



# **Central Health Planning Region**

## **Hospital Discharges: Region Summary Reports**

**Table 6.24 - Central Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, 1999, 2000, and 2001<sup>(1)</sup>**

Rank	DRG Description	Year					
		2001		2000		1999	
		Number	Percent	Number	Percent	Number	Percent
1	391 NORMAL NEWBORN	2,009	7.1%	1,882	6.9%	1,990	7.5%
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,696	6.0%	1,665	6.1%	1,724	6.5%
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,054	3.7%	900	3.3%	1,029	3.9%
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	852	3.0%	795	2.9%	715	2.7%
5	127 HEART FAILURE & SHOCK	844	3.0%	814	3.0%	806	3.0%
6	430 PSYCHOSES	602	2.1%	580	2.1%	538	2.0%
7	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	583	2.1%	723	2.6%	744	2.8%
8	143 CHEST PAIN	574	2.0%	502	1.8%	329	1.2%
9	371 CESAREAN SECTION W/O CC	547	1.9%	474	1.7%	446	1.7%
10	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	545	1.9%	533	1.9%	491	1.8%
11	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	438	1.5%	408	1.5%	404	1.5%
12	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	437	1.5%	459	1.7%	484	1.8%
13	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	419	1.5%	411	1.5%	439	1.6%
14	174 G.I. HEMORRHAGE W CC	335	1.2%	345	1.3%	348	1.3%
15	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	332	1.2%	316	1.2%	285	1.1%
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	303	1.1%	287	1.0%	222	0.8%
17	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	286	1.0%	333	1.2%	310	1.2%
18	243 MEDICAL BACK PROBLEMS	274	1.0%	216	0.8%	193	0.7%
19	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	256	0.9%	208	0.8%	250	0.9%
20	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	247	0.9%	261	1.0%	219	0.8%
21	139 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	233	0.8%	202	0.7%	143	0.5%
22	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	232	0.8%	215	0.8%	189	0.7%
23	132 ATHEROSCLEROSIS W CC	231	0.8%	232	0.8%	200	0.8%
24	91 SIMPLE PNEUMONIA & PLEURISY AGE 0-17	220	0.8%	200	0.7%	204	0.8%
25	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	214	0.8%	189	0.7%	203	0.8%
	<b>Subtotal</b>	<b>13,763</b>	<b>48.7%</b>	<b>13,150</b>	<b>48.1%</b>	<b>12,905</b>	<b>48.4%</b>
	All Other DRGs	14,499	51.3%	14,214	51.9%	13,761	51.6%
	<b>Grand Total</b>	<b>28,262</b>	<b>100.0%</b>	<b>27,364</b>	<b>100.0%</b>	<b>26,666</b>	<b>100.0%</b>

Source: Nebraska Hospital Association, 1999-2001.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 87% for 2001, 94% for 2000, and 94% for 1999.

**Table 6.25 - Central Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Diagnoses by ICD-9 Code, 1999, 2000, and 2001<sup>(1)</sup>**

Rank	ICD-9 Diagnosis Description	Year					
		2001		2000		1999	
		Number	Percent	Number	Percent	Number	Percent
1	V3000 SINGLE LB IN-HOSP W/O CS	1,949	6.9%	1,925	7.0%	1,981	7.4%
2	486 PNEUMONIA, ORGANISM NOS	1,325	4.7%	1,061	3.9%	1,143	4.3%
3	4280 CONGESTIVE HEART FAILURE	855	3.0%	866	3.2%	852	3.2%
4	41401 CRNRY ATHRSCSCL NATVE VSSL	851	3.0%	980	3.6%	1,034	3.9%
5	V3001 SINGLE LB IN-HOSP W CS	640	2.3%	537	2.0%	533	2.0%
6	78650 CHEST PAIN NOS	482	1.7%	334	1.2%	308	1.2%
7	49121 OBS CHR BRNC W ACT EXA	356	1.3%	326	1.2%	364	1.4%
8	42731 ATRIAL FIBRILLATION	349	1.2%	377	1.4%	320	1.2%
9	650 NORMAL DELIVERY	273	1.0%	298	1.1%	322	1.2%
10	71596 OSTEOARTHROS NOS-L/LEG	269	1.0%	259	0.9%	212	0.8%
11	41071 SUBENDO INFARCT, INITIAL	266	0.9%	271	1.0%	211	0.8%
12	65421 PREV C-DELIVERY-DELIVRD	258	0.9%	223	0.8%	231	0.9%
13	5990 URIN TRACT INFECTION NOS	239	0.8%	228	0.8%	178	0.7%
14	2765 HYPOVOLEMIA	226	0.8%	226	0.8%	174	0.7%
15	41400 COR ATH UNSP VSL NTV/GFT	221	0.8%	193	0.7%	160	0.6%
16	66411 DEL W 2 DEG LACERAT-DEL	209	0.7%	228	0.8%	260	1.0%
17	5589 NONINF GASTROENTERIT NEC	205	0.7%	211	0.8%	185	0.7%
18	71536 LOC OSTEOARTH NOS-L/LEG	188	0.7%	147	0.5%	133	0.5%
19	72210 LUMBAR DISC DISPLACEMENT	186	0.7%	184	0.7%	186	0.7%
20	436 CVA	179	0.6%	151	0.6%	127	0.5%
21	64511 PROLONGED PREGNANCY	171	0.6%	17	0.1%	-	-
22	7802 SYNCOPÉ AND COLLAPSE	167	0.6%	138	0.5%	115	0.4%
23	66401 DEL W 1 DEG LACERAT-DEL	167	0.6%	194	0.7%	231	0.9%
24	82021 INTERTROCHANTERIC FX-CL	166	0.6%	142	0.5%	185	0.7%
25	4359 TRANS CEREB ISCHEMIA NOS	148	0.5%	115	0.4%	120	0.5%
<b>Subtotal</b>		<b>10,345</b>	<b>36.6%</b>	<b>9,631</b>	<b>35.2%</b>	<b>9,565</b>	<b>35.9%</b>
All Other Diagnoses		17,917	63.4%	17,733	64.8%	17,101	64.1%
<b>Grand Total</b>		<b>28,262</b>	<b>100.0%</b>	<b>27,364</b>	<b>100.0%</b>	<b>26,666</b>	<b>100.0%</b>

Source: Nebraska Hospital Association, 1999-2001.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 87% for 2001, 94% for 2000, and 94% for 1999.

**Table 6.26 - Central Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Procedures by ICD-9 Code, 1999, 2000, and 2001<sup>(1)</sup>**

Rank	ICD-9 Procedure Description	Year					
		2001		2000		1999	
		Number	Percent	Number	Percent	Number	Percent
1	640 CIRCUMCISION	870	5.8%	775	5.2%	901	6.1%
2	741 LOW CERVICAL C-SECTION	653	4.3%	572	3.9%	530	3.6%
3	7569 REPAIR OB LACERATION NEC	470	3.1%	508	3.4%	543	3.7%
4	3722 LEFT HEART CARDIAC CATH	469	3.1%	462	3.1%	493	3.3%
5	3601 PTCA-1 VES/ATH W/O AGENT	457	3.0%	455	3.1%	525	3.6%
6	8154 TOTAL KNEE REPLACEMENT	448	3.0%	409	2.8%	369	2.5%
7	736 EPISIOTOMY	397	2.6%	396	2.7%	452	3.1%
8	4516 EGD WITH CLOSED BIOPSY	288	1.9%	281	1.9%	210	1.4%
9	6859 OTHER VAG HYSTERECTOMY	277	1.8%	269	1.8%	246	1.7%
10	684 TOTAL ABD HYSTERECTOMY	252	1.7%	230	1.6%	264	1.8%
11	7359 MANUAL ASSIST DELIV NEC	237	1.6%	350	2.4%	292	2.0%
12	5123 LAPAROSCOPIC CHOLECYSTEC	234	1.6%	221	1.5%	204	1.4%
13	3893 VENOUS CATH NEC	233	1.6%	178	1.2%	154	1.0%
14	9904 PACKED CELL TRANSFUSION	233	1.6%	171	1.2%	164	1.1%
15	8151 TOTAL HIP REPLACEMENT	218	1.5%	217	1.5%	179	1.2%
16	8051 EXCISION INTERVERT DISC	174	1.2%	181	1.2%	184	1.2%
17	4513 SM BOWEL ENDOSCOPY NEC	171	1.1%	148	1.0%	184	1.2%
18	7309 ARTIF RUPT MEMBRANES NEC	170	1.1%	24	0.2%	28	0.2%
19	3812 HEAD & NECK ENDARTER NEC	159	1.1%	142	1.0%	154	1.0%
20	6029 OTH TRANSURETH PROSTATEC	144	1.0%	100	0.7%	183	1.2%
21	721 LOW FORCEPS W EPISIOTOMY	142	0.9%	171	1.2%	156	1.1%
22	8152 PARTIAL HIP REPLACEMENT	134	0.9%	122	0.8%	125	0.8%
23	4709 OTHER APPENDECTOMY	133	0.9%	147	1.0%	164	1.1%
24	3491 THORACENTESIS	126	0.8%	105	0.7%	106	0.7%
25	3605 PTCA-MULTIPLE VESSEL/ATH	126	0.8%	100	0.7%	118	0.8%
<b>Subtotal</b>		<b>7,215</b>	<b>48.1%</b>	<b>6,734</b>	<b>45.4%</b>	<b>6,928</b>	<b>47.1%</b>
All Other Procedures		7,797	51.9%	8,099	54.6%	7,794	52.9%
<b>Grand Total</b>		<b>15,012</b>	<b>100.0%</b>	<b>14,833</b>	<b>100.0%</b>	<b>14,722</b>	<b>100.0%</b>

Source: Nebraska Hospital Association, 1999-2001.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 87% for 2001, 94% for 2000, and 94% for 1999.

**Table 6.27 - Central Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Acute Inpatient Hospital Discharges by DRG, Age, Average Length of Stay (ALOS), and Average Charge, 2001<sup>(1)</sup>**

Rank	DRG Description	All Ages			64 and Under			65 and Over		
		Total Cases	Average Charges	ALOS All Ages	Total Cases	Average Charges	ALOS <65	Total Cases	Average Charges	ALOS 65+
1	391 NORMAL NEWBORN	2,170	\$892	1.9	2,170	\$892	1.9	-	-	-
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,831	\$2,960	2.0	1,831	\$2,960	2.0	-	-	-
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,084	\$8,850	5.3	235	\$8,829	4.5	849	\$8,856	5.5
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	944	\$20,266	4.9	225	\$21,386	4.5	719	\$19,916	5.1
5	127 HEART FAILURE & SHOCK	877	\$8,445	4.9	115	\$8,675	4.5	762	\$8,410	4.9
6	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	702	\$25,692	2.6	224	\$25,692	2.1	478	\$25,373	2.8
7	430 PSYCHOSES	639	\$7,594	7.3	569	\$6,835	6.6	70	\$13,764	12.7
8	371 CESAREAN SECTION W/O CC	599	\$5,375	3.2	599	\$5,375	3.2	-	-	-
9	143 CHEST PAIN	594	\$4,148	1.6	305	\$3,874	1.4	289	\$4,437	1.9
10	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	578	\$6,263	3.6	202	\$5,369	2.9	376	\$6,744	4.0
11	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	482	\$6,345	2.4	443	\$6,276	2.3	39	\$7,137	2.9
12	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	448	\$6,750	4.1	112	\$6,082	3.6	336	\$6,973	4.3
13	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	435	\$10,800	6.2	82	\$11,474	5.5	353	\$10,643	6.4
14	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	357	\$1,577	2.6	357	\$1,577	2.6	-	-	-
15	174 G.I. HEMORRHAGE W CC	353	\$7,721	4.2	66	\$8,678	3.6	287	\$7,501	4.3
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	313	\$4,048	2.3	178	\$4,140	2.1	135	\$3,927	2.6
17	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	309	\$6,872	3.1	56	\$5,535	2.4	253	\$7,168	3.3
18	243 MEDICAL BACK PROBLEMS	282	\$5,615	4.2	105	\$4,681	3.1	177	\$6,168	4.8
19	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	275	\$29,452	11.1	80	\$26,048	9.4	195	\$30,848	11.8
20	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	264	\$6,087	4.0	78	\$6,265	3.4	186	\$6,012	4.2
21	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	248	\$10,883	2.1	166	\$10,613	1.9	82	\$11,430	2.7
22	109 CORONARY BYPASS W/O CARDIAC CATH	247	\$38,024	6.2	98	\$34,535	5.1	149	\$40,319	7.0
23	139 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	247	\$3,823	2.0	68	\$3,576	1.6	179	\$3,917	2.2
24	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	241	\$6,520	4.4	69	\$6,892	3.9	172	\$6,371	4.6
25	132 ATHEROSCLEROSIS W CC	236	\$5,592	2.4	54	\$4,471	1.6	182	\$5,925	2.6
	<b>Subtotal</b>	<b>14,755</b>	<b>\$8,146</b>	<b>3.6</b>	<b>8,487</b>	<b>\$5,435</b>	<b>2.8</b>	<b>6,268</b>	<b>\$11,818</b>	<b>4.7</b>
	All Other DRGs	15,979	\$13,391	4.7	8,449	\$12,495	4.3	7,530	\$14,396	5.2
	<b>Grand Total</b>	<b>30,734</b>	<b>\$10,873</b>	<b>4.2</b>	<b>16,936</b>	<b>\$8,957</b>	<b>3.6</b>	<b>13,798</b>	<b>\$13,225</b>	<b>5.0</b>

Source: Nebraska Hospital Association, 2001.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar year. Reflects an estimated inpatient discharge contribution rate statewide of 87% for 2001.

**Table 6.28 - Central Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, Ranked by Estimated Total Charges, 1999, 2000, and 2001<sup>(1)</sup>**

Rank	DRG Description	2001			2000			1999		
		Total Cases	Average Charges	Total Charges <sup>(2)</sup> % Total	Total Cases	Average Charges	Total Charges <sup>(2)</sup> % Total	Total Cases	Average Charges	Total Charges <sup>(2)</sup> % Total
1	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	944	\$20,266	\$19,131,203 5.7%	910	\$19,110	\$17,389,962 5.5%	715	\$15,965	\$11,414,984 4.8%
2	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	702	\$25,475	\$17,883,321 5.4%	859	\$24,256	\$20,835,683 6.6%	744	\$22,504	\$16,743,071 7.0%
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,084	\$8,850	\$9,593,774 2.9%	945	\$8,045	\$7,602,612 2.4%	1,029	\$6,905	\$7,105,572 3.0%
4	109 CORONARY BYPASS W/O CARDIAC CATH	247	\$38,024	\$9,391,999 2.8%	258	\$31,997	\$8,255,116 2.6%	249	\$29,124	\$7,251,768 3.0%
5	107 CORONARY BYPASS W CARDIAC CATH	149	\$54,954	\$8,188,142 2.5%	158	\$53,443	\$8,444,024 2.7%	136	\$45,753	\$6,222,435 2.6%
6	483 TRACHEOSTOMY EXCEPT FOR FACE, MOUTH & NECK DIAGNOSES	46	\$176,607	\$8,123,914 2.4%	49	\$155,230	\$7,606,263 2.4%	37	\$154,164	\$5,704,056 2.4%
7	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	275	\$29,452	\$8,099,313 2.4%	241	\$33,567	\$8,089,731 2.6%	250	\$27,189	\$6,797,158 2.8%
8	127 HEART FAILURE & SHOCK	877	\$8,445	\$7,406,311 2.2%	859	\$8,002	\$6,873,608 2.2%	806	\$6,597	\$5,317,394 2.2%
9	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,831	\$2,960	\$5,420,611 1.6%	1,861	\$2,793	\$5,197,777 1.6%	1,724	\$2,475	\$4,267,113 1.8%
10	104 CARDIAC VALVE & OTH MAJ CARDIOTHORAGIC PROC W CARD CATH	71	\$74,960	\$5,322,167 1.6%	71	\$81,139	\$5,760,899 1.8%	55	\$68,538	\$3,769,576 1.6%
11	430 PSYCHOSES	639	\$7,594	\$4,852,490 1.5%	629	\$6,723	\$4,228,837 1.3%	538	\$6,231	\$3,352,440 1.4%
12	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	435	\$10,800	\$4,697,898 1.4%	426	\$10,457	\$4,454,507 1.4%	439	\$9,102	\$3,995,930 1.7%
13	105 CARDIAC VALVE & OTH MAJ CARDIOTHORAGIC PROC W/O CARD CATH	88	\$52,700	\$4,637,621 1.4%	103	\$38,136	\$5,987,957 1.9%	80	\$60,575	\$4,846,005 2.0%
14	110 MAJOR CARDIOVASCULAR PROCEDURES W CC	94	\$42,594	\$4,003,819 1.2%	133	\$42,286	\$5,624,061 1.8%	94	\$31,252	\$2,937,708 1.2%
15	210 HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W CC	230	\$16,537	\$3,803,556 1.1%	236	\$16,414	\$3,873,595 1.2%	225	\$12,793	\$2,878,368 1.2%
16	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	578	\$6,263	\$3,620,219 1.1%	573	\$4,924	\$2,821,184 0.9%	491	\$5,154	\$2,530,523 1.1%
17	475 RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT	106	\$33,628	\$3,564,599 1.1%	122	\$36,053	\$4,398,481 1.4%	98	\$26,847	\$2,631,005 1.1%
18	79 RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W CC	215	\$16,302	\$3,504,905 1.0%	205	\$13,291	\$2,724,661 0.9%	203	\$9,861	\$2,001,805 0.8%
19	498 SPINAL FUSION W/O CC	137	\$25,360	\$3,477,050 1.0%	168	\$20,304	\$3,411,086 1.1%	120	\$15,173	\$1,820,741 0.8%
20	1 CRANIOTOMY AGE >17 EXCEPT FOR TRAUMA	94	\$35,554	\$3,342,089 1.0%	97	\$27,427	\$2,660,415 0.8%	97	\$31,451	\$3,050,757 1.3%
21	386 EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	75	\$43,789	\$3,284,163 1.0%	79	\$40,225	\$3,177,751 1.0%	68	\$34,866	\$2,370,877 1.0%
22	371 CESAREAN SECTION W/O CC	599	\$5,375	\$3,219,612 1.0%	557	\$5,371	\$2,991,754 0.9%	446	\$4,763	\$2,119,801 0.9%
23	468 EXTENSIVE O R, PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS	120	\$25,955	\$3,114,649 0.9%	116	\$24,150	\$2,801,380 0.9%	103	\$20,562	\$2,117,851 0.9%
24	486 COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	50	\$62,036	\$3,101,814 0.9%	60	\$50,046	\$3,002,736 0.9%	42	\$39,445	\$1,656,705 0.7%
25	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	482	\$6,345	\$3,058,430 0.9%	447	\$6,146	\$2,747,299 0.9%	404	\$5,392	\$2,178,224 0.9%
	<b>Subtotal</b>	<b>10,168</b>	<b>\$15,130</b>	<b>\$153,843,669 46.0%</b>	<b>10,162</b>	<b>\$14,855</b>	<b>\$150,961,379 47.8%</b>	<b>9,193</b>	<b>\$12,518</b>	<b>\$115,051,887 48.2%</b>
	All Other DRGs	20,566	\$8,768	\$180,326,331 54.0%	20,173	\$8,188	\$165,168,621 52.2%	17,473	\$7,077	\$123,658,113 51.8%
	<b>Grand Total</b>	<b>30,734</b>	<b>\$10,873</b>	<b>\$334,170,000 100.0%</b>	<b>30,335</b>	<b>\$10,421</b>	<b>\$316,130,000 100.0%</b>	<b>26,666</b>	<b>\$8,953</b>	<b>\$238,740,000 100.0%</b>

Source: Nebraska Hospital Association, 1999-2001.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 87% for 2001, 94% for 2000, and 94% for 1999.  
 (2) In thousands of dollars. This is an estimate of total charges based upon the average charge multiplied by total cases within this DRG category.

**Table 6.29 - Central Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, Percent of Total Discharges, and Payer Types, 2001<sup>(1)</sup>**

Rank	DRG Description	Payer Type				
		All Discharges Percent	Commercial Percent	Medicaid <sup>(2)</sup> Percent	Medicare <sup>(2)</sup> Percent	Other <sup>(3)</sup> Percent
1	391 NORMAL NEWBORN	7.1%	63.1%	35.4%	-	1.4%
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	6.0%	64.0%	34.9%	0.1%	1.1%
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	3.5%	12.7%	3.0%	80.1%	4.2%
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	3.1%	21.9%	2.1%	74.7%	1.3%
5	127 HEART FAILURE & SHOCK	2.9%	7.1%	1.8%	88.0%	3.1%
6	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	2.3%	27.9%	1.4%	68.2%	2.4%
7	430 PSYCHOSES	2.1%	32.9%	16.9%	30.7%	19.6%
8	371 CESAREAN SECTION W/O CC	2.0%	68.5%	31.1%	0.2%	0.3%
9	143 CHEST PAIN	1.9%	34.7%	6.9%	50.8%	7.6%
10	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	1.9%	21.3%	4.8%	70.6%	3.3%
11	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	1.6%	81.1%	6.6%	10.0%	2.3%
12	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	1.5%	11.6%	5.8%	75.9%	6.7%
13	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	1.4%	13.3%	1.4%	81.4%	3.9%
14	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	1.2%	60.5%	38.7%	-	0.8%
15	174 G.I. HEMORRHAGE W CC	1.2%	11.9%	2.0%	80.7%	5.4%
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	1.0%	42.8%	6.4%	44.7%	6.1%
17	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	1.0%	15.2%	0.7%	80.6%	3.6%
18	243 MEDICAL BACK PROBLEMS	0.9%	26.6%	4.3%	65.3%	3.9%
19	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	0.9%	21.5%	3.6%	72.0%	2.9%
20	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	0.9%	19.7%	4.6%	74.2%	1.5%
21	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	0.8%	54.8%	4.8%	33.1%	7.3%
22	109 CORONARY BYPASS W/O CARDIAC CATH	0.8%	34.4%	1.2%	61.9%	2.4%
23	139 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	0.8%	27.5%	0.4%	69.6%	2.4%
24	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	0.8%	17.4%	3.3%	77.6%	1.7%
25	132 ATHEROSCLEROSIS W CC	0.8%	14.0%	1.7%	81.8%	2.5%
	<b>Subtotal</b>	<b>48.0%</b>	<b>37.8%</b>	<b>14.5%</b>	<b>44.1%</b>	<b>3.5%</b>
	All Other DRGs	52.0%	35.7%	9.7%	49.1%	5.5%
	<b>Grand Total<sup>(4)</sup></b>	<b>100.0%</b>	<b>36.7%</b>	<b>12.0%</b>	<b>46.7%</b>	<b>4.6%</b>

Source: Nebraska Hospital Association, 2001.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar year. Reflects an estimated inpatient discharge contribution rate statewide of 87% for 2001.

(2) Non-managed care.

(3) Other includes self-pay, worker's compensation, and military health plans.

(4) Due to rounding, percentages may not sum to 100%.

