



# **Eastern Health Planning Region**

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

**Table 6.42 - Eastern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, 2001, 2002, and 2003<sup>(1)</sup>**

Rank	DRG Description	Year					
		2003		2002		2001	
		Number	Percent	Number	Percent	Number	Percent
1	391 NORMAL NEWBORN	7,006	11.1%	6,383	10.6%	5,091	9.9%
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	5,615	8.9%	5,614	9.4%	4,873	9.5%
3	430 PSYCHOSES	2,903	4.6%	3,352	5.6%	3,155	6.1%
4	371 CESAREAN SECTION W/O CC	1,842	2.9%	1,702	2.8%	1,306	2.5%
5	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	1,620	2.6%	1,452	2.4%	1,081	2.1%
6	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,409	2.2%	1,189	2.0%	964	1.9%
7	127 HEART FAILURE & SHOCK	1,187	1.9%	1,146	1.9%	840	1.6%
8	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	1,016	1.6%	818	1.4%	702	1.4%
9	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	907	1.4%	886	1.5%	785	1.5%
10	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	872	1.4%	807	1.3%	643	1.2%
11	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	830	1.3%	798	1.3%	680	1.3%
12	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	805	1.3%	755	1.3%	676	1.3%
13	143 CHEST PAIN	740	1.2%	703	1.2%	712	1.4%
14	388 PREMATURETY W/O MAJOR PROBLEMS	594	0.9%	373	0.6%	325	0.6%
15	174 G.I. HEMORRHAGE W CC	576	0.9%	548	0.9%	396	0.8%
16	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	575	0.9%	708	1.2%	576	1.1%
17	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	549	0.9%	585	1.0%	511	1.0%
18	370 CESAREAN SECTION W CC	549	0.9%	436	0.7%	377	0.7%
19	462 REHABILITATION	538	0.9%	439	0.7%	392	0.8%
20	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	509	0.8%	482	0.8%	455	0.9%
21	416 SEPTICEMIA AGE >17	469	0.7%	360	0.6%	242	0.5%
22	358 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC	448	0.7%	399	0.7%	341	0.7%
23	98 BRONCHITIS & ASTHMA AGE 0-17	441	0.7%	391	0.7%	365	0.7%
24	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	438	0.7%	390	0.7%	341	0.7%
25	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	432	0.7%	460	0.8%	389	0.8%
<b>Subtotal</b>		<b>32,870</b>	<b>52.1%</b>	<b>31,176</b>	<b>52.0%</b>	<b>26,218</b>	<b>50.9%</b>
All Other DRGs		30,257	47.9%	28,789	48.0%	25,324	49.1%
<b>Grand Total</b>		<b>63,127</b>	<b>100.0%</b>	<b>59,965</b>	<b>100.0%</b>	<b>51,542</b>	<b>100.0%</b>

Source: Nebraska Hospital Association, 2001-2003.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 91% for 2003, 85% for 2002, and 87% for 2001.

**Table 6.43 - Eastern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Diagnoses by ICD-9 Code, 2001, 2002, and 2003<sup>(1)</sup>**

Rank	ICD-9 Diagnosis Description	Year					
		2003		2002		2001	
		Number	Percent	Number	Percent	Number	Percent
1	V3000 SINGLE LB IN-HOSP W/O CS	6,486	10.3%	5,979	10.0%	5,083	9.9%
2	V3001 SINGLE LB IN-HOSP W CS	2,209	3.5%	1,832	3.1%	1,392	2.7%
3	486 PNEUMONIA, ORGANISM NOS	1,695	2.7%	1,582	2.6%	1,262	2.4%
4	41401 CRNRY ATHRSCL NATVE VSSL	1,317	2.1%	1,363	2.3%	1,129	2.2%
5	4280 CONGESTIVE HEART FAILURE	1,180	1.9%	1,230	2.1%	904	1.8%
6	65421 PREV C-DELIVERY-DELIVRD	894	1.4%	849	1.4%	644	1.2%
7	66411 DEL W 2 DEG LACERAT-DEL	817	1.3%	822	1.4%	661	1.3%
8	66401 DEL W 1 DEG LACERAT-DEL	779	1.2%	702	1.2%	655	1.3%
9	2765 HYPOVOLEMIA	706	1.1%	653	1.1%	574	1.1%
10	71536 LOC OSTEOARTH NOS-L/LEG	679	1.1%	577	1.0%	320	0.6%
11	78659 CHEST PAIN NEC	668	1.1%	662	1.1%	640	1.2%
12	49121 OBS CHR BRNC W ACT EXA	653	1.0%	693	1.2%	569	1.1%
13	650 NORMAL DELIVERY	589	0.9%	705	1.2%	617	1.2%
14	64511 PROLONGED PREGNANCY	589	0.9%	363	0.6%	244	0.5%
15	42731 ATRIAL FIBRILLATION	561	0.9%	555	0.9%	469	0.9%
16	65971 ABN FTL HRT RATE/RHY-DEL	542	0.9%	436	0.7%	349	0.7%
17	72210 LUMBAR DISC DISPLACEMENT	523	0.8%	472	0.8%	435	0.8%
18	V5789 REHABILITATION PROC NEC	521	0.8%	398	0.7%	189	0.4%
19	29620 DEPRESS PSYCHOSIS-UNSPEC	516	0.8%	623	1.0%	637	1.2%
20	29630 RECURR DEPR PSYCHOS-UNSP	487	0.8%	345	0.6%	228	0.4%
21	66331 CORD ENTANGLE NEC-DELIV	441	0.7%	506	0.8%	417	0.8%
22	41071 SUBENDO INFARCT, INITIAL	423	0.7%	329	0.5%	260	0.5%
23	43491 CRBL ART OCL NOS W INFRC	419	0.7%	443	0.7%	304	0.6%
24	5990 URIN TRACT INFECTION NOS	361	0.6%	314	0.5%	259	0.5%
25	64421 EARLY ONSET DELIVERY-DEL	359	0.6%	320	0.5%	315	0.6%
<b>Subtotal</b>		<b>24,414</b>	<b>38.7%</b>	<b>22,753</b>	<b>37.9%</b>	<b>18,556</b>	<b>36.0%</b>
All Other Diagnoses		38,713	61.3%	37,212	62.1%	32,986	64.0%
<b>Grand Total</b>		<b>63,127</b>	<b>100.0%</b>	<b>59,965</b>	<b>100.0%</b>	<b>51,542</b>	<b>100.0%</b>

Source: Nebraska Hospital Association, 2001-2003.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 91% for 2003, 85% for 2002, and 87% for 2001.

**Table 6.44 - Eastern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Procedures by ICD-9 Code, 2001, 2002, and 2003<sup>(1)</sup>**

Rank	ICD-9 Procedure Description	Year					
		2003		2002		2001	
		Number	Percent	Number	Percent	Number	Percent
1	640 CIRCUMCISION	3,744	9.7%	3,368	9.3%	2,841	9.1%
2	741 LOW CERVICAL C-SECTION	2,364	6.1%	2,119	5.9%	1,668	5.3%
3	7569 REPAIR OB LACERATION NEC	1,808	4.7%	1,816	5.0%	1,339	4.3%
4	7359 MANUAL ASSIST DELIV NEC	1,712	4.4%	1,979	5.5%	1,799	5.8%
5	736 EPISIOTOMY	1,398	3.6%	1,477	4.1%	1,300	4.2%
6	8154 TOTAL KNEE REPLACEMENT	966	2.5%	816	2.3%	594	1.9%
7	4516 EGD WITH CLOSED BIOPSY	909	2.4%	837	2.3%	635	2.0%
8	3893 VENOUS CATH NEC	901	2.3%	627	1.7%	428	1.4%
9	3601 PTCA-1 VES/ATH W/O AGENT	878	2.3%	951	2.6%	747	2.4%
10	684 TOTAL ABD HYSTERECTOMY	600	1.6%	639	1.8%	530	1.7%
11	3722 LEFT HEART CARDIAC CATH	597	1.5%	583	1.6%	552	1.8%
12	5123 LAPAROSCOPIC CHOLECYSTEC	546	1.4%	529	1.5%	442	1.4%
13	6859 OTHER VAG HYSTERECTOMY	541	1.4%	485	1.3%	443	1.4%
14	7534 FETAL MONITORING NOS	511	1.3%	32	0.1%	12	0.0%
15	8051 EXCISION INTERVERT DISC	499	1.3%	478	1.3%	455	1.5%
16	4513 SM BOWEL ENDOSCOPY NEC	427	1.1%	380	1.1%	369	1.2%
17	8151 TOTAL HIP REPLACEMENT	417	1.1%	402	1.1%	299	1.0%
18	331 SPINAL TAP	415	1.1%	345	1.0%	320	1.0%
19	8872 DX ULTRASOUND-HEART	337	0.9%	169	0.5%	162	0.5%
20	721 LOW FORCEPS W EPISIOTOMY	303	0.8%	409	1.1%	362	1.2%
21	9671 CONT MECH VENT < 96 HRS	279	0.7%	253	0.7%	197	0.6%
22	9604 INSERT ENDOTRACHEAL TUBE	279	0.7%	307	0.9%	268	0.9%
23	3995 HEMODIALYSIS	276	0.7%	335	0.9%	227	0.7%
24	8622 EXC WOUND DEBRIDEMENT	274	0.7%	207	0.6%	221	0.7%
25	4525 CLOS LARGE BOWEL BIOPSY	272	0.7%	274	0.8%	179	0.6%
<b>Subtotal</b>		<b>21,253</b>	<b>55.1%</b>	<b>19,817</b>	<b>54.9%</b>	<b>16,389</b>	<b>52.5%</b>
All Other Procedures		17,300	44.9%	16,292	45.1%	14,827	47.5%
<b>Grand Total</b>		<b>38,553</b>	<b>100.0%</b>	<b>36,109</b>	<b>100.0%</b>	<b>31,216</b>	<b>100.0%</b>

Source: Nebraska Hospital Association, 2001-2003.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 91% for 2003, 85% for 2002, and 87% for 2001.

**Table 6.45 - Eastern 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, 2003<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	7,007	\$1,380	2.1	7,007	\$1,380	2.1	-	-	-
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	5,615	\$4,752	2.2	5,615	\$4,752	2.2	-	-	-
3	430 PSYCHOSES	2,906	\$9,850	7.2	2,713	\$9,125	6.6	193	\$20,045	15.1
4	371 CESAREAN SECTION W/O CC	1,843	\$9,765	3.5	1,843	\$9,765	3.5	-	-	-
5	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	1,635	\$32,060	4.2	634	\$32,412	3.7	1,001	\$31,837	4.5
6	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,410	\$18,568	6.2	382	\$18,884	5.2	1,028	\$18,451	6.5
7	127 HEART FAILURE & SHOCK	1,187	\$17,844	5.7	248	\$19,994	4.8	939	\$17,277	6.0
8	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	1,016	\$3,020	2.6	1,016	\$3,020	2.6	-	-	-
9	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	909	\$12,809	2.3	861	\$12,867	2.2	48	\$11,761	2.7
10	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	872	\$12,957	4.4	454	\$12,100	3.8	418	\$13,887	5.1
11	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	830	\$6,551	2.7	830	\$6,551	2.7	-	-	-
12	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	805	\$15,822	5.2	308	\$15,118	4.5	497	\$16,257	5.6
13	143 CHEST PAIN	744	\$8,720	1.8	440	\$8,771	1.6	304	\$8,646	2.2
14	388 PREMATURE W/O MAJOR PROBLEMS	594	\$10,693	7.3	594	\$10,693	7.3	-	-	-
15	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	578	\$16,247	5.2	165	\$19,115	4.8	413	\$15,101	5.3
16	174 G.I. HEMORRHAGE W CC	578	\$16,913	4.9	185	\$18,992	4.5	393	\$15,935	5.0
17	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	552	\$15,113	5.4	195	\$16,372	4.6	357	\$14,425	5.8
18	370 CESAREAN SECTION W CC	549	\$15,215	4.4	549	\$15,215	4.4	-	-	-
19	462 REHABILITATION	541	\$31,083	17.3	245	\$35,583	18.6	296	\$27,358	16.2
20	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	511	\$13,457	2.2	377	\$13,253	1.9	134	\$14,031	3.1
21	416 SEPTICEMIA AGE >17	469	\$26,698	7.7	171	\$29,301	7.7	298	\$25,204	7.7
22	358 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC	448	\$17,643	3.1	414	\$17,486	3.1	34	\$19,556	3.8
23	98 BRONCHITIS & ASTHMA AGE 0-17	441	\$5,828	2.8	441	\$5,828	2.8	-	-	-
24	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	439	\$9,318	3.0	339	\$9,404	2.8	100	\$9,029	3.4
25	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	433	\$13,867	4.1	110	\$13,551	3.3	323	\$13,974	4.4
	Subtotal	<b>32,912</b>	<b>\$10,652</b>	<b>4.0</b>	<b>26,136</b>	<b>\$8,059</b>	<b>3.4</b>	<b>6,776</b>	<b>\$20,790</b>	<b>6.4</b>
	All Other DRGs	30,357	\$24,788	5.3	18,970	\$24,037	4.8	11,387	\$26,027	6.1
	<b>Grand Total</b>	<b>63,269</b>	<b>\$17,435</b>	<b>4.6</b>	<b>45,106</b>	<b>\$14,753</b>	<b>4.0</b>	<b>18,163</b>	<b>\$24,094</b>	<b>6.2</b>

Source: Nebraska Hospital Association, 2003.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar year. Reflects an estimated inpatient discharge contribution rate statewide of 91% for 2003.

**Table 6.46 - Eastern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, Ranked by Estimated Total Charges, 2001, 2002, and 2003<sup>(1)</sup>**

Rank	DRG Description	2003			2002			2001		
		Total Cases	Average Charges	Total Charges <sup>(2)</sup> % of Total Charges	Total Cases	Average Charges	Total Charges <sup>(2)</sup> % of Total Charges	Total Cases	Average Charges	Total Charges <sup>(2)</sup> % of Total Charges
1	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	1,635	\$32,060	\$52,417,862 4.8%	1,463	\$28,411	\$41,564,898 4.4%	1,090	\$25,624	\$27,930,256 3.8%
2	430 PSYCHOSES	2,906	\$9,850	\$28,623,970 2.6%	3,357	\$8,504	\$28,549,059 3.0%	3,160	\$8,314	\$26,272,684 3.6%
3	483 TRACHEOSTOMY EXCEPT FOR FACE, MOUTH & NECK DIAGNOSES	121	\$227,182	\$27,489,068 2.5%	112	\$183,192	\$20,517,457 2.2%	103	\$203,296	\$20,939,497 2.9%
4	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	5,615	\$4,752	\$26,685,087 2.4%	5,614	\$4,634	\$26,014,963 2.8%	4,875	\$4,338	\$21,149,221 2.9%
5	89 SIMPLE PNEUMONIA & PLEURISY, AGE >17 W CC	1,410	\$18,568	\$26,181,334 2.4%	1,190	\$15,845	\$18,856,068 2.0%	964	\$14,472	\$13,950,698 1.9%
6	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	433	\$55,832	\$24,175,337 2.2%	425	\$52,749	\$22,418,202 2.4%	353	\$44,186	\$15,597,553 2.1%
7	127 HEART FAILURE & SHOCK	1,197	\$17,844	\$21,181,398 1.9%	1,146	\$15,650	\$17,935,130 1.9%	840	\$14,358	\$12,060,385 1.6%
8	475 RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT	1,275	\$66,697	\$16,341,697 1.7%	283	\$58,495	\$16,594,049 1.8%	211	\$61,365	\$12,948,030 1.8%
9	371 CESAREAN SECTION W/O CC	1,843	\$9,765	\$17,997,045 1.6%	1,702	\$9,423	\$16,038,535 1.7%	1,307	\$8,623	\$11,270,812 1.5%
10	107 CORONARY BYPASS W CARDIAC CATH	216	\$78,413	\$16,937,184 1.5%	244	\$68,730	\$16,770,039 1.8%	243	\$67,054	\$16,294,097 2.2%
11	462 REHABILITATION	541	\$31,083	\$16,815,815 1.5%	441	\$28,310	\$12,484,620 1.3%	394	\$24,405	\$9,615,574 1.3%
12	496 COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	184	\$82,666	\$15,210,602 1.4%	102	\$69,420	\$7,080,885 0.8%	81	\$60,944	\$4,936,424 0.7%
13	517 PERCUTANEOUS CARDIOVASC PROC W/O AMI, W/ STENT	430	\$34,832	\$14,977,599 1.4%	780	\$33,668	\$26,276,990 2.8%	152	\$33,128	\$5,035,508 0.7%
14	468 EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS	258	\$52,155	\$13,456,081 1.2%	225	\$50,969	\$11,468,038 1.2%	200	\$42,458	\$8,491,516 1.2%
15	386 EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	164	\$81,043	\$13,291,104 1.2%	154	\$83,885	\$12,918,315 1.4%	155	\$85,526	\$13,256,494 1.8%
16	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	805	\$15,822	\$12,736,354 1.2%	755	\$14,370	\$10,849,263 1.2%	676	\$13,625	\$9,210,526 1.3%
17	416 SEPTICEMIA, AGE >17	469	\$26,698	\$12,521,285 1.1%	360	\$22,545	\$8,116,272 0.9%	242	\$21,803	\$5,276,269 0.7%
18	110 MAJOR CARDIOVASCULAR PROCEDURES W CC	182	\$68,051	\$12,385,302 1.1%	179	\$64,671	\$11,576,121 1.2%	124	\$58,631	\$7,270,224 1.0%
19	516 PERCUTANEOUS CARDIOVASC PROC WITH AMI	275	\$43,135	\$11,862,169 1.1%	321	\$41,216	\$13,230,249 1.4%	57	\$38,879	\$2,216,106 0.3%
20	79 RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W CC	333	\$35,318	\$11,760,785 1.1%	299	\$28,445	\$8,505,131 0.9%	279	\$25,955	\$7,241,436 1.0%
21	109 CORONARY BYPASS W/O CARDIAC CATH	215	\$54,282	\$11,670,543 1.1%	197	\$47,690	\$9,394,923 1.0%	162	\$45,670	\$7,398,563 1.0%
22	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	909	\$12,809	\$11,643,156 1.1%	-	-	-	-	-	-
23	527 PERCUTANEOUS CARDIOVASC PROC W/ DRUG ELUTING STENT W/O AMI	302	\$37,728	\$11,393,994 1.0%	-	-	-	-	-	-
24	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	872	\$12,957	\$11,298,429 1.0%	809	\$10,662	\$8,625,857 0.9%	643	\$10,010	\$6,436,295 0.9%
25	75 MAJOR CHEST PROCEDURES	245	\$45,076	\$11,043,649 1.0%	221	\$41,722	\$9,220,623 1.0%	167	\$34,567	\$5,772,696 0.8%
	Subtotal	21,825	\$20,715	\$452,096,849 41.0%	21,267	\$16,121	\$385,368,991 41.1%	17,264	\$16,155	\$278,898,494 38.0%
	All Other DRGs	41,444	\$15,708	\$651,003,151 59.0%	38,811	\$14,242	\$552,741,009 58.9%	34,395	\$13,231	\$455,071,506 62.0%
	Grand Total	63,269	\$17,435	\$1,103,100,000 100.0%	60,078	\$15,615	\$938,110,000 100.0%	51,659	\$14,208	\$733,970,000 100.0%

Source: Nebraska Hospital Association, 2001-2003.

Note: Hospitalization may have occurred outside area of residence.

- (1) Calendar years. Reflects an estimated inpatient discharge contribution rate of 91% for 2003, 85% for 2002, and 87% for 2001.
- (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 6.47 - Eastern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, Percent of Total Discharges, and Payer Types, 2003<sup>(1)</sup>**

Rank	DRG Description	All Discharges Percent	Payer Type				Other <sup>(3)</sup> Percent
			Commercial Percent	Medicaid <sup>(2)</sup> Percent	Medicare <sup>(2)</sup> Percent	Other <sup>(3)</sup> Percent	
1	391 NORMAL NEWBORN	11.1%	76.8%	22.8%	-	0.4%	
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	8.9%	79.8%	19.9%	-	0.4%	
3	430 PSYCHOSES	4.6%	68.4%	26.0%	4.5%	1.1%	
4	371 CESAREAN SECTION W/O CC	2.9%	83.3%	15.7%	0.3%	0.7%	
5	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	2.6%	65.3%	1.7%	32.6%	0.5%	
6	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	2.2%	56.5%	3.8%	39.3%	0.4%	
7	127 HEART FAILURE & SHOCK	1.9%	54.3%	4.6%	40.6%	0.4%	
8	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	1.6%	75.8%	23.3%	-	0.9%	
9	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	1.4%	92.3%	3.5%	3.9%	0.3%	
10	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	1.4%	59.2%	5.6%	34.5%	0.7%	
11	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	1.3%	80.1%	19.0%	0.2%	0.6%	
12	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	1.3%	55.2%	7.7%	36.4%	0.8%	
13	143 CHEST PAIN	1.2%	62.0%	4.6%	31.6%	1.9%	
14	388 PREMATURETY W/O MAJOR PROBLEMS	0.9%	71.6%	27.4%	-	1.0%	
15	174 G.I. HEMORRHAGE W CC	0.9%	57.8%	5.7%	35.8%	0.7%	
16	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	0.9%	64.0%	2.9%	32.0%	1.0%	
17	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	0.9%	57.3%	5.3%	36.2%	1.3%	
18	370 CESAREAN SECTION W CC	0.9%	74.3%	23.9%	0.4%	1.5%	
19	462 REHABILITATION	0.9%	65.6%	4.3%	29.4%	0.7%	
20	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	0.8%	74.6%	2.5%	18.2%	4.7%	
21	416 SEPTICEMIA AGE >17	0.7%	58.0%	4.7%	37.1%	0.2%	
22	358 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC	0.7%	86.8%	6.5%	6.0%	0.7%	
23	98 BRONCHITIS & ASTHMA AGE 0-17	0.7%	71.2%	28.8%	-	-	
24	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	0.7%	77.9%	6.4%	14.6%	1.1%	
25	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	0.7%	65.1%	3.9%	29.8%	1.2%	
<b>Subtotal</b>		<b>52.0%</b>	<b>72.2%</b>	<b>15.5%</b>	<b>11.6%</b>	<b>0.7%</b>	
All Other DRGs		48.0%	67.1%	8.5%	22.9%	1.4%	
<b>Grand Total<sup>(4)</sup></b>		<b>100.0%</b>	<b>69.8%</b>	<b>12.2%</b>	<b>17.0%</b>	<b>1.1%</b>	

Source: Nebraska Hospital Association, 2003.

Note: Hospitalization may have occurred outside area of residence.

(1) Calendar year. Reflects an estimated inpatient discharge contribution rate statewide of 91% for 2003.

(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%.

