



# **Northern Health Planning Region**

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

**Table 6.30 - Northern 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	2,109	7.7%	2,128	7.7%	2,169	8.1%
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,666	6.1%	1,758	6.4%	1,766	6.6%
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	873	3.2%	777	2.8%	934	3.5%
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	832	3.1%	749	2.7%	662	2.5%
5	127 HEART FAILURE & SHOCK	790	2.9%	831	3.0%	790	2.9%
6	430 PSYCHOSES	629	2.3%	648	2.4%	620	2.3%
7	143 CHEST PAIN	567	2.1%	431	1.6%	329	1.2%
8	371 CESAREAN SECTION W/O CC	523	1.9%	477	1.7%	490	1.8%
9	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	516	1.9%	494	1.8%	457	1.7%
10	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	486	1.8%	495	1.8%	457	1.7%
11	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	480	1.8%	487	1.8%	530	2.0%
12	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	429	1.6%	488	1.8%	443	1.7%
13	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	367	1.3%	579	2.1%	527	2.0%
14	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	329	1.2%	298	1.1%	239	0.9%
15	174 G.I. HEMORRHAGE W CC	322	1.2%	385	1.4%	342	1.3%
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	321	1.2%	314	1.1%	294	1.1%
17	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	320	1.2%	352	1.3%	296	1.1%
18	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	311	1.1%	297	1.1%	273	1.0%
19	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	243	0.9%	222	0.8%	242	0.9%
20	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	236	0.9%	223	0.8%	167	0.6%
21	132 ATHEROSCLEROSIS W CC	227	0.8%	221	0.8%	198	0.7%
22	139 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	213	0.8%	182	0.7%	164	0.6%
23	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	210	0.8%	231	0.8%	248	0.9%
24	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	210	0.8%	214	0.8%	218	0.8%
25	243 MEDICAL BACK PROBLEMS	210	0.8%	212	0.8%	197	0.7%
<b>Subtotal</b>		<b>13,419</b>	<b>49.2%</b>	<b>13,493</b>	<b>49.0%</b>	<b>13,052</b>	<b>48.7%</b>
All Other DRGs		13,828	50.8%	14,060	51.0%	13,741	51.3%
<b>Grand Total</b>		<b>27,247</b>	<b>100.0%</b>	<b>27,553</b>	<b>100.0%</b>	<b>26,793</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 6.31 - Northern 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	2,008	7.4%	2,077	7.5%	2,053	7.7%
2	486 PNEUMONIA, ORGANISM NOS	1,035	3.8%	934	3.4%	1,104	4.1%
3	4280 CONGESTIVE HEART FAILURE	768	2.8%	799	2.9%	789	2.9%
4	41401 CRNRY ATRHSCL NATVE VSSL	599	2.2%	730	2.6%	754	2.8%
5	V3001 SINGLE LB IN-HOSP W CS	577	2.1%	523	1.9%	534	2.0%
6	2765 HYPOVOLEMIA	401	1.5%	307	1.1%	249	0.9%
7	49121 OBS CHR BRNC W ACT EXA	353	1.3%	379	1.4%	379	1.4%
8	42731 ATRIAL FIBRILLATION	340	1.2%	362	1.3%	274	1.0%
9	66401 DEL W 1 DEG LACERAT-DEL	333	1.2%	350	1.3%	311	1.2%
10	78659 CHEST PAIN NEC	320	1.2%	235	0.9%	207	0.8%
11	66411 DEL W 2 DEG LACERAT-DEL	318	1.2%	316	1.1%	290	1.1%
12	71596 OSTEOARTHROS NOS-L/LEG	312	1.1%	277	1.0%	255	1.0%
13	650 NORMAL DELIVERY	296	1.1%	311	1.1%	399	1.5%
14	78650 CHEST PAIN NOS	280	1.0%	221	0.8%	158	0.6%
15	65421 PREV C-DELIVERY-DELIVRD	273	1.0%	195	0.7%	187	0.7%
16	72210 LUMBAR DISC DISPLACEMENT	255	0.9%	203	0.7%	222	0.8%
17	41071 SUBENDO INFARCT, INITIAL	248	0.9%	264	1.0%	233	0.9%
18	5990 URIN TRACT INFECTION NOS	212	0.8%	219	0.8%	227	0.8%
19	436 CVA	205	0.8%	196	0.7%	209	0.8%
20	6826 CELLULITIS OF LEG	201	0.7%	153	0.6%	145	0.5%
21	41400 COR ATH UNSP VSL NTV/GFT	160	0.6%	137	0.5%	131	0.5%
22	4538 VENOUS THROMBOSIS NEC	160	0.6%	139	0.5%	160	0.6%
23	56211 DVRTCLI COLON W/O HMRHG	154	0.6%	138	0.5%	137	0.5%
24	5409 ACUTE APPENDICITIS NOS	149	0.5%	147	0.5%	124	0.5%
25	5589 NONINF GASTROENTERIT NEC	147	0.5%	167	0.6%	197	0.7%
<b>Subtotal</b>		<b>10,104</b>	<b>37.1%</b>	<b>9,779</b>	<b>35.5%</b>	<b>9,728</b>	<b>36.3%</b>
All Other Diagnoses		17,143	62.9%	17,774	64.5%	17,065	63.7%
<b>Grand Total</b>		<b>27,247</b>	<b>100.0%</b>	<b>27,553</b>	<b>100.0%</b>	<b>26,793</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 6.32 - Northern 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	1,056	7.5%	1,092	7.7%	1,128	8.2%
2	7569 REPAIR OB LACERATION NEC	624	4.4%	604	4.2%	631	4.6%
3	741 LOW CERVICAL C-SECTION	600	4.3%	554	3.9%	569	4.1%
4	7359 MANUAL ASSIST DELIV NEC	586	4.2%	587	4.1%	511	3.7%
5	8154 TOTAL KNEE REPLACEMENT	453	3.2%	397	2.8%	343	2.5%
6	9904 PACKED CELL TRANSFUSION	392	2.8%	263	1.8%	204	1.5%
7	4516 EGD WITH CLOSED BIOPSY	376	2.7%	372	2.6%	313	2.3%
8	3601 PTCA-1 VES/ATH W/O AGENT	344	2.5%	418	2.9%	380	2.8%
9	684 TOTAL ABD HYSTERECTOMY	322	2.3%	283	2.0%	283	2.1%
10	736 EPISIOTOMY	257	1.8%	300	2.1%	390	2.8%
11	8051 EXCISION INTERVERT DISC	246	1.8%	234	1.6%	265	1.9%
12	8151 TOTAL HIP REPLACEMENT	219	1.6%	236	1.7%	176	1.3%
13	5123 LAPAROSCOPIC CHOLECYSTEC	217	1.5%	269	1.9%	187	1.4%
14	3722 LEFT HEART CARDIAC CATH	213	1.5%	261	1.8%	260	1.9%
15	4709 OTHER APPENDECTOMY	208	1.5%	216	1.5%	208	1.5%
16	6859 OTHER VAG HYSTERECTOMY	203	1.4%	226	1.6%	209	1.5%
17	3812 HEAD & NECK ENDARTER NEC	153	1.1%	176	1.2%	161	1.2%
18	3893 VENOUS CATH NEC	144	1.0%	100	0.7%	136	1.0%
19	8152 PARTIAL HIP REPLACEMENT	137	1.0%	103	0.7%	112	0.8%
20	331 SPINAL TAP	136	1.0%	86	0.6%	88	0.6%
21	8622 EXC WOUND DEBRIDEMENT	128	0.9%	94	0.7%	99	0.7%
22	6029 OTH TRANSURETH PROSTATEC	116	0.8%	136	1.0%	160	1.2%
23	4513 SM BOWEL ENDOSCOPY NEC	105	0.7%	113	0.8%	106	0.8%
24	7915 CLOSED RED-INT FIX FEMUR	103	0.7%	95	0.7%	114	0.8%
25	7936 OP RED-INT FIX TIB/FIBUL	99	0.7%	70	0.5%	77	0.6%
<b>Subtotal</b>		<b>7,437</b>	<b>53.0%</b>	<b>7,285</b>	<b>51.1%</b>	<b>7,110</b>	<b>51.8%</b>
All Other Procedures		6,603	47.0%	6,972	48.9%	6,617	48.2%
<b>Grand Total</b>		<b>14,040</b>	<b>100.0%</b>	<b>14,257</b>	<b>100.0%</b>	<b>13,727</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 6.33 - Northern 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	2,153	\$1,002	2.0	2,153	\$1,002	2.0	-	-	-
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,700	\$3,002	2.0	1,700	\$3,002	2.0	-	-	-
3	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	911	\$21,028	4.4	200	\$21,507	4.1	711	\$20,893	4.5
4	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	884	\$7,427	4.4	133	\$7,673	4.0	751	\$7,384	4.4
5	127 HEART FAILURE & SHOCK	809	\$6,943	3.9	77	\$7,737	3.9	732	\$6,860	3.9
6	430 PSYCHOSES	655	\$6,940	7.2	568	\$6,176	6.5	87	\$11,931	11.3
7	143 CHEST PAIN	582	\$4,193	1.5	285	\$4,255	1.4	297	\$4,133	1.6
8	371 CESAREAN SECTION W/O CC	546	\$6,235	3.2	546	\$6,235	3.2	-	-	-
9	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	526	\$5,471	3.1	171	\$5,017	2.6	355	\$5,690	3.3
10	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	512	\$7,270	2.4	468	\$7,271	2.4	44	\$7,264	2.7
11	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	487	\$6,479	3.5	99	\$7,416	3.6	388	\$6,240	3.5
12	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	441	\$8,484	4.6	61	\$8,903	4.2	380	\$8,416	4.7
13	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	403	\$31,546	2.5	130	\$35,735	2.2	273	\$29,551	2.7
14	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	339	\$6,144	3.6	81	\$6,757	2.7	258	\$5,951	3.9
15	174 G.I. HEMORRHAGE W CC	333	\$6,874	3.4	51	\$6,053	2.9	282	\$7,023	3.5
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	330	\$3,933	2.1	187	\$3,687	1.8	143	\$4,256	2.6
17	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	324	\$6,904	2.9	48	\$5,253	2.1	276	\$7,191	3.0
18	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	320	\$1,693	2.4	320	\$1,693	2.4	-	-	-
19	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	260	\$8,832	2.0	177	\$8,457	1.7	83	\$9,633	2.6
20	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	241	\$3,908	2.4	241	\$3,908	2.4	-	-	-
21	132 ATHEROSCLEROSIS W CC	230	\$4,681	2.0	64	\$4,614	1.8	166	\$4,707	2.1
22	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	223	\$28,582	9.5	69	\$27,549	8.5	154	\$29,045	10.0
23	139 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	218	\$4,148	1.9	60	\$4,058	1.8	158	\$4,182	2.0
24	243 MEDICAL BACK PROBLEMS	217	\$4,989	3.3	101	\$5,096	3.1	116	\$4,895	3.5
25	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	214	\$4,694	3.3	38	\$4,696	3.2	176	\$4,694	3.4
	Subtotal	13,858	\$7,023	3.2	8,028	\$4,907	2.7	5,830	\$9,937	3.9
	All Other DRGs	14,680	\$13,957	4.3	7,815	\$13,358	4.0	6,865	\$14,639	4.6
	<b>Grand Total</b>	<b>28,538</b>	<b>\$10,590</b>	<b>3.8</b>	<b>15,843</b>	<b>\$9,076</b>	<b>3.3</b>	<b>12,695</b>	<b>\$12,480</b>	<b>4.3</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 6.34 - Northern 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 Charges	Total Cases	Average Charges	Total Charges <sup>(2)</sup>	% Total Charges	Total Cases	Average Charges	Total Charges <sup>(2)</sup>	% Total Charges
1	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	911	\$21,028	\$19,156,541	6.3%	831	\$20,199	\$16,785,191	5.6%	662	\$17,592	\$11,645,657	4.8%
2	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W/ CORONARY ART STENT	403	\$31,546	\$12,713,073	4.2%	624	\$31,786	\$19,834,191	6.6%	527	\$26,714	\$14,078,288	5.8%
3	107 CORONARY BYPASS W/ CARDIAC CATH	125	\$69,015	\$8,626,928	2.9%	153	\$59,613	\$9,120,854	3.0%	185	\$53,465	\$9,890,996	4.1%
4	483 TRACHEOSTOMY EXCEPT FOR FACE, MOUTH & NECK DIAGNOSES	33	\$218,369	\$7,206,162	2.4%	49	\$162,604	\$7,967,589	2.7%	30	\$155,412	\$4,662,356	1.9%
5	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W/ CC	884	\$7,427	\$6,565,535	2.2%	792	\$6,974	\$5,523,173	1.8%	934	\$6,742	\$6,296,998	2.6%
6	104 CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/ CARD CATH	55	\$116,607	\$6,413,407	2.1%	90	\$84,593	\$7,613,332	2.5%	82	\$82,243	\$6,743,944	2.8%
7	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W/ CC	223	\$28,582	\$6,373,789	2.1%	246	\$26,360	\$6,484,455	2.2%	248	\$26,405	\$6,548,491	2.7%
8	386 EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	71	\$84,772	\$6,018,786	2.0%	59	\$70,036	\$4,132,119	1.4%	43	\$64,147	\$2,758,332	1.1%
9	105 CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH	65	\$88,819	\$5,773,260	1.9%	67	\$62,765	\$4,205,286	1.4%	49	\$60,274	\$2,953,414	1.2%
10	127 HEART FAILURE & SHOCK	809	\$6,943	\$5,617,256	1.9%	850	\$6,217	\$5,284,649	1.8%	790	\$5,820	\$4,597,889	1.9%
11	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,700	\$3,002	\$5,102,609	1.7%	1,799	\$2,800	\$5,037,335	1.7%	1,766	\$2,595	\$4,583,566	1.9%
12	109 CORONARY BYPASS W/O CARDIAC CATH	103	\$45,569	\$4,693,650	1.6%	126	\$41,383	\$5,214,318	1.7%	109	\$38,089	\$4,149,472	1.7%
13	430 PSYCHOSES	655	\$6,940	\$4,545,736	1.5%	688	\$6,780	\$4,664,792	1.6%	620	\$6,534	\$4,051,010	1.7%
14	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	441	\$8,484	\$3,741,277	1.2%	506	\$8,440	\$4,270,521	1.4%	443	\$6,785	\$3,005,571	1.2%
15	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	512	\$7,270	\$3,722,320	1.2%	522	\$6,830	\$3,565,358	1.2%	457	\$6,064	\$2,771,052	1.1%
16	110 MAJOR CARDIOVASCULAR PROCEDURES W/ CC	69	\$53,463	\$3,688,969	1.2%	61	\$51,315	\$3,130,189	1.0%	71	\$53,576	\$3,803,888	1.6%
17	517 PERCUTANEOUS CARDIOVASC PROC W/O AMI, W/ STENT	88	\$39,166	\$3,446,613	1.1%	-	-	-	-	-	-	-	-
18	371 CESAREAN SECTION W/O CC	546	\$6,235	\$3,404,069	1.1%	497	\$6,176	\$3,069,594	1.0%	490	\$5,509	\$2,699,497	1.1%
19	1 CRANIOTOMY AGE >17 EXCEPT FOR TRAUMA	88	\$37,433	\$3,294,070	1.1%	76	\$31,362	\$2,383,495	0.8%	58	\$25,865	\$1,500,159	0.6%
20	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	487	\$6,479	\$3,155,330	1.0%	495	\$6,641	\$3,287,051	1.1%	530	\$5,692	\$3,016,926	1.2%
21	486 COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	52	\$59,468	\$3,092,323	1.0%	59	\$57,554	\$3,395,678	1.1%	44	\$51,794	\$2,278,954	0.9%
22	154 STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE >17 W/ CC	54	\$53,868	\$2,908,865	1.0%	60	\$34,998	\$2,099,888	0.7%	46	\$33,682	\$1,549,390	0.6%
23	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/ CC	526	\$5,471	\$2,877,977	1.0%	505	\$4,905	\$2,477,250	0.8%	457	\$4,299	\$1,964,772	0.8%
24	210 HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W/ CC	185	\$15,257	\$2,822,536	0.9%	178	\$15,510	\$2,760,865	0.9%	172	\$13,057	\$2,245,728	0.9%
25	488 SPINAL FUSION W/O CC	112	\$23,880	\$2,674,547	0.9%	122	\$22,691	\$2,768,301	0.9%	103	\$16,282	\$1,677,087	0.7%
	<b>Subtotal</b>	<b>9,197</b>	<b>\$14,965</b>	<b>\$137,635,628</b>	<b>45.5%</b>	<b>9,455</b>	<b>\$14,286</b>	<b>\$135,075,474</b>	<b>45.0%</b>	<b>8,916</b>	<b>\$12,278</b>	<b>\$109,473,437</b>	<b>45.2%</b>
	All Other DRGs	19,341	\$8,510	\$164,584,372	54.5%	19,617	\$8,408	\$164,934,526	55.0%	17,877	\$7,428	\$132,786,563	54.8%
	<b>Grand Total</b>	<b>28,538</b>	<b>\$10,590</b>	<b>\$302,220,000</b>	<b>100.0%</b>	<b>29,072</b>	<b>\$10,320</b>	<b>\$300,070,000</b>	<b>100.0%</b>	<b>26,793</b>	<b>\$9,042</b>	<b>\$242,260,000</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.

(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 6.35 - Northern 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	All Discharges Percent	Payer Type			
			Commercial Percent	Medicaid <sup>(2)</sup> Percent	Medicare <sup>(2)</sup> Percent	Other <sup>(3)</sup> Percent
1	391 NORMAL NEWBORN	7.5%	63.4%	35.3%	-	1.4%
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	6.0%	65.1%	33.4%	-	1.5%
3	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	3.2%	22.0%	0.8%	76.6%	0.7%
4	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	3.1%	12.2%	2.0%	84.8%	0.9%
5	127 HEART FAILURE & SHOCK	2.8%	7.8%	1.7%	89.9%	0.6%
6	430 PSYCHOSES	2.3%	65.3%	5.3%	24.4%	4.9%
7	143 CHEST PAIN	2.0%	37.6%	3.6%	54.1%	4.6%
8	371 CESAREAN SECTION W/O CC	1.9%	70.9%	28.0%	0.6%	0.6%
9	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	1.8%	21.1%	4.9%	71.1%	2.9%
10	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	1.8%	84.8%	4.3%	9.0%	2.0%
11	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	1.7%	10.3%	6.0%	83.2%	0.6%
12	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	1.6%	10.7%	1.4%	87.1%	0.9%
13	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	1.4%	47.6%	1.7%	49.9%	0.7%
14	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	1.2%	17.1%	1.8%	79.7%	1.5%
15	174 G.I. HEMORRHAGE W CC	1.2%	13.5%	1.2%	84.7%	0.6%
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	1.2%	44.2%	6.7%	47.0%	2.1%
17	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	1.1%	13.3%	2.2%	82.7%	1.9%
18	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	1.1%	62.8%	36.9%	-	0.3%
19	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	0.9%	55.4%	2.3%	30.8%	11.5%
20	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	0.8%	57.7%	40.7%	-	1.7%
21	132 ATHEROSCLEROSIS W CC	0.8%	16.5%	3.5%	78.7%	1.3%
22	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	0.8%	29.6%	1.4%	68.6%	0.5%
23	139 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC	0.8%	30.3%	0.9%	68.4%	0.5%
24	243 MEDICAL BACK PROBLEMS	0.8%	34.1%	6.9%	53.0%	6.0%
25	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	0.8%	10.3%	2.8%	85.5%	1.4%
	<b>Subtotal</b>	<b>48.6%</b>	<b>41.5%</b>	<b>14.1%</b>	<b>42.5%</b>	<b>1.8%</b>
	All Other DRGs	51.4%	40.0%	10.2%	51.5%	3.3%
	<b>Grand Total<sup>(4)</sup></b>	<b>100.0%</b>	<b>40.7%</b>	<b>12.1%</b>	<b>44.6%</b>	<b>2.6%</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%.

