



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, 2001, 2002, and 2003⁽¹⁾

Rank	DRG Description	Year					
		2003		2002		2001	
		Number	Percent	Number	Percent	Number	Percent
1	391 NORMAL NEWBORN	2,330	8.4%	2,201	8.2%	2,109	7.7%
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,654	6.0%	1,622	6.0%	1,666	6.1%
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,000	3.6%	833	3.1%	873	3.2%
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	921	3.3%	874	3.3%	832	3.1%
5	127 HEART FAILURE & SHOCK	741	2.7%	720	2.7%	790	2.9%
6	371 CESAREAN SECTION W/O CC	665	2.4%	564	2.1%	523	1.9%
7	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	535	1.9%	495	1.8%	516	1.9%
8	430 PSYCHOSES	506	1.8%	573	2.1%	629	2.3%
9	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	468	1.7%	427	1.6%	480	1.8%
10	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	435	1.6%	452	1.7%	466	1.8%
11	143 CHEST PAIN	425	1.5%	420	1.6%	567	2.1%
12	174 G.I. HEMORRHAGE W CC	376	1.4%	312	1.2%	322	1.2%
13	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	346	1.2%	301	1.1%	329	1.2%
14	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	343	1.2%	313	1.2%	311	1.1%
15	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	303	1.1%	309	1.2%	320	1.2%
16	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	271	1.0%	314	1.2%	321	1.2%
17	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	268	1.0%	235	0.9%	210	0.8%
18	416 SEPTICEMIA AGE >17	226	0.8%	194	0.7%	168	0.6%
19	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	224	0.8%	423	1.6%	429	1.6%
20	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	223	0.8%	201	0.7%	210	0.8%
21	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	221	0.8%	221	0.8%	243	0.9%
22	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	221	0.8%	277	1.0%	236	0.9%
23	517 PERCUTANEOUS CARDIOVASC PROC W/O AMI, W/ STENT	219	0.8%	330	1.2%	80	0.3%
24	98 BRONCHITIS & ASTHMA AGE 0-17	210	0.8%	327	1.2%	202	0.7%
25	243 MEDICAL BACK PROBLEMS	205	0.7%	193	0.7%	210	0.8%
Subtotal		13,336	48.2%	13,131	48.9%	13,062	47.9%
All Other DRGs		14,352	51.8%	13,727	51.1%	14,185	52.1%
Grand Total		27,688	100.0%	26,858	100.0%	27,247	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.

Table 6.31 - Northern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Diagnoses by ICD-9 Code, 2001, 2002, and 2003⁽¹⁾

Rank	ICD-9 Diagnosis Description	Year					
		2003		2002		2001	
		Number	Percent	Number	Percent	Number	Percent
1	V3000 SINGLE LB IN-HOSP W/O CS	2,031	7.3%	2,011	7.5%	2,008	7.4%
2	486 PNEUMONIA, ORGANISM NOS	1,193	4.3%	1,086	4.0%	1,035	3.8%
3	V3001 SINGLE LB IN-HOSP W CS	774	2.8%	664	2.5%	577	2.1%
4	4280 CONGESTIVE HEART FAILURE	729	2.6%	726	2.7%	768	2.8%
5	41401 CRNRY ATHRSCL NATVE VSSL	663	2.4%	682	2.5%	599	2.2%
6	2765 HYPOVOLEMIA	518	1.9%	407	1.5%	401	1.5%
7	66401 DEL W 1 DEG LACERAT-DEL	387	1.4%	331	1.2%	333	1.2%
8	49121 OBS CHR BRNC W ACT EXA	367	1.3%	351	1.3%	353	1.3%
9	42731 ATRIAL FIBRILLATION	363	1.3%	352	1.3%	340	1.2%
10	65421 PREV C-DELIVERY-DELIVRD	359	1.3%	300	1.1%	273	1.0%
11	66411 DEL W 2 DEG LACERAT-DEL	337	1.2%	359	1.3%	318	1.2%
12	71596 OSTEOARTHROS NOS-L/LEG	277	1.0%	239	0.9%	312	1.1%
13	78659 CHEST PAIN NEC	271	1.0%	256	1.0%	320	1.2%
14	650 NORMAL DELIVERY	246	0.9%	286	1.1%	296	1.1%
15	41071 SUBENDO INFARCT, INITIAL	246	0.9%	215	0.8%	248	0.9%
16	71536 LOC OSTEOARTH NOS-L/LEG	244	0.9%	247	0.9%	136	0.5%
17	5990 URIN TRACT INFECTION NOS	223	0.8%	208	0.8%	212	0.8%
18	5589 NONINF GASTROENTERIT NEC	210	0.8%	144	0.5%	147	0.5%
19	78650 CHEST PAIN NOS	199	0.7%	166	0.6%	280	1.0%
20	6826 CELLULITIS OF LEG	190	0.7%	153	0.6%	201	0.7%
21	72210 LUMBAR DISC DISPLACEMENT	188	0.7%	205	0.8%	255	0.9%
22	436 CVA	172	0.6%	182	0.7%	205	0.8%
23	5789 GASTROINTEST HEMORR NOS	163	0.6%	139	0.5%	143	0.5%
24	56211 DVRTCLI COLON W/O HMRHG	157	0.6%	167	0.6%	154	0.6%
25	43491 CRBL ART OCL NOS W INFRC	142	0.5%	180	0.7%	130	0.5%
Subtotal		10,649	38.5%	10,056	37.4%	10,044	36.9%
All Other Diagnoses		17,039	61.5%	16,802	62.6%	17,203	63.1%
Grand Total		27,688	100.0%	26,858	100.0%	27,247	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.

Table 6.32 - Northern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Procedures by ICD-9 Code, 2001, 2002, and 2003⁽¹⁾

Rank	ICD-9 Procedure Description	Year					
		2003		2002		2001	
		Number	Percent	Number	Percent	Number	Percent
1	640 CIRCUMCISION	1,169	8.0%	1,071	7.6%	1,056	7.5%
2	741 LOW CERVICAL C-SECTION	807	5.5%	683	4.8%	600	4.3%
3	7359 MANUAL ASSIST DELIV NEC	702	4.8%	682	4.8%	586	4.2%
4	7569 REPAIR OB LACERATION NEC	648	4.4%	640	4.5%	624	4.4%
5	8154 TOTAL KNEE REPLACEMENT	540	3.7%	486	3.4%	453	3.2%
6	9904 PACKED CELL TRANSFUSION	454	3.1%	354	2.5%	392	2.8%
7	3601 PTCA-1 VES/ATH W/O AGENT	390	2.7%	440	3.1%	344	2.5%
8	4516 EGD WITH CLOSED BIOPSY	356	2.4%	363	2.6%	376	2.7%
9	3722 LEFT HEART CARDIAC CATH	306	2.1%	271	1.9%	213	1.5%
10	6859 OTHER VAG HYSTERECTOMY	246	1.7%	223	1.6%	203	1.4%
11	684 TOTAL ABD HYSTERECTOMY	225	1.5%	262	1.9%	322	2.3%
12	8151 TOTAL HIP REPLACEMENT	222	1.5%	237	1.7%	219	1.6%
13	5123 LAPAROSCOPIC CHOLECYSTEC	219	1.5%	251	1.8%	217	1.5%
14	736 EPISIOTOMY	203	1.4%	236	1.7%	257	1.8%
15	3893 VENOUS CATH NEC	183	1.2%	131	0.9%	144	1.0%
16	331 SPINAL TAP	180	1.2%	159	1.1%	136	1.0%
17	8051 EXCISION INTERVERT DISC	179	1.2%	222	1.6%	246	1.8%
18	4709 OTHER APPENDECTOMY	144	1.0%	128	0.9%	208	1.5%
19	8622 EXC WOUND DEBRIDEMENT	137	0.9%	132	0.9%	128	0.9%
20	3812 HEAD & NECK ENDARTER NEC	125	0.9%	138	1.0%	153	1.1%
21	8152 PARTIAL HIP REPLACEMENT	124	0.8%	106	0.8%	137	1.0%
22	6029 OTH TRANSURETH PROSTATEC	120	0.8%	101	0.7%	116	0.8%
23	4513 SM BOWEL ENDOSCOPY NEC	112	0.8%	95	0.7%	105	0.7%
24	309 SPINAL CANAL EXPLOR NEC	108	0.7%	83	0.6%	90	0.6%
25	9671 CONT MECH VENT < 96 HRS	98	0.7%	91	0.6%	93	0.7%
Subtotal		7,997	54.6%	7,585	53.7%	7,418	52.8%
All Other Procedures		6,649	45.4%	6,531	46.3%	6,622	47.2%
Grand Total		14,646	100.0%	14,116	100.0%	14,040	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.

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, 2003⁽¹⁾

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	2,367	\$1,200	2.0	2,367	\$1,200	2.0	-	-	-
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,680	\$3,435	2.0	1,680	\$3,435	2.0	-	-	-
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,020	\$8,693	4.4	158	\$9,039	3.9	862	\$8,630	4.5
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	1,007	\$25,027	4.0	268	\$26,152	3.5	739	\$24,619	4.2
5	127 HEART FAILURE & SHOCK	759	\$8,914	4.1	81	\$16,336	4.1	678	\$8,027	4.0
6	371 CESAREAN SECTION W/O CC	680	\$6,627	3.2	680	\$6,627	3.2	-	-	-
7	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	543	\$6,282	3.0	190	\$6,817	2.7	353	\$5,994	3.2
8	430 PSYCHOSES	525	\$9,041	7.3	450	\$7,851	6.3	75	\$16,180	13.3
9	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	480	\$8,706	3.8	91	\$9,809	3.7	389	\$8,448	3.9
10	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	452	\$8,652	2.1	403	\$8,647	2.1	49	\$8,696	2.5
11	143 CHEST PAIN	430	\$4,655	1.5	209	\$4,826	1.3	221	\$4,494	1.7
12	174 G.I. HEMORRHAGE W CC	387	\$8,591	3.5	63	\$9,093	3.2	324	\$8,493	3.6
13	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	357	\$6,093	3.5	81	\$7,498	3.1	276	\$5,681	3.7
14	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	346	\$2,562	2.7	346	\$2,562	2.7	-	-	-
15	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	315	\$7,840	3.0	38	\$9,129	2.9	277	\$7,664	3.1
16	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	281	\$34,494	9.9	91	\$38,133	10.5	190	\$32,751	9.6
17	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	278	\$4,834	2.3	179	\$5,139	2.1	99	\$4,282	2.5
18	517 PERCUTANEOUS CARDIOVASC PROC W/O AMI, W/ STENT	243	\$28,693	1.7	87	\$34,964	1.6	156	\$25,195	1.7
19	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	238	\$11,781	2.1	167	\$11,140	1.8	71	\$13,287	2.8
20	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	235	\$10,887	4.5	42	\$17,358	5.7	193	\$9,479	4.2
21	416 SEPTICEMIA AGE >17	230	\$15,578	5.8	41	\$20,677	5.8	189	\$14,472	5.8
22	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	228	\$5,003	2.7	228	\$5,003	2.7	-	-	-
23	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	226	\$5,818	3.3	62	\$5,305	2.7	164	\$6,012	3.5
24	243 MEDICAL BACK PROBLEMS	214	\$5,614	3.3	75	\$5,498	2.5	139	\$5,677	3.7
25	98 BRONCHITIS & ASTHMA AGE 0-17	213	\$4,388	2.6	213	\$4,388	2.6	-	-	-
	Subtotal	13,734	\$8,199	3.3	8,290	\$5,934	2.7	5,444	\$11,648	4.1
	All Other DRGs	15,308	\$17,779	4.5	7,872	\$18,133	4.2	7,436	\$17,403	4.8
	Grand Total	29,042	\$13,248	3.9	16,162	\$11,876	3.4	12,880	\$14,971	4.5

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 6.34 - Northern 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⁽¹⁾

Rank	DRG Description	2003				2002				2001			
		Total Cases	Average Charges	Total Charges ⁽²⁾	% Total Charges	Total Cases	Average Charges	Total Charges ⁽²⁾	% Total Charges	Total Cases	Average Charges	Total Charges ⁽²⁾	% Total Charges
1	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	1,007	\$25,027	\$25,202,415	6.6%	945	\$23,678	\$22,375,807	6.4%	911	\$21,028	\$19,156,541	6.3%
2	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	281	\$34,494	\$9,692,868	2.5%	241	\$30,733	\$7,406,747	2.1%	223	\$28,582	\$6,373,789	2.1%
3	107 CORONARY BYPASS W CARDIAC CATH	125	\$75,075	\$9,384,345	2.4%	142	\$71,256	\$10,118,377	2.9%	125	\$69,015	\$8,626,928	2.9%
4	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	1,020	\$8,693	\$8,866,895	2.3%	848	\$7,867	\$6,670,889	1.9%	884	\$7,427	\$6,565,535	2.2%
5	496 COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	99	\$80,079	\$7,927,800	2.1%	70	\$66,525	\$4,656,783	1.3%	52	\$59,468	\$3,092,323	1.0%
6	517 PERCUTANEOUS CARDIOVASC PROC W/O AMI, W/ STENT	243	\$28,693	\$6,972,290	1.8%	352	\$31,718	\$11,164,839	3.2%	88	\$39,166	\$3,446,613	1.1%
7	127 HEART FAILURE & SHOCK	759	\$8,914	\$6,765,827	1.8%	737	\$7,447	\$5,488,184	1.6%	809	\$6,943	\$5,617,256	1.9%
8	109 CORONARY BYPASS W/O CARDIAC CATH	113	\$54,145	\$6,118,335	1.6%	146	\$50,393	\$7,357,412	2.1%	103	\$45,569	\$4,693,650	1.6%
9	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	1,680	\$3,435	\$5,770,875	1.5%	1,641	\$3,205	\$5,260,071	1.5%	1,700	\$3,002	\$5,102,609	1.7%
10	105 CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH	66	\$84,709	\$5,590,791	1.5%	72	\$73,845	\$5,316,833	1.5%	65	\$88,819	\$5,773,260	1.9%
11	483 TRACHEOSTOMY EXCEPT FOR FACE, MOUTH & NECK DIAGNOSES	32	\$168,058	\$5,377,869	1.4%	48	\$216,241	\$10,379,582	3.0%	33	\$218,369	\$7,206,162	2.4%
12	527 PERCUTANEOUS CARDIOVASC PROC W/ DRUG ELUTING STENT W/O AMI	139	\$36,364	\$5,054,555	1.3%	-	-	-	-	-	-	-	-
13	475 RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT	94	\$51,011	\$4,795,069	1.2%	80	\$37,736	\$3,018,901	0.9%	67	\$26,136	\$1,751,090	0.6%
14	430 PSYCHOSES	525	\$9,041	\$4,746,416	1.2%	586	\$7,328	\$4,294,308	1.2%	655	\$6,940	\$4,545,736	1.5%
15	371 CESAREAN SECTION W/O CC	680	\$6,627	\$4,506,209	1.2%	582	\$6,317	\$3,676,415	1.1%	546	\$6,235	\$3,404,069	1.1%
16	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	480	\$8,706	\$4,178,759	1.1%	432	\$7,521	\$3,249,148	0.9%	487	\$6,479	\$3,155,330	1.0%
17	116 OTH PERM CARDIAC PACEMAKER IMPLANT OR PTCA W CORONARY ART STENT	135	\$30,307	\$4,091,475	1.1%	142	\$29,756	\$4,225,333	1.2%	403	\$31,546	\$12,713,073	4.2%
18	110 MAJOR CARDIOVASCULAR PROCEDURES W CC	75	\$53,487	\$4,011,557	1.0%	101	\$60,571	\$6,117,664	1.7%	69	\$53,463	\$3,688,969	1.2%
19	514 CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATH	42	\$93,877	\$3,942,827	1.0%	50	\$105,894	\$5,294,695	1.5%	5	\$70,736	\$353,679	0.1%
20	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	452	\$8,652	\$3,910,854	1.0%	468	\$7,756	\$3,629,849	1.0%	512	\$7,270	\$3,722,320	1.2%
21	104 CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH	29	\$133,732	\$3,878,216	1.0%	45	\$114,249	\$5,141,194	1.5%	55	\$116,607	\$6,413,407	2.1%
22	210 HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W CC	187	\$19,769	\$3,696,727	1.0%	195	\$17,049	\$3,324,509	1.0%	185	\$15,257	\$2,822,536	0.9%
23	415 O.R. PROCEDURE FOR INFECTIOUS & PARASITIC DISEASES	73	\$49,686	\$3,627,111	0.9%	73	\$35,968	\$2,625,661	0.8%	60	\$36,471	\$2,188,265	0.7%
24	416 SEPTICEMIA AGE >17	230	\$15,578	\$3,582,941	0.9%	200	\$12,567	\$2,513,361	0.7%	174	\$11,574	\$2,013,920	0.7%
25	462 REHABILITATION	147	\$24,151	\$3,550,164	0.9%	107	\$25,885	\$2,769,687	0.8%	89	\$23,040	\$2,050,551	0.7%
	Subtotal	8,713	\$17,817	\$155,243,190	40.3%	8,303	\$17,593	\$146,076,249	41.8%	8,300	\$14,997	\$124,477,611	41.2%
	All Other DRGs	20,329	\$11,290	\$229,516,810	59.7%	19,850	\$10,261	\$203,683,751	58.2%	20,238	\$6,783	\$177,742,389	58.8%
	Grand Total	29,042	\$13,248	\$384,760,000	100.0%	28,153	\$12,423	\$349,760,000	100.0%	28,538	\$10,590	\$302,220,000	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 6.35 - Northern Health Planning Region Resident (Including Newborns) Discharges from Nebraska Hospitals: Leading Inpatient Hospital Discharges by DRG, Percent of Total Discharges, and Payer Types, 2003⁽¹⁾

Rank	DRG Description	All Discharges Percent	Payer Type				Other ⁽³⁾ Percent
			Commercial Percent	Medicaid ⁽²⁾ Percent	Medicare ⁽²⁾ Percent	Other ⁽³⁾ Percent	
1	391 NORMAL NEWBORN	8.2%	57.0%	41.4%	-	1.7%	
2	373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	5.8%	59.2%	38.5%	0.2%	2.1%	
3	89 SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	3.5%	12.1%	2.7%	84.7%	0.6%	
4	209 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY	3.5%	28.8%	2.1%	68.5%	0.6%	
5	127 HEART FAILURE & SHOCK	2.6%	11.1%	1.3%	87.1%	0.5%	
6	371 CESAREAN SECTION W/O CC	2.3%	62.7%	36.5%	-	0.9%	
7	182 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W CC	1.9%	25.2%	4.2%	68.1%	2.4%	
8	430 PSYCHOSES	1.8%	53.3%	20.8%	22.9%	3.1%	
9	88 CHRONIC OBSTRUCTIVE PULMONARY DISEASE	1.7%	12.5%	2.5%	84.0%	1.0%	
10	359 UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC	1.6%	81.4%	6.4%	11.1%	1.1%	
11	143 CHEST PAIN	1.5%	40.5%	3.0%	54.0%	2.6%	
12	174 G.I. HEMORRHAGE W CC	1.3%	16.8%	1.6%	79.6%	2.1%	
13	296 NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W CC	1.2%	16.5%	3.6%	79.3%	0.6%	
14	390 NEONATE W OTHER SIGNIFICANT PROBLEMS	1.2%	59.5%	39.3%	-	1.2%	
15	138 CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	1.1%	15.2%	0.3%	83.5%	1.0%	
16	148 MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	1.0%	38.8%	3.2%	57.7%	0.4%	
17	183 ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O CC	1.0%	51.1%	5.8%	38.5%	4.7%	
18	517 PERCUTANEOUS CARDIOVASC PROC W/O AMI, W/ STENT	0.8%	48.6%	1.2%	49.4%	0.8%	
19	500 BACK & NECK PROCS EXCEPT SPINAL FUSION W/O CC	0.8%	63.9%	2.9%	25.2%	8.0%	
20	14 SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TIA	0.8%	14.5%	4.3%	80.4%	0.9%	
21	416 SEPTICEMIA AGE >17	0.8%	14.8%	2.6%	82.6%	-	
22	372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES	0.8%	55.3%	44.3%	-	0.4%	
23	320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 W CC	0.8%	14.6%	8.0%	75.7%	1.8%	
24	243 MEDICAL BACK PROBLEMS	0.7%	29.0%	1.9%	65.4%	3.7%	
25	98 BRONCHITIS & ASTHMA AGE 0-17	0.7%	47.0%	52.1%	-	0.9%	
Subtotal		47.3%	40.6%	18.6%	39.2%	1.6%	
All Other DRGs		52.7%	41.0%	10.4%	46.2%	2.4%	
Grand Total⁽⁴⁾		100.0%	40.8%	14.3%	42.9%	2.0%	

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%.

