discharges	13.5%	14.0%	13.4%	13.7%
	Average Length of Stay for Target	6.1	6.5	6.1	6.2
	Average Medicare Payment for Target	\$14,403	\$15,339	\$14,309	\$14,285
	Sum of Medicare Payments for Target	\$142,528,386	\$144,911,965	\$134,891,250	\$135,536,735

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Illinois

76

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	8,205	7,261	8,094	7,723
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	47,752	43,956	44,345	43,679
	<b>Proportion of Target to Denominator Discharges</b>	17.2%	16.5%	18.3%	17.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,986	\$7,909	\$7,719	\$7,550
	<b>Sum of Medicare Payments for Target</b>	\$65,523,593	\$57,427,688	\$62,477,262	\$58,309,129
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,310	1,922	2,103	2,022
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	16,451	14,833	16,065	15,574
	<b>Proportion of Target to Denominator Discharges</b>	14.0%	13.0%	13.1%	13.0%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$18,453	\$18,376	\$18,472	\$18,182
	<b>Sum of Medicare Payments for Target</b>	\$42,626,939	\$35,319,121	\$38,846,380	\$36,764,682
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,843	3,196	3,564	3,404
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	47,752	43,956	44,345	43,679
	<b>Proportion of Target to Denominator Discharges</b>	8.0%	7.3%	8.0%	7.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,474	\$7,492	\$6,995	\$6,890
	<b>Sum of Medicare Payments for Target</b>	\$28,723,545	\$23,944,309	\$24,930,450	\$23,453,389
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,509	2,242	2,446	2,489
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	16,451	14,833	16,065	15,574
	<b>Proportion of Target to Denominator Discharges</b>	15.3%	15.1%	15.2%	16.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,302	\$20,608	\$20,064	\$20,137
	<b>Sum of Medicare Payments for Target</b>	\$50,937,995	\$46,202,777	\$49,077,031	\$50,121,079

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Indiana, 83 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,102	1,016	1,096	1,059
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,263	1,167	1,290	1,218
	Proportion of Target to Denominator Discharges	87.3%	87.1%	85.0%	86.9%
	Average Length of Stay for Target	4.5	4.7	4.4	4.4
	Average Medicare Payment for Target	\$9,301	\$9,344	\$8,938	\$8,800
	Sum of Medicare Payments for Target	\$10,249,265	\$9,493,350	\$9,796,185	\$9,318,762
Respiratory Infections	DRGs 177, 178	3,759	3,313	1,174	1,915
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	5,098	4,479	2,389	2,988
	Proportion of Target to Denominator Discharges	73.7%	74.0%	49.1%	64.1%
	Average Length of Stay for Target	6.5	7.1	5.3	5.1
	Average Medicare Payment for Target	\$15,087	\$14,794	\$12,420	\$12,677
	Sum of Medicare Payments for Target	\$56,712,912	\$49,013,699	\$14,581,516	\$24,276,683
Simple Pneumonia	DRGs 193, 194	1,237	1,060	1,138	950
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,972	1,696	1,874	1,537
	Proportion of Target to Denominator Discharges	62.7%	62.5%	60.7%	61.8%
	Average Length of Stay for Target	4.5	5.1	4.5	4.8
	Average Medicare Payment for Target	\$7,697	\$7,761	\$7,490	\$7,554
	Sum of Medicare Payments for Target	\$9,521,778	\$8,226,551	\$8,523,525	\$7,176,620
Septicemia	DRGs 870, 871, 872	3,760	3,341	3,201	3,291
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	6,639	5,875	5,783	5,679
	Proportion of Target to Denominator Discharges	56.6%	56.9%	55.4%	58.0%
	Average Length of Stay for Target	6.7	7.2	6.3	6.2
	Average Medicare Payment for Target	\$14,540	\$15,330	\$13,000	\$13,083
	Sum of Medicare Payments for Target	\$54,671,122	\$51,219,119	\$41,613,589	\$43,057,798
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	329	324	317	276
	All Discharges for Surgical DRGs	10,401	10,136	10,656	10,872
	Proportion of Target to Denominator Discharges	3.2%	3.2%	3.0%	2.5%
	Average Length of Stay for Target	9.1	10.2	8.4	8.3
	Average Medicare Payment for Target	\$26,069	\$35,552	\$23,349	\$23,790
	Sum of Medicare Payments for Target	\$8,576,586	\$11,518,864	\$7,401,652	\$6,566,096

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Indiana

78

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	22,824	20,966	19,461	19,913
	All Discharges for Medical DRGs w/ or w/o CC or MCC	28,347	25,884	25,547	26,027
	Proportion of Target to Denominator Discharges	80.5%	81.0%	76.2%	76.5%
	Average Length of Stay for Target	5.4	5.6	5.0	5.0
	Average Medicare Payment for Target	\$10,647	\$10,771	\$9,501	\$9,718
	Sum of Medicare Payments for Target	\$243,000,059	\$225,834,886	\$184,901,220	\$193,518,307
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	6,184	6,199	6,211	6,448
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	9,666	9,401	9,956	10,183
	Proportion of Target to Denominator Discharges	64.0%	65.9%	62.4%	63.3%
	Average Length of Stay for Target	7.2	7.6	7.1	7.1
	Average Medicare Payment for Target	\$24,854	\$27,805	\$24,975	\$24,456
	Sum of Medicare Payments for Target	\$153,699,141	\$172,360,660	\$155,118,564	\$157,694,147
Single CC or MCC	Discharges with one CC or MCC coded on the claim	13,194	12,037	11,574	11,761
	All Discharges with one or more CC or MCC coded on the claim	28,897	27,103	25,653	26,340
	Proportion of Target to Denominator Discharges	45.7%	44.4%	45.1%	44.7%
	Average Length of Stay for Target	4.9	5.0	4.5	4.5
	Average Medicare Payment for Target	\$13,409	\$14,852	\$12,931	\$13,036
	Sum of Medicare Payments for Target	\$176,912,981	\$178,779,066	\$149,658,652	\$153,313,641
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	537	455	533	567
	All Discharges with one or more MCCs including severe malnutrition	1,416	1,384	1,397	1,522
	Proportion of Target to Denominator Discharges	37.9%	32.9%	38.2%	37.3%
	Average Length of Stay for Target	5.7	6.5	5.9	5.9
	Average Medicare Payment for Target	\$13,837	\$14,516	\$13,433	\$13,292
	Sum of Medicare Payments for Target	\$7,430,587	\$6,604,669	\$7,160,025	\$7,536,578
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	602	626	302	300
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	4,499	4,071	3,603	3,709
	Proportion of Target to Denominator Discharges	13.4%	15.4%	8.4%	8.1%
	Average Length of Stay for Target	19.0	22.6	19.7	18.1
	Average Medicare Payment for Target	\$62,993	\$66,614	\$65,222	\$64,631
	Sum of Medicare Payments for Target	\$37,921,786	\$41,700,332	\$19,697,083	\$19,389,183

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Indiana

79

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	646	596	639	628
	All DRGs 246-249 Discharges + outpatient claims	1,397	1,275	1,382	1,318
	Proportion of Target to Denominator Discharges	46.2%	46.7%	46.2%	47.6%
	Average Length of Stay for Target	3.5	3.5	3.2	3.5
	Average Medicare Payment for Target	\$16,797	\$16,936	\$16,117	\$16,712
	Sum of Medicare Payments for Target	\$10,851,182	\$10,093,958	\$10,298,815	\$10,495,203
Total Knee Replacement	Inpatient discharges with knee replacement px codes	390	366	452	490
	Inpatient discharges + outpatient claims with knee replacement px codes	1,796	1,668	1,743	1,844
	Proportion of Target to Denominator Discharges	21.7%	21.9%	25.9%	26.6%
	Average Medicare Payment for Target	\$15,283	\$36,559	\$15,017	\$15,010
	Sum of Medicare Payments for Target	\$5,960,546	\$13,380,711	\$6,787,790	\$7,354,981
Syncope	DRG 312	271	241	295	300
	All medical DRGs in MDC 05 Discharges	5,531	5,235	5,639	5,418
	Proportion of Target to Denominator Discharges	4.9%	4.6%	5.2%	5.5%
	Average Length of Stay for Target	2.9	3.4	2.9	3.0
	Average Medicare Payment for Target	\$5,397	\$5,318	\$5,120	\$5,163
	Sum of Medicare Payments for Target	\$1,462,547	\$1,281,620	\$1,510,341	\$1,548,790
Other Circulatory System Diagnoses	DRGs 314, 315, 316	278	215	235	285
	All medical DRGs in MDC 05 Discharges	5,531	5,235	5,639	5,418
	Proportion of Target to Denominator Discharges	5.0%	4.1%	4.2%	5.3%
	Average Length of Stay for Target	5.0	5.7	5.3	4.9
	Average Medicare Payment for Target	\$11,381	\$11,507	\$11,423	\$10,787
	Sum of Medicare Payments for Target	\$3,164,043	\$2,474,098	\$2,684,389	\$3,074,181
Other Digestive System Diagnoses	DRGs 393, 394, 395	310	312	331	336
	All medical DRGs in MDC 06 Discharges	2,731	2,630	2,874	2,833
	Proportion of Target to Denominator Discharges	11.4%	11.9%	11.5%	11.9%
	Average Length of Stay for Target	4.2	4.7	4.3	4.2
	Average Medicare Payment for Target	\$7,984	\$8,232	\$8,198	\$7,740
	Sum of Medicare Payments for Target	\$2,474,991	\$2,568,376	\$2,713,446	\$2,600,678

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Indiana

80

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	286	256	333	329
	All medical DRGs in MDC 08 Discharges	1,007	936	1,033	1,052
	Proportion of Target to Denominator Discharges	28.4%	27.4%	32.2%	31.3%
	Average Length of Stay for Target	4.4	4.2	3.8	4.0
	Average Medicare Payment for Target	\$7,453	\$6,955	\$6,775	\$6,743
	Sum of Medicare Payments for Target	\$2,131,592	\$1,780,390	\$2,256,218	\$2,218,481
Spinal Fusion	Claims with spinal fusion procedure codes	883	814	837	930
	Claims with spinal procedure codes	1,789	1,669	1,681	1,777
	Proportion of Target to Denominator Discharges	49.4%	48.8%	49.8%	52.3%
	Average Length of Stay for Target	3.5	3.5	3.4	3.8
	Average Medicare Payment for Target	\$29,861	\$31,200	\$31,328	\$30,964
	Sum of Medicare Payments for Target	\$26,366,920	\$25,396,992	\$26,221,444	\$28,796,741
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,106	1,096	1,311	1,239
	All Discharges with Transfer to SNF	9,029	9,023	8,737	9,097
	Proportion of Target to Denominator Discharges	12.2%	12.1%	15.0%	13.6%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,734	\$9,737	\$9,303	\$9,334
	Sum of Medicare Payments for Target	\$10,765,807	\$10,671,215	\$12,196,705	\$11,564,732
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	6,419	5,992	6,160	6,177
	All Discharges excl dc status 02,82,07,20	38,312	35,517	36,430	36,956
	Proportion of Target to Denominator Discharges	16.8%	16.9%	16.9%	16.7%
	Average Length of Stay for Target	6.0	6.2	5.7	5.9
	Average Medicare Payment for Target	\$13,215	\$14,845	\$13,151	\$13,481
	Sum of Medicare Payments for Target	\$84,826,943	\$88,949,328	\$81,010,148	\$83,273,779
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	4,580	4,519	4,668	4,626
	All Discharges excl dc status 02,82,07,20	38,312	35,517	36,430	36,956
	Proportion of Target to Denominator Discharges	12.0%	12.7%	12.8%	12.5%
	Average Length of Stay for Target	5.9	6.1	5.6	5.8
	Average Medicare Payment for Target	\$12,911	\$14,684	\$13,027	\$13,243
	Sum of Medicare Payments for Target	\$59,130,173	\$66,357,292	\$60,810,620	\$61,260,156

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Indiana

81

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,313	3,777	4,577	4,779
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	23,880	21,825	22,580	24,412
	<b>Proportion of Target to Denominator Discharges</b>	18.1%	17.3%	20.3%	19.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,632	\$7,406	\$6,980	\$7,014
	<b>Sum of Medicare Payments for Target</b>	\$32,916,885	\$27,970,905	\$31,947,638	\$33,517,826
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,297	1,262	1,491	1,567
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,949	8,878	9,480	10,047
	<b>Proportion of Target to Denominator Discharges</b>	14.5%	14.2%	15.7%	15.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$18,023	\$17,896	\$17,199	\$17,059
	<b>Sum of Medicare Payments for Target</b>	\$23,376,388	\$22,584,555	\$25,643,598	\$26,732,197
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,928	1,641	1,832	2,423
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	23,880	21,825	22,580	24,412
	<b>Proportion of Target to Denominator Discharges</b>	8.1%	7.5%	8.1%	9.9%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,097	\$6,608	\$6,247	\$6,306
	<b>Sum of Medicare Payments for Target</b>	\$13,683,425	\$10,843,421	\$11,444,618	\$15,278,542
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,646	1,584	1,850	1,990
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,949	8,878	9,480	10,047
	<b>Proportion of Target to Denominator Discharges</b>	18.4%	17.8%	19.5%	19.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$18,845	\$19,719	\$18,563	\$18,054
	<b>Sum of Medicare Payments for Target</b>	\$31,018,156	\$31,234,987	\$34,341,640	\$35,928,276

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Kansas, 49 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	439	414	426	404
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	518	485	498	472
	Proportion of Target to Denominator Discharges	84.7%	85.4%	85.5%	85.6%
	Average Length of Stay for Target	4.4	4.0	3.9	4.4
	Average Medicare Payment for Target	\$9,551	\$8,965	\$8,607	\$9,076
	Sum of Medicare Payments for Target	\$4,193,048	\$3,711,477	\$3,666,722	\$3,666,783
Respiratory Infections	DRGs 177, 178	1,195	1,274	420	725
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,621	1,744	872	1,060
	Proportion of Target to Denominator Discharges	73.7%	73.1%	48.2%	68.4%
	Average Length of Stay for Target	6.8	6.8	5.2	5.1
	Average Medicare Payment for Target	\$14,862	\$14,367	\$12,117	\$12,677
	Sum of Medicare Payments for Target	\$17,759,701	\$18,303,138	\$5,089,192	\$9,190,914
Simple Pneumonia	DRGs 193, 194	394	436	418	293
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	581	586	580	418
	Proportion of Target to Denominator Discharges	67.8%	74.4%	72.1%	70.1%
	Average Length of Stay for Target	4.1	4.5	4.0	4.5
	Average Medicare Payment for Target	\$7,334	\$7,776	\$7,105	\$7,126
	Sum of Medicare Payments for Target	\$2,889,498	\$3,390,547	\$2,969,926	\$2,087,815
Septicemia	DRGs 870, 871, 872	1,942	1,984	1,723	1,708
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	2,824	2,867	2,593	2,405
	Proportion of Target to Denominator Discharges	68.8%	69.2%	66.4%	71.0%
	Average Length of Stay for Target	6.3	6.7	5.8	5.7
	Average Medicare Payment for Target	\$13,452	\$14,227	\$11,935	\$11,866
	Sum of Medicare Payments for Target	\$26,123,806	\$28,225,730	\$20,563,652	\$20,266,800
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	123	126	142	114
	All Discharges for Surgical DRGs	6,619	5,965	6,213	6,267
	Proportion of Target to Denominator Discharges	1.9%	2.1%	2.3%	1.8%
	Average Length of Stay for Target	8.8	9.1	8.9	7.0
	Average Medicare Payment for Target	\$23,988	\$27,345	\$24,862	\$20,579
	Sum of Medicare Payments for Target	\$2,950,475	\$3,445,461	\$3,530,426	\$2,345,953

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kansas

83

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	9,107	8,877	8,248	8,090
	All Discharges for Medical DRGs w/ or w/o CC or MCC	11,595	10,930	10,984	10,797
	Proportion of Target to Denominator Discharges	78.5%	81.2%	75.1%	74.9%
	Average Length of Stay for Target	5.2	5.5	4.9	5.0
	Average Medicare Payment for Target	\$10,450	\$10,862	\$9,636	\$9,871
	Sum of Medicare Payments for Target	\$95,167,371	\$96,424,500	\$79,476,215	\$79,856,521
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	3,323	3,116	3,306	3,503
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	6,115	5,572	5,815	5,853
	Proportion of Target to Denominator Discharges	54.3%	55.9%	56.9%	59.8%
	Average Length of Stay for Target	6.9	7.4	6.8	6.7
	Average Medicare Payment for Target	\$24,682	\$25,899	\$24,440	\$24,809
	Sum of Medicare Payments for Target	\$82,018,692	\$80,701,002	\$80,797,041	\$86,904,614
Single CC or MCC	Discharges with one CC or MCC coded on the claim	5,576	5,210	5,261	5,170
	All Discharges with one or more CC or MCC coded on the claim	12,401	11,960	11,546	11,578
	Proportion of Target to Denominator Discharges	45.0%	43.6%	45.6%	44.7%
	Average Length of Stay for Target	4.6	4.7	4.4	4.5
	Average Medicare Payment for Target	\$13,917	\$14,013	\$13,468	\$13,916
	Sum of Medicare Payments for Target	\$77,601,914	\$73,006,399	\$70,856,153	\$71,944,053
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	270	259	277	287
	All Discharges with one or more MCCs including severe malnutrition	770	788	741	795
	Proportion of Target to Denominator Discharges	35.1%	32.9%	37.4%	36.1%
	Average Length of Stay for Target	6.0	6.1	5.1	6.0
	Average Medicare Payment for Target	\$14,462	\$15,089	\$13,725	\$14,043
	Sum of Medicare Payments for Target	\$3,904,857	\$3,907,929	\$3,801,923	\$4,030,305
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	180	185	78	65
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,155	2,181	1,815	1,798
	Proportion of Target to Denominator Discharges	8.4%	8.5%	4.3%	3.6%
	Average Length of Stay for Target	19.2	20.3	17.5	16.6
	Average Medicare Payment for Target	\$65,088	\$65,763	\$63,244	\$60,161
	Sum of Medicare Payments for Target	\$11,715,847	\$12,166,196	\$4,933,060	\$3,910,497

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kansas

84

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	285	249	324	280
	All DRGs 246-249 Discharges + outpatient claims	692	620	727	676
	Proportion of Target to Denominator Discharges	41.2%	40.2%	44.6%	41.4%
	Average Length of Stay for Target	3.4	3.2	3.4	3.6
	Average Medicare Payment for Target	\$15,922	\$15,874	\$15,326	\$16,620
	Sum of Medicare Payments for Target	\$4,537,816	\$3,952,625	\$4,965,501	\$4,653,607
Total Knee Replacement	Inpatient discharges with knee replacement px codes	689	656	525	502
	Inpatient discharges + outpatient claims with knee replacement px codes	1,311	1,360	1,278	1,337
	Proportion of Target to Denominator Discharges	52.6%	48.2%	41.1%	37.5%
	Average Medicare Payment for Target	\$12,122	\$12,226	\$13,509	\$13,852
	Sum of Medicare Payments for Target	\$8,352,157	\$8,020,304	\$7,092,408	\$6,953,949
Syncope	DRG 312	96	79	116	100
	All medical DRGs in MDC 05 Discharges	2,142	1,969	2,271	2,130
	Proportion of Target to Denominator Discharges	4.5%	4.0%	5.1%	4.7%
	Average Length of Stay for Target	2.6	3.2	2.9	2.9
	Average Medicare Payment for Target	\$5,040	\$4,998	\$4,979	\$5,053
	Sum of Medicare Payments for Target	\$483,795	\$394,841	\$577,575	\$505,296
Other Circulatory System Diagnoses	DRGs 314, 315, 316	95	100	113	104
	All medical DRGs in MDC 05 Discharges	2,142	1,969	2,271	2,130
	Proportion of Target to Denominator Discharges	4.4%	5.1%	5.0%	4.9%
	Average Length of Stay for Target	4.9	5.5	5.2	4.5
	Average Medicare Payment for Target	\$10,942	\$11,682	\$11,008	\$10,149
	Sum of Medicare Payments for Target	\$1,039,505	\$1,168,180	\$1,243,955	\$1,055,484
Other Digestive System Diagnoses	DRGs 393, 394, 395	133	106	151	102
	All medical DRGs in MDC 06 Discharges	1,133	1,070	1,246	1,150
	Proportion of Target to Denominator Discharges	11.7%	9.9%	12.1%	8.9%
	Average Length of Stay for Target	3.9	5.9	4.3	4.3
	Average Medicare Payment for Target	\$7,564	\$13,967	\$7,744	\$8,067
	Sum of Medicare Payments for Target	\$1,006,024	\$1,480,498	\$1,169,394	\$822,844

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kansas

85

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	182	150	199	192
	All medical DRGs in MDC 08 Discharges	535	476	563	579
	Proportion of Target to Denominator Discharges	34.0%	31.5%	35.3%	33.2%
	Average Length of Stay for Target	3.8	4.2	3.8	4.0
	Average Medicare Payment for Target	\$6,201	\$6,708	\$6,588	\$6,258
	Sum of Medicare Payments for Target	\$1,128,518	\$1,006,182	\$1,311,006	\$1,201,529
Spinal Fusion	Claims with spinal fusion procedure codes	513	465	497	499
	Claims with spinal procedure codes	1,048	967	1,032	990
	Proportion of Target to Denominator Discharges	49.0%	48.1%	48.2%	50.4%
	Average Length of Stay for Target	3.2	3.5	3.1	3.6
	Average Medicare Payment for Target	\$24,702	\$25,955	\$24,783	\$25,910
	Sum of Medicare Payments for Target	\$12,672,089	\$12,068,865	\$12,317,298	\$12,929,066
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	601	517	666	649
	All Discharges with Transfer to SNF	3,725	3,602	3,852	3,742
	Proportion of Target to Denominator Discharges	16.1%	14.4%	17.3%	17.3%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,659	\$10,260	\$10,337	\$9,923
	Sum of Medicare Payments for Target	\$6,406,348	\$5,304,448	\$6,884,407	\$6,440,204
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	2,581	2,433	2,521	2,495
	All Discharges excl dc status 02,82,07,20	17,986	16,555	17,225	17,038
	Proportion of Target to Denominator Discharges	14.4%	14.7%	14.6%	14.6%
	Average Length of Stay for Target	5.9	6.0	5.5	5.7
	Average Medicare Payment for Target	\$14,096	\$14,548	\$12,847	\$13,354
	Sum of Medicare Payments for Target	\$36,381,355	\$35,396,404	\$32,386,119	\$33,317,107
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,860	1,811	1,854	1,794
	All Discharges excl dc status 02,82,07,20	17,986	16,555	17,225	17,038
	Proportion of Target to Denominator Discharges	10.3%	10.9%	10.8%	10.5%
	Average Length of Stay for Target	5.9	5.9	5.5	5.8
	Average Medicare Payment for Target	\$14,277	\$14,474	\$13,005	\$13,331
	Sum of Medicare Payments for Target	\$26,555,141	\$26,212,584	\$24,110,848	\$23,916,197

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kansas

86

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,183	1,876	2,154	2,039
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,947	10,133	10,379	10,080
	<b>Proportion of Target to Denominator Discharges</b>	19.9%	18.5%	20.8%	20.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,090	\$7,264	\$6,770	\$6,860
	<b>Sum of Medicare Payments for Target</b>	\$15,477,712	\$13,626,442	\$14,582,575	\$13,988,304
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,361	1,205	1,139	1,147
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,027	5,373	5,623	5,682
	<b>Proportion of Target to Denominator Discharges</b>	22.6%	22.4%	20.3%	20.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$14,920	\$14,715	\$15,796	\$16,229
	<b>Sum of Medicare Payments for Target</b>	\$20,306,320	\$17,731,586	\$17,991,864	\$18,614,975
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,091	859	983	922
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,947	10,133	10,379	10,080
	<b>Proportion of Target to Denominator Discharges</b>	10.0%	8.5%	9.5%	9.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,361	\$6,326	\$5,831	\$6,193
	<b>Sum of Medicare Payments for Target</b>	\$6,939,382	\$5,434,136	\$5,732,288	\$5,709,586
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,135	937	984	974
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,027	5,373	5,623	5,682
	<b>Proportion of Target to Denominator Discharges</b>	18.8%	17.4%	17.5%	17.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$17,091	\$17,394	\$18,059	\$18,519
	<b>Sum of Medicare Payments for Target</b>	\$19,398,563	\$16,297,748	\$17,769,986	\$18,037,665

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Kentucky, 62 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	761	701	745	693
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	854	802	842	801
	Proportion of Target to Denominator Discharges	89.1%	87.4%	88.5%	86.5%
	Average Length of Stay for Target	4.7	4.9	4.4	4.7
	Average Medicare Payment for Target	\$9,212	\$9,062	\$8,314	\$8,986
	Sum of Medicare Payments for Target	\$7,010,394	\$6,352,138	\$6,194,280	\$6,227,535
Respiratory Infections	DRGs 177, 178	1,906	2,421	729	1,382
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,959	3,412	1,758	2,222
	Proportion of Target to Denominator Discharges	64.4%	71.0%	41.5%	62.2%
	Average Length of Stay for Target	6.8	6.9	5.7	5.5
	Average Medicare Payment for Target	\$13,902	\$13,418	\$11,736	\$12,123
	Sum of Medicare Payments for Target	\$26,497,031	\$32,484,335	\$8,555,201	\$16,754,496
Simple Pneumonia	DRGs 193, 194	964	901	947	729
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,534	1,349	1,561	1,140
	Proportion of Target to Denominator Discharges	62.8%	66.8%	60.7%	63.9%
	Average Length of Stay for Target	4.6	5.0	4.7	4.8
	Average Medicare Payment for Target	\$7,087	\$7,106	\$7,042	\$7,079
	Sum of Medicare Payments for Target	\$6,831,490	\$6,402,854	\$6,668,922	\$5,160,489
Septicemia	DRGs 870, 871, 872	2,922	2,828	2,537	2,571
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	5,048	4,746	4,416	4,213
	Proportion of Target to Denominator Discharges	57.9%	59.6%	57.5%	61.0%
	Average Length of Stay for Target	7.2	7.7	6.5	6.5
	Average Medicare Payment for Target	\$14,055	\$14,622	\$12,304	\$12,400
	Sum of Medicare Payments for Target	\$41,069,247	\$41,349,780	\$31,216,195	\$31,880,851
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	213	194	193	196
	All Discharges for Surgical DRGs	7,183	6,634	6,781	6,705
	Proportion of Target to Denominator Discharges	3.0%	2.9%	2.8%	2.9%
	Average Length of Stay for Target	9.7	11.9	8.9	9.1
	Average Medicare Payment for Target	\$26,372	\$27,627	\$22,728	\$25,287
	Sum of Medicare Payments for Target	\$5,617,176	\$5,359,718	\$4,386,495	\$4,956,304

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Kentucky

88

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	15,024	14,803	13,405	13,204
	All Discharges for Medical DRGs w/ or w/o CC or MCC	18,727	17,797	17,184	17,042
	Proportion of Target to Denominator Discharges	80.2%	83.2%	78.0%	77.5%
	Average Length of Stay for Target	5.6	6.0	5.3	5.4
	Average Medicare Payment for Target	\$9,755	\$10,030	\$8,934	\$9,283
	Sum of Medicare Payments for Target	\$146,558,470	\$148,480,408	\$119,766,526	\$122,574,803
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,479	4,178	4,277	4,249
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	6,556	6,080	6,285	6,211
	Proportion of Target to Denominator Discharges	68.3%	68.7%	68.1%	68.4%
	Average Length of Stay for Target	7.9	8.4	8.1	7.7
	Average Medicare Payment for Target	\$24,255	\$24,683	\$24,180	\$23,914
	Sum of Medicare Payments for Target	\$108,639,503	\$103,126,098	\$103,417,176	\$101,611,539
Single CC or MCC	Discharges with one CC or MCC coded on the claim	8,665	8,138	7,882	7,723
	All Discharges with one or more CC or MCC coded on the claim	19,443	18,927	17,672	17,428
	Proportion of Target to Denominator Discharges	44.6%	43.0%	44.6%	44.3%
	Average Length of Stay for Target	5.0	5.3	4.9	4.9
	Average Medicare Payment for Target	\$12,517	\$12,670	\$12,075	\$12,534
	Sum of Medicare Payments for Target	\$108,456,773	\$103,111,533	\$95,173,889	\$96,801,820
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	382	326	387	387
	All Discharges with one or more MCCs including severe malnutrition	1,031	1,007	1,033	1,034
	Proportion of Target to Denominator Discharges	37.1%	32.4%	37.5%	37.4%
	Average Length of Stay for Target	6.5	6.5	6.3	6.5
	Average Medicare Payment for Target	\$12,314	\$12,667	\$12,094	\$13,305
	Sum of Medicare Payments for Target	\$4,703,781	\$4,129,410	\$4,680,186	\$5,149,084
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	509	510	247	221
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	3,529	3,366	2,846	2,873
	Proportion of Target to Denominator Discharges	14.4%	15.2%	8.7%	7.7%
	Average Length of Stay for Target	21.7	22.2	18.2	22.0
	Average Medicare Payment for Target	\$68,025	\$64,733	\$56,613	\$66,458
	Sum of Medicare Payments for Target	\$34,624,516	\$33,013,974	\$13,983,299	\$14,687,311

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kentucky

89

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	500	449	482	455
	All DRGs 246-249 Discharges + outpatient claims	1,004	932	1,011	911
	Proportion of Target to Denominator Discharges	49.8%	48.2%	47.7%	49.9%
	Average Length of Stay for Target	3.7	3.9	3.5	3.4
	Average Medicare Payment for Target	\$16,930	\$16,824	\$15,974	\$16,446
	Sum of Medicare Payments for Target	\$8,465,157	\$7,553,890	\$7,699,617	\$7,482,773
Total Knee Replacement	Inpatient discharges with knee replacement px codes	161	118	172	178
	Inpatient discharges + outpatient claims with knee replacement px codes	1,064	1,013	981	1,025
	Proportion of Target to Denominator Discharges	15.1%	11.6%	17.5%	17.4%
	Average Medicare Payment for Target	\$16,886	\$18,482	\$15,955	\$16,497
	Sum of Medicare Payments for Target	\$2,718,671	\$2,180,819	\$2,744,345	\$2,936,550
Syncope	DRG 312	140	130	149	188
	All medical DRGs in MDC 05 Discharges	3,741	3,420	3,815	3,579
	Proportion of Target to Denominator Discharges	3.7%	3.8%	3.9%	5.3%
	Average Length of Stay for Target	3.6	3.4	3.0	3.4
	Average Medicare Payment for Target	\$5,080	\$4,931	\$4,668	\$4,836
	Sum of Medicare Payments for Target	\$711,132	\$640,975	\$695,585	\$909,086
Other Circulatory System Diagnoses	DRGs 314, 315, 316	184	138	132	167
	All medical DRGs in MDC 05 Discharges	3,741	3,420	3,815	3,579
	Proportion of Target to Denominator Discharges	4.9%	4.0%	3.5%	4.7%
	Average Length of Stay for Target	5.8	6.4	5.4	5.9
	Average Medicare Payment for Target	\$11,202	\$10,898	\$9,963	\$10,429
	Sum of Medicare Payments for Target	\$2,061,243	\$1,503,868	\$1,315,061	\$1,741,610
Other Digestive System Diagnoses	DRGs 393, 394, 395	176	187	183	166
	All medical DRGs in MDC 06 Discharges	1,878	1,651	1,765	1,696
	Proportion of Target to Denominator Discharges	9.4%	11.3%	10.4%	9.8%
	Average Length of Stay for Target	4.3	5.0	4.6	4.8
	Average Medicare Payment for Target	\$7,506	\$7,425	\$7,074	\$7,465
	Sum of Medicare Payments for Target	\$1,320,970	\$1,388,420	\$1,294,614	\$1,239,157

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kentucky

90

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	138	111	159	167
	All medical DRGs in MDC 08 Discharges	589	511	633	572
	Proportion of Target to Denominator Discharges	23.4%	21.7%	25.1%	29.2%
	Average Length of Stay for Target	4.9	5.6	3.8	4.7
	Average Medicare Payment for Target	\$6,571	\$7,428	\$6,409	\$6,153
	Sum of Medicare Payments for Target	\$906,825	\$824,540	\$1,019,074	\$1,027,577
Spinal Fusion	Claims with spinal fusion procedure codes	518	418	439	407
	Claims with spinal procedure codes	972	846	933	854
	Proportion of Target to Denominator Discharges	53.3%	49.4%	47.1%	47.7%
	Average Length of Stay for Target	4.1	4.4	4.2	4.1
	Average Medicare Payment for Target	\$27,067	\$29,669	\$29,002	\$28,319
	Sum of Medicare Payments for Target	\$14,020,935	\$12,401,641	\$12,731,908	\$11,525,928
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	650	597	702	697
	All Discharges with Transfer to SNF	5,216	5,124	5,046	4,792
	Proportion of Target to Denominator Discharges	12.5%	11.7%	13.9%	14.5%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,119	\$9,157	\$8,333	\$8,414
	Sum of Medicare Payments for Target	\$5,927,608	\$5,466,667	\$5,850,022	\$5,864,488
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	4,399	4,124	4,064	3,907
	All Discharges excl dc status 02,82,07,20	25,318	23,751	23,832	23,542
	Proportion of Target to Denominator Discharges	17.4%	17.4%	17.1%	16.6%
	Average Length of Stay for Target	6.5	6.9	6.4	6.1
	Average Medicare Payment for Target	\$12,868	\$13,279	\$12,611	\$12,545
	Sum of Medicare Payments for Target	\$56,604,512	\$54,763,178	\$51,249,704	\$49,012,246
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	3,325	3,051	3,032	2,894
	All Discharges excl dc status 02,82,07,20	25,318	23,751	23,832	23,542
	Proportion of Target to Denominator Discharges	13.1%	12.8%	12.7%	12.3%
	Average Length of Stay for Target	6.4	6.8	6.3	6.0
	Average Medicare Payment for Target	\$12,933	\$13,452	\$12,612	\$12,290
	Sum of Medicare Payments for Target	\$43,003,101	\$41,042,333	\$38,239,673	\$35,566,839

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Kentucky

91

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,193	2,830	3,131	3,065
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	17,610	16,710	16,341	16,040
	<b>Proportion of Target to Denominator Discharges</b>	18.1%	16.9%	19.2%	19.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,772	\$6,900	\$6,377	\$6,486
	<b>Sum of Medicare Payments for Target</b>	\$21,624,207	\$19,525,934	\$19,967,425	\$19,880,623
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	822	746	789	803
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,493	5,997	6,177	6,116
	<b>Proportion of Target to Denominator Discharges</b>	12.7%	12.4%	12.8%	13.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$16,069	\$16,429	\$15,585	\$15,851
	<b>Sum of Medicare Payments for Target</b>	\$13,208,812	\$12,256,297	\$12,296,912	\$12,728,533
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,394	1,127	1,214	1,242
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	17,610	16,710	16,341	16,040
	<b>Proportion of Target to Denominator Discharges</b>	7.9%	6.7%	7.4%	7.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,025	\$6,492	\$5,747	\$5,896
	<b>Sum of Medicare Payments for Target</b>	\$8,399,295	\$7,316,661	\$6,976,515	\$7,322,805
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	853	846	867	861
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,493	5,997	6,177	6,116
	<b>Proportion of Target to Denominator Discharges</b>	13.1%	14.1%	14.0%	14.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$18,321	\$18,300	\$18,593	\$17,143
	<b>Sum of Medicare Payments for Target</b>	\$15,627,933	\$15,481,955	\$16,120,533	\$14,760,446

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Louisiana, 85 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	726	680	671	605
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	849	803	797	713
	Proportion of Target to Denominator Discharges	85.5%	84.7%	84.2%	84.9%
	Average Length of Stay for Target	4.3	4.8	4.5	4.5
	Average Medicare Payment for Target	\$8,062	\$8,662	\$8,118	\$8,183
	Sum of Medicare Payments for Target	\$5,852,900	\$5,890,314	\$5,447,127	\$4,950,416
Respiratory Infections	DRGs 177, 178	741	2,100	520	1,071
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,460	2,851	1,147	1,670
	Proportion of Target to Denominator Discharges	50.8%	73.7%	45.3%	64.1%
	Average Length of Stay for Target	6.3	5.9	4.8	5.1
	Average Medicare Payment for Target	\$13,143	\$13,075	\$10,794	\$11,342
	Sum of Medicare Payments for Target	\$9,738,910	\$27,457,138	\$5,613,077	\$12,146,886
Simple Pneumonia	DRGs 193, 194	609	618	557	498
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,076	1,015	951	812
	Proportion of Target to Denominator Discharges	56.6%	60.9%	58.6%	61.3%
	Average Length of Stay for Target	4.3	4.8	4.4	4.5
	Average Medicare Payment for Target	\$6,678	\$6,803	\$6,567	\$6,556
	Sum of Medicare Payments for Target	\$4,067,160	\$4,204,044	\$3,658,084	\$3,264,901
Septicemia	DRGs 870, 871, 872	2,382	2,465	2,238	2,230
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	4,054	4,101	3,732	3,671
	Proportion of Target to Denominator Discharges	58.8%	60.1%	60.0%	60.7%
	Average Length of Stay for Target	6.4	6.7	6.0	6.2
	Average Medicare Payment for Target	\$12,227	\$13,089	\$11,352	\$11,904
	Sum of Medicare Payments for Target	\$29,123,585	\$32,265,591	\$25,404,799	\$26,545,583
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	167	160	149	174
	All Discharges for Surgical DRGs	6,935	6,701	6,679	6,529
	Proportion of Target to Denominator Discharges	2.4%	2.4%	2.2%	2.7%
	Average Length of Stay for Target	8.2	10.3	9.7	8.5
	Average Medicare Payment for Target	\$22,699	\$25,390	\$21,070	\$20,977
	Sum of Medicare Payments for Target	\$3,790,723	\$4,062,401	\$3,139,444	\$3,649,996

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Louisiana

93

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	12,575	13,186	11,502	11,651
	All Discharges for Medical DRGs w/ or w/o CC or MCC	16,550	16,556	15,343	15,319
	Proportion of Target to Denominator Discharges	76.0%	79.6%	75.0%	76.1%
	Average Length of Stay for Target	5.1	5.4	4.9	5.0
	Average Medicare Payment for Target	\$9,106	\$9,822	\$8,645	\$8,918
	Sum of Medicare Payments for Target	\$114,511,558	\$129,506,889	\$99,439,484	\$103,902,876
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,015	3,895	3,829	3,706
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	6,457	6,193	6,209	6,104
	Proportion of Target to Denominator Discharges	62.2%	62.9%	61.7%	60.7%
	Average Length of Stay for Target	7.5	7.9	7.3	7.2
	Average Medicare Payment for Target	\$23,670	\$23,831	\$22,863	\$23,008
	Sum of Medicare Payments for Target	\$95,036,876	\$92,820,665	\$87,542,288	\$85,267,836
Single CC or MCC	Discharges with one CC or MCC coded on the claim	7,799	7,956	7,172	7,253
	All Discharges with one or more CC or MCC coded on the claim	16,559	16,987	15,317	15,331
	Proportion of Target to Denominator Discharges	47.1%	46.8%	46.8%	47.3%
	Average Length of Stay for Target	4.7	5.0	4.6	4.5
	Average Medicare Payment for Target	\$12,224	\$12,535	\$12,115	\$11,952
	Sum of Medicare Payments for Target	\$95,338,404	\$99,725,626	\$86,891,790	\$86,688,626
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	274	240	250	265
	All Discharges with one or more MCCs including severe malnutrition	838	747	696	707
	Proportion of Target to Denominator Discharges	32.7%	32.1%	35.9%	37.5%
	Average Length of Stay for Target	6.4	6.8	6.4	6.7
	Average Medicare Payment for Target	\$13,536	\$13,416	\$13,813	\$12,759
	Sum of Medicare Payments for Target	\$3,708,975	\$3,219,875	\$3,453,134	\$3,381,082
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	272	331	187	196
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,694	2,879	2,489	2,476
	Proportion of Target to Denominator Discharges	10.1%	11.5%	7.5%	7.9%
	Average Length of Stay for Target	18.1	19.6	18.7	19.2
	Average Medicare Payment for Target	\$59,038	\$55,224	\$56,458	\$57,914
	Sum of Medicare Payments for Target	\$16,058,248	\$18,279,243	\$10,557,569	\$11,351,059

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Louisiana

94

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	361	333	348	339
	All DRGs 246-249 Discharges + outpatient claims	978	869	858	825
	Proportion of Target to Denominator Discharges	36.9%	38.3%	40.6%	41.1%
	Average Length of Stay for Target	3.3	3.2	3.7	3.4
	Average Medicare Payment for Target	\$15,520	\$15,816	\$15,368	\$14,897
	Sum of Medicare Payments for Target	\$5,602,544	\$5,266,803	\$5,348,089	\$5,049,916
Total Knee Replacement	Inpatient discharges with knee replacement px codes	220	236	243	221
	Inpatient discharges + outpatient claims with knee replacement px codes	1,003	1,058	1,019	1,049
	Proportion of Target to Denominator Discharges	21.9%	22.3%	23.8%	21.1%
	Average Medicare Payment for Target	\$13,054	\$12,934	\$13,716	\$13,475
	Sum of Medicare Payments for Target	\$2,871,834	\$3,052,348	\$3,332,906	\$2,977,989
Syncope	DRG 312	162	142	128	142
	All medical DRGs in MDC 05 Discharges	3,859	3,271	3,454	3,228
	Proportion of Target to Denominator Discharges	4.2%	4.3%	3.7%	4.4%
	Average Length of Stay for Target	2.8	3.8	2.8	2.9
	Average Medicare Payment for Target	\$4,878	\$4,999	\$4,984	\$4,598
	Sum of Medicare Payments for Target	\$790,239	\$709,792	\$637,980	\$652,915
Other Circulatory System Diagnoses	DRGs 314, 315, 316	181	151	158	151
	All medical DRGs in MDC 05 Discharges	3,859	3,271	3,454	3,228
	Proportion of Target to Denominator Discharges	4.7%	4.6%	4.6%	4.7%
	Average Length of Stay for Target	5.7	6.2	5.4	4.7
	Average Medicare Payment for Target	\$11,505	\$11,327	\$10,846	\$10,642
	Sum of Medicare Payments for Target	\$2,082,480	\$1,710,449	\$1,713,638	\$1,606,998
Other Digestive System Diagnoses	DRGs 393, 394, 395	186	170	194	154
	All medical DRGs in MDC 06 Discharges	1,783	1,626	1,716	1,582
	Proportion of Target to Denominator Discharges	10.4%	10.5%	11.3%	9.7%
	Average Length of Stay for Target	4.0	5.0	4.5	4.7
	Average Medicare Payment for Target	\$6,969	\$7,707	\$7,253	\$7,678
	Sum of Medicare Payments for Target	\$1,296,304	\$1,310,228	\$1,407,115	\$1,182,466

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Louisiana

95

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	132	115	138	138
	All medical DRGs in MDC 08 Discharges	485	443	495	478
	Proportion of Target to Denominator Discharges	27.2%	26.0%	27.9%	28.9%
	Average Length of Stay for Target	4.1	5.0	4.2	4.1
	Average Medicare Payment for Target	\$6,134	\$7,249	\$6,289	\$6,544
	Sum of Medicare Payments for Target	\$809,671	\$833,581	\$867,901	\$903,065
Spinal Fusion	Claims with spinal fusion procedure codes	720	677	673	701
	Claims with spinal procedure codes	1,253	1,167	1,174	1,250
	Proportion of Target to Denominator Discharges	57.5%	58.0%	57.3%	56.1%
	Average Length of Stay for Target	3.8	3.4	3.5	3.6
	Average Medicare Payment for Target	\$25,404	\$23,671	\$24,433	\$25,357
	Sum of Medicare Payments for Target	\$18,290,606	\$16,025,055	\$16,443,627	\$17,775,543
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	438	407	455	476
	All Discharges with Transfer to SNF	2,927	3,090	2,940	2,961
	Proportion of Target to Denominator Discharges	15.0%	13.2%	15.5%	16.1%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,497	\$8,468	\$8,028	\$8,363
	Sum of Medicare Payments for Target	\$3,721,841	\$3,446,633	\$3,652,552	\$3,980,876
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,991	3,923	3,666	3,658
	All Discharges excl dc status 02,82,07,20	23,341	22,999	22,030	21,807
	Proportion of Target to Denominator Discharges	17.1%	17.1%	16.6%	16.8%
	Average Length of Stay for Target	5.7	6.1	5.7	5.7
	Average Medicare Payment for Target	\$12,045	\$12,589	\$11,681	\$12,036
	Sum of Medicare Payments for Target	\$48,072,424	\$49,388,246	\$42,821,734	\$44,029,196
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,844	2,737	2,702	2,660
	All Discharges excl dc status 02,82,07,20	23,341	22,999	22,030	21,807
	Proportion of Target to Denominator Discharges	12.2%	11.9%	12.3%	12.2%
	Average Length of Stay for Target	5.7	6.0	5.7	5.7
	Average Medicare Payment for Target	\$12,117	\$12,494	\$11,592	\$11,918
	Sum of Medicare Payments for Target	\$34,461,074	\$34,196,126	\$31,320,498	\$31,701,829

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Louisiana

96

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,022	2,818	2,964	2,794
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	14,848	14,718	13,847	13,657
	<b>Proportion of Target to Denominator Discharges</b>	20.4%	19.1%	21.4%	20.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,464	\$6,873	\$6,220	\$6,318
	<b>Sum of Medicare Payments for Target</b>	\$19,533,214	\$19,367,787	\$18,437,413	\$17,653,348
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	995	924	973	972
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,094	5,907	5,891	5,738
	<b>Proportion of Target to Denominator Discharges</b>	16.3%	15.6%	16.5%	16.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$16,227	\$16,119	\$16,031	\$16,023
	<b>Sum of Medicare Payments for Target</b>	\$16,146,294	\$14,893,629	\$15,597,917	\$15,574,320
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,469	1,231	1,378	1,331
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	14,848	14,718	13,847	13,657
	<b>Proportion of Target to Denominator Discharges</b>	9.9%	8.4%	10.0%	9.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$5,777	\$6,131	\$5,489	\$5,700
	<b>Sum of Medicare Payments for Target</b>	\$8,486,931	\$7,547,231	\$7,563,470	\$7,587,222
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	889	943	920	977
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,094	5,907	5,891	5,738
	<b>Proportion of Target to Denominator Discharges</b>	14.6%	16.0%	15.6%	17.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$16,784	\$16,951	\$16,557	\$16,992
	<b>Sum of Medicare Payments for Target</b>	\$14,920,725	\$15,984,491	\$15,232,244	\$16,601,408

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Massachusetts, 54 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,180	1,105	1,182	1,166
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,406	1,285	1,457	1,408
	Proportion of Target to Denominator Discharges	83.9%	86.0%	81.1%	82.8%
	Average Length of Stay for Target	4.8	5.0	4.6	4.8
	Average Medicare Payment for Target	\$11,761	\$12,312	\$11,830	\$11,985
	Sum of Medicare Payments for Target	\$13,878,144	\$13,604,595	\$13,983,387	\$13,974,046
Respiratory Infections	DRGs 177, 178	3,108	3,852	2,554	2,460
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	4,552	5,018	4,328	3,692
	Proportion of Target to Denominator Discharges	68.3%	76.8%	59.0%	66.6%
	Average Length of Stay for Target	6.5	7.4	5.9	5.7
	Average Medicare Payment for Target	\$17,176	\$17,967	\$15,586	\$15,448
	Sum of Medicare Payments for Target	\$53,384,328	\$69,209,896	\$39,805,791	\$38,002,434
Simple Pneumonia	DRGs 193, 194	1,277	1,024	1,533	1,032
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,442	1,849	2,719	2,006
	Proportion of Target to Denominator Discharges	52.3%	55.4%	56.4%	51.4%
	Average Length of Stay for Target	4.8	4.9	4.5	4.8
	Average Medicare Payment for Target	\$9,392	\$9,419	\$9,107	\$8,960
	Sum of Medicare Payments for Target	\$11,992,965	\$9,645,114	\$13,961,709	\$9,246,542
Septicemia	DRGs 870, 871, 872	4,216	4,008	4,024	4,006
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	7,500	6,850	7,444	6,985
	Proportion of Target to Denominator Discharges	56.2%	58.5%	54.1%	57.4%
	Average Length of Stay for Target	7.1	7.9	7.1	6.9
	Average Medicare Payment for Target	\$17,528	\$19,079	\$17,036	\$16,364
	Sum of Medicare Payments for Target	\$73,899,803	\$76,466,916	\$68,553,322	\$65,553,945
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	313	313	350	333
	All Discharges for Surgical DRGs	13,741	12,014	13,974	13,459
	Proportion of Target to Denominator Discharges	2.3%	2.6%	2.5%	2.5%
	Average Length of Stay for Target	10.3	11.5	10.6	11.5
	Average Medicare Payment for Target	\$32,377	\$35,799	\$31,980	\$34,019
	Sum of Medicare Payments for Target	\$10,133,848	\$11,204,951	\$11,192,873	\$11,328,398

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Massachusetts

98

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	29,389	28,117	28,725	28,070
	All Discharges for Medical DRGs w/ or w/o CC or MCC	38,975	36,032	38,348	37,871
	Proportion of Target to Denominator Discharges	75.4%	78.0%	74.9%	74.1%
	Average Length of Stay for Target	5.8	6.3	5.7	5.8
	Average Medicare Payment for Target	\$13,096	\$13,748	\$12,636	\$12,767
	Sum of Medicare Payments for Target	\$384,891,184	\$386,538,761	\$362,972,840	\$358,369,416
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	7,961	7,395	8,122	7,906
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	12,868	11,227	13,089	12,655
	Proportion of Target to Denominator Discharges	61.9%	65.9%	62.1%	62.5%
	Average Length of Stay for Target	8.3	8.5	8.2	8.3
	Average Medicare Payment for Target	\$35,652	\$35,629	\$35,401	\$35,028
	Sum of Medicare Payments for Target	\$283,826,616	\$263,478,567	\$287,529,189	\$276,927,787
Single CC or MCC	Discharges with one CC or MCC coded on the claim	17,573	16,206	17,388	16,928
	All Discharges with one or more CC or MCC coded on the claim	37,260	35,450	36,809	35,935
	Proportion of Target to Denominator Discharges	47.2%	45.7%	47.2%	47.1%
	Average Length of Stay for Target	5.3	5.3	5.1	5.2
	Average Medicare Payment for Target	\$16,988	\$17,194	\$16,722	\$16,660
	Sum of Medicare Payments for Target	\$298,529,174	\$278,644,120	\$290,766,627	\$282,012,115
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	1,055	883	1,068	1,184
	All Discharges with one or more MCCs including severe malnutrition	2,562	2,534	2,619	2,741
	Proportion of Target to Denominator Discharges	41.2%	34.8%	40.8%	43.2%
	Average Length of Stay for Target	6.7	6.7	6.7	6.5
	Average Medicare Payment for Target	\$18,445	\$18,120	\$17,844	\$17,618
	Sum of Medicare Payments for Target	\$19,459,459	\$16,000,246	\$19,056,960	\$20,859,337
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	459	573	358	295
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	4,775	4,607	4,447	4,355
	Proportion of Target to Denominator Discharges	9.6%	12.4%	8.1%	6.8%
	Average Length of Stay for Target	26.4	26.7	26.0	26.8
	Average Medicare Payment for Target	\$108,461	\$99,360	\$97,973	\$98,817
	Sum of Medicare Payments for Target	\$49,783,677	\$56,933,175	\$35,074,486	\$29,150,930

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Massachusetts

99

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	614	548	629	571
	All DRGs 246-249 Discharges + outpatient claims	956	872	992	941
	Proportion of Target to Denominator Discharges	64.2%	62.8%	63.4%	60.7%
	Average Length of Stay for Target	4.6	4.8	4.5	4.1
	Average Medicare Payment for Target	\$24,608	\$25,641	\$24,398	\$23,409
	Sum of Medicare Payments for Target	\$15,109,162	\$14,051,009	\$15,346,110	\$13,366,637
Total Knee Replacement	Inpatient discharges with knee replacement px codes	912	575	967	806
	Inpatient discharges + outpatient claims with knee replacement px codes	2,024	1,488	2,122	2,015
	Proportion of Target to Denominator Discharges	45.1%	38.6%	45.6%	40.0%
	Average Medicare Payment for Target	\$17,036	\$17,404	\$17,050	\$16,887
	Sum of Medicare Payments for Target	\$15,536,734	\$10,007,293	\$16,487,359	\$13,610,568
Syncope	DRG 312	488	450	515	568
	All medical DRGs in MDC 05 Discharges	8,062	7,112	7,829	7,631
	Proportion of Target to Denominator Discharges	6.1%	6.3%	6.6%	7.4%
	Average Length of Stay for Target	3.2	3.1	2.8	2.9
	Average Medicare Payment for Target	\$6,905	\$6,913	\$6,683	\$6,588
	Sum of Medicare Payments for Target	\$3,369,595	\$3,110,873	\$3,441,518	\$3,741,918
Other Circulatory System Diagnoses	DRGs 314, 315, 316	415	339	414	473
	All medical DRGs in MDC 05 Discharges	8,062	7,112	7,829	7,631
	Proportion of Target to Denominator Discharges	5.1%	4.8%	5.3%	6.2%
	Average Length of Stay for Target	6.1	6.1	5.6	5.8
	Average Medicare Payment for Target	\$15,384	\$15,329	\$13,954	\$14,229
	Sum of Medicare Payments for Target	\$6,384,314	\$5,196,612	\$5,776,751	\$6,730,526
Other Digestive System Diagnoses	DRGs 393, 394, 395	607	477	528	594
	All medical DRGs in MDC 06 Discharges	4,372	3,941	4,413	4,512
	Proportion of Target to Denominator Discharges	13.9%	12.1%	12.0%	13.2%
	Average Length of Stay for Target	4.7	4.8	4.3	5.0
	Average Medicare Payment for Target	\$10,160	\$10,422	\$10,297	\$10,688
	Sum of Medicare Payments for Target	\$6,167,157	\$4,971,114	\$5,436,580	\$6,348,765

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Massachusetts

100

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	463	411	449	493
	All medical DRGs in MDC 08 Discharges	1,872	1,641	1,828	1,878
	Proportion of Target to Denominator Discharges	24.7%	25.0%	24.6%	26.3%
	Average Length of Stay for Target	4.4	4.3	4.5	4.3
	Average Medicare Payment for Target	\$9,263	\$9,626	\$8,959	\$8,700
	Sum of Medicare Payments for Target	\$4,288,610	\$3,956,476	\$4,022,462	\$4,289,037
Spinal Fusion	Claims with spinal fusion procedure codes	886	765	944	865
	Claims with spinal procedure codes	1,978	1,715	2,006	1,882
	Proportion of Target to Denominator Discharges	44.8%	44.6%	47.1%	46.0%
	Average Length of Stay for Target	4.2	4.9	4.4	4.5
	Average Medicare Payment for Target	\$40,722	\$41,534	\$40,649	\$40,598
	Sum of Medicare Payments for Target	\$36,079,519	\$31,773,261	\$38,372,257	\$35,117,540
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,524	1,424	1,543	1,541
	All Discharges with Transfer to SNF	11,382	10,688	11,457	11,185
	Proportion of Target to Denominator Discharges	13.4%	13.3%	13.5%	13.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$12,007	\$12,028	\$11,635	\$11,621
	Sum of Medicare Payments for Target	\$18,298,419	\$17,128,001	\$17,952,339	\$17,907,542
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	9,327	8,699	9,666	9,449
	All Discharges excl dc status 02,82,07,20	52,043	47,117	52,102	50,847
	Proportion of Target to Denominator Discharges	17.9%	18.5%	18.6%	18.6%
	Average Length of Stay for Target	6.5	6.8	6.5	6.4
	Average Medicare Payment for Target	\$17,248	\$17,350	\$17,362	\$16,993
	Sum of Medicare Payments for Target	\$160,867,888	\$150,929,865	\$167,822,581	\$160,564,265
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	6,949	6,571	7,293	7,103
	All Discharges excl dc status 02,82,07,20	52,043	47,117	52,102	50,847
	Proportion of Target to Denominator Discharges	13.4%	13.9%	14.0%	14.0%
	Average Length of Stay for Target	6.4	6.6	6.4	6.4
	Average Medicare Payment for Target	\$17,064	\$17,220	\$17,504	\$17,045
	Sum of Medicare Payments for Target	\$118,574,961	\$113,153,095	\$127,653,793	\$121,074,128

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Massachusetts

101

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	6,910	6,175	7,251	7,097
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	37,399	34,532	37,549	36,771
	<b>Proportion of Target to Denominator Discharges</b>	18.5%	17.9%	19.3%	19.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,717	\$8,672	\$8,336	\$8,237
	<b>Sum of Medicare Payments for Target</b>	\$60,233,146	\$53,551,462	\$60,445,479	\$58,454,510
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,184	1,737	2,232	2,086
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,896	11,205	13,232	12,618
	<b>Proportion of Target to Denominator Discharges</b>	16.9%	15.5%	16.9%	16.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$21,627	\$22,508	\$22,020	\$21,264
	<b>Sum of Medicare Payments for Target</b>	\$47,233,928	\$39,095,729	\$49,148,120	\$44,356,285
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,490	2,944	3,704	3,495
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	37,399	34,532	37,549	36,771
	<b>Proportion of Target to Denominator Discharges</b>	9.3%	8.5%	9.9%	9.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,311	\$7,299	\$7,121	\$6,931
	<b>Sum of Medicare Payments for Target</b>	\$25,516,584	\$21,488,865	\$26,374,899	\$24,224,897
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,821	1,541	2,131	1,971
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,896	11,205	13,232	12,618
	<b>Proportion of Target to Denominator Discharges</b>	14.1%	13.8%	16.1%	15.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$23,190	\$24,082	\$22,523	\$23,998
	<b>Sum of Medicare Payments for Target</b>	\$42,229,302	\$37,110,375	\$47,997,457	\$47,301,011

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Maryland, 44 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,265	1,333	1,259	1,271
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,419	1,486	1,409	1,453
	Proportion of Target to Denominator Discharges	89.1%	89.7%	89.4%	87.5%
	Average Length of Stay for Target	5.3	5.6	5.0	5.5
	Average Medicare Payment for Target	\$15,311	\$16,978	\$16,290	\$16,640
	Sum of Medicare Payments for Target	\$19,367,988	\$22,632,167	\$20,508,685	\$21,149,047
Respiratory Infections	DRGs 177, 178	2,342	3,083	1,197	1,636
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	3,245	3,815	2,106	2,465
	Proportion of Target to Denominator Discharges	72.2%	80.8%	56.8%	66.4%
	Average Length of Stay for Target	7.0	7.8	6.0	6.0
	Average Medicare Payment for Target	\$17,008	\$18,500	\$16,206	\$15,801
	Sum of Medicare Payments for Target	\$39,831,979	\$57,036,667	\$19,398,666	\$25,850,887
Simple Pneumonia	DRGs 193, 194	800	640	782	689
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,685	1,384	1,768	1,451
	Proportion of Target to Denominator Discharges	47.5%	46.2%	44.2%	47.5%
	Average Length of Stay for Target	4.8	5.2	4.9	4.8
	Average Medicare Payment for Target	\$11,769	\$13,777	\$12,743	\$12,219
	Sum of Medicare Payments for Target	\$9,415,491	\$8,817,174	\$9,964,746	\$8,418,967
Septicemia	DRGs 870, 871, 872	4,286	4,365	4,031	4,161
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	6,479	6,297	6,092	6,091
	Proportion of Target to Denominator Discharges	66.2%	69.3%	66.2%	68.3%
	Average Length of Stay for Target	7.5	8.4	7.3	7.7
	Average Medicare Payment for Target	\$20,393	\$24,424	\$21,138	\$20,094
	Sum of Medicare Payments for Target	\$87,405,419	\$106,612,180	\$85,206,678	\$83,612,946
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	376	274	318	334
	All Discharges for Surgical DRGs	9,149	8,424	9,169	8,823
	Proportion of Target to Denominator Discharges	4.1%	3.3%	3.5%	3.8%
	Average Length of Stay for Target	10.7	12.1	10.4	10.3
	Average Medicare Payment for Target	\$38,017	\$43,456	\$36,629	\$36,701
	Sum of Medicare Payments for Target	\$14,294,306	\$11,906,872	\$11,648,128	\$12,258,218

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maryland

103

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	21,819	21,763	20,727	20,734
	All Discharges for Medical DRGs w/ or w/o CC or MCC	29,116	27,716	27,868	27,868
	Proportion of Target to Denominator Discharges	74.9%	78.5%	74.4%	74.4%
	Average Length of Stay for Target	6.3	6.7	6.1	6.5
	Average Medicare Payment for Target	\$16,114	\$18,148	\$17,065	\$16,646
	Sum of Medicare Payments for Target	\$351,596,908	\$394,956,169	\$353,709,217	\$345,136,813
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	5,643	5,278	5,685	5,448
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	8,488	7,776	8,528	8,174
	Proportion of Target to Denominator Discharges	66.5%	67.9%	66.7%	66.7%
	Average Length of Stay for Target	8.3	8.9	8.2	8.2
	Average Medicare Payment for Target	\$40,275	\$45,459	\$42,619	\$40,735
	Sum of Medicare Payments for Target	\$227,273,259	\$239,931,693	\$242,291,014	\$221,924,630
Single CC or MCC	Discharges with one CC or MCC coded on the claim	12,120	11,657	11,739	11,448
	All Discharges with one or more CC or MCC coded on the claim	27,365	26,962	26,382	26,149
	Proportion of Target to Denominator Discharges	44.3%	43.2%	44.5%	43.8%
	Average Length of Stay for Target	5.5	5.6	5.3	5.5
	Average Medicare Payment for Target	\$17,373	\$19,139	\$18,589	\$18,084
	Sum of Medicare Payments for Target	\$210,559,381	\$223,102,928	\$218,221,337	\$207,027,663
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	404	376	451	457
	All Discharges with one or more MCCs including severe malnutrition	1,149	1,139	1,194	1,297
	Proportion of Target to Denominator Discharges	35.2%	33.0%	37.8%	35.2%
	Average Length of Stay for Target	8.1	7.7	7.7	8.0
	Average Medicare Payment for Target	\$23,189	\$24,268	\$24,156	\$23,334
	Sum of Medicare Payments for Target	\$9,368,260	\$9,124,931	\$10,894,172	\$10,663,670
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	482	596	304	285
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	4,844	4,979	4,414	4,504
	Proportion of Target to Denominator Discharges	10.0%	12.0%	6.9%	6.3%
	Average Length of Stay for Target	19.6	20.1	19.0	19.0
	Average Medicare Payment for Target	\$87,427	\$91,836	\$93,297	\$85,260
	Sum of Medicare Payments for Target	\$42,140,020	\$54,734,495	\$28,362,285	\$24,299,208

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Maryland

104

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	406	413	416	404
	All DRGs 246-249 Discharges + outpatient claims	774	705	759	749
	Proportion of Target to Denominator Discharges	52.5%	58.6%	54.8%	53.9%
	Average Length of Stay for Target	3.9	3.8	4.1	3.5
	Average Medicare Payment for Target	\$22,685	\$24,417	\$25,667	\$23,520
	Sum of Medicare Payments for Target	\$9,210,237	\$10,084,156	\$10,677,394	\$9,502,242
Total Knee Replacement	Inpatient discharges with knee replacement px codes	233	195	239	245
	Inpatient discharges + outpatient claims with knee replacement px codes	1,346	1,134	1,398	1,265
	Proportion of Target to Denominator Discharges	17.3%	17.2%	17.1%	19.4%
	Average Medicare Payment for Target	\$30,405	\$32,746	\$34,704	\$31,387
	Sum of Medicare Payments for Target	\$7,084,251	\$6,385,427	\$8,294,219	\$7,689,794
Syncope	DRG 312	300	283	367	371
	All medical DRGs in MDC 05 Discharges	5,452	5,033	5,623	5,212
	Proportion of Target to Denominator Discharges	5.5%	5.6%	6.5%	7.1%
	Average Length of Stay for Target	3.7	3.1	3.4	3.6
	Average Medicare Payment for Target	\$9,244	\$10,253	\$10,671	\$10,071
	Sum of Medicare Payments for Target	\$2,773,269	\$2,901,549	\$3,916,212	\$3,736,173
Other Circulatory System Diagnoses	DRGs 314, 315, 316	331	287	360	363
	All medical DRGs in MDC 05 Discharges	5,452	5,033	5,623	5,212
	Proportion of Target to Denominator Discharges	6.1%	5.7%	6.4%	7.0%
	Average Length of Stay for Target	7.0	6.6	6.8	7.2
	Average Medicare Payment for Target	\$19,702	\$21,551	\$22,501	\$21,474
	Sum of Medicare Payments for Target	\$6,521,203	\$6,185,261	\$8,100,316	\$7,795,071
Other Digestive System Diagnoses	DRGs 393, 394, 395	296	306	337	330
	All medical DRGs in MDC 06 Discharges	2,937	2,708	3,049	2,974
	Proportion of Target to Denominator Discharges	10.1%	11.3%	11.1%	11.1%
	Average Length of Stay for Target	5.6	5.8	5.4	5.7
	Average Medicare Payment for Target	\$13,810	\$15,001	\$13,729	\$13,760
	Sum of Medicare Payments for Target	\$4,087,676	\$4,590,288	\$4,626,679	\$4,540,899

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maryland

105

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	277	258	320	304
	All medical DRGs in MDC 08 Discharges	1,408	1,207	1,452	1,488
	Proportion of Target to Denominator Discharges	19.7%	21.4%	22.0%	20.4%
	Average Length of Stay for Target	4.9	4.5	4.2	4.8
	Average Medicare Payment for Target	\$11,909	\$11,717	\$12,006	\$11,567
	Sum of Medicare Payments for Target	\$3,298,836	\$3,022,939	\$3,842,069	\$3,516,297
Spinal Fusion	Claims with spinal fusion procedure codes	770	728	807	733
	Claims with spinal procedure codes	1,466	1,430	1,476	1,359
	Proportion of Target to Denominator Discharges	52.5%	50.9%	54.7%	53.9%
	Average Length of Stay for Target	4.2	4.2	4.4	3.8
	Average Medicare Payment for Target	\$43,532	\$47,262	\$46,159	\$44,639
	Sum of Medicare Payments for Target	\$33,519,838	\$34,406,394	\$37,250,627	\$32,720,326
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,005	960	1,025	917
	All Discharges with Transfer to SNF	9,081	9,037	9,206	9,172
	Proportion of Target to Denominator Discharges	11.1%	10.6%	11.1%	10.0%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,833	\$12,239	\$12,217	\$11,270
	Sum of Medicare Payments for Target	\$10,887,295	\$11,749,177	\$12,522,798	\$10,334,744
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	7,132	6,867	6,958	6,800
	All Discharges excl dc status 02,82,07,20	37,924	35,868	37,255	36,823
	Proportion of Target to Denominator Discharges	18.8%	19.1%	18.7%	18.5%
	Average Length of Stay for Target	7.3	7.7	7.0	7.1
	Average Medicare Payment for Target	\$24,233	\$26,793	\$25,092	\$23,759
	Sum of Medicare Payments for Target	\$172,828,127	\$183,987,590	\$174,591,563	\$161,562,701
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	4,202	4,194	4,175	4,145
	All Discharges excl dc status 02,82,07,20	37,924	35,868	37,255	36,823
	Proportion of Target to Denominator Discharges	11.1%	11.7%	11.2%	11.3%
	Average Length of Stay for Target	6.7	6.9	6.4	6.6
	Average Medicare Payment for Target	\$22,576	\$24,343	\$23,285	\$22,030
	Sum of Medicare Payments for Target	\$94,866,057	\$102,093,974	\$97,214,715	\$91,316,094

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maryland

106

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,276	3,863	4,327	4,204
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	27,196	25,872	26,513	26,412
	<b>Proportion of Target to Denominator Discharges</b>	15.7%	14.9%	16.3%	15.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,391	\$7,051	\$6,801	\$6,659
	<b>Sum of Medicare Payments for Target</b>	\$27,327,047	\$27,237,159	\$29,429,643	\$27,993,916
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,094	944	1,071	1,064
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,284	7,599	8,395	8,071
	<b>Proportion of Target to Denominator Discharges</b>	13.2%	12.4%	12.8%	13.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$22,909	\$26,534	\$24,251	\$24,659
	<b>Sum of Medicare Payments for Target</b>	\$25,062,027	\$25,048,230	\$25,972,785	\$26,237,423
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,648	2,392	2,724	2,557
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	27,196	25,872	26,513	26,412
	<b>Proportion of Target to Denominator Discharges</b>	9.7%	9.2%	10.3%	9.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$4,666	\$5,272	\$5,166	\$5,062
	<b>Sum of Medicare Payments for Target</b>	\$12,354,774	\$12,611,012	\$14,072,761	\$12,942,818
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,160	1,068	1,272	1,222
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,284	7,599	8,395	8,071
	<b>Proportion of Target to Denominator Discharges</b>	14.0%	14.1%	15.2%	15.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$24,941	\$27,935	\$26,039	\$27,661
	<b>Sum of Medicare Payments for Target</b>	\$28,931,413	\$29,834,430	\$33,121,865	\$33,801,665

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Maine, 17 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	165	146	165	153
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	186	160	183	172
	Proportion of Target to Denominator Discharges	88.7%	91.3%	90.2%	89.0%
	Average Length of Stay for Target	6.4	6.2	5.4	5.2
	Average Medicare Payment for Target	\$9,906	\$9,949	\$10,236	\$10,956
	Sum of Medicare Payments for Target	\$1,634,544	\$1,452,610	\$1,688,943	\$1,676,265
Respiratory Infections	DRGs 177, 178	416	345	251	214
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	533	476	423	336
	Proportion of Target to Denominator Discharges	78.0%	72.5%	59.3%	63.7%
	Average Length of Stay for Target	8.6	9.1	7.5	8.4
	Average Medicare Payment for Target	\$18,130	\$18,861	\$16,310	\$15,756
	Sum of Medicare Payments for Target	\$7,542,191	\$6,507,098	\$4,093,891	\$3,371,699
Simple Pneumonia	DRGs 193, 194	107	124	158	109
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	168	194	220	167
	Proportion of Target to Denominator Discharges	63.7%	63.9%	71.8%	65.3%
	Average Length of Stay for Target	5.3	5.5	5.3	4.6
	Average Medicare Payment for Target	\$8,932	\$9,123	\$8,634	\$9,033
	Sum of Medicare Payments for Target	\$955,716	\$1,131,262	\$1,364,248	\$984,570
Septicemia	DRGs 870, 871, 872	556	441	519	520
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	837	738	845	799
	Proportion of Target to Denominator Discharges	66.4%	59.8%	61.4%	65.1%
	Average Length of Stay for Target	7.4	7.8	6.9	6.4
	Average Medicare Payment for Target	\$16,687	\$16,275	\$15,519	\$13,219
	Sum of Medicare Payments for Target	\$9,277,932	\$7,177,236	\$8,054,218	\$6,873,734
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	47	55	41	38
	All Discharges for Surgical DRGs	1,505	1,389	1,513	1,526
	Proportion of Target to Denominator Discharges	3.1%	4.0%	2.7%	2.5%
	Average Length of Stay for Target	10.0	12.8	20.9	13.7
	Average Medicare Payment for Target	\$26,847	\$25,151	\$27,461	\$26,907
	Sum of Medicare Payments for Target	\$1,261,791	\$1,383,321	\$1,125,888	\$1,022,473

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maine

108

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	3,077	2,811	3,093	2,910
	All Discharges for Medical DRGs w/ or w/o CC or MCC	3,888	3,445	3,865	3,725
	Proportion of Target to Denominator Discharges	79.1%	81.6%	80.0%	78.1%
	Average Length of Stay for Target	7.6	7.4	6.8	6.3
	Average Medicare Payment for Target	\$12,368	\$12,610	\$11,829	\$11,459
	Sum of Medicare Payments for Target	\$38,057,046	\$35,446,732	\$36,586,308	\$33,345,723
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	960	876	906	968
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,392	1,287	1,385	1,429
	Proportion of Target to Denominator Discharges	69.0%	68.1%	65.4%	67.7%
	Average Length of Stay for Target	9.6	10.3	9.0	7.9
	Average Medicare Payment for Target	\$29,376	\$29,441	\$28,324	\$27,195
	Sum of Medicare Payments for Target	\$28,200,801	\$25,789,990	\$25,661,648	\$26,324,856
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,723	1,537	1,720	1,747
	All Discharges with one or more CC or MCC coded on the claim	4,032	3,684	3,995	3,875
	Proportion of Target to Denominator Discharges	42.7%	41.7%	43.1%	45.1%
	Average Length of Stay for Target	6.3	6.0	6.0	5.5
	Average Medicare Payment for Target	\$15,583	\$15,424	\$14,767	\$15,056
	Sum of Medicare Payments for Target	\$26,849,831	\$23,706,452	\$25,398,864	\$26,302,846
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	63	88	84	95
	All Discharges with one or more MCCs including severe malnutrition	177	218	231	231
	Proportion of Target to Denominator Discharges	35.6%	40.4%	36.4%	41.1%
	Average Length of Stay for Target	13.0	8.6	7.2	8.2
	Average Medicare Payment for Target	\$16,515	\$16,058	\$13,936	\$16,970
	Sum of Medicare Payments for Target	\$1,040,441	\$1,413,087	\$1,170,623	\$1,612,196
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	73	71	39	20
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	638	547	569	566
	Proportion of Target to Denominator Discharges	11.4%	13.0%	6.9%	3.5%
	Average Length of Stay for Target	27.2	27.5	28.6	25.0
	Average Medicare Payment for Target	\$95,594	\$88,875	\$101,111	\$100,390
	Sum of Medicare Payments for Target	\$6,978,396	\$6,310,114	\$3,943,334	\$2,007,798

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maine

109

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	107	103	111	98
	All DRGs 246-249 Discharges + outpatient claims	157	165	147	157
	Proportion of Target to Denominator Discharges	68.2%	62.4%	75.5%	62.4%
	Average Length of Stay for Target	4.3	3.7	4.6	4.1
	Average Medicare Payment for Target	\$19,994	\$18,619	\$20,036	\$18,457
	Sum of Medicare Payments for Target	\$2,139,352	\$1,917,725	\$2,224,043	\$1,808,830
Total Knee Replacement	Inpatient discharges with knee replacement px codes	22	18	33	13
	Inpatient discharges + outpatient claims with knee replacement px codes	192	173	254	219
	Proportion of Target to Denominator Discharges	11.5%	10.4%	13.0%	5.9%
	Average Medicare Payment for Target	\$20,900	\$34,357	\$20,229	\$28,580
	Sum of Medicare Payments for Target	\$459,797	\$618,420	\$667,543	\$371,544
Syncope	DRG 312	24	19	21	25
	All medical DRGs in MDC 05 Discharges	885	827	935	865
	Proportion of Target to Denominator Discharges	2.7%	2.3%	2.2%	2.9%
	Average Length of Stay for Target	9.7	5.3	5.0	2.6
	Average Medicare Payment for Target	\$7,025	\$5,743	\$6,091	\$5,575
	Sum of Medicare Payments for Target	\$168,608	\$109,117	\$127,912	\$139,371
Other Circulatory System Diagnoses	DRGs 314, 315, 316	35	28	38	48
	All medical DRGs in MDC 05 Discharges	885	827	935	865
	Proportion of Target to Denominator Discharges	4.0%	3.4%	4.1%	5.5%
	Average Length of Stay for Target	5.1	7.2	5.8	5.0
	Average Medicare Payment for Target	\$13,032	\$15,043	\$12,724	\$11,893
	Sum of Medicare Payments for Target	\$456,105	\$421,202	\$483,504	\$570,881
Other Digestive System Diagnoses	DRGs 393, 394, 395	58	41	50	61
	All medical DRGs in MDC 06 Discharges	401	351	396	426
	Proportion of Target to Denominator Discharges	14.5%	11.7%	12.6%	14.3%
	Average Length of Stay for Target	4.2	7.4	5.1	4.3
	Average Medicare Payment for Target	\$8,733	\$10,490	\$8,098	\$9,546
	Sum of Medicare Payments for Target	\$506,508	\$430,090	\$404,884	\$582,281

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maine

110

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	34	37	36	40
	All medical DRGs in MDC 08 Discharges	164	120	169	156
	Proportion of Target to Denominator Discharges	20.7%	30.8%	21.3%	25.6%
	Average Length of Stay for Target	6.0	7.2	6.9	4.9
	Average Medicare Payment for Target	\$8,359	\$8,427	\$9,277	\$7,362
	Sum of Medicare Payments for Target	\$284,206	\$311,805	\$333,987	\$294,475
Spinal Fusion	Claims with spinal fusion procedure codes	80	65	76	65
	Claims with spinal procedure codes	276	220	238	240
	Proportion of Target to Denominator Discharges	29.0%	29.5%	31.9%	27.1%
	Average Length of Stay for Target	5.3	5.2	2.9	4.7
	Average Medicare Payment for Target	\$25,336	\$28,003	\$23,920	\$26,508
	Sum of Medicare Payments for Target	\$2,026,911	\$1,820,209	\$1,817,945	\$1,723,047
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	103	73	100	117
	All Discharges with Transfer to SNF	880	783	958	962
	Proportion of Target to Denominator Discharges	11.7%	9.3%	10.4%	12.2%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,169	\$11,026	\$11,304	\$10,932
	Sum of Medicare Payments for Target	\$1,150,398	\$804,879	\$1,130,364	\$1,279,016
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	684	618	693	728
	All Discharges excl dc status 02,82,07,20	5,134	4,632	5,229	5,071
	Proportion of Target to Denominator Discharges	13.3%	13.3%	13.3%	14.4%
	Average Length of Stay for Target	7.3	7.8	7.1	6.4
	Average Medicare Payment for Target	\$15,126	\$16,643	\$15,402	\$14,272
	Sum of Medicare Payments for Target	\$10,346,110	\$10,285,363	\$10,673,883	\$10,389,921
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	529	496	547	511
	All Discharges excl dc status 02,82,07,20	5,134	4,632	5,229	5,071
	Proportion of Target to Denominator Discharges	10.3%	10.7%	10.5%	10.1%
	Average Length of Stay for Target	6.7	7.7	6.6	6.5
	Average Medicare Payment for Target	\$14,248	\$16,509	\$14,942	\$14,627
	Sum of Medicare Payments for Target	\$7,537,006	\$8,188,237	\$8,173,186	\$7,474,253

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Maine

111

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	496	417	507	478
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,164	2,791	3,195	3,020
	<b>Proportion of Target to Denominator Discharges</b>	15.7%	14.9%	15.9%	15.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,445	\$8,217	\$8,369	\$7,932
	<b>Sum of Medicare Payments for Target</b>	\$4,188,620	\$3,426,324	\$4,243,234	\$3,791,389
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	151	151	176	162
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,277	1,163	1,282	1,281
	<b>Proportion of Target to Denominator Discharges</b>	11.8%	13.0%	13.7%	12.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$19,621	\$17,903	\$18,765	\$16,834
	<b>Sum of Medicare Payments for Target</b>	\$2,962,786	\$2,703,368	\$3,302,593	\$2,727,125
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	220	187	239	227
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,164	2,791	3,195	3,020
	<b>Proportion of Target to Denominator Discharges</b>	7.0%	6.7%	7.5%	7.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,164	\$7,295	\$7,364	\$7,022
	<b>Sum of Medicare Payments for Target</b>	\$1,576,144	\$1,364,217	\$1,759,910	\$1,593,927
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	200	190	231	199
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,277	1,163	1,282	1,281
	<b>Proportion of Target to Denominator Discharges</b>	15.7%	16.3%	18.0%	15.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,804	\$20,410	\$18,578	\$20,244
	<b>Sum of Medicare Payments for Target</b>	\$4,160,802	\$3,877,833	\$4,291,521	\$4,028,634

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - Michigan, 92 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,348	1,205	1,294	1,253
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,611	1,433	1,551	1,560
	Proportion of Target to Denominator Discharges	83.7%	84.1%	83.4%	80.3%
	Average Length of Stay for Target	4.8	5.3	4.8	5.0
	Average Medicare Payment for Target	\$10,027	\$10,364	\$9,816	\$10,037
	Sum of Medicare Payments for Target	\$13,516,969	\$12,488,927	\$12,702,394	\$12,576,473
Respiratory Infections	DRGs 177, 178	5,562	3,853	1,652	2,089
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	6,861	4,929	3,034	3,114
	Proportion of Target to Denominator Discharges	81.1%	78.2%	54.4%	67.1%
	Average Length of Stay for Target	6.9	7.3	5.9	5.7
	Average Medicare Payment for Target	\$15,846	\$15,193	\$13,636	\$13,702
	Sum of Medicare Payments for Target	\$88,136,374	\$58,539,187	\$22,526,586	\$28,624,454
Simple Pneumonia	DRGs 193, 194	1,173	974	1,259	904
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,202	1,726	2,194	1,639
	Proportion of Target to Denominator Discharges	53.3%	56.4%	57.4%	55.2%
	Average Length of Stay for Target	5.0	5.2	4.7	4.9
	Average Medicare Payment for Target	\$8,292	\$8,238	\$8,005	\$7,953
	Sum of Medicare Payments for Target	\$9,726,531	\$8,023,685	\$10,078,177	\$7,189,584
Septicemia	DRGs 870, 871, 872	4,961	4,357	4,170	4,086
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	8,159	7,005	7,012	6,588
	Proportion of Target to Denominator Discharges	60.8%	62.2%	59.5%	62.0%
	Average Length of Stay for Target	7.2	7.9	6.8	6.8
	Average Medicare Payment for Target	\$16,515	\$16,567	\$14,302	\$14,203
	Sum of Medicare Payments for Target	\$81,931,095	\$72,183,910	\$59,640,228	\$58,032,778
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	442	405	396	380
	All Discharges for Surgical DRGs	12,819	12,320	12,948	12,771
	Proportion of Target to Denominator Discharges	3.4%	3.3%	3.1%	3.0%
	Average Length of Stay for Target	9.3	11.0	9.3	9.1
	Average Medicare Payment for Target	\$27,814	\$28,073	\$26,295	\$25,739
	Sum of Medicare Payments for Target	\$12,293,926	\$11,369,529	\$10,412,736	\$9,780,860

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Michigan

113

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	30,526	26,881	26,212	26,027
	All Discharges for Medical DRGs w/ or w/o CC or MCC	37,630	33,451	33,959	34,072
	Proportion of Target to Denominator Discharges	81.1%	80.4%	77.2%	76.4%
	Average Length of Stay for Target	5.8	6.1	5.5	5.5
	Average Medicare Payment for Target	\$11,626	\$11,389	\$10,389	\$10,496
	Sum of Medicare Payments for Target	\$354,907,204	\$306,158,102	\$272,322,460	\$273,174,681
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	7,896	7,695	8,054	7,827
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	11,771	11,324	11,977	11,794
	Proportion of Target to Denominator Discharges	67.1%	68.0%	67.2%	66.4%
	Average Length of Stay for Target	8.2	8.1	7.7	7.8
	Average Medicare Payment for Target	\$28,762	\$27,954	\$27,361	\$27,282
	Sum of Medicare Payments for Target	\$227,105,644	\$215,105,625	\$220,368,280	\$213,533,115
Single CC or MCC	Discharges with one CC or MCC coded on the claim	17,008	14,915	15,057	15,130
	All Discharges with one or more CC or MCC coded on the claim	38,281	34,495	34,250	33,823
	Proportion of Target to Denominator Discharges	44.4%	43.2%	44.0%	44.7%
	Average Length of Stay for Target	5.3	5.2	4.9	5.0
	Average Medicare Payment for Target	\$14,509	\$14,541	\$13,954	\$13,943
	Sum of Medicare Payments for Target	\$246,766,684	\$216,884,393	\$210,099,080	\$210,951,462
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	883	770	829	836
	All Discharges with one or more MCCs including severe malnutrition	2,551	2,350	2,291	2,271
	Proportion of Target to Denominator Discharges	34.6%	32.8%	36.2%	36.8%
	Average Length of Stay for Target	7.0	6.4	6.6	6.5
	Average Medicare Payment for Target	\$15,471	\$15,240	\$14,431	\$14,574
	Sum of Medicare Payments for Target	\$13,660,541	\$11,734,688	\$11,963,415	\$12,183,758
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	961	858	481	439
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	6,092	5,234	4,726	4,592
	Proportion of Target to Denominator Discharges	15.8%	16.4%	10.2%	9.6%
	Average Length of Stay for Target	20.0	22.7	20.6	19.6
	Average Medicare Payment for Target	\$73,044	\$73,323	\$76,774	\$75,499
	Sum of Medicare Payments for Target	\$70,195,394	\$62,910,835	\$36,928,433	\$33,144,065

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Michigan

114

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	730	678	741	772
	All DRGs 246-249 Discharges + outpatient claims	1,521	1,443	1,608	1,507
	Proportion of Target to Denominator Discharges	48.0%	47.0%	46.1%	51.2%
	Average Length of Stay for Target	3.9	4.3	3.9	4.0
	Average Medicare Payment for Target	\$18,631	\$18,471	\$18,097	\$17,924
	Sum of Medicare Payments for Target	\$13,600,614	\$12,523,588	\$13,409,899	\$13,837,067
Total Knee Replacement	Inpatient discharges with knee replacement px codes	356	290	343	337
	Inpatient discharges + outpatient claims with knee replacement px codes	1,592	1,384	1,606	1,651
	Proportion of Target to Denominator Discharges	22.4%	21.0%	21.4%	20.4%
	Average Medicare Payment for Target	\$15,781	\$16,922	\$17,073	\$16,763
	Sum of Medicare Payments for Target	\$5,617,986	\$4,907,284	\$5,856,054	\$5,649,019
Syncope	DRG 312	387	301	379	392
	All medical DRGs in MDC 05 Discharges	7,386	6,968	7,724	7,583
	Proportion of Target to Denominator Discharges	5.2%	4.3%	4.9%	5.2%
	Average Length of Stay for Target	3.2	3.1	3.2	3.0
	Average Medicare Payment for Target	\$5,598	\$5,621	\$5,573	\$5,554
	Sum of Medicare Payments for Target	\$2,166,516	\$1,691,798	\$2,112,144	\$2,177,065
Other Circulatory System Diagnoses	DRGs 314, 315, 316	329	363	330	409
	All medical DRGs in MDC 05 Discharges	7,386	6,968	7,724	7,583
	Proportion of Target to Denominator Discharges	4.5%	5.2%	4.3%	5.4%
	Average Length of Stay for Target	5.7	6.0	5.8	5.4
	Average Medicare Payment for Target	\$12,932	\$13,334	\$12,443	\$12,376
	Sum of Medicare Payments for Target	\$4,254,634	\$4,840,379	\$4,106,287	\$5,061,621
Other Digestive System Diagnoses	DRGs 393, 394, 395	405	391	461	446
	All medical DRGs in MDC 06 Discharges	3,539	3,434	3,822	3,760
	Proportion of Target to Denominator Discharges	11.4%	11.4%	12.1%	11.9%
	Average Length of Stay for Target	5.2	5.1	4.6	4.4
	Average Medicare Payment for Target	\$8,586	\$9,101	\$8,552	\$8,385
	Sum of Medicare Payments for Target	\$3,477,429	\$3,558,648	\$3,942,496	\$3,739,853

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Michigan

115

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	417	402	449	531
	All medical DRGs in MDC 08 Discharges	1,416	1,358	1,530	1,642
	Proportion of Target to Denominator Discharges	29.4%	29.6%	29.3%	32.3%
	Average Length of Stay for Target	4.6	4.2	4.0	4.4
	Average Medicare Payment for Target	\$7,576	\$7,150	\$7,263	\$7,224
	Sum of Medicare Payments for Target	\$3,159,266	\$2,874,166	\$3,260,872	\$3,835,995
Spinal Fusion	Claims with spinal fusion procedure codes	968	921	983	999
	Claims with spinal procedure codes	1,891	1,808	1,886	1,912
	Proportion of Target to Denominator Discharges	51.2%	50.9%	52.1%	52.2%
	Average Length of Stay for Target	4.5	4.6	4.4	4.5
	Average Medicare Payment for Target	\$30,008	\$31,914	\$30,968	\$32,516
	Sum of Medicare Payments for Target	\$29,047,751	\$29,392,817	\$30,441,749	\$32,483,468
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,021	1,027	1,136	1,143
	All Discharges with Transfer to SNF	9,809	9,621	9,411	9,694
	Proportion of Target to Denominator Discharges	10.4%	10.7%	12.1%	11.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,163	\$9,906	\$9,703	\$10,075
	Sum of Medicare Payments for Target	\$10,376,436	\$10,173,475	\$11,022,186	\$11,515,608
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	9,009	8,204	8,471	8,571
	All Discharges excl dc status 02,82,07,20	49,754	45,254	47,109	46,912
	Proportion of Target to Denominator Discharges	18.1%	18.1%	18.0%	18.3%
	Average Length of Stay for Target	6.6	6.9	6.4	6.2
	Average Medicare Payment for Target	\$14,740	\$14,992	\$14,164	\$13,882
	Sum of Medicare Payments for Target	\$132,796,430	\$122,991,814	\$119,986,468	\$118,983,361
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	6,478	6,043	6,284	6,276
	All Discharges excl dc status 02,82,07,20	49,754	45,254	47,109	46,912
	Proportion of Target to Denominator Discharges	13.0%	13.4%	13.3%	13.4%
	Average Length of Stay for Target	6.4	6.6	6.2	6.1
	Average Medicare Payment for Target	\$14,428	\$14,954	\$13,945	\$13,821
	Sum of Medicare Payments for Target	\$93,461,367	\$90,368,897	\$87,632,640	\$86,738,761

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Michigan

116

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	5,341	4,665	5,217	5,260
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	31,111	28,104	28,529	28,039
	<b>Proportion of Target to Denominator Discharges</b>	17.2%	16.6%	18.3%	18.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,072	\$7,854	\$7,379	\$7,429
	<b>Sum of Medicare Payments for Target</b>	\$43,111,574	\$36,637,975	\$38,497,618	\$39,077,004
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,427	1,366	1,540	1,515
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,837	10,510	11,099	10,884
	<b>Proportion of Target to Denominator Discharges</b>	13.2%	13.0%	13.9%	13.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$19,040	\$20,070	\$19,013	\$19,072
	<b>Sum of Medicare Payments for Target</b>	\$27,169,876	\$27,416,062	\$29,279,564	\$28,893,462
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,150	1,773	1,880	1,841
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	31,111	28,104	28,529	28,039
	<b>Proportion of Target to Denominator Discharges</b>	6.9%	6.3%	6.6%	6.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,308	\$7,189	\$6,864	\$6,721
	<b>Sum of Medicare Payments for Target</b>	\$15,711,719	\$12,746,552	\$12,903,848	\$12,374,278
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,694	1,726	1,790	1,815
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,837	10,510	11,099	10,884
	<b>Proportion of Target to Denominator Discharges</b>	15.6%	16.4%	16.1%	16.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,875	\$21,525	\$21,493	\$21,052
	<b>Sum of Medicare Payments for Target</b>	\$35,361,669	\$37,152,955	\$38,472,494	\$38,209,350

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Minnesota, 48 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	592	583	676	571
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	635	615	733	612
	Proportion of Target to Denominator Discharges	93.2%	94.8%	92.2%	93.3%
	Average Length of Stay for Target	5.2	5.3	4.5	4.8
	Average Medicare Payment for Target	\$10,994	\$11,021	\$10,444	\$10,401
	Sum of Medicare Payments for Target	\$6,508,310	\$6,425,057	\$7,059,928	\$5,939,092
Respiratory Infections	DRGs 177, 178	1,924	1,286	774	834
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,451	1,773	1,306	1,257
	Proportion of Target to Denominator Discharges	78.5%	72.5%	59.3%	66.3%
	Average Length of Stay for Target	7.1	7.3	5.7	5.6
	Average Medicare Payment for Target	\$18,468	\$17,617	\$15,505	\$15,260
	Sum of Medicare Payments for Target	\$35,533,141	\$22,655,039	\$12,000,850	\$12,726,584
Simple Pneumonia	DRGs 193, 194	490	451	489	383
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	746	681	787	592
	Proportion of Target to Denominator Discharges	65.7%	66.2%	62.1%	64.7%
	Average Length of Stay for Target	4.4	4.2	4.1	4.2
	Average Medicare Payment for Target	\$8,780	\$8,516	\$8,497	\$8,628
	Sum of Medicare Payments for Target	\$4,302,318	\$3,840,707	\$4,154,944	\$3,304,475
Septicemia	DRGs 870, 871, 872	2,274	1,964	1,978	1,913
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	3,464	3,029	2,966	2,815
	Proportion of Target to Denominator Discharges	65.6%	64.8%	66.7%	68.0%
	Average Length of Stay for Target	7.1	7.4	6.5	6.7
	Average Medicare Payment for Target	\$17,176	\$17,155	\$14,632	\$14,621
	Sum of Medicare Payments for Target	\$39,057,505	\$33,693,282	\$28,942,645	\$27,969,609
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	220	211	215	203
	All Discharges for Surgical DRGs	7,474	7,564	8,235	8,172
	Proportion of Target to Denominator Discharges	2.9%	2.8%	2.6%	2.5%
	Average Length of Stay for Target	9.3	10.1	9.0	7.9
	Average Medicare Payment for Target	\$33,367	\$31,994	\$32,315	\$28,194
	Sum of Medicare Payments for Target	\$7,340,667	\$6,750,759	\$6,947,738	\$5,723,455

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Minnesota

118

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	12,383	11,540	11,561	11,257
	All Discharges for Medical DRGs w/ or w/o CC or MCC	15,218	14,232	14,720	14,314
	Proportion of Target to Denominator Discharges	81.4%	81.1%	78.5%	78.6%
	Average Length of Stay for Target	5.9	6.0	5.4	5.6
	Average Medicare Payment for Target	\$13,413	\$12,926	\$12,002	\$11,955
	Sum of Medicare Payments for Target	\$166,090,151	\$149,161,551	\$138,752,833	\$134,577,005
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,815	4,811	5,157	5,138
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	6,930	6,990	7,655	7,585
	Proportion of Target to Denominator Discharges	69.5%	68.8%	67.4%	67.7%
	Average Length of Stay for Target	7.8	8.0	7.4	7.3
	Average Medicare Payment for Target	\$34,186	\$34,322	\$32,626	\$31,769
	Sum of Medicare Payments for Target	\$164,604,564	\$165,123,523	\$168,254,362	\$163,226,595
Single CC or MCC	Discharges with one CC or MCC coded on the claim	7,419	7,015	7,288	7,245
	All Discharges with one or more CC or MCC coded on the claim	17,163	16,336	16,695	16,378
	Proportion of Target to Denominator Discharges	43.2%	42.9%	43.7%	44.2%
	Average Length of Stay for Target	5.2	5.2	4.9	5.0
	Average Medicare Payment for Target	\$17,872	\$17,715	\$17,370	\$17,144
	Sum of Medicare Payments for Target	\$132,590,758	\$124,273,814	\$126,593,462	\$124,210,932
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	525	475	511	538
	All Discharges with one or more MCCs including severe malnutrition	1,382	1,322	1,293	1,325
	Proportion of Target to Denominator Discharges	38.0%	35.9%	39.5%	40.6%
	Average Length of Stay for Target	7.1	6.6	7.3	7.3
	Average Medicare Payment for Target	\$18,640	\$17,904	\$18,217	\$17,792
	Sum of Medicare Payments for Target	\$9,786,087	\$8,504,269	\$9,308,959	\$9,572,311
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	334	264	113	112
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,683	2,308	2,166	2,111
	Proportion of Target to Denominator Discharges	12.4%	11.4%	5.2%	5.3%
	Average Length of Stay for Target	23.3	29.5	25.7	28.3
	Average Medicare Payment for Target	\$100,668	\$110,329	\$114,897	\$116,338
	Sum of Medicare Payments for Target	\$33,623,174	\$29,126,920	\$12,983,409	\$13,029,830

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Minnesota

119

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	434	378	433	449
	All DRGs 246-249 Discharges + outpatient claims	814	731	808	824
	Proportion of Target to Denominator Discharges	53.3%	51.7%	53.6%	54.5%
	Average Length of Stay for Target	3.6	3.5	3.5	3.2
	Average Medicare Payment for Target	\$20,510	\$20,335	\$19,644	\$19,580
	Sum of Medicare Payments for Target	\$8,901,540	\$7,686,526	\$8,505,919	\$8,791,603
Total Knee Replacement	Inpatient discharges with knee replacement px codes	219	246	366	336
	Inpatient discharges + outpatient claims with knee replacement px codes	814	890	1,166	1,132
	Proportion of Target to Denominator Discharges	26.9%	27.6%	31.4%	29.7%
	Average Medicare Payment for Target	\$19,067	\$17,529	\$16,914	\$18,466
	Sum of Medicare Payments for Target	\$4,175,775	\$4,312,159	\$6,190,603	\$6,204,538
Syncope	DRG 312	93	82	119	133
	All medical DRGs in MDC 05 Discharges	2,623	2,720	3,005	2,758
	Proportion of Target to Denominator Discharges	3.5%	3.0%	4.0%	4.8%
	Average Length of Stay for Target	3.2	4.2	3.3	2.9
	Average Medicare Payment for Target	\$6,424	\$6,279	\$6,213	\$5,770
	Sum of Medicare Payments for Target	\$597,431	\$514,859	\$739,307	\$767,429
Other Circulatory System Diagnoses	DRGs 314, 315, 316	173	172	207	208
	All medical DRGs in MDC 05 Discharges	2,623	2,720	3,005	2,758
	Proportion of Target to Denominator Discharges	6.6%	6.3%	6.9%	7.5%
	Average Length of Stay for Target	6.3	5.2	5.7	6.0
	Average Medicare Payment for Target	\$14,824	\$14,398	\$14,125	\$15,256
	Sum of Medicare Payments for Target	\$2,564,544	\$2,476,468	\$2,923,779	\$3,173,235
Other Digestive System Diagnoses	DRGs 393, 394, 395	185	179	195	207
	All medical DRGs in MDC 06 Discharges	1,592	1,607	1,676	1,691
	Proportion of Target to Denominator Discharges	11.6%	11.1%	11.6%	12.2%
	Average Length of Stay for Target	4.0	5.1	4.3	5.1
	Average Medicare Payment for Target	\$9,940	\$10,474	\$9,330	\$10,165
	Sum of Medicare Payments for Target	\$1,838,869	\$1,874,789	\$1,819,292	\$2,104,212

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Minnesota

120

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	193	164	209	237
	All medical DRGs in MDC 08 Discharges	727	665	785	819
	Proportion of Target to Denominator Discharges	26.5%	24.7%	26.6%	28.9%
	Average Length of Stay for Target	5.0	5.0	4.8	4.8
	Average Medicare Payment for Target	\$7,632	\$8,636	\$7,898	\$8,114
	Sum of Medicare Payments for Target	\$1,472,932	\$1,416,316	\$1,650,689	\$1,923,102
Spinal Fusion	Claims with spinal fusion procedure codes	538	553	610	613
	Claims with spinal procedure codes	1,118	1,105	1,175	1,153
	Proportion of Target to Denominator Discharges	48.1%	50.0%	51.9%	53.2%
	Average Length of Stay for Target	5.1	5.0	5.0	4.9
	Average Medicare Payment for Target	\$39,585	\$38,767	\$39,346	\$38,622
	Sum of Medicare Payments for Target	\$21,296,768	\$21,437,999	\$24,001,355	\$23,675,280
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	579	543	657	578
	All Discharges with Transfer to SNF	4,752	4,782	5,101	4,925
	Proportion of Target to Denominator Discharges	12.2%	11.4%	12.9%	11.7%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$12,013	\$11,453	\$11,520	\$11,693
	Sum of Medicare Payments for Target	\$6,955,408	\$6,219,064	\$7,568,846	\$6,758,562
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,374	3,441	3,508	3,493
	All Discharges excl dc status 02,82,07,20	22,164	21,266	22,739	22,215
	Proportion of Target to Denominator Discharges	15.2%	16.2%	15.4%	15.7%
	Average Length of Stay for Target	6.5	6.8	6.3	6.1
	Average Medicare Payment for Target	\$18,965	\$19,397	\$17,861	\$17,930
	Sum of Medicare Payments for Target	\$63,988,546	\$66,745,882	\$62,657,280	\$62,630,772
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,489	2,552	2,618	2,629
	All Discharges excl dc status 02,82,07,20	22,164	21,266	22,739	22,215
	Proportion of Target to Denominator Discharges	11.2%	12.0%	11.5%	11.8%
	Average Length of Stay for Target	6.4	6.9	6.3	6.0
	Average Medicare Payment for Target	\$18,874	\$19,604	\$17,952	\$17,841
	Sum of Medicare Payments for Target	\$46,977,183	\$50,029,295	\$46,997,028	\$46,903,019

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Minnesota

121

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,396	2,243	2,539	2,292
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,762	12,144	12,605	12,122
	<b>Proportion of Target to Denominator Discharges</b>	18.8%	18.5%	20.1%	18.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,153	\$8,895	\$8,728	\$9,072
	<b>Sum of Medicare Payments for Target</b>	\$21,930,636	\$19,951,974	\$22,161,549	\$20,792,558
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	903	1,016	1,148	1,113
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,453	6,688	7,311	7,149
	<b>Proportion of Target to Denominator Discharges</b>	14.0%	15.2%	15.7%	15.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$22,355	\$21,586	\$22,071	\$21,436
	<b>Sum of Medicare Payments for Target</b>	\$20,186,894	\$21,931,486	\$25,337,438	\$23,858,551
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,029	941	1,089	1,062
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,762	12,144	12,605	12,122
	<b>Proportion of Target to Denominator Discharges</b>	8.1%	7.7%	8.6%	8.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$8,259	\$7,897	\$7,832	\$7,307
	<b>Sum of Medicare Payments for Target</b>	\$8,498,462	\$7,430,763	\$8,529,318	\$7,759,600
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,123	1,258	1,414	1,342
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,453	6,688	7,311	7,149
	<b>Proportion of Target to Denominator Discharges</b>	17.4%	18.8%	19.3%	18.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$25,305	\$24,936	\$22,687	\$23,712
	<b>Sum of Medicare Payments for Target</b>	\$28,417,225	\$31,369,368	\$32,078,934	\$31,821,579

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Missouri, 67 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,026	989	1,001	977
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,190	1,152	1,163	1,151
	Proportion of Target to Denominator Discharges	86.2%	85.9%	86.1%	84.9%
	Average Length of Stay for Target	4.4	5.1	4.3	4.5
	Average Medicare Payment for Target	\$9,276	\$9,391	\$9,089	\$8,948
	Sum of Medicare Payments for Target	\$9,517,068	\$9,287,819	\$9,098,416	\$8,741,942
Respiratory Infections	DRGs 177, 178	2,456	3,142	1,168	1,817
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	3,587	4,184	2,140	2,625
	Proportion of Target to Denominator Discharges	68.5%	75.1%	54.6%	69.2%
	Average Length of Stay for Target	6.7	7.0	5.5	5.5
	Average Medicare Payment for Target	\$14,476	\$14,444	\$12,064	\$12,349
	Sum of Medicare Payments for Target	\$35,553,407	\$45,383,776	\$14,090,734	\$22,438,850
Simple Pneumonia	DRGs 193, 194	1,035	946	870	705
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,724	1,444	1,478	1,160
	Proportion of Target to Denominator Discharges	60.0%	65.5%	58.9%	60.8%
	Average Length of Stay for Target	4.5	5.0	4.4	4.7
	Average Medicare Payment for Target	\$7,692	\$7,798	\$7,533	\$7,462
	Sum of Medicare Payments for Target	\$7,960,870	\$7,376,650	\$6,553,988	\$5,260,762
Septicemia	DRGs 870, 871, 872	3,433	3,338	3,018	2,982
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	5,892	5,571	5,085	4,965
	Proportion of Target to Denominator Discharges	58.3%	59.9%	59.4%	60.1%
	Average Length of Stay for Target	6.8	7.4	6.6	6.5
	Average Medicare Payment for Target	\$14,362	\$14,953	\$12,992	\$13,453
	Sum of Medicare Payments for Target	\$49,305,131	\$49,913,948	\$39,210,516	\$40,116,884
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	312	257	243	278
	All Discharges for Surgical DRGs	10,802	9,919	10,618	10,471
	Proportion of Target to Denominator Discharges	2.9%	2.6%	2.3%	2.7%
	Average Length of Stay for Target	8.8	11.0	9.9	8.4
	Average Medicare Payment for Target	\$24,270	\$27,450	\$25,111	\$24,189
	Sum of Medicare Payments for Target	\$7,572,388	\$7,054,609	\$6,102,019	\$6,724,593

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Missouri

123

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	20,673	19,634	18,285	18,570
	All Discharges for Medical DRGs w/ or w/o CC or MCC	26,607	24,452	24,026	24,230
	Proportion of Target to Denominator Discharges	77.7%	80.3%	76.1%	76.6%
	Average Length of Stay for Target	5.5	6.0	5.3	5.3
	Average Medicare Payment for Target	\$10,626	\$11,004	\$9,971	\$10,027
	Sum of Medicare Payments for Target	\$219,671,757	\$216,049,658	\$182,318,174	\$186,209,919
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	6,512	6,039	6,351	6,350
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	9,950	9,077	9,809	9,695
	Proportion of Target to Denominator Discharges	65.4%	66.5%	64.7%	65.5%
	Average Length of Stay for Target	7.8	8.3	7.6	7.4
	Average Medicare Payment for Target	\$25,621	\$26,258	\$25,593	\$25,010
	Sum of Medicare Payments for Target	\$166,840,909	\$158,569,405	\$162,541,701	\$158,814,584
Single CC or MCC	Discharges with one CC or MCC coded on the claim	12,434	11,276	11,175	11,397
	All Discharges with one or more CC or MCC coded on the claim	27,088	25,597	24,622	24,893
	Proportion of Target to Denominator Discharges	45.9%	44.1%	45.4%	45.8%
	Average Length of Stay for Target	4.9	5.2	4.9	4.8
	Average Medicare Payment for Target	\$13,557	\$13,679	\$13,351	\$13,192
	Sum of Medicare Payments for Target	\$168,573,704	\$154,241,888	\$149,202,233	\$150,345,413
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	787	697	832	907
	All Discharges with one or more MCCs including severe malnutrition	2,037	1,874	2,049	2,128
	Proportion of Target to Denominator Discharges	38.6%	37.2%	40.6%	42.6%
	Average Length of Stay for Target	6.3	6.5	6.4	6.6
	Average Medicare Payment for Target	\$14,405	\$14,171	\$14,183	\$14,305
	Sum of Medicare Payments for Target	\$11,337,059	\$9,877,181	\$11,800,440	\$12,974,493
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	484	519	246	280
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	4,048	3,972	3,390	3,348
	Proportion of Target to Denominator Discharges	12.0%	13.1%	7.3%	8.4%
	Average Length of Stay for Target	20.6	22.4	21.5	20.7
	Average Medicare Payment for Target	\$71,221	\$72,655	\$78,943	\$71,622
	Sum of Medicare Payments for Target	\$34,470,982	\$37,707,788	\$19,419,893	\$20,054,243

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Missouri

124

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	631	576	654	547
	All DRGs 246-249 Discharges + outpatient claims	1,348	1,237	1,369	1,198
	Proportion of Target to Denominator Discharges	46.8%	46.6%	47.8%	45.7%
	Average Length of Stay for Target	3.6	3.5	3.7	4.0
	Average Medicare Payment for Target	\$17,013	\$16,740	\$16,256	\$16,853
	Sum of Medicare Payments for Target	\$10,734,892	\$9,642,314	\$10,631,601	\$9,218,817
Total Knee Replacement	Inpatient discharges with knee replacement px codes	423	367	381	387
	Inpatient discharges + outpatient claims with knee replacement px codes	1,651	1,565	1,538	1,507
	Proportion of Target to Denominator Discharges	25.6%	23.5%	24.8%	25.7%
	Average Medicare Payment for Target	\$14,563	\$15,622	\$15,255	\$15,406
	Sum of Medicare Payments for Target	\$6,160,185	\$5,733,367	\$5,812,328	\$5,962,296
Syncope	DRG 312	250	210	230	283
	All medical DRGs in MDC 05 Discharges	5,239	4,562	5,036	4,839
	Proportion of Target to Denominator Discharges	4.8%	4.6%	4.6%	5.8%
	Average Length of Stay for Target	3.1	3.1	3.3	2.9
	Average Medicare Payment for Target	\$5,386	\$5,534	\$5,142	\$5,262
	Sum of Medicare Payments for Target	\$1,346,397	\$1,162,239	\$1,182,607	\$1,489,203
Other Circulatory System Diagnoses	DRGs 314, 315, 316	309	284	278	271
	All medical DRGs in MDC 05 Discharges	5,239	4,562	5,036	4,839
	Proportion of Target to Denominator Discharges	5.9%	6.2%	5.5%	5.6%
	Average Length of Stay for Target	6.1	6.9	5.6	5.1
	Average Medicare Payment for Target	\$12,466	\$12,737	\$11,795	\$11,396
	Sum of Medicare Payments for Target	\$3,852,098	\$3,617,229	\$3,279,050	\$3,088,219
Other Digestive System Diagnoses	DRGs 393, 394, 395	291	250	310	313
	All medical DRGs in MDC 06 Discharges	2,855	2,417	2,693	2,748
	Proportion of Target to Denominator Discharges	10.2%	10.3%	11.5%	11.4%
	Average Length of Stay for Target	4.2	4.4	4.9	4.4
	Average Medicare Payment for Target	\$7,999	\$8,528	\$8,628	\$8,070
	Sum of Medicare Payments for Target	\$2,327,809	\$2,131,974	\$2,674,634	\$2,525,804

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Missouri

125

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	347	286	342	372
	All medical DRGs in MDC 08 Discharges	1,226	1,026	1,178	1,203
	Proportion of Target to Denominator Discharges	28.3%	27.9%	29.0%	30.9%
	Average Length of Stay for Target	4.4	4.4	4.4	4.5
	Average Medicare Payment for Target	\$6,943	\$7,237	\$6,795	\$6,988
	Sum of Medicare Payments for Target	\$2,409,136	\$2,069,819	\$2,323,764	\$2,599,372
Spinal Fusion	Claims with spinal fusion procedure codes	758	741	774	700
	Claims with spinal procedure codes	1,623	1,468	1,502	1,505
	Proportion of Target to Denominator Discharges	46.7%	50.5%	51.5%	46.5%
	Average Length of Stay for Target	4.1	4.2	4.0	4.4
	Average Medicare Payment for Target	\$27,499	\$27,556	\$28,356	\$28,522
	Sum of Medicare Payments for Target	\$20,843,944	\$20,418,833	\$21,947,228	\$19,965,542
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	995	952	1,098	1,059
	All Discharges with Transfer to SNF	7,131	7,096	7,140	7,156
	Proportion of Target to Denominator Discharges	14.0%	13.4%	15.4%	14.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,379	\$9,554	\$9,447	\$9,331
	Sum of Medicare Payments for Target	\$9,331,863	\$9,095,678	\$10,373,189	\$9,881,302
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	6,334	5,909	5,914	5,939
	All Discharges excl dc status 02,82,07,20	36,907	33,913	34,575	34,518
	Proportion of Target to Denominator Discharges	17.2%	17.4%	17.1%	17.2%
	Average Length of Stay for Target	6.1	6.6	6.2	5.9
	Average Medicare Payment for Target	\$14,273	\$14,516	\$13,721	\$13,432
	Sum of Medicare Payments for Target	\$90,402,458	\$85,776,638	\$81,146,520	\$79,774,625
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	4,565	4,352	4,416	4,251
	All Discharges excl dc status 02,82,07,20	36,907	33,913	34,575	34,518
	Proportion of Target to Denominator Discharges	12.4%	12.8%	12.8%	12.3%
	Average Length of Stay for Target	6.0	6.4	6.1	5.9
	Average Medicare Payment for Target	\$14,099	\$14,244	\$13,688	\$13,450
	Sum of Medicare Payments for Target	\$64,360,728	\$61,990,231	\$60,448,281	\$57,174,077

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Missouri

126

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,445	3,793	4,111	3,993
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	23,873	21,925	21,624	21,698
	<b>Proportion of Target to Denominator Discharges</b>	18.6%	17.3%	19.0%	18.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,426	\$7,681	\$7,161	\$7,118
	<b>Sum of Medicare Payments for Target</b>	\$33,010,647	\$29,135,504	\$29,437,937	\$28,422,091
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,272	1,148	1,273	1,246
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	9,407	8,719	9,360	9,107
	<b>Proportion of Target to Denominator Discharges</b>	13.5%	13.2%	13.6%	13.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$16,621	\$16,820	\$16,423	\$16,363
	<b>Sum of Medicare Payments for Target</b>	\$21,141,697	\$19,308,865	\$20,906,332	\$20,387,990
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,072	1,665	1,827	1,890
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	23,873	21,925	21,624	21,698
	<b>Proportion of Target to Denominator Discharges</b>	8.7%	7.6%	8.4%	8.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,798	\$6,753	\$6,081	\$6,421
	<b>Sum of Medicare Payments for Target</b>	\$14,085,502	\$11,244,141	\$11,109,251	\$12,134,857
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,405	1,384	1,538	1,504
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	9,407	8,719	9,360	9,107
	<b>Proportion of Target to Denominator Discharges</b>	14.9%	15.9%	16.4%	16.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$19,264	\$18,701	\$18,935	\$19,189
	<b>Sum of Medicare Payments for Target</b>	\$27,066,063	\$25,882,742	\$29,122,367	\$28,860,601

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Mississippi, 59 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	654	628	607	607
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	757	714	709	705
	Proportion of Target to Denominator Discharges	86.4%	88.0%	85.6%	86.1%
	Average Length of Stay for Target	4.9	5.2	5.0	4.9
	Average Medicare Payment for Target	\$8,368	\$8,597	\$8,410	\$8,448
	Sum of Medicare Payments for Target	\$5,472,368	\$5,398,747	\$5,104,601	\$5,127,811
Respiratory Infections	DRGs 177, 178	852	1,895	453	992
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,600	2,563	1,043	1,568
	Proportion of Target to Denominator Discharges	53.3%	73.9%	43.4%	63.3%
	Average Length of Stay for Target	6.5	6.2	5.2	5.5
	Average Medicare Payment for Target	\$12,819	\$13,266	\$11,013	\$11,453
	Sum of Medicare Payments for Target	\$10,922,130	\$25,139,361	\$4,988,744	\$11,361,466
Simple Pneumonia	DRGs 193, 194	665	576	533	488
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,116	895	892	766
	Proportion of Target to Denominator Discharges	59.6%	64.4%	59.8%	63.7%
	Average Length of Stay for Target	4.8	4.8	4.7	4.7
	Average Medicare Payment for Target	\$6,879	\$7,013	\$6,656	\$6,906
	Sum of Medicare Payments for Target	\$4,574,408	\$4,039,297	\$3,547,737	\$3,370,096
Septicemia	DRGs 870, 871, 872	2,493	2,551	2,252	2,282
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	4,103	4,077	3,575	3,645
	Proportion of Target to Denominator Discharges	60.8%	62.6%	63.0%	62.6%
	Average Length of Stay for Target	6.5	7.1	6.2	6.3
	Average Medicare Payment for Target	\$13,009	\$13,710	\$11,769	\$11,909
	Sum of Medicare Payments for Target	\$32,430,639	\$34,974,309	\$26,503,424	\$27,175,987
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	173	159	124	158
	All Discharges for Surgical DRGs	5,616	5,136	5,252	5,159
	Proportion of Target to Denominator Discharges	3.1%	3.1%	2.4%	3.1%
	Average Length of Stay for Target	9.4	9.3	10.4	9.6
	Average Medicare Payment for Target	\$22,771	\$24,546	\$22,134	\$23,145
	Sum of Medicare Payments for Target	\$3,939,468	\$3,902,800	\$2,744,603	\$3,656,912

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Mississippi

128

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	11,624	11,833	10,401	10,724
	All Discharges for Medical DRGs w/ or w/o CC or MCC	14,999	14,610	13,684	13,786
	Proportion of Target to Denominator Discharges	77.5%	81.0%	76.0%	77.8%
	Average Length of Stay for Target	5.3	5.6	5.2	5.3
	Average Medicare Payment for Target	\$9,191	\$9,958	\$8,853	\$9,070
	Sum of Medicare Payments for Target	\$106,832,891	\$117,836,602	\$92,082,000	\$97,262,392
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	3,308	2,980	2,976	2,989
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	5,196	4,735	4,888	4,790
	Proportion of Target to Denominator Discharges	63.7%	62.9%	60.9%	62.4%
	Average Length of Stay for Target	7.9	7.9	8.0	7.9
	Average Medicare Payment for Target	\$22,399	\$22,371	\$21,769	\$21,989
	Sum of Medicare Payments for Target	\$74,094,905	\$66,666,274	\$64,785,965	\$65,725,313
Single CC or MCC	Discharges with one CC or MCC coded on the claim	6,766	6,655	6,140	6,235
	All Discharges with one or more CC or MCC coded on the claim	14,918	14,757	13,366	13,685
	Proportion of Target to Denominator Discharges	45.4%	45.1%	45.9%	45.6%
	Average Length of Stay for Target	4.8	4.9	4.8	4.8
	Average Medicare Payment for Target	\$11,683	\$11,824	\$11,375	\$11,385
	Sum of Medicare Payments for Target	\$79,046,884	\$78,689,091	\$69,841,605	\$70,982,461
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	249	181	243	266
	All Discharges with one or more MCCs including severe malnutrition	797	770	803	856
	Proportion of Target to Denominator Discharges	31.2%	23.5%	30.3%	31.1%
	Average Length of Stay for Target	5.2	6.3	5.4	5.8
	Average Medicare Payment for Target	\$11,631	\$12,232	\$11,320	\$11,619
	Sum of Medicare Payments for Target	\$2,896,071	\$2,213,994	\$2,750,853	\$3,090,541
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	335	389	171	219
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,860	3,028	2,469	2,532
	Proportion of Target to Denominator Discharges	11.7%	12.8%	6.9%	8.6%
	Average Length of Stay for Target	19.4	19.0	20.6	18.7
	Average Medicare Payment for Target	\$60,112	\$57,986	\$65,440	\$57,516
	Sum of Medicare Payments for Target	\$20,137,637	\$22,556,554	\$11,190,232	\$12,596,011

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Mississippi

129

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	328	292	305	281
	All DRGs 246-249 Discharges + outpatient claims	801	701	772	660
	Proportion of Target to Denominator Discharges	40.9%	41.7%	39.5%	42.6%
	Average Length of Stay for Target	3.6	3.5	3.6	3.3
	Average Medicare Payment for Target	\$15,305	\$15,813	\$15,303	\$15,362
	Sum of Medicare Payments for Target	\$5,020,175	\$4,617,542	\$4,667,359	\$4,316,712
Total Knee Replacement	Inpatient discharges with knee replacement px codes	199	186	225	201
	Inpatient discharges + outpatient claims with knee replacement px codes	475	481	501	497
	Proportion of Target to Denominator Discharges	41.9%	38.7%	44.9%	40.4%
	Average Medicare Payment for Target	\$12,595	\$12,197	\$12,385	\$12,524
	Sum of Medicare Payments for Target	\$2,506,312	\$2,268,644	\$2,786,662	\$2,517,304
Syncope	DRG 312	124	126	142	144
	All medical DRGs in MDC 05 Discharges	2,970	2,662	2,679	2,556
	Proportion of Target to Denominator Discharges	4.2%	4.7%	5.3%	5.6%
	Average Length of Stay for Target	3.5	2.9	3.3	3.0
	Average Medicare Payment for Target	\$5,152	\$5,033	\$5,292	\$5,036
	Sum of Medicare Payments for Target	\$638,793	\$634,206	\$751,439	\$725,251
Other Circulatory System Diagnoses	DRGs 314, 315, 316	183	157	126	180
	All medical DRGs in MDC 05 Discharges	2,970	2,662	2,679	2,556
	Proportion of Target to Denominator Discharges	6.2%	5.9%	4.7%	7.0%
	Average Length of Stay for Target	6.4	5.9	5.4	5.9
	Average Medicare Payment for Target	\$10,975	\$11,504	\$10,584	\$10,882
	Sum of Medicare Payments for Target	\$2,008,512	\$1,806,185	\$1,333,628	\$1,958,694
Other Digestive System Diagnoses	DRGs 393, 394, 395	136	127	136	137
	All medical DRGs in MDC 06 Discharges	1,700	1,523	1,546	1,474
	Proportion of Target to Denominator Discharges	8.0%	8.3%	8.8%	9.3%
	Average Length of Stay for Target	4.8	5.1	5.1	3.9
	Average Medicare Payment for Target	\$7,771	\$8,776	\$7,758	\$7,312
	Sum of Medicare Payments for Target	\$1,056,894	\$1,114,596	\$1,055,080	\$1,001,717

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Mississippi

130

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	107	75	121	117
	All medical DRGs in MDC 08 Discharges	444	336	460	426
	Proportion of Target to Denominator Discharges	24.1%	22.3%	26.3%	27.5%
	Average Length of Stay for Target	5.1	5.8	5.1	4.4
	Average Medicare Payment for Target	\$6,625	\$6,672	\$6,588	\$6,605
	Sum of Medicare Payments for Target	\$708,877	\$500,429	\$797,161	\$772,830
Spinal Fusion	Claims with spinal fusion procedure codes	346	308	296	308
	Claims with spinal procedure codes	712	685	631	685
	Proportion of Target to Denominator Discharges	48.6%	45.0%	46.9%	45.0%
	Average Length of Stay for Target	3.0	3.1	3.3	3.6
	Average Medicare Payment for Target	\$20,134	\$22,422	\$20,909	\$20,762
	Sum of Medicare Payments for Target	\$6,966,408	\$6,906,099	\$6,189,031	\$6,394,836
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	616	595	629	701
	All Discharges with Transfer to SNF	4,111	3,880	3,902	4,016
	Proportion of Target to Denominator Discharges	15.0%	15.3%	16.1%	17.5%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,423	\$8,925	\$8,817	\$8,613
	Sum of Medicare Payments for Target	\$5,188,868	\$5,310,530	\$5,545,800	\$6,037,582
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,611	3,292	3,223	3,287
	All Discharges excl dc status 02,82,07,20	20,445	19,377	18,941	18,892
	Proportion of Target to Denominator Discharges	17.7%	17.0%	17.0%	17.4%
	Average Length of Stay for Target	6.2	6.2	6.1	6.0
	Average Medicare Payment for Target	\$11,729	\$12,314	\$11,566	\$11,433
	Sum of Medicare Payments for Target	\$42,352,314	\$40,536,606	\$37,277,539	\$37,580,950
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,709	2,456	2,424	2,442
	All Discharges excl dc status 02,82,07,20	20,445	19,377	18,941	18,892
	Proportion of Target to Denominator Discharges	13.3%	12.7%	12.8%	12.9%
	Average Length of Stay for Target	6.2	6.1	6.1	5.9
	Average Medicare Payment for Target	\$11,889	\$12,346	\$11,733	\$11,432
	Sum of Medicare Payments for Target	\$32,208,358	\$30,322,610	\$28,441,390	\$27,915,870

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Mississippi

131

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,750	2,458	2,619	2,443
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	14,587	14,123	13,194	13,104
	<b>Proportion of Target to Denominator Discharges</b>	18.9%	17.4%	19.8%	18.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,620	\$6,808	\$6,335	\$6,449
	<b>Sum of Medicare Payments for Target</b>	\$18,204,349	\$16,733,973	\$16,591,094	\$15,755,139
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	695	583	620	572
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,242	4,757	4,820	4,661
	<b>Proportion of Target to Denominator Discharges</b>	13.3%	12.3%	12.9%	12.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$14,635	\$14,070	\$13,628	\$13,873
	<b>Sum of Medicare Payments for Target</b>	\$10,171,495	\$8,202,993	\$8,449,103	\$7,935,356
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,200	1,226	1,105	1,034
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	14,587	14,123	13,194	13,104
	<b>Proportion of Target to Denominator Discharges</b>	8.2%	8.7%	8.4%	7.9%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$5,834	\$6,208	\$5,620	\$5,989
	<b>Sum of Medicare Payments for Target</b>	\$7,001,036	\$7,610,638	\$6,210,016	\$6,192,803
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	867	856	793	839
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,242	4,757	4,820	4,661
	<b>Proportion of Target to Denominator Discharges</b>	16.5%	18.0%	16.5%	18.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$16,834	\$17,294	\$16,815	\$17,022
	<b>Sum of Medicare Payments for Target</b>	\$14,595,027	\$14,803,759	\$13,334,046	\$14,281,152

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Montana, 12 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	149	163	185	160
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	160	177	205	171
	Proportion of Target to Denominator Discharges	93.1%	92.1%	90.2%	93.6%
	Average Length of Stay for Target	6.5	6.1	5.1	5.5
	Average Medicare Payment for Target	\$9,571	\$9,786	\$8,990	\$8,804
	Sum of Medicare Payments for Target	\$1,426,005	\$1,595,101	\$1,663,063	\$1,408,710
Respiratory Infections	DRGs 177, 178	698	392	193	266
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	836	545	346	379
	Proportion of Target to Denominator Discharges	83.5%	71.9%	55.8%	70.2%
	Average Length of Stay for Target	7.5	6.9	5.0	5.2
	Average Medicare Payment for Target	\$15,768	\$14,646	\$13,179	\$13,019
	Sum of Medicare Payments for Target	\$11,006,352	\$5,741,389	\$2,543,503	\$3,463,107
Simple Pneumonia	DRGs 193, 194	131	141	143	95
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	236	213	225	160
	Proportion of Target to Denominator Discharges	55.5%	66.2%	63.6%	59.4%
	Average Length of Stay for Target	5.2	4.8	4.9	5.0
	Average Medicare Payment for Target	\$8,171	\$8,065	\$8,082	\$8,119
	Sum of Medicare Payments for Target	\$1,070,423	\$1,137,228	\$1,155,709	\$771,311
Septicemia	DRGs 870, 871, 872	602	518	543	513
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	904	808	802	747
	Proportion of Target to Denominator Discharges	66.6%	64.1%	67.7%	68.7%
	Average Length of Stay for Target	6.1	6.8	5.0	5.8
	Average Medicare Payment for Target	\$14,442	\$14,891	\$11,755	\$12,292
	Sum of Medicare Payments for Target	\$8,693,961	\$7,713,362	\$6,382,720	\$6,305,675
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	37	43	46	38
	All Discharges for Surgical DRGs	2,101	2,104	2,192	2,207
	Proportion of Target to Denominator Discharges	1.8%	2.0%	2.1%	1.7%
	Average Length of Stay for Target	6.8	8.3	8.3	8.0
	Average Medicare Payment for Target	\$26,055	\$24,171	\$24,573	\$25,189
	Sum of Medicare Payments for Target	\$964,017	\$1,039,362	\$1,130,355	\$957,198

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Montana

133

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	3,112	2,790	2,604	2,618
	All Discharges for Medical DRGs w/ or w/o CC or MCC	3,836	3,465	3,392	3,457
	Proportion of Target to Denominator Discharges	81.1%	80.5%	76.8%	75.7%
	Average Length of Stay for Target	6.0	6.0	5.2	5.3
	Average Medicare Payment for Target	\$11,362	\$10,795	\$9,965	\$9,930
	Sum of Medicare Payments for Target	\$35,360,099	\$30,117,013	\$25,948,619	\$25,996,936
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,128	1,114	1,180	1,195
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,939	1,946	2,054	2,065
	Proportion of Target to Denominator Discharges	58.2%	57.2%	57.4%	57.9%
	Average Length of Stay for Target	8.0	8.0	7.0	7.4
	Average Medicare Payment for Target	\$26,383	\$27,471	\$26,028	\$25,371
	Sum of Medicare Payments for Target	\$29,759,884	\$30,602,183	\$30,712,994	\$30,318,765
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,950	1,821	1,813	1,845
	All Discharges with one or more CC or MCC coded on the claim	4,229	3,899	3,781	3,810
	Proportion of Target to Denominator Discharges	46.1%	46.7%	48.0%	48.4%
	Average Length of Stay for Target	5.5	5.3	4.8	4.8
	Average Medicare Payment for Target	\$15,051	\$15,342	\$14,800	\$14,700
	Sum of Medicare Payments for Target	\$29,349,235	\$27,938,396	\$26,832,082	\$27,121,750
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	92	80	110	152
	All Discharges with one or more MCCs including severe malnutrition	270	276	285	316
	Proportion of Target to Denominator Discharges	34.1%	29.0%	38.6%	48.1%
	Average Length of Stay for Target	10.2	8.2	8.7	7.4
	Average Medicare Payment for Target	\$16,478	\$16,158	\$17,583	\$15,047
	Sum of Medicare Payments for Target	\$1,515,995	\$1,292,620	\$1,934,138	\$2,287,108
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	94	59	23	24
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	720	587	581	559
	Proportion of Target to Denominator Discharges	13.1%	10.1%	4.0%	4.3%
	Average Length of Stay for Target	19.5	19.3	16.6	17.8
	Average Medicare Payment for Target	\$77,288	\$69,202	\$78,242	\$77,222
	Sum of Medicare Payments for Target	\$7,265,067	\$4,082,935	\$1,799,557	\$1,853,336

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Montana

134

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	133	138	152	150
	All DRGs 246-249 Discharges + outpatient claims	284	276	335	280
	Proportion of Target to Denominator Discharges	46.8%	50.0%	45.4%	53.6%
	Average Length of Stay for Target	2.9	3.3	3.1	2.9
	Average Medicare Payment for Target	\$16,437	\$17,696	\$16,691	\$16,518
	Sum of Medicare Payments for Target	\$2,186,071	\$2,442,100	\$2,537,097	\$2,477,625
Total Knee Replacement	Inpatient discharges with knee replacement px codes	97	77	86	75
	Inpatient discharges + outpatient claims with knee replacement px codes	350	297	342	344
	Proportion of Target to Denominator Discharges	27.7%	25.9%	25.1%	21.8%
	Average Medicare Payment for Target	\$14,525	\$15,154	\$16,665	\$17,715
	Sum of Medicare Payments for Target	\$1,408,922	\$1,166,872	\$1,433,225	\$1,328,621
Syncope	DRG 312	14	15	27	25
	All medical DRGs in MDC 05 Discharges	604	618	609	602
	Proportion of Target to Denominator Discharges	2.3%	2.4%	4.4%	4.2%
	Average Length of Stay for Target	5.4	4.5	4.1	2.9
	Average Medicare Payment for Target	\$4,850	\$5,290	\$5,032	\$4,780
	Sum of Medicare Payments for Target	\$67,896	\$79,355	\$135,858	\$119,490
Other Circulatory System Diagnoses	DRGs 314, 315, 316	34	27	28	29
	All medical DRGs in MDC 05 Discharges	604	618	609	602
	Proportion of Target to Denominator Discharges	5.6%	4.4%	4.6%	4.8%
	Average Length of Stay for Target	4.5	4.7	4.6	4.2
	Average Medicare Payment for Target	\$9,805	\$10,515	\$11,870	\$10,452
	Sum of Medicare Payments for Target	\$333,356	\$283,915	\$332,371	\$303,095
Other Digestive System Diagnoses	DRGs 393, 394, 395	39	50	33	49
	All medical DRGs in MDC 06 Discharges	355	386	418	406
	Proportion of Target to Denominator Discharges	11.0%	13.0%	7.9%	12.1%
	Average Length of Stay for Target	4.7	5.3	4.8	3.7
	Average Medicare Payment for Target	\$6,736	\$8,458	\$7,566	\$7,727
	Sum of Medicare Payments for Target	\$262,711	\$422,882	\$249,691	\$378,610

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Montana

135

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	39	32	34	38
	All medical DRGs in MDC 08 Discharges	151	128	129	139
	Proportion of Target to Denominator Discharges	25.8%	25.0%	26.4%	27.3%
	Average Length of Stay for Target	5.0	9.2	7.1	4.6
	Average Medicare Payment for Target	\$7,994	\$8,144	\$8,354	\$6,890
	Sum of Medicare Payments for Target	\$311,778	\$260,592	\$284,036	\$261,814
Spinal Fusion	Claims with spinal fusion procedure codes	170	176	176	180
	Claims with spinal procedure codes	340	333	331	350
	Proportion of Target to Denominator Discharges	50.0%	52.9%	53.2%	51.4%
	Average Length of Stay for Target	3.0	3.1	3.7	3.2
	Average Medicare Payment for Target	\$29,828	\$29,235	\$31,947	\$29,054
	Sum of Medicare Payments for Target	\$5,070,842	\$5,145,322	\$5,622,724	\$5,229,655
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	86	79	94	87
	All Discharges with Transfer to SNF	807	755	842	842
	Proportion of Target to Denominator Discharges	10.7%	10.5%	11.2%	10.3%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,214	\$10,736	\$11,241	\$10,833
	Sum of Medicare Payments for Target	\$964,398	\$848,165	\$1,056,656	\$942,471
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	688	654	712	659
	All Discharges excl dc status 02,82,07,20	5,628	5,330	5,486	5,576
	Proportion of Target to Denominator Discharges	12.2%	12.3%	13.0%	11.8%
	Average Length of Stay for Target	6.4	6.6	5.9	5.5
	Average Medicare Payment for Target	\$14,909	\$15,150	\$14,748	\$13,906
	Sum of Medicare Payments for Target	\$10,257,151	\$9,908,085	\$10,500,636	\$9,164,179
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	586	568	619	551
	All Discharges excl dc status 02,82,07,20	5,628	5,330	5,486	5,576
	Proportion of Target to Denominator Discharges	10.4%	10.7%	11.3%	9.9%
	Average Length of Stay for Target	6.4	6.4	5.9	5.4
	Average Medicare Payment for Target	\$14,680	\$14,485	\$14,816	\$13,571
	Sum of Medicare Payments for Target	\$8,602,520	\$8,227,710	\$9,170,968	\$7,477,516

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Montana

136

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	680	605	649	720
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,517	3,237	3,269	3,414
	<b>Proportion of Target to Denominator Discharges</b>	19.3%	18.7%	19.9%	21.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,228	\$8,089	\$7,385	\$7,594
	<b>Sum of Medicare Payments for Target</b>	\$5,595,334	\$4,893,702	\$4,793,142	\$5,467,938
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	286	286	312	300
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,916	1,927	2,033	2,054
	<b>Proportion of Target to Denominator Discharges</b>	14.9%	14.8%	15.3%	14.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,894	\$18,030	\$17,494	\$18,017
	<b>Sum of Medicare Payments for Target</b>	\$5,117,768	\$5,156,606	\$5,458,110	\$5,404,990
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	374	366	442	444
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,517	3,237	3,269	3,414
	<b>Proportion of Target to Denominator Discharges</b>	10.6%	11.3%	13.5%	13.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,106	\$6,797	\$6,738	\$6,775
	<b>Sum of Medicare Payments for Target</b>	\$2,657,659	\$2,487,844	\$2,978,249	\$3,008,205
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	460	473	510	516
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,916	1,927	2,033	2,054
	<b>Proportion of Target to Denominator Discharges</b>	24.0%	24.5%	25.1%	25.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,847	\$20,155	\$20,051	\$19,493
	<b>Sum of Medicare Payments for Target</b>	\$9,589,543	\$9,533,198	\$10,226,219	\$10,058,344

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - North Carolina, 83 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,612	1,394	1,543	1,530
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,816	1,606	1,768	1,743
	Proportion of Target to Denominator Discharges	88.8%	86.8%	87.3%	87.8%
	Average Length of Stay for Target	5.0	5.2	4.9	5.0
	Average Medicare Payment for Target	\$9,481	\$10,307	\$9,206	\$9,526
	Sum of Medicare Payments for Target	\$15,283,324	\$14,368,317	\$14,205,452	\$14,575,450
Respiratory Infections	DRGs 177, 178	2,701	4,394	1,475	2,382
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	4,106	5,680	2,854	3,527
	Proportion of Target to Denominator Discharges	65.8%	77.4%	51.7%	67.5%
	Average Length of Stay for Target	7.4	7.3	6.0	6.1
	Average Medicare Payment for Target	\$14,407	\$14,300	\$12,500	\$12,954
	Sum of Medicare Payments for Target	\$38,913,060	\$62,835,331	\$18,436,848	\$30,856,822
Simple Pneumonia	DRGs 193, 194	1,285	1,186	1,254	993
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,148	1,935	2,189	1,668
	Proportion of Target to Denominator Discharges	59.8%	61.3%	57.3%	59.5%
	Average Length of Stay for Target	5.0	5.2	4.6	4.9
	Average Medicare Payment for Target	\$7,718	\$7,902	\$7,521	\$7,580
	Sum of Medicare Payments for Target	\$9,918,067	\$9,372,153	\$9,430,784	\$7,527,038
Septicemia	DRGs 870, 871, 872	4,671	4,669	4,493	4,405
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	8,002	7,774	7,497	7,155
	Proportion of Target to Denominator Discharges	58.4%	60.1%	59.9%	61.6%
	Average Length of Stay for Target	7.1	7.7	6.8	6.9
	Average Medicare Payment for Target	\$14,379	\$15,043	\$12,977	\$13,154
	Sum of Medicare Payments for Target	\$67,164,878	\$70,235,969	\$58,306,335	\$57,943,700
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	436	409	366	339
	All Discharges for Surgical DRGs	15,060	13,995	14,484	14,025
	Proportion of Target to Denominator Discharges	2.9%	2.9%	2.5%	2.4%
	Average Length of Stay for Target	10.1	12.8	9.1	12.1
	Average Medicare Payment for Target	\$24,347	\$27,726	\$23,801	\$26,054
	Sum of Medicare Payments for Target	\$10,615,118	\$11,340,020	\$8,711,305	\$8,832,195

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Carolina

138

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	27,949	28,042	25,871	25,488
	All Discharges for Medical DRGs w/ or w/o CC or MCC	36,074	34,664	33,693	33,232
	Proportion of Target to Denominator Discharges	77.5%	80.9%	76.8%	76.7%
	Average Length of Stay for Target	5.7	6.2	5.6	5.8
	Average Medicare Payment for Target	\$10,524	\$10,978	\$9,991	\$10,295
	Sum of Medicare Payments for Target	\$294,129,554	\$307,838,131	\$258,475,836	\$262,407,882
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	8,743	7,998	8,416	8,053
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	14,052	12,897	13,554	13,145
	Proportion of Target to Denominator Discharges	62.2%	62.0%	62.1%	61.3%
	Average Length of Stay for Target	8.0	8.8	7.8	8.4
	Average Medicare Payment for Target	\$26,260	\$27,014	\$25,779	\$26,225
	Sum of Medicare Payments for Target	\$229,592,930	\$216,060,809	\$216,956,409	\$211,192,890
Single CC or MCC	Discharges with one CC or MCC coded on the claim	16,708	16,155	15,911	15,278
	All Discharges with one or more CC or MCC coded on the claim	36,611	35,931	34,272	33,505
	Proportion of Target to Denominator Discharges	45.6%	45.0%	46.4%	45.6%
	Average Length of Stay for Target	5.2	5.5	5.0	5.2
	Average Medicare Payment for Target	\$13,777	\$14,040	\$13,463	\$13,599
	Sum of Medicare Payments for Target	\$230,184,510	\$226,818,947	\$214,203,658	\$207,770,526
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	871	711	876	858
	All Discharges with one or more MCCs including severe malnutrition	2,335	2,222	2,270	2,217
	Proportion of Target to Denominator Discharges	37.3%	32.0%	38.6%	38.7%
	Average Length of Stay for Target	6.6	7.7	6.9	7.3
	Average Medicare Payment for Target	\$14,410	\$14,650	\$14,129	\$14,464
	Sum of Medicare Payments for Target	\$12,551,052	\$10,416,281	\$12,377,411	\$12,409,695
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	648	727	374	388
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	5,449	5,478	4,950	4,862
	Proportion of Target to Denominator Discharges	11.9%	13.3%	7.6%	8.0%
	Average Length of Stay for Target	23.2	23.7	22.3	20.2
	Average Medicare Payment for Target	\$68,334	\$66,664	\$69,195	\$65,137
	Sum of Medicare Payments for Target	\$44,280,313	\$48,464,963	\$25,879,073	\$25,273,013

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Carolina

139

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	859	797	743	733
	All DRGs 246-249 Discharges + outpatient claims	1,672	1,614	1,446	1,455
	Proportion of Target to Denominator Discharges	51.4%	49.4%	51.4%	50.4%
	Average Length of Stay for Target	3.5	4.0	3.4	3.6
	Average Medicare Payment for Target	\$16,999	\$17,732	\$16,662	\$16,919
	Sum of Medicare Payments for Target	\$14,602,264	\$14,132,123	\$12,379,830	\$12,401,749
Total Knee Replacement	Inpatient discharges with knee replacement px codes	633	655	685	667
	Inpatient discharges + outpatient claims with knee replacement px codes	2,190	2,356	2,244	2,134
	Proportion of Target to Denominator Discharges	28.9%	27.8%	30.5%	31.3%
	Average Medicare Payment for Target	\$14,316	\$14,710	\$14,984	\$15,426
	Sum of Medicare Payments for Target	\$9,062,034	\$9,634,739	\$10,264,333	\$10,289,282
Syncope	DRG 312	395	305	382	345
	All medical DRGs in MDC 05 Discharges	7,689	6,876	7,281	6,838
	Proportion of Target to Denominator Discharges	5.1%	4.4%	5.2%	5.0%
	Average Length of Stay for Target	3.2	3.4	3.2	3.3
	Average Medicare Payment for Target	\$5,670	\$5,719	\$5,622	\$5,573
	Sum of Medicare Payments for Target	\$2,239,625	\$1,744,309	\$2,147,565	\$1,922,661
Other Circulatory System Diagnoses	DRGs 314, 315, 316	340	345	369	376
	All medical DRGs in MDC 05 Discharges	7,689	6,876	7,281	6,838
	Proportion of Target to Denominator Discharges	4.4%	5.0%	5.1%	5.5%
	Average Length of Stay for Target	5.9	6.8	6.6	5.9
	Average Medicare Payment for Target	\$11,843	\$12,761	\$13,111	\$12,462
	Sum of Medicare Payments for Target	\$4,026,522	\$4,402,533	\$4,838,091	\$4,685,735
Other Digestive System Diagnoses	DRGs 393, 394, 395	426	375	400	387
	All medical DRGs in MDC 06 Discharges	3,879	3,441	3,760	3,630
	Proportion of Target to Denominator Discharges	11.0%	10.9%	10.6%	10.7%
	Average Length of Stay for Target	4.7	4.9	4.7	5.0
	Average Medicare Payment for Target	\$8,328	\$8,476	\$8,145	\$8,294
	Sum of Medicare Payments for Target	\$3,547,560	\$3,178,662	\$3,257,960	\$3,209,669

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Carolina

140

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	330	272	306	294
	All medical DRGs in MDC 08 Discharges	1,362	1,094	1,246	1,225
	Proportion of Target to Denominator Discharges	24.2%	24.9%	24.6%	24.0%
	Average Length of Stay for Target	4.4	5.3	4.4	5.3
	Average Medicare Payment for Target	\$7,353	\$7,643	\$6,864	\$7,067
	Sum of Medicare Payments for Target	\$2,426,536	\$2,078,882	\$2,100,420	\$2,077,622
Spinal Fusion	Claims with spinal fusion procedure codes	1,340	1,215	1,263	1,147
	Claims with spinal procedure codes	2,516	2,295	2,370	2,237
	Proportion of Target to Denominator Discharges	53.3%	52.9%	53.3%	51.3%
	Average Length of Stay for Target	3.9	3.9	3.8	3.9
	Average Medicare Payment for Target	\$28,477	\$29,044	\$30,046	\$29,661
	Sum of Medicare Payments for Target	\$38,159,244	\$35,288,066	\$37,948,532	\$34,021,489
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,163	997	1,198	1,074
	All Discharges with Transfer to SNF	10,345	9,849	10,089	9,961
	Proportion of Target to Denominator Discharges	11.2%	10.1%	11.9%	10.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,294	\$9,693	\$9,620	\$9,451
	Sum of Medicare Payments for Target	\$10,808,763	\$9,663,433	\$11,524,566	\$10,150,081
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	8,235	7,868	7,739	7,596
	All Discharges excl dc status 02,82,07,20	50,411	47,526	48,165	46,952
	Proportion of Target to Denominator Discharges	16.3%	16.6%	16.1%	16.2%
	Average Length of Stay for Target	6.5	6.8	6.3	6.7
	Average Medicare Payment for Target	\$14,017	\$14,154	\$13,465	\$13,717
	Sum of Medicare Payments for Target	\$115,428,358	\$111,367,243	\$104,207,484	\$104,196,299
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	6,203	5,980	5,894	5,703
	All Discharges excl dc status 02,82,07,20	50,411	47,526	48,165	46,952
	Proportion of Target to Denominator Discharges	12.3%	12.6%	12.2%	12.1%
	Average Length of Stay for Target	6.4	6.6	6.2	6.7
	Average Medicare Payment for Target	\$13,933	\$13,935	\$13,409	\$13,729
	Sum of Medicare Payments for Target	\$86,427,345	\$83,329,515	\$79,034,547	\$78,293,966

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Carolina

141

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	6,266	5,503	6,093	5,754
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	33,600	31,906	31,897	31,004
	<b>Proportion of Target to Denominator Discharges</b>	18.6%	17.2%	19.1%	18.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,402	\$7,685	\$7,285	\$7,251
	<b>Sum of Medicare Payments for Target</b>	\$46,384,057	\$42,292,978	\$44,389,925	\$41,721,606
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,016	1,823	1,917	1,862
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	13,702	12,719	13,274	12,785
	<b>Proportion of Target to Denominator Discharges</b>	14.7%	14.3%	14.4%	14.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$18,120	\$17,685	\$18,480	\$18,020
	<b>Sum of Medicare Payments for Target</b>	\$36,530,294	\$32,240,102	\$35,426,646	\$33,553,533
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,750	2,478	2,754	2,628
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	33,600	31,906	31,897	31,004
	<b>Proportion of Target to Denominator Discharges</b>	8.2%	7.8%	8.6%	8.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,935	\$6,959	\$6,496	\$6,594
	<b>Sum of Medicare Payments for Target</b>	\$19,072,362	\$17,243,250	\$17,890,958	\$17,330,204
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,888	2,010	2,101	2,091
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	13,702	12,719	13,274	12,785
	<b>Proportion of Target to Denominator Discharges</b>	13.8%	15.8%	15.8%	16.4%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$18,060	\$19,201	\$18,985	\$19,486
	<b>Sum of Medicare Payments for Target</b>	\$34,096,474	\$38,594,218	\$39,887,097	\$40,745,410

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - North Dakota, 8 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	162	160	150	160
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	173	174	167	174
	Proportion of Target to Denominator Discharges	93.6%	92.0%	89.8%	92.0%
	Average Length of Stay for Target	4.8	4.5	4.9	5.4
	Average Medicare Payment for Target	\$9,799	\$9,574	\$9,643	\$10,005
	Sum of Medicare Payments for Target	\$1,587,367	\$1,531,775	\$1,446,421	\$1,600,827
Respiratory Infections	DRGs 177, 178	476	367	167	260
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	635	540	334	363
	Proportion of Target to Denominator Discharges	75.0%	68.0%	50.0%	71.6%
	Average Length of Stay for Target	7.9	8.2	6.4	5.7
	Average Medicare Payment for Target	\$15,768	\$15,506	\$13,378	\$13,135
	Sum of Medicare Payments for Target	\$7,505,496	\$5,690,734	\$2,234,076	\$3,415,147
Simple Pneumonia	DRGs 193, 194	147	166	154	92
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	230	227	245	168
	Proportion of Target to Denominator Discharges	63.9%	73.1%	62.9%	54.8%
	Average Length of Stay for Target	4.6	4.9	4.5	4.6
	Average Medicare Payment for Target	\$8,209	\$8,247	\$7,666	\$8,048
	Sum of Medicare Payments for Target	\$1,206,701	\$1,368,993	\$1,180,505	\$740,460
Septicemia	DRGs 870, 871, 872	529	532	519	476
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	861	841	814	700
	Proportion of Target to Denominator Discharges	61.4%	63.3%	63.8%	68.0%
	Average Length of Stay for Target	6.6	8.2	5.7	6.6
	Average Medicare Payment for Target	\$14,384	\$15,513	\$12,369	\$13,218
	Sum of Medicare Payments for Target	\$7,608,924	\$8,252,869	\$6,419,324	\$6,291,830
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	64	80	54	58
	All Discharges for Surgical DRGs	1,955	1,872	1,954	1,892
	Proportion of Target to Denominator Discharges	3.3%	4.3%	2.8%	3.1%
	Average Length of Stay for Target	8.3	10.0	6.8	13.3
	Average Medicare Payment for Target	\$28,018	\$27,972	\$22,417	\$25,359
	Sum of Medicare Payments for Target	\$1,793,168	\$2,237,730	\$1,210,538	\$1,470,805

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Dakota

143

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	3,041	2,868	2,910	2,951
	All Discharges for Medical DRGs w/ or w/o CC or MCC	3,730	3,493	3,707	3,700
	Proportion of Target to Denominator Discharges	81.5%	82.1%	78.5%	79.8%
	Average Length of Stay for Target	5.7	6.0	5.2	5.5
	Average Medicare Payment for Target	\$11,053	\$11,091	\$10,036	\$10,357
	Sum of Medicare Payments for Target	\$33,613,096	\$31,807,920	\$29,205,601	\$30,563,179
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,146	1,190	1,218	1,146
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,780	1,761	1,803	1,758
	Proportion of Target to Denominator Discharges	64.4%	67.6%	67.6%	65.2%
	Average Length of Stay for Target	7.7	7.7	7.1	7.6
	Average Medicare Payment for Target	\$25,869	\$25,658	\$25,538	\$25,047
	Sum of Medicare Payments for Target	\$29,645,994	\$30,533,523	\$31,105,349	\$28,703,299
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,631	1,566	1,658	1,666
	All Discharges with one or more CC or MCC coded on the claim	4,179	4,054	4,126	4,094
	Proportion of Target to Denominator Discharges	39.0%	38.6%	40.2%	40.7%
	Average Length of Stay for Target	4.8	5.2	4.6	4.9
	Average Medicare Payment for Target	\$14,796	\$15,124	\$15,031	\$14,557
	Sum of Medicare Payments for Target	\$24,131,536	\$23,684,576	\$24,921,117	\$24,252,242
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	44	56	60	76
	All Discharges with one or more MCCs including severe malnutrition	178	177	207	209
	Proportion of Target to Denominator Discharges	24.7%	31.6%	29.0%	36.4%
	Average Length of Stay for Target	8.2	7.0	6.6	6.2
	Average Medicare Payment for Target	\$13,748	\$14,798	\$13,917	\$13,155
	Sum of Medicare Payments for Target	\$604,902	\$828,715	\$835,010	\$999,750
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	100	69	38	35
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	658	606	582	524
	Proportion of Target to Denominator Discharges	15.2%	11.4%	6.5%	6.7%
	Average Length of Stay for Target	23.2	21.9	47.4	24.6
	Average Medicare Payment for Target	\$77,545	\$77,628	\$98,083	\$69,855
	Sum of Medicare Payments for Target	\$7,754,466	\$5,356,310	\$3,727,164	\$2,444,922

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report North Dakota

144

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	129	124	138	144
	All DRGs 246-249 Discharges + outpatient claims	298	256	289	299
	Proportion of Target to Denominator Discharges	43.3%	48.4%	47.8%	48.2%
	Average Length of Stay for Target	3.0	3.2	3.7	3.4
	Average Medicare Payment for Target	\$17,619	\$17,197	\$18,100	\$17,069
	Sum of Medicare Payments for Target	\$2,272,798	\$2,132,377	\$2,497,804	\$2,457,894
Total Knee Replacement	Inpatient discharges with knee replacement px codes	51	52	63	49
	Inpatient discharges + outpatient claims with knee replacement px codes	383	338	331	327
	Proportion of Target to Denominator Discharges	13.3%	15.4%	19.0%	15.0%
	Average Medicare Payment for Target	\$18,516	\$22,879	\$17,932	\$19,549
	Sum of Medicare Payments for Target	\$944,313	\$1,189,730	\$1,129,723	\$957,897
Syncope	DRG 312	19	24	31	27
	All medical DRGs in MDC 05 Discharges	681	712	784	763
	Proportion of Target to Denominator Discharges	2.8%	3.4%	4.0%	3.5%
	Average Length of Stay for Target	2.8	3.0	2.9	2.7
	Average Medicare Payment for Target	\$5,592	\$5,267	\$5,059	\$5,325
	Sum of Medicare Payments for Target	\$106,255	\$126,411	\$156,830	\$143,779
Other Circulatory System Diagnoses	DRGs 314, 315, 316	19	26	22	33
	All medical DRGs in MDC 05 Discharges	681	712	784	763
	Proportion of Target to Denominator Discharges	2.8%	3.7%	2.8%	4.3%
	Average Length of Stay for Target	4.4	8.5	5.1	5.0
	Average Medicare Payment for Target	\$12,060	\$12,589	\$12,542	\$10,192
	Sum of Medicare Payments for Target	\$229,147	\$327,306	\$275,932	\$336,346
Other Digestive System Diagnoses	DRGs 393, 394, 395	51	35	36	47
	All medical DRGs in MDC 06 Discharges	407	338	426	422
	Proportion of Target to Denominator Discharges	12.5%	10.4%	8.5%	11.1%
	Average Length of Stay for Target	3.5	5.4	3.4	5.3
	Average Medicare Payment for Target	\$7,651	\$9,801	\$8,431	\$9,510
	Sum of Medicare Payments for Target	\$390,208	\$343,039	\$303,512	\$446,947

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Dakota

145

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	49	39	56	52
	All medical DRGs in MDC 08 Discharges	176	139	172	178
	Proportion of Target to Denominator Discharges	27.8%	28.1%	32.6%	29.2%
	Average Length of Stay for Target	5.3	4.9	4.3	3.8
	Average Medicare Payment for Target	\$7,333	\$6,403	\$7,003	\$7,121
	Sum of Medicare Payments for Target	\$359,320	\$249,698	\$392,160	\$370,277
Spinal Fusion	Claims with spinal fusion procedure codes	145	123	132	123
	Claims with spinal procedure codes	273	251	277	274
	Proportion of Target to Denominator Discharges	53.1%	49.0%	47.7%	44.9%
	Average Length of Stay for Target	3.4	3.2	4.0	3.8
	Average Medicare Payment for Target	\$26,168	\$26,373	\$27,224	\$28,381
	Sum of Medicare Payments for Target	\$3,794,386	\$3,243,887	\$3,593,512	\$3,490,921
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	133	116	149	107
	All Discharges with Transfer to SNF	1,113	1,060	1,169	1,054
	Proportion of Target to Denominator Discharges	11.9%	10.9%	12.7%	10.2%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,940	\$11,297	\$10,122	\$11,587
	Sum of Medicare Payments for Target	\$1,455,034	\$1,310,468	\$1,508,144	\$1,239,854
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	823	766	855	854
	All Discharges excl dc status 02,82,07,20	5,478	5,268	5,632	5,572
	Proportion of Target to Denominator Discharges	15.0%	14.5%	15.2%	15.3%
	Average Length of Stay for Target	5.6	6.6	5.7	5.6
	Average Medicare Payment for Target	\$14,089	\$14,685	\$13,429	\$13,285
	Sum of Medicare Payments for Target	\$11,595,461	\$11,248,848	\$11,481,552	\$11,345,137
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	708	661	715	715
	All Discharges excl dc status 02,82,07,20	5,478	5,268	5,632	5,572
	Proportion of Target to Denominator Discharges	12.9%	12.5%	12.7%	12.8%
	Average Length of Stay for Target	5.5	6.3	5.9	5.3
	Average Medicare Payment for Target	\$14,101	\$14,429	\$13,513	\$12,939
	Sum of Medicare Payments for Target	\$9,983,312	\$9,537,361	\$9,661,918	\$9,251,442

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report North Dakota

146

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	620	501	593	579
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,960	2,786	2,942	2,782
	<b>Proportion of Target to Denominator Discharges</b>	20.9%	18.0%	20.2%	20.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,968	\$7,573	\$7,563	\$7,507
	<b>Sum of Medicare Payments for Target</b>	\$4,940,035	\$3,793,933	\$4,484,968	\$4,346,444
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	204	201	210	214
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,628	1,532	1,550	1,539
	<b>Proportion of Target to Denominator Discharges</b>	12.5%	13.1%	13.5%	13.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$21,377	\$19,967	\$19,295	\$19,168
	<b>Sum of Medicare Payments for Target</b>	\$4,360,909	\$4,013,435	\$4,052,019	\$4,101,921
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	201	174	209	202
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,960	2,786	2,942	2,782
	<b>Proportion of Target to Denominator Discharges</b>	6.8%	6.2%	7.1%	7.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,929	\$7,166	\$6,918	\$7,043
	<b>Sum of Medicare Payments for Target</b>	\$1,392,762	\$1,246,957	\$1,445,855	\$1,422,778
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	319	277	250	317
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,628	1,532	1,550	1,539
	<b>Proportion of Target to Denominator Discharges</b>	19.6%	18.1%	16.1%	20.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$18,973	\$21,707	\$22,814	\$21,336
	<b>Sum of Medicare Payments for Target</b>	\$6,052,480	\$6,012,851	\$5,703,583	\$6,763,436

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Nebraska, 24 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	254	265	294	317
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	284	293	324	347
	Proportion of Target to Denominator Discharges	89.4%	90.4%	90.7%	91.4%
	Average Length of Stay for Target	4.6	4.4	4.1	4.6
	Average Medicare Payment for Target	\$9,622	\$9,503	\$8,696	\$9,374
	Sum of Medicare Payments for Target	\$2,444,043	\$2,518,182	\$2,556,730	\$2,971,639
Respiratory Infections	DRGs 177, 178	795	629	254	425
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	999	881	459	596
	Proportion of Target to Denominator Discharges	79.6%	71.4%	55.3%	71.3%
	Average Length of Stay for Target	7.0	7.7	4.9	5.7
	Average Medicare Payment for Target	\$16,166	\$16,185	\$12,913	\$13,290
	Sum of Medicare Payments for Target	\$12,851,718	\$10,180,446	\$3,279,930	\$5,648,339
Simple Pneumonia	DRGs 193, 194	183	234	191	150
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	295	328	304	272
	Proportion of Target to Denominator Discharges	62.0%	71.3%	62.8%	55.1%
	Average Length of Stay for Target	4.6	4.6	4.4	4.9
	Average Medicare Payment for Target	\$7,677	\$7,756	\$7,938	\$7,597
	Sum of Medicare Payments for Target	\$1,404,813	\$1,814,794	\$1,516,241	\$1,139,487
Septicemia	DRGs 870, 871, 872	1,112	1,058	1,067	1,009
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	1,606	1,572	1,500	1,427
	Proportion of Target to Denominator Discharges	69.2%	67.3%	71.1%	70.7%
	Average Length of Stay for Target	7.2	7.1	5.9	6.1
	Average Medicare Payment for Target	\$15,647	\$15,184	\$12,889	\$12,465
	Sum of Medicare Payments for Target	\$17,398,924	\$16,065,198	\$13,752,518	\$12,577,383
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	76	79	111	100
	All Discharges for Surgical DRGs	3,918	3,692	4,070	4,031
	Proportion of Target to Denominator Discharges	1.9%	2.1%	2.7%	2.5%
	Average Length of Stay for Target	9.0	9.6	10.3	7.9
	Average Medicare Payment for Target	\$25,431	\$24,998	\$26,234	\$24,402
	Sum of Medicare Payments for Target	\$1,932,736	\$1,974,835	\$2,912,013	\$2,440,236

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nebraska

148

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	5,549	5,193	5,090	5,040
	All Discharges for Medical DRGs w/ or w/o CC or MCC	6,846	6,357	6,551	6,481
	Proportion of Target to Denominator Discharges	81.1%	81.7%	77.7%	77.8%
	Average Length of Stay for Target	5.6	6.0	5.1	5.3
	Average Medicare Payment for Target	\$11,329	\$11,426	\$10,169	\$10,395
	Sum of Medicare Payments for Target	\$62,864,896	\$59,334,319	\$51,759,781	\$52,389,239
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	2,396	2,216	2,438	2,357
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	3,666	3,476	3,844	3,803
	Proportion of Target to Denominator Discharges	65.4%	63.8%	63.4%	62.0%
	Average Length of Stay for Target	7.4	7.9	7.2	7.4
	Average Medicare Payment for Target	\$27,196	\$27,434	\$26,323	\$26,202
	Sum of Medicare Payments for Target	\$65,161,148	\$60,792,876	\$64,175,291	\$61,757,868
Single CC or MCC	Discharges with one CC or MCC coded on the claim	3,443	3,127	3,249	3,332
	All Discharges with one or more CC or MCC coded on the claim	7,926	7,394	7,522	7,394
	Proportion of Target to Denominator Discharges	43.4%	42.3%	43.2%	45.1%
	Average Length of Stay for Target	4.9	5.1	4.9	4.9
	Average Medicare Payment for Target	\$15,504	\$15,046	\$15,520	\$15,026
	Sum of Medicare Payments for Target	\$53,380,017	\$47,048,752	\$50,425,285	\$50,067,901
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	207	191	256	220
	All Discharges with one or more MCCs including severe malnutrition	540	561	585	532
	Proportion of Target to Denominator Discharges	38.3%	34.0%	43.8%	41.4%
	Average Length of Stay for Target	6.5	7.0	6.7	6.5
	Average Medicare Payment for Target	\$14,981	\$13,785	\$16,912	\$14,737
	Sum of Medicare Payments for Target	\$3,101,144	\$2,632,984	\$4,329,390	\$3,242,201
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	161	128	76	52
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	1,279	1,199	1,159	1,088
	Proportion of Target to Denominator Discharges	12.6%	10.7%	6.6%	4.8%
	Average Length of Stay for Target	23.5	21.2	21.2	20.8
	Average Medicare Payment for Target	\$76,931	\$65,591	\$70,261	\$71,889
	Sum of Medicare Payments for Target	\$12,385,846	\$8,395,594	\$5,339,824	\$3,738,205

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nebraska

149

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	181	162	138	177
	All DRGs 246-249 Discharges + outpatient claims	445	366	371	398
	Proportion of Target to Denominator Discharges	40.7%	44.3%	37.2%	44.5%
	Average Length of Stay for Target	3.2	3.0	2.7	2.9
	Average Medicare Payment for Target	\$16,737	\$16,997	\$15,982	\$16,324
	Sum of Medicare Payments for Target	\$3,029,480	\$2,753,591	\$2,205,466	\$2,889,350
Total Knee Replacement	Inpatient discharges with knee replacement px codes	120	98	163	155
	Inpatient discharges + outpatient claims with knee replacement px codes	796	857	807	838
	Proportion of Target to Denominator Discharges	15.1%	11.4%	20.2%	18.5%
	Average Medicare Payment for Target	\$16,305	\$16,882	\$16,081	\$16,360
	Sum of Medicare Payments for Target	\$1,956,558	\$1,654,414	\$2,621,282	\$2,535,802
Syncope	DRG 312	56	52	58	66
	All medical DRGs in MDC 05 Discharges	1,255	1,181	1,300	1,253
	Proportion of Target to Denominator Discharges	4.5%	4.4%	4.5%	5.3%
	Average Length of Stay for Target	3.1	2.3	3.1	2.8
	Average Medicare Payment for Target	\$5,425	\$5,226	\$5,298	\$5,213
	Sum of Medicare Payments for Target	\$303,795	\$271,761	\$307,274	\$344,035
Other Circulatory System Diagnoses	DRGs 314, 315, 316	99	72	76	81
	All medical DRGs in MDC 05 Discharges	1,255	1,181	1,300	1,253
	Proportion of Target to Denominator Discharges	7.9%	6.1%	5.8%	6.5%
	Average Length of Stay for Target	5.0	7.6	6.0	4.0
	Average Medicare Payment for Target	\$12,014	\$12,825	\$12,630	\$11,027
	Sum of Medicare Payments for Target	\$1,189,402	\$923,427	\$959,905	\$893,219
Other Digestive System Diagnoses	DRGs 393, 394, 395	95	98	107	88
	All medical DRGs in MDC 06 Discharges	715	687	724	723
	Proportion of Target to Denominator Discharges	13.3%	14.3%	14.8%	12.2%
	Average Length of Stay for Target	4.3	4.5	4.8	4.5
	Average Medicare Payment for Target	\$8,474	\$9,335	\$8,353	\$8,423
	Sum of Medicare Payments for Target	\$805,004	\$914,788	\$893,728	\$741,251

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nebraska

150

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	120	64	99	100
	All medical DRGs in MDC 08 Discharges	320	248	313	319
	Proportion of Target to Denominator Discharges	37.5%	25.8%	31.6%	31.3%
	Average Length of Stay for Target	5.1	5.2	4.9	5.1
	Average Medicare Payment for Target	\$7,752	\$7,769	\$7,648	\$8,055
	Sum of Medicare Payments for Target	\$930,232	\$497,194	\$757,103	\$805,524
Spinal Fusion	Claims with spinal fusion procedure codes	282	312	348	314
	Claims with spinal procedure codes	647	712	722	712
	Proportion of Target to Denominator Discharges	43.6%	43.8%	48.2%	44.1%
	Average Length of Stay for Target	3.5	3.3	3.7	4.0
	Average Medicare Payment for Target	\$31,809	\$28,052	\$29,503	\$29,711
	Sum of Medicare Payments for Target	\$8,970,045	\$8,752,287	\$10,267,161	\$9,329,403
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	292	235	349	345
	All Discharges with Transfer to SNF	2,360	2,178	2,392	2,326
	Proportion of Target to Denominator Discharges	12.4%	10.8%	14.6%	14.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,306	\$10,702	\$10,768	\$10,259
	Sum of Medicare Payments for Target	\$3,301,372	\$2,514,875	\$3,758,108	\$3,539,486
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,488	1,431	1,503	1,457
	All Discharges excl dc status 02,82,07,20	10,488	9,803	10,526	10,423
	Proportion of Target to Denominator Discharges	14.2%	14.6%	14.3%	14.0%
	Average Length of Stay for Target	6.0	6.2	5.8	5.9
	Average Medicare Payment for Target	\$15,230	\$14,990	\$15,371	\$14,372
	Sum of Medicare Payments for Target	\$22,662,849	\$21,450,980	\$23,103,167	\$20,939,605
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,120	1,081	1,104	1,097
	All Discharges excl dc status 02,82,07,20	10,488	9,803	10,526	10,423
	Proportion of Target to Denominator Discharges	10.7%	11.0%	10.5%	10.5%
	Average Length of Stay for Target	6.1	6.1	5.9	5.9
	Average Medicare Payment for Target	\$15,380	\$15,088	\$15,536	\$14,414
	Sum of Medicare Payments for Target	\$17,225,576	\$16,310,167	\$17,151,632	\$15,812,599

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nebraska

151

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,137	991	1,075	1,047
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,009	5,525	5,787	5,700
	<b>Proportion of Target to Denominator Discharges</b>	18.9%	17.9%	18.6%	18.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,819	\$7,900	\$7,356	\$7,554
	<b>Sum of Medicare Payments for Target</b>	\$8,890,453	\$7,828,821	\$7,907,940	\$7,909,081
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	503	469	529	591
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,460	3,254	3,655	3,623
	<b>Proportion of Target to Denominator Discharges</b>	14.5%	14.4%	14.5%	16.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$19,460	\$20,504	\$18,401	\$18,524
	<b>Sum of Medicare Payments for Target</b>	\$9,788,355	\$9,616,313	\$9,734,270	\$10,947,543
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	537	505	585	521
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,009	5,525	5,787	5,700
	<b>Proportion of Target to Denominator Discharges</b>	8.9%	9.1%	10.1%	9.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,592	\$6,296	\$6,258	\$6,527
	<b>Sum of Medicare Payments for Target</b>	\$3,540,002	\$3,179,496	\$3,660,785	\$3,400,581
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	737	695	773	834
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,460	3,254	3,655	3,623
	<b>Proportion of Target to Denominator Discharges</b>	21.3%	21.4%	21.1%	23.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$19,891	\$20,703	\$20,323	\$20,063
	<b>Sum of Medicare Payments for Target</b>	\$14,660,024	\$14,388,293	\$15,709,954	\$16,732,188

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - New Hampshire, 13 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	255	208	224	241
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	307	238	259	287
	Proportion of Target to Denominator Discharges	83.1%	87.4%	86.5%	84.0%
	Average Length of Stay for Target	4.7	5.4	4.3	4.4
	Average Medicare Payment for Target	\$10,549	\$11,484	\$10,203	\$9,902
	Sum of Medicare Payments for Target	\$2,690,016	\$2,388,652	\$2,285,504	\$2,386,422
Respiratory Infections	DRGs 177, 178	664	480	303	322
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	855	665	527	533
	Proportion of Target to Denominator Discharges	77.7%	72.2%	57.5%	60.4%
	Average Length of Stay for Target	6.7	7.9	6.8	5.6
	Average Medicare Payment for Target	\$15,973	\$16,477	\$13,833	\$14,019
	Sum of Medicare Payments for Target	\$10,605,913	\$7,908,751	\$4,191,448	\$4,514,172
Simple Pneumonia	DRGs 193, 194	168	168	211	185
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	282	270	309	270
	Proportion of Target to Denominator Discharges	59.6%	62.2%	68.3%	68.5%
	Average Length of Stay for Target	3.8	4.2	4.6	4.4
	Average Medicare Payment for Target	\$8,272	\$8,360	\$8,019	\$8,134
	Sum of Medicare Payments for Target	\$1,389,687	\$1,404,529	\$1,692,037	\$1,504,867
Septicemia	DRGs 870, 871, 872	765	630	759	698
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	1,222	1,044	1,197	1,156
	Proportion of Target to Denominator Discharges	62.6%	60.3%	63.4%	60.4%
	Average Length of Stay for Target	7.0	7.7	6.2	6.8
	Average Medicare Payment for Target	\$16,312	\$16,052	\$14,401	\$12,981
	Sum of Medicare Payments for Target	\$12,479,005	\$10,113,056	\$10,930,178	\$9,060,519
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	56	63	52	54
	All Discharges for Surgical DRGs	2,243	2,223	2,403	2,442
	Proportion of Target to Denominator Discharges	2.5%	2.8%	2.2%	2.2%
	Average Length of Stay for Target	10.8	18.7	11.3	10.2
	Average Medicare Payment for Target	\$31,241	\$33,620	\$30,003	\$28,955
	Sum of Medicare Payments for Target	\$1,749,502	\$2,118,044	\$1,560,157	\$1,563,570

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Hampshire

153

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	4,643	4,196	4,333	4,316
	All Discharges for Medical DRGs w/ or w/o CC or MCC	5,887	5,294	5,660	5,733
	Proportion of Target to Denominator Discharges	78.9%	79.3%	76.6%	75.3%
	Average Length of Stay for Target	5.8	6.2	5.7	5.6
	Average Medicare Payment for Target	\$11,850	\$11,757	\$11,099	\$10,702
	Sum of Medicare Payments for Target	\$55,017,635	\$49,330,524	\$48,093,183	\$46,189,237
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,338	1,358	1,466	1,452
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	2,096	2,062	2,259	2,292
	Proportion of Target to Denominator Discharges	63.8%	65.9%	64.9%	63.4%
	Average Length of Stay for Target	8.5	9.1	8.0	8.6
	Average Medicare Payment for Target	\$31,226	\$31,602	\$30,675	\$30,419
	Sum of Medicare Payments for Target	\$41,779,825	\$42,915,955	\$44,969,240	\$44,168,772
Single CC or MCC	Discharges with one CC or MCC coded on the claim	2,738	2,678	2,748	2,720
	All Discharges with one or more CC or MCC coded on the claim	5,968	5,546	5,796	5,766
	Proportion of Target to Denominator Discharges	45.9%	48.3%	47.4%	47.2%
	Average Length of Stay for Target	5.2	5.3	5.0	5.1
	Average Medicare Payment for Target	\$15,521	\$15,585	\$15,621	\$15,087
	Sum of Medicare Payments for Target	\$42,495,303	\$41,735,741	\$42,927,192	\$41,037,701
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	132	160	124	145
	All Discharges with one or more MCCs including severe malnutrition	398	406	342	367
	Proportion of Target to Denominator Discharges	33.2%	39.4%	36.3%	39.5%
	Average Length of Stay for Target	6.8	6.7	7.1	7.7
	Average Medicare Payment for Target	\$15,355	\$17,218	\$18,258	\$15,453
	Sum of Medicare Payments for Target	\$2,026,826	\$2,754,858	\$2,263,953	\$2,240,697
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	109	90	53	30
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	876	742	829	782
	Proportion of Target to Denominator Discharges	12.4%	12.1%	6.4%	3.8%
	Average Length of Stay for Target	23.5	31.8	27.1	27.6
	Average Medicare Payment for Target	\$88,813	\$101,278	\$75,323	\$76,563
	Sum of Medicare Payments for Target	\$9,680,620	\$9,114,983	\$3,992,106	\$2,296,889

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Hampshire

154

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	180	154	156	147
	All DRGs 246-249 Discharges + outpatient claims	265	250	235	237
	Proportion of Target to Denominator Discharges	67.9%	61.6%	66.4%	62.0%
	Average Length of Stay for Target	3.2	3.8	2.9	3.8
	Average Medicare Payment for Target	\$20,004	\$21,159	\$19,834	\$20,058
	Sum of Medicare Payments for Target	\$3,600,783	\$3,258,427	\$3,094,122	\$2,948,493
Total Knee Replacement	Inpatient discharges with knee replacement px codes	45	43	64	64
	Inpatient discharges + outpatient claims with knee replacement px codes	311	264	375	373
	Proportion of Target to Denominator Discharges	14.5%	16.3%	17.1%	17.2%
	Average Medicare Payment for Target	\$18,779	\$21,750	\$20,804	\$18,167
	Sum of Medicare Payments for Target	\$845,043	\$935,262	\$1,331,438	\$1,162,669
Syncope	DRG 312	62	61	60	88
	All medical DRGs in MDC 05 Discharges	1,247	1,208	1,333	1,380
	Proportion of Target to Denominator Discharges	5.0%	5.0%	4.5%	6.4%
	Average Length of Stay for Target	2.8	4.1	2.5	3.6
	Average Medicare Payment for Target	\$5,662	\$6,647	\$5,481	\$5,339
	Sum of Medicare Payments for Target	\$351,068	\$405,464	\$328,889	\$469,811
Other Circulatory System Diagnoses	DRGs 314, 315, 316	60	53	61	71
	All medical DRGs in MDC 05 Discharges	1,247	1,208	1,333	1,380
	Proportion of Target to Denominator Discharges	4.8%	4.4%	4.6%	5.1%
	Average Length of Stay for Target	6.1	4.8	5.9	6.3
	Average Medicare Payment for Target	\$14,624	\$13,225	\$13,690	\$11,794
	Sum of Medicare Payments for Target	\$877,415	\$700,907	\$835,118	\$837,362
Other Digestive System Diagnoses	DRGs 393, 394, 395	72	76	83	89
	All medical DRGs in MDC 06 Discharges	536	555	568	626
	Proportion of Target to Denominator Discharges	13.4%	13.7%	14.6%	14.2%
	Average Length of Stay for Target	4.4	5.3	4.4	4.4
	Average Medicare Payment for Target	\$9,188	\$9,642	\$8,599	\$9,033
	Sum of Medicare Payments for Target	\$661,526	\$732,790	\$713,677	\$803,924

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Hampshire

155

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	72	61	75	79
	All medical DRGs in MDC 08 Discharges	254	241	273	279
	Proportion of Target to Denominator Discharges	28.3%	25.3%	27.5%	28.3%
	Average Length of Stay for Target	4.3	4.6	4.5	4.3
	Average Medicare Payment for Target	\$7,489	\$8,501	\$7,280	\$7,463
	Sum of Medicare Payments for Target	\$539,188	\$518,554	\$546,005	\$589,589
Spinal Fusion	Claims with spinal fusion procedure codes	133	104	117	117
	Claims with spinal procedure codes	313	276	314	296
	Proportion of Target to Denominator Discharges	42.5%	37.7%	37.3%	39.5%
	Average Length of Stay for Target	3.9	3.4	3.7	3.6
	Average Medicare Payment for Target	\$31,087	\$28,852	\$29,978	\$30,211
	Sum of Medicare Payments for Target	\$4,134,612	\$3,000,647	\$3,507,451	\$3,534,730
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	148	185	168	169
	All Discharges with Transfer to SNF	1,295	1,408	1,452	1,413
	Proportion of Target to Denominator Discharges	11.4%	13.1%	11.6%	12.0%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,086	\$10,436	\$9,993	\$9,271
	Sum of Medicare Payments for Target	\$1,492,658	\$1,930,677	\$1,678,776	\$1,566,842
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,242	1,097	1,239	1,262
	All Discharges excl dc status 02,82,07,20	7,996	7,319	7,955	8,092
	Proportion of Target to Denominator Discharges	15.5%	15.0%	15.6%	15.6%
	Average Length of Stay for Target	6.4	6.9	6.4	6.0
	Average Medicare Payment for Target	\$16,066	\$16,546	\$15,381	\$14,519
	Sum of Medicare Payments for Target	\$19,954,025	\$18,151,429	\$19,057,567	\$18,323,190
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	937	851	959	934
	All Discharges excl dc status 02,82,07,20	7,996	7,319	7,955	8,092
	Proportion of Target to Denominator Discharges	11.7%	11.6%	12.1%	11.5%
	Average Length of Stay for Target	6.1	6.5	6.1	5.8
	Average Medicare Payment for Target	\$15,653	\$16,343	\$15,278	\$14,476
	Sum of Medicare Payments for Target	\$14,666,743	\$13,908,255	\$14,651,185	\$13,520,619

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Hampshire

156

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	989	939	1,146	1,200
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,445	4,857	5,276	5,357
	<b>Proportion of Target to Denominator Discharges</b>	18.2%	19.3%	21.7%	22.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,124	\$7,746	\$7,515	\$7,463
	<b>Sum of Medicare Payments for Target</b>	\$8,035,127	\$7,273,160	\$8,612,197	\$8,955,315
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	302	289	342	328
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,059	2,064	2,184	2,210
	<b>Proportion of Target to Denominator Discharges</b>	14.7%	14.0%	15.7%	14.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$20,631	\$20,333	\$21,070	\$20,103
	<b>Sum of Medicare Payments for Target</b>	\$6,230,637	\$5,876,224	\$7,205,921	\$6,593,796
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	761	515	688	689
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	5,445	4,857	5,276	5,357
	<b>Proportion of Target to Denominator Discharges</b>	14.0%	10.6%	13.0%	12.9%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,073	\$7,022	\$6,890	\$6,552
	<b>Sum of Medicare Payments for Target</b>	\$5,382,338	\$3,616,254	\$4,740,083	\$4,514,561
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	365	357	430	412
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,059	2,064	2,184	2,210
	<b>Proportion of Target to Denominator Discharges</b>	17.7%	17.3%	19.7%	18.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$24,237	\$23,829	\$23,365	\$24,670
	<b>Sum of Medicare Payments for Target</b>	\$8,846,552	\$8,506,934	\$10,046,984	\$10,164,006

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - New Jersey, 63 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,374	1,307	1,388	1,332
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,646	1,573	1,651	1,623
	Proportion of Target to Denominator Discharges	83.5%	83.1%	84.1%	82.1%
	Average Length of Stay for Target	4.9	5.0	4.8	5.1
	Average Medicare Payment for Target	\$11,655	\$12,032	\$11,519	\$11,468
	Sum of Medicare Payments for Target	\$16,013,537	\$15,725,564	\$15,987,919	\$15,275,049
Respiratory Infections	DRGs 177, 178	2,904	4,596	1,965	2,451
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	4,306	5,759	3,478	3,741
	Proportion of Target to Denominator Discharges	67.4%	79.8%	56.5%	65.5%
	Average Length of Stay for Target	6.5	6.9	5.7	5.6
	Average Medicare Payment for Target	\$17,105	\$17,718	\$14,915	\$15,051
	Sum of Medicare Payments for Target	\$49,671,751	\$81,432,865	\$29,308,786	\$36,889,343
Simple Pneumonia	DRGs 193, 194	1,266	995	1,342	1,092
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,371	1,853	2,490	1,954
	Proportion of Target to Denominator Discharges	53.4%	53.7%	53.9%	55.9%
	Average Length of Stay for Target	5.4	5.9	5.3	5.4
	Average Medicare Payment for Target	\$9,058	\$9,052	\$9,009	\$9,091
	Sum of Medicare Payments for Target	\$11,466,796	\$9,007,060	\$12,090,395	\$9,926,979
Septicemia	DRGs 870, 871, 872	5,357	5,483	4,892	5,179
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	8,889	8,653	8,282	8,365
	Proportion of Target to Denominator Discharges	60.3%	63.4%	59.1%	61.9%
	Average Length of Stay for Target	7.4	8.1	7.2	7.3
	Average Medicare Payment for Target	\$17,290	\$19,248	\$16,404	\$16,467
	Sum of Medicare Payments for Target	\$92,624,741	\$105,535,009	\$80,246,457	\$85,282,483
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	429	405	391	421
	All Discharges for Surgical DRGs	13,079	12,110	12,594	12,458
	Proportion of Target to Denominator Discharges	3.3%	3.3%	3.1%	3.4%
	Average Length of Stay for Target	10.6	10.8	9.6	10.2
	Average Medicare Payment for Target	\$31,521	\$31,546	\$28,980	\$28,524
	Sum of Medicare Payments for Target	\$13,522,402	\$12,776,099	\$11,331,130	\$12,008,424

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Jersey

158

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	30,784	30,306	29,155	29,185
	All Discharges for Medical DRGs w/ or w/o CC or MCC	40,460	38,000	38,246	38,579
	Proportion of Target to Denominator Discharges	76.1%	79.8%	76.2%	75.6%
	Average Length of Stay for Target	5.9	6.2	5.7	5.9
	Average Medicare Payment for Target	\$12,426	\$13,255	\$11,927	\$12,093
	Sum of Medicare Payments for Target	\$382,509,979	\$401,718,660	\$347,744,661	\$352,935,687
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	8,066	7,573	7,776	7,765
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	12,064	11,137	11,652	11,552
	Proportion of Target to Denominator Discharges	66.9%	68.0%	66.7%	67.2%
	Average Length of Stay for Target	8.6	8.7	8.6	8.7
	Average Medicare Payment for Target	\$30,599	\$30,436	\$30,207	\$29,580
	Sum of Medicare Payments for Target	\$246,807,905	\$230,488,836	\$234,891,652	\$229,691,793
Single CC or MCC	Discharges with one CC or MCC coded on the claim	18,124	17,018	17,299	17,270
	All Discharges with one or more CC or MCC coded on the claim	38,723	37,725	36,893	36,903
	Proportion of Target to Denominator Discharges	46.8%	45.1%	46.9%	46.8%
	Average Length of Stay for Target	5.4	5.5	5.2	5.3
	Average Medicare Payment for Target	\$15,538	\$15,876	\$15,108	\$15,012
	Sum of Medicare Payments for Target	\$281,619,498	\$270,172,386	\$261,345,261	\$259,248,879
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	948	758	935	952
	All Discharges with one or more MCCs including severe malnutrition	2,546	2,391	2,519	2,649
	Proportion of Target to Denominator Discharges	37.2%	31.7%	37.1%	35.9%
	Average Length of Stay for Target	7.1	6.8	6.8	6.8
	Average Medicare Payment for Target	\$16,202	\$16,266	\$15,881	\$15,580
	Sum of Medicare Payments for Target	\$15,359,292	\$12,329,942	\$14,848,998	\$14,832,174
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	594	880	472	494
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	6,020	6,375	5,376	5,662
	Proportion of Target to Denominator Discharges	9.9%	13.8%	8.8%	8.7%
	Average Length of Stay for Target	20.0	21.7	20.6	23.1
	Average Medicare Payment for Target	\$76,570	\$78,726	\$79,354	\$82,027
	Sum of Medicare Payments for Target	\$45,482,640	\$69,278,618	\$37,454,958	\$40,521,447

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Jersey

159

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	736	638	659	652
	All DRGs 246-249 Discharges + outpatient claims	1,663	1,476	1,592	1,556
	Proportion of Target to Denominator Discharges	44.3%	43.2%	41.4%	41.9%
	Average Length of Stay for Target	4.0	4.3	4.6	4.1
	Average Medicare Payment for Target	\$21,373	\$21,030	\$21,750	\$20,827
	Sum of Medicare Payments for Target	\$15,730,678	\$13,417,382	\$14,333,167	\$13,579,143
Total Knee Replacement	Inpatient discharges with knee replacement px codes	451	450	458	393
	Inpatient discharges + outpatient claims with knee replacement px codes	1,706	1,711	1,795	1,640
	Proportion of Target to Denominator Discharges	26.4%	26.3%	25.5%	24.0%
	Average Medicare Payment for Target	\$17,474	\$18,380	\$18,199	\$17,512
	Sum of Medicare Payments for Target	\$7,880,933	\$8,271,044	\$8,335,198	\$6,882,351
Syncope	DRG 312	480	427	471	493
	All medical DRGs in MDC 05 Discharges	8,388	7,348	7,999	7,510
	Proportion of Target to Denominator Discharges	5.7%	5.8%	5.9%	6.6%
	Average Length of Stay for Target	3.3	3.2	3.2	3.4
	Average Medicare Payment for Target	\$6,521	\$6,435	\$6,373	\$6,417
	Sum of Medicare Payments for Target	\$3,129,933	\$2,747,606	\$3,001,864	\$3,163,510
Other Circulatory System Diagnoses	DRGs 314, 315, 316	412	361	389	376
	All medical DRGs in MDC 05 Discharges	8,388	7,348	7,999	7,510
	Proportion of Target to Denominator Discharges	4.9%	4.9%	4.9%	5.0%
	Average Length of Stay for Target	6.4	6.4	6.2	6.0
	Average Medicare Payment for Target	\$14,379	\$14,776	\$13,837	\$13,972
	Sum of Medicare Payments for Target	\$5,924,036	\$5,333,995	\$5,382,574	\$5,253,451
Other Digestive System Diagnoses	DRGs 393, 394, 395	601	522	576	547
	All medical DRGs in MDC 06 Discharges	4,542	3,854	4,304	4,363
	Proportion of Target to Denominator Discharges	13.2%	13.5%	13.4%	12.5%
	Average Length of Stay for Target	5.4	5.0	4.9	5.5
	Average Medicare Payment for Target	\$10,364	\$9,905	\$10,079	\$9,932
	Sum of Medicare Payments for Target	\$6,228,640	\$5,170,655	\$5,805,418	\$5,432,837

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report New Jersey

160

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	568	460	547	585
	All medical DRGs in MDC 08 Discharges	1,864	1,607	1,892	1,911
	Proportion of Target to Denominator Discharges	30.5%	28.6%	28.9%	30.6%
	Average Length of Stay for Target	4.2	4.3	4.1	4.2
	Average Medicare Payment for Target	\$8,310	\$8,797	\$8,227	\$8,315
	Sum of Medicare Payments for Target	\$4,720,244	\$4,046,446	\$4,500,404	\$4,864,111
Spinal Fusion	Claims with spinal fusion procedure codes	576	475	550	536
	Claims with spinal procedure codes	1,192	1,089	1,198	1,213
	Proportion of Target to Denominator Discharges	48.3%	43.6%	45.9%	44.2%
	Average Length of Stay for Target	4.1	4.8	4.2	4.5
	Average Medicare Payment for Target	\$32,261	\$32,779	\$32,715	\$32,355
	Sum of Medicare Payments for Target	\$18,582,065	\$15,569,929	\$17,993,190	\$17,342,080
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,625	1,547	1,696	1,711
	All Discharges with Transfer to SNF	13,648	13,376	13,374	13,717
	Proportion of Target to Denominator Discharges	11.9%	11.6%	12.7%	12.5%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,018	\$11,170	\$10,941	\$11,056
	Sum of Medicare Payments for Target	\$17,903,564	\$17,280,590	\$18,555,177	\$18,917,314
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	9,803	9,163	9,111	9,431
	All Discharges excl dc status 02,82,07,20	52,365	48,772	50,123	50,453
	Proportion of Target to Denominator Discharges	18.7%	18.8%	18.2%	18.7%
	Average Length of Stay for Target	6.8	7.0	6.7	6.9
	Average Medicare Payment for Target	\$15,924	\$16,767	\$15,646	\$15,904
	Sum of Medicare Payments for Target	\$156,101,789	\$153,635,858	\$142,546,771	\$149,991,019
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	7,225	6,836	6,780	6,956
	All Discharges excl dc status 02,82,07,20	52,365	48,772	50,123	50,453
	Proportion of Target to Denominator Discharges	13.8%	14.0%	13.5%	13.8%
	Average Length of Stay for Target	6.8	6.9	6.6	6.9
	Average Medicare Payment for Target	\$15,785	\$16,543	\$15,512	\$15,827
	Sum of Medicare Payments for Target	\$114,043,834	\$113,086,354	\$105,168,468	\$110,093,983

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Jersey

161

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	5,773	4,859	5,537	5,405
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	35,976	33,801	34,011	34,074
	Proportion of Target to Denominator Discharges	16.0%	14.4%	16.3%	15.9%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$8,346	\$8,711	\$8,130	\$8,099
	Sum of Medicare Payments for Target	\$48,178,884	\$42,328,482	\$45,017,337	\$43,775,177
Two-Day Stays for Surgical DRGs	Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	1,411	1,202	1,288	1,242
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	11,318	10,345	10,684	10,600
	Proportion of Target to Denominator Discharges	12.5%	11.6%	12.1%	11.7%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$21,768	\$20,285	\$20,444	\$20,168
	Sum of Medicare Payments for Target	\$30,713,970	\$24,381,979	\$26,331,646	\$25,048,121
One-Day Stays for Medical DRGs	One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	2,110	1,917	2,092	2,103
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	35,976	33,801	34,011	34,074
	Proportion of Target to Denominator Discharges	5.9%	5.7%	6.2%	6.2%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$7,949	\$7,966	\$7,569	\$7,489
	Sum of Medicare Payments for Target	\$16,772,236	\$15,270,209	\$15,833,460	\$15,749,639
One-Day Stays for Surgical DRGs	One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	1,501	1,424	1,539	1,417
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	11,318	10,345	10,684	10,600
	Proportion of Target to Denominator Discharges	13.3%	13.8%	14.4%	13.4%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$24,974	\$24,318	\$24,451	\$24,977
	Sum of Medicare Payments for Target	\$37,486,470	\$34,628,951	\$37,630,316	\$35,392,695

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - New Mexico, 29 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	199	184	193	201
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	222	213	233	228
	Proportion of Target to Denominator Discharges	89.6%	86.4%	82.8%	88.2%
	Average Length of Stay for Target	4.4	4.9	4.6	5.1
	Average Medicare Payment for Target	\$11,854	\$12,257	\$11,424	\$10,749
	Sum of Medicare Payments for Target	\$2,359,041	\$2,255,199	\$2,204,912	\$2,160,482
Respiratory Infections	DRGs 177, 178	840	674	238	335
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,056	914	527	527
	Proportion of Target to Denominator Discharges	79.5%	73.7%	45.2%	63.6%
	Average Length of Stay for Target	6.9	7.0	5.3	4.8
	Average Medicare Payment for Target	\$18,032	\$17,936	\$14,959	\$15,445
	Sum of Medicare Payments for Target	\$15,146,511	\$12,088,936	\$3,560,166	\$5,173,962
Simple Pneumonia	DRGs 193, 194	200	214	262	163
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	286	305	378	252
	Proportion of Target to Denominator Discharges	69.9%	70.2%	69.3%	64.7%
	Average Length of Stay for Target	4.6	4.7	4.4	4.6
	Average Medicare Payment for Target	\$9,220	\$9,077	\$8,980	\$9,059
	Sum of Medicare Payments for Target	\$1,844,036	\$1,942,549	\$2,352,851	\$1,476,660
Septicemia	DRGs 870, 871, 872	998	972	945	836
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	1,468	1,422	1,407	1,201
	Proportion of Target to Denominator Discharges	68.0%	68.4%	67.2%	69.6%
	Average Length of Stay for Target	6.4	7.5	6.3	6.3
	Average Medicare Payment for Target	\$16,158	\$16,550	\$13,845	\$13,996
	Sum of Medicare Payments for Target	\$16,125,247	\$16,086,144	\$13,083,290	\$11,700,664
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	42	45	49	46
	All Discharges for Surgical DRGs	2,015	1,993	2,000	1,994
	Proportion of Target to Denominator Discharges	2.1%	2.3%	2.5%	2.3%
	Average Length of Stay for Target	10.4	8.5	7.7	8.4
	Average Medicare Payment for Target	\$28,117	\$24,542	\$26,826	\$28,051
	Sum of Medicare Payments for Target	\$1,180,900	\$1,104,377	\$1,314,458	\$1,290,350

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Mexico

163

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	4,487	4,571	3,970	3,800
	All Discharges for Medical DRGs w/ or w/o CC or MCC	5,459	5,482	5,074	4,867
	Proportion of Target to Denominator Discharges	82.2%	83.4%	78.2%	78.1%
	Average Length of Stay for Target	5.7	5.8	5.3	5.2
	Average Medicare Payment for Target	\$12,679	\$12,453	\$11,399	\$11,485
	Sum of Medicare Payments for Target	\$56,890,313	\$56,924,905	\$45,255,704	\$43,641,797
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,214	1,237	1,219	1,263
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,829	1,828	1,850	1,850
	Proportion of Target to Denominator Discharges	66.4%	67.7%	65.9%	68.3%
	Average Length of Stay for Target	7.4	7.9	8.0	7.3
	Average Medicare Payment for Target	\$26,017	\$26,273	\$30,298	\$26,420
	Sum of Medicare Payments for Target	\$31,585,080	\$32,500,069	\$36,933,683	\$33,368,988
Single CC or MCC	Discharges with one CC or MCC coded on the claim	2,571	2,523	2,284	2,299
	All Discharges with one or more CC or MCC coded on the claim	5,688	5,799	5,179	5,056
	Proportion of Target to Denominator Discharges	45.2%	43.5%	44.1%	45.5%
	Average Length of Stay for Target	5.1	5.0	4.8	4.8
	Average Medicare Payment for Target	\$15,538	\$15,070	\$14,578	\$14,744
	Sum of Medicare Payments for Target	\$39,947,651	\$38,022,784	\$33,295,434	\$33,896,462
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	97	104	104	105
	All Discharges with one or more MCCs including severe malnutrition	314	351	354	338
	Proportion of Target to Denominator Discharges	30.9%	29.6%	29.4%	31.1%
	Average Length of Stay for Target	5.7	7.9	7.0	7.2
	Average Medicare Payment for Target	\$15,147	\$14,843	\$15,571	\$15,270
	Sum of Medicare Payments for Target	\$1,469,280	\$1,543,680	\$1,619,347	\$1,603,401
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	158	133	71	44
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	1,167	1,122	1,027	889
	Proportion of Target to Denominator Discharges	13.5%	11.9%	6.9%	4.9%
	Average Length of Stay for Target	20.2	25.2	21.1	19.0
	Average Medicare Payment for Target	\$77,426	\$80,993	\$80,730	\$77,119
	Sum of Medicare Payments for Target	\$12,233,262	\$10,772,014	\$5,731,843	\$3,393,258

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Mexico

164

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	165	134	128	138
	All DRGs 246-249 Discharges + outpatient claims	297	257	233	263
	Proportion of Target to Denominator Discharges	55.6%	52.1%	54.9%	52.5%
	Average Length of Stay for Target	3.6	3.2	2.8	3.1
	Average Medicare Payment for Target	\$18,774	\$16,888	\$17,288	\$18,109
	Sum of Medicare Payments for Target	\$3,097,707	\$2,262,947	\$2,212,878	\$2,499,031
Total Knee Replacement	Inpatient discharges with knee replacement px codes	71	85	75	54
	Inpatient discharges + outpatient claims with knee replacement px codes	282	277	317	309
	Proportion of Target to Denominator Discharges	25.2%	30.7%	23.7%	17.5%
	Average Medicare Payment for Target	\$16,580	\$15,681	\$17,744	\$17,721
	Sum of Medicare Payments for Target	\$1,177,171	\$1,332,905	\$1,330,817	\$956,925
Syncope	DRG 312	34	43	48	37
	All medical DRGs in MDC 05 Discharges	823	929	941	834
	Proportion of Target to Denominator Discharges	4.1%	4.6%	5.1%	4.4%
	Average Length of Stay for Target	2.9	2.8	2.7	2.9
	Average Medicare Payment for Target	\$5,731	\$5,987	\$5,787	\$5,609
	Sum of Medicare Payments for Target	\$194,850	\$257,452	\$277,766	\$207,536
Other Circulatory System Diagnoses	DRGs 314, 315, 316	49	39	50	47
	All medical DRGs in MDC 05 Discharges	823	929	941	834
	Proportion of Target to Denominator Discharges	6.0%	4.2%	5.3%	5.6%
	Average Length of Stay for Target	5.0	7.3	4.9	4.9
	Average Medicare Payment for Target	\$12,716	\$17,086	\$13,411	\$13,410
	Sum of Medicare Payments for Target	\$623,099	\$666,358	\$670,543	\$630,252
Other Digestive System Diagnoses	DRGs 393, 394, 395	49	66	62	66
	All medical DRGs in MDC 06 Discharges	550	550	533	503
	Proportion of Target to Denominator Discharges	8.9%	12.0%	11.6%	13.1%
	Average Length of Stay for Target	4.0	4.9	4.5	4.2
	Average Medicare Payment for Target	\$8,618	\$8,493	\$9,499	\$9,029
	Sum of Medicare Payments for Target	\$422,281	\$560,550	\$588,936	\$595,891

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Mexico

165

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	29	49	40	39
	All medical DRGs in MDC 08 Discharges	175	202	189	191
	Proportion of Target to Denominator Discharges	16.6%	24.3%	21.2%	20.4%
	Average Length of Stay for Target	3.7	4.9	5.2	6.1
	Average Medicare Payment for Target	\$7,957	\$8,120	\$9,656	\$8,849
	Sum of Medicare Payments for Target	\$230,745	\$397,902	\$386,233	\$345,129
Spinal Fusion	Claims with spinal fusion procedure codes	76	91	89	106
	Claims with spinal procedure codes	216	201	225	230
	Proportion of Target to Denominator Discharges	35.2%	45.3%	39.6%	46.1%
	Average Length of Stay for Target	4.7	3.4	5.3	4.3
	Average Medicare Payment for Target	\$31,754	\$28,306	\$35,372	\$31,217
	Sum of Medicare Payments for Target	\$2,413,341	\$2,575,817	\$3,148,112	\$3,309,044
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	125	147	155	156
	All Discharges with Transfer to SNF	1,233	1,351	1,204	1,198
	Proportion of Target to Denominator Discharges	10.1%	10.9%	12.9%	13.0%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,319	\$10,553	\$10,556	\$12,040
	Sum of Medicare Payments for Target	\$1,414,933	\$1,551,255	\$1,636,120	\$1,878,255
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,054	1,096	997	964
	All Discharges excl dc status 02,82,07,20	7,074	7,092	6,917	6,656
	Proportion of Target to Denominator Discharges	14.9%	15.5%	14.4%	14.5%
	Average Length of Stay for Target	6.6	6.3	6.5	6.1
	Average Medicare Payment for Target	\$15,519	\$15,694	\$14,921	\$15,031
	Sum of Medicare Payments for Target	\$16,357,442	\$17,200,442	\$14,876,096	\$14,490,106
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	770	781	703	692
	All Discharges excl dc status 02,82,07,20	7,074	7,092	6,917	6,656
	Proportion of Target to Denominator Discharges	10.9%	11.0%	10.2%	10.4%
	Average Length of Stay for Target	6.7	6.2	6.6	6.3
	Average Medicare Payment for Target	\$15,588	\$15,679	\$14,974	\$15,353
	Sum of Medicare Payments for Target	\$12,003,062	\$12,245,496	\$10,526,953	\$10,624,034

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New Mexico

166

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	891	782	850	802
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	4,536	4,594	4,384	4,163
	<b>Proportion of Target to Denominator Discharges</b>	19.6%	17.0%	19.4%	19.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,459	\$9,151	\$8,283	\$8,530
	<b>Sum of Medicare Payments for Target</b>	\$8,427,923	\$7,156,311	\$7,040,699	\$6,840,890
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	249	234	235	246
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,646	1,618	1,639	1,655
	<b>Proportion of Target to Denominator Discharges</b>	15.1%	14.5%	14.3%	14.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$16,775	\$17,971	\$17,576	\$16,550
	<b>Sum of Medicare Payments for Target</b>	\$4,176,897	\$4,205,242	\$4,130,426	\$4,071,199
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	381	391	386	333
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	4,536	4,594	4,384	4,163
	<b>Proportion of Target to Denominator Discharges</b>	8.4%	8.5%	8.8%	8.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$8,598	\$8,447	\$8,041	\$7,834
	<b>Sum of Medicare Payments for Target</b>	\$3,275,920	\$3,302,939	\$3,103,939	\$2,608,580
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	163	192	231	192
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,646	1,618	1,639	1,655
	<b>Proportion of Target to Denominator Discharges</b>	9.9%	11.9%	14.1%	11.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$18,528	\$18,123	\$17,807	\$18,087
	<b>Sum of Medicare Payments for Target</b>	\$3,020,094	\$3,479,580	\$4,113,501	\$3,472,639

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Nevada, 22 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	339	381	367	360
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	406	438	453	441
	Proportion of Target to Denominator Discharges	83.5%	87.0%	81.0%	81.6%
	Average Length of Stay for Target	4.4	5.7	5.1	4.8
	Average Medicare Payment for Target	\$11,049	\$11,952	\$10,902	\$10,896
	Sum of Medicare Payments for Target	\$3,745,576	\$4,553,670	\$4,001,095	\$3,922,489
Respiratory Infections	DRGs 177, 178	810	1,170	498	528
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,185	1,580	923	843
	Proportion of Target to Denominator Discharges	68.4%	74.1%	54.0%	62.6%
	Average Length of Stay for Target	7.2	6.6	5.2	5.7
	Average Medicare Payment for Target	\$17,434	\$16,473	\$13,961	\$14,437
	Sum of Medicare Payments for Target	\$14,121,201	\$19,273,235	\$6,952,783	\$7,622,482
Simple Pneumonia	DRGs 193, 194	362	387	390	282
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	501	511	563	412
	Proportion of Target to Denominator Discharges	72.3%	75.7%	69.3%	68.4%
	Average Length of Stay for Target	4.4	4.6	4.4	4.0
	Average Medicare Payment for Target	\$9,489	\$9,185	\$8,693	\$8,843
	Sum of Medicare Payments for Target	\$3,435,057	\$3,554,442	\$3,390,270	\$2,493,597
Septicemia	DRGs 870, 871, 872	1,869	2,025	1,642	1,588
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	2,665	2,844	2,491	2,276
	Proportion of Target to Denominator Discharges	70.1%	71.2%	65.9%	69.8%
	Average Length of Stay for Target	7.8	8.0	7.1	7.2
	Average Medicare Payment for Target	\$17,576	\$17,571	\$15,216	\$15,275
	Sum of Medicare Payments for Target	\$32,849,100	\$35,580,986	\$24,984,864	\$24,256,293
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	96	106	118	96
	All Discharges for Surgical DRGs	3,778	3,629	3,687	3,747
	Proportion of Target to Denominator Discharges	2.5%	2.9%	3.2%	2.6%
	Average Length of Stay for Target	8.1	10.3	9.1	7.8
	Average Medicare Payment for Target	\$27,879	\$30,538	\$23,977	\$27,352
	Sum of Medicare Payments for Target	\$2,676,425	\$3,237,034	\$2,829,248	\$2,625,835

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Nevada

168

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	8,073	8,456	7,770	7,449
	All Discharges for Medical DRGs w/ or w/o CC or MCC	10,055	10,318	9,965	9,763
	Proportion of Target to Denominator Discharges	80.3%	82.0%	78.0%	76.3%
	Average Length of Stay for Target	5.5	5.8	5.5	5.3
	Average Medicare Payment for Target	\$12,039	\$12,415	\$11,223	\$11,167
	Sum of Medicare Payments for Target	\$97,188,296	\$104,982,514	\$87,200,024	\$83,185,095
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	2,386	2,344	2,357	2,364
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	3,451	3,337	3,396	3,411
	Proportion of Target to Denominator Discharges	69.1%	70.2%	69.4%	69.3%
	Average Length of Stay for Target	8.1	8.5	8.5	8.7
	Average Medicare Payment for Target	\$29,108	\$29,153	\$28,541	\$28,846
	Sum of Medicare Payments for Target	\$69,452,868	\$68,334,801	\$67,270,005	\$68,191,626
Single CC or MCC	Discharges with one CC or MCC coded on the claim	4,744	4,619	4,685	4,503
	All Discharges with one or more CC or MCC coded on the claim	10,449	10,778	10,119	9,797
	Proportion of Target to Denominator Discharges	45.4%	42.9%	46.3%	46.0%
	Average Length of Stay for Target	4.8	4.9	4.8	4.8
	Average Medicare Payment for Target	\$15,313	\$15,355	\$14,417	\$14,530
	Sum of Medicare Payments for Target	\$72,642,864	\$70,923,959	\$67,544,804	\$65,428,010
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	181	130	174	161
	All Discharges with one or more MCCs including severe malnutrition	547	506	527	456
	Proportion of Target to Denominator Discharges	33.1%	25.7%	33.0%	35.3%
	Average Length of Stay for Target	5.5	8.2	7.0	6.4
	Average Medicare Payment for Target	\$15,211	\$17,345	\$15,039	\$14,511
	Sum of Medicare Payments for Target	\$2,753,128	\$2,254,863	\$2,616,865	\$2,336,258
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	285	285	179	162
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,106	2,257	1,832	1,752
	Proportion of Target to Denominator Discharges	13.5%	12.6%	9.8%	9.2%
	Average Length of Stay for Target	22.7	21.4	28.5	27.3
	Average Medicare Payment for Target	\$69,321	\$67,933	\$67,898	\$83,729
	Sum of Medicare Payments for Target	\$19,756,491	\$19,361,010	\$12,153,756	\$13,564,153

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nevada

169

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	227	204	239	264
	All DRGs 246-249 Discharges + outpatient claims	421	367	442	452
	Proportion of Target to Denominator Discharges	53.9%	55.6%	54.1%	58.4%
	Average Length of Stay for Target	4.2	3.9	3.5	4.3
	Average Medicare Payment for Target	\$19,531	\$19,718	\$19,242	\$19,988
	Sum of Medicare Payments for Target	\$4,433,564	\$4,022,565	\$4,598,834	\$5,276,807
Total Knee Replacement	Inpatient discharges with knee replacement px codes	155	101	117	107
	Inpatient discharges + outpatient claims with knee replacement px codes	497	454	442	411
	Proportion of Target to Denominator Discharges	31.2%	22.2%	26.5%	26.0%
	Average Medicare Payment for Target	\$17,362	\$18,789	\$17,491	\$18,400
	Sum of Medicare Payments for Target	\$2,691,084	\$1,897,689	\$2,046,391	\$1,968,784
Syncope	DRG 312	105	107	136	139
	All medical DRGs in MDC 05 Discharges	1,932	1,931	1,942	1,896
	Proportion of Target to Denominator Discharges	5.4%	5.5%	7.0%	7.3%
	Average Length of Stay for Target	2.9	2.5	2.7	2.6
	Average Medicare Payment for Target	\$6,284	\$6,101	\$6,189	\$5,980
	Sum of Medicare Payments for Target	\$659,843	\$652,807	\$841,752	\$831,200
Other Circulatory System Diagnoses	DRGs 314, 315, 316	92	102	124	124
	All medical DRGs in MDC 05 Discharges	1,932	1,931	1,942	1,896
	Proportion of Target to Denominator Discharges	4.8%	5.3%	6.4%	6.5%
	Average Length of Stay for Target	4.9	4.9	5.4	4.9
	Average Medicare Payment for Target	\$13,632	\$13,270	\$12,550	\$12,302
	Sum of Medicare Payments for Target	\$1,254,106	\$1,353,540	\$1,556,260	\$1,525,453
Other Digestive System Diagnoses	DRGs 393, 394, 395	124	128	146	116
	All medical DRGs in MDC 06 Discharges	988	947	1,110	1,038
	Proportion of Target to Denominator Discharges	12.6%	13.5%	13.2%	11.2%
	Average Length of Stay for Target	4.2	5.2	4.4	5.1
	Average Medicare Payment for Target	\$9,743	\$10,137	\$9,111	\$8,876
	Sum of Medicare Payments for Target	\$1,208,164	\$1,297,553	\$1,330,179	\$1,029,614

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nevada

170

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	117	150	138	160
	All medical DRGs in MDC 08 Discharges	445	406	451	470
	Proportion of Target to Denominator Discharges	26.3%	36.9%	30.6%	34.0%
	Average Length of Stay for Target	4.0	3.6	3.9	3.6
	Average Medicare Payment for Target	\$8,173	\$7,746	\$7,908	\$7,467
	Sum of Medicare Payments for Target	\$956,207	\$1,161,960	\$1,091,322	\$1,194,770
Spinal Fusion	Claims with spinal fusion procedure codes	330	318	308	338
	Claims with spinal procedure codes	619	598	578	618
	Proportion of Target to Denominator Discharges	53.3%	53.2%	53.3%	54.7%
	Average Length of Stay for Target	3.8	3.8	3.3	4.0
	Average Medicare Payment for Target	\$31,568	\$31,869	\$30,556	\$32,672
	Sum of Medicare Payments for Target	\$10,417,538	\$10,134,331	\$9,411,140	\$11,042,987
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	191	186	213	225
	All Discharges with Transfer to SNF	1,868	1,949	1,829	1,884
	Proportion of Target to Denominator Discharges	10.2%	9.5%	11.6%	11.9%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,499	\$10,734	\$10,575	\$9,549
	Sum of Medicare Payments for Target	\$2,005,367	\$1,996,608	\$2,252,453	\$2,148,578
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	2,362	2,495	2,305	2,347
	All Discharges excl dc status 02,82,07,20	13,384	13,401	13,456	13,205
	Proportion of Target to Denominator Discharges	17.6%	18.6%	17.1%	17.8%
	Average Length of Stay for Target	6.2	6.4	6.5	5.9
	Average Medicare Payment for Target	\$15,408	\$15,613	\$15,179	\$14,528
	Sum of Medicare Payments for Target	\$36,392,712	\$38,955,431	\$34,986,758	\$34,096,663
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,512	1,587	1,449	1,522
	All Discharges excl dc status 02,82,07,20	13,384	13,401	13,456	13,205
	Proportion of Target to Denominator Discharges	11.3%	11.8%	10.8%	11.5%
	Average Length of Stay for Target	6.1	6.3	6.5	5.8
	Average Medicare Payment for Target	\$15,897	\$15,391	\$15,305	\$14,610
	Sum of Medicare Payments for Target	\$24,036,804	\$24,426,243	\$22,177,478	\$22,236,165

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Nevada

171

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	1,827	1,765	1,912	1,851
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	9,418	9,702	9,630	9,295
	Proportion of Target to Denominator Discharges	19.4%	18.2%	19.9%	19.9%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$8,688	\$8,706	\$8,061	\$8,037
	Sum of Medicare Payments for Target	\$15,872,336	\$15,365,654	\$15,412,851	\$14,876,266
Two-Day Stays for Surgical DRGs	Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	535	491	529	492
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	3,427	3,249	3,331	3,366
	Proportion of Target to Denominator Discharges	15.6%	15.1%	15.9%	14.6%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$19,894	\$18,754	\$18,102	\$18,781
	Sum of Medicare Payments for Target	\$10,643,392	\$9,208,020	\$9,575,991	\$9,240,394
One-Day Stays for Medical DRGs	One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	1,075	1,065	1,220	1,272
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	9,418	9,702	9,630	9,295
	Proportion of Target to Denominator Discharges	11.4%	11.0%	12.7%	13.7%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$7,585	\$7,444	\$6,691	\$6,587
	Sum of Medicare Payments for Target	\$8,153,779	\$7,927,634	\$8,163,457	\$8,378,416
One-Day Stays for Surgical DRGs	One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	465	498	498	475
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	3,427	3,249	3,331	3,366
	Proportion of Target to Denominator Discharges	13.6%	15.3%	15.0%	14.1%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$22,439	\$22,864	\$21,308	\$21,877
	Sum of Medicare Payments for Target	\$10,434,315	\$11,386,170	\$10,611,424	\$10,391,610

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - New York, 135 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	2,395	2,243	2,360	2,266
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	2,903	2,731	2,893	2,833
	Proportion of Target to Denominator Discharges	82.5%	82.1%	81.6%	80.0%
	Average Length of Stay for Target	6.0	6.4	5.7	5.9
	Average Medicare Payment for Target	\$14,453	\$15,675	\$14,239	\$14,244
	Sum of Medicare Payments for Target	\$34,615,938	\$35,158,358	\$33,602,997	\$32,276,004
Respiratory Infections	DRGs 177, 178	5,456	7,908	3,755	4,387
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	7,760	9,755	6,207	6,388
	Proportion of Target to Denominator Discharges	70.3%	81.1%	60.5%	68.7%
	Average Length of Stay for Target	7.3	7.8	6.4	6.5
	Average Medicare Payment for Target	\$19,014	\$21,195	\$17,441	\$18,162
	Sum of Medicare Payments for Target	\$103,741,620	\$167,607,571	\$65,492,062	\$79,678,027
Simple Pneumonia	DRGs 193, 194	2,023	1,555	2,107	1,659
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	3,659	2,810	3,755	2,974
	Proportion of Target to Denominator Discharges	55.3%	55.3%	56.1%	55.8%
	Average Length of Stay for Target	5.4	6.0	5.2	5.4
	Average Medicare Payment for Target	\$10,258	\$10,796	\$10,225	\$10,085
	Sum of Medicare Payments for Target	\$20,751,987	\$16,788,523	\$21,544,335	\$16,731,490
Septicemia	DRGs 870, 871, 872	11,429	11,651	10,913	11,271
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	17,143	16,686	16,335	16,343
	Proportion of Target to Denominator Discharges	66.7%	69.8%	66.8%	69.0%
	Average Length of Stay for Target	8.4	9.0	7.9	8.2
	Average Medicare Payment for Target	\$20,981	\$23,753	\$20,076	\$20,948
	Sum of Medicare Payments for Target	\$239,793,570	\$276,751,104	\$219,085,645	\$236,100,225
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	722	674	732	792
	All Discharges for Surgical DRGs	27,416	25,271	26,978	26,395
	Proportion of Target to Denominator Discharges	2.6%	2.7%	2.7%	3.0%
	Average Length of Stay for Target	12.7	13.9	12.3	11.7
	Average Medicare Payment for Target	\$35,916	\$39,215	\$37,984	\$35,394
	Sum of Medicare Payments for Target	\$25,931,666	\$26,431,038	\$27,804,446	\$28,031,759

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New York

173

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	55,237	54,903	52,589	52,661
	All Discharges for Medical DRGs w/ or w/o CC or MCC	72,387	69,277	69,726	70,009
	Proportion of Target to Denominator Discharges	76.3%	79.3%	75.4%	75.2%
	Average Length of Stay for Target	6.7	7.1	6.4	6.6
	Average Medicare Payment for Target	\$15,173	\$16,570	\$14,759	\$15,085
	Sum of Medicare Payments for Target	\$838,125,493	\$909,728,874	\$776,152,434	\$794,370,836
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	15,572	14,965	15,912	15,647
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	25,215	22,985	24,859	24,417
	Proportion of Target to Denominator Discharges	61.8%	65.1%	64.0%	64.1%
	Average Length of Stay for Target	9.2	9.8	9.2	9.5
	Average Medicare Payment for Target	\$37,616	\$39,236	\$37,803	\$37,427
	Sum of Medicare Payments for Target	\$585,749,946	\$587,161,651	\$601,526,351	\$585,612,889
Single CC or MCC	Discharges with one CC or MCC coded on the claim	31,945	30,452	31,072	31,001
	All Discharges with one or more CC or MCC coded on the claim	70,572	69,661	68,417	68,229
	Proportion of Target to Denominator Discharges	45.3%	43.7%	45.4%	45.4%
	Average Length of Stay for Target	5.8	5.9	5.6	5.8
	Average Medicare Payment for Target	\$18,747	\$19,327	\$18,543	\$18,680
	Sum of Medicare Payments for Target	\$598,866,833	\$588,532,573	\$576,181,298	\$579,099,247
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	2,531	2,179	2,501	2,608
	All Discharges with one or more MCCs including severe malnutrition	7,251	7,305	7,093	7,388
	Proportion of Target to Denominator Discharges	34.9%	29.8%	35.3%	35.3%
	Average Length of Stay for Target	7.7	7.3	7.5	7.5
	Average Medicare Payment for Target	\$21,608	\$20,843	\$20,358	\$19,721
	Sum of Medicare Payments for Target	\$54,689,199	\$45,416,274	\$50,916,417	\$51,432,636
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	1,577	2,024	1,303	1,315
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	12,881	13,431	12,050	12,320
	Proportion of Target to Denominator Discharges	12.2%	15.1%	10.8%	10.7%
	Average Length of Stay for Target	24.6	26.6	27.0	26.2
	Average Medicare Payment for Target	\$100,769	\$104,498	\$110,303	\$107,054
	Sum of Medicare Payments for Target	\$158,912,424	\$211,504,931	\$143,725,451	\$140,776,405

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New York

174

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	1,369	1,267	1,376	1,256
	All DRGs 246-249 Discharges + outpatient claims	2,977	2,853	3,016	2,865
	Proportion of Target to Denominator Discharges	46.0%	44.4%	45.6%	43.8%
	Average Length of Stay for Target	3.8	3.7	3.6	3.7
	Average Medicare Payment for Target	\$23,001	\$23,630	\$23,231	\$22,536
	Sum of Medicare Payments for Target	\$31,488,824	\$29,938,903	\$31,966,325	\$28,304,813
Total Knee Replacement	Inpatient discharges with knee replacement px codes	1,532	1,202	1,467	1,440
	Inpatient discharges + outpatient claims with knee replacement px codes	3,181	2,626	3,246	3,214
	Proportion of Target to Denominator Discharges	48.2%	45.8%	45.2%	44.8%
	Average Medicare Payment for Target	\$19,672	\$19,885	\$19,368	\$19,910
	Sum of Medicare Payments for Target	\$30,136,921	\$23,901,312	\$28,412,828	\$28,670,338
Syncope	DRG 312	1,172	1,032	1,147	1,181
	All medical DRGs in MDC 05 Discharges	14,211	12,935	13,980	13,263
	Proportion of Target to Denominator Discharges	8.2%	8.0%	8.2%	8.9%
	Average Length of Stay for Target	3.5	3.7	3.3	3.7
	Average Medicare Payment for Target	\$8,530	\$8,793	\$8,434	\$8,594
	Sum of Medicare Payments for Target	\$9,997,396	\$9,074,311	\$9,673,478	\$10,149,037
Other Circulatory System Diagnoses	DRGs 314, 315, 316	827	729	810	772
	All medical DRGs in MDC 05 Discharges	14,211	12,935	13,980	13,263
	Proportion of Target to Denominator Discharges	5.8%	5.6%	5.8%	5.8%
	Average Length of Stay for Target	7.0	7.5	6.7	7.1
	Average Medicare Payment for Target	\$17,661	\$18,521	\$17,666	\$17,862
	Sum of Medicare Payments for Target	\$14,605,398	\$13,501,794	\$14,309,313	\$13,789,749
Other Digestive System Diagnoses	DRGs 393, 394, 395	1,071	957	1,079	1,022
	All medical DRGs in MDC 06 Discharges	7,569	6,968	7,646	7,633
	Proportion of Target to Denominator Discharges	14.1%	13.7%	14.1%	13.4%
	Average Length of Stay for Target	5.5	5.3	5.3	5.5
	Average Medicare Payment for Target	\$11,800	\$12,257	\$11,861	\$12,162
	Sum of Medicare Payments for Target	\$12,637,866	\$11,730,027	\$12,797,911	\$12,429,904

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report New York

175

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	925	915	950	919
	All medical DRGs in MDC 08 Discharges	3,691	3,310	3,627	3,650
	Proportion of Target to Denominator Discharges	25.1%	27.6%	26.2%	25.2%
	Average Length of Stay for Target	4.8	5.1	4.9	5.0
	Average Medicare Payment for Target	\$9,706	\$10,798	\$10,029	\$10,229
	Sum of Medicare Payments for Target	\$8,978,049	\$9,880,167	\$9,527,224	\$9,400,615
Spinal Fusion	Claims with spinal fusion procedure codes	1,253	1,200	1,313	1,297
	Claims with spinal procedure codes	2,813	2,730	2,820	2,838
	Proportion of Target to Denominator Discharges	44.5%	44.0%	46.6%	45.7%
	Average Length of Stay for Target	5.7	6.0	5.7	5.7
	Average Medicare Payment for Target	\$45,214	\$47,622	\$44,914	\$44,043
	Sum of Medicare Payments for Target	\$56,653,576	\$57,146,145	\$58,972,345	\$57,123,326
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	2,386	2,339	2,583	2,502
	All Discharges with Transfer to SNF	23,642	24,456	24,426	24,940
	Proportion of Target to Denominator Discharges	10.1%	9.6%	10.6%	10.0%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$12,195	\$12,690	\$12,138	\$11,857
	Sum of Medicare Payments for Target	\$29,098,361	\$29,680,894	\$31,353,653	\$29,666,332
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	17,458	16,645	16,919	17,147
	All Discharges excl dc status 02,82,07,20	97,640	91,624	95,605	95,179
	Proportion of Target to Denominator Discharges	17.9%	18.2%	17.7%	18.0%
	Average Length of Stay for Target	7.6	8.0	7.5	7.7
	Average Medicare Payment for Target	\$20,516	\$22,295	\$20,449	\$20,588
	Sum of Medicare Payments for Target	\$358,174,286	\$371,096,490	\$345,979,853	\$353,017,519
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	12,251	11,764	11,996	12,043
	All Discharges excl dc status 02,82,07,20	97,640	91,624	95,605	95,179
	Proportion of Target to Denominator Discharges	12.5%	12.8%	12.5%	12.7%
	Average Length of Stay for Target	7.4	7.8	7.4	7.5
	Average Medicare Payment for Target	\$19,898	\$21,842	\$20,442	\$20,282
	Sum of Medicare Payments for Target	\$243,768,956	\$256,952,592	\$245,228,091	\$244,250,424

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report New York

176

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	9,822	8,607	10,014	9,716
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	65,098	61,843	63,461	63,196
	<b>Proportion of Target to Denominator Discharges</b>	15.1%	13.9%	15.8%	15.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,527	\$9,923	\$9,343	\$9,065
	<b>Sum of Medicare Payments for Target</b>	\$93,577,658	\$85,407,818	\$93,556,146	\$88,070,725
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,721	3,101	3,503	3,301
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	24,809	22,598	24,243	23,543
	<b>Proportion of Target to Denominator Discharges</b>	15.0%	13.7%	14.4%	14.0%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$22,928	\$23,781	\$22,577	\$22,851
	<b>Sum of Medicare Payments for Target</b>	\$85,316,646	\$73,744,370	\$79,085,787	\$75,432,136
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,267	3,800	4,331	4,182
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	65,098	61,843	63,461	63,196
	<b>Proportion of Target to Denominator Discharges</b>	6.6%	6.1%	6.8%	6.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$9,144	\$9,538	\$8,928	\$8,743
	<b>Sum of Medicare Payments for Target</b>	\$39,018,653	\$36,243,779	\$38,665,914	\$36,564,962
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,159	3,680	4,172	4,198
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	24,809	22,598	24,243	23,543
	<b>Proportion of Target to Denominator Discharges</b>	16.8%	16.3%	17.2%	17.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$25,399	\$26,709	\$26,008	\$25,603
	<b>Sum of Medicare Payments for Target</b>	\$105,635,989	\$98,289,943	\$108,504,392	\$107,482,736

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Ohio, 123 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,577	1,523	1,586	1,560
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,834	1,764	1,849	1,839
	Proportion of Target to Denominator Discharges	86.0%	86.3%	85.8%	84.8%
	Average Length of Stay for Target	4.2	4.5	4.1	4.3
	Average Medicare Payment for Target	\$9,469	\$9,263	\$9,074	\$9,017
	Sum of Medicare Payments for Target	\$14,932,882	\$14,107,517	\$14,391,474	\$14,066,271
Respiratory Infections	DRGs 177, 178	6,327	5,246	1,720	2,699
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	8,133	6,768	3,387	4,016
	Proportion of Target to Denominator Discharges	77.8%	77.5%	50.8%	67.2%
	Average Length of Stay for Target	6.3	6.6	5.1	4.7
	Average Medicare Payment for Target	\$14,643	\$14,029	\$12,179	\$12,276
	Sum of Medicare Payments for Target	\$92,645,910	\$73,593,718	\$20,947,111	\$33,131,847
Simple Pneumonia	DRGs 193, 194	1,629	1,396	1,527	1,136
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,697	2,220	2,612	1,960
	Proportion of Target to Denominator Discharges	60.4%	62.9%	58.5%	58.0%
	Average Length of Stay for Target	4.3	4.6	4.1	4.2
	Average Medicare Payment for Target	\$7,624	\$7,442	\$7,450	\$7,442
	Sum of Medicare Payments for Target	\$12,419,024	\$10,388,819	\$11,375,453	\$8,453,811
Septicemia	DRGs 870, 871, 872	5,493	5,293	4,559	4,667
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	9,838	8,914	8,254	7,940
	Proportion of Target to Denominator Discharges	55.8%	59.4%	55.2%	58.8%
	Average Length of Stay for Target	6.8	7.3	5.8	6.0
	Average Medicare Payment for Target	\$15,189	\$15,130	\$12,756	\$12,842
	Sum of Medicare Payments for Target	\$83,433,870	\$80,082,072	\$58,154,701	\$59,933,960
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	431	419	417	420
	All Discharges for Surgical DRGs	16,462	15,921	16,701	16,740
	Proportion of Target to Denominator Discharges	2.6%	2.6%	2.5%	2.5%
	Average Length of Stay for Target	8.7	9.5	7.9	7.8
	Average Medicare Payment for Target	\$25,189	\$25,206	\$22,238	\$22,770
	Sum of Medicare Payments for Target	\$10,856,622	\$10,561,180	\$9,273,178	\$9,563,344

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Ohio

178

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	35,741	32,986	30,333	30,847
	All Discharges for Medical DRGs w/ or w/o CC or MCC	44,697	40,963	39,903	40,330
	Proportion of Target to Denominator Discharges	80.0%	80.5%	76.0%	76.5%
	Average Length of Stay for Target	5.2	5.5	4.7	4.8
	Average Medicare Payment for Target	\$10,632	\$10,420	\$9,438	\$9,632
	Sum of Medicare Payments for Target	\$379,983,217	\$343,710,316	\$286,292,795	\$297,120,418
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	9,898	9,792	10,213	10,209
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	15,115	14,596	15,492	15,584
	Proportion of Target to Denominator Discharges	65.5%	67.1%	65.9%	65.5%
	Average Length of Stay for Target	7.3	7.6	7.1	7.0
	Average Medicare Payment for Target	\$26,788	\$26,359	\$25,650	\$25,232
	Sum of Medicare Payments for Target	\$265,146,318	\$258,107,763	\$261,963,728	\$257,595,833
Single CC or MCC	Discharges with one CC or MCC coded on the claim	20,994	18,940	18,269	18,566
	All Discharges with one or more CC or MCC coded on the claim	45,500	42,707	40,520	41,023
	Proportion of Target to Denominator Discharges	46.1%	44.3%	45.1%	45.3%
	Average Length of Stay for Target	4.7	4.8	4.4	4.4
	Average Medicare Payment for Target	\$13,712	\$13,535	\$13,268	\$13,248
	Sum of Medicare Payments for Target	\$287,869,593	\$256,350,772	\$242,401,870	\$245,964,084
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	1,250	1,117	1,256	1,341
	All Discharges with one or more MCCs including severe malnutrition	3,366	3,407	3,268	3,370
	Proportion of Target to Denominator Discharges	37.1%	32.8%	38.4%	39.8%
	Average Length of Stay for Target	5.9	5.9	5.6	5.5
	Average Medicare Payment for Target	\$14,399	\$13,915	\$13,770	\$13,301
	Sum of Medicare Payments for Target	\$17,998,445	\$15,543,099	\$17,295,743	\$17,836,982
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	1,105	1,072	492	503
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	6,830	6,472	5,230	5,323
	Proportion of Target to Denominator Discharges	16.2%	16.6%	9.4%	9.4%
	Average Length of Stay for Target	19.6	20.9	20.3	17.7
	Average Medicare Payment for Target	\$65,828	\$62,111	\$73,315	\$68,525
	Sum of Medicare Payments for Target	\$72,739,814	\$66,583,190	\$36,070,994	\$34,467,985

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Ohio

179

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	1,026	910	956	997
	All DRGs 246-249 Discharges + outpatient claims	1,982	1,906	2,015	2,007
	Proportion of Target to Denominator Discharges	51.8%	47.7%	47.4%	49.7%
	Average Length of Stay for Target	3.4	3.6	3.4	3.4
	Average Medicare Payment for Target	\$17,155	\$17,211	\$16,696	\$16,404
	Sum of Medicare Payments for Target	\$17,600,695	\$15,661,854	\$15,961,835	\$16,354,467
Total Knee Replacement	Inpatient discharges with knee replacement px codes	466	442	458	493
	Inpatient discharges + outpatient claims with knee replacement px codes	2,579	2,373	2,483	2,510
	Proportion of Target to Denominator Discharges	18.1%	18.6%	18.4%	19.6%
	Average Medicare Payment for Target	\$14,999	\$15,618	\$15,320	\$15,603
	Sum of Medicare Payments for Target	\$6,989,415	\$6,903,253	\$7,016,582	\$7,692,073
Syncope	DRG 312	456	468	475	469
	All medical DRGs in MDC 05 Discharges	9,045	8,530	9,296	8,877
	Proportion of Target to Denominator Discharges	5.0%	5.5%	5.1%	5.3%
	Average Length of Stay for Target	2.8	2.9	2.7	2.7
	Average Medicare Payment for Target	\$5,333	\$5,369	\$5,211	\$5,282
	Sum of Medicare Payments for Target	\$2,431,655	\$2,512,871	\$2,475,042	\$2,477,406
Other Circulatory System Diagnoses	DRGs 314, 315, 316	479	425	444	483
	All medical DRGs in MDC 05 Discharges	9,045	8,530	9,296	8,877
	Proportion of Target to Denominator Discharges	5.3%	5.0%	4.8%	5.4%
	Average Length of Stay for Target	5.7	6.0	5.5	5.2
	Average Medicare Payment for Target	\$11,761	\$11,871	\$11,578	\$11,156
	Sum of Medicare Payments for Target	\$5,633,398	\$5,044,969	\$5,140,688	\$5,388,306
Other Digestive System Diagnoses	DRGs 393, 394, 395	482	462	534	501
	All medical DRGs in MDC 06 Discharges	4,435	4,212	4,561	4,629
	Proportion of Target to Denominator Discharges	10.9%	11.0%	11.7%	10.8%
	Average Length of Stay for Target	4.7	4.5	4.1	4.2
	Average Medicare Payment for Target	\$8,377	\$8,203	\$7,827	\$7,836
	Sum of Medicare Payments for Target	\$4,037,636	\$3,789,733	\$4,179,879	\$3,926,051

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Ohio

180

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	457	435	523	523
	All medical DRGs in MDC 08 Discharges	1,656	1,626	1,821	1,837
	Proportion of Target to Denominator Discharges	27.6%	26.8%	28.7%	28.5%
	Average Length of Stay for Target	3.6	3.9	3.4	3.6
	Average Medicare Payment for Target	\$7,095	\$6,901	\$6,795	\$6,708
	Sum of Medicare Payments for Target	\$3,242,307	\$3,002,094	\$3,553,989	\$3,508,031
Spinal Fusion	Claims with spinal fusion procedure codes	1,283	1,166	1,404	1,329
	Claims with spinal procedure codes	2,390	2,206	2,498	2,463
	Proportion of Target to Denominator Discharges	53.7%	52.9%	56.2%	54.0%
	Average Length of Stay for Target	3.9	4.0	3.8	4.2
	Average Medicare Payment for Target	\$29,655	\$30,135	\$30,399	\$30,542
	Sum of Medicare Payments for Target	\$38,047,246	\$35,136,891	\$42,680,748	\$40,590,273
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,936	1,905	2,026	1,989
	All Discharges with Transfer to SNF	14,145	14,330	13,340	13,349
	Proportion of Target to Denominator Discharges	13.7%	13.3%	15.2%	14.9%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,730	\$9,777	\$9,831	\$9,507
	Sum of Medicare Payments for Target	\$18,837,234	\$18,625,676	\$19,916,740	\$18,909,258
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	10,485	9,807	9,906	9,993
	All Discharges excl dc status 02,82,07,20	60,518	56,220	56,879	57,223
	Proportion of Target to Denominator Discharges	17.3%	17.4%	17.4%	17.5%
	Average Length of Stay for Target	5.9	6.2	5.7	5.6
	Average Medicare Payment for Target	\$14,144	\$14,392	\$13,388	\$13,266
	Sum of Medicare Payments for Target	\$148,294,786	\$141,140,314	\$132,625,761	\$132,565,863
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	7,200	7,061	7,011	7,007
	All Discharges excl dc status 02,82,07,20	60,518	56,220	56,879	57,223
	Proportion of Target to Denominator Discharges	11.9%	12.6%	12.3%	12.2%
	Average Length of Stay for Target	5.8	6.0	5.6	5.5
	Average Medicare Payment for Target	\$13,796	\$14,189	\$13,236	\$13,089
	Sum of Medicare Payments for Target	\$99,334,398	\$100,190,883	\$92,799,873	\$91,716,444

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Ohio

181

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	7,481	6,473	7,317	7,189
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	38,219	35,166	34,644	34,791
	<b>Proportion of Target to Denominator Discharges</b>	19.6%	18.4%	21.1%	20.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,607	\$7,422	\$6,908	\$6,996
	<b>Sum of Medicare Payments for Target</b>	\$56,908,403	\$48,043,692	\$50,545,261	\$50,293,677
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,888	1,930	2,080	2,100
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	14,237	14,021	14,667	14,556
	<b>Proportion of Target to Denominator Discharges</b>	13.3%	13.8%	14.2%	14.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$16,707	\$17,010	\$17,334	\$16,843
	<b>Sum of Medicare Payments for Target</b>	\$31,543,045	\$32,829,140	\$36,054,753	\$35,369,371
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,629	3,186	3,461	3,439
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	38,219	35,166	34,644	34,791
	<b>Proportion of Target to Denominator Discharges</b>	9.5%	9.1%	10.0%	9.9%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,927	\$6,491	\$6,250	\$6,297
	<b>Sum of Medicare Payments for Target</b>	\$25,137,298	\$20,680,498	\$21,631,849	\$21,655,591
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,395	2,231	2,491	2,499
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	14,237	14,021	14,667	14,556
	<b>Proportion of Target to Denominator Discharges</b>	16.8%	15.9%	17.0%	17.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,453	\$20,036	\$20,231	\$19,818
	<b>Sum of Medicare Payments for Target</b>	\$48,985,121	\$44,700,605	\$50,394,982	\$49,525,013

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Oklahoma, 78 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	676	615	628	586
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	800	698	727	676
	Proportion of Target to Denominator Discharges	84.5%	88.1%	86.4%	86.7%
	Average Length of Stay for Target	4.5	4.9	4.1	4.1
	Average Medicare Payment for Target	\$9,177	\$9,744	\$8,506	\$9,193
	Sum of Medicare Payments for Target	\$6,203,491	\$5,992,631	\$5,341,917	\$5,387,357
Respiratory Infections	DRGs 177, 178	1,566	2,260	594	1,208
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,416	2,998	1,228	1,757
	Proportion of Target to Denominator Discharges	64.8%	75.4%	48.4%	68.8%
	Average Length of Stay for Target	6.1	6.5	5.5	4.9
	Average Medicare Payment for Target	\$14,073	\$14,110	\$11,308	\$12,086
	Sum of Medicare Payments for Target	\$22,038,970	\$31,888,208	\$6,716,970	\$14,599,535
Simple Pneumonia	DRGs 193, 194	776	677	573	480
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,196	970	935	764
	Proportion of Target to Denominator Discharges	64.9%	69.8%	61.3%	62.8%
	Average Length of Stay for Target	4.3	4.7	4.2	4.2
	Average Medicare Payment for Target	\$7,347	\$7,532	\$7,064	\$7,318
	Sum of Medicare Payments for Target	\$5,701,339	\$5,099,388	\$4,047,427	\$3,512,470
Septicemia	DRGs 870, 871, 872	2,753	2,803	2,410	2,501
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	4,604	4,428	3,813	3,878
	Proportion of Target to Denominator Discharges	59.8%	63.3%	63.2%	64.5%
	Average Length of Stay for Target	6.3	6.9	6.0	5.8
	Average Medicare Payment for Target	\$13,820	\$14,866	\$12,432	\$12,430
	Sum of Medicare Payments for Target	\$38,045,524	\$41,668,632	\$29,961,049	\$31,086,474
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	153	160	155	158
	All Discharges for Surgical DRGs	7,925	7,325	7,831	7,672
	Proportion of Target to Denominator Discharges	1.9%	2.2%	2.0%	2.1%
	Average Length of Stay for Target	9.6	8.9	8.8	9.0
	Average Medicare Payment for Target	\$27,335	\$24,520	\$23,963	\$24,171
	Sum of Medicare Payments for Target	\$4,182,328	\$3,923,265	\$3,714,189	\$3,819,001

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oklahoma

183

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	13,260	13,049	11,584	11,980
	All Discharges for Medical DRGs w/ or w/o CC or MCC	16,450	15,602	14,772	15,212
	Proportion of Target to Denominator Discharges	80.6%	83.6%	78.4%	78.8%
	Average Length of Stay for Target	5.1	5.5	4.9	4.9
	Average Medicare Payment for Target	\$10,002	\$10,601	\$9,187	\$9,602
	Sum of Medicare Payments for Target	\$132,629,779	\$138,333,300	\$106,422,113	\$115,031,491
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,257	3,901	4,184	4,087
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	7,354	6,743	7,297	7,115
	Proportion of Target to Denominator Discharges	57.9%	57.9%	57.3%	57.4%
	Average Length of Stay for Target	7.3	7.8	7.0	6.9
	Average Medicare Payment for Target	\$23,884	\$24,340	\$23,369	\$22,419
	Sum of Medicare Payments for Target	\$101,672,768	\$94,950,789	\$97,777,871	\$91,626,723
Single CC or MCC	Discharges with one CC or MCC coded on the claim	7,632	7,000	6,757	7,017
	All Discharges with one or more CC or MCC coded on the claim	17,465	16,885	15,761	16,044
	Proportion of Target to Denominator Discharges	43.7%	41.5%	42.9%	43.7%
	Average Length of Stay for Target	4.7	4.9	4.4	4.4
	Average Medicare Payment for Target	\$12,917	\$13,315	\$12,640	\$12,558
	Sum of Medicare Payments for Target	\$98,586,246	\$93,203,778	\$85,409,471	\$88,118,337
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	320	249	274	300
	All Discharges with one or more MCCs including severe malnutrition	925	835	844	876
	Proportion of Target to Denominator Discharges	34.6%	29.8%	32.5%	34.2%
	Average Length of Stay for Target	5.6	6.6	5.7	5.4
	Average Medicare Payment for Target	\$13,234	\$14,176	\$13,122	\$12,641
	Sum of Medicare Payments for Target	\$4,234,944	\$3,529,843	\$3,595,330	\$3,792,317
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	404	512	210	213
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	3,216	3,330	2,657	2,757
	Proportion of Target to Denominator Discharges	12.6%	15.4%	7.9%	7.7%
	Average Length of Stay for Target	18.8	18.7	18.7	16.5
	Average Medicare Payment for Target	\$64,858	\$62,902	\$64,026	\$62,236
	Sum of Medicare Payments for Target	\$26,202,467	\$32,205,926	\$13,445,424	\$13,256,344

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Oklahoma

184

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	445	345	421	380
	All DRGs 246-249 Discharges + outpatient claims	1,131	872	1,064	1,019
	Proportion of Target to Denominator Discharges	39.3%	39.6%	39.6%	37.3%
	Average Length of Stay for Target	3.4	3.5	3.2	3.6
	Average Medicare Payment for Target	\$15,575	\$15,881	\$15,357	\$16,102
	Sum of Medicare Payments for Target	\$6,930,749	\$5,479,107	\$6,465,437	\$6,118,642
Total Knee Replacement	Inpatient discharges with knee replacement px codes	754	753	765	761
	Inpatient discharges + outpatient claims with knee replacement px codes	1,244	1,323	1,268	1,283
	Proportion of Target to Denominator Discharges	60.6%	56.9%	60.3%	59.3%
	Average Medicare Payment for Target	\$11,759	\$11,687	\$11,743	\$11,645
	Sum of Medicare Payments for Target	\$8,866,438	\$8,800,341	\$8,983,754	\$8,861,598
Syncope	DRG 312	113	93	101	106
	All medical DRGs in MDC 05 Discharges	3,129	2,715	3,067	2,923
	Proportion of Target to Denominator Discharges	3.6%	3.4%	3.3%	3.6%
	Average Length of Stay for Target	3.0	2.8	2.8	2.3
	Average Medicare Payment for Target	\$5,452	\$5,504	\$5,348	\$5,272
	Sum of Medicare Payments for Target	\$616,104	\$511,846	\$540,177	\$558,869
Other Circulatory System Diagnoses	DRGs 314, 315, 316	150	128	131	140
	All medical DRGs in MDC 05 Discharges	3,129	2,715	3,067	2,923
	Proportion of Target to Denominator Discharges	4.8%	4.7%	4.3%	4.8%
	Average Length of Stay for Target	6.0	6.0	4.4	5.2
	Average Medicare Payment for Target	\$11,350	\$11,470	\$10,387	\$12,007
	Sum of Medicare Payments for Target	\$1,702,436	\$1,468,176	\$1,360,688	\$1,680,937
Other Digestive System Diagnoses	DRGs 393, 394, 395	136	109	133	132
	All medical DRGs in MDC 06 Discharges	1,625	1,411	1,528	1,494
	Proportion of Target to Denominator Discharges	8.4%	7.7%	8.7%	8.8%
	Average Length of Stay for Target	4.5	4.7	4.3	4.3
	Average Medicare Payment for Target	\$8,153	\$8,551	\$7,757	\$8,148
	Sum of Medicare Payments for Target	\$1,108,876	\$932,025	\$1,031,745	\$1,075,512

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oklahoma

185

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	121	109	124	129
	All medical DRGs in MDC 08 Discharges	520	485	556	545
	Proportion of Target to Denominator Discharges	23.3%	22.5%	22.3%	23.7%
	Average Length of Stay for Target	4.4	4.1	4.5	4.3
	Average Medicare Payment for Target	\$7,253	\$6,801	\$7,017	\$6,499
	Sum of Medicare Payments for Target	\$877,643	\$741,301	\$870,113	\$838,405
Spinal Fusion	Claims with spinal fusion procedure codes	749	741	754	742
	Claims with spinal procedure codes	1,237	1,184	1,334	1,312
	Proportion of Target to Denominator Discharges	60.5%	62.6%	56.5%	56.6%
	Average Length of Stay for Target	3.1	3.3	3.3	2.9
	Average Medicare Payment for Target	\$24,744	\$26,167	\$26,040	\$25,192
	Sum of Medicare Payments for Target	\$18,533,257	\$19,389,719	\$19,633,868	\$18,692,667
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	566	511	603	663
	All Discharges with Transfer to SNF	3,834	3,906	3,707	3,832
	Proportion of Target to Denominator Discharges	14.8%	13.1%	16.3%	17.3%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,720	\$9,115	\$9,363	\$9,263
	Sum of Medicare Payments for Target	\$5,501,724	\$4,657,550	\$5,646,089	\$6,141,623
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,806	3,504	3,568	3,555
	All Discharges excl dc status 02,82,07,20	23,917	22,151	22,340	22,653
	Proportion of Target to Denominator Discharges	15.9%	15.8%	16.0%	15.7%
	Average Length of Stay for Target	5.8	6.3	5.8	5.5
	Average Medicare Payment for Target	\$12,894	\$13,442	\$12,901	\$12,693
	Sum of Medicare Payments for Target	\$49,072,701	\$47,099,366	\$46,031,477	\$45,124,137
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,541	2,302	2,386	2,405
	All Discharges excl dc status 02,82,07,20	23,917	22,151	22,340	22,653
	Proportion of Target to Denominator Discharges	10.6%	10.4%	10.7%	10.6%
	Average Length of Stay for Target	5.7	6.2	5.8	5.5
	Average Medicare Payment for Target	\$12,873	\$13,232	\$13,011	\$12,711
	Sum of Medicare Payments for Target	\$32,710,052	\$30,460,758	\$31,044,696	\$30,570,614

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oklahoma

186

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,445	2,060	2,374	2,488
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,995	12,051	12,001	12,363
	<b>Proportion of Target to Denominator Discharges</b>	18.8%	17.1%	19.8%	20.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,207	\$7,566	\$6,736	\$7,002
	<b>Sum of Medicare Payments for Target</b>	\$17,621,420	\$15,585,357	\$15,991,572	\$17,420,795
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,283	1,148	1,379	1,295
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,573	6,035	6,602	6,430
	<b>Proportion of Target to Denominator Discharges</b>	19.5%	19.0%	20.9%	20.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$15,344	\$15,243	\$15,280	\$14,895
	<b>Sum of Medicare Payments for Target</b>	\$19,686,906	\$17,499,440	\$21,070,717	\$19,288,746
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	964	820	990	951
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	12,995	12,051	12,001	12,363
	<b>Proportion of Target to Denominator Discharges</b>	7.4%	6.8%	8.2%	7.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,417	\$6,930	\$5,845	\$6,187
	<b>Sum of Medicare Payments for Target</b>	\$6,185,860	\$5,682,524	\$5,786,961	\$5,883,649
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,137	1,052	1,202	1,191
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,573	6,035	6,602	6,430
	<b>Proportion of Target to Denominator Discharges</b>	17.3%	17.4%	18.2%	18.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$15,743	\$15,591	\$15,716	\$16,013
	<b>Sum of Medicare Payments for Target</b>	\$17,899,378	\$16,401,815	\$18,890,057	\$19,071,807

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Oregon, 34 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	448	400	441	406
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	483	444	474	451
	Proportion of Target to Denominator Discharges	92.8%	90.1%	93.0%	90.0%
	Average Length of Stay for Target	5.9	6.5	5.6	5.8
	Average Medicare Payment for Target	\$11,996	\$12,719	\$11,931	\$12,732
	Sum of Medicare Payments for Target	\$5,374,176	\$5,087,722	\$5,261,535	\$5,169,221
Respiratory Infections	DRGs 177, 178	873	952	434	542
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,098	1,137	733	722
	Proportion of Target to Denominator Discharges	79.5%	83.7%	59.2%	75.1%
	Average Length of Stay for Target	7.8	6.8	5.2	5.9
	Average Medicare Payment for Target	\$19,373	\$17,851	\$16,271	\$17,023
	Sum of Medicare Payments for Target	\$16,912,839	\$16,994,204	\$7,061,482	\$9,226,555
Simple Pneumonia	DRGs 193, 194	208	168	280	157
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	360	294	428	262
	Proportion of Target to Denominator Discharges	57.8%	57.1%	65.4%	59.9%
	Average Length of Stay for Target	4.8	4.7	4.4	3.8
	Average Medicare Payment for Target	\$10,089	\$9,931	\$9,531	\$9,528
	Sum of Medicare Payments for Target	\$2,098,526	\$1,668,467	\$2,668,575	\$1,495,922
Septicemia	DRGs 870, 871, 872	1,199	1,243	1,146	1,172
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	1,795	1,763	1,758	1,649
	Proportion of Target to Denominator Discharges	66.8%	70.5%	65.2%	71.1%
	Average Length of Stay for Target	7.0	7.5	6.5	7.0
	Average Medicare Payment for Target	\$17,234	\$18,001	\$15,250	\$16,104
	Sum of Medicare Payments for Target	\$20,663,357	\$22,375,539	\$17,476,442	\$18,873,390
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	116	128	126	111
	All Discharges for Surgical DRGs	4,360	4,304	4,695	4,620
	Proportion of Target to Denominator Discharges	2.7%	3.0%	2.7%	2.4%
	Average Length of Stay for Target	11.8	10.7	10.3	13.4
	Average Medicare Payment for Target	\$32,194	\$34,605	\$33,370	\$35,042
	Sum of Medicare Payments for Target	\$3,734,543	\$4,429,392	\$4,204,628	\$3,889,656

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oregon

188

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	7,370	7,038	6,863	6,458
	All Discharges for Medical DRGs w/ or w/o CC or MCC	9,054	8,541	8,592	8,129
	Proportion of Target to Denominator Discharges	81.4%	82.4%	79.9%	79.4%
	Average Length of Stay for Target	6.1	6.3	5.7	6.0
	Average Medicare Payment for Target	\$13,531	\$13,587	\$12,722	\$13,327
	Sum of Medicare Payments for Target	\$99,723,031	\$95,625,229	\$87,310,351	\$86,064,470
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	2,664	2,654	2,879	2,861
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	4,021	3,979	4,384	4,319
	Proportion of Target to Denominator Discharges	66.3%	66.7%	65.7%	66.2%
	Average Length of Stay for Target	8.2	9.1	8.1	8.5
	Average Medicare Payment for Target	\$33,295	\$34,074	\$33,561	\$33,778
	Sum of Medicare Payments for Target	\$88,698,111	\$90,431,566	\$96,621,057	\$96,638,397
Single CC or MCC	Discharges with one CC or MCC coded on the claim	4,424	4,179	4,305	4,194
	All Discharges with one or more CC or MCC coded on the claim	10,025	9,677	9,739	9,314
	Proportion of Target to Denominator Discharges	44.1%	43.2%	44.2%	45.0%
	Average Length of Stay for Target	5.3	5.6	5.1	5.2
	Average Medicare Payment for Target	\$17,812	\$18,457	\$18,239	\$18,922
	Sum of Medicare Payments for Target	\$78,798,402	\$77,132,150	\$78,517,535	\$79,359,339
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	345	278	306	295
	All Discharges with one or more MCCs including severe malnutrition	871	804	797	810
	Proportion of Target to Denominator Discharges	39.6%	34.6%	38.4%	36.4%
	Average Length of Stay for Target	7.1	8.6	8.9	8.1
	Average Medicare Payment for Target	\$18,008	\$18,371	\$19,129	\$18,563
	Sum of Medicare Payments for Target	\$6,212,808	\$5,107,052	\$5,853,595	\$5,476,031
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	133	130	59	63
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	1,398	1,401	1,277	1,290
	Proportion of Target to Denominator Discharges	9.5%	9.3%	4.6%	4.9%
	Average Length of Stay for Target	30.2	24.3	20.6	28.1
	Average Medicare Payment for Target	\$115,630	\$92,524	\$86,485	\$113,717
	Sum of Medicare Payments for Target	\$15,378,836	\$12,028,168	\$5,102,593	\$7,164,202

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oregon

189

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	265	239	251	206
	All DRGs 246-249 Discharges + outpatient claims	452	433	429	398
	Proportion of Target to Denominator Discharges	58.6%	55.2%	58.5%	51.8%
	Average Length of Stay for Target	3.4	3.4	3.4	3.5
	Average Medicare Payment for Target	\$20,338	\$21,022	\$20,909	\$21,365
	Sum of Medicare Payments for Target	\$5,389,545	\$5,024,241	\$5,248,107	\$4,401,100
Total Knee Replacement	Inpatient discharges with knee replacement px codes	102	115	155	162
	Inpatient discharges + outpatient claims with knee replacement px codes	512	569	614	572
	Proportion of Target to Denominator Discharges	19.9%	20.2%	25.2%	28.3%
	Average Medicare Payment for Target	\$17,331	\$19,540	\$18,846	\$19,397
	Sum of Medicare Payments for Target	\$1,767,764	\$2,247,044	\$2,921,156	\$3,142,379
Syncope	DRG 312	57	55	59	56
	All medical DRGs in MDC 05 Discharges	1,894	1,763	1,890	1,634
	Proportion of Target to Denominator Discharges	3.0%	3.1%	3.1%	3.4%
	Average Length of Stay for Target	5.8	3.5	3.5	3.5
	Average Medicare Payment for Target	\$7,861	\$6,543	\$6,948	\$6,648
	Sum of Medicare Payments for Target	\$448,069	\$359,875	\$409,913	\$372,314
Other Circulatory System Diagnoses	DRGs 314, 315, 316	101	98	110	88
	All medical DRGs in MDC 05 Discharges	1,894	1,763	1,890	1,634
	Proportion of Target to Denominator Discharges	5.3%	5.6%	5.8%	5.4%
	Average Length of Stay for Target	5.8	4.7	5.2	5.6
	Average Medicare Payment for Target	\$14,621	\$14,064	\$14,486	\$13,768
	Sum of Medicare Payments for Target	\$1,476,708	\$1,378,259	\$1,593,454	\$1,211,550
Other Digestive System Diagnoses	DRGs 393, 394, 395	114	83	126	88
	All medical DRGs in MDC 06 Discharges	910	864	982	863
	Proportion of Target to Denominator Discharges	12.5%	9.6%	12.8%	10.2%
	Average Length of Stay for Target	5.7	4.5	4.4	4.2
	Average Medicare Payment for Target	\$11,625	\$9,937	\$9,873	\$10,493
	Sum of Medicare Payments for Target	\$1,325,234	\$824,761	\$1,243,978	\$923,398

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oregon

190

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	87	90	101	97
	All medical DRGs in MDC 08 Discharges	392	373	392	414
	Proportion of Target to Denominator Discharges	22.2%	24.1%	25.8%	23.4%
	Average Length of Stay for Target	5.4	5.6	5.0	5.5
	Average Medicare Payment for Target	\$9,473	\$9,679	\$9,078	\$9,247
	Sum of Medicare Payments for Target	\$824,191	\$871,131	\$916,863	\$896,946
Spinal Fusion	Claims with spinal fusion procedure codes	323	296	351	319
	Claims with spinal procedure codes	738	721	793	714
	Proportion of Target to Denominator Discharges	43.8%	41.1%	44.3%	44.7%
	Average Length of Stay for Target	3.7	4.8	3.5	4.5
	Average Medicare Payment for Target	\$30,882	\$33,780	\$32,298	\$36,360
	Sum of Medicare Payments for Target	\$9,975,000	\$9,998,899	\$11,336,661	\$11,598,874
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	157	135	158	159
	All Discharges with Transfer to SNF	1,869	1,806	1,782	1,810
	Proportion of Target to Denominator Discharges	8.4%	7.5%	8.9%	8.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,567	\$12,653	\$11,648	\$11,693
	Sum of Medicare Payments for Target	\$1,815,975	\$1,708,175	\$1,840,417	\$1,859,182
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,783	1,788	1,852	1,635
	All Discharges excl dc status 02,82,07,20	12,963	12,388	13,056	12,484
	Proportion of Target to Denominator Discharges	13.8%	14.4%	14.2%	13.1%
	Average Length of Stay for Target	6.7	7.0	6.1	6.7
	Average Medicare Payment for Target	\$18,294	\$19,122	\$17,642	\$19,082
	Sum of Medicare Payments for Target	\$32,617,343	\$34,190,243	\$32,673,002	\$31,198,363
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,277	1,294	1,348	1,145
	All Discharges excl dc status 02,82,07,20	12,963	12,388	13,056	12,484
	Proportion of Target to Denominator Discharges	9.9%	10.4%	10.3%	9.2%
	Average Length of Stay for Target	6.3	6.6	6.0	6.4
	Average Medicare Payment for Target	\$18,186	\$17,853	\$17,063	\$18,306
	Sum of Medicare Payments for Target	\$23,223,491	\$23,102,187	\$23,001,162	\$20,960,670

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Oregon

191

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,417	1,343	1,416	1,382
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	7,719	7,335	7,446	7,001
	<b>Proportion of Target to Denominator Discharges</b>	18.4%	18.3%	19.0%	19.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,494	\$9,516	\$9,246	\$9,936
	<b>Sum of Medicare Payments for Target</b>	\$13,452,507	\$12,779,800	\$13,092,935	\$13,730,941
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	562	550	594	601
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,857	3,862	4,167	4,136
	<b>Proportion of Target to Denominator Discharges</b>	14.6%	14.2%	14.3%	14.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$21,569	\$22,428	\$22,078	\$22,038
	<b>Sum of Medicare Payments for Target</b>	\$12,121,849	\$12,335,237	\$13,114,547	\$13,244,712
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	777	765	940	789
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	7,719	7,335	7,446	7,001
	<b>Proportion of Target to Denominator Discharges</b>	10.1%	10.4%	12.6%	11.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$8,454	\$8,413	\$8,432	\$8,377
	<b>Sum of Medicare Payments for Target</b>	\$6,569,131	\$6,436,032	\$7,926,024	\$6,609,466
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	714	784	878	843
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,857	3,862	4,167	4,136
	<b>Proportion of Target to Denominator Discharges</b>	18.5%	20.3%	21.1%	20.4%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$22,974	\$23,733	\$23,743	\$23,666
	<b>Sum of Medicare Payments for Target</b>	\$16,403,102	\$18,606,701	\$20,846,202	\$19,950,362

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - Pennsylvania, 141 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	2,120	1,954	1,903	1,897
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	2,495	2,350	2,279	2,294
	Proportion of Target to Denominator Discharges	85.0%	83.1%	83.5%	82.7%
	Average Length of Stay for Target	4.8	4.9	4.5	4.5
	Average Medicare Payment for Target	\$9,717	\$9,804	\$9,603	\$9,680
	Sum of Medicare Payments for Target	\$20,599,889	\$19,156,174	\$18,274,196	\$18,363,281
Respiratory Infections	DRGs 177, 178	6,277	5,342	2,203	2,902
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	7,959	6,826	3,933	4,256
	Proportion of Target to Denominator Discharges	78.9%	78.3%	56.0%	68.2%
	Average Length of Stay for Target	6.9	7.5	5.4	5.2
	Average Medicare Payment for Target	\$15,064	\$15,180	\$12,664	\$12,542
	Sum of Medicare Payments for Target	\$94,559,834	\$81,090,845	\$27,898,727	\$36,396,637
Simple Pneumonia	DRGs 193, 194	1,498	1,323	1,523	1,138
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	2,726	2,209	2,762	1,992
	Proportion of Target to Denominator Discharges	55.0%	59.9%	55.1%	57.1%
	Average Length of Stay for Target	4.7	5.1	4.6	4.7
	Average Medicare Payment for Target	\$7,732	\$7,690	\$7,419	\$7,408
	Sum of Medicare Payments for Target	\$11,582,303	\$10,173,428	\$11,298,620	\$8,430,549
Septicemia	DRGs 870, 871, 872	7,108	6,788	6,293	6,131
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	11,406	10,490	10,040	9,513
	Proportion of Target to Denominator Discharges	62.3%	64.7%	62.7%	64.4%
	Average Length of Stay for Target	7.1	7.6	6.3	6.6
	Average Medicare Payment for Target	\$15,306	\$15,439	\$13,178	\$13,268
	Sum of Medicare Payments for Target	\$108,793,569	\$104,798,730	\$82,930,249	\$81,348,214
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	588	549	532	527
	All Discharges for Surgical DRGs	20,907	20,494	20,837	20,375
	Proportion of Target to Denominator Discharges	2.8%	2.7%	2.6%	2.6%
	Average Length of Stay for Target	9.6	10.5	9.2	9.4
	Average Medicare Payment for Target	\$27,358	\$27,459	\$24,848	\$24,931
	Sum of Medicare Payments for Target	\$16,086,219	\$15,075,214	\$13,219,296	\$13,138,876

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Pennsylvania

193

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	42,371	39,761	37,384	36,996
	All Discharges for Medical DRGs w/ or w/o CC or MCC	54,900	50,693	50,108	49,486
	Proportion of Target to Denominator Discharges	77.2%	78.4%	74.6%	74.8%
	Average Length of Stay for Target	5.8	6.1	5.3	5.5
	Average Medicare Payment for Target	\$11,272	\$11,264	\$10,227	\$10,385
	Sum of Medicare Payments for Target	\$477,612,109	\$447,871,827	\$382,340,472	\$384,200,667
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	12,139	12,093	12,248	12,197
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	19,352	18,972	19,404	19,015
	Proportion of Target to Denominator Discharges	62.7%	63.7%	63.1%	64.1%
	Average Length of Stay for Target	8.1	8.1	7.6	7.8
	Average Medicare Payment for Target	\$28,308	\$28,254	\$27,379	\$27,359
	Sum of Medicare Payments for Target	\$343,633,999	\$341,673,500	\$335,336,504	\$333,702,800
Single CC or MCC	Discharges with one CC or MCC coded on the claim	24,657	23,157	22,557	22,215
	All Discharges with one or more CC or MCC coded on the claim	54,286	51,741	49,598	49,141
	Proportion of Target to Denominator Discharges	45.4%	44.8%	45.5%	45.2%
	Average Length of Stay for Target	5.3	5.4	4.9	5.0
	Average Medicare Payment for Target	\$14,463	\$14,493	\$14,098	\$14,083
	Sum of Medicare Payments for Target	\$356,616,219	\$335,612,104	\$317,999,183	\$312,864,820
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	1,107	1,072	1,092	1,193
	All Discharges with one or more MCCs including severe malnutrition	2,900	3,073	2,865	2,993
	Proportion of Target to Denominator Discharges	38.2%	34.9%	38.1%	39.9%
	Average Length of Stay for Target	7.1	7.2	6.9	6.8
	Average Medicare Payment for Target	\$15,991	\$15,758	\$15,771	\$15,224
	Sum of Medicare Payments for Target	\$17,702,568	\$16,893,065	\$17,222,347	\$18,162,648
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	1,009	955	530	477
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	8,377	7,899	7,021	6,744
	Proportion of Target to Denominator Discharges	12.0%	12.1%	7.5%	7.1%
	Average Length of Stay for Target	21.2	23.2	23.0	22.4
	Average Medicare Payment for Target	\$78,206	\$78,008	\$82,650	\$84,780
	Sum of Medicare Payments for Target	\$78,910,304	\$74,497,672	\$43,804,692	\$40,440,205

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Pennsylvania

194

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	1,042	964	1,083	994
	All DRGs 246-249 Discharges + outpatient claims	1,960	1,854	1,992	1,883
	Proportion of Target to Denominator Discharges	53.2%	52.0%	54.4%	52.8%
	Average Length of Stay for Target	3.7	3.8	3.5	3.6
	Average Medicare Payment for Target	\$17,960	\$17,858	\$17,367	\$17,656
	Sum of Medicare Payments for Target	\$18,714,757	\$17,215,203	\$18,808,589	\$17,550,449
Total Knee Replacement	Inpatient discharges with knee replacement px codes	1,359	1,255	1,206	1,094
	Inpatient discharges + outpatient claims with knee replacement px codes	3,176	3,381	3,362	3,134
	Proportion of Target to Denominator Discharges	42.8%	37.1%	35.9%	34.9%
	Average Medicare Payment for Target	\$14,868	\$14,590	\$15,078	\$15,035
	Sum of Medicare Payments for Target	\$20,206,130	\$18,310,289	\$18,184,073	\$16,448,540
Syncope	DRG 312	649	545	606	677
	All medical DRGs in MDC 05 Discharges	10,756	10,332	10,780	10,345
	Proportion of Target to Denominator Discharges	6.0%	5.3%	5.6%	6.5%
	Average Length of Stay for Target	3.2	3.2	3.0	3.3
	Average Medicare Payment for Target	\$5,494	\$5,399	\$5,406	\$5,430
	Sum of Medicare Payments for Target	\$3,565,486	\$2,942,232	\$3,276,081	\$3,676,412
Other Circulatory System Diagnoses	DRGs 314, 315, 316	566	509	521	557
	All medical DRGs in MDC 05 Discharges	10,756	10,332	10,780	10,345
	Proportion of Target to Denominator Discharges	5.3%	4.9%	4.8%	5.4%
	Average Length of Stay for Target	5.4	6.5	5.3	5.9
	Average Medicare Payment for Target	\$12,380	\$13,503	\$12,386	\$12,283
	Sum of Medicare Payments for Target	\$7,007,026	\$6,873,178	\$6,453,216	\$6,841,450
Other Digestive System Diagnoses	DRGs 393, 394, 395	716	647	749	687
	All medical DRGs in MDC 06 Discharges	5,544	5,205	5,766	5,416
	Proportion of Target to Denominator Discharges	12.9%	12.4%	13.0%	12.7%
	Average Length of Stay for Target	4.4	4.3	4.5	4.2
	Average Medicare Payment for Target	\$8,240	\$8,301	\$8,276	\$8,042
	Sum of Medicare Payments for Target	\$5,900,051	\$5,370,626	\$6,198,526	\$5,525,078

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Pennsylvania

195

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	800	765	781	848
	All medical DRGs in MDC 08 Discharges	2,798	2,578	2,755	2,789
	Proportion of Target to Denominator Discharges	28.6%	29.7%	28.3%	30.4%
	Average Length of Stay for Target	4.2	4.4	4.3	4.4
	Average Medicare Payment for Target	\$7,157	\$7,274	\$6,915	\$6,962
	Sum of Medicare Payments for Target	\$5,725,440	\$5,564,274	\$5,400,258	\$5,903,561
Spinal Fusion	Claims with spinal fusion procedure codes	1,339	1,282	1,281	1,348
	Claims with spinal procedure codes	2,568	2,553	2,533	2,592
	Proportion of Target to Denominator Discharges	52.1%	50.2%	50.6%	52.0%
	Average Length of Stay for Target	4.2	4.0	4.0	4.2
	Average Medicare Payment for Target	\$32,020	\$32,724	\$32,672	\$32,516
	Sum of Medicare Payments for Target	\$42,875,090	\$41,952,498	\$41,853,106	\$43,831,079
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	2,042	1,925	2,219	2,037
	All Discharges with Transfer to SNF	15,774	15,666	14,891	14,966
	Proportion of Target to Denominator Discharges	12.9%	12.3%	14.9%	13.6%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,756	\$9,528	\$9,015	\$9,027
	Sum of Medicare Payments for Target	\$19,921,489	\$18,341,849	\$20,005,072	\$18,388,435
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	12,795	12,023	12,347	12,110
	All Discharges excl dc status 02,82,07,20	74,776	70,282	71,223	69,773
	Proportion of Target to Denominator Discharges	17.1%	17.1%	17.3%	17.4%
	Average Length of Stay for Target	6.5	6.7	6.1	6.3
	Average Medicare Payment for Target	\$14,836	\$15,431	\$14,287	\$14,266
	Sum of Medicare Payments for Target	\$189,829,984	\$185,531,899	\$176,396,600	\$172,757,199
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	9,266	8,925	9,201	8,975
	All Discharges excl dc status 02,82,07,20	74,776	70,282	71,223	69,773
	Proportion of Target to Denominator Discharges	12.4%	12.7%	12.9%	12.9%
	Average Length of Stay for Target	6.3	6.5	5.9	6.1
	Average Medicare Payment for Target	\$14,582	\$15,178	\$14,067	\$14,071
	Sum of Medicare Payments for Target	\$135,115,875	\$135,463,909	\$129,426,209	\$126,286,966

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Pennsylvania

196

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	7,914	7,342	8,310	7,718
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	45,517	42,637	42,544	41,432
	<b>Proportion of Target to Denominator Discharges</b>	17.4%	17.2%	19.5%	18.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,410	\$7,364	\$6,983	\$6,999
	<b>Sum of Medicare Payments for Target</b>	\$58,640,153	\$54,069,224	\$58,026,724	\$54,016,263
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,462	2,516	2,658	2,518
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	17,349	17,335	17,585	17,070
	<b>Proportion of Target to Denominator Discharges</b>	14.2%	14.5%	15.1%	14.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,896	\$18,356	\$17,788	\$17,859
	<b>Sum of Medicare Payments for Target</b>	\$44,059,651	\$46,183,863	\$47,279,570	\$44,968,487
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,942	2,605	2,879	3,055
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	45,517	42,637	42,544	41,432
	<b>Proportion of Target to Denominator Discharges</b>	6.5%	6.1%	6.8%	7.4%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,543	\$6,365	\$6,011	\$6,063
	<b>Sum of Medicare Payments for Target</b>	\$19,250,531	\$16,580,952	\$17,306,830	\$18,523,656
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,844	3,027	2,941	2,832
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	17,349	17,335	17,585	17,070
	<b>Proportion of Target to Denominator Discharges</b>	16.4%	17.5%	16.7%	16.6%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$19,332	\$19,489	\$20,191	\$20,104
	<b>Sum of Medicare Payments for Target</b>	\$54,979,633	\$58,992,907	\$59,382,181	\$56,934,942

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Puerto Rico, 50 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	138	135	130	123
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	184	186	177	185
	Proportion of Target to Denominator Discharges	75.0%	72.6%	73.4%	66.5%
	Average Length of Stay for Target	7.6	9.5	8.9	7.9
	Average Medicare Payment for Target	\$9,525	\$10,867	\$9,823	\$9,333
	Sum of Medicare Payments for Target	\$1,314,424	\$1,467,043	\$1,277,018	\$1,147,971
Respiratory Infections	DRGs 177, 178	51	194	140	151
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	183	345	285	266
	Proportion of Target to Denominator Discharges	27.9%	56.2%	49.1%	56.8%
	Average Length of Stay for Target	10.7	9.4	8.0	9.9
	Average Medicare Payment for Target	\$11,781	\$13,691	\$12,047	\$13,437
	Sum of Medicare Payments for Target	\$600,827	\$2,656,004	\$1,686,513	\$2,028,995
Simple Pneumonia	DRGs 193, 194	95	102	104	84
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	206	185	200	161
	Proportion of Target to Denominator Discharges	46.1%	55.1%	52.0%	52.2%
	Average Length of Stay for Target	9.0	8.9	9.8	9.7
	Average Medicare Payment for Target	\$9,704	\$8,692	\$9,023	\$8,148
	Sum of Medicare Payments for Target	\$921,835	\$886,583	\$938,353	\$684,452
Septicemia	DRGs 870, 871, 872	170	185	165	165
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	468	520	471	460
	Proportion of Target to Denominator Discharges	36.3%	35.6%	35.0%	35.9%
	Average Length of Stay for Target	10.3	10.4	10.2	10.5
	Average Medicare Payment for Target	\$14,629	\$12,900	\$12,745	\$14,152
	Sum of Medicare Payments for Target	\$2,486,977	\$2,386,514	\$2,102,939	\$2,335,024
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	37	38	31	26
	All Discharges for Surgical DRGs	934	955	1,000	930
	Proportion of Target to Denominator Discharges	4.0%	4.0%	3.1%	2.8%
	Average Length of Stay for Target	12.2	11.1	14.3	17.9
	Average Medicare Payment for Target	\$18,506	\$20,380	\$17,953	\$21,855
	Sum of Medicare Payments for Target	\$684,720	\$774,446	\$556,550	\$568,226

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Puerto Rico

198

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	1,456	1,689	1,523	1,472
	All Discharges for Medical DRGs w/ or w/o CC or MCC	2,628	2,787	2,681	2,545
	Proportion of Target to Denominator Discharges	55.4%	60.6%	56.8%	57.8%
	Average Length of Stay for Target	8.4	8.9	8.7	8.3
	Average Medicare Payment for Target	\$10,442	\$10,501	\$10,321	\$10,152
	Sum of Medicare Payments for Target	\$15,203,883	\$17,735,959	\$15,718,157	\$14,944,404
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	428	391	415	389
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	870	879	939	871
	Proportion of Target to Denominator Discharges	49.2%	44.5%	44.2%	44.7%
	Average Length of Stay for Target	12.2	11.9	12.6	13.2
	Average Medicare Payment for Target	\$18,803	\$19,170	\$19,332	\$19,134
	Sum of Medicare Payments for Target	\$8,047,564	\$7,495,296	\$8,022,816	\$7,443,078
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,069	1,137	1,140	1,057
	All Discharges with one or more CC or MCC coded on the claim	1,879	2,040	1,922	1,839
	Proportion of Target to Denominator Discharges	56.9%	55.7%	59.3%	57.5%
	Average Length of Stay for Target	7.5	8.0	8.3	7.8
	Average Medicare Payment for Target	\$12,211	\$11,986	\$12,149	\$11,829
	Sum of Medicare Payments for Target	\$13,053,959	\$13,627,845	\$13,849,339	\$12,502,756
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	14	13	11	11
	All Discharges with one or more MCCs including severe malnutrition	29	22	19	15
	Proportion of Target to Denominator Discharges	48.3%	59.1%	57.9%	73.3%
	Average Length of Stay for Target	9.1	12.2	11.0	11.6
	Average Medicare Payment for Target	\$13,218	\$11,994	\$11,578	\$10,108
	Sum of Medicare Payments for Target	\$185,046	\$155,918	\$127,360	\$111,193
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	59	71	55	66
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	245	294	247	257
	Proportion of Target to Denominator Discharges	24.1%	24.1%	22.3%	25.7%
	Average Length of Stay for Target	25.9	28.4	29.5	24.5
	Average Medicare Payment for Target	\$47,291	\$46,177	\$46,614	\$43,138
	Sum of Medicare Payments for Target	\$2,790,153	\$3,278,550	\$2,563,759	\$2,847,085

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Puerto Rico

199

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	73	76	61	57
	All DRGs 246-249 Discharges + outpatient claims	87	90	85	65
	Proportion of Target to Denominator Discharges	83.9%	84.4%	71.8%	87.7%
	Average Length of Stay for Target	4.0	5.3	5.4	4.0
	Average Medicare Payment for Target	\$13,814	\$14,586	\$13,897	\$14,566
	Sum of Medicare Payments for Target	\$1,008,419	\$1,108,530	\$847,712	\$830,251
Total Knee Replacement	Inpatient discharges with knee replacement px codes	69	102	96	92
	Inpatient discharges + outpatient claims with knee replacement px codes	70	104	96	97
	Proportion of Target to Denominator Discharges	98.6%	98.1%	100%	94.8%
	Average Medicare Payment for Target	\$11,673	\$11,004	\$10,727	\$10,929
	Sum of Medicare Payments for Target	\$805,431	\$1,122,386	\$1,029,803	\$1,005,466
Syncope	DRG 312	50	40	29	43
	All medical DRGs in MDC 05 Discharges	731	802	703	719
	Proportion of Target to Denominator Discharges	6.8%	5.0%	4.1%	6.0%
	Average Length of Stay for Target	5.6	5.0	4.0	5.1
	Average Medicare Payment for Target	\$7,070	\$6,984	\$7,793	\$6,782
	Sum of Medicare Payments for Target	\$353,505	\$279,350	\$225,985	\$291,637
Other Circulatory System Diagnoses	DRGs 314, 315, 316	27	17	24	22
	All medical DRGs in MDC 05 Discharges	731	802	703	719
	Proportion of Target to Denominator Discharges	3.7%	2.1%	3.4%	3.1%
	Average Length of Stay for Target	9.2	14.7	9.1	7.9
	Average Medicare Payment for Target	\$11,199	\$8,757	\$11,505	\$10,446
	Sum of Medicare Payments for Target	\$302,367	\$148,863	\$276,129	\$229,819
Other Digestive System Diagnoses	DRGs 393, 394, 395	41	43	35	48
	All medical DRGs in MDC 06 Discharges	385	364	382	309
	Proportion of Target to Denominator Discharges	10.6%	11.8%	9.2%	15.5%
	Average Length of Stay for Target	6.3	6.6	6.1	5.1
	Average Medicare Payment for Target	\$7,363	\$8,084	\$7,365	\$7,482
	Sum of Medicare Payments for Target	\$301,879	\$347,600	\$257,788	\$359,158

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Puerto Rico

200

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	*	*	*	*
	All medical DRGs in MDC 08 Discharges	*	*	*	*
	Proportion of Target to Denominator Discharges	*	*	*	*
	Average Length of Stay for Target	*	*	*	*
	Average Medicare Payment for Target	*	*	*	*
	Sum of Medicare Payments for Target	*	*	*	*
Spinal Fusion	Claims with spinal fusion procedure codes	22	29	29	24
	Claims with spinal procedure codes	32	43	34	39
	Proportion of Target to Denominator Discharges	68.8%	67.4%	85.3%	61.5%
	Average Length of Stay for Target	2.7	2.8	3.6	2.3
	Average Medicare Payment for Target	\$23,908	\$26,205	\$24,659	\$21,157
	Sum of Medicare Payments for Target	\$525,979	\$759,955	\$715,103	\$507,760
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	*	12	*	*
	All Discharges with Transfer to SNF	*	39	*	*
	Proportion of Target to Denominator Discharges	*	30.8%	*	*
	Average Length of Stay for Target	*	3.0	*	*
	Average Medicare Payment for Target	*	\$12,907	*	*
	Sum of Medicare Payments for Target	*	\$154,881	*	*
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	553	611	541	551
	All Discharges excl dc status 02,82,07,20	3,423	3,489	3,517	3,332
	Proportion of Target to Denominator Discharges	16.2%	17.5%	15.4%	16.5%
	Average Length of Stay for Target	8.0	8.3	8.5	8.4
	Average Medicare Payment for Target	\$10,901	\$11,759	\$11,579	\$11,210
	Sum of Medicare Payments for Target	\$6,028,185	\$7,184,530	\$6,264,058	\$6,176,690
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	417	433	400	382
	All Discharges excl dc status 02,82,07,20	3,423	3,489	3,517	3,332
	Proportion of Target to Denominator Discharges	12.2%	12.4%	11.4%	11.5%
	Average Length of Stay for Target	7.9	7.6	8.7	8.6
	Average Medicare Payment for Target	\$10,709	\$11,141	\$11,746	\$11,432
	Sum of Medicare Payments for Target	\$4,465,456	\$4,823,960	\$4,698,427	\$4,367,011

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Puerto Rico

201

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	334	338	352	343
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,556	2,586	2,577	2,480
	<b>Proportion of Target to Denominator Discharges</b>	13.1%	13.1%	13.7%	13.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,236	\$8,100	\$7,450	\$7,296
	<b>Sum of Medicare Payments for Target</b>	\$2,416,818	\$2,737,716	\$2,622,265	\$2,502,511
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	133	132	143	127
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	873	897	941	853
	<b>Proportion of Target to Denominator Discharges</b>	15.2%	14.7%	15.2%	14.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$13,337	\$12,684	\$13,260	\$12,939
	<b>Sum of Medicare Payments for Target</b>	\$1,773,803	\$1,674,227	\$1,896,206	\$1,643,294
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	116	112	121	145
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,556	2,586	2,577	2,480
	<b>Proportion of Target to Denominator Discharges</b>	4.5%	4.3%	4.7%	5.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,935	\$7,033	\$7,420	\$7,898
	<b>Sum of Medicare Payments for Target</b>	\$920,432	\$787,744	\$897,831	\$1,145,222
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	123	137	139	143
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	873	897	941	853
	<b>Proportion of Target to Denominator Discharges</b>	14.1%	15.3%	14.8%	16.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$13,168	\$12,241	\$12,952	\$12,048
	<b>Sum of Medicare Payments for Target</b>	\$1,619,674	\$1,677,035	\$1,800,324	\$1,722,866

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Rhode Island, 10 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	146	133	129	130
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	175	152	147	155
	Proportion of Target to Denominator Discharges	83.4%	87.5%	87.8%	83.9%
	Average Length of Stay for Target	4.7	4.0	3.7	4.4
	Average Medicare Payment for Target	\$11,116	\$11,442	\$11,550	\$11,682
	Sum of Medicare Payments for Target	\$1,622,904	\$1,521,816	\$1,490,000	\$1,518,653
Respiratory Infections	DRGs 177, 178	291	341	215	209
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	398	423	330	306
	Proportion of Target to Denominator Discharges	73.1%	80.6%	65.2%	68.3%
	Average Length of Stay for Target	6.9	7.5	5.3	5.4
	Average Medicare Payment for Target	\$16,670	\$17,573	\$13,249	\$13,854
	Sum of Medicare Payments for Target	\$4,851,103	\$5,992,424	\$2,848,481	\$2,895,469
Simple Pneumonia	DRGs 193, 194	94	73	99	80
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	196	151	200	164
	Proportion of Target to Denominator Discharges	48.0%	48.3%	49.5%	48.8%
	Average Length of Stay for Target	4.0	4.4	3.8	4.2
	Average Medicare Payment for Target	\$8,413	\$8,537	\$8,215	\$8,000
	Sum of Medicare Payments for Target	\$790,834	\$623,229	\$813,315	\$639,965
Septicemia	DRGs 870, 871, 872	339	297	300	326
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	584	492	529	549
	Proportion of Target to Denominator Discharges	58.0%	60.4%	56.7%	59.4%
	Average Length of Stay for Target	7.0	7.1	5.6	6.3
	Average Medicare Payment for Target	\$16,024	\$16,029	\$14,119	\$13,980
	Sum of Medicare Payments for Target	\$5,432,015	\$4,760,665	\$4,235,568	\$4,557,338
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	22	34	32	24
	All Discharges for Surgical DRGs	1,295	1,118	1,266	1,206
	Proportion of Target to Denominator Discharges	1.7%	3.0%	2.5%	2.0%
	Average Length of Stay for Target	9.1	8.1	8.3	22.2
	Average Medicare Payment for Target	\$28,736	\$27,113	\$26,810	\$25,954
	Sum of Medicare Payments for Target	\$632,181	\$921,858	\$857,934	\$622,892

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Rhode Island

203

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	2,696	2,585	2,555	2,595
	All Discharges for Medical DRGs w/ or w/o CC or MCC	3,538	3,209	3,294	3,455
	Proportion of Target to Denominator Discharges	76.2%	80.6%	77.6%	75.1%
	Average Length of Stay for Target	5.5	5.4	4.9	4.8
	Average Medicare Payment for Target	\$11,782	\$12,147	\$11,122	\$11,041
	Sum of Medicare Payments for Target	\$31,764,389	\$31,400,225	\$28,415,901	\$28,652,523
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	711	614	730	679
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	1,186	1,028	1,172	1,119
	Proportion of Target to Denominator Discharges	59.9%	59.7%	62.3%	60.7%
	Average Length of Stay for Target	7.3	7.2	6.8	7.8
	Average Medicare Payment for Target	\$28,838	\$28,474	\$28,846	\$28,136
	Sum of Medicare Payments for Target	\$20,503,558	\$17,482,810	\$21,057,924	\$19,104,402
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,548	1,448	1,556	1,600
	All Discharges with one or more CC or MCC coded on the claim	3,394	3,190	3,281	3,271
	Proportion of Target to Denominator Discharges	45.6%	45.4%	47.4%	48.9%
	Average Length of Stay for Target	4.9	4.7	4.5	4.8
	Average Medicare Payment for Target	\$15,281	\$14,746	\$15,108	\$14,569
	Sum of Medicare Payments for Target	\$23,654,911	\$21,351,889	\$23,508,035	\$23,310,019
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	98	89	78	94
	All Discharges with one or more MCCs including severe malnutrition	216	219	178	190
	Proportion of Target to Denominator Discharges	45.4%	40.6%	43.8%	49.5%
	Average Length of Stay for Target	4.9	5.1	6.0	5.6
	Average Medicare Payment for Target	\$14,825	\$15,777	\$15,644	\$14,875
	Sum of Medicare Payments for Target	\$1,452,840	\$1,404,169	\$1,220,234	\$1,398,239
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	41	28	22	21
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	390	341	334	357
	Proportion of Target to Denominator Discharges	10.5%	8.2%	6.6%	5.9%
	Average Length of Stay for Target	25.5	32.0	32.1	30.9
	Average Medicare Payment for Target	\$84,570	\$103,689	\$88,072	\$84,803
	Sum of Medicare Payments for Target	\$3,467,365	\$2,903,283	\$1,937,593	\$1,780,868

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Rhode Island

204

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	77	59	61	60
	All DRGs 246-249 Discharges + outpatient claims	134	114	107	127
	Proportion of Target to Denominator Discharges	57.5%	51.8%	57.0%	47.2%
	Average Length of Stay for Target	3.5	3.5	3.0	3.4
	Average Medicare Payment for Target	\$21,490	\$21,524	\$19,971	\$20,791
	Sum of Medicare Payments for Target	\$1,654,726	\$1,269,933	\$1,218,211	\$1,247,438
Total Knee Replacement	Inpatient discharges with knee replacement px codes	93	78	68	79
	Inpatient discharges + outpatient claims with knee replacement px codes	178	168	196	195
	Proportion of Target to Denominator Discharges	52.2%	46.4%	34.7%	40.5%
	Average Medicare Payment for Target	\$14,755	\$15,801	\$15,617	\$14,740
	Sum of Medicare Payments for Target	\$1,372,250	\$1,232,479	\$1,061,976	\$1,164,493
Syncope	DRG 312	37	40	43	48
	All medical DRGs in MDC 05 Discharges	759	686	795	748
	Proportion of Target to Denominator Discharges	4.9%	5.8%	5.4%	6.4%
	Average Length of Stay for Target	2.4	3.3	3.4	2.8
	Average Medicare Payment for Target	\$6,291	\$6,549	\$6,763	\$6,207
	Sum of Medicare Payments for Target	\$232,776	\$261,948	\$290,820	\$297,947
Other Circulatory System Diagnoses	DRGs 314, 315, 316	30	26	33	38
	All medical DRGs in MDC 05 Discharges	759	686	795	748
	Proportion of Target to Denominator Discharges	4.0%	3.8%	4.2%	5.1%
	Average Length of Stay for Target	7.6	6.4	3.5	3.6
	Average Medicare Payment for Target	\$14,542	\$13,824	\$11,757	\$10,966
	Sum of Medicare Payments for Target	\$436,271	\$359,434	\$387,987	\$416,725
Other Digestive System Diagnoses	DRGs 393, 394, 395	57	55	49	48
	All medical DRGs in MDC 06 Discharges	400	378	336	366
	Proportion of Target to Denominator Discharges	14.3%	14.6%	14.6%	13.1%
	Average Length of Stay for Target	6.1	4.2	3.9	4.0
	Average Medicare Payment for Target	\$10,845	\$9,439	\$8,573	\$9,672
	Sum of Medicare Payments for Target	\$618,156	\$519,142	\$420,056	\$464,279

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Rhode Island

205

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	42	33	33	42
	All medical DRGs in MDC 08 Discharges	170	143	167	169
	Proportion of Target to Denominator Discharges	24.7%	23.1%	19.8%	24.9%
	Average Length of Stay for Target	3.0	3.7	3.1	4.3
	Average Medicare Payment for Target	\$6,659	\$7,457	\$8,275	\$7,765
	Sum of Medicare Payments for Target	\$279,683	\$246,079	\$273,072	\$326,145
Spinal Fusion	Claims with spinal fusion procedure codes	102	71	99	92
	Claims with spinal procedure codes	181	141	176	186
	Proportion of Target to Denominator Discharges	56.4%	50.4%	56.3%	49.5%
	Average Length of Stay for Target	4.2	4.7	4.6	5.6
	Average Medicare Payment for Target	\$37,759	\$37,743	\$38,956	\$42,579
	Sum of Medicare Payments for Target	\$3,851,387	\$2,679,736	\$3,856,635	\$3,917,290
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	195	185	207	212
	All Discharges with Transfer to SNF	1,353	1,201	1,341	1,289
	Proportion of Target to Denominator Discharges	14.4%	15.4%	15.4%	16.4%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,225	\$11,922	\$11,406	\$10,655
	Sum of Medicare Payments for Target	\$2,188,942	\$2,205,632	\$2,361,080	\$2,258,918
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	801	688	758	764
	All Discharges excl dc status 02,82,07,20	4,809	4,307	4,577	4,626
	Proportion of Target to Denominator Discharges	16.7%	16.0%	16.6%	16.5%
	Average Length of Stay for Target	5.9	5.9	5.9	5.6
	Average Medicare Payment for Target	\$14,411	\$15,545	\$14,836	\$14,117
	Sum of Medicare Payments for Target	\$11,543,472	\$10,694,793	\$11,245,408	\$10,785,368
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	521	479	512	493
	All Discharges excl dc status 02,82,07,20	4,809	4,307	4,577	4,626
	Proportion of Target to Denominator Discharges	10.8%	11.1%	11.2%	10.7%
	Average Length of Stay for Target	6.0	5.7	5.5	5.6
	Average Medicare Payment for Target	\$14,368	\$15,181	\$15,203	\$14,549
	Sum of Medicare Payments for Target	\$7,485,668	\$7,271,853	\$7,784,154	\$7,172,421

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Rhode Island

206

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	684	610	721	708
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,319	2,993	3,109	3,185
	<b>Proportion of Target to Denominator Discharges</b>	20.6%	20.4%	23.2%	22.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,869	\$8,116	\$7,927	\$8,103
	<b>Sum of Medicare Payments for Target</b>	\$5,382,575	\$4,950,492	\$5,715,723	\$5,736,934
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	219	199	201	181
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,192	1,038	1,178	1,136
	<b>Proportion of Target to Denominator Discharges</b>	18.4%	19.2%	17.1%	15.9%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$19,693	\$20,511	\$20,441	\$19,250
	<b>Sum of Medicare Payments for Target</b>	\$4,312,659	\$4,081,680	\$4,108,725	\$3,484,227
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	189	154	197	201
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,319	2,993	3,109	3,185
	<b>Proportion of Target to Denominator Discharges</b>	5.7%	5.1%	6.3%	6.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,677	\$6,769	\$6,532	\$6,660
	<b>Sum of Medicare Payments for Target</b>	\$1,261,945	\$1,042,356	\$1,286,833	\$1,338,593
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	180	163	173	162
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,192	1,038	1,178	1,136
	<b>Proportion of Target to Denominator Discharges</b>	15.1%	15.7%	14.7%	14.3%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$19,931	\$20,663	\$21,897	\$22,204
	<b>Sum of Medicare Payments for Target</b>	\$3,587,494	\$3,368,030	\$3,788,188	\$3,597,122

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - South Carolina, 53 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,033	947	1,004	903
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,189	1,128	1,196	1,079
	Proportion of Target to Denominator Discharges	86.9%	84.0%	83.9%	83.7%
	Average Length of Stay for Target	4.3	4.6	4.6	4.4
	Average Medicare Payment for Target	\$9,518	\$9,476	\$9,123	\$9,153
	Sum of Medicare Payments for Target	\$9,832,202	\$8,974,212	\$9,159,600	\$8,265,501
Respiratory Infections	DRGs 177, 178	1,489	2,675	762	1,396
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,349	3,423	1,562	2,090
	Proportion of Target to Denominator Discharges	63.4%	78.1%	48.8%	66.8%
	Average Length of Stay for Target	7.4	6.6	5.3	5.7
	Average Medicare Payment for Target	\$14,792	\$14,188	\$12,462	\$12,683
	Sum of Medicare Payments for Target	\$22,025,083	\$37,952,564	\$9,495,831	\$17,704,911
Simple Pneumonia	DRGs 193, 194	793	678	736	603
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,224	1,029	1,073	924
	Proportion of Target to Denominator Discharges	64.8%	65.9%	68.6%	65.3%
	Average Length of Stay for Target	4.8	5.1	4.7	4.8
	Average Medicare Payment for Target	\$7,940	\$7,779	\$7,665	\$7,555
	Sum of Medicare Payments for Target	\$6,296,276	\$5,274,083	\$5,641,456	\$4,555,523
Septicemia	DRGs 870, 871, 872	2,850	2,927	2,708	2,676
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	4,791	4,671	4,391	4,327
	Proportion of Target to Denominator Discharges	59.5%	62.7%	61.7%	61.8%
	Average Length of Stay for Target	6.7	6.9	6.1	6.4
	Average Medicare Payment for Target	\$13,521	\$13,874	\$11,961	\$12,349
	Sum of Medicare Payments for Target	\$38,535,365	\$40,609,472	\$32,389,295	\$33,045,803
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	209	189	176	210
	All Discharges for Surgical DRGs	8,365	8,314	8,488	8,572
	Proportion of Target to Denominator Discharges	2.5%	2.3%	2.1%	2.4%
	Average Length of Stay for Target	8.9	9.9	8.1	10.3
	Average Medicare Payment for Target	\$23,103	\$25,100	\$23,654	\$22,954
	Sum of Medicare Payments for Target	\$4,828,453	\$4,743,931	\$4,163,183	\$4,820,317

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report South Carolina

208

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	16,006	16,339	14,537	14,981
	All Discharges for Medical DRGs w/ or w/o CC or MCC	20,516	20,282	19,322	19,585
	Proportion of Target to Denominator Discharges	78.0%	80.6%	75.2%	76.5%
	Average Length of Stay for Target	5.5	5.8	5.2	5.4
	Average Medicare Payment for Target	\$10,363	\$10,735	\$9,765	\$9,994
	Sum of Medicare Payments for Target	\$165,870,598	\$175,399,763	\$141,952,617	\$149,720,579
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,855	4,762	4,770	4,796
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	7,756	7,668	7,886	7,999
	Proportion of Target to Denominator Discharges	62.6%	62.1%	60.5%	60.0%
	Average Length of Stay for Target	7.9	8.1	7.4	7.5
	Average Medicare Payment for Target	\$25,673	\$25,695	\$25,105	\$25,255
	Sum of Medicare Payments for Target	\$124,640,114	\$122,358,929	\$119,751,249	\$121,122,228
Single CC or MCC	Discharges with one CC or MCC coded on the claim	9,531	9,503	8,845	9,221
	All Discharges with one or more CC or MCC coded on the claim	20,832	21,047	19,293	19,756
	Proportion of Target to Denominator Discharges	45.8%	45.2%	45.8%	46.7%
	Average Length of Stay for Target	5.0	5.1	4.7	4.7
	Average Medicare Payment for Target	\$13,420	\$13,728	\$13,358	\$13,217
	Sum of Medicare Payments for Target	\$127,904,243	\$130,460,745	\$118,154,287	\$121,872,158
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	509	416	461	438
	All Discharges with one or more MCCs including severe malnutrition	1,434	1,399	1,354	1,249
	Proportion of Target to Denominator Discharges	35.5%	29.7%	34.0%	35.1%
	Average Length of Stay for Target	6.6	7.4	6.2	6.1
	Average Medicare Payment for Target	\$13,630	\$13,842	\$13,576	\$13,996
	Sum of Medicare Payments for Target	\$6,937,546	\$5,758,407	\$6,258,679	\$6,130,130
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	373	391	167	181
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	3,332	3,459	2,999	2,957
	Proportion of Target to Denominator Discharges	11.2%	11.3%	5.6%	6.1%
	Average Length of Stay for Target	23.8	20.8	22.2	17.8
	Average Medicare Payment for Target	\$71,391	\$63,113	\$70,876	\$64,062
	Sum of Medicare Payments for Target	\$26,628,976	\$24,677,353	\$11,836,267	\$11,595,235

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report South Carolina

209

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	469	418	478	449
	All DRGs 246-249 Discharges + outpatient claims	982	914	985	941
	Proportion of Target to Denominator Discharges	47.8%	45.7%	48.5%	47.7%
	Average Length of Stay for Target	3.0	3.2	3.1	3.1
	Average Medicare Payment for Target	\$17,022	\$16,778	\$16,698	\$16,485
	Sum of Medicare Payments for Target	\$7,983,490	\$7,013,290	\$7,981,786	\$7,401,602
Total Knee Replacement	Inpatient discharges with knee replacement px codes	199	228	248	261
	Inpatient discharges + outpatient claims with knee replacement px codes	1,312	1,617	1,407	1,369
	Proportion of Target to Denominator Discharges	15.2%	14.1%	17.6%	19.1%
	Average Medicare Payment for Target	\$15,320	\$15,494	\$14,937	\$14,650
	Sum of Medicare Payments for Target	\$3,048,699	\$3,532,745	\$3,704,429	\$3,823,575
Syncope	DRG 312	224	196	213	271
	All medical DRGs in MDC 05 Discharges	4,303	3,883	4,034	4,034
	Proportion of Target to Denominator Discharges	5.2%	5.0%	5.3%	6.7%
	Average Length of Stay for Target	2.9	3.5	3.1	3.0
	Average Medicare Payment for Target	\$5,741	\$5,719	\$5,580	\$5,476
	Sum of Medicare Payments for Target	\$1,286,068	\$1,120,906	\$1,188,529	\$1,484,121
Other Circulatory System Diagnoses	DRGs 314, 315, 316	185	183	177	183
	All medical DRGs in MDC 05 Discharges	4,303	3,883	4,034	4,034
	Proportion of Target to Denominator Discharges	4.3%	4.7%	4.4%	4.5%
	Average Length of Stay for Target	6.0	6.2	5.3	6.0
	Average Medicare Payment for Target	\$12,761	\$11,960	\$11,127	\$11,429
	Sum of Medicare Payments for Target	\$2,360,702	\$2,188,674	\$1,969,421	\$2,091,569
Other Digestive System Diagnoses	DRGs 393, 394, 395	250	183	220	231
	All medical DRGs in MDC 06 Discharges	2,205	1,950	2,191	2,128
	Proportion of Target to Denominator Discharges	11.3%	9.4%	10.0%	10.9%
	Average Length of Stay for Target	4.6	4.9	4.0	4.6
	Average Medicare Payment for Target	\$8,533	\$8,417	\$7,920	\$8,164
	Sum of Medicare Payments for Target	\$2,133,350	\$1,540,300	\$1,742,374	\$1,885,952

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report South Carolina

210

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	197	168	184	198
	All medical DRGs in MDC 08 Discharges	735	670	797	751
	Proportion of Target to Denominator Discharges	26.8%	25.1%	23.1%	26.4%
	Average Length of Stay for Target	4.5	4.6	4.3	4.6
	Average Medicare Payment for Target	\$7,348	\$7,527	\$7,073	\$7,501
	Sum of Medicare Payments for Target	\$1,447,646	\$1,264,579	\$1,301,429	\$1,485,133
Spinal Fusion	Claims with spinal fusion procedure codes	795	770	764	810
	Claims with spinal procedure codes	1,508	1,486	1,418	1,497
	Proportion of Target to Denominator Discharges	52.7%	51.8%	53.9%	54.1%
	Average Length of Stay for Target	3.0	3.2	3.2	3.3
	Average Medicare Payment for Target	\$22,834	\$25,929	\$26,711	\$26,304
	Sum of Medicare Payments for Target	\$18,152,973	\$19,965,080	\$20,407,316	\$21,306,179
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	519	515	589	551
	All Discharges with Transfer to SNF	4,746	4,863	4,527	4,699
	Proportion of Target to Denominator Discharges	10.9%	10.6%	13.0%	11.7%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,864	\$9,886	\$9,273	\$9,339
	Sum of Medicare Payments for Target	\$5,119,538	\$5,091,037	\$5,461,559	\$5,145,687
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	4,701	4,486	4,444	4,573
	All Discharges excl dc status 02,82,07,20	28,604	28,145	27,863	28,235
	Proportion of Target to Denominator Discharges	16.4%	15.9%	15.9%	16.2%
	Average Length of Stay for Target	6.4	6.3	5.9	6.1
	Average Medicare Payment for Target	\$13,766	\$14,060	\$13,093	\$13,222
	Sum of Medicare Payments for Target	\$64,713,571	\$63,071,138	\$58,186,944	\$60,463,179
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	3,480	3,272	3,245	3,394
	All Discharges excl dc status 02,82,07,20	28,604	28,145	27,863	28,235
	Proportion of Target to Denominator Discharges	12.2%	11.6%	11.6%	12.0%
	Average Length of Stay for Target	6.4	6.2	5.8	6.1
	Average Medicare Payment for Target	\$13,945	\$14,286	\$13,060	\$13,231
	Sum of Medicare Payments for Target	\$48,529,913	\$46,744,155	\$42,381,235	\$44,905,915

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report South Carolina

211

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	3,366	2,953	3,287	3,299
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	17,350	16,884	16,432	16,743
	<b>Proportion of Target to Denominator Discharges</b>	19.4%	17.5%	20.0%	19.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,351	\$7,651	\$7,198	\$7,056
	<b>Sum of Medicare Payments for Target</b>	\$24,744,148	\$22,594,499	\$23,659,626	\$23,278,764
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,020	1,052	1,044	1,068
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	7,208	7,114	7,314	7,472
	<b>Proportion of Target to Denominator Discharges</b>	14.2%	14.8%	14.3%	14.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,138	\$17,662	\$16,929	\$17,258
	<b>Sum of Medicare Payments for Target</b>	\$17,481,267	\$18,580,698	\$17,673,788	\$18,431,661
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,580	1,474	1,621	1,618
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	17,350	16,884	16,432	16,743
	<b>Proportion of Target to Denominator Discharges</b>	9.1%	8.7%	9.9%	9.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,529	\$6,578	\$6,060	\$6,204
	<b>Sum of Medicare Payments for Target</b>	\$10,315,171	\$9,696,151	\$9,823,746	\$10,037,275
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,255	1,365	1,527	1,577
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	7,208	7,114	7,314	7,472
	<b>Proportion of Target to Denominator Discharges</b>	17.4%	19.2%	20.9%	21.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,031	\$20,273	\$19,748	\$19,707
	<b>Sum of Medicare Payments for Target</b>	\$25,138,868	\$27,672,088	\$30,155,885	\$31,078,122

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - South Dakota, 19 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	186	180	193	196
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	203	205	222	221
	Proportion of Target to Denominator Discharges	91.6%	87.8%	86.9%	88.7%
	Average Length of Stay for Target	4.2	4.6	4.3	4.7
	Average Medicare Payment for Target	\$9,002	\$10,013	\$9,270	\$9,020
	Sum of Medicare Payments for Target	\$1,674,332	\$1,802,306	\$1,789,056	\$1,767,852
Respiratory Infections	DRGs 177, 178	529	380	159	292
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	712	564	306	426
	Proportion of Target to Denominator Discharges	74.3%	67.4%	52.0%	68.5%
	Average Length of Stay for Target	6.7	6.9	5.1	5.2
	Average Medicare Payment for Target	\$16,598	\$16,337	\$13,839	\$14,708
	Sum of Medicare Payments for Target	\$8,780,543	\$6,208,242	\$2,200,366	\$4,294,837
Simple Pneumonia	DRGs 193, 194	163	166	141	121
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	259	243	216	168
	Proportion of Target to Denominator Discharges	62.9%	68.3%	65.3%	72.0%
	Average Length of Stay for Target	4.1	4.7	3.9	4.2
	Average Medicare Payment for Target	\$8,282	\$8,385	\$8,065	\$8,150
	Sum of Medicare Payments for Target	\$1,349,980	\$1,391,920	\$1,137,229	\$986,164
Septicemia	DRGs 870, 871, 872	576	532	495	501
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	933	907	800	798
	Proportion of Target to Denominator Discharges	61.7%	58.7%	61.9%	62.8%
	Average Length of Stay for Target	6.6	6.8	5.8	6.5
	Average Medicare Payment for Target	\$16,737	\$16,436	\$13,348	\$14,309
	Sum of Medicare Payments for Target	\$9,640,459	\$8,743,759	\$6,607,490	\$7,168,883
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	63	35	56	47
	All Discharges for Surgical DRGs	2,712	2,605	2,817	2,659
	Proportion of Target to Denominator Discharges	2.3%	1.3%	2.0%	1.8%
	Average Length of Stay for Target	9.3	8.0	10.0	10.7
	Average Medicare Payment for Target	\$30,965	\$25,334	\$26,704	\$27,260
	Sum of Medicare Payments for Target	\$1,950,819	\$886,686	\$1,495,406	\$1,281,236

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report South Dakota

213

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	3,377	3,152	2,943	3,053
	All Discharges for Medical DRGs w/ or w/o CC or MCC	4,234	3,942	3,883	3,858
	Proportion of Target to Denominator Discharges	79.8%	80.0%	75.8%	79.1%
	Average Length of Stay for Target	5.3	5.4	4.9	5.1
	Average Medicare Payment for Target	\$11,554	\$11,323	\$10,446	\$10,715
	Sum of Medicare Payments for Target	\$39,017,884	\$35,691,060	\$30,742,851	\$32,713,584
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,300	1,306	1,378	1,334
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	2,473	2,414	2,581	2,498
	Proportion of Target to Denominator Discharges	52.6%	54.1%	53.4%	53.4%
	Average Length of Stay for Target	7.1	6.9	6.9	7.2
	Average Medicare Payment for Target	\$25,940	\$26,021	\$24,929	\$25,330
	Sum of Medicare Payments for Target	\$33,722,032	\$33,983,680	\$34,352,680	\$33,789,939
Single CC or MCC	Discharges with one CC or MCC coded on the claim	2,108	1,927	1,919	1,918
	All Discharges with one or more CC or MCC coded on the claim	4,660	4,450	4,321	4,383
	Proportion of Target to Denominator Discharges	45.2%	43.3%	44.4%	43.8%
	Average Length of Stay for Target	4.8	4.7	4.4	4.7
	Average Medicare Payment for Target	\$15,214	\$15,766	\$14,947	\$14,963
	Sum of Medicare Payments for Target	\$32,071,924	\$30,380,693	\$28,682,888	\$28,699,731
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	133	120	154	131
	All Discharges with one or more MCCs including severe malnutrition	311	332	327	321
	Proportion of Target to Denominator Discharges	42.8%	36.1%	47.1%	40.8%
	Average Length of Stay for Target	6.2	6.4	6.0	6.0
	Average Medicare Payment for Target	\$15,333	\$14,419	\$16,176	\$14,441
	Sum of Medicare Payments for Target	\$2,039,277	\$1,730,231	\$2,491,150	\$1,891,806
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	85	89	30	26
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	678	625	545	556
	Proportion of Target to Denominator Discharges	12.5%	14.2%	5.5%	4.7%
	Average Length of Stay for Target	22.3	23.5	20.8	17.5
	Average Medicare Payment for Target	\$79,297	\$73,409	\$83,439	\$61,825
	Sum of Medicare Payments for Target	\$6,740,250	\$6,533,406	\$2,503,164	\$1,607,450

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report South Dakota

214

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	176	163	176	146
	All DRGs 246-249 Discharges + outpatient claims	417	399	407	391
	Proportion of Target to Denominator Discharges	42.2%	40.9%	43.2%	37.3%
	Average Length of Stay for Target	3.4	3.2	3.3	3.0
	Average Medicare Payment for Target	\$17,228	\$18,099	\$18,053	\$17,355
	Sum of Medicare Payments for Target	\$3,032,184	\$2,950,154	\$3,177,366	\$2,533,827
Total Knee Replacement	Inpatient discharges with knee replacement px codes	272	246	283	238
	Inpatient discharges + outpatient claims with knee replacement px codes	763	766	736	755
	Proportion of Target to Denominator Discharges	35.6%	32.1%	38.5%	31.5%
	Average Medicare Payment for Target	\$13,210	\$13,139	\$12,712	\$13,414
	Sum of Medicare Payments for Target	\$3,593,123	\$3,232,203	\$3,597,399	\$3,192,500
Syncope	DRG 312	26	16	29	31
	All medical DRGs in MDC 05 Discharges	764	702	777	727
	Proportion of Target to Denominator Discharges	3.4%	2.3%	3.7%	4.3%
	Average Length of Stay for Target	2.8	4.3	3.3	3.1
	Average Medicare Payment for Target	\$6,228	\$6,119	\$5,705	\$5,863
	Sum of Medicare Payments for Target	\$161,930	\$97,897	\$165,456	\$181,747
Other Circulatory System Diagnoses	DRGs 314, 315, 316	32	27	43	22
	All medical DRGs in MDC 05 Discharges	764	702	777	727
	Proportion of Target to Denominator Discharges	4.2%	3.8%	5.5%	3.0%
	Average Length of Stay for Target	4.6	5.4	5.1	6.2
	Average Medicare Payment for Target	\$11,437	\$11,555	\$12,697	\$11,298
	Sum of Medicare Payments for Target	\$365,995	\$311,984	\$545,980	\$248,553
Other Digestive System Diagnoses	DRGs 393, 394, 395	50	44	66	55
	All medical DRGs in MDC 06 Discharges	484	492	507	485
	Proportion of Target to Denominator Discharges	10.3%	8.9%	13.0%	11.3%
	Average Length of Stay for Target	4.0	3.6	3.8	3.7
	Average Medicare Payment for Target	\$8,542	\$9,088	\$8,632	\$8,214
	Sum of Medicare Payments for Target	\$427,112	\$399,882	\$569,716	\$451,791

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report South Dakota

215

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	41	44	51	56
	All medical DRGs in MDC 08 Discharges	163	176	207	197
	Proportion of Target to Denominator Discharges	25.2%	25.0%	24.6%	28.4%
	Average Length of Stay for Target	5.0	4.4	4.1	5.7
	Average Medicare Payment for Target	\$7,631	\$7,326	\$6,644	\$7,332
	Sum of Medicare Payments for Target	\$312,870	\$322,354	\$338,823	\$410,582
Spinal Fusion	Claims with spinal fusion procedure codes	215	208	183	201
	Claims with spinal procedure codes	488	463	418	428
	Proportion of Target to Denominator Discharges	44.1%	44.9%	43.8%	47.0%
	Average Length of Stay for Target	3.0	2.9	3.3	3.1
	Average Medicare Payment for Target	\$26,429	\$26,941	\$26,720	\$26,441
	Sum of Medicare Payments for Target	\$5,682,282	\$5,603,801	\$4,889,755	\$5,314,729
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	230	222	244	199
	All Discharges with Transfer to SNF	1,399	1,325	1,461	1,398
	Proportion of Target to Denominator Discharges	16.4%	16.8%	16.7%	14.2%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$12,131	\$12,018	\$11,589	\$11,774
	Sum of Medicare Payments for Target	\$2,790,233	\$2,668,001	\$2,827,815	\$2,342,976
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	787	786	832	822
	All Discharges excl dc status 02,82,07,20	6,767	6,383	6,647	6,423
	Proportion of Target to Denominator Discharges	11.6%	12.3%	12.5%	12.8%
	Average Length of Stay for Target	6.0	5.7	5.8	6.0
	Average Medicare Payment for Target	\$14,509	\$15,912	\$15,999	\$16,138
	Sum of Medicare Payments for Target	\$11,418,269	\$12,506,713	\$13,311,326	\$13,265,401
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	622	647	655	646
	All Discharges excl dc status 02,82,07,20	6,767	6,383	6,647	6,423
	Proportion of Target to Denominator Discharges	9.2%	10.1%	9.9%	10.1%
	Average Length of Stay for Target	6.0	5.7	5.7	6.1
	Average Medicare Payment for Target	\$14,217	\$15,188	\$15,954	\$16,328
	Sum of Medicare Payments for Target	\$8,842,818	\$9,826,749	\$10,449,556	\$10,548,012

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report South Dakota

216

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	727	672	681	643
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,677	3,424	3,371	3,247
	<b>Proportion of Target to Denominator Discharges</b>	19.8%	19.6%	20.2%	19.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,486	\$8,351	\$7,657	\$7,786
	<b>Sum of Medicare Payments for Target</b>	\$6,169,389	\$5,612,164	\$5,214,346	\$5,006,519
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	512	498	481	439
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,399	2,274	2,429	2,265
	<b>Proportion of Target to Denominator Discharges</b>	21.3%	21.9%	19.8%	19.4%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,082	\$16,900	\$16,551	\$17,014
	<b>Sum of Medicare Payments for Target</b>	\$8,746,084	\$8,416,309	\$7,961,187	\$7,469,020
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	371	389	400	391
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,677	3,424	3,371	3,247
	<b>Proportion of Target to Denominator Discharges</b>	10.1%	11.4%	11.9%	12.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,574	\$7,303	\$7,417	\$7,319
	<b>Sum of Medicare Payments for Target</b>	\$2,809,907	\$2,841,037	\$2,966,928	\$2,861,577
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	513	510	531	509
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,399	2,274	2,429	2,265
	<b>Proportion of Target to Denominator Discharges</b>	21.4%	22.4%	21.9%	22.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$17,948	\$18,600	\$18,690	\$17,797
	<b>Sum of Medicare Payments for Target</b>	\$9,207,193	\$9,486,144	\$9,924,653	\$9,058,474

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Tennessee, 78 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,266	1,177	1,200	1,218
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,467	1,362	1,420	1,408
	Proportion of Target to Denominator Discharges	86.3%	86.4%	84.5%	86.5%
	Average Length of Stay for Target	4.4	4.7	4.5	4.7
	Average Medicare Payment for Target	\$8,895	\$9,047	\$9,037	\$8,842
	Sum of Medicare Payments for Target	\$11,260,507	\$10,647,742	\$10,844,585	\$10,769,941
Respiratory Infections	DRGs 177, 178	1,851	3,189	878	1,645
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	3,090	4,270	1,973	2,568
	Proportion of Target to Denominator Discharges	59.9%	74.7%	44.5%	64.1%
	Average Length of Stay for Target	7.2	6.7	5.7	5.8
	Average Medicare Payment for Target	\$13,252	\$12,946	\$11,452	\$11,808
	Sum of Medicare Payments for Target	\$24,529,476	\$41,284,700	\$10,055,231	\$19,424,190
Simple Pneumonia	DRGs 193, 194	1,160	997	1,027	823
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,728	1,406	1,552	1,228
	Proportion of Target to Denominator Discharges	67.1%	70.9%	66.2%	67.0%
	Average Length of Stay for Target	4.7	5.2	4.6	4.7
	Average Medicare Payment for Target	\$7,257	\$7,370	\$7,073	\$7,100
	Sum of Medicare Payments for Target	\$8,417,588	\$7,347,503	\$7,263,794	\$5,843,126
Septicemia	DRGs 870, 871, 872	4,351	4,427	3,779	3,853
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	6,846	6,759	5,997	5,897
	Proportion of Target to Denominator Discharges	63.6%	65.5%	63.0%	65.3%
	Average Length of Stay for Target	6.8	7.7	6.5	6.6
	Average Medicare Payment for Target	\$13,018	\$13,715	\$11,764	\$11,827
	Sum of Medicare Payments for Target	\$56,642,298	\$60,716,398	\$44,454,820	\$45,568,804
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	310	276	268	277
	All Discharges for Surgical DRGs	11,357	10,982	11,546	11,274
	Proportion of Target to Denominator Discharges	2.7%	2.5%	2.3%	2.5%
	Average Length of Stay for Target	9.3	10.2	10.3	9.0
	Average Medicare Payment for Target	\$23,806	\$24,919	\$21,201	\$22,507
	Sum of Medicare Payments for Target	\$7,379,750	\$6,877,566	\$5,681,992	\$6,234,371

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Tennessee

218

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	21,165	21,505	19,797	20,300
	All Discharges for Medical DRGs w/ or w/o CC or MCC	26,584	26,212	25,525	25,846
	Proportion of Target to Denominator Discharges	79.6%	82.0%	77.6%	78.5%
	Average Length of Stay for Target	5.5	6.0	5.4	5.4
	Average Medicare Payment for Target	\$9,778	\$10,189	\$9,258	\$9,424
	Sum of Medicare Payments for Target	\$206,959,157	\$219,109,456	\$183,281,249	\$191,316,239
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	6,707	6,330	6,700	6,512
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	10,488	10,017	10,645	10,423
	Proportion of Target to Denominator Discharges	63.9%	63.2%	62.9%	62.5%
	Average Length of Stay for Target	7.7	8.0	7.3	7.3
	Average Medicare Payment for Target	\$24,585	\$25,238	\$23,555	\$23,535
	Sum of Medicare Payments for Target	\$164,893,054	\$159,753,700	\$157,817,545	\$153,262,377
Single CC or MCC	Discharges with one CC or MCC coded on the claim	12,671	12,282	12,318	12,581
	All Discharges with one or more CC or MCC coded on the claim	27,819	27,773	26,483	26,787
	Proportion of Target to Denominator Discharges	45.5%	44.2%	46.5%	47.0%
	Average Length of Stay for Target	4.9	5.1	4.8	4.8
	Average Medicare Payment for Target	\$13,044	\$13,198	\$12,594	\$12,598
	Sum of Medicare Payments for Target	\$165,280,523	\$162,100,426	\$155,137,272	\$158,491,037
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	556	507	602	685
	All Discharges with one or more MCCs including severe malnutrition	1,609	1,635	1,614	1,822
	Proportion of Target to Denominator Discharges	34.6%	31.0%	37.3%	37.6%
	Average Length of Stay for Target	6.1	6.5	6.0	6.0
	Average Medicare Payment for Target	\$12,865	\$13,278	\$12,697	\$12,591
	Sum of Medicare Payments for Target	\$7,152,749	\$6,731,802	\$7,643,865	\$8,624,578
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	531	656	308	327
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	4,972	5,127	4,168	4,267
	Proportion of Target to Denominator Discharges	10.7%	12.8%	7.4%	7.7%
	Average Length of Stay for Target	19.4	20.9	18.5	19.4
	Average Medicare Payment for Target	\$60,332	\$58,090	\$59,108	\$61,741
	Sum of Medicare Payments for Target	\$32,036,236	\$38,106,819	\$18,205,235	\$20,189,150

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Tennessee

219

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	649	584	643	584
	All DRGs 246-249 Discharges + outpatient claims	1,326	1,214	1,367	1,289
	Proportion of Target to Denominator Discharges	48.9%	48.1%	47.0%	45.3%
	Average Length of Stay for Target	3.4	3.5	3.6	3.5
	Average Medicare Payment for Target	\$15,423	\$15,583	\$15,835	\$15,634
	Sum of Medicare Payments for Target	\$10,009,454	\$9,100,482	\$10,181,956	\$9,130,531
Total Knee Replacement	Inpatient discharges with knee replacement px codes	351	374	385	485
	Inpatient discharges + outpatient claims with knee replacement px codes	1,707	1,886	1,623	1,766
	Proportion of Target to Denominator Discharges	20.6%	19.8%	23.7%	27.5%
	Average Medicare Payment for Target	\$14,405	\$14,804	\$15,129	\$14,620
	Sum of Medicare Payments for Target	\$5,056,330	\$5,536,589	\$5,824,791	\$7,090,909
Syncope	DRG 312	288	262	314	343
	All medical DRGs in MDC 05 Discharges	5,544	5,069	5,714	5,383
	Proportion of Target to Denominator Discharges	5.2%	5.2%	5.5%	6.4%
	Average Length of Stay for Target	3.1	3.0	3.0	3.1
	Average Medicare Payment for Target	\$5,201	\$5,059	\$4,843	\$5,027
	Sum of Medicare Payments for Target	\$1,497,875	\$1,325,386	\$1,520,631	\$1,724,189
Other Circulatory System Diagnoses	DRGs 314, 315, 316	306	232	274	287
	All medical DRGs in MDC 05 Discharges	5,544	5,069	5,714	5,383
	Proportion of Target to Denominator Discharges	5.5%	4.6%	4.8%	5.3%
	Average Length of Stay for Target	5.6	6.7	5.4	5.4
	Average Medicare Payment for Target	\$10,991	\$11,245	\$10,736	\$11,024
	Sum of Medicare Payments for Target	\$3,363,333	\$2,608,951	\$2,941,607	\$3,163,936
Other Digestive System Diagnoses	DRGs 393, 394, 395	320	275	301	357
	All medical DRGs in MDC 06 Discharges	2,632	2,350	2,740	2,627
	Proportion of Target to Denominator Discharges	12.2%	11.7%	11.0%	13.6%
	Average Length of Stay for Target	4.5	4.6	4.1	4.6
	Average Medicare Payment for Target	\$7,904	\$8,961	\$7,668	\$7,575
	Sum of Medicare Payments for Target	\$2,529,261	\$2,464,379	\$2,308,013	\$2,704,374

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Tennessee

220

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	298	251	309	328
	All medical DRGs in MDC 08 Discharges	1,032	914	1,054	1,107
	Proportion of Target to Denominator Discharges	28.9%	27.5%	29.3%	29.6%
	Average Length of Stay for Target	4.6	4.8	4.3	4.5
	Average Medicare Payment for Target	\$7,205	\$7,350	\$6,839	\$6,868
	Sum of Medicare Payments for Target	\$2,147,191	\$1,844,743	\$2,113,329	\$2,252,741
Spinal Fusion	Claims with spinal fusion procedure codes	1,021	989	950	927
	Claims with spinal procedure codes	1,872	1,784	1,784	1,757
	Proportion of Target to Denominator Discharges	54.5%	55.4%	53.3%	52.8%
	Average Length of Stay for Target	3.5	3.6	3.5	3.4
	Average Medicare Payment for Target	\$25,856	\$25,996	\$26,339	\$25,524
	Sum of Medicare Payments for Target	\$26,398,529	\$25,709,863	\$25,022,253	\$23,661,194
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	947	806	1,110	1,060
	All Discharges with Transfer to SNF	7,666	7,516	7,420	7,486
	Proportion of Target to Denominator Discharges	12.4%	10.7%	15.0%	14.2%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,921	\$9,187	\$8,992	\$8,825
	Sum of Medicare Payments for Target	\$8,447,973	\$7,404,946	\$9,980,920	\$9,354,401
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	6,040	5,971	5,989	6,210
	All Discharges excl dc status 02,82,07,20	37,272	36,193	36,975	36,975
	Proportion of Target to Denominator Discharges	16.2%	16.5%	16.2%	16.8%
	Average Length of Stay for Target	6.4	6.8	6.1	6.3
	Average Medicare Payment for Target	\$13,125	\$13,764	\$12,840	\$12,802
	Sum of Medicare Payments for Target	\$79,273,688	\$82,186,448	\$76,900,249	\$79,497,783
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	4,342	4,180	4,273	4,314
	All Discharges excl dc status 02,82,07,20	37,272	36,193	36,975	36,975
	Proportion of Target to Denominator Discharges	11.6%	11.5%	11.6%	11.7%
	Average Length of Stay for Target	6.2	6.7	6.1	6.3
	Average Medicare Payment for Target	\$13,086	\$13,685	\$13,031	\$12,960
	Sum of Medicare Payments for Target	\$56,818,268	\$57,201,834	\$55,681,053	\$55,910,331

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Tennessee

221

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	4,573	3,963	4,480	4,412
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	24,400	23,674	23,572	23,860
	Proportion of Target to Denominator Discharges	18.7%	16.7%	19.0%	18.5%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$7,028	\$7,166	\$6,608	\$6,744
	Sum of Medicare Payments for Target	\$32,139,003	\$28,399,540	\$29,603,259	\$29,754,920
Two-Day Stays for Surgical DRGs	Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	1,353	1,235	1,445	1,488
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	10,348	9,956	10,550	10,292
	Proportion of Target to Denominator Discharges	13.1%	12.4%	13.7%	14.5%
	Average Length of Stay for Target	2.0	2.0	2.0	2.0
	Average Medicare Payment for Target	\$16,571	\$16,890	\$16,131	\$16,351
	Sum of Medicare Payments for Target	\$22,420,200	\$20,858,615	\$23,309,503	\$24,330,179
One-Day Stays for Medical DRGs	One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72	2,049	1,845	1,937	1,957
	All Medical DRG disch excl dc status 02,82,07,20, OSC 72	24,400	23,674	23,572	23,860
	Proportion of Target to Denominator Discharges	8.4%	7.8%	8.2%	8.2%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$6,405	\$6,543	\$6,018	\$6,281
	Sum of Medicare Payments for Target	\$13,124,614	\$12,071,306	\$11,656,160	\$12,292,336
One-Day Stays for Surgical DRGs	One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72	1,741	1,903	1,990	1,952
	All Surgical DRG disch excl dc status 02,82,07,20, OSC 72	10,348	9,956	10,550	10,292
	Proportion of Target to Denominator Discharges	16.8%	19.1%	18.9%	19.0%
	Average Length of Stay for Target	1.0	1.0	1.0	1.0
	Average Medicare Payment for Target	\$17,818	\$17,678	\$17,754	\$17,754
	Sum of Medicare Payments for Target	\$31,020,865	\$33,640,436	\$35,330,497	\$34,656,169

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Texas, 291 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	3,426	3,242	3,170	3,206
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	4,019	3,814	3,771	3,894
	Proportion of Target to Denominator Discharges	85.2%	85.0%	84.1%	82.3%
	Average Length of Stay for Target	4.5	4.7	4.2	4.4
	Average Medicare Payment for Target	\$10,610	\$10,953	\$10,277	\$10,541
	Sum of Medicare Payments for Target	\$36,350,769	\$35,510,401	\$32,577,266	\$33,795,104
Respiratory Infections	DRGs 177, 178	4,859	10,075	2,516	5,420
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	8,029	13,223	5,249	7,801
	Proportion of Target to Denominator Discharges	60.5%	76.2%	47.9%	69.5%
	Average Length of Stay for Target	6.7	6.2	5.2	5.0
	Average Medicare Payment for Target	\$15,000	\$14,874	\$12,737	\$13,133
	Sum of Medicare Payments for Target	\$72,885,380	\$149,857,593	\$32,046,546	\$71,183,311
Simple Pneumonia	DRGs 193, 194	2,931	2,850	2,544	2,122
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	4,421	4,067	3,917	3,200
	Proportion of Target to Denominator Discharges	66.3%	70.1%	64.9%	66.3%
	Average Length of Stay for Target	4.5	4.7	4.4	4.5
	Average Medicare Payment for Target	\$8,501	\$8,498	\$8,285	\$8,391
	Sum of Medicare Payments for Target	\$24,915,469	\$24,220,719	\$21,077,591	\$17,806,080
Septicemia	DRGs 870, 871, 872	12,782	13,699	11,573	11,875
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	19,913	20,544	17,786	17,808
	Proportion of Target to Denominator Discharges	64.2%	66.7%	65.1%	66.7%
	Average Length of Stay for Target	6.7	7.0	6.1	6.2
	Average Medicare Payment for Target	\$15,047	\$15,892	\$13,589	\$13,880
	Sum of Medicare Payments for Target	\$192,335,638	\$217,703,950	\$157,262,280	\$164,826,707
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	789	807	752	736
	All Discharges for Surgical DRGs	34,698	33,801	34,682	34,013
	Proportion of Target to Denominator Discharges	2.3%	2.4%	2.2%	2.2%
	Average Length of Stay for Target	9.2	9.7	8.6	8.6
	Average Medicare Payment for Target	\$26,858	\$27,235	\$24,588	\$24,799
	Sum of Medicare Payments for Target	\$21,190,945	\$21,978,484	\$18,489,921	\$18,251,922

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Texas

223

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	61,286	65,892	57,175	60,191
	All Discharges for Medical DRGs w/ or w/o CC or MCC	77,177	79,570	73,799	76,228
	Proportion of Target to Denominator Discharges	79.4%	82.8%	77.5%	79.0%
	Average Length of Stay for Target	5.3	5.5	5.0	5.0
	Average Medicare Payment for Target	\$11,328	\$11,892	\$10,772	\$11,082
	Sum of Medicare Payments for Target	\$694,248,018	\$783,595,492	\$615,883,916	\$667,044,376
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	20,771	20,340	20,870	20,887
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	31,937	31,063	32,142	31,607
	Proportion of Target to Denominator Discharges	65.0%	65.5%	64.9%	66.1%
	Average Length of Stay for Target	7.5	7.7	7.2	7.3
	Average Medicare Payment for Target	\$27,243	\$27,105	\$26,456	\$26,436
	Sum of Medicare Payments for Target	\$565,860,231	\$551,307,234	\$552,141,476	\$552,173,841
Single CC or MCC	Discharges with one CC or MCC coded on the claim	37,310	37,903	35,877	36,954
	All Discharges with one or more CC or MCC coded on the claim	81,926	86,004	77,995	80,994
	Proportion of Target to Denominator Discharges	45.5%	44.1%	46.0%	45.6%
	Average Length of Stay for Target	4.7	4.8	4.5	4.5
	Average Medicare Payment for Target	\$14,686	\$14,669	\$14,451	\$14,381
	Sum of Medicare Payments for Target	\$547,936,712	\$555,996,545	\$518,467,744	\$531,449,056
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	1,617	1,465	1,754	1,880
	All Discharges with one or more MCCs including severe malnutrition	4,989	5,129	4,999	5,432
	Proportion of Target to Denominator Discharges	32.4%	28.6%	35.1%	34.6%
	Average Length of Stay for Target	6.1	6.5	5.7	5.9
	Average Medicare Payment for Target	\$15,258	\$15,380	\$14,609	\$14,570
	Sum of Medicare Payments for Target	\$24,671,670	\$22,531,304	\$25,623,426	\$27,392,109
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	1,685	1,998	986	1,024
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	14,613	15,701	12,717	13,019
	Proportion of Target to Denominator Discharges	11.5%	12.7%	7.8%	7.9%
	Average Length of Stay for Target	20.6	20.1	20.4	19.2
	Average Medicare Payment for Target	\$72,981	\$66,723	\$72,139	\$73,734
	Sum of Medicare Payments for Target	\$122,972,173	\$133,311,620	\$71,129,089	\$75,503,812

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Texas

224

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	1,723	1,611	1,681	1,550
	All DRGs 246-249 Discharges + outpatient claims	3,936	3,741	3,865	3,674
	Proportion of Target to Denominator Discharges	43.8%	43.1%	43.5%	42.2%
	Average Length of Stay for Target	3.8	4.0	3.7	3.7
	Average Medicare Payment for Target	\$17,629	\$18,177	\$16,980	\$17,234
	Sum of Medicare Payments for Target	\$30,375,363	\$29,283,467	\$28,543,433	\$26,713,239
Total Knee Replacement	Inpatient discharges with knee replacement px codes	1,620	1,758	1,560	1,582
	Inpatient discharges + outpatient claims with knee replacement px codes	4,767	5,377	4,943	5,059
	Proportion of Target to Denominator Discharges	34.0%	32.7%	31.6%	31.3%
	Average Medicare Payment for Target	\$13,764	\$14,175	\$14,243	\$14,652
	Sum of Medicare Payments for Target	\$22,297,954	\$24,919,055	\$22,219,616	\$23,180,207
Syncope	DRG 312	789	748	839	882
	All medical DRGs in MDC 05 Discharges	15,773	14,874	15,865	15,380
	Proportion of Target to Denominator Discharges	5.0%	5.0%	5.3%	5.7%
	Average Length of Stay for Target	2.8	2.8	2.8	2.7
	Average Medicare Payment for Target	\$6,325	\$6,122	\$6,159	\$6,124
	Sum of Medicare Payments for Target	\$4,990,494	\$4,579,461	\$5,167,367	\$5,400,998
Other Circulatory System Diagnoses	DRGs 314, 315, 316	842	732	901	944
	All medical DRGs in MDC 05 Discharges	15,773	14,874	15,865	15,380
	Proportion of Target to Denominator Discharges	5.3%	4.9%	5.7%	6.1%
	Average Length of Stay for Target	5.1	5.4	5.1	5.2
	Average Medicare Payment for Target	\$12,946	\$13,653	\$12,335	\$12,524
	Sum of Medicare Payments for Target	\$10,900,349	\$9,994,124	\$11,114,003	\$11,822,518
Other Digestive System Diagnoses	DRGs 393, 394, 395	980	924	1,003	987
	All medical DRGs in MDC 06 Discharges	8,010	7,627	8,219	7,952
	Proportion of Target to Denominator Discharges	12.2%	12.1%	12.2%	12.4%
	Average Length of Stay for Target	4.3	4.5	4.4	4.3
	Average Medicare Payment for Target	\$9,481	\$9,595	\$9,481	\$8,914
	Sum of Medicare Payments for Target	\$9,291,354	\$8,866,213	\$9,509,915	\$8,798,239

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Texas

225

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	811	766	856	895
	All medical DRGs in MDC 08 Discharges	2,822	2,668	2,845	2,972
	Proportion of Target to Denominator Discharges	28.7%	28.7%	30.1%	30.1%
	Average Length of Stay for Target	4.0	4.2	3.9	4.1
	Average Medicare Payment for Target	\$7,969	\$8,310	\$8,197	\$8,263
	Sum of Medicare Payments for Target	\$6,463,004	\$6,365,769	\$7,016,408	\$7,395,189
Spinal Fusion	Claims with spinal fusion procedure codes	2,946	2,807	2,933	2,859
	Claims with spinal procedure codes	5,535	5,372	5,538	5,437
	Proportion of Target to Denominator Discharges	53.2%	52.3%	53.0%	52.6%
	Average Length of Stay for Target	3.4	3.6	3.6	3.7
	Average Medicare Payment for Target	\$30,583	\$30,804	\$31,107	\$31,321
	Sum of Medicare Payments for Target	\$90,098,026	\$86,467,445	\$91,236,210	\$89,547,101
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	2,226	2,440	2,570	2,571
	All Discharges with Transfer to SNF	17,553	18,892	17,507	17,985
	Proportion of Target to Denominator Discharges	12.7%	12.9%	14.7%	14.3%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$10,286	\$10,569	\$10,157	\$10,033
	Sum of Medicare Payments for Target	\$22,895,692	\$25,788,623	\$26,103,431	\$25,795,401
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	19,010	18,944	18,887	18,766
	All Discharges excl dc status 02,82,07,20	111,202	112,092	108,916	110,542
	Proportion of Target to Denominator Discharges	17.1%	16.9%	17.3%	17.0%
	Average Length of Stay for Target	6.1	6.3	6.0	5.9
	Average Medicare Payment for Target	\$15,007	\$15,592	\$14,953	\$14,938
	Sum of Medicare Payments for Target	\$285,276,350	\$295,374,580	\$282,422,606	\$280,319,991
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	13,455	13,181	13,416	13,281
	All Discharges excl dc status 02,82,07,20	111,202	112,092	108,916	110,542
	Proportion of Target to Denominator Discharges	12.1%	11.8%	12.3%	12.0%
	Average Length of Stay for Target	6.1	6.3	6.0	5.8
	Average Medicare Payment for Target	\$14,905	\$15,472	\$14,870	\$14,728
	Sum of Medicare Payments for Target	\$200,544,671	\$203,940,106	\$199,498,947	\$195,607,281

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Texas

226

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	13,871	13,325	14,103	14,129
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	72,455	74,098	69,621	71,769
	<b>Proportion of Target to Denominator Discharges</b>	19.1%	18.0%	20.3%	19.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,272	\$8,609	\$7,923	\$8,062
	<b>Sum of Medicare Payments for Target</b>	\$114,735,070	\$114,721,416	\$111,743,099	\$113,911,675
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,948	4,617	4,850	4,740
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	31,650	30,956	31,825	31,199
	<b>Proportion of Target to Denominator Discharges</b>	15.6%	14.9%	15.2%	15.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,506	\$17,729	\$17,519	\$17,257
	<b>Sum of Medicare Payments for Target</b>	\$86,619,317	\$81,854,486	\$84,966,612	\$81,799,385
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	6,288	5,950	6,322	6,578
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	72,455	74,098	69,621	71,769
	<b>Proportion of Target to Denominator Discharges</b>	8.7%	8.0%	9.1%	9.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,635	\$7,888	\$7,456	\$7,336
	<b>Sum of Medicare Payments for Target</b>	\$48,006,313	\$46,932,943	\$47,139,610	\$48,258,881
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,895	5,200	5,352	5,300
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	31,650	30,956	31,825	31,199
	<b>Proportion of Target to Denominator Discharges</b>	15.5%	16.8%	16.8%	17.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$18,231	\$18,517	\$19,076	\$18,904
	<b>Sum of Medicare Payments for Target</b>	\$89,238,545	\$96,287,462	\$102,093,184	\$100,192,900

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Utah, 32 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	255	208	248	245
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	271	232	275	263
	Proportion of Target to Denominator Discharges	94.1%	89.7%	90.2%	93.2%
	Average Length of Stay for Target	3.4	3.9	3.4	3.2
	Average Medicare Payment for Target	\$10,210	\$11,134	\$10,428	\$9,842
	Sum of Medicare Payments for Target	\$2,603,552	\$2,315,799	\$2,586,128	\$2,411,383
Respiratory Infections	DRGs 177, 178	871	709	310	372
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,134	953	540	525
	Proportion of Target to Denominator Discharges	76.8%	74.4%	57.4%	70.9%
	Average Length of Stay for Target	5.2	4.8	3.3	3.6
	Average Medicare Payment for Target	\$15,654	\$15,325	\$12,892	\$13,644
	Sum of Medicare Payments for Target	\$13,634,376	\$10,865,224	\$3,996,424	\$5,075,435
Simple Pneumonia	DRGs 193, 194	250	230	215	142
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	326	295	285	199
	Proportion of Target to Denominator Discharges	76.7%	78.0%	75.4%	71.4%
	Average Length of Stay for Target	3.4	3.6	3.3	3.3
	Average Medicare Payment for Target	\$8,793	\$8,754	\$8,568	\$8,394
	Sum of Medicare Payments for Target	\$2,198,320	\$2,013,473	\$1,842,069	\$1,191,986
Septicemia	DRGs 870, 871, 872	1,122	1,078	930	975
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	1,650	1,544	1,349	1,321
	Proportion of Target to Denominator Discharges	68.0%	69.8%	68.9%	73.8%
	Average Length of Stay for Target	5.6	5.5	4.5	4.6
	Average Medicare Payment for Target	\$15,510	\$14,681	\$12,812	\$12,772
	Sum of Medicare Payments for Target	\$17,402,098	\$15,826,564	\$11,914,810	\$12,452,767
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	72	64	75	62
	All Discharges for Surgical DRGs	2,991	3,079	3,305	3,289
	Proportion of Target to Denominator Discharges	2.4%	2.1%	2.3%	1.9%
	Average Length of Stay for Target	6.2	8.5	6.0	6.5
	Average Medicare Payment for Target	\$26,104	\$27,435	\$25,808	\$24,309
	Sum of Medicare Payments for Target	\$1,879,476	\$1,755,842	\$1,935,624	\$1,507,168

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Utah

228

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	5,085	4,747	4,386	4,320
	All Discharges for Medical DRGs w/ or w/o CC or MCC	6,110	5,745	5,466	5,434
	Proportion of Target to Denominator Discharges	83.2%	82.6%	80.2%	79.5%
	Average Length of Stay for Target	4.5	4.5	4.0	4.2
	Average Medicare Payment for Target	\$12,276	\$11,971	\$11,092	\$11,403
	Sum of Medicare Payments for Target	\$62,421,243	\$56,827,014	\$48,650,012	\$49,263,060
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,674	1,699	1,838	1,883
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	2,712	2,832	3,051	3,056
	Proportion of Target to Denominator Discharges	61.7%	60.0%	60.2%	61.6%
	Average Length of Stay for Target	5.9	6.0	5.8	5.8
	Average Medicare Payment for Target	\$28,282	\$28,661	\$28,063	\$27,819
	Sum of Medicare Payments for Target	\$47,343,848	\$48,694,972	\$51,579,475	\$52,383,214
Single CC or MCC	Discharges with one CC or MCC coded on the claim	3,046	2,803	2,881	2,816
	All Discharges with one or more CC or MCC coded on the claim	6,738	6,435	6,220	6,197
	Proportion of Target to Denominator Discharges	45.2%	43.6%	46.3%	45.4%
	Average Length of Stay for Target	4.1	4.1	3.7	3.8
	Average Medicare Payment for Target	\$15,654	\$16,142	\$15,643	\$15,783
	Sum of Medicare Payments for Target	\$47,682,520	\$45,245,902	\$45,068,065	\$44,445,364
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	163	159	165	189
	All Discharges with one or more MCCs including severe malnutrition	485	513	428	461
	Proportion of Target to Denominator Discharges	33.6%	31.0%	38.6%	41.0%
	Average Length of Stay for Target	5.5	6.1	5.4	5.5
	Average Medicare Payment for Target	\$16,083	\$17,181	\$16,235	\$14,905
	Sum of Medicare Payments for Target	\$2,621,511	\$2,731,708	\$2,678,795	\$2,817,115
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	166	110	49	54
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	1,304	1,208	990	1,044
	Proportion of Target to Denominator Discharges	12.7%	9.1%	4.9%	5.2%
	Average Length of Stay for Target	20.2	21.5	16.9	18.6
	Average Medicare Payment for Target	\$81,168	\$77,350	\$76,823	\$86,368
	Sum of Medicare Payments for Target	\$13,473,806	\$8,508,529	\$3,764,322	\$4,663,857

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Utah

229

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	188	181	205	183
	All DRGs 246-249 Discharges + outpatient claims	356	361	416	373
	Proportion of Target to Denominator Discharges	52.8%	50.1%	49.3%	49.1%
	Average Length of Stay for Target	2.8	2.6	2.8	3.0
	Average Medicare Payment for Target	\$18,188	\$18,112	\$18,553	\$17,804
	Sum of Medicare Payments for Target	\$3,419,296	\$3,278,275	\$3,803,389	\$3,258,152
Total Knee Replacement	Inpatient discharges with knee replacement px codes	94	148	165	181
	Inpatient discharges + outpatient claims with knee replacement px codes	660	833	761	765
	Proportion of Target to Denominator Discharges	14.2%	17.8%	21.7%	23.7%
	Average Medicare Payment for Target	\$16,024	\$17,928	\$17,686	\$18,350
	Sum of Medicare Payments for Target	\$1,506,216	\$2,653,359	\$2,918,262	\$3,321,320
Syncope	DRG 312	30	29	28	32
	All medical DRGs in MDC 05 Discharges	913	869	862	823
	Proportion of Target to Denominator Discharges	3.3%	3.3%	3.2%	3.9%
	Average Length of Stay for Target	3.7	3.5	2.4	3.5
	Average Medicare Payment for Target	\$7,024	\$6,647	\$7,068	\$7,742
	Sum of Medicare Payments for Target	\$210,727	\$192,750	\$197,916	\$247,748
Other Circulatory System Diagnoses	DRGs 314, 315, 316	66	58	60	62
	All medical DRGs in MDC 05 Discharges	913	869	862	823
	Proportion of Target to Denominator Discharges	7.2%	6.7%	7.0%	7.5%
	Average Length of Stay for Target	5.2	4.4	5.0	4.4
	Average Medicare Payment for Target	\$13,783	\$12,766	\$12,904	\$13,810
	Sum of Medicare Payments for Target	\$909,709	\$740,439	\$774,228	\$856,240
Other Digestive System Diagnoses	DRGs 393, 394, 395	71	64	82	62
	All medical DRGs in MDC 06 Discharges	582	622	679	557
	Proportion of Target to Denominator Discharges	12.2%	10.3%	12.1%	11.1%
	Average Length of Stay for Target	3.6	4.9	3.8	3.5
	Average Medicare Payment for Target	\$9,209	\$12,060	\$10,052	\$8,759
	Sum of Medicare Payments for Target	\$653,824	\$771,823	\$824,295	\$543,072

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Utah

230

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	65	65	68	75
	All medical DRGs in MDC 08 Discharges	269	232	279	297
	Proportion of Target to Denominator Discharges	24.2%	28.0%	24.4%	25.3%
	Average Length of Stay for Target	2.9	3.6	4.1	3.3
	Average Medicare Payment for Target	\$7,672	\$7,968	\$8,701	\$7,786
	Sum of Medicare Payments for Target	\$498,660	\$517,937	\$591,651	\$583,914
Spinal Fusion	Claims with spinal fusion procedure codes	423	414	405	386
	Claims with spinal procedure codes	776	746	718	704
	Proportion of Target to Denominator Discharges	54.5%	55.5%	56.4%	54.8%
	Average Length of Stay for Target	2.6	2.8	3.0	2.9
	Average Medicare Payment for Target	\$27,017	\$29,395	\$31,181	\$30,555
	Sum of Medicare Payments for Target	\$11,428,379	\$12,169,525	\$12,628,256	\$11,794,061
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	370	400	480	501
	All Discharges with Transfer to SNF	1,873	1,804	1,879	1,877
	Proportion of Target to Denominator Discharges	19.8%	22.2%	25.5%	26.7%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,718	\$11,765	\$12,754	\$11,802
	Sum of Medicare Payments for Target	\$4,335,748	\$4,706,040	\$6,121,741	\$5,913,018
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	1,147	1,086	1,140	1,157
	All Discharges excl dc status 02,82,07,20	8,894	8,687	8,757	8,746
	Proportion of Target to Denominator Discharges	12.9%	12.5%	13.0%	13.2%
	Average Length of Stay for Target	5.2	5.1	5.1	5.0
	Average Medicare Payment for Target	\$16,786	\$17,057	\$17,704	\$16,931
	Sum of Medicare Payments for Target	\$19,253,180	\$18,523,634	\$20,182,203	\$19,589,325
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	846	800	864	901
	All Discharges excl dc status 02,82,07,20	8,894	8,687	8,757	8,746
	Proportion of Target to Denominator Discharges	9.5%	9.2%	9.9%	10.3%
	Average Length of Stay for Target	5.2	5.0	5.1	5.1
	Average Medicare Payment for Target	\$16,943	\$16,831	\$17,909	\$18,009
	Sum of Medicare Payments for Target	\$14,333,611	\$13,464,427	\$15,473,071	\$16,225,746

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Utah

231

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,457	1,346	1,346	1,380
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,011	5,706	5,501	5,509
	<b>Proportion of Target to Denominator Discharges</b>	24.2%	23.6%	24.5%	25.0%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$9,148	\$9,101	\$8,469	\$8,432
	<b>Sum of Medicare Payments for Target</b>	\$13,328,383	\$12,249,785	\$11,399,363	\$11,636,561
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	566	507	594	539
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,836	2,947	3,198	3,158
	<b>Proportion of Target to Denominator Discharges</b>	20.0%	17.2%	18.6%	17.1%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$20,423	\$20,969	\$20,013	\$20,615
	<b>Sum of Medicare Payments for Target</b>	\$11,559,223	\$10,631,078	\$11,887,702	\$11,111,718
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	838	752	828	769
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,011	5,706	5,501	5,509
	<b>Proportion of Target to Denominator Discharges</b>	13.9%	13.2%	15.1%	14.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$8,172	\$8,152	\$7,739	\$7,795
	<b>Sum of Medicare Payments for Target</b>	\$6,847,978	\$6,129,989	\$6,408,209	\$5,994,076
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	539	697	691	693
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,836	2,947	3,198	3,158
	<b>Proportion of Target to Denominator Discharges</b>	19.0%	23.7%	21.6%	21.9%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$22,421	\$20,432	\$20,846	\$20,061
	<b>Sum of Medicare Payments for Target</b>	\$12,084,698	\$14,241,344	\$14,404,500	\$13,902,289

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



## State-Level Target Area Summary Report Q4FY22 - Virginia, 71 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	1,599	1,519	1,568	1,487
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,860	1,783	1,859	1,772
	Proportion of Target to Denominator Discharges	86.0%	85.2%	84.3%	83.9%
	Average Length of Stay for Target	4.5	4.9	4.6	4.8
	Average Medicare Payment for Target	\$9,283	\$9,675	\$9,180	\$9,339
	Sum of Medicare Payments for Target	\$14,844,046	\$14,695,574	\$14,394,506	\$13,886,485
Respiratory Infections	DRGs 177, 178	2,616	3,571	1,353	2,005
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	3,637	4,411	2,395	2,933
	Proportion of Target to Denominator Discharges	71.9%	81.0%	56.5%	68.4%
	Average Length of Stay for Target	7.0	6.9	5.3	5.4
	Average Medicare Payment for Target	\$14,410	\$14,229	\$12,414	\$12,568
	Sum of Medicare Payments for Target	\$37,695,957	\$50,810,450	\$16,795,664	\$25,199,681
Simple Pneumonia	DRGs 193, 194	950	775	965	830
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	1,606	1,321	1,690	1,362
	Proportion of Target to Denominator Discharges	59.2%	58.7%	57.1%	60.9%
	Average Length of Stay for Target	4.6	5.0	4.3	4.6
	Average Medicare Payment for Target	\$7,801	\$8,026	\$7,677	\$7,634
	Sum of Medicare Payments for Target	\$7,410,932	\$6,219,882	\$7,407,908	\$6,336,019
Septicemia	DRGs 870, 871, 872	5,695	5,688	5,208	5,358
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	8,198	7,931	7,635	7,592
	Proportion of Target to Denominator Discharges	69.5%	71.7%	68.2%	70.6%
	Average Length of Stay for Target	6.9	7.4	6.2	6.4
	Average Medicare Payment for Target	\$13,764	\$14,551	\$12,217	\$12,568
	Sum of Medicare Payments for Target	\$78,387,977	\$82,763,800	\$63,626,553	\$67,338,589
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	344	311	326	288
	All Discharges for Surgical DRGs	13,152	12,560	13,426	12,832
	Proportion of Target to Denominator Discharges	2.6%	2.5%	2.4%	2.2%
	Average Length of Stay for Target	9.6	9.6	9.3	8.8
	Average Medicare Payment for Target	\$26,039	\$25,304	\$24,580	\$25,143
	Sum of Medicare Payments for Target	\$8,957,294	\$7,869,417	\$8,013,206	\$7,241,112

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Virginia

233

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	26,866	26,296	25,147	25,209
	All Discharges for Medical DRGs w/ or w/o CC or MCC	33,733	32,220	32,338	32,400
	Proportion of Target to Denominator Discharges	79.6%	81.6%	77.8%	77.8%
	Average Length of Stay for Target	5.6	5.9	5.2	5.3
	Average Medicare Payment for Target	\$10,466	\$10,842	\$9,932	\$10,002
	Sum of Medicare Payments for Target	\$281,169,932	\$285,110,160	\$249,748,692	\$252,130,886
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	7,940	7,438	7,985	7,730
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	12,245	11,696	12,603	12,029
	Proportion of Target to Denominator Discharges	64.8%	63.6%	63.4%	64.3%
	Average Length of Stay for Target	7.8	8.0	7.5	7.7
	Average Medicare Payment for Target	\$26,442	\$27,010	\$26,150	\$26,141
	Sum of Medicare Payments for Target	\$209,952,479	\$200,899,452	\$208,811,188	\$202,066,088
Single CC or MCC	Discharges with one CC or MCC coded on the claim	15,173	14,244	14,554	14,323
	All Discharges with one or more CC or MCC coded on the claim	34,757	33,677	33,106	32,915
	Proportion of Target to Denominator Discharges	43.7%	42.3%	44.0%	43.5%
	Average Length of Stay for Target	4.9	5.0	4.6	4.7
	Average Medicare Payment for Target	\$13,477	\$13,591	\$13,127	\$13,117
	Sum of Medicare Payments for Target	\$204,479,085	\$193,591,416	\$191,048,393	\$187,880,149
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	651	592	656	679
	All Discharges with one or more MCCs including severe malnutrition	2,117	2,087	2,079	2,092
	Proportion of Target to Denominator Discharges	30.8%	28.4%	31.6%	32.5%
	Average Length of Stay for Target	6.6	6.7	6.3	6.1
	Average Medicare Payment for Target	\$14,327	\$14,442	\$13,962	\$13,715
	Sum of Medicare Payments for Target	\$9,326,936	\$8,549,693	\$9,158,927	\$9,312,685
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	613	669	331	309
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	6,295	6,345	5,602	5,731
	Proportion of Target to Denominator Discharges	9.7%	10.5%	5.9%	5.4%
	Average Length of Stay for Target	21.8	23.0	21.6	19.3
	Average Medicare Payment for Target	\$71,632	\$72,814	\$78,608	\$67,666
	Sum of Medicare Payments for Target	\$43,910,119	\$48,712,686	\$26,019,154	\$20,908,891

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Virginia

234

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	744	692	727	619
	All DRGs 246-249 Discharges + outpatient claims	1,409	1,377	1,375	1,231
	Proportion of Target to Denominator Discharges	52.8%	50.3%	52.9%	50.3%
	Average Length of Stay for Target	3.3	3.3	3.7	3.3
	Average Medicare Payment for Target	\$16,484	\$16,443	\$16,630	\$16,443
	Sum of Medicare Payments for Target	\$12,263,802	\$11,378,684	\$12,090,262	\$10,178,180
Total Knee Replacement	Inpatient discharges with knee replacement px codes	416	488	572	445
	Inpatient discharges + outpatient claims with knee replacement px codes	2,015	2,258	2,249	2,094
	Proportion of Target to Denominator Discharges	20.6%	21.6%	25.4%	21.3%
	Average Medicare Payment for Target	\$15,146	\$14,909	\$14,350	\$15,869
	Sum of Medicare Payments for Target	\$6,300,561	\$7,275,374	\$8,208,281	\$7,061,716
Syncope	DRG 312	384	335	412	368
	All medical DRGs in MDC 05 Discharges	7,456	6,764	7,398	6,940
	Proportion of Target to Denominator Discharges	5.2%	5.0%	5.6%	5.3%
	Average Length of Stay for Target	2.7	3.0	3.2	2.9
	Average Medicare Payment for Target	\$5,295	\$5,306	\$5,312	\$5,169
	Sum of Medicare Payments for Target	\$2,033,389	\$1,777,452	\$2,188,737	\$1,902,238
Other Circulatory System Diagnoses	DRGs 314, 315, 316	284	277	304	340
	All medical DRGs in MDC 05 Discharges	7,456	6,764	7,398	6,940
	Proportion of Target to Denominator Discharges	3.8%	4.1%	4.1%	4.9%
	Average Length of Stay for Target	6.0	6.2	5.3	5.7
	Average Medicare Payment for Target	\$11,952	\$12,793	\$11,118	\$12,116
	Sum of Medicare Payments for Target	\$3,394,284	\$3,543,567	\$3,379,974	\$4,119,356
Other Digestive System Diagnoses	DRGs 393, 394, 395	341	322	402	377
	All medical DRGs in MDC 06 Discharges	3,363	3,091	3,406	3,395
	Proportion of Target to Denominator Discharges	10.1%	10.4%	11.8%	11.1%
	Average Length of Stay for Target	4.3	4.8	4.2	4.3
	Average Medicare Payment for Target	\$7,912	\$8,243	\$8,020	\$7,846
	Sum of Medicare Payments for Target	\$2,698,042	\$2,654,114	\$3,224,028	\$2,957,828

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Virginia

235

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	327	326	396	406
	All medical DRGs in MDC 08 Discharges	1,313	1,195	1,307	1,297
	Proportion of Target to Denominator Discharges	24.9%	27.3%	30.3%	31.3%
	Average Length of Stay for Target	3.8	4.0	3.7	4.4
	Average Medicare Payment for Target	\$6,939	\$7,235	\$6,952	\$6,877
	Sum of Medicare Payments for Target	\$2,269,147	\$2,358,569	\$2,753,036	\$2,792,109
Spinal Fusion	Claims with spinal fusion procedure codes	1,053	995	1,145	1,087
	Claims with spinal procedure codes	1,929	1,807	2,052	1,967
	Proportion of Target to Denominator Discharges	54.6%	55.1%	55.8%	55.3%
	Average Length of Stay for Target	3.7	3.7	3.7	3.8
	Average Medicare Payment for Target	\$30,199	\$29,896	\$30,708	\$30,328
	Sum of Medicare Payments for Target	\$31,799,405	\$29,746,435	\$35,160,761	\$32,966,350
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	1,127	1,063	1,260	1,215
	All Discharges with Transfer to SNF	9,268	9,120	9,319	9,399
	Proportion of Target to Denominator Discharges	12.2%	11.7%	13.5%	12.9%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,428	\$9,631	\$9,651	\$9,731
	Sum of Medicare Payments for Target	\$10,625,493	\$10,237,637	\$12,160,187	\$11,823,003
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	7,579	7,254	7,479	7,366
	All Discharges excl dc status 02,82,07,20	46,264	43,870	45,719	44,944
	Proportion of Target to Denominator Discharges	16.4%	16.5%	16.4%	16.4%
	Average Length of Stay for Target	6.4	6.6	6.1	6.1
	Average Medicare Payment for Target	\$13,961	\$14,433	\$13,545	\$13,331
	Sum of Medicare Payments for Target	\$105,813,635	\$104,699,622	\$101,300,140	\$98,198,431
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	5,362	5,216	5,413	5,272
	All Discharges excl dc status 02,82,07,20	46,264	43,870	45,719	44,944
	Proportion of Target to Denominator Discharges	11.6%	11.9%	11.8%	11.7%
	Average Length of Stay for Target	6.1	6.5	5.9	6.0
	Average Medicare Payment for Target	\$13,593	\$14,446	\$13,456	\$13,319
	Sum of Medicare Payments for Target	\$72,886,597	\$75,348,128	\$72,839,790	\$70,219,222

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Virginia

236

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	4,808	4,360	5,101	4,764
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	26,891	25,529	26,172	25,680
	<b>Proportion of Target to Denominator Discharges</b>	17.9%	17.1%	19.5%	18.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,356	\$7,531	\$6,984	\$7,010
	<b>Sum of Medicare Payments for Target</b>	\$35,366,478	\$32,834,676	\$35,626,590	\$33,396,147
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,557	1,445	1,583	1,409
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,707	10,417	11,208	10,622
	<b>Proportion of Target to Denominator Discharges</b>	14.5%	13.9%	14.1%	13.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$18,620	\$18,309	\$17,706	\$18,410
	<b>Sum of Medicare Payments for Target</b>	\$28,990,767	\$26,456,805	\$28,027,829	\$25,939,130
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,770	1,607	1,840	1,849
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	26,891	25,529	26,172	25,680
	<b>Proportion of Target to Denominator Discharges</b>	6.6%	6.3%	7.0%	7.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,665	\$6,723	\$6,293	\$6,278
	<b>Sum of Medicare Payments for Target</b>	\$11,797,542	\$10,804,518	\$11,578,537	\$11,608,450
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,647	1,929	2,099	1,960
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	10,707	10,417	11,208	10,622
	<b>Proportion of Target to Denominator Discharges</b>	15.4%	18.5%	18.7%	18.5%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$19,953	\$19,792	\$20,106	\$19,896
	<b>Sum of Medicare Payments for Target</b>	\$32,862,539	\$38,178,694	\$42,201,728	\$38,995,533

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Vermont, 6 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	98	95	90	86
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	112	104	101	95
	Proportion of Target to Denominator Discharges	87.5%	91.3%	89.1%	90.5%
	Average Length of Stay for Target	5.8	4.3	4.6	4.6
	Average Medicare Payment for Target	\$8,003	\$6,660	\$6,819	\$7,203
	Sum of Medicare Payments for Target	\$784,330	\$632,747	\$613,713	\$619,449
Respiratory Infections	DRGs 177, 178	187	184	160	139
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	262	249	260	205
	Proportion of Target to Denominator Discharges	71.4%	73.9%	61.5%	67.8%
	Average Length of Stay for Target	7.3	7.6	6.2	8.2
	Average Medicare Payment for Target	\$14,264	\$13,073	\$10,744	\$11,147
	Sum of Medicare Payments for Target	\$2,667,345	\$2,405,439	\$1,718,995	\$1,549,405
Simple Pneumonia	DRGs 193, 194	64	57	83	61
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	138	114	155	122
	Proportion of Target to Denominator Discharges	46.4%	50.0%	53.5%	50.0%
	Average Length of Stay for Target	4.6	3.8	4.4	4.2
	Average Medicare Payment for Target	\$5,699	\$4,878	\$6,010	\$6,402
	Sum of Medicare Payments for Target	\$364,740	\$278,033	\$498,806	\$390,511
Septicemia	DRGs 870, 871, 872	291	260	300	284
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	481	410	468	413
	Proportion of Target to Denominator Discharges	60.5%	63.4%	64.1%	68.8%
	Average Length of Stay for Target	6.9	6.8	6.7	6.9
	Average Medicare Payment for Target	\$9,225	\$7,864	\$8,554	\$9,010
	Sum of Medicare Payments for Target	\$2,684,581	\$2,044,696	\$2,566,217	\$2,558,801
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	14	11	25	12
	All Discharges for Surgical DRGs	839	718	813	850
	Proportion of Target to Denominator Discharges	1.7%	1.5%	3.1%	1.4%
	Average Length of Stay for Target	7.6	8.8	12.0	8.0
	Average Medicare Payment for Target	\$28,537	\$14,270	\$23,891	\$17,985
	Sum of Medicare Payments for Target	\$399,523	\$156,971	\$597,264	\$215,824

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Vermont

238

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	1,747	1,597	1,787	1,686
	All Discharges for Medical DRGs w/ or w/o CC or MCC	2,390	2,108	2,349	2,253
	Proportion of Target to Denominator Discharges	73.1%	75.8%	76.1%	74.8%
	Average Length of Stay for Target	5.8	6.3	5.7	6.2
	Average Medicare Payment for Target	\$8,483	\$8,258	\$7,666	\$7,890
	Sum of Medicare Payments for Target	\$14,819,825	\$13,187,263	\$13,698,380	\$13,303,329
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	486	390	469	459
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	781	679	756	798
	Proportion of Target to Denominator Discharges	62.2%	57.4%	62.0%	57.5%
	Average Length of Stay for Target	8.7	9.8	8.9	10.0
	Average Medicare Payment for Target	\$21,011	\$20,801	\$21,060	\$21,278
	Sum of Medicare Payments for Target	\$10,211,340	\$8,112,224	\$9,877,033	\$9,766,419
Single CC or MCC	Discharges with one CC or MCC coded on the claim	977	869	1,024	986
	All Discharges with one or more CC or MCC coded on the claim	2,230	1,985	2,251	2,142
	Proportion of Target to Denominator Discharges	43.8%	43.8%	45.5%	46.0%
	Average Length of Stay for Target	5.5	5.4	5.3	6.2
	Average Medicare Payment for Target	\$10,232	\$9,964	\$9,700	\$10,501
	Sum of Medicare Payments for Target	\$9,996,743	\$8,658,663	\$9,932,536	\$10,354,280
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	35	33	30	31
	All Discharges with one or more MCCs including severe malnutrition	87	87	75	71
	Proportion of Target to Denominator Discharges	40.2%	37.9%	40.0%	43.7%
	Average Length of Stay for Target	7.6	5.9	6.3	8.2
	Average Medicare Payment for Target	\$13,463	\$8,912	\$7,749	\$6,844
	Sum of Medicare Payments for Target	\$471,190	\$294,083	\$232,481	\$212,154
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	22	17	*	*
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	338	295	*	*
	Proportion of Target to Denominator Discharges	6.5%	5.8%	*	*
	Average Length of Stay for Target	17.7	12.7	*	*
	Average Medicare Payment for Target	\$56,654	\$42,110	*	*
	Sum of Medicare Payments for Target	\$1,246,385	\$715,864	*	*

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Vermont

239

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	*	*	*	*
	All DRGs 246-249 Discharges + outpatient claims	*	*	*	*
	Proportion of Target to Denominator Discharges	*	*	*	*
	Average Length of Stay for Target	*	*	*	*
	Average Medicare Payment for Target	*	*	*	*
	Sum of Medicare Payments for Target	*	*	*	*
Total Knee Replacement	Inpatient discharges with knee replacement px codes	31	29	33	41
	Inpatient discharges + outpatient claims with knee replacement px codes	69	72	75	95
	Proportion of Target to Denominator Discharges	44.9%	40.3%	44.0%	43.2%
	Average Medicare Payment for Target	\$11,498	\$7,588	\$10,623	\$12,821
	Sum of Medicare Payments for Target	\$356,448	\$220,042	\$350,572	\$525,676
Syncope	DRG 312	20	16	16	17
	All medical DRGs in MDC 05 Discharges	527	459	490	470
	Proportion of Target to Denominator Discharges	3.8%	3.5%	3.3%	3.6%
	Average Length of Stay for Target	4.1	2.3	3.4	6.2
	Average Medicare Payment for Target	\$3,396	\$4,086	\$4,727	\$5,155
	Sum of Medicare Payments for Target	\$67,919	\$65,369	\$75,627	\$87,637
Other Circulatory System Diagnoses	DRGs 314, 315, 316	28	16	27	21
	All medical DRGs in MDC 05 Discharges	527	459	490	470
	Proportion of Target to Denominator Discharges	5.3%	3.5%	5.5%	4.5%
	Average Length of Stay for Target	6.1	6.7	7.5	5.0
	Average Medicare Payment for Target	\$10,921	\$7,641	\$11,544	\$8,322
	Sum of Medicare Payments for Target	\$305,777	\$122,256	\$311,682	\$174,758
Other Digestive System Diagnoses	DRGs 393, 394, 395	31	25	25	32
	All medical DRGs in MDC 06 Discharges	242	235	251	254
	Proportion of Target to Denominator Discharges	12.8%	10.6%	10.0%	12.6%
	Average Length of Stay for Target	4.5	6.6	3.6	4.7
	Average Medicare Payment for Target	\$6,867	\$5,359	\$4,354	\$7,931
	Sum of Medicare Payments for Target	\$212,870	\$133,966	\$108,862	\$253,780

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report Vermont

240

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	27	17	34	29
	All medical DRGs in MDC 08 Discharges	103	89	120	124
	Proportion of Target to Denominator Discharges	26.2%	19.1%	28.3%	23.4%
	Average Length of Stay for Target	4.5	7.8	5.1	10.8
	Average Medicare Payment for Target	\$4,781	\$5,135	\$4,485	\$8,752
	Sum of Medicare Payments for Target	\$129,082	\$87,292	\$152,481	\$253,805
Spinal Fusion	Claims with spinal fusion procedure codes	41	39	41	40
	Claims with spinal procedure codes	106	110	110	109
	Proportion of Target to Denominator Discharges	38.7%	35.5%	37.3%	36.7%
	Average Length of Stay for Target	6.0	5.8	5.7	5.8
	Average Medicare Payment for Target	\$27,550	\$30,124	\$27,646	\$28,174
	Sum of Medicare Payments for Target	\$1,129,557	\$1,174,827	\$1,133,495	\$1,126,944
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	74	46	63	72
	All Discharges with Transfer to SNF	600	467	595	640
	Proportion of Target to Denominator Discharges	12.3%	9.9%	10.6%	11.3%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$5,066	\$4,055	\$6,117	\$7,572
	Sum of Medicare Payments for Target	\$374,904	\$186,524	\$385,385	\$545,169
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	446	409	501	476
	All Discharges excl dc status 02,82,07,20	3,113	2,721	3,017	2,992
	Proportion of Target to Denominator Discharges	14.3%	15.0%	16.6%	15.9%
	Average Length of Stay for Target	6.3	6.6	6.0	6.4
	Average Medicare Payment for Target	\$10,078	\$9,598	\$9,497	\$10,257
	Sum of Medicare Payments for Target	\$4,494,795	\$3,925,619	\$4,757,798	\$4,882,431
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	370	337	431	393
	All Discharges excl dc status 02,82,07,20	3,113	2,721	3,017	2,992
	Proportion of Target to Denominator Discharges	11.9%	12.4%	14.3%	13.1%
	Average Length of Stay for Target	6.2	6.6	5.8	6.2
	Average Medicare Payment for Target	\$9,126	\$8,739	\$8,585	\$9,691
	Sum of Medicare Payments for Target	\$3,376,560	\$2,944,966	\$3,699,947	\$3,808,523

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Vermont

241

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	414	367	445	427
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,351	2,030	2,191	2,156
	<b>Proportion of Target to Denominator Discharges</b>	17.6%	18.1%	20.3%	19.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$5,412	\$5,182	\$4,760	\$4,977
	<b>Sum of Medicare Payments for Target</b>	\$2,240,770	\$1,901,719	\$2,118,332	\$2,125,004
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	94	96	124	122
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	790	671	741	787
	<b>Proportion of Target to Denominator Discharges</b>	11.9%	14.3%	16.7%	15.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$14,486	\$12,101	\$11,785	\$13,329
	<b>Sum of Medicare Payments for Target</b>	\$1,361,664	\$1,161,697	\$1,461,305	\$1,626,128
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	232	185	194	211
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	2,351	2,030	2,191	2,156
	<b>Proportion of Target to Denominator Discharges</b>	9.9%	9.1%	8.9%	9.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$5,367	\$4,517	\$4,691	\$4,790
	<b>Sum of Medicare Payments for Target</b>	\$1,245,057	\$835,601	\$910,117	\$1,010,645
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	136	120	119	124
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	790	671	741	787
	<b>Proportion of Target to Denominator Discharges</b>	17.2%	17.9%	16.1%	15.8%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$13,030	\$14,601	\$15,042	\$16,292
	<b>Sum of Medicare Payments for Target</b>	\$1,772,102	\$1,752,110	\$1,790,015	\$2,020,242

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Washington, 47 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	989	936	1,005	993
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	1,100	1,036	1,110	1,099
	Proportion of Target to Denominator Discharges	89.9%	90.3%	90.5%	90.4%
	Average Length of Stay for Target	5.9	6.8	5.6	5.6
	Average Medicare Payment for Target	\$11,088	\$11,297	\$10,930	\$10,840
	Sum of Medicare Payments for Target	\$10,966,357	\$10,573,538	\$10,984,634	\$10,764,371
Respiratory Infections	DRGs 177, 178	1,483	1,806	942	1,198
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,941	2,221	1,536	1,693
	Proportion of Target to Denominator Discharges	76.4%	81.3%	61.3%	70.8%
	Average Length of Stay for Target	7.6	7.6	6.7	6.6
	Average Medicare Payment for Target	\$17,054	\$17,087	\$15,413	\$15,604
	Sum of Medicare Payments for Target	\$25,290,550	\$30,858,260	\$14,519,026	\$18,694,092
Simple Pneumonia	DRGs 193, 194	434	392	562	453
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	655	595	835	665
	Proportion of Target to Denominator Discharges	66.3%	65.9%	67.3%	68.1%
	Average Length of Stay for Target	5.2	5.9	4.9	4.8
	Average Medicare Payment for Target	\$9,157	\$9,316	\$8,946	\$9,062
	Sum of Medicare Payments for Target	\$3,974,076	\$3,651,709	\$5,027,802	\$4,105,137
Septicemia	DRGs 870, 871, 872	2,776	2,756	2,880	2,792
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	4,087	3,933	4,164	3,980
	Proportion of Target to Denominator Discharges	67.9%	70.1%	69.2%	70.2%
	Average Length of Stay for Target	7.3	7.6	7.3	7.0
	Average Medicare Payment for Target	\$16,584	\$16,358	\$14,810	\$15,312
	Sum of Medicare Payments for Target	\$46,035,817	\$45,081,272	\$42,653,326	\$42,750,229
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	198	210	226	186
	All Discharges for Surgical DRGs	8,616	8,505	9,279	9,014
	Proportion of Target to Denominator Discharges	2.3%	2.5%	2.4%	2.1%
	Average Length of Stay for Target	9.6	11.4	10.6	9.9
	Average Medicare Payment for Target	\$30,172	\$33,903	\$29,817	\$28,755
	Sum of Medicare Payments for Target	\$5,974,060	\$7,119,584	\$6,738,666	\$5,348,421

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Washington

243

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	14,946	14,917	15,062	14,935
	All Discharges for Medical DRGs w/ or w/o CC or MCC	18,347	17,962	18,575	18,298
	Proportion of Target to Denominator Discharges	81.5%	83.0%	81.1%	81.6%
	Average Length of Stay for Target	6.4	7.0	6.2	6.3
	Average Medicare Payment for Target	\$12,501	\$12,905	\$11,914	\$12,132
	Sum of Medicare Payments for Target	\$186,842,413	\$192,502,813	\$179,449,670	\$181,198,801
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	5,358	5,404	5,693	5,605
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	8,007	7,956	8,641	8,423
	Proportion of Target to Denominator Discharges	66.9%	67.9%	65.9%	66.5%
	Average Length of Stay for Target	8.3	9.1	8.5	8.3
	Average Medicare Payment for Target	\$32,384	\$33,117	\$32,415	\$31,998
	Sum of Medicare Payments for Target	\$173,511,255	\$178,964,226	\$184,541,270	\$179,348,415
Single CC or MCC	Discharges with one CC or MCC coded on the claim	8,837	8,563	8,880	8,978
	All Discharges with one or more CC or MCC coded on the claim	20,282	20,300	20,741	20,530
	Proportion of Target to Denominator Discharges	43.6%	42.2%	42.8%	43.7%
	Average Length of Stay for Target	5.6	6.0	5.3	5.2
	Average Medicare Payment for Target	\$17,354	\$17,493	\$16,918	\$16,891
	Sum of Medicare Payments for Target	\$153,355,376	\$149,796,797	\$150,233,300	\$151,649,530
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	558	539	567	633
	All Discharges with one or more MCCs including severe malnutrition	1,689	1,735	1,700	1,891
	Proportion of Target to Denominator Discharges	33.0%	31.1%	33.4%	33.5%
	Average Length of Stay for Target	8.2	9.4	8.5	7.6
	Average Medicare Payment for Target	\$17,059	\$16,471	\$16,385	\$17,063
	Sum of Medicare Payments for Target	\$9,518,784	\$8,878,132	\$9,290,521	\$10,800,579
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	319	294	160	157
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	3,193	3,145	3,151	3,039
	Proportion of Target to Denominator Discharges	10.0%	9.3%	5.1%	5.2%
	Average Length of Stay for Target	23.2	23.2	21.4	21.1
	Average Medicare Payment for Target	\$91,138	\$89,654	\$84,170	\$86,385
	Sum of Medicare Payments for Target	\$29,073,134	\$26,358,294	\$13,467,228	\$13,562,432

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Washington

244

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	526	468	558	541
	All DRGs 246-249 Discharges + outpatient claims	1,088	984	1,075	1,078
	Proportion of Target to Denominator Discharges	48.3%	47.6%	51.9%	50.2%
	Average Length of Stay for Target	3.3	3.5	3.5	3.5
	Average Medicare Payment for Target	\$19,177	\$19,923	\$19,948	\$20,360
	Sum of Medicare Payments for Target	\$10,087,153	\$9,323,972	\$11,131,171	\$11,014,789
Total Knee Replacement	Inpatient discharges with knee replacement px codes	119	160	236	207
	Inpatient discharges + outpatient claims with knee replacement px codes	1,075	1,045	1,441	1,212
	Proportion of Target to Denominator Discharges	11.1%	15.3%	16.4%	17.1%
	Average Medicare Payment for Target	\$19,967	\$22,084	\$20,592	\$20,170
	Sum of Medicare Payments for Target	\$2,376,114	\$3,533,434	\$4,859,725	\$4,175,089
Syncope	DRG 312	145	141	178	149
	All medical DRGs in MDC 05 Discharges	3,876	3,792	4,137	3,715
	Proportion of Target to Denominator Discharges	3.7%	3.7%	4.3%	4.0%
	Average Length of Stay for Target	3.6	3.7	3.1	4.0
	Average Medicare Payment for Target	\$6,240	\$6,268	\$6,104	\$6,237
	Sum of Medicare Payments for Target	\$904,769	\$883,754	\$1,086,429	\$929,373
Other Circulatory System Diagnoses	DRGs 314, 315, 316	199	239	206	203
	All medical DRGs in MDC 05 Discharges	3,876	3,792	4,137	3,715
	Proportion of Target to Denominator Discharges	5.1%	6.3%	5.0%	5.5%
	Average Length of Stay for Target	5.8	5.7	5.3	6.7
	Average Medicare Payment for Target	\$13,741	\$13,573	\$13,669	\$14,064
	Sum of Medicare Payments for Target	\$2,734,393	\$3,243,966	\$2,815,915	\$2,854,892
Other Digestive System Diagnoses	DRGs 393, 394, 395	252	236	261	253
	All medical DRGs in MDC 06 Discharges	2,054	1,945	2,097	2,088
	Proportion of Target to Denominator Discharges	12.3%	12.1%	12.4%	12.1%
	Average Length of Stay for Target	5.0	5.0	4.7	6.2
	Average Medicare Payment for Target	\$10,061	\$9,607	\$9,470	\$9,589
	Sum of Medicare Payments for Target	\$2,535,383	\$2,267,325	\$2,471,733	\$2,425,935

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Washington

245

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	171	156	189	173
	All medical DRGs in MDC 08 Discharges	774	721	806	756
	Proportion of Target to Denominator Discharges	22.1%	21.6%	23.4%	22.9%
	Average Length of Stay for Target	5.1	6.7	5.0	5.4
	Average Medicare Payment for Target	\$8,781	\$9,108	\$8,584	\$8,317
	Sum of Medicare Payments for Target	\$1,501,611	\$1,420,904	\$1,622,428	\$1,438,758
Spinal Fusion	Claims with spinal fusion procedure codes	653	619	669	644
	Claims with spinal procedure codes	1,385	1,268	1,363	1,330
	Proportion of Target to Denominator Discharges	47.1%	48.8%	49.1%	48.4%
	Average Length of Stay for Target	4.1	5.1	4.0	4.3
	Average Medicare Payment for Target	\$36,144	\$41,245	\$37,739	\$37,562
	Sum of Medicare Payments for Target	\$23,601,925	\$25,530,843	\$25,247,515	\$24,189,773
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	475	425	445	490
	All Discharges with Transfer to SNF	4,863	4,639	5,044	5,147
	Proportion of Target to Denominator Discharges	9.8%	9.2%	8.8%	9.5%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$11,764	\$11,709	\$11,904	\$11,374
	Sum of Medicare Payments for Target	\$5,587,881	\$4,976,285	\$5,297,495	\$5,573,412
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,765	3,660	4,000	3,698
	All Discharges excl dc status 02,82,07,20	26,111	25,412	27,326	26,547
	Proportion of Target to Denominator Discharges	14.4%	14.4%	14.6%	13.9%
	Average Length of Stay for Target	6.5	7.1	6.6	6.7
	Average Medicare Payment for Target	\$17,152	\$18,314	\$16,766	\$17,370
	Sum of Medicare Payments for Target	\$64,578,543	\$67,029,817	\$67,062,522	\$64,235,582
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,841	2,709	3,023	2,700
	All Discharges excl dc status 02,82,07,20	26,111	25,412	27,326	26,547
	Proportion of Target to Denominator Discharges	10.9%	10.7%	11.1%	10.2%
	Average Length of Stay for Target	6.4	6.7	6.2	6.4
	Average Medicare Payment for Target	\$16,751	\$17,803	\$16,187	\$16,988
	Sum of Medicare Payments for Target	\$47,588,607	\$48,227,470	\$48,934,358	\$45,868,836

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Washington

246

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,885	2,822	3,170	2,937
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	16,289	15,867	16,618	16,108
	<b>Proportion of Target to Denominator Discharges</b>	17.7%	17.8%	19.1%	18.2%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$8,678	\$8,750	\$8,425	\$8,456
	<b>Sum of Medicare Payments for Target</b>	\$25,036,237	\$24,691,768	\$26,708,026	\$24,835,832
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,070	982	1,132	1,100
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	7,714	7,599	8,311	8,047
	<b>Proportion of Target to Denominator Discharges</b>	13.9%	12.9%	13.6%	13.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$20,929	\$21,283	\$21,356	\$21,048
	<b>Sum of Medicare Payments for Target</b>	\$22,394,115	\$20,899,546	\$24,174,895	\$23,152,283
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,345	1,240	1,445	1,454
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	16,289	15,867	16,618	16,108
	<b>Proportion of Target to Denominator Discharges</b>	8.3%	7.8%	8.7%	9.0%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$7,762	\$7,745	\$7,242	\$7,640
	<b>Sum of Medicare Payments for Target</b>	\$10,439,586	\$9,604,067	\$10,465,315	\$11,108,986
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,487	1,489	1,744	1,748
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	7,714	7,599	8,311	8,047
	<b>Proportion of Target to Denominator Discharges</b>	19.3%	19.6%	21.0%	21.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$25,999	\$25,952	\$24,228	\$24,456
	<b>Sum of Medicare Payments for Target</b>	\$38,660,229	\$38,642,415	\$42,253,099	\$42,749,208

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Wisconsin, 68 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	662	660	600	612
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	698	726	675	691
	Proportion of Target to Denominator Discharges	94.8%	90.9%	88.9%	88.6%
	Average Length of Stay for Target	5.3	5.8	4.8	4.9
	Average Medicare Payment for Target	\$9,523	\$9,826	\$9,822	\$9,646
	Sum of Medicare Payments for Target	\$6,303,928	\$6,485,287	\$5,893,456	\$5,903,341
Respiratory Infections	DRGs 177, 178	2,168	1,677	764	963
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	2,791	2,216	1,327	1,455
	Proportion of Target to Denominator Discharges	77.7%	75.7%	57.6%	66.2%
	Average Length of Stay for Target	7.1	7.3	5.6	5.6
	Average Medicare Payment for Target	\$16,100	\$15,658	\$13,447	\$13,547
	Sum of Medicare Payments for Target	\$34,905,615	\$26,259,117	\$10,273,132	\$13,046,000
Simple Pneumonia	DRGs 193, 194	589	482	526	440
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	904	815	842	674
	Proportion of Target to Denominator Discharges	65.2%	59.1%	62.5%	65.3%
	Average Length of Stay for Target	5.2	4.7	4.6	4.1
	Average Medicare Payment for Target	\$7,979	\$7,730	\$7,793	\$7,643
	Sum of Medicare Payments for Target	\$4,699,755	\$3,725,710	\$4,099,294	\$3,362,799
Septicemia	DRGs 870, 871, 872	2,563	2,364	2,290	2,189
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	3,964	3,599	3,457	3,275
	Proportion of Target to Denominator Discharges	64.7%	65.7%	66.2%	66.8%
	Average Length of Stay for Target	6.7	7.1	6.2	6.3
	Average Medicare Payment for Target	\$14,416	\$14,786	\$12,939	\$12,694
	Sum of Medicare Payments for Target	\$36,948,360	\$34,954,414	\$29,631,133	\$27,787,441
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	223	249	213	184
	All Discharges for Surgical DRGs	7,322	7,118	7,505	7,342
	Proportion of Target to Denominator Discharges	3.0%	3.5%	2.8%	2.5%
	Average Length of Stay for Target	9.7	10.9	8.4	10.5
	Average Medicare Payment for Target	\$27,786	\$29,124	\$27,252	\$26,019
	Sum of Medicare Payments for Target	\$6,196,353	\$7,251,827	\$5,804,631	\$4,787,450

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	14,092	13,179	12,802	12,401
	All Discharges for Medical DRGs w/ or w/o CC or MCC	17,603	16,454	16,490	16,111
	Proportion of Target to Denominator Discharges	80.1%	80.1%	77.6%	77.0%
	Average Length of Stay for Target	5.8	6.0	5.5	5.4
	Average Medicare Payment for Target	\$11,437	\$11,263	\$10,551	\$10,595
	Sum of Medicare Payments for Target	\$161,176,251	\$148,431,331	\$135,067,891	\$131,385,891
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	4,505	4,462	4,604	4,552
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	6,802	6,616	7,005	6,840
	Proportion of Target to Denominator Discharges	66.2%	67.4%	65.7%	66.5%
	Average Length of Stay for Target	8.1	8.6	7.7	7.7
	Average Medicare Payment for Target	\$27,597	\$27,809	\$26,578	\$26,373
	Sum of Medicare Payments for Target	\$124,325,535	\$124,082,963	\$122,363,860	\$120,051,825
Single CC or MCC	Discharges with one CC or MCC coded on the claim	8,109	7,586	7,667	7,435
	All Discharges with one or more CC or MCC coded on the claim	18,557	17,619	17,397	16,936
	Proportion of Target to Denominator Discharges	43.7%	43.1%	44.1%	43.9%
	Average Length of Stay for Target	5.2	5.5	5.0	5.0
	Average Medicare Payment for Target	\$14,690	\$14,642	\$14,358	\$14,615
	Sum of Medicare Payments for Target	\$119,124,171	\$111,070,514	\$110,082,577	\$108,664,356
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	393	377	418	397
	All Discharges with one or more MCCs including severe malnutrition	1,082	1,115	1,085	1,038
	Proportion of Target to Denominator Discharges	36.3%	33.8%	38.5%	38.2%
	Average Length of Stay for Target	7.3	8.1	7.2	7.6
	Average Medicare Payment for Target	\$15,670	\$14,185	\$14,585	\$14,923
	Sum of Medicare Payments for Target	\$6,158,404	\$5,347,800	\$6,096,382	\$5,924,239
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	325	292	160	143
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	2,973	2,726	2,495	2,388
	Proportion of Target to Denominator Discharges	10.9%	10.7%	6.4%	6.0%
	Average Length of Stay for Target	22.4	25.3	23.4	22.6
	Average Medicare Payment for Target	\$74,547	\$81,429	\$82,317	\$86,633
	Sum of Medicare Payments for Target	\$24,227,802	\$23,777,178	\$13,170,724	\$12,388,531

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	394	415	409	445
	All DRGs 246-249 Discharges + outpatient claims	812	858	864	858
	Proportion of Target to Denominator Discharges	48.5%	48.4%	47.3%	51.9%
	Average Length of Stay for Target	3.1	3.3	3.1	3.5
	Average Medicare Payment for Target	\$17,553	\$18,073	\$17,023	\$17,471
	Sum of Medicare Payments for Target	\$6,915,755	\$7,500,462	\$6,962,397	\$7,774,375
Total Knee Replacement	Inpatient discharges with knee replacement px codes	312	275	337	285
	Inpatient discharges + outpatient claims with knee replacement px codes	1,211	1,145	1,280	1,231
	Proportion of Target to Denominator Discharges	25.8%	24.0%	26.3%	23.2%
	Average Medicare Payment for Target	\$14,720	\$15,161	\$15,519	\$15,346
	Sum of Medicare Payments for Target	\$4,592,710	\$4,169,316	\$5,229,974	\$4,373,739
Syncope	DRG 312	96	104	140	154
	All medical DRGs in MDC 05 Discharges	3,316	3,324	3,540	3,303
	Proportion of Target to Denominator Discharges	2.9%	3.1%	4.0%	4.7%
	Average Length of Stay for Target	4.1	3.4	3.0	3.0
	Average Medicare Payment for Target	\$6,653	\$5,624	\$5,521	\$5,273
	Sum of Medicare Payments for Target	\$638,656	\$584,943	\$772,964	\$812,044
Other Circulatory System Diagnoses	DRGs 314, 315, 316	163	177	209	174
	All medical DRGs in MDC 05 Discharges	3,316	3,324	3,540	3,303
	Proportion of Target to Denominator Discharges	4.9%	5.3%	5.9%	5.3%
	Average Length of Stay for Target	5.1	5.9	5.8	5.6
	Average Medicare Payment for Target	\$12,306	\$13,121	\$12,333	\$12,397
	Sum of Medicare Payments for Target	\$2,005,828	\$2,322,504	\$2,577,553	\$2,156,993
Other Digestive System Diagnoses	DRGs 393, 394, 395	237	198	228	226
	All medical DRGs in MDC 06 Discharges	1,814	1,792	1,880	1,825
	Proportion of Target to Denominator Discharges	13.1%	11.0%	12.1%	12.4%
	Average Length of Stay for Target	3.9	4.5	4.9	4.0
	Average Medicare Payment for Target	\$8,369	\$9,053	\$8,802	\$8,141
	Sum of Medicare Payments for Target	\$1,983,344	\$1,792,432	\$2,006,924	\$1,839,946

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Wisconsin

250

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	181	157	192	216
	All medical DRGs in MDC 08 Discharges	798	698	807	839
	Proportion of Target to Denominator Discharges	22.7%	22.5%	23.8%	25.7%
	Average Length of Stay for Target	4.7	5.0	4.6	5.2
	Average Medicare Payment for Target	\$7,667	\$7,663	\$7,275	\$7,262
	Sum of Medicare Payments for Target	\$1,387,672	\$1,203,083	\$1,396,714	\$1,568,589
Spinal Fusion	Claims with spinal fusion procedure codes	372	331	340	319
	Claims with spinal procedure codes	932	885	873	878
	Proportion of Target to Denominator Discharges	39.9%	37.4%	38.9%	36.3%
	Average Length of Stay for Target	3.8	4.3	3.6	4.3
	Average Medicare Payment for Target	\$29,608	\$30,777	\$31,105	\$31,326
	Sum of Medicare Payments for Target	\$11,014,009	\$10,187,314	\$10,575,632	\$9,992,953
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	511	531	540	560
	All Discharges with Transfer to SNF	4,672	4,778	4,827	4,737
	Proportion of Target to Denominator Discharges	10.9%	11.1%	11.2%	11.8%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$9,559	\$9,883	\$10,074	\$9,761
	Sum of Medicare Payments for Target	\$4,884,490	\$5,248,026	\$5,439,947	\$5,465,898
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	3,742	3,698	3,740	3,625
	All Discharges excl dc status 02,82,07,20	24,429	23,251	23,898	23,242
	Proportion of Target to Denominator Discharges	15.3%	15.9%	15.6%	15.6%
	Average Length of Stay for Target	6.2	6.5	6.0	6.2
	Average Medicare Payment for Target	\$15,007	\$15,072	\$14,554	\$14,781
	Sum of Medicare Payments for Target	\$56,155,169	\$55,736,952	\$54,433,642	\$53,581,296
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	2,914	2,816	2,846	2,656
	All Discharges excl dc status 02,82,07,20	24,429	23,251	23,898	23,242
	Proportion of Target to Denominator Discharges	11.9%	12.1%	11.9%	11.4%
	Average Length of Stay for Target	6.1	6.2	5.9	5.9
	Average Medicare Payment for Target	\$14,804	\$14,585	\$14,361	\$14,712
	Sum of Medicare Payments for Target	\$43,138,155	\$41,070,193	\$40,871,233	\$39,076,331

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Wisconsin

251

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	2,864	2,670	2,954	2,890
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	15,423	14,435	14,513	13,887
	<b>Proportion of Target to Denominator Discharges</b>	18.6%	18.5%	20.4%	20.8%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$7,943	\$7,811	\$7,478	\$7,517
	<b>Sum of Medicare Payments for Target</b>	\$22,748,923	\$20,856,549	\$22,090,029	\$21,723,602
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	978	876	969	889
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,170	6,087	6,258	6,117
	<b>Proportion of Target to Denominator Discharges</b>	15.9%	14.4%	15.5%	14.5%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$17,027	\$17,751	\$17,913	\$17,641
	<b>Sum of Medicare Payments for Target</b>	\$16,652,815	\$15,549,752	\$17,358,115	\$15,682,994
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,223	1,197	1,325	1,163
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	15,423	14,435	14,513	13,887
	<b>Proportion of Target to Denominator Discharges</b>	7.9%	8.3%	9.1%	8.4%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$6,967	\$6,550	\$6,420	\$6,477
	<b>Sum of Medicare Payments for Target</b>	\$8,520,222	\$7,840,128	\$8,507,030	\$7,532,617
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	942	969	1,116	1,054
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	6,170	6,087	6,258	6,117
	<b>Proportion of Target to Denominator Discharges</b>	15.3%	15.9%	17.8%	17.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$20,169	\$19,501	\$19,448	\$20,705
	<b>Sum of Medicare Payments for Target</b>	\$18,999,352	\$18,896,255	\$21,704,459	\$21,823,063

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - West Virginia, 24 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	327	321	323	344
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	380	382	390	412
	Proportion of Target to Denominator Discharges	86.1%	84.0%	82.8%	83.5%
	Average Length of Stay for Target	4.7	5.0	4.7	4.9
	Average Medicare Payment for Target	\$8,810	\$9,130	\$8,692	\$8,687
	Sum of Medicare Payments for Target	\$2,880,722	\$2,930,802	\$2,807,631	\$2,988,326
Respiratory Infections	DRGs 177, 178	1,015	1,102	418	661
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	1,434	1,478	832	987
	Proportion of Target to Denominator Discharges	70.8%	74.6%	50.2%	67.0%
	Average Length of Stay for Target	7.2	7.6	5.8	5.5
	Average Medicare Payment for Target	\$14,199	\$13,553	\$12,044	\$12,220
	Sum of Medicare Payments for Target	\$14,412,439	\$14,935,157	\$5,034,258	\$8,077,116
Simple Pneumonia	DRGs 193, 194	372	348	387	295
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	627	575	689	488
	Proportion of Target to Denominator Discharges	59.3%	60.5%	56.2%	60.5%
	Average Length of Stay for Target	4.9	5.4	5.1	5.1
	Average Medicare Payment for Target	\$7,144	\$7,082	\$6,868	\$6,898
	Sum of Medicare Payments for Target	\$2,657,673	\$2,464,457	\$2,657,835	\$2,034,826
Septicemia	DRGs 870, 871, 872	1,430	1,308	1,188	1,165
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	2,400	2,147	2,071	1,913
	Proportion of Target to Denominator Discharges	59.6%	60.9%	57.4%	60.9%
	Average Length of Stay for Target	7.7	7.6	6.6	7.0
	Average Medicare Payment for Target	\$14,511	\$14,427	\$12,763	\$12,896
	Sum of Medicare Payments for Target	\$20,750,705	\$18,870,078	\$15,162,113	\$15,023,756
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	126	115	106	103
	All Discharges for Surgical DRGs	3,432	3,389	3,612	3,526
	Proportion of Target to Denominator Discharges	3.7%	3.4%	2.9%	2.9%
	Average Length of Stay for Target	9.8	10.8	8.8	9.5
	Average Medicare Payment for Target	\$24,819	\$26,583	\$23,369	\$23,861
	Sum of Medicare Payments for Target	\$3,127,174	\$3,057,073	\$2,477,156	\$2,457,656

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	7,003	6,851	6,533	6,750
	All Discharges for Medical DRGs w/ or w/o CC or MCC	9,137	8,658	8,760	8,879
	Proportion of Target to Denominator Discharges	76.6%	79.1%	74.6%	76.0%
	Average Length of Stay for Target	5.8	6.1	5.3	5.4
	Average Medicare Payment for Target	\$9,749	\$10,023	\$8,835	\$9,038
	Sum of Medicare Payments for Target	\$68,269,553	\$68,669,949	\$57,719,895	\$61,005,696
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	1,958	2,034	2,097	2,038
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	3,145	3,131	3,378	3,280
	Proportion of Target to Denominator Discharges	62.3%	65.0%	62.1%	62.1%
	Average Length of Stay for Target	8.2	8.8	7.7	8.0
	Average Medicare Payment for Target	\$24,034	\$23,575	\$22,983	\$23,212
	Sum of Medicare Payments for Target	\$47,058,291	\$47,950,912	\$48,196,158	\$47,307,029
Single CC or MCC	Discharges with one CC or MCC coded on the claim	3,875	3,734	3,758	3,801
	All Discharges with one or more CC or MCC coded on the claim	8,944	8,866	8,626	8,777
	Proportion of Target to Denominator Discharges	43.3%	42.1%	43.6%	43.3%
	Average Length of Stay for Target	5.1	5.4	4.8	4.9
	Average Medicare Payment for Target	\$12,212	\$12,180	\$11,845	\$11,701
	Sum of Medicare Payments for Target	\$47,321,153	\$45,478,781	\$44,513,696	\$44,474,612
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	115	91	112	98
	All Discharges with one or more MCCs including severe malnutrition	341	336	349	326
	Proportion of Target to Denominator Discharges	33.7%	27.1%	32.1%	30.1%
	Average Length of Stay for Target	5.8	5.3	6.8	6.3
	Average Medicare Payment for Target	\$14,903	\$12,915	\$12,875	\$12,227
	Sum of Medicare Payments for Target	\$1,713,843	\$1,175,281	\$1,441,945	\$1,198,268
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	317	215	134	114
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	1,758	1,538	1,341	1,281
	Proportion of Target to Denominator Discharges	18.0%	14.0%	10.0%	8.9%
	Average Length of Stay for Target	19.8	20.7	17.8	18.6
	Average Medicare Payment for Target	\$62,120	\$62,878	\$57,480	\$56,401
	Sum of Medicare Payments for Target	\$19,692,155	\$13,518,766	\$7,702,331	\$6,429,704

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report West Virginia

254

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	267	231	271	283
	All DRGs 246-249 Discharges + outpatient claims	539	492	514	543
	Proportion of Target to Denominator Discharges	49.5%	47.0%	52.7%	52.1%
	Average Length of Stay for Target	3.7	3.9	3.7	4.0
	Average Medicare Payment for Target	\$15,744	\$15,744	\$15,015	\$15,446
	Sum of Medicare Payments for Target	\$4,203,662	\$3,636,813	\$4,068,974	\$4,371,232
Total Knee Replacement	Inpatient discharges with knee replacement px codes	167	145	168	139
	Inpatient discharges + outpatient claims with knee replacement px codes	359	355	399	371
	Proportion of Target to Denominator Discharges	46.5%	40.8%	42.1%	37.5%
	Average Medicare Payment for Target	\$12,792	\$14,720	\$13,196	\$13,353
	Sum of Medicare Payments for Target	\$2,136,307	\$2,134,368	\$2,216,906	\$1,856,000
Syncope	DRG 312	100	100	121	109
	All medical DRGs in MDC 05 Discharges	1,887	1,793	2,032	1,943
	Proportion of Target to Denominator Discharges	5.3%	5.6%	6.0%	5.6%
	Average Length of Stay for Target	3.1	4.0	2.8	3.0
	Average Medicare Payment for Target	\$4,776	\$5,032	\$4,665	\$4,403
	Sum of Medicare Payments for Target	\$477,617	\$503,169	\$564,513	\$479,926
Other Circulatory System Diagnoses	DRGs 314, 315, 316	74	79	78	89
	All medical DRGs in MDC 05 Discharges	1,887	1,793	2,032	1,943
	Proportion of Target to Denominator Discharges	3.9%	4.4%	3.8%	4.6%
	Average Length of Stay for Target	6.0	7.8	5.1	5.6
	Average Medicare Payment for Target	\$11,026	\$10,974	\$10,840	\$10,392
	Sum of Medicare Payments for Target	\$815,907	\$866,969	\$845,535	\$924,865
Other Digestive System Diagnoses	DRGs 393, 394, 395	96	71	96	117
	All medical DRGs in MDC 06 Discharges	883	826	963	1,018
	Proportion of Target to Denominator Discharges	10.9%	8.6%	10.0%	11.5%
	Average Length of Stay for Target	4.3	5.0	3.9	3.7
	Average Medicare Payment for Target	\$6,602	\$7,648	\$6,645	\$6,899
	Sum of Medicare Payments for Target	\$633,767	\$542,990	\$637,894	\$807,175

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report West Virginia

255

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	94	95	92	77
	All medical DRGs in MDC 08 Discharges	323	287	339	317
	Proportion of Target to Denominator Discharges	29.1%	33.1%	27.1%	24.3%
	Average Length of Stay for Target	5.3	4.4	4.3	3.8
	Average Medicare Payment for Target	\$6,311	\$6,145	\$6,464	\$6,555
	Sum of Medicare Payments for Target	\$593,202	\$583,761	\$594,701	\$504,769
Spinal Fusion	Claims with spinal fusion procedure codes	147	161	195	170
	Claims with spinal procedure codes	368	360	410	388
	Proportion of Target to Denominator Discharges	39.9%	44.7%	47.6%	43.8%
	Average Length of Stay for Target	3.7	3.8	3.8	3.9
	Average Medicare Payment for Target	\$22,657	\$23,928	\$23,757	\$25,220
	Sum of Medicare Payments for Target	\$3,330,628	\$3,852,457	\$4,632,558	\$4,287,367
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	221	238	254	250
	All Discharges with Transfer to SNF	2,093	2,155	2,080	2,144
	Proportion of Target to Denominator Discharges	10.6%	11.0%	12.2%	11.7%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$8,524	\$8,591	\$8,461	\$7,972
	Sum of Medicare Payments for Target	\$1,883,725	\$2,044,597	\$2,149,168	\$1,992,928
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	2,201	2,207	2,281	2,323
	All Discharges excl dc status 02,82,07,20	12,292	11,872	12,446	12,378
	Proportion of Target to Denominator Discharges	17.9%	18.6%	18.3%	18.8%
	Average Length of Stay for Target	6.6	6.7	6.1	6.0
	Average Medicare Payment for Target	\$12,555	\$12,531	\$11,644	\$11,640
	Sum of Medicare Payments for Target	\$27,633,340	\$27,655,174	\$26,561,046	\$27,040,788
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	1,643	1,689	1,714	1,712
	All Discharges excl dc status 02,82,07,20	12,292	11,872	12,446	12,378
	Proportion of Target to Denominator Discharges	13.4%	14.2%	13.8%	13.8%
	Average Length of Stay for Target	6.4	6.5	6.0	5.9
	Average Medicare Payment for Target	\$12,187	\$12,239	\$11,580	\$11,484
	Sum of Medicare Payments for Target	\$20,022,730	\$20,671,811	\$19,848,287	\$19,660,144

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023



# Target Area Summary Report West Virginia

256

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	1,584	1,347	1,659	1,685
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,783	8,372	8,617	8,594
	<b>Proportion of Target to Denominator Discharges</b>	18.0%	16.1%	19.3%	19.6%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$6,427	\$6,695	\$6,118	\$6,136
	<b>Sum of Medicare Payments for Target</b>	\$10,180,179	\$9,018,663	\$10,149,430	\$10,338,523
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	381	391	457	472
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,175	3,185	3,375	3,303
	<b>Proportion of Target to Denominator Discharges</b>	12.0%	12.3%	13.5%	14.3%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$14,675	\$14,007	\$14,655	\$14,362
	<b>Sum of Medicare Payments for Target</b>	\$5,591,112	\$5,476,910	\$6,697,411	\$6,778,912
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	674	601	673	621
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	8,783	8,372	8,617	8,594
	<b>Proportion of Target to Denominator Discharges</b>	7.7%	7.2%	7.8%	7.2%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$5,899	\$5,784	\$5,518	\$5,695
	<b>Sum of Medicare Payments for Target</b>	\$3,976,008	\$3,475,961	\$3,713,305	\$3,536,338
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	526	516	536	499
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	3,175	3,185	3,375	3,303
	<b>Proportion of Target to Denominator Discharges</b>	16.6%	16.2%	15.9%	15.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$15,328	\$16,935	\$17,062	\$16,751
	<b>Sum of Medicare Payments for Target</b>	\$8,062,450	\$8,738,580	\$9,145,398	\$8,358,807

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

## State-Level Target Area Summary Report Q4FY22 - Wyoming, 10 Hospitals

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	55	64	71	53
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	62	70	77	61
	Proportion of Target to Denominator Discharges	88.7%	91.4%	92.2%	86.9%
	Average Length of Stay for Target	3.4	4.4	4.5	4.6
	Average Medicare Payment for Target	\$10,808	\$11,802	\$10,867	\$11,019
	Sum of Medicare Payments for Target	\$594,431	\$755,360	\$771,584	\$584,009
Respiratory Infections	DRGs 177, 178	438	280	92	165
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	561	414	232	290
	Proportion of Target to Denominator Discharges	78.1%	67.6%	39.7%	56.9%
	Average Length of Stay for Target	7.4	6.1	4.6	4.1
	Average Medicare Payment for Target	\$23,290	\$21,140	\$18,079	\$19,499
	Sum of Medicare Payments for Target	\$10,200,898	\$5,919,320	\$1,663,252	\$3,217,405
Simple Pneumonia	DRGs 193, 194	117	126	130	105
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	168	173	187	180
	Proportion of Target to Denominator Discharges	69.6%	72.8%	69.5%	58.3%
	Average Length of Stay for Target	3.9	4.4	4.0	4.4
	Average Medicare Payment for Target	\$12,143	\$11,240	\$11,359	\$10,893
	Sum of Medicare Payments for Target	\$1,420,786	\$1,416,207	\$1,476,682	\$1,143,769
Septicemia	DRGs 870, 871, 872	254	223	204	231
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	514	441	446	433
	Proportion of Target to Denominator Discharges	49.4%	50.6%	45.7%	53.3%
	Average Length of Stay for Target	6.4	6.1	5.4	5.8
	Average Medicare Payment for Target	\$20,132	\$18,131	\$16,556	\$16,438
	Sum of Medicare Payments for Target	\$5,113,536	\$4,043,217	\$3,377,427	\$3,797,068
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	18	15	18	23
	All Discharges for Surgical DRGs	608	662	670	660
	Proportion of Target to Denominator Discharges	3.0%	2.3%	2.7%	3.5%
	Average Length of Stay for Target	6.9	9.3	8.3	5.5
	Average Medicare Payment for Target	\$35,297	\$33,092	\$40,979	\$30,223
	Sum of Medicare Payments for Target	\$635,350	\$496,386	\$737,627	\$695,126

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Wyoming

258

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical DRGs with CC or MCC	Medical DRGs w/CC or MCC	1,679	1,507	1,392	1,436
	All Discharges for Medical DRGs w/ or w/o CC or MCC	2,077	1,905	1,808	1,913
	Proportion of Target to Denominator Discharges	80.8%	79.1%	77.0%	75.1%
	Average Length of Stay for Target	5.5	5.1	4.7	4.7
	Average Medicare Payment for Target	\$16,086	\$14,940	\$13,247	\$13,533
	Sum of Medicare Payments for Target	\$27,008,424	\$22,513,885	\$18,439,625	\$19,433,285
Surgical DRGs with CC or MCC	Surgical DRGs w/ CC or MCC	342	356	350	360
	All Discharges for Surgical DRGs w/ or w/o CC or MCC	563	609	628	622
	Proportion of Target to Denominator Discharges	60.7%	58.5%	55.7%	57.9%
	Average Length of Stay for Target	6.4	6.6	6.5	6.6
	Average Medicare Payment for Target	\$31,690	\$33,451	\$32,360	\$32,740
	Sum of Medicare Payments for Target	\$10,837,944	\$11,908,609	\$11,325,985	\$11,786,483
Single CC or MCC	Discharges with one CC or MCC coded on the claim	1,013	932	826	869
	All Discharges with one or more CC or MCC coded on the claim	2,012	1,860	1,741	1,788
	Proportion of Target to Denominator Discharges	50.3%	50.1%	47.4%	48.6%
	Average Length of Stay for Target	4.8	4.5	4.1	4.2
	Average Medicare Payment for Target	\$18,513	\$18,532	\$17,108	\$17,403
	Sum of Medicare Payments for Target	\$18,753,527	\$17,272,158	\$14,130,884	\$15,123,049
Severe Malnutrition	Discharges with severe malnutrition as the only MCC on the claim	33	43	56	71
	All Discharges with one or more MCCs including severe malnutrition	95	93	129	147
	Proportion of Target to Denominator Discharges	34.7%	46.2%	43.4%	48.3%
	Average Length of Stay for Target	5.7	5.1	5.8	4.4
	Average Medicare Payment for Target	\$17,937	\$20,737	\$17,957	\$17,466
	Sum of Medicare Payments for Target	\$591,911	\$891,684	\$1,005,594	\$1,240,108
Ventilator Support	DRGs 003, 004, 207, 870, 927, 933 with mech vent >96 hrs	59	22	*	*
	All DRGs 003-004, 207-208, 870-872, 927-929, 933-934 Discharges	339	258	*	*
	Proportion of Target to Denominator Discharges	17.4%	8.5%	*	*
	Average Length of Stay for Target	21.5	26.9	*	*
	Average Medicare Payment for Target	\$85,989	\$116,262	*	*
	Sum of Medicare Payments for Target	\$5,073,373	\$2,557,763	*	*

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Wyoming

259

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Percutaneous Cardiovascular Procedures	DRGs 246, 247, 248, 249	41	40	51	47
	All DRGs 246-249 Discharges + outpatient claims	77	66	107	83
	Proportion of Target to Denominator Discharges	53.2%	60.6%	47.7%	56.6%
	Average Length of Stay for Target	2.3	3.7	2.4	3.0
	Average Medicare Payment for Target	\$22,159	\$23,008	\$21,122	\$20,740
	Sum of Medicare Payments for Target	\$908,534	\$920,333	\$1,077,216	\$974,778
Total Knee Replacement	Inpatient discharges with knee replacement px codes	34	33	35	38
	Inpatient discharges + outpatient claims with knee replacement px codes	107	136	134	137
	Proportion of Target to Denominator Discharges	31.8%	24.3%	26.1%	27.7%
	Average Medicare Payment for Target	\$19,121	\$21,962	\$17,184	\$20,312
	Sum of Medicare Payments for Target	\$650,116	\$724,742	\$601,444	\$771,873
Syncope	DRG 312	13	13	*	*
	All medical DRGs in MDC 05 Discharges	295	331	*	*
	Proportion of Target to Denominator Discharges	4.4%	3.9%	*	*
	Average Length of Stay for Target	3.1	4.9	*	*
	Average Medicare Payment for Target	\$7,499	\$7,111	*	*
	Sum of Medicare Payments for Target	\$97,482	\$92,440	*	*
Other Circulatory System Diagnoses	DRGs 314, 315, 316	20	14	15	16
	All medical DRGs in MDC 05 Discharges	295	331	356	345
	Proportion of Target to Denominator Discharges	6.8%	4.2%	4.2%	4.6%
	Average Length of Stay for Target	4.8	6.0	4.2	7.2
	Average Medicare Payment for Target	\$15,964	\$19,198	\$15,020	\$16,384
	Sum of Medicare Payments for Target	\$319,281	\$268,777	\$225,301	\$262,139
Other Digestive System Diagnoses	DRGs 393, 394, 395	20	14	26	18
	All medical DRGs in MDC 06 Discharges	212	215	207	222
	Proportion of Target to Denominator Discharges	9.4%	6.5%	12.6%	8.1%
	Average Length of Stay for Target	3.2	3.4	4.0	4.8
	Average Medicare Payment for Target	\$9,941	\$9,496	\$11,740	\$10,462
	Sum of Medicare Payments for Target	\$198,821	\$132,947	\$305,251	\$188,322

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Wyoming

260

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Medical Back Problems	DRGs 551, 552	18	15	20	29
	All medical DRGs in MDC 08 Discharges	78	69	74	103
	Proportion of Target to Denominator Discharges	23.1%	21.7%	27.0%	28.2%
	Average Length of Stay for Target	3.2	3.1	6.2	4.4
	Average Medicare Payment for Target	\$10,752	\$9,480	\$9,837	\$11,025
	Sum of Medicare Payments for Target	\$193,544	\$142,207	\$196,743	\$319,739
Spinal Fusion	Claims with spinal fusion procedure codes	52	66	74	73
	Claims with spinal procedure codes	103	122	109	125
	Proportion of Target to Denominator Discharges	50.5%	54.1%	67.9%	58.4%
	Average Length of Stay for Target	2.4	2.5	2.6	2.7
	Average Medicare Payment for Target	\$27,665	\$38,355	\$30,785	\$37,258
	Sum of Medicare Payments for Target	\$1,438,571	\$2,531,431	\$2,278,087	\$2,719,864
Three-Day Skilled Nursing Facility-Qualifying Admissions	Three-Day Stays with Transfer to SNF	77	61	59	75
	All Discharges with Transfer to SNF	395	381	375	385
	Proportion of Target to Denominator Discharges	19.5%	16.0%	15.7%	19.5%
	Average Length of Stay for Target	3.0	3.0	3.0	3.0
	Average Medicare Payment for Target	\$13,303	\$14,907	\$14,391	\$12,344
	Sum of Medicare Payments for Target	\$1,024,309	\$909,347	\$849,094	\$925,824
30-Day Readmissions to Same Hospital or Elsewhere	Thirty-Day Readmissions to same or elsewhere excl dc status 02,82,07	307	341	314	326
	All Discharges excl dc status 02,82,07,20	2,559	2,512	2,425	2,485
	Proportion of Target to Denominator Discharges	12.0%	13.6%	12.9%	13.1%
	Average Length of Stay for Target	5.2	5.6	5.4	5.9
	Average Medicare Payment for Target	\$17,837	\$17,236	\$15,450	\$17,188
	Sum of Medicare Payments for Target	\$5,475,869	\$5,877,526	\$4,851,338	\$5,603,376
30-Day Readmissions to Same Hospital	Thirty-Day Readmissions to same hospital excl dc status 02,82,07	259	281	241	250
	All Discharges excl dc status 02,82,07,20	2,559	2,512	2,425	2,485
	Proportion of Target to Denominator Discharges	10.1%	11.2%	9.9%	10.1%
	Average Length of Stay for Target	5.0	5.4	5.1	5.9
	Average Medicare Payment for Target	\$17,504	\$16,607	\$14,255	\$17,167
	Sum of Medicare Payments for Target	\$4,533,452	\$4,666,619	\$3,435,363	\$4,291,796

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023

# Target Area Summary Report Wyoming

261

Target Area	Data for four quarters ending	Q1FY2022	Q2FY2022	Q3FY2022	Q4FY2022
Two-Day Stays for Medical DRGs	<b>Two-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	391	376	364	427
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,953	1,868	1,749	1,804
	<b>Proportion of Target to Denominator Discharges</b>	20.0%	20.1%	20.8%	23.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$11,419	\$10,704	\$10,351	\$10,879
	<b>Sum of Medicare Payments for Target</b>	\$4,464,644	\$4,024,854	\$3,767,617	\$4,645,153
Two-Day Stays for Surgical DRGs	<b>Two-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	97	106	107	102
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	563	618	628	612
	<b>Proportion of Target to Denominator Discharges</b>	17.2%	17.2%	17.0%	16.7%
	<b>Average Length of Stay for Target</b>	2.0	2.0	2.0	2.0
	<b>Average Medicare Payment for Target</b>	\$22,476	\$22,367	\$21,561	\$23,326
	<b>Sum of Medicare Payments for Target</b>	\$2,180,181	\$2,370,882	\$2,306,974	\$2,379,209
One-Day Stays for Medical DRGs	<b>One-Day Stays for Medical DRGs excl dc status 02,82,07,20, OSC 72</b>	261	229	269	230
	<b>All Medical DRG disch excl dc status 02,82,07,20, OSC 72</b>	1,953	1,868	1,749	1,804
	<b>Proportion of Target to Denominator Discharges</b>	13.4%	12.3%	15.4%	12.7%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$10,823	\$10,200	\$9,877	\$9,584
	<b>Sum of Medicare Payments for Target</b>	\$2,824,880	\$2,335,828	\$2,656,855	\$2,204,254
One-Day Stays for Surgical DRGs	<b>One-Day Stays for Surgical DRGs excl dc status 02,82,07,20, OSC 72</b>	98	125	130	129
	<b>All Surgical DRG disch excl dc status 02,82,07,20, OSC 72</b>	563	618	628	612
	<b>Proportion of Target to Denominator Discharges</b>	17.4%	20.2%	20.7%	21.1%
	<b>Average Length of Stay for Target</b>	1.0	1.0	1.0	1.0
	<b>Average Medicare Payment for Target</b>	\$21,020	\$24,225	\$26,368	\$25,055
	<b>Sum of Medicare Payments for Target</b>	\$2,060,006	\$3,028,161	\$3,427,841	\$3,232,051

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

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 27JAN2023