

National- and State-level Data

- National and State-level data for the target areas (number of discharges for the numerator/denominator, average length of stay, total payments) is available at pepper.cbrpepper.org on the “Data” page and updated following each release.

National Level Data Reports

[Short-term Acute Care Hospitals](#)[Critical Access Hospitals](#)[Home Health Agencies](#)[Hospices](#)[Inpatient Psychiatric Facilities](#)[Inpatient Rehabilitation Facilities](#)[Long-term Acute Care Hospitals](#)[Partial Hospitalization Programs](#)[Skilled Nursing Facilities](#)

Target Area Analysis – Short-term Acute Care Hospitals

(XLSX, updated 03-05-2020)

The link below provides national-level statistics for areas identified as at-risk for improper payments in short-term acute care hospitals. The data include the number of Medicare discharges for the numerator and denominator for each target area, proportion for each target area, average Medicare payment for a claim in each target area and the sum of total Medicare payments for each target area for all hospitals in the nation. For more information on the areas identified as at risk for improper payments, please see the [Short-term PEPPER User's Guide](#) (PDF, 28th Edition).

Top 20 Medical DRGs for Same- and One-day Stays for Short-term Acute Care Hospitals

(XLSX, updated 03-05-2020)

A listing of the top 20 medical DRGs by volume of Medicare discharges for same- and one-day stays for all short-term acute care PPS hospitals in the nation. The data are aggregated at the national level. A same-day stay occurs when a patient is admitted as an inpatient and discharged on the same day; a one-day stay occurs when a patient is admitted as an inpatient on one day and discharged on the following day. When the patient dies, leaves against medical advice or is transferred to another short-term acute care PPS hospital (patient status codes 20, 07 02 or 82), or when the claim has occurrence span code 72 (identifying outpatient time associated with an inpatient admission) with "through" date on or day prior to inpatient admission, these claims are not included in the data. These data represent the most recent four quarters of Medicare discharges.

Sample Target Area Summary

Short-Term National Target Area Summary Report - Q1FY20
3315 PPS Hospitals

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Target Area	Data for four quarters ending	Q2FY2019	Q3FY2019	Q4FY2019	Q1FY2020
Stroke Intracranial Hemorrhage	DRGs 061, 062, 063, 064, 065, 066	58,130	57,422	55,930	56,822
	All DRGs 061, 062, 063, 064, 065, 066, 067, 068, 069 Discharges	68,918	67,884	65,833	66,615
	Proportion of Target to Denominator Discharges	84.3%	84.6%	85.0%	85.3%
	Average Length of Stay for Target	4.4	4.3	4.3	4.3
	Average Medicare Payment for Target	\$9,195	\$9,102	\$9,092	\$9,510
	Sum of Medicare Payments for Target	\$534,496,207	\$522,645,926	\$508,511,527	\$540,373,591
Respiratory Infections	DRGs 177, 178	28,741	27,338	23,769	26,557
	All DRGs 177, 178, 179, 193, 194, 195 Discharges	126,205	96,556	71,964	89,471
	Proportion of Target to Denominator Discharges	22.8%	28.3%	33.0%	29.7%
	Average Length of Stay for Target	6.4	6.2	6.2	6.2
	Average Medicare Payment for Target	\$11,085	\$10,998	\$11,006	\$11,395
	Sum of Medicare Payments for Target	\$318,581,551	\$300,665,624	\$261,602,192	\$302,619,087
Simple Pneumonia	DRGs 193, 194	87,123	61,655	43,008	56,759
	All DRGs 190, 191, 192, 193, 194, 195 Discharges	160,608	122,155	88,291	111,146
	Proportion of Target to Denominator Discharges	54.2%	50.5%	48.7%	51.1%
	Average Length of Stay for Target	4.6	4.5	4.4	4.4
	Average Medicare Payment for Target	\$7,428	\$7,417	\$7,391	\$7,678
	Sum of Medicare Payments for Target	\$647,118,137	\$457,294,776	\$317,855,414	\$435,807,078
Septicemia	DRGs 870, 871, 872	209,577	194,315	182,269	192,000
	All DRGs 193, 194, 195, 207, 208, 689, 690, 870, 871, 872 Discharges	375,768	330,280	298,238	321,783
	Proportion of Target to Denominator Discharges	55.8%	58.8%	61.1%	59.7%
	Average Length of Stay for Target	6.3	6.1	6.0	6.1
	Average Medicare Payment for Target	\$13,194	\$12,957	\$12,623	\$13,294
	Sum of Medicare Payments for Target	\$2,765,182,380	\$2,517,653,118	\$2,300,820,466	\$2,552,387,472
Unrelated OR Procedure	DRGs 981, 982, 983, 987, 988, 989	17,525	17,247	16,495	15,418
	All Discharges for Surgical DRGs	655,663	651,341	633,634	632,732
	Proportion of Target to Denominator Discharges	2.7%	2.6%	2.6%	2.4%
	Average Length of Stay for Target	9.0	8.8	8.7	8.6
	Average Medicare Payment for Target	\$23,763	\$23,558	\$23,244	\$24,108
	Sum of Medicare Payments for Target	\$416,443,750	\$406,299,941	\$383,414,991	\$371,694,282

Sample “Top 1DS” Report

Short-Term National Q1FY20 Report
Top 20 Medical DRGs for Same- and 1-Day Stays
Discharges for most recent 4 quarters, ending Q1FY20
3315 PPS Hospitals
In Descending Order by Same- and 1-Day Stay Counts Per DRG

DRG Code and Description	Same- and 1-Day Stay Count*	Total Discharges for DRG*	Proportion of Same- and 1- Day Stays to Total Discharges	Average Length of Stay for DRG
291 : Heart failure & shock w MCC	17,546	341,258	5.1%	5.2
392 : Esophagitis, gastroent & misc digest disorders w/o MCC	16,476	112,783	14.6%	3.3
310 : Cardiac arrhythmia & conduction disorders w/o CC/MCC	14,025	46,446	30.2%	2.2
309 : Cardiac arrhythmia & conduction disorders w CC	13,388	72,328	18.5%	3.0
641 : Misc disorders of nutrition, metabolism, fluids/electrolytes w/o MCC	11,768	73,820	15.9%	3.3
871 : Septicemia or severe sepsis w/o MV >96 hours w MCC	11,591	486,080	2.4%	6.6
312 : Syncope & collapse	10,762	53,797	20.0%	3.1
690 : Kidney & urinary tract infections w/o MCC	10,157	109,460	9.3%	3.6
065 : Intracranial hemorrhage or cerebral infarction w CC or tPA in 24 hrs	10,137	90,083	11.3%	3.8
313 : Chest pain	10,049	28,173	35.7%	2.3
287 : Circulatory disorders except AMI, w card cath w/o MCC	9,639	43,259	22.3%	3.2
189 : Pulmonary edema & respiratory failure	9,452	123,570	7.6%	4.7
683 : Renal failure w CC	9,050	105,200	8.6%	3.9
378 : GI hemorrhage w CC	8,623	108,784	7.9%	3.6
640 : Misc disorders of nutrition, metabolism, fluids/electrolytes w MCC	7,498	66,045	11.4%	4.6
069 : Transient ischemia w/o thrombolytic	7,417	30,205	24.6%	2.6
194 : Simple pneumonia & pleurisy w CC	7,232	89,893	8.0%	3.8
190 : Chronic obstructive pulmonary disease w MCC	7,071	111,526	6.3%	4.5
812 : Red blood cell disorders w/o MCC	7,049	44,175	16.0%	3.5
066 : Intracranial hemorrhage or cerebral infarction w/o CC/MCC	6,852	26,510	25.8%	2.5
Top Medical DRGs	205,782	2,163,395	9.5%	4.6
All Medical DRGs	474,345	5,395,063	8.8%	4.8

National High Outlier Ranking Report

- Identifies the provider's rank as compared to all other hospitals in the nation, based on number of high outliers for the 12 quarters.
- What does the distribution of high outliers look like for all hospitals?

National High Outlier Ranking Report

000692, Hospital G0692

The National High Outlier Ranking report provides a comparison to all other short-term acute care hospitals in the nation. Your hospital's national percentile is used to determine high outlier status. All the quarters for which your hospital is at or above the national 80th percentile are added up for all the target areas. The hospital with the greatest total number of high outliers is assigned a rank of '1.' The hospital with the second greatest number is assigned a rank of '2' and so on. See the table below for your hospital's details.

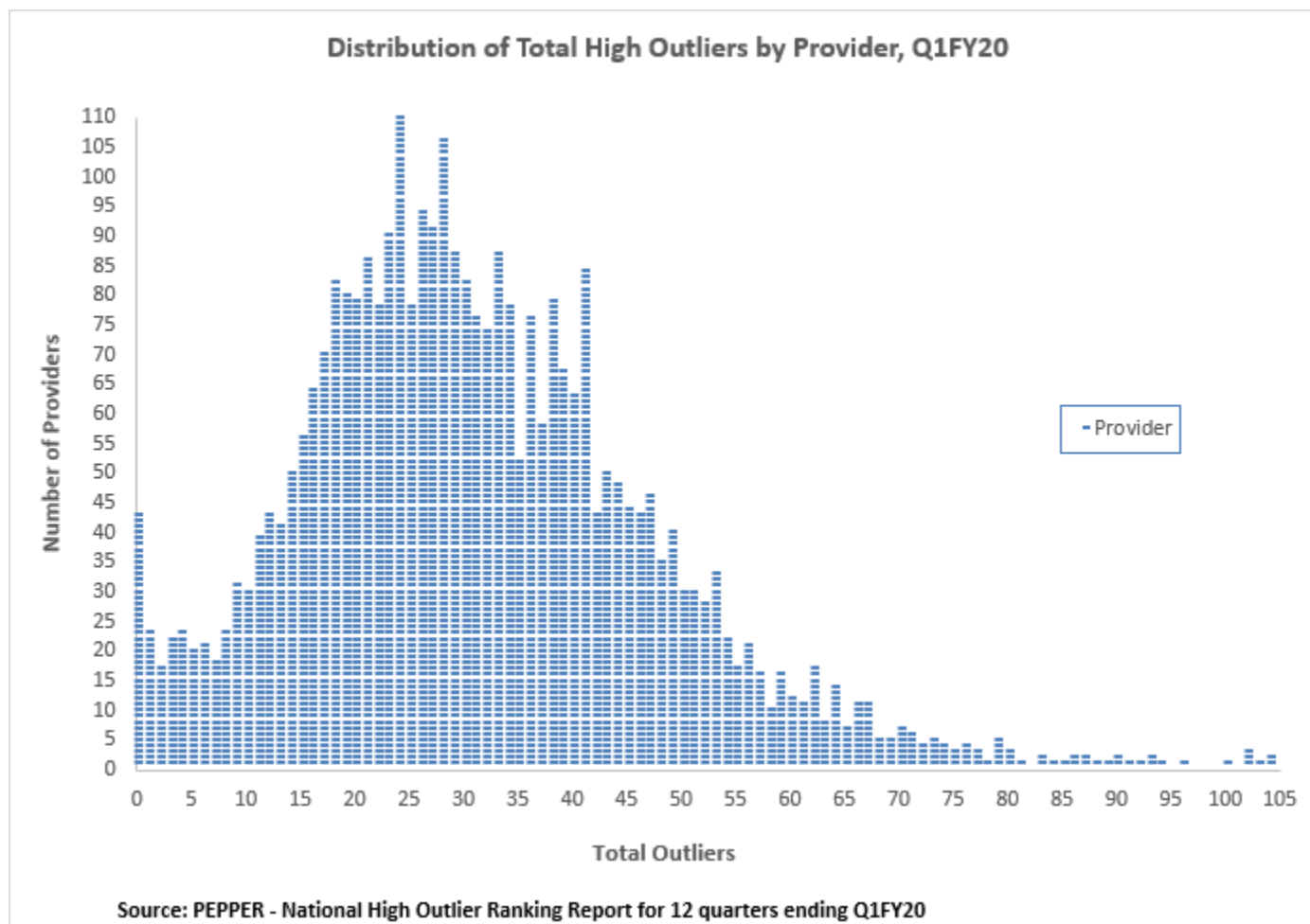
National Ranking: 3168 out of a total of 3315

Table 3 National High Outlier Ranking Report

Target Area	Q2 FY 2017	Q3 FY 2017	Q4 FY 2017	Q1 FY 2018	Q2 FY 2018	Q3 FY 2018	Q4 FY 2018	Q1 FY 2019	Q2 FY 2019	Q3 FY 2019	Q4 FY 2019	Total
Stroke Intracranial Hemorrhage	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Respiratory Infections	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Simple Pneumonia	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Septicemia	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Unrelated OR Procedure	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Medical DRGs with CC or MCC	0	0	0	0	0	0	0	0	0	0	0	0
Surgical DRGs with CC or MCC	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Single CC or MCC	1	1	0	n/a	1	1	n/a	n/a	n/a	n/a	n/a	4
Excisional Debridement	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Ventilator Support	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Emergency Dept E and M Visits	0	0	0	0	0	0	0	0	0	0	0	0
Transient Ischemic Attack	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
COPD	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Percutaneous Cardiovascular Proced	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Syncope	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Other Circulatory System Diagnoses	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Other Digestive System Diagnoses	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Medical Back Problems	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
Spinal Fusion	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
3-Day SNF-Qualifying Admissions	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
30-Day Readm to Same or Elsewhere	n/a	n/a	1	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	1
30-Day Readm to Same Hospital	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
2DS Medical DRGs	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
2DS Surgical DRGs	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
1DS Medical DRGs	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
1DS Surgical DRGs	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0
												5

Notes: A 1 indicates high outlier, 0 indicates low or non-outlier, and n/a indicates no reportable data (fewer than 11 discharges).

National High Outlier Ranking Report – Graph



Peer Groups

- PEPPER feedback form common request: compare a hospital to its peers.
- Challenges:
- Peer grouping schemes/methodologies differ.
- Resulting cell sizes very small; not meaningful.
- Classification challenges.
- Therefore: PEPPER team has developed Peer Group Bar Charts.

Peer Group Bar Charts

- For each of the target areas, identifies the 20th, 50th, 80th national percentile for hospitals in four categories:
 - Location (urban vs. rural)
 - Ownership type (profit/physician owned vs. nonprofit/church vs. government)
 - Teaching status (teaching vs. non-teaching)
 - Surgical focus (surgical vs. other)
- Updated annually.
- See “Methodology,” “Hospitals by Peer Group” files for more information.

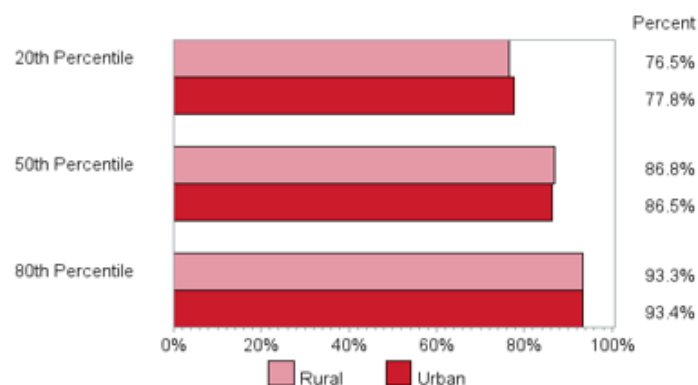
Percentiles

Percentiles by Peer Group - Short Term Q3FY19

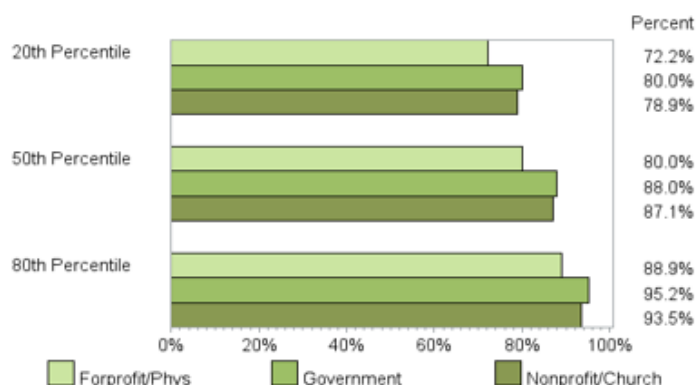
Based on hospital discharges occurring April 1, 2019 to June 30, 2019

Target Area: Stroke Intracranial Hemorrhage

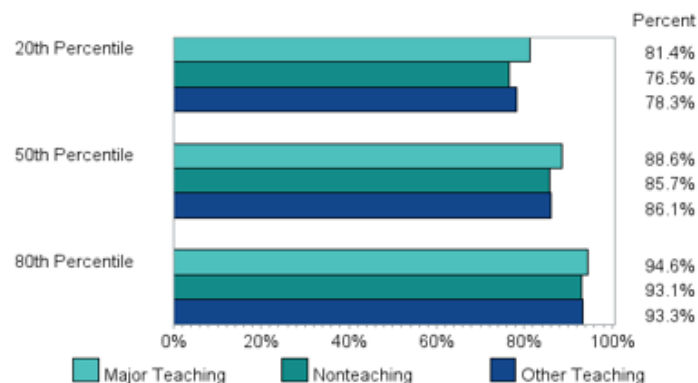
Location



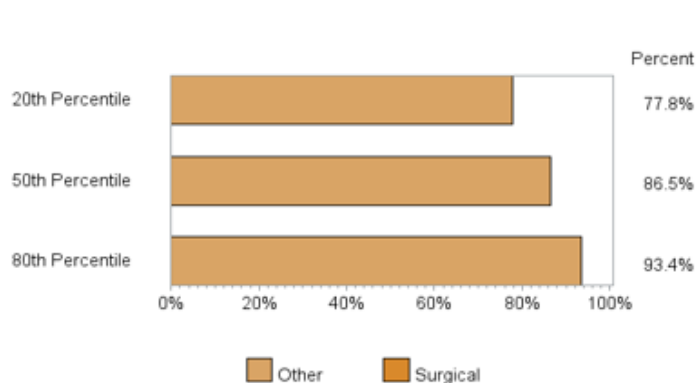
Ownership Type



Teaching Status



Surgical Focus



Note: A peer group must have at least 11 providers with reportable data to be presented in the chart.