

Top Diagnoses Report

- Identifies the top terminal Clinical Classification System (CCS) diagnosis categories for beneficiary episodes ending in the most recent calendar year.
- The principal diagnosis code from the first claim in the episode is used to determine the CCS category.
- Identifies the number of episodes, the proportion of total episodes and the average length of stay for each CCS category.
- Supplemental report; has no impact on outlier status or risk for improper payments.



National Top Diagnoses Report

 Include same data elements as the PHP-specific report, for all PHP episodes in the nation.