
DELAWARE HOSPITAL
DISCHARGE SUMMARY
REPORT ♦ 2019

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DELAWARE HEALTH AND SOCIAL SERVICES

Division of Public Health

Acknowledgments

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EXECUTIVE SUMMARY

This report describes:

Patient Characteristics

- Most Frequent Reason for Hospitalizations
- Patient Admission Source

Hospital Charges and Billing Patterns

Patient Discharge Status

Patient Distribution

Data in this report will present 2019 Delaware hospital discharge data, as well as trend data for selected characteristics. Hospitalization or hospital discharge refers to any discharge from a non-federal, short-stay, acute-care hospital in Delaware. Hospitalizations are expressed as numbers of discharges, not as unduplicated patients; as a result, a single patient with multiple hospitalizations can be counted more than once. Delaware hospital discharge data are based on inpatient hospitalizations and do not include outpatient, clinic, or emergency room data. Unless otherwise specified, the data presented represent discharges from the following hospitals and systems: Alfred I. duPont Hospital for Children, St. Francis Hospital, Select Specialty Hospital - Wilmington (also referred to as Select Medical Wilmington in some graphs), Christiana Care Health System (which consists of Wilmington Hospital and Christiana Hospital Newark), Bayhealth Medical Center (which consists of Kent General Hospital and Milford Memorial Hospital), Beebe Medical Center, and TidalHealth¹.

More information about the creation of annual files, as well as definitions of terms used in this report, can be found in the Technical Notes.

Key findings:

- The number of hospital discharges increased slightly from 2018 to 2019 increasing from 112,898 in 2018 to 113,158 in 2019. Total aggregate charges increased by 3.0 percent between 2018 and 2019. (see page 20).
- Women accounted for 56.3 percent of all discharges compared to 43.7 percent for men. In the 25 to 34 year age group, 78.5 percent of discharges were women.
- Inpatient hospitalizations in 2019 generated total charges of \$4.10 billion; 45.9 percent of that total (\$1.88 billion) was billed to Medicare.
- In 2019, the average length of stay (ALOS) was 5.3 days and the mean charge for a hospitalization was \$36,200.
- The most frequent reasons for hospitalization included hypertension with complications and secondary hypertension, osteoarthritis, septicemia (except in labor), pneumonia (except that caused by tuberculosis or std), and acute cerebrovascular disease.
- The point of origin for 23.5 percent of hospitalizations was a clinic or physician's office.
- Non-residents accounted for 12.3 percent of all discharges from Delaware hospitals, most of whom came from Pennsylvania, Maryland, and New Jersey.

¹See the Hospital Profiles at the end of this report for details about each of Delaware's acute care hospitals.

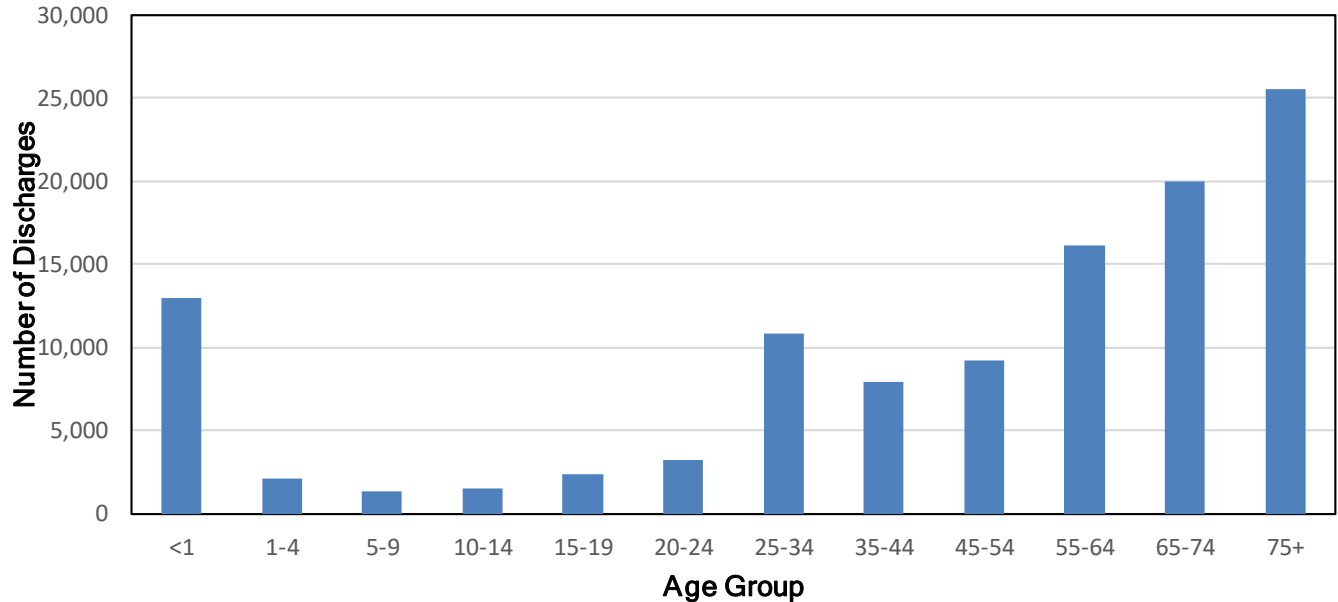
EXECUTIVE SUMMARY

- Hospital stays for previous C-sections represented 11.5 percent of pregnancy related discharges compared to 2.8 percent for normal deliveries.
- The average length of stay for premature and low birth weight babies was 28.0 days compared to 4.0 days for all deliveries.
- A little over half of patients underwent a procedure while hospitalized; 24.2 percent had only one procedure, 12.4 had two procedures, and 19.4 had three or more during their stay.
- Patients who were uninsured and those covered by Medicare were more likely to be classified as emergency/trauma at time of admission; 79.5 percent of uninsured patients and 78.2 percent of Medicare patients were classified as emergency/trauma at admission in 2019.
- Medicare and private insurers were the primary payers at 44.5 and 27.4 percent, respectively, of all hospital discharges in 2019. Medicaid was the primary payer in 23.5 percent of all hospital stays, and uninsured hospitalizations accounted for 1.5 percent of the total stays. The remaining 3.0 percent of hospitalizations were covered by other specified or unknown programs.

PATIENT CHARACTERISTICS

Patients under one year old accounted for 11.5 percent of all discharges in 2019; the majority of these discharges were infants hospitalized by virtue of being born in the hospital. Patients 65 and older were responsible for 40.2 percent of all discharges in 2019.

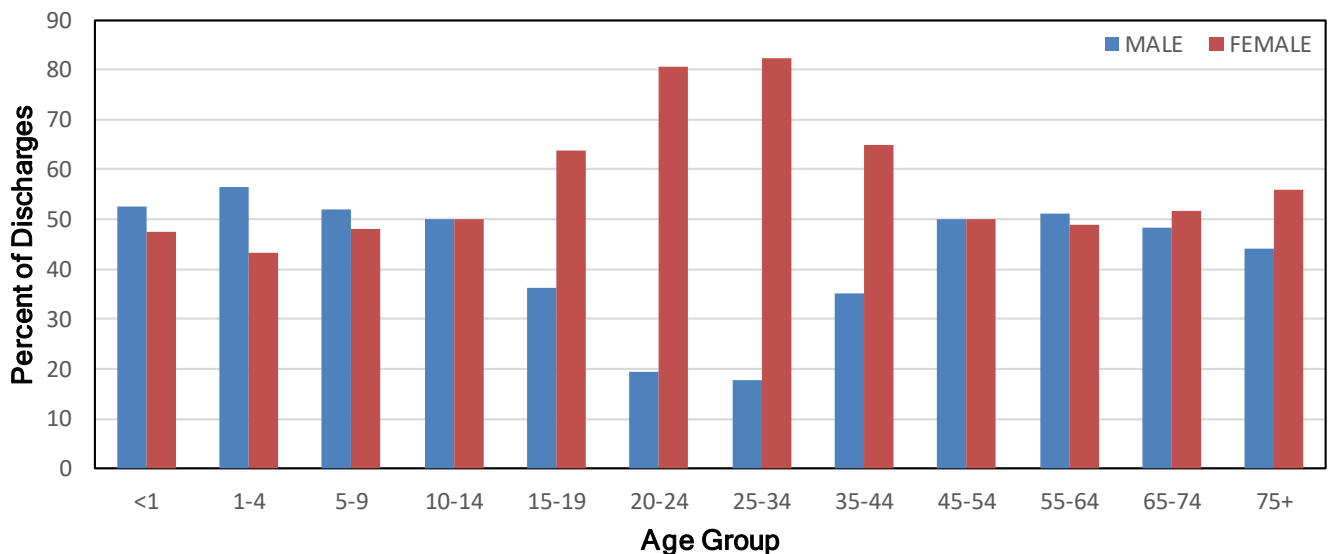
Figure 1. Number of Hospital Discharges by Age Group, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Males made up the majority of discharges in the age groups under 10. For nearly all age groups age 15 and higher, females made up the majority of discharges, and in the 20 to 34-year age range, four out of every five discharges were women. In 2019, 56.3 percent of total discharges were women.

Figure 2. Percentage of Discharges by Sex and Age Group, Delaware Hospitals, 2019

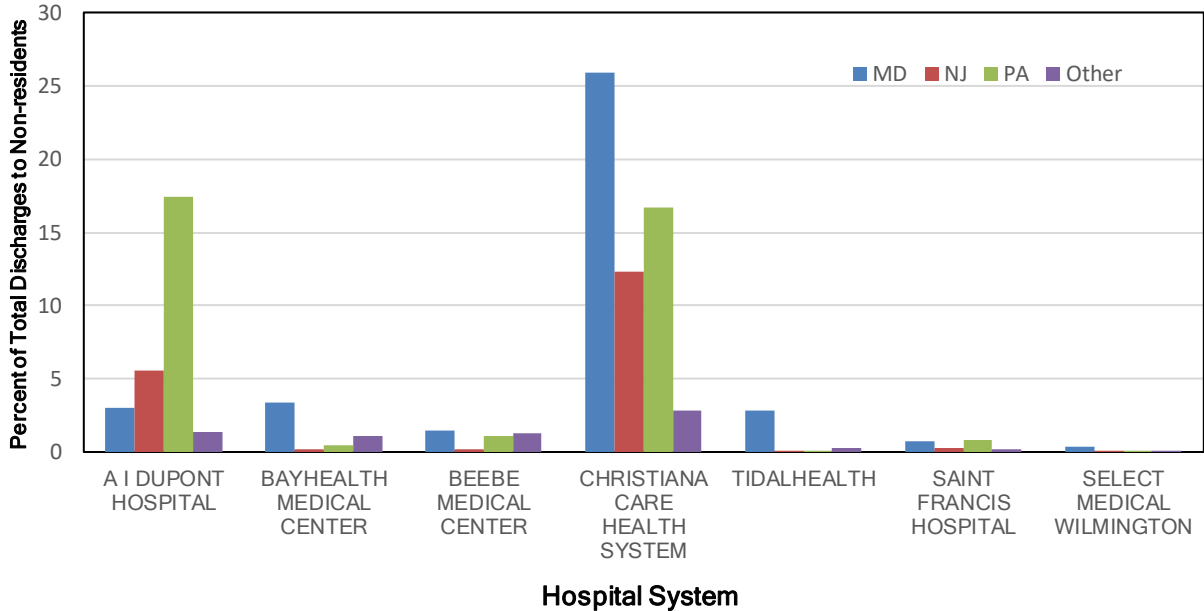


Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

PATIENT CHARACTERISTICS

Non-residents accounted for 12.3 percent of all discharges from Delaware hospitals, most of whom came from Pennsylvania, Maryland, and New Jersey. Close to half of the patients at A.I. duPont Hospital for Children were non-residents (46.1 percent).

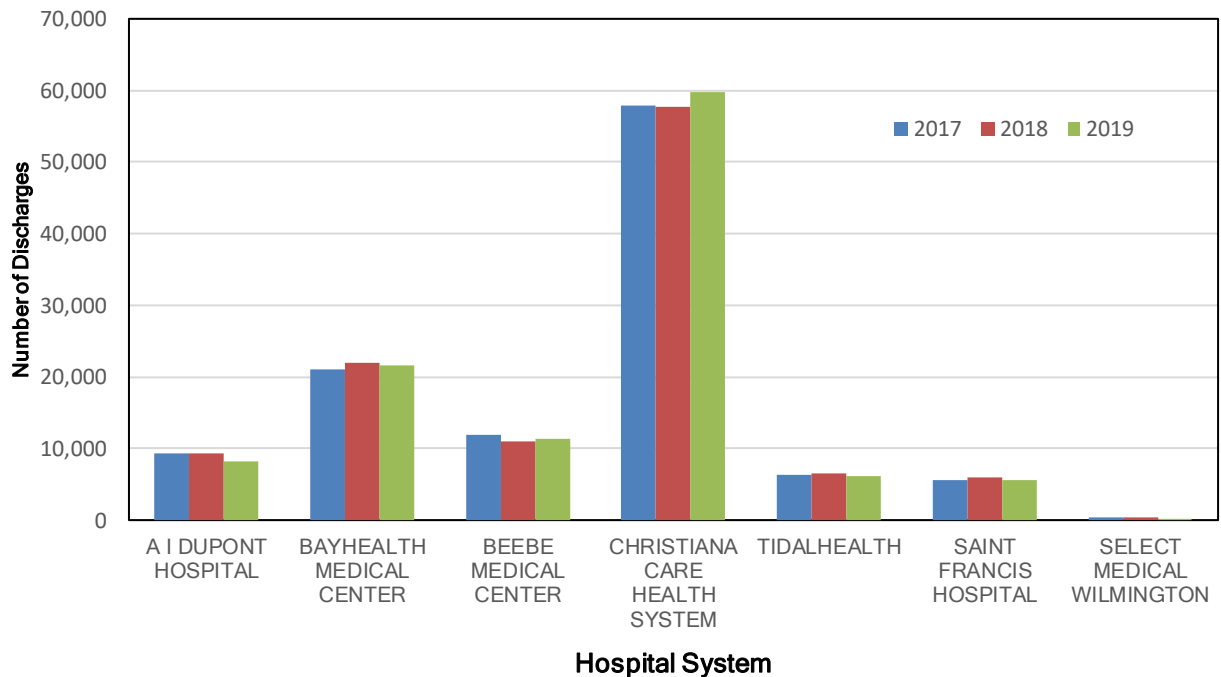
Figure 3. Percentage of Non-Resident Discharges by State, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Hospital admissions increased slightly between 2017 and 2019. Total admissions rose 0.7 percent moving from 112,423 in 2017 to 113,158 in 2019. The two hospitals with the greatest percent change were Select Medical Wilmington, which decreased 28.9 percent; and A. I. duPont Hospital, which decreased 12.5 percent.

Figure 4. Number of Discharges by Hospital System, Delaware Hospitals, 2017, 2018, and 2019

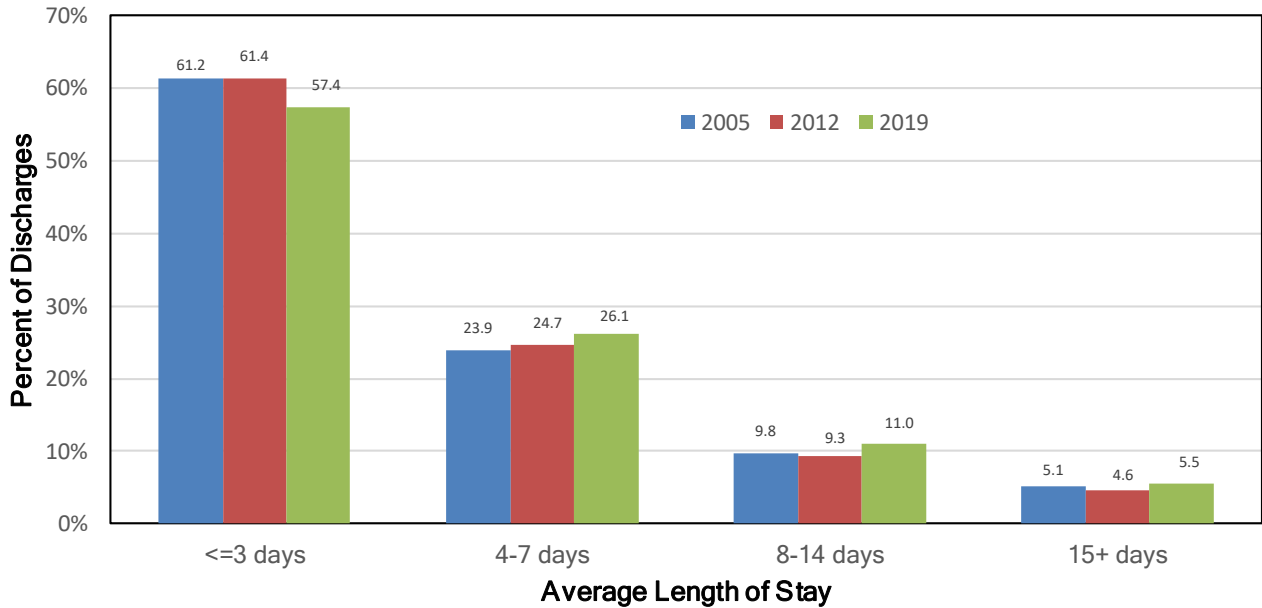


Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

PATIENT CHARACTERISTICS

Average length of stay (ALOS) increased from 4.8 to 5.3 days between 2005 and 2019. There was a 9.0 percent increase in patients staying four to seven days that was balanced by a 6.2 percent decrease in patients staying three days or less between 2005 and 2019. In 2019, 57.4 percent of patients stayed three or fewer days in the hospital.

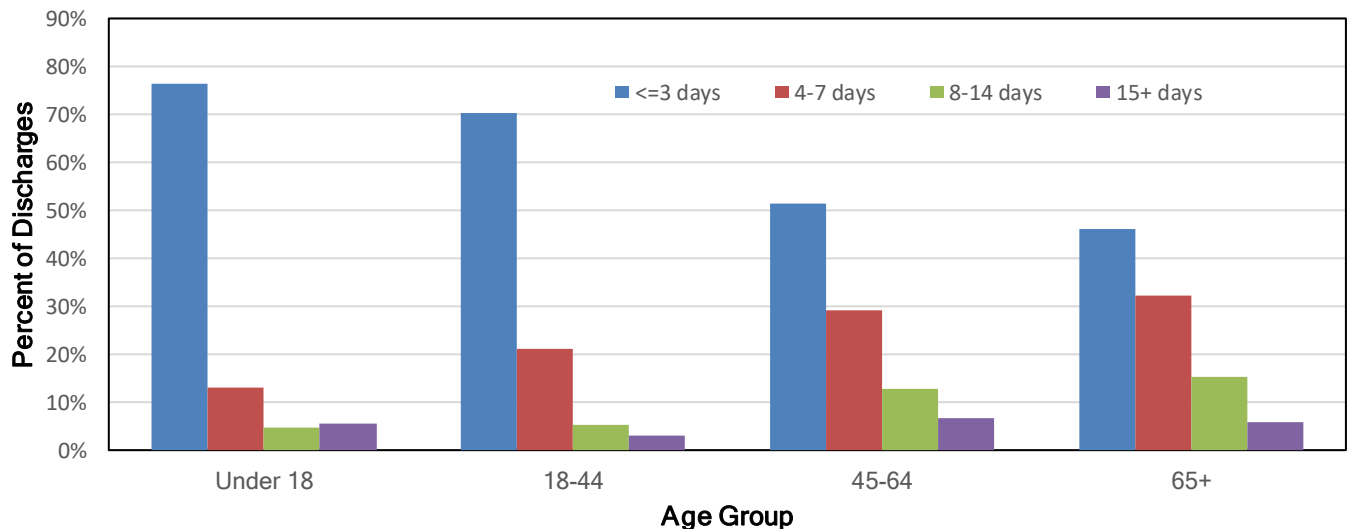
Figure 5. Percentage of Hospital Discharges by Average Length of Stay, Delaware, Selected Years 2005, 2012, and 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Length of stay varies with age of patient. Patients under the age of 18 have the shortest lengths of stay. In 2019, 76.4 percent of patients under 18 had hospital stays of three days or less, compared to 46.2 percent for patients 65 and over. Patients aged 65 and over were three and a half times as likely to have stays of 8 to 14 days when compared to patients under the age of 18.

Figure 6. Percentage of Hospital Discharges by Average Length of Stay and Age Group, Delaware Hospitals, 2019



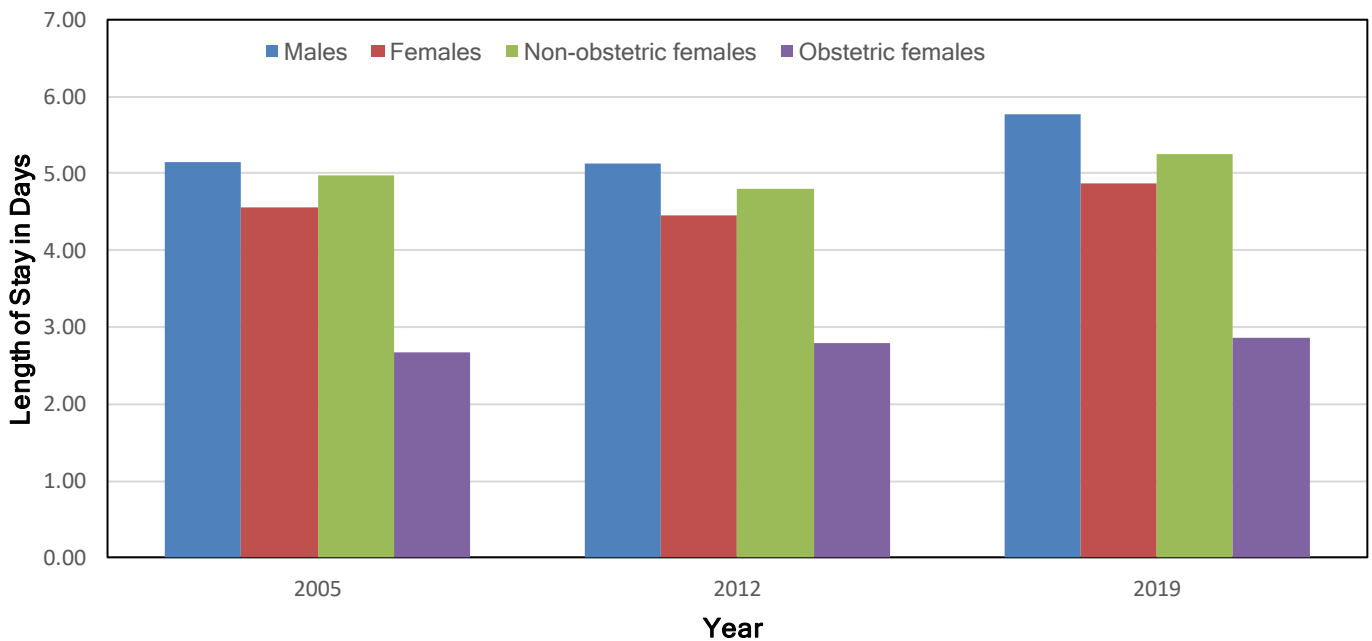
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

PATIENT CHARACTERISTICS

Gender:

Between 2005 and 2019, the average length of stay (ALOS) increased 12.0 percent for male patients and 6.5 percent for female patients. When female obstetrical patients were excluded from the calculation of average length of stay, female patients had slightly lower ALOS figures compared to males in all time periods. During the period from 2005 to 2019 non-obstetrical female patients saw an increase in length of stay of 5.6 percent while obstetric females saw an increase in length of stay of 7.2 percent.

Figure 7. Mean Length of Hospital Stay by Patient Type, Selected Years, Delaware Hospitals, 2005, 2012, and 2019



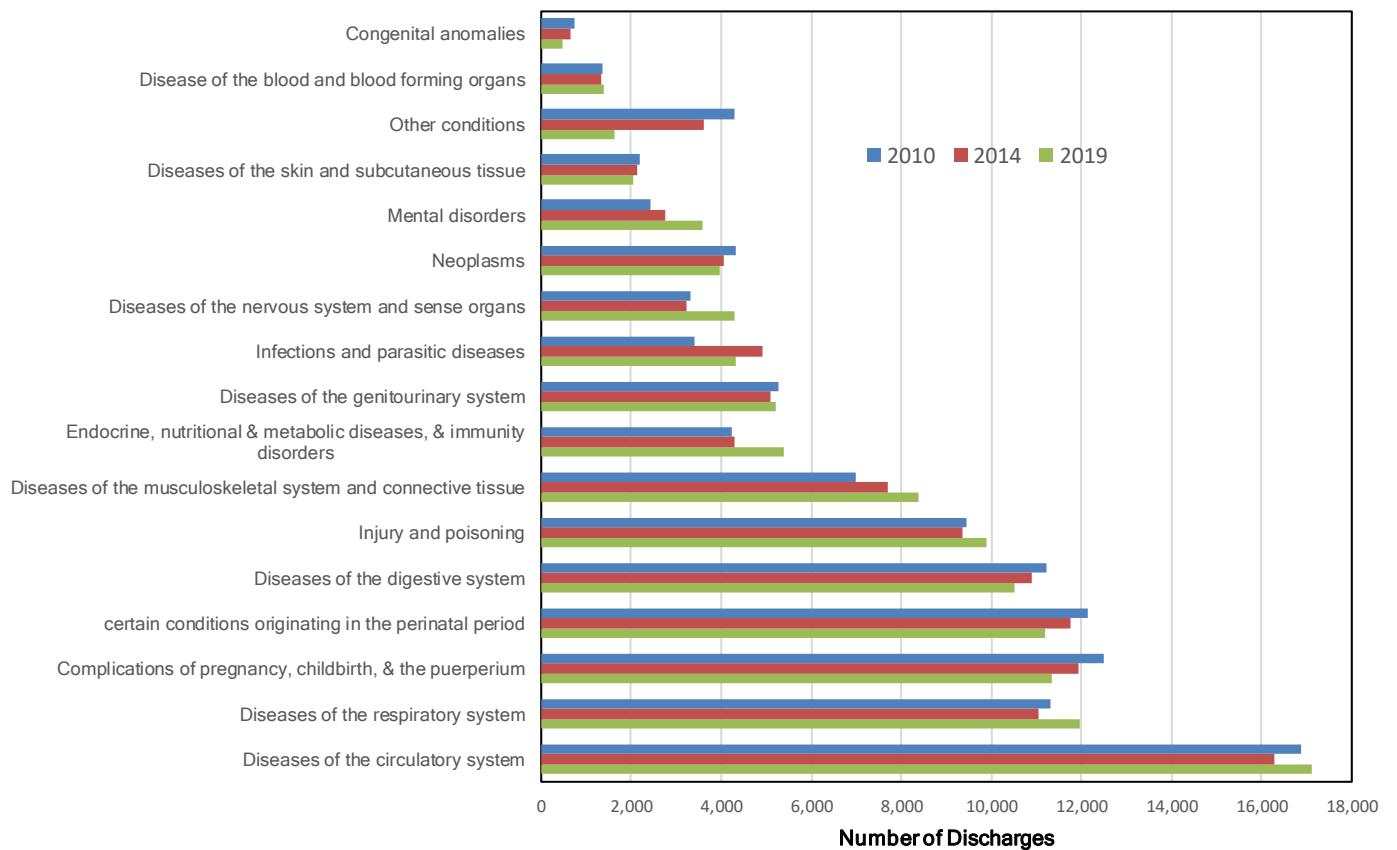
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

WHY PATIENTS WERE HOSPITALIZED

Most frequent reasons for hospitalization by primary diagnosis and body system²:

Diseases of the circulatory system accounted for 15.2 percent of the total discharges in 2019 and represented the most common reasons for hospitalization. Some of the most common diagnoses in that category were congestive heart failure, coronary artery disease, irregular heartbeat, heart attack, and stroke. Diseases of the respiratory system accounted for 10.6 percent of the total discharges. Complications of pregnancy, childbirth, & the puerperium comprised 10.1 percent of discharges, while another 9.9 percent of discharges were related to certain conditions originating in the perinatal period. Together these two diagnoses accounted for 20.0 percent of total discharges. The above four categories accounted for 45.8 percent of all hospitalizations.

Figure 8. Number of Hospital Discharges by Body System, Selected Years, Delaware, 2010, 2014, and 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

The largest percent increase (48.2 percent) in hospitalizations from 2010 to 2019 occurred in mental disorders. Diseases of the nervous system and sense organs also demonstrated a large percentage increase (29.8 percent) from 2010 to 2019. At 27.4 percent, the third largest increase in hospitalizations was due to endocrine, nutritional & metabolic diseases, & immunity disorders. Other conditions accounted for the largest decrease in hospitalizations (62.2 percent), followed by congenital anomalies (34.4 percent).

² See Appendix A for details about the primary diagnoses and body system classifications.

WHY PATIENTS WERE HOSPITALIZED

Most frequent reasons for hospitalization by gender (excluding liveborn infants):

Specific diagnoses varied by gender. Much of the variation was a result of the large number of women hospitalized due to pregnancy and delivery related conditions; seven out of the top 10 diagnoses for women were related to pregnancy and childbirth. In Table 1, all of these diagnoses were rolled into the principal diagnosis of “Pregnancy & childbirth”. Both men and women experienced high numbers of discharges due to pneumonia, septicemia, osteoarthritis, and hypertension. Table 1 shows the most frequent diagnoses for both men and women, by number, percent, and rank of discharges by gender.

Table 1. Number, Rank, and Percentage of the Most Frequent Diagnoses (CCS Defined) by Gender, Delaware Hospitals, 2019

CCS Principal Diagnosis	MALE			FEMALE		
	#	%	Rank	#	%	Rank
<i>All diagnoses</i>	49,229	100		63,522	100	
Pregnancy & childbirth	---	---	---	11,332	17.8	1
Liveborn Infant	5,454	11.1	1	5,132	8.1	2
Hypertension with complications and secondary hypertension	2,189	4.4	2	2,073	3.3	4
Osteoarthritis	1,687	3.4	4	2,474	3.9	3
Septicemia (except in labor)	1,825	3.7	3	1,846	2.9	5
Pneumonia (except that caused by tuberculosis or STD)	1,504	3.1	5	1,535	2.4	6
Acute cerebrovascular disease	1,307	2.7	7	1,332	2.1	9
Diabetes mellitus with complications	1,332	2.7	6	1,034	1.6	13
Chronic obstructive pulmonary disease and bronchiectasis	877	1.8	16	1,437	2.3	8
Urinary tract infections	680	1.4	19	1,438	2.3	7
Spondylosis; intervertebral disc disorders; other back problems	1,051	2.1	10	1,055	1.7	11
Other nervous system disorders	936	1.9	14	1,122	1.8	10
Complication of device; implant or graft	1,070	2.2	8	900	1.4	17
Respiratory failure; insufficiency; arrest (adult)	921	1.9	15	1,041	1.6	12
Acute and unspecified renal failure	940	1.9	13	1,005	1.6	14

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Note: Clinical Classifications Software (CCS) is diagnostic classification system developed by the Agency for Healthcare Research and Quality (AHRQ). See Appendix A for more information. Table ordered based upon most frequent total diagnoses.

Most frequent reasons for hospitalization by age groups:

- Excluding liveborn infants, patients under 1 year were hospitalized most often for acute bronchitis, other perinatal conditions, and hemolytic jaundice and perinatal jaundice.
- For those ages 1-17, asthma, acute bronchitis, and epilepsy convulsions made up the top three diagnoses.
- For those ages 18-44, most of the top 10 diagnoses were associated with pregnancy and childbirth. If pregnancy and childbirth were excluded, diabetes mellitus with complications, other nutritional; endocrine; and metabolic disorders, and septicemia became the three most common reasons for hospitalization.
- For those ages 45-64, osteoarthritis, hypertension with complications and secondary hypertension, and septicemia (except in labor), comprised the top three diagnoses.
- For those over 65, hypertension with complications and secondary hypertension, osteoarthritis, and septicemia (except in labor) were the top three diagnoses.

Though the most common reasons for hospitalization differed by age, pneumonia appeared in the 10 most frequent diagnoses for nearly all five age groups. Hypertension with complications and secondary hypertension was the single most frequent reason for hospitalization followed by osteoarthritis.

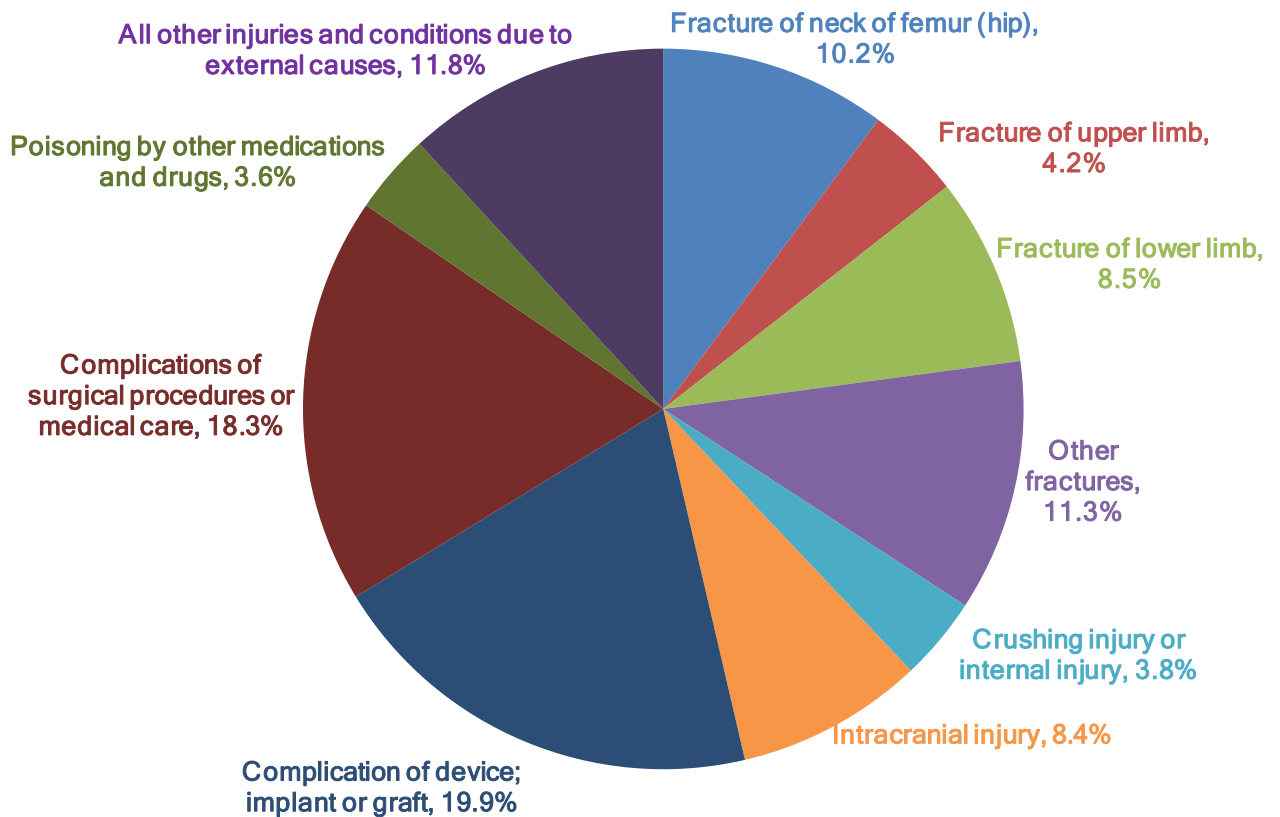
WHY PATIENTS WERE HOSPITALIZED - INJURIES

Injury hospitalizations:

Injury hospitalizations accounted for 8.8 percent of the total number of discharges and \$445 million in aggregate charges in 2019. The majority of patients were admitted through the emergency department, and the average charge for an injury stay ranged from \$19,398 for superficial injury; contusion to \$144,619 for spinal cord injury, with an overall average charge of \$45,016 (see Appendix A).

The most common primary diagnosis for an injury hospitalization in 2019 was complication of device; implant or graft, which accounted for 19.9 percent of injury hospitalizations. Complications of surgical procedures or medical care were responsible for another 18.3 percent of injury hospitalizations, followed by other fractures (11.3 percent), fracture of neck of femur (hip) (10.2 percent), and fracture of lower limb (8.5 percent).

Figure 9. Percentage of the Most Frequent Accident Related Injury Diagnoses, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

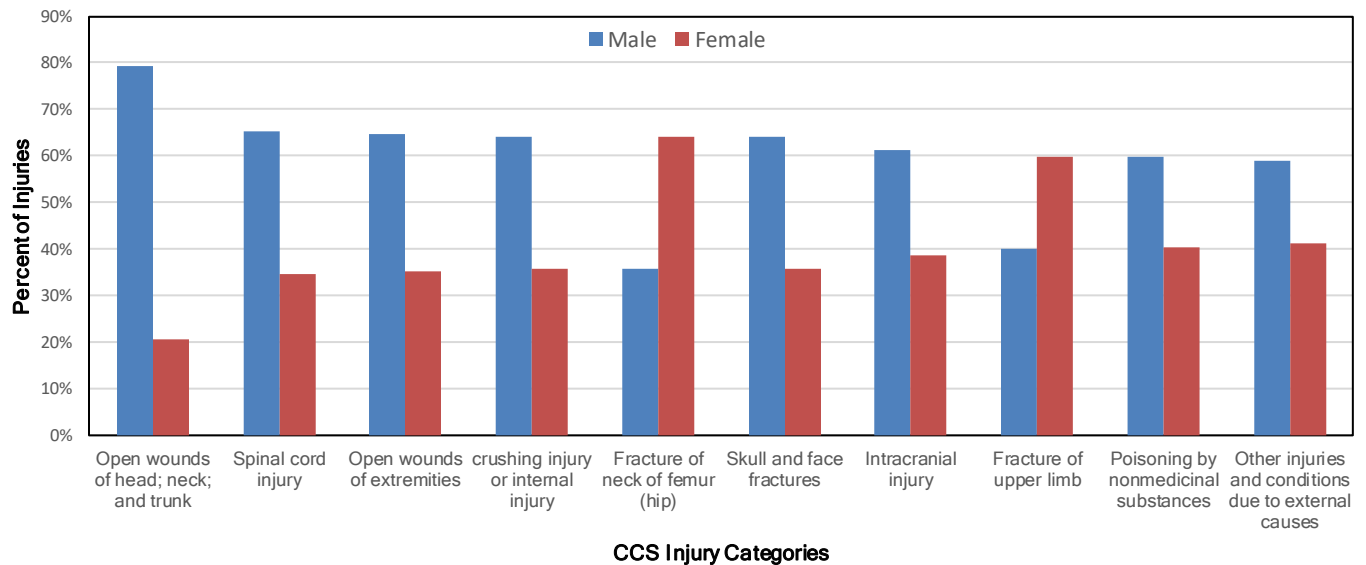
Falls were the most frequently specified external cause of injury (as defined by the Ecode listed on the discharge record). The most frequently occurring injury resulting from a fall was a hip fracture (22.3 percent), followed by other fractures (21.9 percent) and fracture of lower limb (18.0 percent). Adverse effects of medical care were the second most frequently specified external cause of injury. The most frequently occurring injury resulting from adverse effects of medical care were complication of device; implant or graft (71.8 percent) and complications of surgical procedures or medical care (26.6 percent). Motor vehicle accidents were the third most frequently specified external cause of injury. The most frequently occurring injury resulting from a motor vehicle accident was other fractures (29.5 percent), followed by fracture of lower limb (18.0 percent) and intracranial injury (14.4 percent). Firearms accounted for 0.4 percent of all accident related injuries.

WHY PATIENTS WERE HOSPITALIZED - INJURIES

Gender:

The number of injury hospitalizations was split almost equally between males and females, though the distribution varied by specific injury type. Women were more likely to have been hospitalized for hip fractures and fractures of upper limb. Men were more likely to have been hospitalized for open wounds of head, neck, and trunk, open wounds of extremities, spinal cord injury, open wounds of extremities, crushing injury or internal injury, and skull and face fractures.

Figure 10. Percentage of Selected Primary Injury Diagnoses by Gender, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

WHY PATIENTS WERE HOSPITALIZED - PROCEDURES

Most frequent reasons for hospitalization by procedure:

In 2019, 55.9 percent of discharges had at least one associated procedure. Of the 63,293 hospital stays with an accompanying procedure, 43.2 percent had only a principal procedure performed; the remaining 56.8 percent had two or more procedures. Each discharge can have up to six procedures; this report examines the number of procedures, or the all-listed procedures.

The most common types of all-listed procedures were miscellaneous diagnostic and therapeutic, cardiovascular, obstetric, and musculoskeletal. Miscellaneous diagnostic and therapeutic procedures accounted for nearly half of the total procedures and included injections, vaccinations and prophylactic inoculations, CT scans, diagnostic ultrasounds, respiratory intubation and mechanical ventilation, and blood transfusions.

Overall, the most frequently performed all-listed procedures were respiratory intubation and mechanical ventilation; other procedures to assist delivery, diagnostic cardiac catheterization; coronary arteriography, and other vascular catheterization; not heart.

Table 2. Number of Most Frequent All-listed Inpatient Procedures, Selected Years, Delaware Hospitals, 2019

CCS Procedure	# of All -listed Procedures			% of Discharges with a Procedure
	MALE	FEMALE	Total	
Respiratory intubation and mechanical ventilation	5,210	4,687	9,897	6.9
Other procedures to assist delivery	0	6,829	6,829	4.7
Diagnostic cardiac catheterization; coronary arteriography	3,668	2,327	5,995	4.2
Other vascular catheterization; not heart	2,907	2,791	5,698	3.9
Other therapeutic procedures	1,069	3,802	4,871	3.4
Circumcision	4,043	0	4,043	2.8
Spinal fusion	1,869	1,892	3,761	2.6
Upper gastrointestinal endoscopy; biopsy	1,716	1,849	3,565	2.5
Other non-OR therapeutic procedures; female organs	0	3,476	3,476	2.4
Other therapeutic procedures on muscles and tendons	835	2,471	3,306	2.3
Cesarean section	0	3,289	3,289	2.3
Other OR procedures on vessels other than head and neck	1,829	1,206	3,035	2.1
Blood transfusion	1,419	1,362	2,781	1.9
Arthroplasty knee	1,048	1,693	2,741	1.9
Other non-OR therapeutic procedures on skin and breast	1,215	1,503	2,718	1.9

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Notes: All-listed procedures refer to all procedures performed during a hospital stay. Table ordered based upon total procedures.

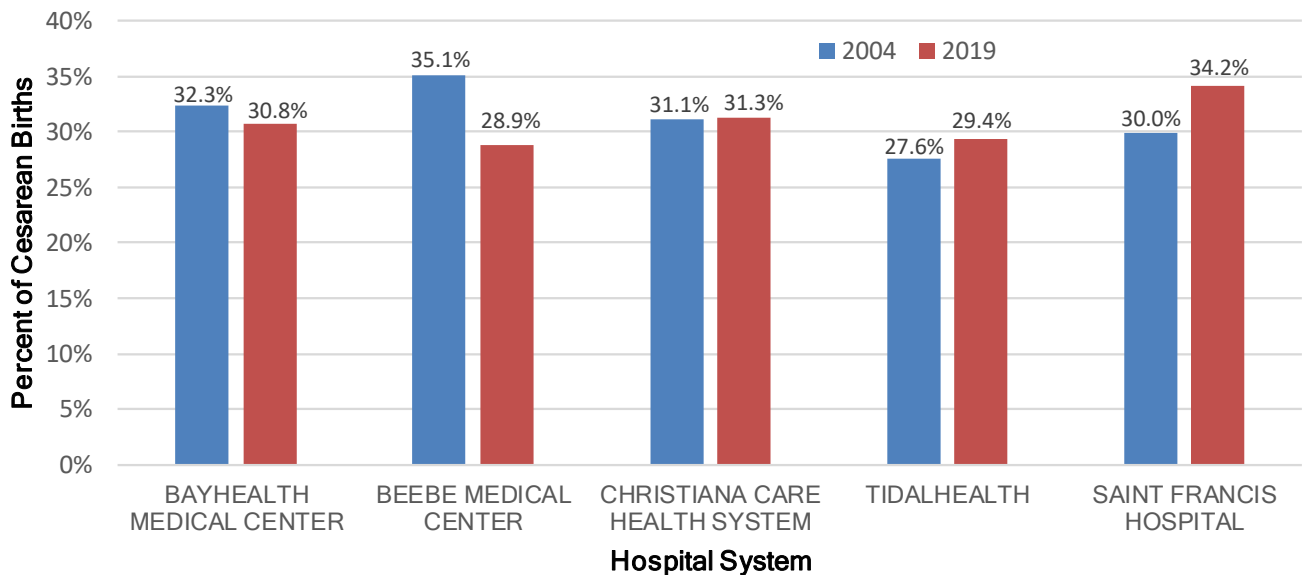
Males most frequently underwent respiratory intubation and mechanical ventilation, circumcision; and diagnostic cardiac catheterization; coronary arteriography. Females most frequently underwent other procedures to assist delivery, respiratory intubation and mechanical ventilation, and other therapeutic procedures.

³ See the definition of Procedure Classes in the Definitions section of the Technical Notes.

WHY PATIENTS WERE HOSPITALIZED - PROCEDURES

A major component of obstetrical procedures is related to cesarean delivery of newborn infants. Cesarean deliveries can vary significantly by hospital. In 2019 cesarean deliveries accounted for 31.1 percent of all births. Saint Francis Hospital and TidalHealth showed the greatest increases between 2004 and 2019, rising 14.1 percent and 6.3 percent respectively. In 2019, Saint Francis Hospital and Christiana Care Health System had the highest rates, with 34.2 and 31.3 percent of all births being delivered by cesareans. Beebe Medical Center had the lowest percentage of births delivered by cesarean (28.9 percent).

Figure 11. Percentage of Annual Cesarean Delivery Rates by Delaware Hospital, 2004 and 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Gender:

In 2019, obstetrical procedures accounted for one in four all-listed procedures performed on females and included other procedures to assist delivery, cesarean sections, fetal monitoring, repair of current obstetrical laceration, and artificial rupture of membranes to assist delivery.

For males, respiratory intubation and mechanical ventilation accounted for 8.2 percent of the total procedures, followed by circumcision (6.4 percent), and diagnostic cardiac catheterization; coronary arteriography (5.8 percent).

The following procedures were present in the ten most commonly performed procedures for both males and females:

- respiratory intubation and mechanical ventilation,
- diagnostic cardiac catheterization; coronary arteriography spinal fusion;
- spinal fusion;
- other vascular catheterization; not heart.

WHY PATIENTS WERE HOSPITALIZED - PROCEDURES

Age:

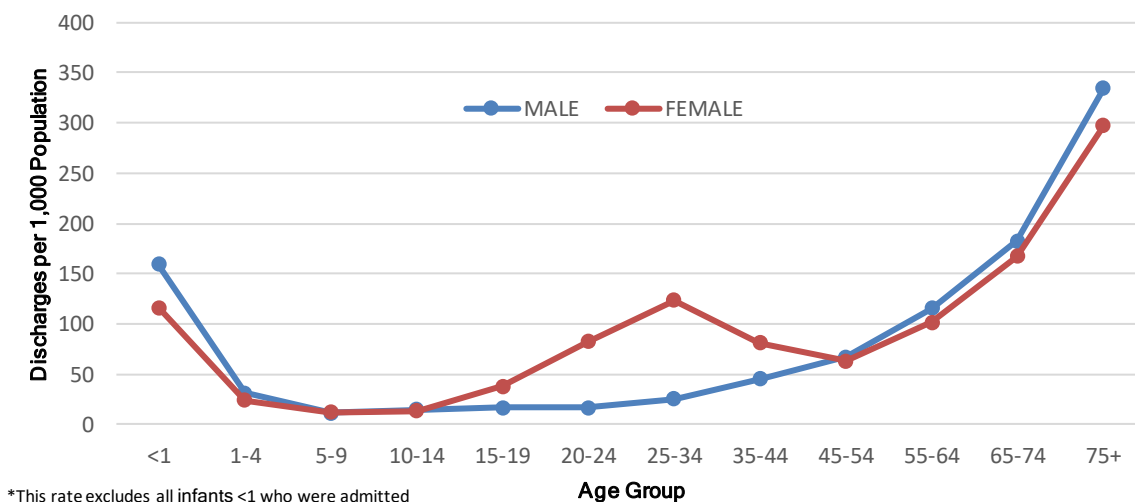
- For patients under 1 year, circumcision, prophylactic vaccinations and inoculations, and respiratory intubation and mechanical ventilation were the most common procedures.
- For patients ages 1 to 17, respiratory intubation and mechanical ventilation, spinal fusion, and blood transfusion were the most frequently performed procedures.
- Obstetric procedures, specifically other procedures to assist delivery, other non-or therapeutic procedures; female organs, and cesarean section, were the most common procedures for those ages 18-44.
- Respiratory intubation and mechanical ventilation, diagnostic cardiac catheterization; coronary arteriography, and other vascular catheterization; not heart were the most frequently performed procedures for those 45-64.
- The most commonly performed principal procedures on patients 65 and older were respiratory intubation and mechanical ventilation, diagnostic cardiac catheterization; coronary arteriography, and other vascular catheterization; not heart.

HOSPITALIZATIONS OF DELAWARE RESIDENTS

Hospital stays for Delaware residents were based on inpatient discharges from Delaware hospitals only; as such, information about residents who went out of state for hospital care are not represented in the following statistics.

Discharge rates of Delaware residents under the age of 1 were higher than the rates of all other age groups except those 65 and older. Discharge rates decreased with each increase in age group between patients under 1 and those ages 10-14. The trend reversed at the 15-19 age group and other than a dip in the rates for females 35-44, rates rose steadily with each older age group. Male and female discharge rates were similar for age groups under 15 and over 44; females in 15-44 age groups had discharge rates 1.8 to 4.8 times that of males.

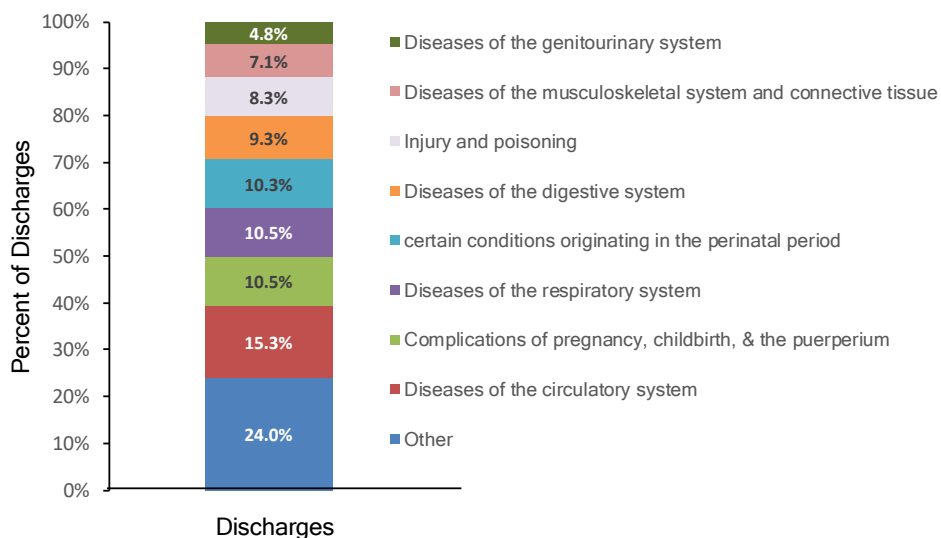
Figure 12. Resident Discharge Rates* by Sex and Age, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

In 2019, Delawareans were discharged most frequently for diseases of the circulatory system, accounting for 15.3 percent of resident hospital stays. The most common diagnoses for diseases of the circulatory system included heart failure, coronary artery disease, and irregular heartbeat. Complications of pregnancy, childbirth, & the puerperium was the second most common diagnosis. Diseases of the respiratory system was the third and certain conditions originating in the perinatal period was the fourth most common reasons for resident hospital stays, followed by diseases of the digestive system, which included biliary tract disease, gastrointestinal hemorrhage, and intestinal obstruction and asthma, then injury and poisoning.

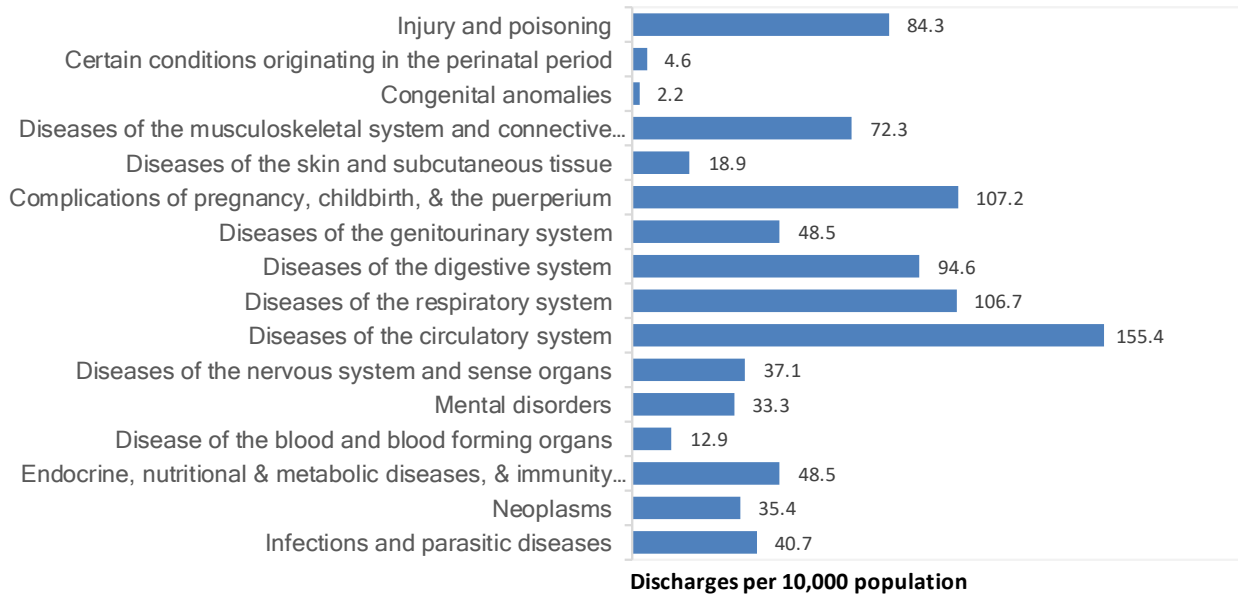
Figure 13. Percentage of Resident Hospital Discharges by Body System, Delaware, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITALIZATIONS OF DELAWARE RESIDENTS

Figure 14. Resident Hospitalization Rates by Body System, Delaware, 2019

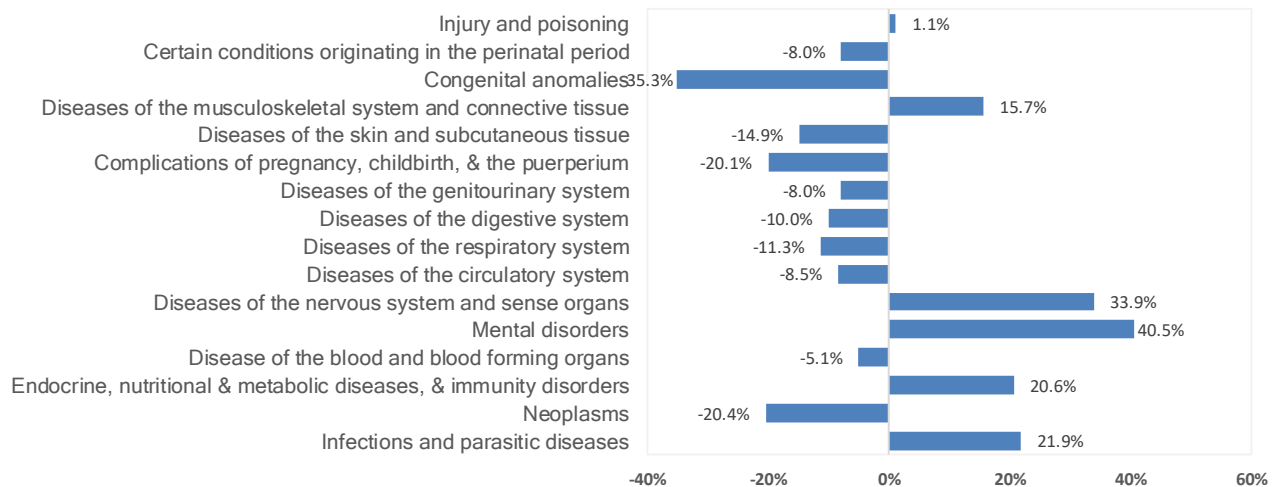


* Excluding hospitalizations related to pregnancy and liveborn infants.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

High hospital discharge rates in 2019 were not necessarily indicative of large rate increases over the previous 10 years. In some categories, like diseases of the circulatory system, high 2019 rates were maintained in spite of declines over the prior 10-year period. In others, such as infectious and parasitic diseases, 2019 rates were comparatively low, despite significant rate increases over the prior 10-year period.

Figure 15. Percent Change in Resident Hospitalization Rates by Body System, Delaware, 2009 versus 2019



*Excluding hospitalizations related to pregnancy and liveborn infants.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITALIZATIONS OF DELAWARE RESIDENTS

When the specific diagnoses that comprise each body system were examined, the following 25 principal diagnoses had the highest discharge rates of Delaware residents in 2019.

Table 3. Top 25 CCS Diagnoses with the Highest Hospital Discharge Rates* for Residents, Delaware, 2009, 2014, and 2019

	<u>2009</u>		<u>2014</u>		<u>2019</u>		% Change from 2009 to 2019
	Number	Rate	Number	Rate	Number	Rate	
Hypertension with complications and secondary hypertension	657	7.4	543	5.8	3,957	40.6	448.6%
Osteoarthritis	2,686	30.1	3,208	34.4	3,654	37.5	24.6%
Septicemia (except in labor)	2,186	24.5	3,878	41.6	3,409	35.0	42.9%
Pneumonia (except that caused by tuberculosis or STD)	3,091	34.7	2,698	28.9	2,743	28.2	-18.7%
Acute cerebrovascular disease	1,551	17.4	2,032	21.8	2,318	23.8	36.8%
Chronic obstructive pulmonary disease and bronchiectasis	1,840	20.6	1,912	20.5	2,211	22.7	10.2%
Diabetes mellitus with complications	1,419	15.9	1,595	17.1	2,111	21.7	36.5%
Urinary tract infections	1,551	17.4	1,499	16.1	1,913	19.6	12.6%
Other nervous system disorders	798	8.9	892	9.6	1,835	18.8	111.2%
Acute and unspecified renal failure	1,239	13.9	1,693	18.2	1,810	18.6	33.8%
Spondylosis; intervertebral disc disorders; other back problems	1,453	16.3	1,847	19.8	1,769	18.2	11.7%
Cardiac dysrhythmias	1,876	21.0	1,633	17.5	1,741	17.9	-14.8%
Complication of device; implant or graft	1,491	16.7	1,631	17.5	1,701	17.5	4.8%
Respiratory failure; insufficiency; arrest (adult)	1,545	17.3	1,464	15.7	1,601	16.4	-5.2%
Skin and subcutaneous tissue infections	1,711	19.2	1,654	17.7	1,586	16.3	-15.1%
Complications of surgical procedures or medical care	1,182	13.3	1,336	14.3	1,521	15.6	17.3%
Hypertension complicating pregnancy; childbirth and the puerperium	755	8.5	821	8.8	1,407	14.4	69.4%
Acute myocardial infarction	1,492	16.7	1,428	15.3	1,333	13.7	-18.0%
Alcohol-related disorders	334	3.7	607	6.5	1,227	12.6	240.5%
Fluid and electrolyte disorders	1,311	14.7	824	8.8	1,136	11.7	-20.4%
Gastrointestinal hemorrhage	929	10.4	1,052	11.3	1,100	11.3	8.7%
Intestinal obstruction without hernia	913	10.2	949	10.2	994	10.2	0.0%
Diverticulosis and diverticulitis	832	9.3	975	10.5	989	10.2	9.7%
Polyhydramnios and other problems of amniotic cavity	553	6.2	656	7.0	943	9.7	56.5%
Other nutritional; endocrine; and metabolic disorders	478	5.4	812	8.7	924	9.5	75.9%

*Hospitalization rate per 10,000, ranked by 2019 figures. Excluding pregnancy-related discharges and liveborn infants.

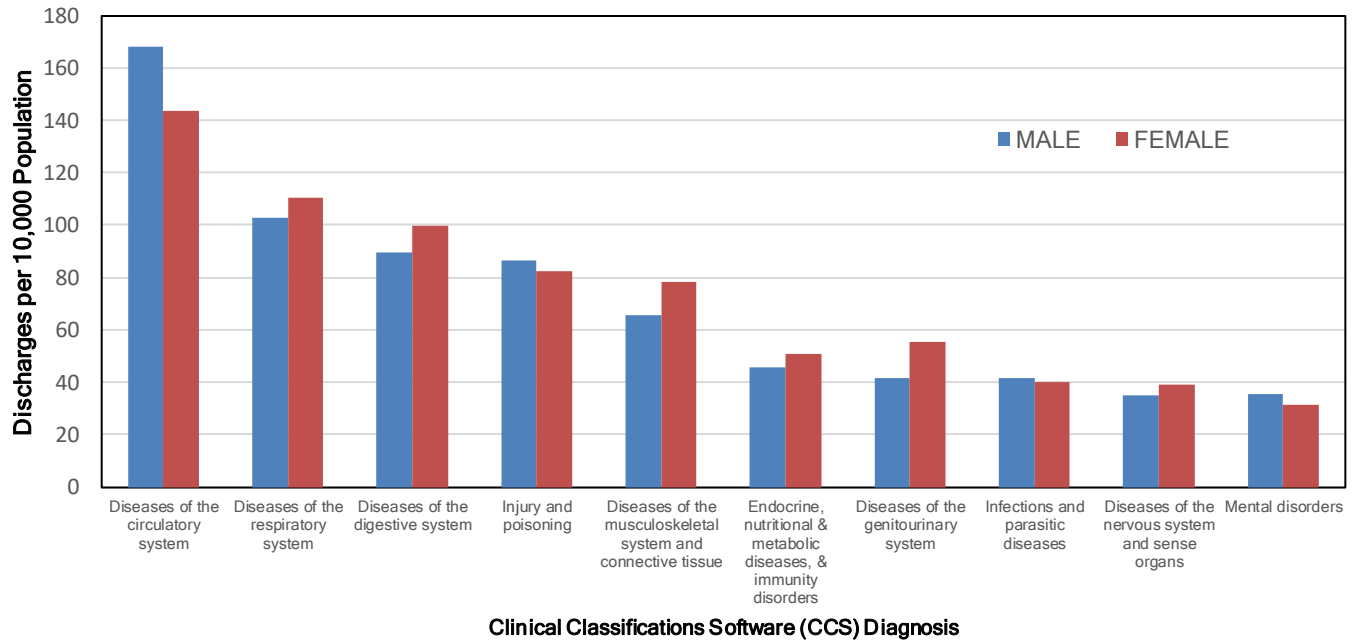
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Diseases of the circulatory system accounted for four of the 25 conditions with the highest hospitalization rates; these included:

- hypertension with complications and secondary hypertension (high blood pressure)
- cardiac dysrhythmias (irregular heartbeat)
- acute cerebrovascular disease (stroke)
- acute myocardial infarction (heart attack).

Hospitalization rates for hypertension with complications and secondary hypertension, alcohol-related disorders, and other nervous system disorders demonstrated the greatest increases between 2009 and 2019.

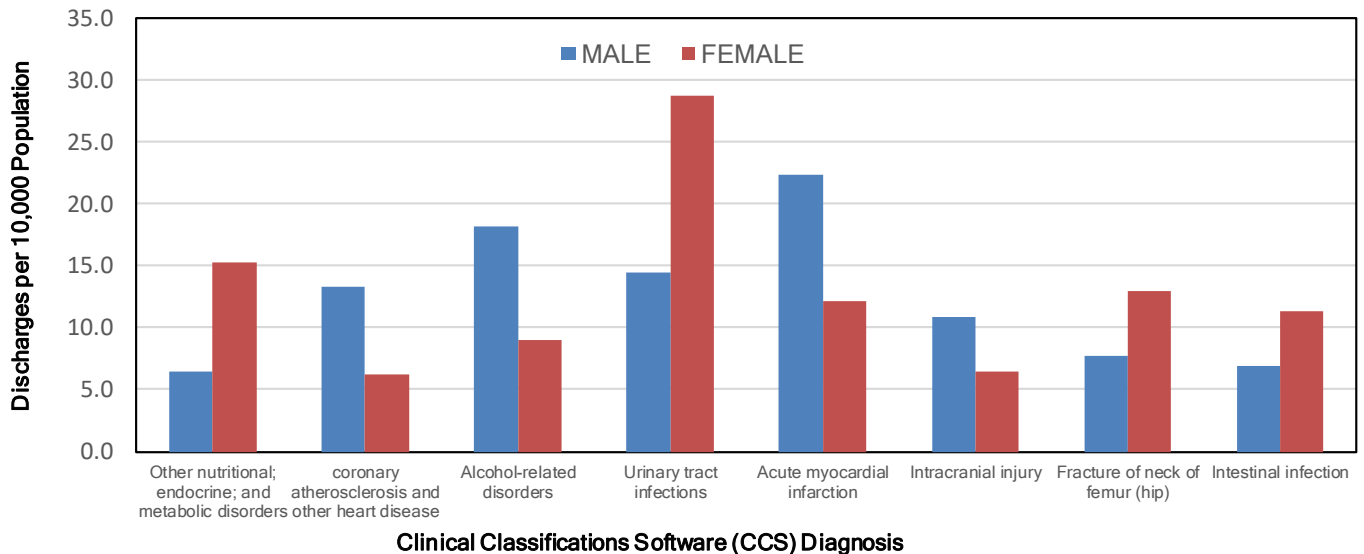
Figure 16. Hospital Discharge Rates for Residents by Body System and Gender, Delaware, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Women's higher discharge rate for diseases of the digestive system was due in large part to their higher discharge rates of biliary tract disease and intestinal infection. Likewise, osteoarthritis and pathological fractures contributed to the female-to-male disparity in hospitalization rates for diseases of the musculoskeletal system. The largest difference between men and women occurred in the diseases of genitourinary system and was driven primarily by women's higher rate of stays for urinary tract infections. Males had higher discharge rates for heart attack and coronary artery disease, which resulted in their higher overall hospitalization rates for circulatory diseases. Males were more than twice as likely to be discharged for coronary atherosclerosis and other heart disease.

Figure 17. Hospital Discharge Rates for Residents by Gender and Selected Primary Diagnoses, Delaware, 2019



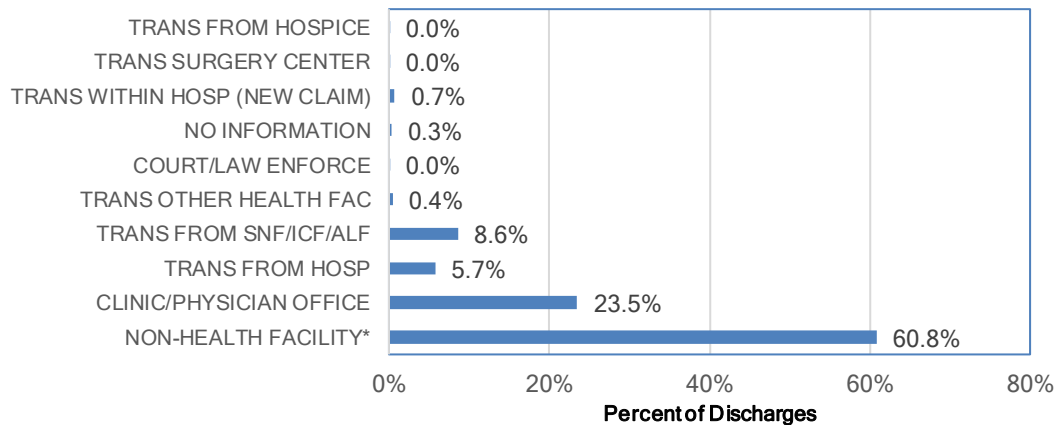
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOW PATIENTS WERE ADMITTED

Point of Origin:

Non-health facilities and clinic/physician offices accounted for 84.3 percent of all hospital discharges in 2019. The majority of the remaining points of origin were transfers from nursing homes i.e. skilled nursing facilities (SNF), intermediate care facilities (ICF), assisted living facilities (ALF) 8.6 percent, and other hospitals, 5.7 percent.

Figure 18. Patient Point of Origin, Delaware Hospitals, 2019

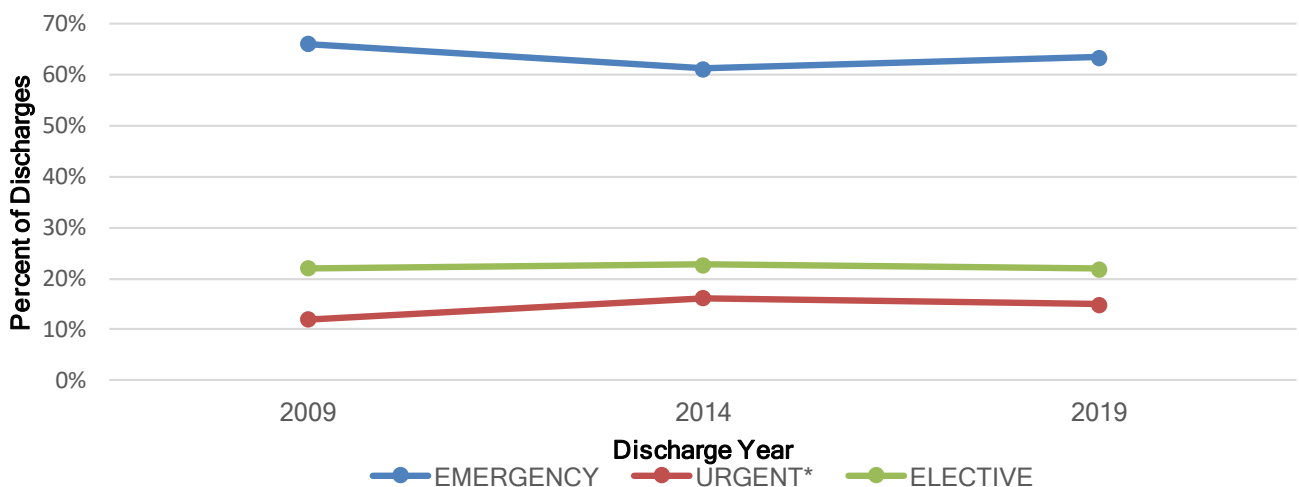


* Non-Health Care Facility includes walk-ins, auto accidents, and ambulance runs

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Between 2009 and 2019, the majority of admissions continued to be classified as emergency in nature. In 2009, emergency admissions accounted for 66.0 percent of all admissions. By 2019, the proportion of emergency admissions had decreased to 63.3 percent, while urgent admissions increased from 11.9 percent to 14.9 percent between 2009 and 2019.

Figure 19. Percentage of Hospital Discharges by Type of Admission, Delaware Hospitals, 2009, 2014, and 2019



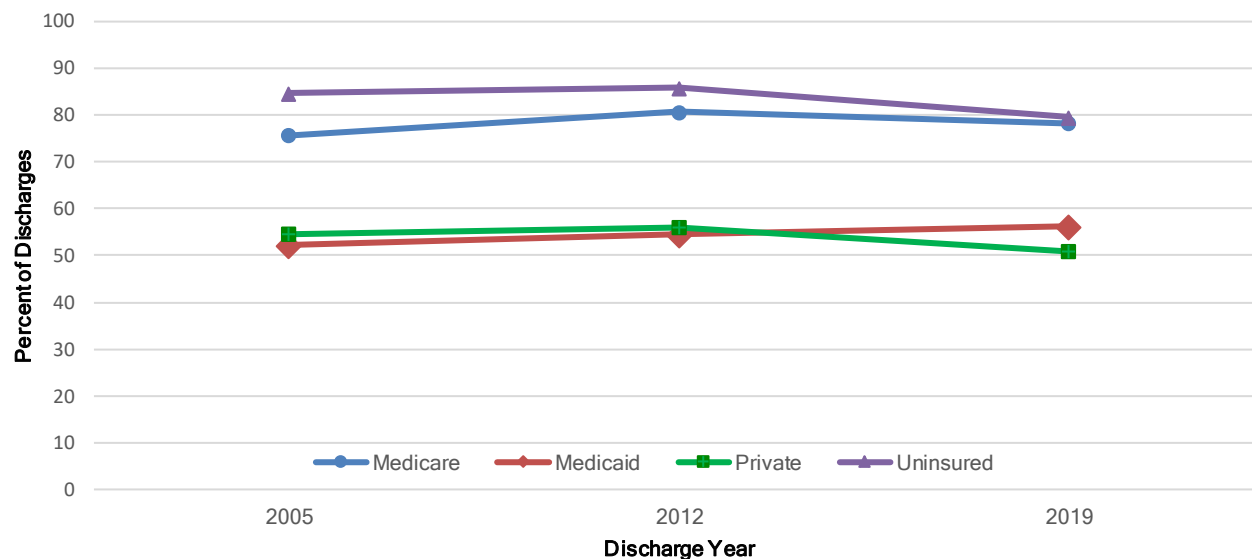
* Urgent encompasses situations that require immediate attention due to a physical or mental disorder but are not life threatening

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOW PATIENTS WERE ADMITTED

Most primary payers experienced a decrease in the percent of discharges classified as emergency/trauma at admission, Medicare and uninsured patients had the largest proportion of their discharges classified as emergency/trauma. In 2019, 79.5 percent of uninsured admissions, 78.2 percent of Medicare admissions, 50.9 percent of private admissions, and 56.2 percent of Medicaid admissions were classified as emergency/trauma.

Figure 20. Percentage of Hospitals Discharges classified as Emergency/Trauma at Admission by Payer, Delaware, 2005, 2012, and 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

The most common diagnoses of patients admitted through the Emergency Department (ED) were hypertension, septicemia, and pneumonia.

Table 4. Number and Percentage of Most Common Diagnoses for Emergency Admissions, Delaware Hospitals, 2019

	Frequency	Percent *
Hypertension with complications and secondary hypertension	3,461	5.4
Septicemia (except in labor)	3,035	4.7
Pneumonia (except that caused by tuberculosis or STD)	2,530	3.9
Acute cerebrovascular disease	2,209	3.4
Chronic obstructive pulmonary disease and bronchiectasis	1,987	3.1
Diabetes mellitus with complications	1,889	2.9
Urinary tract infections	1,841	2.8
Acute and unspecified renal failure	1,563	2.4
Skin and subcutaneous tissue infections	1,453	2.2
Cardiac dysrhythmias	1,345	2.1
Respiratory failure; insufficiency; arrest (adult)	1,340	2.1
Acute myocardial infarction	1,170	1.8
Alcohol-related disorders	1,170	1.8

* Refers to the percent of discharges that originated in the ED.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

- The biggest changes in the most common diagnoses originating in the ED from 2018 to 2019 was skin and subcutaneous tissue infections moving down one place and acute and unspecified renal failure moving up one place, while alcohol-related disorders appeared for the first time.
- Three of the most common ED diagnoses were related to circulatory conditions: heart failure, stroke, and irregular heartbeat.
- Another four of the most common ED diagnoses were primarily due to infections: pneumonia, skin infections, septicemia, and urinary tract infections.

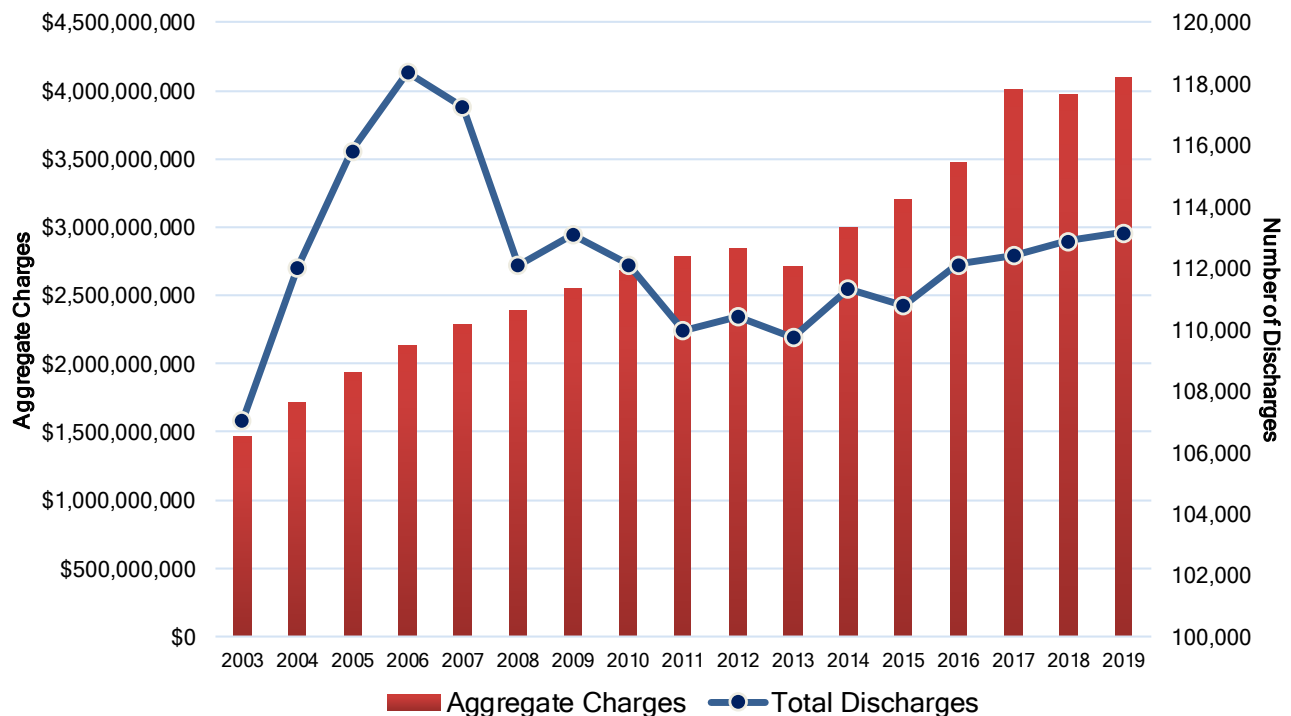
HOSPITAL CHARGES AND BILLING

Inpatient charges:

The total charges for a hospitalization represent the total amount billed for that particular stay. In this report, hospital charges for care are reported, not the actual costs of providing the care or what the hospitals were reimbursed. These charges include accommodations, ancillary services (e.g., pharmacy, lab, radiology and anesthesia), and services of resident physicians.

In 2019, total aggregate charges for all hospitalizations in Delaware equaled \$4.10 billion, a 46.9 percent increase in aggregate charges from 2011. The number of discharges increased 3.0 percent from 109,965 in 2011 to 113,158 in 2019. Total aggregate charges increased by \$118,221,262 between 2018 and 2019.

Figure 21. Number of Discharges and Total Aggregate Charges by Year, Delaware Hospitals, 2003 - 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

The average charge for a hospital stay rose in 2019 to \$36,200 compared to \$25,359 in 2011, while the median charge per stay was \$18,880 in 2019 compared to \$14,195 in 2011.

The diagnostic groups with the highest average charges per hospital stay were congenital anomalies, certain conditions originating in the perinatal period, and infections and parasitic diseases, with average charges ranging from \$59,643 to \$289,100. The first two of these three diagnostic groups also had the longest average stays, ranging from 13.6 to 14.9 days.

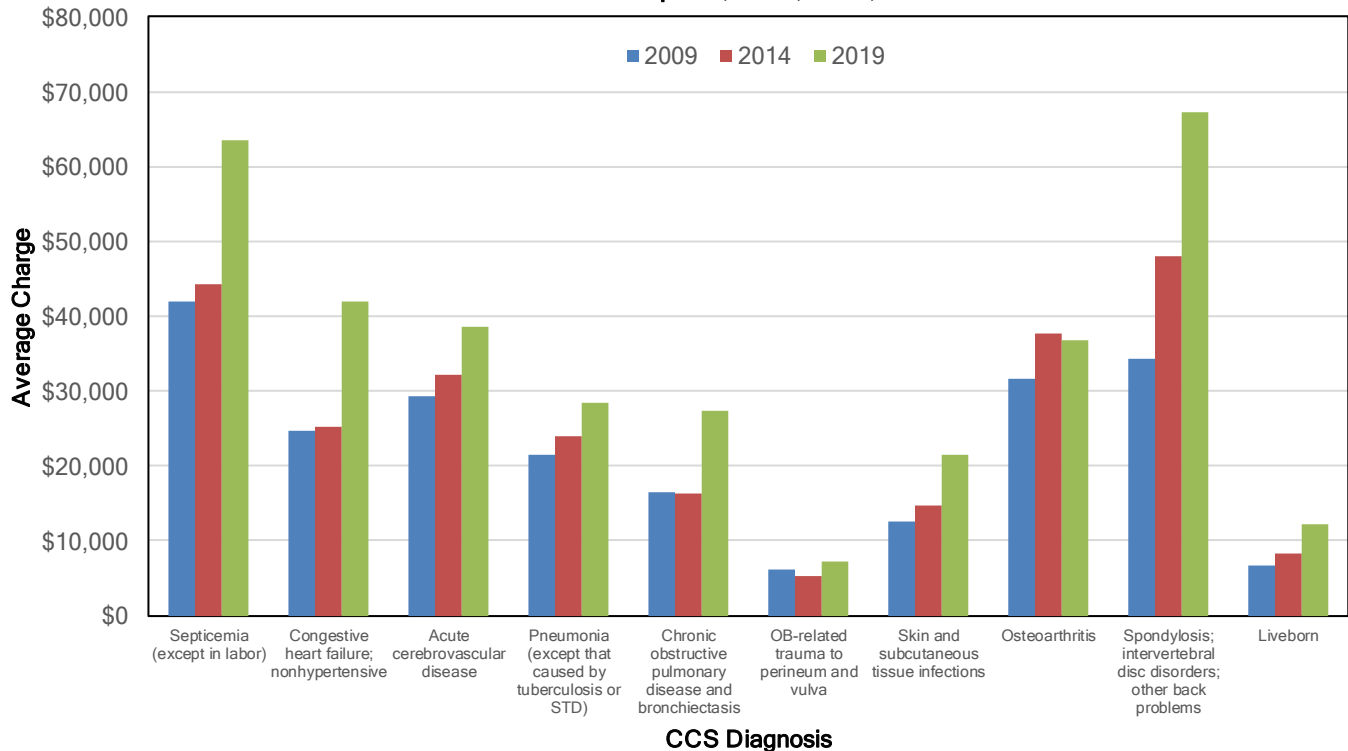
Looking at specific diagnoses within groups showed that the most expensive diagnoses were cardiac and circulatory congenital anomalies, digestive congenital anomalies, short gestation; low birth weight; and fetal growth retardation, and other perinatal conditions. However, the ten most expensive diagnoses occurred relatively rarely and accounted for just 1.5 percent of all discharges in 2019. In comparison, the 10 diagnoses that occurred most frequently accounted for 33.4 percent of the total discharges in 2019 (see Appendix E for more information).

HOSPITAL CHARGES AND BILLING

From 2009 to 2019, the average charges rose for each of the 10 highest volume diagnoses. The highest volume diagnoses whose average charges increased the most were:

- spondylosis; intervertebral disc disorders; other back problems (96 percent),
- liveborn (83 percent),
- skin and subcutaneous tissue infections (71 percent).

Figure 22. Average Hospital Charges for Highest* Volume CCS Diagnoses, Delaware Hospitals, 2009, 2014, and 2019



*Based on 10 most common diagnoses in 2019.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Though the average charges of the high-volume diagnoses tended to increase over time, the proportion of total aggregate charges represented by them experienced much less growth.

- In 2009, the aggregate charges for 2019's highest volume diagnoses totaled \$521.1 million and accounted for 20.4 percent of the total aggregate charges for all diagnoses.
- By 2019, the aggregate charges for those same diagnoses had more than doubled to \$1,056.0 million, which accounted for 25.8 percent of the total aggregate charges.

In 2019, the 10 conditions with the highest total billed charges accounted for 33.7 percent of the total aggregate charges. Septicemia (except in labor) incurred the largest aggregate charges of any diagnosis, resulting in a total hospital bill of \$233.0 million. Although hospital stays for newborns had relatively low average charges, their high frequency resulted in liveborn infants having the sixth highest aggregate charges (see Appendix E for more information).

HOSPITAL CHARGES AND BILLING

Insurance status:

The following payer sources are listed in this report:

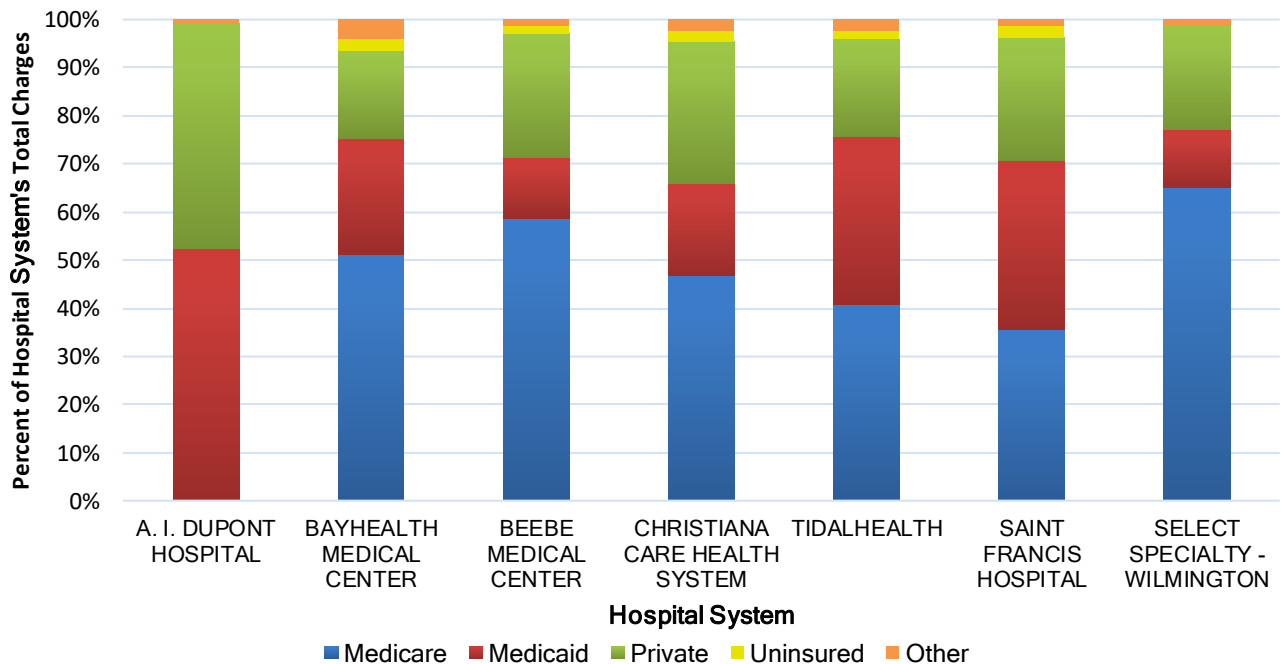
- Medicare
- Medicaid
- Private insurance carriers, such as:
 - Blue Cross Blue Shield
 - HMOs
 - Commercial insurance
- Uninsured
 - Patients who have no insurance and self-pay
- Other types of insurance, such as:
 - Workman’s compensation
 - CHAMPUS (Civilian Health and Medical Program of the Uniformed Services)
 - Other government sponsored programs

In 2019, 68.1 percent of hospitalizations were billed to Medicare (44.5 percent) and Medicaid (23.5 percent), 27.4 percent were billed to private insurance, and the remaining 4.5 percent was billed to other types of coverage (2.4 percent) or to the patient (2.1 percent uninsured).

Patients whose care was primarily billed to Medicaid had the highest average charges (\$38,146) while Medicare had the greatest aggregate charges (\$1.9 billion).

In 2019, Select Specialty - Wilmington had the highest percent of charges billed to Medicare. A. I. Dupont Hospital had the highest percentage billed to both privately insured and Medicaid covered patients, while Saint Francis Hospital and the Christiana Care health System had the highest percent of charges with no coverage.

Figure 23. Distribution of Total Charges by Primary Payer Type and Hospital System, Delaware, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL CHARGES AND BILLING

Medicare:

From 2009 to 2019, the percent of hospital stays whose primary payer was Medicare increased from 38.1 to 44.5 percent. Over the same time period, the proportion of aggregate charges billed to Medicare remained stable at around 46 percent.

Four of the 10 most frequent diagnoses for Medicare patients were related to diseases of the circulatory system. The three most frequent diagnoses accounted for 16.5 percent of Medicare hospitalizations. The three most frequent diagnoses for Medicare patients in 2019 were⁷:

- hypertension with complications and secondary hypertension;
- osteoarthritis;
- septicemia (except in labor).

Medicaid:

From 2009 to 2019, Medicaid covered hospitalizations decreased from 24.2 to 23.5 percent. Over the same time period, the proportion of aggregate charges billed to Medicaid increased from 19.9 to 24.8 percent.

Five of the 10 most frequent diagnoses for Medicaid patients were related to pregnancy and childbirth. The three most frequent diagnoses accounted for 25.3 percent of Medicaid stays. The three most frequent diagnoses for Medicaid patients in 2019 were⁷:

- liveborn infants;
- other complications of birth; puerperium affecting management of mother;
- diabetes mellitus with complications.

Private Insurers:

From 2009 to 2019, privately insured stays decreased from 32.8 to 27.4 percent. Over the same time period, the proportion of aggregate charges billed to private insurance decreased from 29.4 to 25.4 percent.

Five of the 10 most frequent diagnoses for patients whose primary payer was private insurance were related to pregnancy and childbirth. The most frequent diagnosis, liveborn infants, accounted for 16.6 percent of all stays covered by private insurers. The three most frequent diagnoses for privately insured patients in 2019 were⁷:

- liveborn infants;
- other complications of birth; puerperium affecting management of mother;
- osteoarthritis.

Uninsured:

From 2009 to 2019, uninsured hospitalizations decreased from 2.6 to 2.1 percent. Over the same time period, the proportion of aggregate charges billed to uninsured patients decreased from 2.3 to 1.4 percent. The three most frequent diagnoses accounted for 20.0 percent of uninsured stays.

The three most frequent diagnoses for uninsured patients in 2019 were⁷:

- liveborn;
- diabetes mellitus with complications;
- alcohol-related disorders.

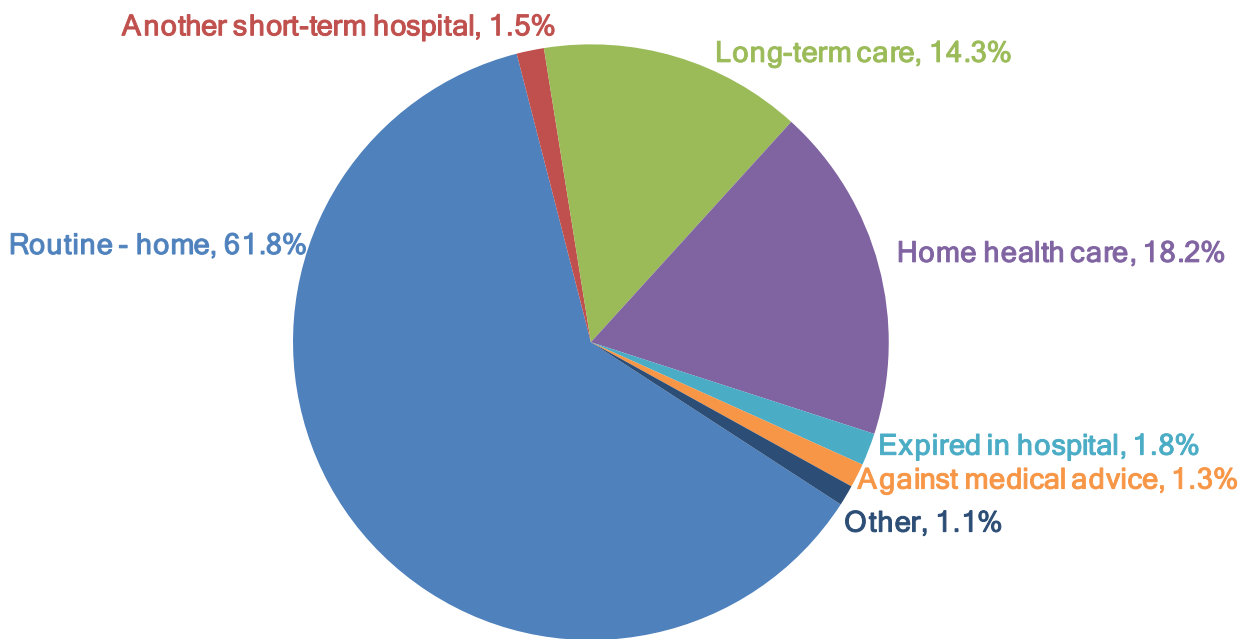
⁷ See Appendix F for the top 10 principal diagnoses by payer type.

HOW PATIENTS WERE DISCHARGED

Patient Discharge Status:

A patient's discharge status refers to how a person is discharged from the hospital and includes discharges to home, long-term care and other non-acute care facilities, other short-term hospitals, patients who left against medical advice, and patients who died while in the hospital. In 2019 the majority of patients (61.8 percent) were discharged to their homes, less than two percent of patients died in the hospital, and around one percent left against medical advice.

Figure 24. Percentage of Discharges by Discharge Status, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOW PATIENTS WERE DISCHARGED

Expired Patients:

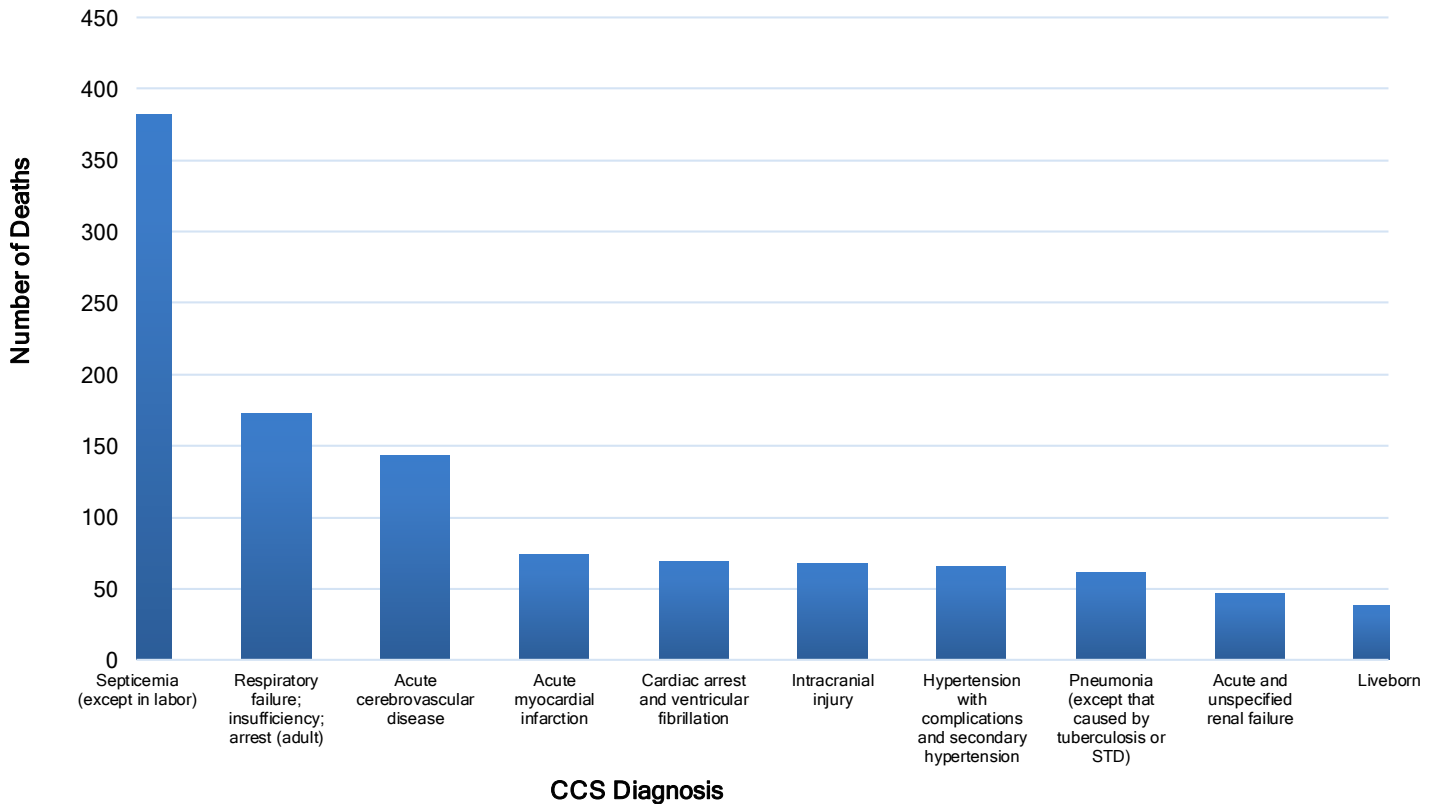
Patients who died during their hospital stay contributed to the “in-hospital mortality” figures. Data about in-hospital mortality are expressed as either numbers of deaths, or percentages of deaths. Both the frequencies and percentages are presented, as each statistic provides a different perspective for reviewing the data.

Frequencies:

Patients with the following diagnoses experienced the highest numbers of in-hospital mortality:

- septicemia (except in labor);
- respiratory failure; insufficiency; arrest (adult);
- acute cerebrovascular disease.

Figure 25. Number of Diagnoses with the Greatest Numbers of In-Hospital Deaths, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

The most frequent causes of in-hospital mortality varied by age group. Other perinatal conditions accounted for the largest number of deaths to those under one, while respiratory failure; insufficiency; arrest (adult) caused the highest number of deaths to those ages 1 to 17. Septicemia (except in labor) was the most frequent cause of death for ages 18 to 44 and for those aged 45 and over.

Patients ages 65 and older accounted for 65.0 percent of all in-hospital mortality. For more information see Appendices G and H.

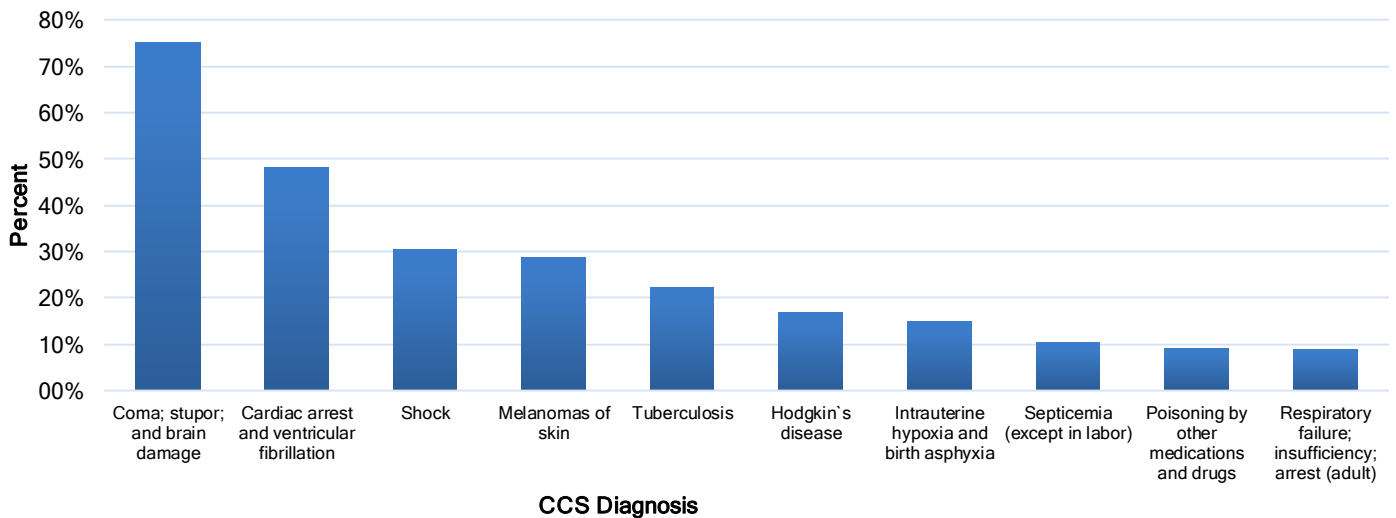
HOW PATIENTS WERE DISCHARGED

Percentages:

Those diagnoses with the greatest percentages of in-hospital mortality were:

- coma; stupor; and brain damage;
- cardiac arrest and ventricular fibrillation;
- shock;
- melanomas of skin.

Figure 26. Percentages of CCS Diagnoses with the Greatest Percentage of In-Hospital Mortality, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Patients who left against medical advice:

Around 1 percent of patients left the hospital against medical advice. Males were nearly twice as likely as females to leave the hospital against medical advice; uninsured patients were about 10 times as likely when compared to privately insured patients.

The three most frequent diagnoses of patients who left the hospital against medical advice were alcohol-related disorders, hypertension with complications and secondary hypertension, and skin and subcutaneous tissue infections.

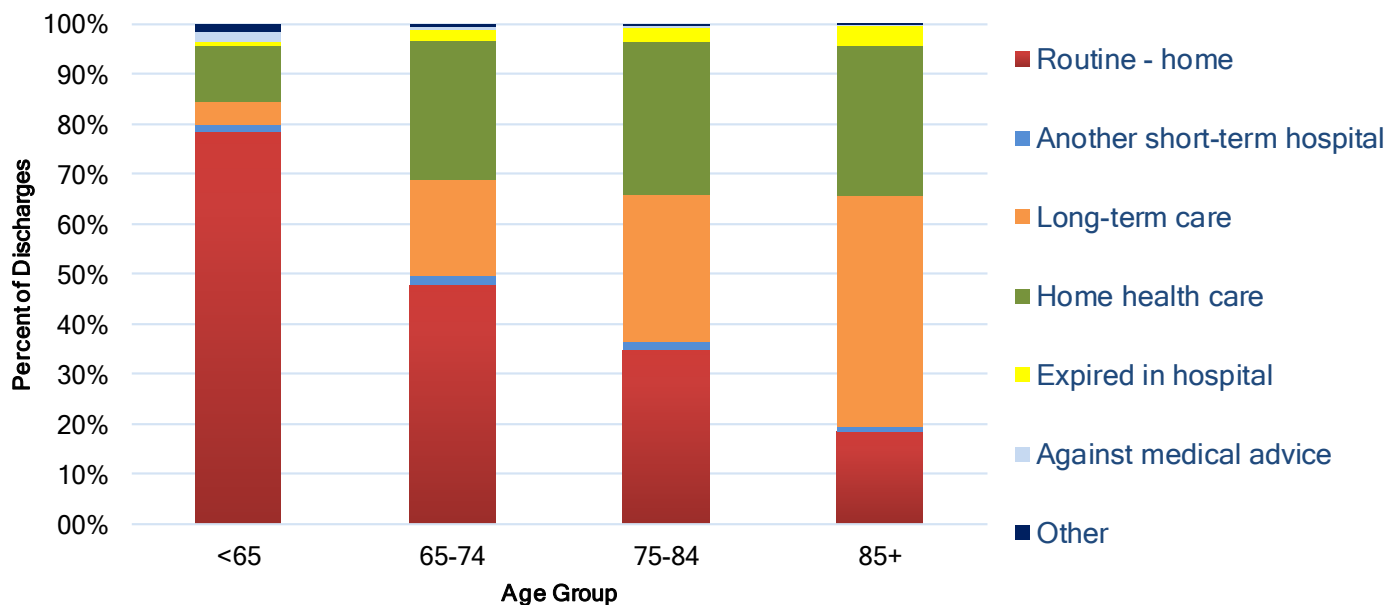
- For women, alcohol-related disorders, skin and subcutaneous tissue infections, and chronic obstructive pulmonary disease and bronchiectasis made up the top three.
- For men, alcohol-related disorders, hypertension with complications and secondary hypertension, and skin and subcutaneous tissue infections made up the top three.

HOW PATIENTS WERE DISCHARGED

Patients transferred to another facility:

The majority of patients discharged to another facility were transferred to a long-term care (LTC) facility. For those 65 and older, each 10-year increase in patient age saw at least a 10 percent increase in the likelihood of being transferred to LTC facilities. In 2019, around 5 percent of those under 65 were discharged to long-term care facilities, compared to 19.4 percent of those ages 65-74, 29.2 percent of those ages 75-84, and 46.5 percent of those 85 and older.

Figure 27. Distribution of Discharge Status by Age Group, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

In 2019, the most common diagnoses for patients discharged to LTC facilities were; septicemia (except in labor), acute cerebrovascular disease, and hypertension with complications and secondary hypertension.

- The three most common diagnoses for patients under 65 (excluding liveborn infants) were acute cerebrovascular disease, septicemia (except in labor), and respiratory failure; insufficiency; arrest (adult).
- For patients ages 65-74, acute cerebrovascular disease, septicemia (except in labor), and hypertension with complications and secondary hypertension were the three most common diagnoses.
- For patients ages 75-84, septicemia (except in labor), acute cerebrovascular disease, and hypertension with complications and secondary hypertension were the three most common diagnoses.
- For patients 85 and older, fracture of neck of femur (hip), hypertension with complications and secondary hypertension, and septicemia (except in labor) were the three most common diagnoses.

HOSPITAL SPECIFIC DATA

A.I. duPont Hospital for Children

2019 Discharge Distribution

Zip / State	Number	%
PA	2,431	29.5%
NJ	772	9.4%
19805	443	5.4%
MD	413	5.0%
19720	394	4.8%
19702	317	3.8%
19802	271	3.3%
19709	213	2.6%
19701	195	2.4%
19713	183	2.2%
19801	176	2.1%
Other State	176	2.1%
19808	160	1.9%
19901	144	1.7%
19711	141	1.7%
19904	133	1.6%
19973	127	1.5%
19810	111	1.3%
19703	100	1.2%
19804	93	1.1%
19809	88	1.1%
19977	88	1.1%
19947	68	0.8%
19956	68	0.8%
19966	68	0.8%
19734	64	0.8%
19803	63	0.8%
19934	58	0.7%
19963	55	0.7%
19707	52	0.6%
19952	52	0.6%
19933	46	0.6%
19943	46	0.6%
19968	42	0.5%
19962	39	0.5%
19960	36	0.4%
19938	33	0.4%
19958	28	0.3%
19806	26	0.3%
19807	25	0.3%
19950	23	0.3%
19971	22	0.3%
19945	19	0.2%
19939	18	0.2%
19953	18	0.2%
19940	16	0.2%
19975	15	0.2%
19941	10	0.1%
Undisclosed*	58	0.7%

Total	8,237	100.0%
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*Zip codes with less than 10 cases

Utilization Characteristics

	2017	2018	2019
Aggregate charges	\$679,200,141	\$737,663,145	\$767,959,362
Average charges	\$73,324	\$79,558	\$93,233
Average charge per day	\$12,352	\$13,953	\$14,111
Number of Discharges	9,263	9,272	8,237
Total All-listed Procedures¹	11,743	11,854	11,362
<i>Non-operating room procedures²</i>	7,076	7,229	6,814
<i>Valid operating room procedures²</i>	4,667	4,625	4,548
Average Length of Stay	5.7	5.7	6.4
Primary Payer Distribution			
<i>Medicare</i>	0.6%	0.6%	0.4%
<i>Medicaid</i>	47.8%	49.8%	51.9%
<i>Private Insurance</i>	48.6%	45.7%	46.9%
<i>Uninsured</i>	0.1%	0.8%	0.1%
<i>Other</i>	2.9%	3.2%	0.8%
Point of Origin Distribution			
<i>Home-Work-etc.</i>	58.4%	58.9%	56.3%
<i>Clinic/Physician Office</i>	23.1%	22.3%	23.2%
<i>Transfers-Health Facility</i>	17.4%	17.7%	20.0%
<i>Newborn</i>	0.0%	0.0%	0.1%
<i>Other/Unknown</i>	1.2%	1.0%	0.4%
Discharge Status Distribution			
<i>Routine - home</i>	90.1%	95.4%	95.1%
<i>Another short-term hospital</i>	0.7%	0.6%	0.8%
<i>Long-term care facility</i>	0.9%	1.4%	1.8%
<i>Home health care</i>	1.0%	0.7%	0.4%
<i>Expired in hospital</i>	0.5%	0.7%	0.5%
<i>Left against medical advice</i>	0.1%	0.0%	0.0%
<i>Other/Unknown</i>	6.7%	1.2%	1.3%
Sex			
<i>Male</i>	53.8%	53.1%	52.7%
<i>Female</i>	46.2%	46.9%	47.3%
Age			
<i><1</i>	22.8%	22.3%	23.7%
<i>1-4</i>	24.0%	26.9%	24.6%
<i>5-9</i>	18.2%	17.2%	15.5%
<i>10-14</i>	18.4%	17.3%	17.8%
<i>15-19</i>	15.4%	15.1%	16.9%
<i>20-24</i>	1.1%	1.1%	1.2%
<i>25-34</i>	0.2%	0.1%	0.2%
<i>35-44</i>	0.0%	0.0%	0.0%
<i>45-54</i>	0.0%	0.0%	0.0%
<i>55-64</i>	0.0%	0.0%	0.0%
<i>65-74</i>	0.0%	0.0%	0.0%
<i>75+</i>	0.0%	0.0%	0.0%
<i>Unknown</i>	0.0%	0.0%	0.0%

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>.

3. Percentages may not sum to 100 due to rounding.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL SPECIFIC DATA

BayHealth Medical Center (includes both Milford Memorial and Kent General Hospitals)

2019 Discharge Distribution

Zip / State	Number	%
19901	3,709	17.2%
19904	3,349	15.5%
19963	2,092	9.7%
19977	1,493	6.9%
19943	1,241	5.7%
19934	1,176	5.4%
19962	1,124	5.2%
19952	1,055	4.9%
19960	560	2.6%
19938	559	2.6%
MD	469	2.2%
19946	461	2.1%
19950	447	2.1%
19953	416	1.9%
19968	384	1.8%
19947	343	1.6%
19966	295	1.4%
19941	247	1.1%
19958	232	1.1%
19973	200	0.9%
19954	158	0.7%
19964	157	0.7%
Other State	147	0.7%
19933	141	0.7%
19734	127	0.6%
19709	124	0.6%
19956	109	0.5%
19971	93	0.4%
19979	74	0.3%
PA	67	0.3%
19936	61	0.3%
19903	49	0.2%
19701	33	0.2%
19939	33	0.2%
19945	32	0.1%
19702	31	0.1%
19720	30	0.1%
NJ	29	0.1%
19970	25	0.1%
19951	24	0.1%
19975	21	0.1%
19955	20	0.1%
19980	20	0.1%
19711	13	0.1%
19930	13	0.1%
19940	13	0.1%
19808	11	0.1%
Undisclosed*	96	0.4%

Total	21,603	100.0%
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*Zip codes with less than 10 cases

Utilization Characteristics

	2017	2018	2019
Aggregate charges	\$726,708,896	\$816,780,580	\$761,903,460
Average charges	\$34,632	\$37,172	\$35,268
Average charge per day	\$8,616	\$9,073	\$8,472
Number of Discharges	20,984	21,973	21,603
Total All-listed Procedures¹	19,962	20,406	20,422
<i>Non-operating room procedures²</i>	12,932	13,670	13,430
<i>Valid operating room procedures²</i>	7,030	6,736	6,992
Average Length of Stay	5.0	5.2	5.3
Primary Payer Distribution			
<i>Medicare</i>	50.0%	50.6%	51.2%
<i>Medicaid</i>	23.0%	24.3%	24.0%
<i>Private Insurance</i>	20.5%	18.8%	18.3%
<i>Uninsured</i>	2.4%	2.5%	2.3%
<i>Other</i>	4.1%	3.8%	4.1%
Point of Origin Distribution			
<i>Home-Work-etc.</i>	61.6%	63.5%	64.3%
<i>Clinic/Physician Office</i>	9.7%	8.0%	8.2%
<i>Transfers-Health Facility</i>	17.3%	17.5%	16.9%
<i>Newborn</i>	11.0%	10.7%	10.2%
<i>Other/Unknown</i>	.5%	.4%	.3%
Discharge Status Distribution			
<i>Routine - home</i>	58.2%	58.4%	57.8%
<i>Another short-term hospital</i>	2.4%	2.9%	3.2%
<i>Long-term care facility</i>	15.8%	15.1%	15.3%
<i>Home health care</i>	19.1%	18.9%	18.6%
<i>Expired in hospital</i>	2.1%	2.3%	2.3%
<i>Left against medical advice</i>	1.2%	1.5%	1.5%
<i>Other/Unknown</i>	1.2%	1.0%	1.3%
Sex			
<i>Male</i>	42.9%	43.7%	43.0%
<i>Female</i>	57.1%	56.3%	57.0%
Age			
<1	11.6%	11.3%	11.0%
1-4	0.4%	0.4%	0.3%
5-9	0.1%	0.2%	0.1%
10-14	0.1%	0.1%	0.1%
15-19	1.2%	0.9%	1.0%
20-24	3.7%	3.6%	3.4%
25-34	9.9%	10.3%	9.9%
35-44	6.1%	6.6%	7.0%
45-54	9.3%	9.1%	8.3%
55-64	14.8%	14.9%	14.7%
65-74	18.3%	17.9%	18.6%
75+	24.5%	24.7%	25.6%

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>.

3. Percentages may not sum to 100 due to rounding.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL SPECIFIC DATA

Beebe Medical Center

2019 Discharge Distribution

Zip / State	Number	%
19966	2,648	23.3%
19958	2,183	19.2%
19971	1,134	10.0%
19968	879	7.7%
19947	836	7.4%
19970	522	4.6%
19945	419	3.7%
19939	344	3.0%
19975	263	2.3%
MD	205	1.8%
19963	189	1.7%
19951	181	1.6%
Other State	178	1.6%
19930	175	1.5%
19973	174	1.5%
PA	158	1.4%
19960	117	1.0%
19956	101	0.9%
19967	79	0.7%
19933	72	0.6%
19950	71	0.6%
19941	64	0.6%
19952	37	0.3%
19901	31	0.3%
19943	31	0.3%
NJ	27	0.2%
19904	23	0.2%
19969	20	0.2%
19944	19	0.2%
19940	14	0.1%
19977	14	0.1%
19934	13	0.1%
19962	12	0.1%
19709	11	0.1%
19805	10	0.1%
Undisclosed*	89	0.8%
Total	11,343	100.0%

*Zip codes with less than 10 cases

Utilization Characteristics

	2017	2018	2019
Aggregate charges	\$477,417,783	\$455,507,757	\$485,146,677
Average charges	\$40,119	\$41,271	\$42,771
Average charge per day	\$12,316	\$14,566	\$14,593
Number of Discharges	11,900	11,037	11,343
Total All-listed Procedures¹	14,822	14,328	15,140
<i>Non-operating room procedures²</i>	9,549	8,841	9,435
<i>Valid operating room procedures²</i>	5,273	5,487	5,705
Average Length of Stay	4.2	4.0	4.2
Primary Payer Distribution			
<i>Medicare</i>	57.1%	58.7%	58.6%
<i>Medicaid</i>	15.5%	13.8%	12.7%
<i>Private Insurance</i>	24.5%	25.0%	25.8%
<i>Uninsured</i>	1.4%	1.3%	1.5%
<i>Other</i>	1.5%	1.2%	1.4%
Point of Origin Distribution			
<i>Home-Work-etc.</i>	22.9%	24.3%	24.6%
<i>Clinic/Physician Office</i>	69.8%	69.5%	69.0%
<i>Transfers-Health Facility</i>	0.0%	0.0%	0.0%
<i>Newborn</i>	7.3%	6.2%	6.3%
<i>Other/Unknown</i>	0.0%	0.0%	0.1%
Discharge Status Distribution			
<i>Routine - home</i>	51.4%	49.1%	47.4%
<i>Another short-term hospital</i>	1.4%	1.7%	1.9%
<i>Long-term care facility</i>	15.7%	15.0%	16.3%
<i>Home health care</i>	28.2%	30.7%	30.8%
<i>Expired in hospital</i>	2.1%	2.1%	2.0%
<i>Left against medical advice</i>	0.8%	0.9%	1.0%
<i>Other/Unknown</i>	0.4%	0.5%	0.5%
Sex			
<i>Male</i>	46.8%	47.2%	47.1%
<i>Female</i>	53.2%	52.8%	52.9%
Age			
<1	7.2%	6.4%	6.3%
1-4	0.0%	0.1%	0.1%
5-9	0.0%	0.1%	0.0%
10-14	0.1%	0.0%	0.1%
15-19	0.7%	0.6%	0.6%
20-24	1.7%	1.9%	1.7%
25-34	6.6%	6.1%	6.0%
35-44	5.0%	4.2%	4.3%
45-54	7.1%	6.7%	5.8%
55-64	14.9%	14.7%	13.9%
65-74	25.0%	25.9%	26.9%
75+	31.7%	33.4%	34.3%

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>

3. Percentages may not sum to 100 due to rounding.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL SPECIFIC DATA

Christiana Care Health System (includes both Wilmington and Christiana Hospitals)

2019 Discharge Distribution			Utilization Characteristics			
Zip / State	Number	%	2017	2018	2019	
19720	5,673	9.5%	Aggregate charges	\$1,488,668,800	\$1,586,679,971	\$1,685,729,533
19702	4,332	7.2%	Average charges	\$25,728	\$27,534	\$28,176
MD	3,621	6.1%	Average charge per day	\$6,766	\$6,940	\$7,295
19713	3,587	6.0%	Number of Discharges	57,862	57,627	59,829
19805	3,547	5.9%	Total All-listed Procedures¹	86,680	84,235	80,606
19808	3,465	5.8%	<i>Non-operating room procedures²</i>	49,471	48,413	45,750
19711	3,389	5.7%	<i>Valid operating room procedures²</i>	37,209	35,822	34,856
19709	3,291	5.5%	Average Length of Stay	5.2	5.5	5.4
19701	3,250	5.4%	Primary Payer Distribution			
19802	2,650	4.4%	<i>Medicare</i>	38.4%	45.4%	46.7%
PA	2,327	3.9%	<i>Medicaid</i>	3.8%	20.8%	19.3%
19801	1,993	3.3%	<i>Private Insurance</i>	50.8%	29.9%	29.3%
19803	1,867	3.1%	<i>Uninsured</i>	1.5%	1.7%	2.4%
19804	1,826	3.1%	<i>Other</i>	5.4%	2.2%	2.3%
19810	1,747	2.9%	Point of Origin Distribution			
NJ	1,718	2.9%	<i>Home-Work-etc.</i>	63.6%	64.4%	65.1%
19707	1,131	1.9%	<i>Clinic/Physician Office</i>	22.1%	21.7%	21.2%
19809	1,130	1.9%	<i>Transfers-Health Facility</i>	3.4%	3.4%	3.4%
19703	1,116	1.9%	<i>Newborn</i>	10.9%	10.5%	10.3%
19806	986	1.6%	<i>Other/Unknown</i>	.0%	.0%	.0%
19977	952	1.6%	Discharge Status Distribution			
19734	886	1.5%	<i>Routine - home</i>	61.4%	59.9%	61.3%
19807	522	0.9%	<i>Another short-term hospital</i>	0.5%	0.5%	0.5%
19904	494	0.8%	<i>Long-term care facility</i>	14.6%	15.4%	15.6%
19901	429	0.7%	<i>Home health care</i>	19.8%	20.3%	18.5%
Other State	355	0.6%	<i>Expired in hospital</i>	1.5%	1.5%	1.6%
19938	324	0.5%	<i>Left against medical advice</i>	1.0%	1.1%	1.3%
19966	284	0.5%	<i>Other/Unknown</i>	1.2%	1.3%	1.2%
19958	268	0.4%	Sex			
19706	221	0.4%	<i>Male</i>	42.2%	42.5%	42.5%
19973	218	0.4%	<i>Female</i>	57.8%	57.5%	57.5%
19963	155	0.3%	Age			
19934	139	0.2%	<1	11.1%	10.7%	10.5%
19943	136	0.2%	1-4	0.0%	0.0%	0.0%
19968	136	0.2%	5-9	0.0%	0.0%	0.0%
19956	133	0.2%	10-14	0.0%	0.0%	0.0%
19947	127	0.2%	15-19	0.9%	1.0%	0.9%
19971	124	0.2%	20-24	3.3%	3.0%	2.9%
19933	113	0.2%	25-34	11.3%	11.1%	10.9%
19962	113	0.2%	35-44	7.8%	7.8%	8.0%
19952	100	0.2%	45-54	10.2%	10.1%	9.2%
19950	72	0.1%	55-64	15.7%	16.0%	15.9%
19953	70	0.1%	65-74	17.9%	17.9%	18.4%
19960	62	0.1%	75+	21.6%	22.4%	23.2%
19730	61	0.1%				
19945	57	0.1%				
19970	57	0.1%				
19946	45	0.1%				
19939	42	0.1%				
19731	41	0.1%				
19714	37	0.1%				
19733	37	0.1%				
19975	37	0.1%				
19899	29	0.0%				
19964	24	0.0%				
19710	23	0.0%				
19940	23	0.0%				
19850	20	0.0%				
19941	18	0.0%				
19954	17	0.0%				
19930	15	0.0%				
19732	14	0.0%				
19951	14	0.0%				
19736	13	0.0%				
19712	11	0.0%				
19936	10	0.0%				
19967	10	0.0%				
Undisclosed*	95	0.2%				
Total	59,829	100.0%				

*Zip codes with less than 10 cases

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>.

3. Percentages may not sum to 100 due to rounding.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL SPECIFIC DATA

TidalHealth

2019 Discharge Distribution

Zip / State	Number	%
19973	2,159	34.9%
19956	1,011	16.3%
19933	637	10.3%
19947	633	10.2%
MD	395	6.4%
19966	339	5.5%
19940	215	3.5%
19950	209	3.4%
19963	64	1.0%
19945	61	1.0%
19958	49	0.8%
19939	47	0.8%
19975	41	0.7%
19941	38	0.6%
19952	38	0.6%
19960	38	0.6%
Other State	31	0.5%
19904	24	0.4%
19968	23	0.4%
19943	20	0.3%
19901	15	0.2%
19970	12	0.2%
19971	12	0.2%
19951	11	0.2%
19931	10	0.2%
19962	10	0.2%
19977	10	0.2%
Undisclosed*	42	0.7%
Total	6,194	100.0%

*Zip codes with less than 10 cases

Utilization Characteristics

	2017	2018	2019
Aggregate charges	\$122,934,715	\$125,980,307	\$115,544,239
Average charges	\$19,206	\$18,984	\$18,654
Average charge per day	\$6,977	\$6,772	\$7,098
Number of Discharges	6,401	6,636	6,194
Total All-listed Procedures¹	7,992	8,749	8,409
<i>Non-operating room procedures²</i>	5,563	6,433	6,102
<i>Valid operating room procedures²</i>	2,429	2,316	2,307
Average Length of Stay	3.3	3.5	3.4
Primary Payer Distribution			
<i>Medicare</i>	42.7%	41.7%	40.7%
<i>Medicaid</i>	34.5%	35.1%	35.0%
<i>Private Insurance</i>	20.0%	20.0%	20.1%
<i>Uninsured</i>	1.6%	1.8%	1.9%
<i>Other</i>	1.2%	1.4%	2.3%
Point of Origin Distribution			
<i>Home-Work-etc.</i>	59.0%	59.7%	58.4%
<i>Clinic/Physician Office</i>	27.2%	26.1%	27.1%
<i>Transfers-Health Facility</i>	0.0%	0.0%	0.0%
<i>Newborn</i>	13.8%	14.1%	14.5%
<i>Other/Unknown</i>	0.0%	0.0%	0.0%
Discharge Status Distribution			
<i>Routine - home</i>	63.5%	65.2%	65.5%
<i>Another short-term hospital</i>	2.5%	3.1%	3.1%
<i>Long-term care facility</i>	12.5%	12.2%	11.9%
<i>Home health care</i>	17.7%	15.5%	15.6%
<i>Expired in hospital</i>	1.6%	2.0%	2.0%
<i>Left against medical advice</i>	1.3%	1.0%	1.3%
<i>Other/Unknown</i>	0.8%	0.9%	0.6%
Sex			
<i>Male</i>	39.0%	40.4%	40.0%
<i>Female</i>	61.0%	59.6%	60.0%
Age			
<1	14.8%	15.3%	15.6%
1-4	0.5%	0.7%	0.5%
5-9	0.2%	0.4%	0.1%
10-14	0.3%	0.3%	0.2%
15-19	1.7%	1.4%	2.0%
20-24	4.6%	4.6%	4.7%
25-34	10.2%	11.5%	11.4%
35-44	6.9%	6.7%	7.2%
45-54	8.9%	8.8%	8.9%
55-64	14.2%	13.4%	13.5%
65-74	17.3%	16.3%	16.2%
75+	20.5%	20.5%	19.8%

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>.

3. Percentages may not sum to 100 due to rounding.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL SPECIFIC DATA

St. Francis Hospital

2019 Discharge Distribution

Zip / State	Number	%
19805	1,343	23.6%
19720	578	10.2%
19802	524	9.2%
19801	420	7.4%
19806	327	5.8%
19810	236	4.2%
19703	228	4.0%
19702	222	3.9%
19804	219	3.9%
19808	214	3.8%
19803	191	3.4%
19809	176	3.1%
19711	144	2.5%
PA	114	2.0%
19701	113	2.0%
MD	106	1.9%
19713	101	1.8%
19707	81	1.4%
19807	56	1.0%
19709	54	1.0%
NJ	43	0.8%
Other State	29	0.5%
19977	21	0.4%
19901	19	0.3%
19904	17	0.3%
19734	14	0.2%
19934	10	0.2%
Undisclosed*	79	1.4%
Total	5,679	100.0%

*Zip codes with less than 10 cases

Utilization Characteristics

	2017	2018	2019
Aggregate charges	\$156,152,244	\$186,585,855	\$197,438,636
Average charges	\$27,594	\$30,948	\$34,766
Average charge per day	\$9,696	\$10,746	\$11,399
Number of Discharges	5,659	6,029	5,679
Total All-listed Procedures¹	5,871	6,560	7,999
<i>Non-operating room procedures²</i>	3,654	4,171	5,522
<i>Valid operating room procedures²</i>	2,217	2,389	2,477
Average Length of Stay	3.7	3.8	4.0
Primary Payer Distribution			
<i>Medicare</i>	30.7%	35.0%	35.4%
<i>Medicaid</i>	32.7%	35.8%	35.3%
<i>Private Insurance</i>	32.8%	25.6%	25.4%
<i>Uninsured</i>	3.3%	2.4%	2.4%
<i>Other</i>	0.4%	1.2%	1.4%
Point of Origin Distribution			
<i>Home-Work-etc.</i>	68.8%	67.6%	70.2%
<i>Clinic/Physician Office</i>	11.3%	14.7%	12.4%
<i>Transfers-Health Facility</i>	2.6%	1.5%	1.7%
<i>Newborn</i>	13.3%	12.3%	12.0%
<i>Other/Unknown</i>	4.0%	3.9%	3.7%
Discharge Status Distribution			
<i>Routine - home</i>	72.3%	69.7%	62.0%
<i>Another short-term hospital</i>	2.3%	2.2%	2.7%
<i>Long-term care facility</i>	10.9%	10.6%	10.5%
<i>Home health care</i>	7.8%	11.4%	17.5%
<i>Expired in hospital</i>	3.0%	1.5%	2.4%
<i>Left against medical advice</i>	2.1%	3.3%	3.4%
<i>Other/Unknown</i>	1.6%	1.4%	1.6%
Sex			
<i>Male</i>	38.4%	40.0%	42.0%
<i>Female</i>	61.6%	60.0%	58.0%
Age			
<i><1</i>	13.5%	12.4%	12.1%
<i>1-4</i>	0.0%	0.0%	0.0%
<i>5-9</i>	0.0%	0.0%	0.0%
<i>10-14</i>	0.0%	0.0%	0.0%
<i>15-19</i>	1.4%	1.2%	0.9%
<i>20-24</i>	4.3%	4.2%	3.5%
<i>25-34</i>	13.4%	13.1%	12.8%
<i>35-44</i>	11.3%	10.9%	11.6%
<i>45-54</i>	13.1%	12.5%	12.0%
<i>55-64</i>	15.5%	17.3%	17.0%
<i>65-74</i>	11.6%	13.2%	13.8%
<i>75+</i>	15.9%	15.1%	16.3%

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>.

3. Percentages may not sum to 100 due to rounding.

4. St. Francis hospital does not operate a pediatric service. ER patients are admitted at AI Dupont.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL SPECIFIC DATA

Select Specialty Hospital - Wilmington

2019 Discharge Distribution		
Zip / State	Number	%
MD	42	15.6%
19720	20	7.4%
NJ	15	5.6%
19901	14	5.2%
PA	14	5.2%
19802	13	4.8%
19805	13	4.8%
19702	12	4.4%
Undisclosed*	127	47.0%
Total	270	100.0%

*Zip codes with less than 10 cases

Utilization Characteristics			
	2017	2018	2019
Aggregate charges	\$65,090,391	\$67,615,962	\$80,555,683
Average charges	\$187,041	\$209,987	\$298,354
Average charge per day	\$6,306	\$6,880	\$7,735
Number of Discharges	348	322	270
Total All-listed Procedures¹	466	705	510
<i>Non-operating room procedures²</i>	374	578	434
<i>Valid operating room procedures²</i>	92	127	76
Average Length of Stay	29.3	30.4	38.3
Primary Payer Distribution			
<i>Medicare</i>	81.6%	68.6%	65.2%
<i>Medicaid</i>	0.6%	9.9%	11.9%
<i>Private Insurance</i>	16.4%	19.9%	21.5%
<i>Uninsured</i>	0.0%	0.0%	0.0%
<i>Other</i>	1.4%	1.6%	1.5%
Point of Origin Distribution			
<i>Home-Work-etc.</i>	0.0%	0.0%	0.0%
<i>Clinic/Physician Office</i>	0.0%	0.0%	0.0%
<i>Transfers-Health Facility</i>	100.0%	100.0%	100.0%
<i>Newborn</i>	0.0%	0.0%	0.0%
<i>Other/Unknown</i>	0.0%	0.0%	0.0%
Discharge Status Distribution			
<i>Routine - home</i>	2.9%	2.5%	1.1%
<i>Another short-term hospital</i>	14.4%	10.9%	13.0%
<i>Long-term care facility</i>	58.6%	57.1%	63.7%
<i>Home health care</i>	13.2%	14.0%	11.1%
<i>Expired in hospital</i>	9.5%	10.2%	8.5%
<i>Left against medical advice</i>	0.6%	1.9%	0.4%
<i>Other/Unknown</i>	0.9%	3.4%	2.2%
Sex			
<i>Male</i>	51.1%	59.0%	58.1%
<i>Female</i>	48.9%	41.0%	41.9%
<i>Unknown</i>	0.0%	0.0%	0.0%
Age			
<1	0.0%	0.0%	0.0%
1-4	0.0%	0.0%	0.0%
5-9	0.0%	0.0%	0.0%
10-14	0.0%	0.0%	0.0%
15-19	0.0%	0.0%	0.0%
20-24	0.3%	1.6%	0.4%
25-34	0.9%	2.5%	2.6%
35-44	1.4%	4.3%	7.4%
45-54	12.6%	15.8%	11.5%
55-64	24.7%	23.9%	21.1%
65-74	32.2%	26.4%	28.9%
75+	27.9%	25.5%	28.1%

Notes:

1. Total all-listed procedures represents the total number of procedures performed; up to six procedures may be recorded per discharge, as a result the total number of all-listed procedures can exceed the total number of discharges.

2. Procedures were classified using AHRQ's HCUP procedure class software. See AHRQ's website for more information: <http://www.hcup-us.ahrq.gov/toolssoftware/procedure/procedure.jsp>.

3. Percentages may not sum to 100 due to rounding.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

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Clinical classification system:

Diagnoses and procedures were reported using the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-10-CM). These codes were then aggregated into broader diagnostic categories according to the Clinical Classification System (CCS) developed by the Agency of Healthcare Research and Quality (AHRQ). The CCS diagnoses are used to categorize clinically similar diagnoses for ease in presentation and interpretation of hospital discharge data. A complete listing of CCS diagnostic codes and selected corresponding measures are presented below.

Table A1. Number and Percent of Discharges, Mean Length of Stay, Mean Charges, Percent Expired, and Percent with an Emergency Priority at Admission by Principal Diagnosis Delaware Hospitals, 2019

Clinical Classifications Software Categories and Chapter Headings		Number of Discharges	Percent of Discharges	Length of Stay	Mean Total Charges	Percent Expired	Percent Emergency Priority
Infections and parasitic diseases	Tuberculosis	9	0.2%	20.8	\$141,469	22.2%	66.7%
	Septicemia (except in labor)	3,671	84.9%	9.0	\$63,471	10.4%	82.7%
	Bacterial infection; unspecified site	140	3.2%	8.1	\$44,733	1.4%	67.9%
	Mycoses	52	1.2%	7.2	\$38,646	3.8%	90.4%
	HIV infection	121	2.8%	11.8	\$61,220	8.3%	92.6%
	Hepatitis	68	1.6%	3.8	\$21,041	0.0%	82.4%
	Viral infection	201	4.6%	3.6	\$21,961	1.0%	82.1%
	Other infections; including parasitic	46	1.1%	6.5	\$32,627	0.0%	80.4%
	Sexually transmitted infections (not HIV or hepatitis)	10	0.2%	9.8	\$47,672	0.0%	80.0%
	Immunizations and screening for infectious disease	6	0.1%	4.0	\$19,481	0.0%	66.7%
Total	4,324	100.0%	8.7	\$59,643	9.3%	82.4%	
Neoplasms	Cancer of head and neck	73	1.8%	6.0	\$41,800	5.5%	30.1%
	Cancer of esophagus	52	1.3%	9.0	\$55,420	3.8%	51.9%
	Cancer of stomach	61	1.5%	9.8	\$71,925	3.3%	54.1%
	Cancer of colon	273	6.9%	7.2	\$55,903	1.8%	37.7%
	Cancer of rectum and anus	96	2.4%	7.4	\$53,635	0.0%	37.5%
	Cancer of liver and intrahepatic bile duct	70	1.8%	7.4	\$43,687	2.9%	68.6%
	Cancer of pancreas	114	2.9%	7.0	\$45,524	2.6%	60.5%
	Cancer of other GI organs; peritoneum	64	1.6%	8.6	\$81,412	1.6%	40.6%
	Cancer of bronchus; lung	438	11.0%	6.2	\$55,663	5.9%	46.1%
	Cancer; other respiratory and intrathoracic	2	0.1%	9.0	\$34,797	0.0%	50.0%
	Cancer of bone and connective tissue	19	0.5%	6.5	\$63,974	0.0%	26.3%
	Melanomas of skin	7	0.2%	2.6	\$26,571	28.6%	14.3%
	Other non-epithelial cancer of skin	27	0.7%	3.8	\$21,017	0.0%	18.5%
	Cancer of breast	85	2.1%	4.3	\$38,248	3.5%	43.5%
	Cancer of uterus	103	2.6%	4.1	\$28,832	1.0%	20.4%
	Cancer of cervix	22	0.6%	3.0	\$26,447	0.0%	27.3%
	Cancer of ovary	49	1.2%	6.2	\$38,361	4.1%	28.6%
	Cancer of other female genital organs	21	0.5%	3.3	\$23,179	0.0%	19.0%
	Cancer of prostate	124	3.1%	2.3	\$26,354	0.8%	18.5%
	Cancer of testis	4	0.1%	4.3	\$34,917	0.0%	75.0%
	Cancer of other male genital organs	0	0.0%	N/A	N/A	N/A	N/A
	Cancer of bladder	70	1.8%	5.6	\$32,425	1.4%	48.6%
	Cancer of kidney and renal pelvis	141	3.6%	4.6	\$39,190	2.1%	14.2%
	Cancer of other urinary organs	12	0.3%	4.1	\$28,781	0.0%	8.3%
	Cancer of brain and nervous system	105	2.6%	8.7	\$73,128	4.8%	59.0%
	Cancer of thyroid	28	0.7%	3.0	\$25,793	0.0%	7.1%
	Hodgkin's disease	6	0.2%	7.5	\$84,859	16.7%	66.7%

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Clinical Classifications Software Categories and Chapter Headings		Number of Discharges	Percent of Discharges	Length of Stay	Mean Total Charges	Percent Expired	Percent Emergency Priority
	Non-Hodgkin`s lymphoma	90	2.3%	11.3	\$93,761	5.6%	61.1%
	Leukemias	134	3.4%	13.8	\$130,685	7.5%	60.4%
	Multiple myeloma	65	1.6%	10.0	\$74,720	1.5%	58.5%
	Cancer; other and unspecified primary	29	0.7%	8.6	\$82,202	0.0%	24.1%
	Secondary malignancies	475	12.0%	6.8	\$40,400	4.2%	65.7%
	Malignant neoplasm without specification of site	37	0.9%	7.8	\$48,604	2.7%	73.0%
	Neoplasms of unspecified nature or uncertain behavior	112	2.8%	6.8	\$82,053	0.9%	50.9%
	Maintenance chemotherapy; radiotherapy	410	10.3%	6.2	\$67,572	0.2%	1.5%
	Benign neoplasm of uterus	184	4.6%	2.5	\$27,119	0.0%	3.8%
	Other and unspecified benign neoplasm	366	9.2%	4.7	\$44,929	0.3%	19.9%
	Total	3,968	100.0%	6.4	\$53,615	2.6%	37.1%
Endocrine, nutritional & metabolic diseases, & immunity disorders	Thyroid disorders	82	1.5%	4.1	\$20,404	1.2%	68.3%
	Diabetes mellitus without complication	17	0.3%	3.1	\$21,285	0.0%	76.5%
	Diabetes mellitus with complications	2,366	43.8%	6.2	\$35,312	0.6%	79.8%
	Other endocrine disorders	309	5.7%	5.2	\$27,490	1.9%	74.1%
	Nutritional deficiencies	102	1.9%	8.9	\$37,380	2.0%	64.7%
	Disorders of lipid metabolism	4	0.1%	5.3	\$22,191	0.0%	100.0%
	Gout and other crystal arthropathies	61	1.1%	5.6	\$20,110	0.0%	85.2%
	Fluid and electrolyte disorders	1,311	24.3%	4.1	\$20,448	1.1%	84.4%
	Cystic fibrosis	45	0.8%	10.6	\$169,752	0.0%	28.9%
	Immunity disorders	34	0.6%	8.5	\$73,091	0.0%	70.6%
	Other nutritional; endocrine; and metabolic disorders	1,069	19.8%	2.8	\$35,839	0.8%	17.5%
	Total	5,400	100.0%	5.0	\$32,305	0.9%	67.4%
Disease of the blood and blood forming organs	Deficiency and other anemia	483	34.5%	3.8	\$25,705	1.0%	77.6%
	Acute posthemorrhagic anemia	168	12.0%	4.2	\$24,743	1.2%	73.8%
	Sickle cell anemia	438	31.3%	5.1	\$49,500	0.2%	90.6%
	Coagulation and hemorrhagic disorders	142	10.2%	4.3	\$35,762	1.4%	73.2%
	Diseases of white blood cells	141	10.1%	5.8	\$38,749	1.4%	69.5%
	Other hematologic conditions	26	1.9%	3.8	\$21,638	0.0%	69.2%
	Total	1,398	100.0%	4.5	\$35,306	0.9%	79.8%
Mental disorders	Adjustment disorders	9	0.3%	4.0	\$9,983	0.0%	55.6%
	Anxiety disorders	36	1.0%	4.3	\$13,903	0.0%	91.7%
	Attention-deficit	5	0.1%	5.0	\$23,887	0.0%	80.0%
	Delirium	190	5.3%	13.5	\$31,701	0.0%	89.5%
	Developmental disorders	12	0.3%	8.8	\$34,601	0.0%	75.0%
	Disorders usually diagnosed in infancy	1	0.0%	2.0	\$20,598	0.0%	100.0%
	Impulse control disorders	799	22.3%	8.2	\$17,841	0.0%	71.7%
	Mood disorders	160	4.5%	13.5	\$35,827	0.0%	76.3%
	Personality disorders	1,312	36.5%	5.5	\$24,127	1.2%	89.2%
	Schizophrenia and other psychotic disorders	534	14.9%	5.2	\$25,040	4.1%	81.6%
	Alcohol-related disorders	383	10.7%	4.5	\$25,186	2.9%	80.2%
	Substance-related disorders	1	0.0%	2.0	\$7,364	0.0%	0.0%
Screening and history of mental health and substance abuse codes	0	0.0%	N/A	N/A	N/A	N/A	
Miscellaneous disorders	148	4.1%	5.3	\$28,592	0.0%	71.6%	
	Total	3,590	100.0%	6.7	\$23,974	1.4%	81.8%
Diseases of the nervous system and sense organs	Meningitis (except that caused by tuberculosis or STD)	79	1.8%	6.0	\$46,987	0.0%	83.5%
	Encephalitis (except that caused by tuberculosis or STD)	37	0.9%	16.9	\$160,192	0.0%	62.2%
	Other CNS infection and poliomyelitis	51	1.2%	16.1	\$71,620	0.0%	76.5%
	Parkinson`s disease	45	1.0%	8.1	\$23,692	0.0%	64.4%
	Multiple sclerosis	76	1.8%	5.0	\$24,239	0.0%	81.6%
	Other hereditary and degenerative nervous system conditions	80	1.9%	6.6	\$32,270	0.0%	85.0%
	Paralysis	118	2.7%	9.8	\$60,033	0.0%	31.4%
	Epilepsy; convulsions	1,062	24.7%	4.8	\$33,373	0.8%	73.4%
	Headache; including migraine	269	6.3%	3.1	\$17,011	0.0%	88.1%
Coma; stupor; and brain damage	12	0.3%	5.1	\$46,252	75.0%	41.7%	

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Clinical Classifications Software Categories and Chapter Headings		Number of Discharges	Percent of Discharges	Length of Stay	Mean Total Charges	Percent Expired	Percent Emergency Priority	
	Cataract	1	0.0%	44.0	\$109,752	0.0%	100.0%	
	Retinal detachments; defects; vascular occlusion; and retinopathy	21	0.5%	3.4	\$23,370	0.0%	76.2%	
	Glaucoma	4	0.1%	3.5	\$20,240	0.0%	75.0%	
	Blindness and vision defects	27	0.6%	2.0	\$10,076	0.0%	92.6%	
	Inflammation; infection of eye (except that caused by tuberculosis or sexually transmitted disease)	55	1.3%	7.7	\$38,656	0.0%	78.2%	
	Other eye disorders	29	0.7%	5.9	\$30,795	0.0%	89.7%	
	Otitis media and related conditions	50	1.2%	3.9	\$26,237	0.0%	80.0%	
	Conditions associated with dizziness or vertigo	209	4.9%	2.4	\$9,292	0.0%	95.7%	
	Other ear and sense organ disorders	20	0.5%	2.8	\$16,186	0.0%	85.0%	
	Other nervous system disorders	2,058	47.8%	8.6	\$38,165	1.1%	38.9%	
	Total	4,303	100.0%	6.9	\$35,448	0.9%	58.5%	
Diseases of the circulatory system	Heart valve disorders	427	2.5%	5.9	\$145,106	3.0%	14.8%	
	Peri-, endo-, and myocarditis; cardiomyopathy (except that caused by tuberculosis or STD)	276	1.6%	9.3	\$95,622	3.3%	65.6%	
	Essential hypertension	40	0.2%	3.0	\$17,523	0.0%	75.0%	
	Hypertension with complications and secondary hypertension	4,262	24.9%	6.0	\$32,715	1.5%	81.2%	
	Acute myocardial infarction	1,662	9.7%	4.5	\$62,512	4.5%	70.4%	
	Coronary atherosclerosis and other heart disease	939	5.5%	5.1	\$65,709	0.6%	41.9%	
	Nonspecific chest pain	284	1.7%	2.2	\$16,203	0.0%	82.7%	
	Pulmonary heart disease	758	4.4%	4.7	\$28,112	3.4%	85.4%	
	Other and ill-defined heart disease	49	0.3%	5.0	\$67,868	2.0%	75.5%	
	Conduction disorders	247	1.4%	4.4	\$61,587	0.8%	70.9%	
	Cardiac dysrhythmias	1,929	11.3%	3.9	\$34,794	1.2%	69.7%	
	Cardiac arrest and ventricular fibrillation	143	0.8%	6.6	\$77,428	48.3%	69.9%	
	Congestive heart failure; nonhypertensive	561	3.3%	6.6	\$41,880	3.0%	83.8%	
	Acute cerebrovascular disease	2,639	15.4%	6.4	\$38,545	5.4%	83.7%	
	Occlusion or stenosis of precerebral arteries	362	2.1%	2.0	\$30,291	0.3%	9.7%	
	Other and ill-defined cerebrovascular disease	118	0.7%	5.0	\$73,632	0.0%	35.6%	
	Transient cerebral ischemia	326	1.9%	2.6	\$15,136	0.0%	86.5%	
	Late effects of cerebrovascular disease	520	3.0%	13.2	\$40,333	0.2%	16.9%	
	Peripheral and visceral atherosclerosis	379	2.2%	5.9	\$46,375	3.7%	55.4%	
	Aortic; peripheral; and visceral artery aneurysms	263	1.5%	6.2	\$104,350	5.7%	36.5%	
	Aortic and peripheral arterial embolism or thrombosis	72	0.4%	9.1	\$88,097	8.3%	68.1%	
	Other circulatory disease	389	2.3%	4.5	\$23,737	0.5%	86.1%	
	Phlebitis; thrombophlebitis and thromboembolism	296	1.7%	5.2	\$44,460	2.0%	80.4%	
Varicose veins of lower extremity	13	0.1%	5.8	\$41,340	0.0%	92.3%		
Hemorrhoids	67	0.4%	3.0	\$15,802	0.0%	83.6%		
Other diseases of veins and lymphatics	84	0.5%	6.1	\$48,519	3.6%	77.4%		
	Total	17,105	100.0%	5.6	\$44,836	2.9%	70.3%	
Diseases of the respiratory system	Pneumonia (except that caused by tuberculosis or STD)	3,039	25.4%	5.2	\$28,358	2.0%	83.3%	
	Influenza	658	5.5%	4.7	\$22,063	0.8%	85.1%	
	Acute and chronic tonsillitis	104	0.9%	2.5	\$19,762	0.0%	71.2%	
	Acute bronchitis	1,035	8.7%	3.1	\$24,945	0.1%	83.1%	
	Other upper respiratory infections	345	2.9%	3.0	\$26,629	0.3%	80.0%	
	Chronic obstructive pulmonary disease and bronchiectasis	2,314	19.3%	4.8	\$27,321	0.8%	85.9%	
	Asthma	927	7.7%	2.5	\$22,395	0.4%	88.1%	
	Aspiration pneumonitis; food/vomitus	657	5.5%	6.8	\$39,985	4.7%	62.7%	
	Pleurisy; pneumothorax; pulmonary collapse	374	3.1%	6.5	\$37,507	2.9%	69.3%	
	Respiratory failure; insufficiency; arrest (adult)	1,962	16.4%	10.0	\$92,997	8.8%	68.3%	
	Lung disease due to external agents	29	0.2%	6.5	\$34,577	0.0%	89.7%	
	Other lower respiratory disease	387	3.2%	4.4	\$28,252	1.3%	72.6%	
	Other upper respiratory disease	134	1.1%	5.9	\$47,290	0.7%	68.7%	
		Total	11,965	100.0%	5.5	\$38,677	2.6%	79.5%

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Clinical Classifications Software Categories and Chapter Headings		Number of Discharges	Percent of Discharges	Length of Stay	Mean Total Charges	Percent Expired	Percent Emergency Priority
Diseases of the digestive system	Intestinal infection	894	8.5%	5.0	\$25,800	1.0%	80.2%
	Disorders of teeth and jaw	87	0.8%	3.0	\$25,311	1.1%	51.7%
	Diseases of mouth; excluding dental	91	0.9%	5.2	\$23,079	0.0%	81.3%
	Esophageal disorders	349	3.3%	4.5	\$27,079	0.0%	74.5%
	Gastroduodenal ulcer (except hemorrhage)	112	1.1%	6.6	\$42,418	0.9%	80.4%
	Gastritis and duodenitis	250	2.4%	4.8	\$24,065	1.2%	85.6%
	Other disorders of stomach and duodenum	271	2.6%	7.0	\$36,417	0.4%	76.4%
	Appendicitis and other appendiceal conditions	441	4.2%	4.2	\$32,423	0.0%	74.1%
	Abdominal hernia	559	5.3%	5.4	\$43,358	0.9%	45.6%
	Regional enteritis and ulcerative colitis	342	3.3%	6.2	\$44,099	0.0%	73.7%
	Intestinal obstruction without hernia	1,124	10.7%	6.0	\$33,135	1.5%	80.2%
	Diverticulosis and diverticulitis	1,111	10.6%	5.2	\$29,714	0.5%	68.6%
	Anal and rectal conditions	129	1.2%	4.7	\$26,724	0.0%	66.7%
	Peritonitis and intestinal abscess	84	0.8%	7.0	\$43,531	3.6%	73.8%
	Biliary tract disease	929	8.8%	4.2	\$30,559	0.5%	72.7%
	Other liver diseases	473	4.5%	6.4	\$38,643	4.0%	82.7%
	Pancreatic disorders (not diabetes)	920	8.7%	5.1	\$28,073	0.5%	78.9%
	Gastrointestinal hemorrhage	1,221	11.6%	4.6	\$28,675	1.8%	83.3%
	Noninfectious gastroenteritis	335	3.2%	4.2	\$22,557	0.6%	81.8%
	Other gastrointestinal disorders	798	7.6%	6.2	\$38,457	0.5%	59.8%
Total	10,520	100.0%	5.2	\$31,767	1.0%	74.3%	
Diseases of the genitourinary system	Nephritis; nephrosis; renal sclerosis	57	1.1%	6.2	\$40,796	1.8%	71.9%
	Acute and unspecified renal failure	1,945	37.3%	6.0	\$26,644	2.4%	80.4%
	Chronic renal failure	40	0.8%	6.1	\$124,863	2.5%	25.0%
	Urinary tract infections	2,118	40.6%	5.1	\$19,844	0.2%	86.9%
	Calculus of urinary tract	124	2.4%	3.5	\$23,492	0.0%	66.9%
	Other diseases of kidney and ureters	288	5.5%	3.3	\$24,896	0.0%	71.5%
	Other diseases of bladder and urethra	47	0.9%	5.5	\$42,649	2.1%	38.3%
	Genitourinary symptoms and ill-defined conditions	88	1.7%	4.2	\$21,145	0.0%	84.1%
	Hyperplasia of prostate	59	1.1%	4.0	\$20,616	0.0%	52.5%
	Inflammatory conditions of male genital organs	101	1.9%	6.3	\$25,805	0.0%	89.1%
	Other male genital disorders	14	0.3%	4.9	\$33,969	0.0%	85.7%
	Nonmalignant breast conditions	49	0.9%	2.7	\$15,943	0.0%	59.2%
	Inflammatory diseases of female pelvic organs	68	1.3%	3.8	\$17,500	0.0%	89.7%
	Endometriosis	21	0.4%	2.8	\$24,047	0.0%	14.3%
	Prolapse of female genital organs	63	1.2%	1.6	\$14,064	1.6%	4.8%
	Menstrual disorders	33	0.6%	2.4	\$24,736	0.0%	42.4%
	Ovarian cyst	29	0.6%	2.0	\$19,179	0.0%	48.3%
	Menopausal disorders	15	0.3%	3.5	\$28,133	0.0%	46.7%
	Female infertility	0	0.0%	N/A	N/A	N/A	N/A
	Other female genital disorders	56	1.1%	5.4	\$38,241	0.0%	41.1%
Total	5,215	100.0%	5.2	\$24,299	1.1%	79.1%	
Complications of pregnancy, childbirth, & the puerperium	Contraceptive and procreative management	0	0.0%	N/A	N/A	N/A	N/A
	Spontaneous abortion	25	0.2%	2.7	\$15,074	0.0%	92.0%
	Induced abortion	2	0.0%	1.0	\$9,516	0.0%	0.0%
	Postabortion complications	1	0.0%	1.0	\$4,390	0.0%	100.0%
	Ectopic pregnancy	10	0.1%	1.9	\$17,503	0.0%	90.0%
	Other complications of pregnancy	1,317	11.6%	3.2	\$11,758	0.0%	37.3%
	Hemorrhage during pregnancy; abruptio placenta; placenta previa	166	1.5%	4.1	\$13,661	0.0%	51.2%
	Hypertension complicating pregnancy; childbirth and the puerperium	1,530	13.5%	3.5	\$13,024	0.0%	36.5%
	Early or threatened labor	403	3.6%	2.5	\$9,674	0.0%	66.0%
	Prolonged pregnancy	568	5.0%	2.9	\$10,285	0.0%	8.1%
	Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium	507	4.5%	3.0	\$11,141	0.0%	23.9%

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Clinical Classifications Software Categories and Chapter Headings		Number of Discharges	Percent of Discharges	Length of Stay	Mean Total Charges	Percent Expired	Percent Emergency Priority
	Malposition; malpresentation	309	2.7%	2.7	\$11,722	0.0%	21.4%
	Fetopelvic disproportion; obstruction	52	0.5%	2.7	\$11,838	0.0%	30.8%
	Previous C-section	1,304	11.5%	2.7	\$11,359	0.0%	17.0%
	Fetal distress and abnormal forces of labor	238	2.1%	2.3	\$9,022	0.0%	49.2%
	Polyhydramnios and other problems of amniotic cavity	1,037	9.2%	3.2	\$11,365	0.0%	50.1%
	Umbilical cord complication	408	3.6%	2.4	\$9,170	0.0%	38.7%
	OB-related trauma to perineum and vulva	595	5.3%	2.2	\$7,286	0.0%	44.9%
	Forceps delivery	1	0.0%	5.0	\$22,285	0.0%	0.0%
	Other complications of birth; puerperium affecting management of mother	2,547	22.5%	2.6	\$9,780	0.0%	45.5%
	Normal pregnancy and/or delivery	312	2.8%	2.1	\$8,376	0.0%	47.8%
Total	11,332	100.0%	2.8	\$10,788	0.0%	37.7%	
Diseases of the skin and subcutaneous tissue	Skin and subcutaneous tissue infections	1,759	86.6%	5.0	\$21,523	0.5%	82.6%
	Other inflammatory condition of skin	49	2.4%	4.1	\$18,227	0.0%	89.8%
	Chronic ulcer of skin	176	8.7%	14.5	\$60,078	1.1%	73.3%
	Other skin disorders	48	2.4%	6.6	\$28,133	0.0%	70.8%
	Total	2,032	100.0%	5.9	\$24,939	0.5%	81.7%
Diseases of the musculo-skeletal system and connective tissue	Infective arthritis and osteomyelitis (except that caused by tuberculosis or STD)	456	5.4%	11.6	\$57,621	0.7%	74.3%
	Rheumatoid arthritis and related disease	39	0.5%	4.7	\$35,960	5.1%	76.9%
	Osteoarthritis	4,161	49.6%	1.4	\$36,719	0.0%	0.4%
	Other non-traumatic joint disorders	139	1.7%	3.8	\$51,222	0.0%	32.4%
	Spondylosis; intervertebral disc disorders; other back problems	2,106	25.1%	3.7	\$67,181	0.3%	21.1%
	Osteoporosis	0	0.0%	N/A	N/A	N/A	N/A
	Pathological fracture	246	2.9%	6.7	\$47,775	0.8%	81.3%
	Acquired foot deformities	35	0.4%	7.9	\$89,457	0.0%	0.0%
	Other acquired deformities	342	4.1%	7.2	\$148,933	0.3%	3.5%
	Systemic lupus erythematosus and connective tissue disorders	111	1.3%	7.6	\$71,977	0.0%	80.2%
	Other connective tissue disease	535	6.4%	5.1	\$34,075	0.4%	67.1%
	Other bone disease and musculoskeletal deformities	218	2.6%	3.3	\$95,471	0.5%	13.3%
	Total	8,388	100.0%	3.3	\$52,685	0.2%	18.7%
Congenital anomalies	Cardiac and circulatory congenital anomalies	178	37.2%	20.1	\$436,349	1.7%	12.4%
	Digestive congenital anomalies	78	16.3%	14.4	\$267,733	1.3%	33.3%
	Genitourinary congenital anomalies	43	9.0%	4.2	\$54,038	0.0%	30.2%
	Nervous system congenital anomalies	32	6.7%	13.5	\$157,686	3.1%	25.0%
	Other congenital anomalies	147	30.8%	12.2	\$219,502	2.0%	13.6%
	Total	478	100.0%	14.9	289,100	1.7%	18.6%
Certain conditions originating in the perinatal period	Liveborn	10,586	94.5%	4.0	\$12,202	0.4%	0.0%
	Short gestation; low birth weight; and fetal growth retardation	54	0.5%	28.0	\$257,433	5.6%	5.6%
	Intrauterine hypoxia and birth asphyxia	20	0.2%	10.6	\$131,260	15.0%	5.0%
	Respiratory distress syndrome	37	0.3%	22.2	\$134,377	0.0%	2.7%
	Hemolytic jaundice and perinatal jaundice	179	1.6%	1.6	\$9,714	0.0%	31.8%
	Birth trauma	2	0.0%	4.5	\$57,554	0.0%	0.0%
	Other perinatal conditions	320	2.9%	17.1	\$228,776	1.9%	32.2%
	Total	11,198	100.0%	4.6	\$20,158	0.4%	1.5%
Injury and poisoning	Joint disorders and dislocations; trauma-related	58	0.6%	5.1	\$46,299	1.7%	62.1%
	Fracture of neck of femur (hip)	1,008	10.2%	6.1	\$47,092	1.3%	74.6%
	Spinal cord injury	46	0.5%	14.2	\$144,619	4.3%	63.0%
	Skull and face fractures	142	1.4%	5.0	\$41,020	4.2%	83.8%
	Fracture of upper limb	419	4.2%	3.8	\$38,302	0.7%	68.5%
	Fracture of lower limb	836	8.5%	6.0	\$52,760	1.0%	73.1%
	Other fractures	1,119	11.3%	5.9	\$32,999	1.4%	84.9%
	Sprains and strains	78	0.8%	3.7	\$26,366	0.0%	64.1%

APPENDIX A

Clinical Classifications Software Categories and Chapter Headings		Number of Discharges	Percent of Discharges	Length of Stay	Mean Total Charges	Percent Expired	Percent Emergency Priority
	Intracranial injury	833	8.4%	7.3	\$40,031	8.0%	86.6%
	Crushing injury or internal injury	371	3.8%	6.1	\$43,949	4.6%	87.3%
	Open wounds of head; neck; and trunk	97	1.0%	5.7	\$45,313	3.1%	93.8%
	Open wounds of extremities	105	1.1%	4.0	\$26,426	1.9%	88.6%
	Complication of device; implant or graft	1,970	19.9%	6.4	\$55,998	1.2%	52.4%
	Complications of surgical procedures or medical care	1,810	18.3%	7.2	\$46,613	1.3%	64.3%
	Superficial injury; contusion	120	1.2%	3.9	\$19,398	0.0%	81.7%
	Burns	13	0.1%	7.4	\$40,854	0.0%	76.9%
	Poisoning by psychotropic agents	63	0.6%	4.9	\$23,650	1.6%	84.1%
	Poisoning by other medications and drugs	356	3.6%	5.0	\$31,524	9.0%	88.5%
	Poisoning by nonmedicinal substances	82	0.8%	3.5	\$25,507	3.7%	92.7%
	Other injuries and conditions due to external causes	367	3.7%	6.8	\$39,251	1.9%	85.6%
	Total	9,893	100.0%	6.2	\$45,016	2.3%	72.0%
Other conditions	Syncope	296	21.8%	3.0	\$16,579	0.3%	84.5%
	Fever of unknown origin	82	6.0%	3.9	\$32,137	0.0%	73.2%
	Lymphadenitis	43	3.2%	3.1	\$25,764	0.0%	62.8%
	Gangrene	75	5.5%	10.0	\$69,482	1.3%	52.0%
	Shock	49	3.6%	5.2	\$51,154	30.6%	75.5%
	Nausea and vomiting	71	5.2%	3.1	\$15,237	0.0%	84.5%
	Abdominal pain	169	12.5%	3.5	\$15,580	0.0%	85.8%
	Malaise and fatigue	103	7.6%	6.2	\$21,624	1.0%	66.0%
	Allergic reactions	77	5.7%	3.4	\$16,069	0.0%	83.1%
	Rehabilitation care; fitting of prostheses; and adjustment of	18	1.3%	8.9	\$43,635	0.0%	0.0%
	Administrative/social admission	1	0.1%	2.0	\$5,439	0.0%	100.0%
	Medical examination/evaluation	2	0.1%	3.0	\$21,518	0.0%	0.0%
	Other aftercare	319	23.5%	6.6	\$33,150	5.6%	26.3%
	Other screening for suspected conditions (not mental disorders or infectious disease)	51	3.8%	4.2	\$25,681	2.0%	35.3%
	Total	1,356	100.0%	4.8	\$26,745	2.7%	62.9%
Total All CCS Diagnostic Codes		112,865	100.0%	5.2	\$35,238	1.7%	57.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

APPENDIX B

Clinical classification system for Ecodes:

Ecodes are supplementary classifications of external causes of injury and poisoning. They provide additional information regarding the nature of the condition, or to allow more detailed analysis of the external cause of the diagnosis. Ecodes were coded according to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM). These codes were then aggregated into broader diagnostic categories using the Clinical Classification System (CCS) developed by the Agency of Healthcare Research and Quality (AHRQ). The CCS classification system for Ecodes is used to categorize clinically similar diagnoses for ease in presentation and interpretation of hospital discharge data. A complete listing of CCS Ecodes and selected corresponding measures are presented below.

Table B1. Number and Percent of Discharges, Mean Length of Stay, Mean Charges, Percent Expired, and Percent with an Emergency Priority at Admission by Ecode Delaware Hospitals, 2019

Clinical Classifications Software Categories for Ecodes	Number of Discharges	Percent of Discharges	Mean LOS	Mean Total Charges	Percent Expired	Percent Emergency Admission
Cut or pierce	52	0.8%	3.2	\$17,035	0.0	100.0
Fall	1,016	15.3%	4.2	\$23,683	1.2	91.8
Fire burn	5	0.1%	5.0	\$15,591	0.0	100.0
Firearm	54	0.8%	3.1	\$21,674	7.4	94.4
Machinery	7	0.1%	6.3	\$29,912	0.0	85.7
Motor vehicle traffic MVT	374	5.6%	4.2	\$28,170	0.8	89.6
Pedal cyclist not MVT	27	0.4%	3.8	\$20,077	3.7	96.3
Pedestrian not MVT	13	0.2%	6.2	\$37,638	0.0	100.0
Transport not MVT	81	1.2%	5.1	\$31,598	N/A	90.1
Natural environment	103	1.6%	2.9	\$14,398	0.0	83.5
Overexertion	2	0.0%	1.0	\$19,977	0.0	100.0
Struck by or against	102	1.5%	3.4	\$15,671	0.0	92.2
Adverse effects of medical care	523	7.9%	3.6	\$34,395	0.4	40.5
Adverse effects of medical drugs	2,261	34.1%	5.1	\$37,280	0.4	64.3
Other specified and classifiable	14	0.2%	7.9	\$27,673	0.0	85.7
Other specified NEC	5	0.1%	1.4	\$16,677	0.0	80.0
Unspecified	1,178	17.8%	3.5	\$19,265	0.9	92.6
Place of occurrence	817	12.3%	3.4	\$21,526	1.3	94.9
Total	6,634	100.0%	4.2	\$28,141	0.8	78.7

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Table C1. Number of All-listed Procedures Performed during the Inpatient Stay by Procedure and Sex of Patient Delaware Hospitals, 2019

Single level CCS Procedure Categories and Chapter Headings		Male	Female	Total
Operations on the nervous system	Incision and excision of CNS	159	162	321
	Insertion; replacement; or removal of extracranial ventricular shunt	92	53	145
	Laminectomy; excision intervertebral disc	725	723	1,448
	Diagnostic spinal tap	389	405	794
	Insertion of catheter or spinal stimulator and injection into spinal canal	70	97	167
	Decompression peripheral nerve	582	577	1,159
	Other diagnostic nervous system procedures	106	86	192
	Other non-OR or closed therapeutic nervous system procedures	78	55	133
	Other OR therapeutic nervous system procedures	690	627	1,317
Total	2,891	2,785	5,676	
Operations on the endocrine system	Thyroidectomy; partial or complete	29	34	63
	Diagnostic endocrine procedures	11	16	27
	Other therapeutic endocrine procedures	55	61	116
	Total	95	111	206
Operations on the eye	Corneal transplant	0	0	0
	Glaucoma procedures	1	1	2
	Lens and cataract procedures	3	2	5
	Repair of retinal tear; detachment	5	2	7
	Destruction of lesion of retina and choroid	5	2	7
	Diagnostic procedures on eye	16	11	27
	Other therapeutic procedures on eyelids; conjunctiva; cornea	37	24	61
	Other intraocular therapeutic procedures	6	2	8
	Other extraocular muscle and orbit therapeutic procedures	6	2	8
Total	79	46	125	
Operations on the ear	Tympanoplasty	0	3	3
	Myringotomy	43	30	73
	Mastoidectomy	3	4	7
	Diagnostic procedures on ear	32	32	64
	Other therapeutic ear procedures	99	96	195
	Total	177	165	342
Operations on the nose, mouth, and pharynx	Control of epistaxis	15	22	37
	Plastic procedures on nose	1	0	1
	Dental procedures	105	108	213
	Tonsillectomy and/or adenoidectomy	44	12	56
	Diagnostic procedures on nose; mouth and pharynx	187	131	318
	Other non-OR therapeutic procedures on nose; mouth and pharynx	125	144	269
	Other OR therapeutic procedures on nose; mouth and pharynx	118	97	215
Total	595	514	1,109	
Operations on the respiratory system	Tracheostomy; temporary and permanent	196	137	333
	Tracheoscopy and laryngoscopy with biopsy	32	10	42
	Lobectomy or pneumonectomy	138	137	275
	Diagnostic bronchoscopy and biopsy of bronchus	605	554	1,159
	Other diagnostic procedures on lung and bronchus	8	3	11
	Incision of pleura; thoracentesis; chest drainage	938	761	1,699
	Other diagnostic procedures of respiratory tract and mediastinum	63	41	104
	Other non-OR therapeutic procedures on respiratory system	271	198	469
	Other OR Rx procedures on respiratory system and mediastinum	264	350	614
	Total	2,515	2,191	4,706
Operations on the cardiovascular system	Heart valve procedures	264	246	510
	Coronary artery bypass graft (CABG)	828	265	1,093
	Percutaneous transluminal coronary angioplasty (PTCA)	981	436	1,417
	Coronary thrombolysis	4	1	5
	Diagnostic cardiac catheterization; coronary arteriography	3,668	2,327	5,995
	Insertion; revision; replacement; removal of cardiac pacemaker or cardioverter/defibrillator	1,088	783	1,871
	Other OR heart procedures	425	302	727
Extracorporeal circulation auxiliary to open heart procedures	488	259	747	

APPENDIX C

Single level CCS Procedure Categories and Chapter Headings		Male	Female	Total
	Endarterectomy; vessel of head and neck	311	226	537
	Aortic resection; replacement or anastomosis	6	7	13
	Varicose vein stripping; lower limb	0	0	0
	Other vascular catheterization; not heart	2,907	2,791	5,698
	Peripheral vascular bypass	178	87	265
	Other vascular bypass and shunt; not heart	19	13	32
	Creation; revision and removal of arteriovenous fistula or vessel-to-vessel cannula for dialysis	0	0	0
	Hemodialysis	1,383	1,004	2,387
	Other OR procedures on vessels of head and neck	290	276	566
	Embolectomy and endarterectomy of lower limbs	299	209	508
	Other OR procedures on vessels other than head and neck	1,829	1,206	3,035
	Other diagnostic cardiovascular procedures	545	452	997
	Other non-OR therapeutic cardiovascular procedures	624	524	1,148
	Total	16,137	11,414	27,551
Operations on the hemic and lymphatic system	Bone marrow transplant	20	13	33
	Bone marrow biopsy	97	100	197
	Procedures on spleen	34	25	59
	Other therapeutic procedures; hemic and lymphatic system	616	668	1,284
	Total	767	806	1,573
Operations on the digestive system	Injection or ligation of esophageal varices	0	0	0
	Esophageal dilatation	54	62	116
	Upper gastrointestinal endoscopy; biopsy	1,716	1,849	3,565
	Gastrostomy; temporary and permanent	241	159	400
	Colostomy; temporary and permanent	102	127	229
	Ileostomy and other enterostomy	93	91	184
	Gastrectomy; partial and total	185	505	690
	Small bowel resection	13	18	31
	Colonoscopy and biopsy	351	371	722
	Proctoscopy and anorectal biopsy	92	92	184
	Colorectal resection	377	420	797
	Local excision of large intestine lesion (not endoscopic)	148	190	338
	Appendectomy	259	233	492
	Hemorrhoid procedures	4	3	7
	Endoscopic retrograde cannulation of pancreas (ERCP)	31	46	77
	Biopsy of liver	110	103	213
	Cholecystectomy and common duct exploration	290	431	721
	Inguinal and femoral hernia repair	75	37	112
	Other hernia repair	140	207	347
	Laparoscopy (GI only)	93	137	230
	Abdominal paracentesis	505	457	962
	Exploratory laparotomy	15	11	26
	Excision; lysis peritoneal adhesions	326	604	930
	Peritoneal dialysis	82	66	148
	Other bowel diagnostic procedures	354	408	762
	Other non-OR upper GI therapeutic procedures	305	288	593
	Other OR upper GI therapeutic procedures	268	489	757
	Other non-OR lower GI therapeutic procedures	291	333	624
	Other OR lower GI therapeutic procedures	623	854	1,477
	Other gastrointestinal diagnostic procedures	329	354	683
	Other non-OR gastrointestinal therapeutic procedures	844	796	1,640
	Other OR gastrointestinal therapeutic procedures	502	631	1,133
	Total	8,818	10,372	19,190
Operations on the urinary system	Endoscopy and endoscopic biopsy of the urinary tract	84	66	150
	Transurethral excision; drainage; or removal urinary obstruction	206	117	323
	Ureteral catheterization	23	21	44
	Nephrotomy and nephrostomy	16	22	38

APPENDIX C

Single level CCS Procedure Categories and Chapter Headings		Male	Female	Total
	Nephrectomy; partial or complete	111	82	193
	Kidney transplant	17	13	30
	Genitourinary incontinence procedures	0	0	0
	Extracorporeal lithotripsy; urinary	6	14	20
	Indwelling catheter	143	42	185
	Procedures on the urethra	76	31	107
	Other diagnostic procedures of urinary tract	63	54	117
	Other non-OR therapeutic procedures of urinary tract	247	246	493
	Other OR therapeutic procedures of urinary tract	425	580	1,005
	Total	1,417	1,288	2,705
Operations on the male genital organs	Transurethral resection of prostate (TURP)	50	0	50
	Open prostatectomy	110	0	110
	Circumcision	4,043	0	4,043
	Diagnostic procedures; male genital	28	0	28
	Other non-OR therapeutic procedures; male genital	50	0	50
	Other OR therapeutic procedures; male genital	111	0	111
	Total	4,392	0	4,392
Operations on the female genital organs	Oophorectomy; unilateral and bilateral	0	346	346
	Other operations on ovary	0	71	71
	Ligation or occlusion of fallopian tubes	0	28	28
	Other operations on fallopian tubes	0	1,096	1,096
	Hysterectomy; abdominal and vaginal	0	405	405
	Other excision of cervix and uterus	0	310	310
	Abortion (termination of pregnancy)	0	2	2
	Dilatation and curettage (D&C); aspiration after delivery or abortion	0	41	41
	Diagnostic dilatation and curettage (D&C)	0	17	17
	Repair of cystocele and rectocele; obliteration of vaginal vault	0	10	10
	Other diagnostic procedures; female organs	0	58	58
	Other non-OR therapeutic procedures; female organs	0	3,476	3,476
	Other OR therapeutic procedures; female organs	0	283	283
	Total	0	6,143	6,143
Obstetrical procedures	Removal of ectopic pregnancy	0	7	7
	Episiotomy	0	175	175
	Cesarean section	0	3,289	3,289
	Forceps; vacuum; and breech delivery	0	382	382
	Artificial rupture of membranes to assist delivery	0	2,609	2,609
	Other procedures to assist delivery	0	6,829	6,829
	Diagnostic amniocentesis	0	2	2
	Fetal monitoring	0	149	149
	Repair of current obstetric laceration	0	0	0
	Other therapeutic obstetrical procedures	0	259	259
	Total	0	13,701	13,701
Operations on the musculoskeletal system	Partial excision bone	506	383	889
	Bunionectomy or repair of toe deformities	0	0	0
	Treatment; facial fracture or dislocation	73	44	117
	Treatment; fracture or dislocation of radius and ulna	116	164	280
	Treatment; fracture or dislocation of hip and femur	525	827	1,352
	Treatment; fracture or dislocation of lower extremity (other than hip or femur)	608	662	1,270
	Other fracture and dislocation procedure	413	406	819
	Arthroscopy	0	1	1
	Division of joint capsule; ligament or cartilage	13	33	46
	Excision of semilunar cartilage of knee	0	0	0
	Arthroplasty knee	1,048	1,693	2,741
	Hip replacement; total and partial	932	1,190	2,122

APPENDIX C

Single level CCS Procedure Categories and Chapter Headings		Male	Female	Total
	Arthroplasty other than hip or knee	229	318	547
	Arthrocentesis	81	81	162
	Injections and aspirations of muscles; tendons; bursa; joints and soft tissue	157	318	475
	Amputation of lower extremity	791	308	1,099
	Spinal fusion	1,869	1,892	3,761
	Other diagnostic procedures on musculoskeletal system	434	365	799
	Other therapeutic procedures on muscles and tendons	835	2,471	3,306
	Other OR therapeutic procedures on bone	370	383	753
	Other OR therapeutic procedures on joints	901	898	1,799
	Other non-OR therapeutic procedures on musculoskeletal system	105	108	213
	Other OR therapeutic procedures on musculoskeletal system	110	66	176
	Total	10,116	12,611	22,727
Operations on the integumentary system	Breast biopsy and other diagnostic procedures on breast	0	20	20
	Lumpectomy; quadrantectomy of breast	0	29	29
	Mastectomy	1	36	37
	Incision and drainage; skin and subcutaneous tissue	386	315	701
	Debridement of wound; infection or burn	0	0	0
	Excision of skin lesion	84	84	168
	Suture of skin and subcutaneous tissue	365	1,681	2,046
	Skin graft	68	40	108
	Other diagnostic procedures on skin and subcutaneous tissue	146	158	304
	Other non-OR therapeutic procedures on skin and breast	1,215	1,503	2,718
	Other OR therapeutic procedures on skin and breast	562	633	1,195
	Total	2,827	4,499	7,326
Miscellaneous diagnostic and therapeutic procedures	Other organ transplantation	1	8	9
	Computerized axial tomography (CT) scan head	3	7	10
	CT scan chest	1	1	2
	CT scan abdomen	2	0	2
	Other CT scan	6	3	9
	Myelogram	20	23	43
	Mammography	0	0	0
	Routine chest X-ray	0	0	0
	Intraoperative cholangiogram	3	3	6
	Upper gastrointestinal X-ray	24	19	43
	Lower gastrointestinal X-ray	4	0	4
	Intravenous pyelogram	54	94	148
	Cerebral arteriogram	235	248	483
	Contrast aortogram	106	91	197
	Contrast arteriogram of femoral and lower extremity arteries	124	110	234
	Arterio- or venogram (not heart and head)	370	350	720
	Diagnostic ultrasound of head and neck	45	42	87
	Diagnostic ultrasound of heart (echocardiogram)	369	224	593
	Diagnostic ultrasound of gastrointestinal tract	6	1	7
	Diagnostic ultrasound of urinary tract	2	4	6
	Diagnostic ultrasound of abdomen or retroperitoneum	6	2	8
	Other diagnostic ultrasound	216	194	410
	Magnetic resonance imaging	134	120	254
	Electroencephalogram (EEG)	91	102	193
	Nonoperative urinary system measurements	4	4	8
	Cardiac stress tests	2	0	2
Electrocardiogram	106	38	144	

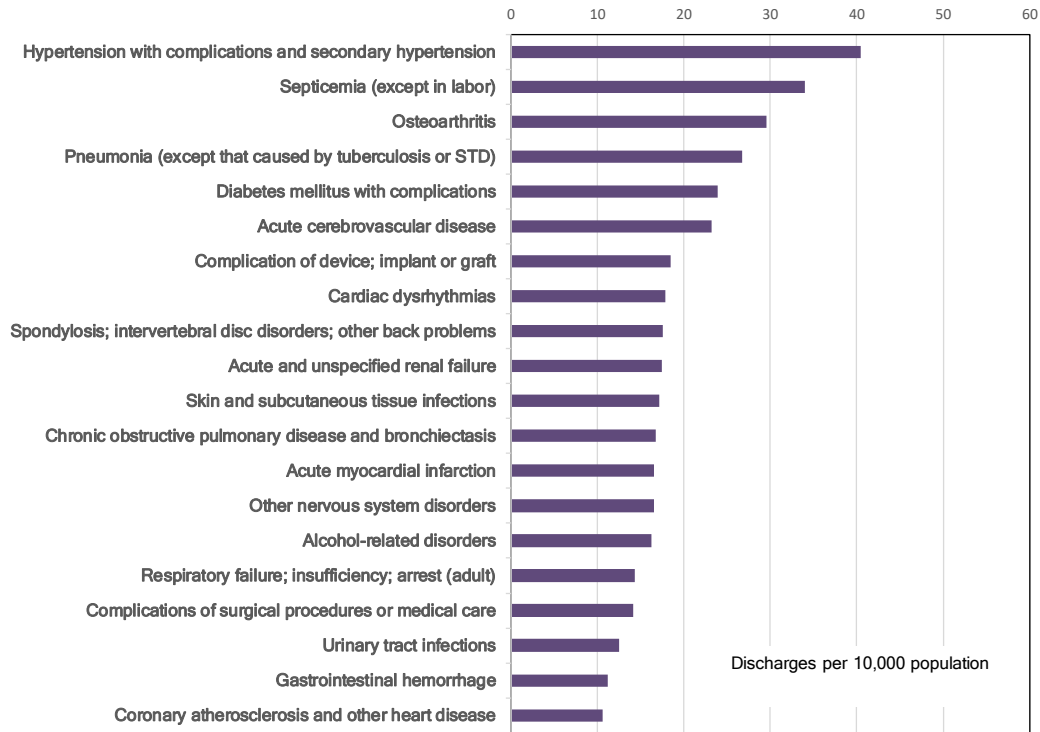
APPENDIX C

Single level CCS Procedure Categories and Chapter Headings	Male	Female	Total
Electrographic cardiac monitoring	13	5	18
Swan-Ganz catheterization for monitoring	78	36	114
Arterial blood gases	0	0	0
Radioisotope scan and function studies	0	0	0
Nuclear medicine imaging bone	0	0	0
Other radioisotope scan	3	0	3
Other nuclear medicine imaging	0	0	0
Therapeutic radiology for cancer treatment	1	6	7
Diagnostic physical therapy	2	1	3
Physical therapy exercises; manipulation; and other procedures	2	5	7
Traction; splints; and other wound care	142	127	269
Other physical therapy and rehabilitation	0	0	0
Respiratory intubation and mechanical ventilation	5,209	4,686	9,895
Other respiratory therapy	96	151	247
Psychological and psychiatric evaluation and therapy	22	36	58
Alcohol and drug rehabilitation/detoxification	21	6	27
Ophthalmologic and otologic diagnosis and treatment	4	4	8
Nasogastric tube	66	44	110
Blood transfusion	1,419	1,362	2,781
Enteral and parenteral nutrition	429	446	875
Cancer chemotherapy	185	176	361
Conversion of cardiac rhythm	544	345	889
Other diagnostic radiology and related techniques	185	184	369
Other diagnostic procedures (interview; evaluation; consultation)	306	222	528
Prophylactic vaccinations and inoculations	781	761	1,542
Nonoperative removal of foreign body	123	106	229
Other therapeutic procedures	1,069	3,802	4,871
Total	12,634	14,199	26,833

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

APPENDIX D

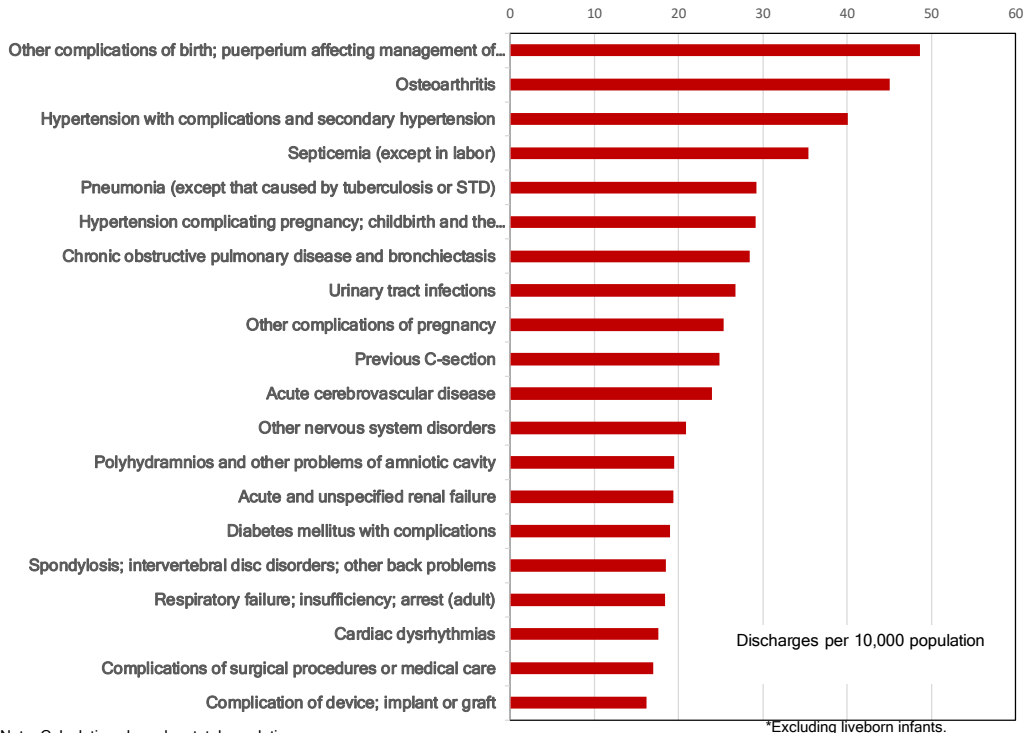
Figure D1. Annual Hospitalization Rates for the 20 Most Frequent Diagnoses* of Male Residents, Delaware, 2019



Note: Calculations based on total population.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Figure D2. Annual Hospitalization Rates for the 20 Most Frequent Diagnoses* of Female Residents, Delaware, 2019



Note: Calculations based on total population.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

APPENDIX E

Table E1. Number and Percentage of Conditions with the 10 Highest Total Charges, Delaware Hospitals, 2019

Rank	CCS Principal Diagnoses	Total Billed Charges	% of Total Charges	Number of Discharges
1	Septicemia (except in labor)	\$233,001,939	5.7%	3,671
2	Respiratory failure; insufficiency; arrest (adult)	\$182,459,200	4.5%	1,962
3	Osteoarthritis	\$152,786,813	3.7%	4,161
4	Spondylosis; intervertebral disc disorders; other back problems	\$141,483,404	3.5%	2,106
5	Hypertension with complications and secondary hypertension	\$139,430,627	3.4%	4,262
6	Liveborn	\$129,169,622	3.2%	10,586
7	Complication of device; implant or graft	\$110,315,683	2.7%	1,970
8	Acute myocardial infarction	\$103,895,668	2.5%	1,662
9	Acute cerebrovascular disease	\$101,720,629	2.5%	2,639
10	Pneumonia (except that caused by tuberculosis or STD)	\$86,181,359	2.1%	3,039
Total for 10 most expensive conditions		\$1,380,444,945	33.7%	36,058
Total aggregate charges for all discharges		\$4,090,377,269	100.0%	112,751

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Table E2. Number and Percentage of Discharges with Highest Mean Charges, Delaware Hospitals, 2019

CCS Principal Diagnoses	Number Discharges			% of Total Discharges			Mean Charges		
	2009	2014	2019	2009	2014	2019	2009	2014	2019
TOTAL All Discharges	113,101	111,341	112,751	100.0%	100.0%	100.0%	\$22,571	\$26,960	\$36,278
Cardiac and circulatory congenital anomalies	222	196	178	0.2%	0.2%	0.2%	\$194,041	\$401,082	\$436,349
Digestive congenital anomalies	126	107	78	0.1%	0.1%	0.1%	\$69,963	\$150,325	\$267,733
Short gestation; low birth weight; and fetal	78	42	54	0.1%	0.0%	0.0%	\$73,243	\$139,647	\$257,433
Other perinatal conditions	358	308	320	0.3%	0.3%	0.3%	\$76,297	\$89,170	\$228,776
Other congenital anomalies	224	232	147	0.2%	0.2%	0.1%	\$78,207	\$110,953	\$219,502
Cystic fibrosis	49	34	45	0.0%	0.0%	0.0%	\$65,559	\$91,486	\$169,752
Encephalitis (except that caused by	25	28	37	0.0%	0.0%	0.0%	\$49,049	\$73,846	\$160,192
Nervous system congenital anomalies	51	44	32	0.0%	0.0%	0.0%	\$45,905	\$72,889	\$157,686
Other acquired deformities	257	243	342	0.2%	0.2%	0.3%	\$84,878	\$67,450	\$148,933
Heart valve disorders	327	343	427	0.3%	0.3%	0.4%	\$76,516	\$90,053	\$145,106

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Table E3. Number, Percentage and Mean Charges for the Highest Volume of Hospital Discharges, Delaware, 2019

CCS Principal Diagnoses	Number Discharges			% of Total Discharges			Mean Charges		
	2009	2014	2019	2009	2014	2019	2009	2014	2019
TOTAL All Discharges	113,101	111,341	112,751	100.0%	100.0%	100.0%	\$22,571	\$26,960	\$36,278
Liveborn	11,759	11,217	10,586	10.4%	10.1%	9.4%	\$6,660	\$8,335	\$12,202
Hypertension with complications and secondary hypertension	694	586	4,262	0.6%	0.5%	3.8%	\$23,935	\$24,483	\$32,715
Osteoarthritis	3,039	3,658	4,161	2.7%	3.3%	3.7%	\$31,630	\$37,611	\$36,719
Septicemia (except in labor)	2,345	4,194	3,671	2.1%	3.8%	3.3%	\$41,938	\$44,311	\$63,471
Pneumonia (except that caused by tuberculosis or STD)	3,505	2,999	3,039	3.1%	2.7%	2.7%	\$21,542	\$23,937	\$28,358
Acute cerebrovascular disease	1,744	2,286	2,639	1.5%	2.1%	2.3%	\$29,369	\$32,073	\$38,545
Other complications of birth; puerperium affecting	1,748	1,739	2,547	1.5%	1.6%	2.3%	\$9,200	\$8,659	\$9,780
Diabetes mellitus with complications	1,587	1,780	2,366	1.4%	1.6%	2.1%	\$19,768	\$22,861	\$35,312
Chronic obstructive pulmonary disease and bronchiectasis	1,940	2,028	2,314	1.7%	1.8%	2.1%	\$16,391	\$16,281	\$27,321
Urinary tract infections	1,739	1,670	2,118	1.5%	1.5%	1.9%	\$14,768	\$14,624	\$19,844

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

2019 Delaware Hospitalizations

Table F1. Number and Percentage of Top 10 Most Frequent Diagnoses for Medicare, Delaware Hospitals, 2019

<i>CCS Diagnosis</i>	<i>Number of Discharges</i>	<i>Percent of hospitalizations for this condition billed to Medicare</i>
Hypertension with complications and secondary hypertension	3,268	6.5%
Osteoarthritis	2,604	5.2%
Septicemia (except in labor)	2,396	4.8%
Pneumonia (except that caused by tuberculosis or STD)	1,955	3.9%
Acute cerebrovascular disease	1,802	3.6%
Chronic obstructive pulmonary disease and bronchiectasis	1,705	3.4%
Urinary tract infections	1,499	3.0%
Acute and unspecified renal failure	1,437	2.9%
Cardiac dysrhythmias	1,411	2.8%
Other nervous system disorders	1,369	2.7%

Table F2. Number and Percentage of Top 10 Most Frequent Diagnoses for Medicaid, Delaware Hospitals, 2019

<i>CCS Diagnosis</i>	<i>Number of Discharges</i>	<i>Percent of hospitalizations for this condition billed to Medicaid</i>
Liveborn	4,872	18.3%
Other complications of birth; puerperium affecting management of mother	1,153	4.3%
Diabetes mellitus with complications	710	2.7%
Alcohol-related disorders	687	2.6%
Other complications of pregnancy	608	2.3%
Previous C-section	605	2.3%
Hypertension complicating pregnancy; childbirth and the puerperium	596	2.2%
Septicemia (except in labor)	586	2.2%
Acute bronchitis	539	2.0%
Asthma	518	1.9%

Table F3. Number and Percentage of Top 10 Most Frequent Diagnoses for Privately Insured, Delaware Hospitals, 2019

<i>CCS Diagnosis</i>	<i>Number of Discharges</i>	<i>Percent of hospitalizations for this condition billed to Private Insurers</i>
Liveborn	5,139	16.6%
Other complications of birth; puerperium affecting management of mother	1,283	4.1%
Osteoarthritis	1,223	4.0%
Hypertension complicating pregnancy; childbirth and the puerperium	860	2.8%
Previous C-section	640	2.1%
Other complications of pregnancy	625	2.0%
Spondylosis; intervertebral disc disorders; other back problems	598	1.9%
Other nutritional; endocrine; and metabolic disorders	557	1.8%
Septicemia (except in labor)	552	1.8%
Polyhydramnios and other problems of amniotic cavity	534	1.7%

Table F4. Number and Percentage of Top 10 Most Frequent Diagnoses for Uninsured, Delaware Hospitals, 2019

<i>CCS Diagnosis</i>	<i>Number of Discharges</i>	<i>Percent of hospitalizations for this condition billed to Uninsured Patients</i>
Liveborn	265	11.3%
Diabetes mellitus with complications	106	4.5%
Alcohol-related disorders	98	4.2%
Hypertension with complications and secondary hypertension	84	3.6%
Acute cerebrovascular disease	79	3.4%
Septicemia (except in labor)	66	2.8%
Skin and subcutaneous tissue infections	56	2.4%
Acute myocardial infarction	51	2.2%
Pancreatic disorders (not diabetes)	48	2.0%
Biliary tract disease	46	2.0%

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Table G1. Conditions with the Highest Number of In-Hospital Deaths by Age Group¹, Delaware Hospitals, 2019

Diagnosis	Age Group in Years				TOTAL
	0-17	18-44	45-64	65+	
Septicemia (except in labor)	2	22	97	260	382
Respiratory failure; insufficiency; arrest (adult)	6	5	36	125	173
Acute cerebrovascular disease	0	9	37	97	143
Acute myocardial infarction	0	2	19	53	74
Cardiac arrest and ventricular fibrillation	0	8	21	40	69
Intracranial injury	4	15	10	38	67
Hypertension with complications and secondary hypertension	0	1	13	51	65
Pneumonia (except that caused by tuberculosis or STD)	0	2	12	48	62
Acute and unspecified renal failure	0	0	7	40	47
Liveborn	0	0	0	0	38
Poisoning by other medications and drugs	0	17	13	2	32
Aspiration pneumonitis; food/vomitus	0	0	4	27	31
Pulmonary heart disease	0	5	6	15	26
Complication of device; implant or graft	2	0	5	17	24
Other nervous system disorders	1	2	5	14	22
Substance-related disorders	0	14	8	0	22
Other liver diseases	0	0	10	9	19
Crushing injury or internal injury	1	5	3	8	17
Other nutritional; endocrine; and metabolic disorders	0	0	1	7	9
Peri-; endo-; and myocarditis; cardiomyopathy (except that	1	1	5	2	9
Other perinatal conditions	0	0	0	0	6
Cancer of brain and nervous system	1	0	2	2	5
Deficiency and other anemia	1	1	0	3	5
Asthma	1	1	1	1	4
Cardiac and circulatory congenital anomalies	0	0	1	0	3
Intrauterine hypoxia and birth asphyxia	0	0	0	0	3
Other congenital anomalies	0	0	0	0	3
Short gestation; low birth weight; and fetal growth retardation	0	0	0	0	3
Digestive congenital anomalies	0	0	0	0	1
Nervous system congenital anomalies	0	0	0	0	1
All Discharges to Death	22	148	460	1,281	1,971

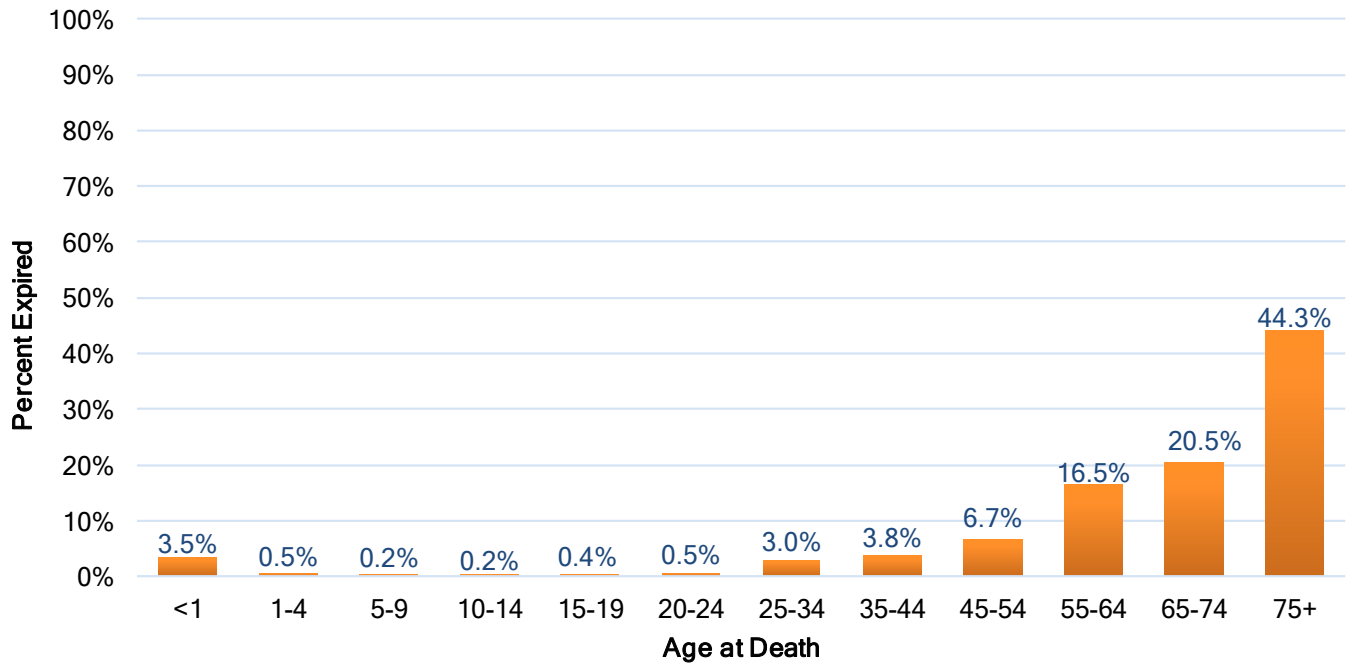
Notes:

1. Diagnoses selected by taking the top ten diagnoses for each age group.

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

APPENDIX H

Figure H1. Percentage of Patients who Died while Hospitalized by Age Group, Delaware Hospitals, 2019



Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

Table I1. Number of Discharges by ZIP Code and Delaware Hospital, 2019

ZIP CODE	A I DUPONT HOSPITAL	BAYHEALTH MEDICAL CENTER	BEEBE MEDICAL CENTER	CHRISTIANA CARE HEALTH SYSTEM	NANTICOKE MEMORIAL HOSPITAL	SAINT FRANCIS HOSPITAL	SELECT MEDICAL WILIMINGTON
19701	195	33	*	3,250	*	113	*
19702	317	31	*	4,332	*	222	12
19703	100	*	*	1,116	*	228	*
19706	*	*	*	*	*	*	*
19707	52	*	*	1,131	*	81	*
19708	*	*	*	*	*	*	*
19709	213	124	11	3,291	*	54	*
19710	*	*	*	*	*	*	*
19711	141	13	*	3,389	*	144	*
19712	*	*	*	11	*	*	*
19713	183	*	*	3,587	*	101	*
19714	*	*	*	37	*	*	*
19715	*	*	*	*	*	*	*
19716	*	*	*	*	*	*	*
19717	*	*	*	*	*	*	*
19718	*	*	*	*	*	*	*
19719	*	*	*	*	*	*	*
19720	394	30	*	5,673	*	578	20
19721	*	*	*	*	*	*	*
19728	*	*	*	*	*	*	*
19730	*	*	*	*	*	*	*
19731	*	*	*	*	*	*	*
19732	*	*	*	*	*	*	*
19733	*	*	*	*	*	*	*
19734	64	127	*	886	*	14	*
19736	*	*	*	*	*	*	*
19801	176	*	*	1,993	*	420	*
19802	271	*	*	2,650	*	524	13
19803	63	*	*	1,867	*	191	*
19804	93	*	*	1,826	*	219	*
19805	443	*	10	3,547	*	1,344	13
19806	26	*	*	986	*	327	*
19807	25	*	*	522	*	56	*

APPENDIX I

ZIP CODE	A I DUPONT HOSPITAL	BAYHEALTH MEDICAL CENTER	BEEBE MEDICAL CENTER	CHRISTIANA CARE HEALTH SYSTEM	NANTICOKE MEMORIAL HOSPITAL	SAINTE FRANCIS HOSPITAL	SELECT MEDICAL WILMINGTON
19808	160	11	*	3,465	*	214	*
19809	88	*	*	1,130	*	176	*
19810	111	*	*	1,747	*	236	*
19850	*	*	*	20	*	*	*
19899	*	*	*	29	*	*	*
19901	144	3,709	31	429	15	19	14
19902	*	*	*	*	*	*	*
19903	*	49	*	*	*	*	*
19904	133	3,349	23	494	24	18	*
19906	*	*	*	*	*	*	*
19930	*	*	*	*	*	*	*
19931	*	*	*	*	*	*	*
19933	46	141	72	113	637	*	*
19934	58	1,176	13	139	*	10	*
19936	*	*	*	*	*	*	*
19937	*	*	*	*	*	*	*
19938	33	559	*	324	*	*	*
19939	18	33	344	42	47	*	*
19940	16	13	14	23	215	*	*
19941	10	247	64	18	38	*	*
19943	46	1,241	31	136	20	*	*
19944	*	*	*	*	*	*	*
19945	19	32	419	57	61	*	*
19946	*	461	*	45	*	*	*
19947	68	343	836	127	633	*	*
19950	23	447	71	72	209	*	*
19951	*	*	*	*	*	*	*
19952	52	1,055	37	100	38	*	*
19953	18	416	*	70	*	*	*
19954	*	*	*	*	*	*	*
19955	*	*	*	*	*	*	*
19956	68	109	101	133	1,011	*	*
19958	28	232	2,183	268	49	*	*
19960	36	560	117	62	38	*	*
19961	*	*	*	*	*	*	*
19962	39	1,124	12	113	10	*	*
19963	55	2,092	189	155	64	*	*

APPENDIX I

ZIP CODE	A I DUPONT HOSPITAL	BAYHEALTH MEDICAL CENTER	BEEBE MEDICAL CENTER	CHRISTIANA CARE HEALTH SYSTEM	NANTICOKE MEMORIAL HOSPITAL	SAINT FRANCIS HOSPITAL	SELECT MEDICAL WILIMINGTON
19964	*	*	*	*	*	*	*
19966	68	295	2,648	284	339	*	*
19967	*	*	*	*	*	*	*
19968	42	384	879	136	23	*	*
19969	*	*	20	*	*	*	*
19970	17	25	522	57	12	*	*
19971	22	93	1,134	124	12	*	*
19973	127	200	174	218	2,159	*	*
19975	15	21	263	37	41	*	*
19977	88	1,493	14	952	10	22	*
19979	*	*	*	*	*	*	*
19980	*	20	*	*	*	*	*
MD	413	469	205	3,621	395	106	42
NJ	772	29	27	1,718	*	43	15
Other State	176	147	178	355	31	29	*
PA	2,431	67	158	2,327	*	114	14
Unknown	*	*	*	49	*	*	*
Total	8,237	21,603	11,343	59,829	6,194	5,683	270

*Zip codes with less than 10 cases

Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

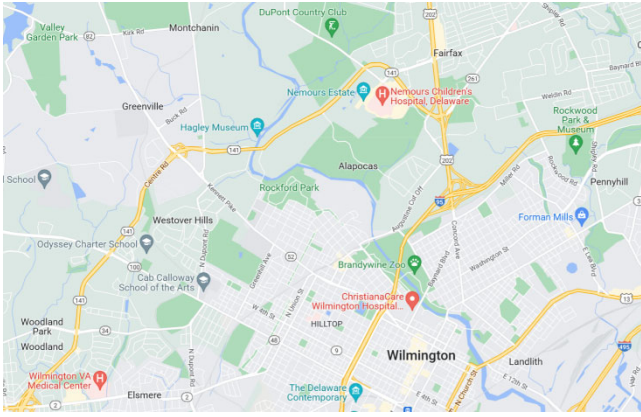
Table J1. Selected Accident Events, Delaware Hospitals, 2019

Selected Accident Events, 2019	
	Number
Adverse effect of antineoplastic and immunosup drugs, init	385
Adverse effect of glucocort/synth analog, init	330
Other external cause status	328
Prosth/oth implnt/mtrls orthopedic devices assoc w incdt	253
Unspecified fall, initial encounter	220
Nosocomial condition	143
Adverse effect of anticoagulants, initial encounter	132
Fall same lev from slip/trip w/o strike against object, init	126
Advrs eff of crbnc-anhydr inhibtr, benzo/oth diuretc, init	123
Adverse effect of other opioids, initial encounter	112
Other fall on same level, initial encounter	94
Adverse effect of other systemic antibiotics, init encntr	83
Fall on same level, unspecified, initial encounter	81
Blood alcohol level of 240 mg/100 ml or more	78
Fall (on) (from) unspecified stairs and steps, init encntr	77
Activity, walking, marching and hiking	77
Prosth/oth implnt/mtrls cardiovascular devices assoc w incdt	63
Fall (on) (from) other stairs and steps, initial encounter	58
Fall on and from ladder, initial encounter	58
Adverse effect of angiotens-convert-enzyme inhibitors, init	54
Adverse effect of beta-adrenoreceptor antagonists, init	53
Unspecified external cause status	51
Car driver injured in collision w car in traf, init	50
Adverse effect of nonsteroidal anti-inflammatory drugs, init	49
Adverse effect of antiepileptic and sed-hypntc drugs, init	46
Adverse effect of loop diuretics, initial encounter	46
Adverse effect of cephalospor/oth beta-lactm antibiot, init	44
Car driver injured in clsn with statnry object in traf, init	42
Adverse effect of benzodiazepines, initial encounter	42
Adverse effect of penicillins, initial encounter	38
Adverse effect of unspecified narcotics, initial encounter	37
Adverse effect of diagnostic agents, initial encounter	35
Drug induced fever	34
Blood alcohol level of 120-199 mg/100 ml	34
Driver injured in collision w unsp mv in traf, init	30
Prosth/oth implnt/mtrls gastroent and urol dev assoc w incdt	30
Adverse effect of oth antipsychotics and neuroleptics, init	30
Adverse effect of unsp systemic antibiotic, init encntr	30
Adverse effect of antiasthmatics, initial encounter	29
Other fall from one level to another, initial encounter	28
Adverse effect of insulin and oral hypoglycemic drugs, init	28
Fall same lev from slip/trip w strike agnst oth object, init	27
Blood alcohol level of less than 20 mg/100 ml	26
Adverse effect of drug/meds/biol subst, init	24
Adverse effect of other antihypertensive drugs, init encntr	24

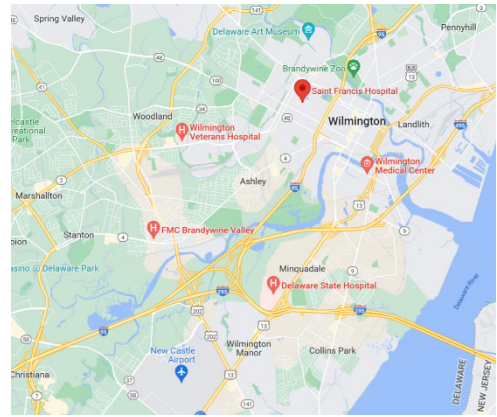
Source: Delaware Department of Health and Social Services, Division of Public Health, Delaware Health Statistics Center

HOSPITAL LOCATION MAPS

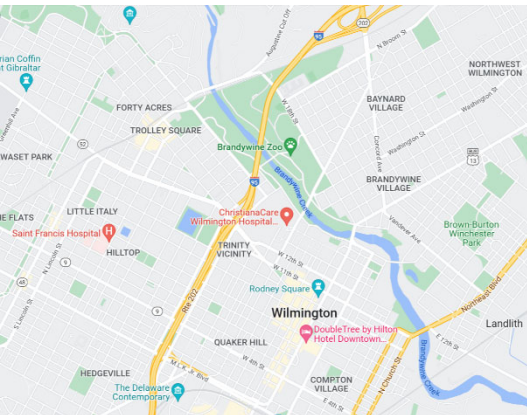
Alfred I. duPont Hospital



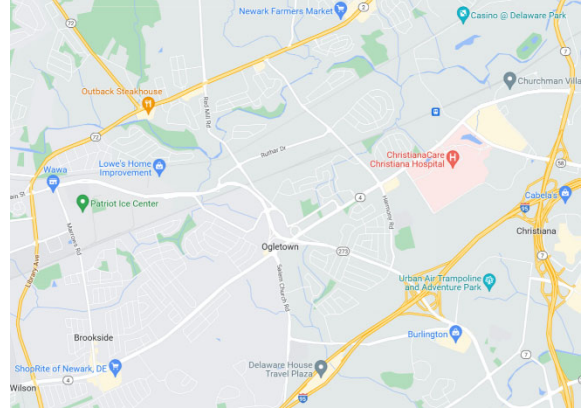
St. Francis Hospital & Select Specialty Hospital



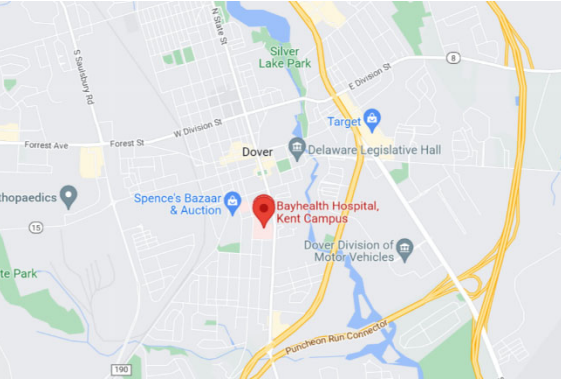
Wilmington Hospital (Christiana Care Health System)



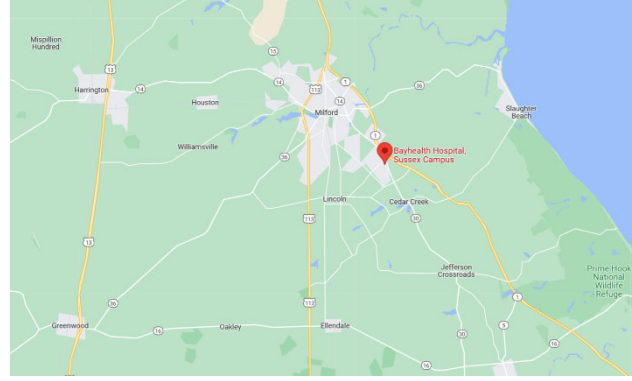
Christiana Hospital



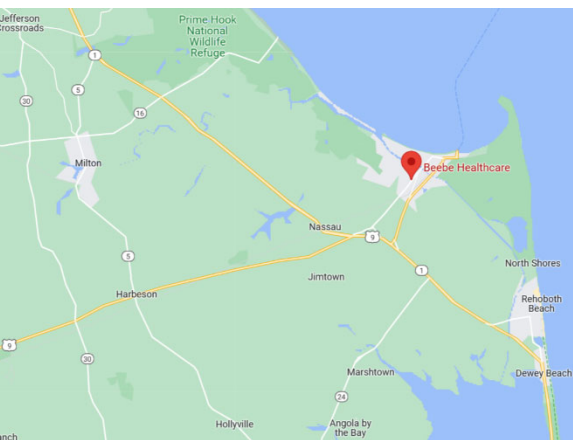
Bayhealth Hospital, Kent Campus



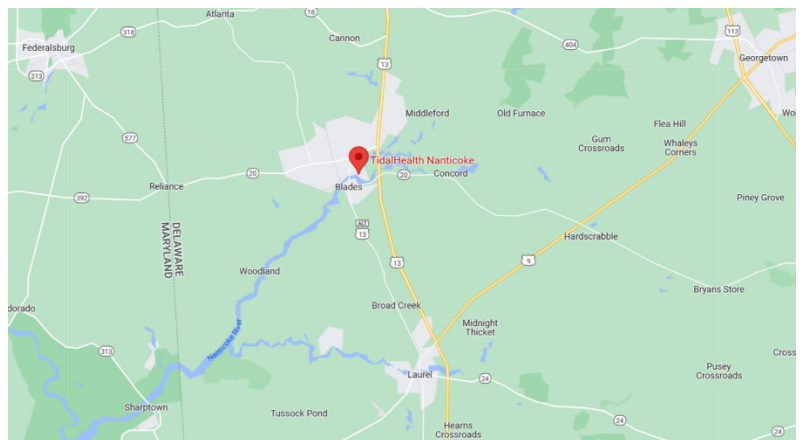
Bayhealth Hospital, Sussex Campus



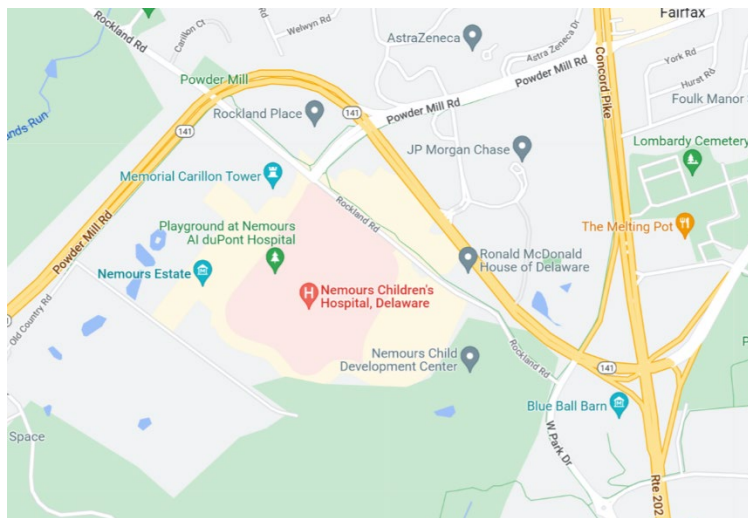
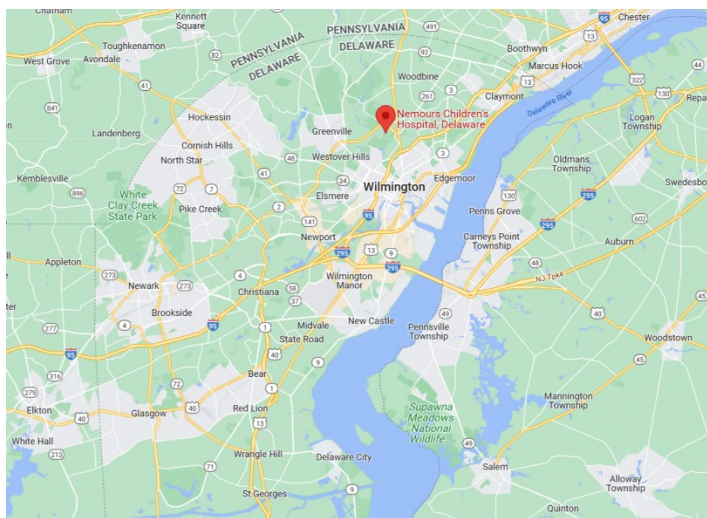
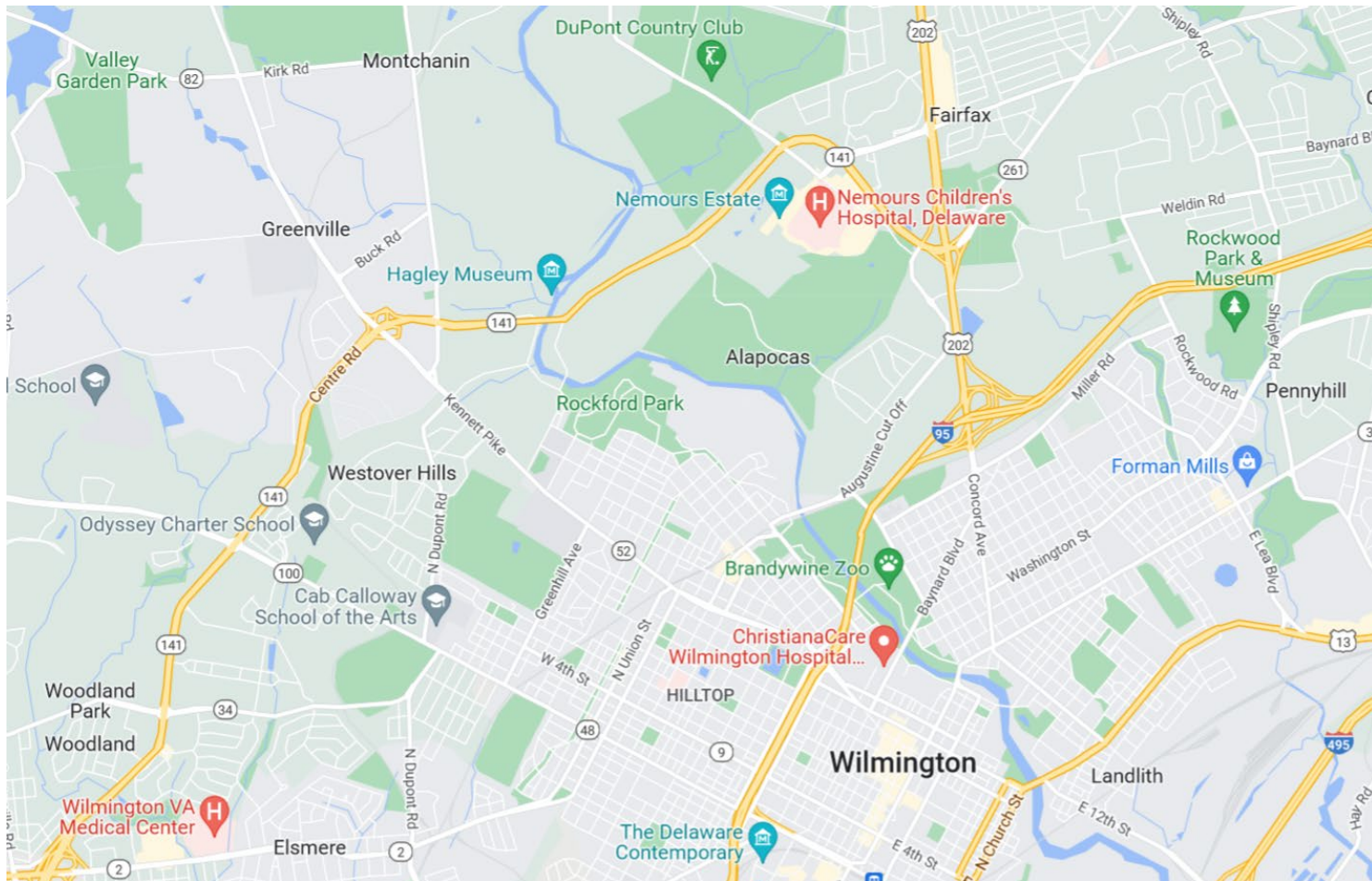
Beebe Hospital



TidalHealth- Nanticoke Hospital



Alfred I. duPont Hospital for Children (Nemours)

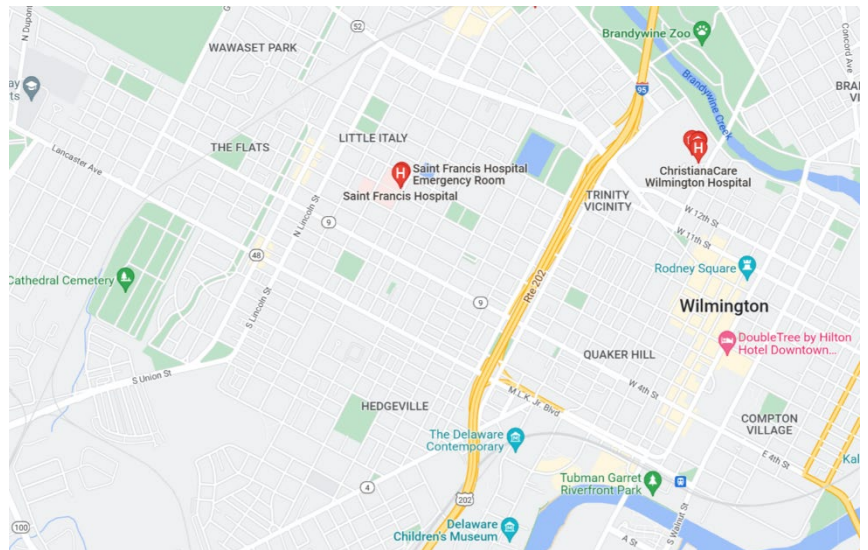
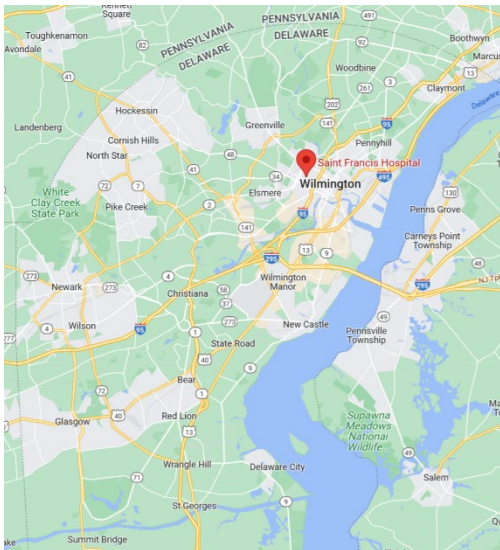
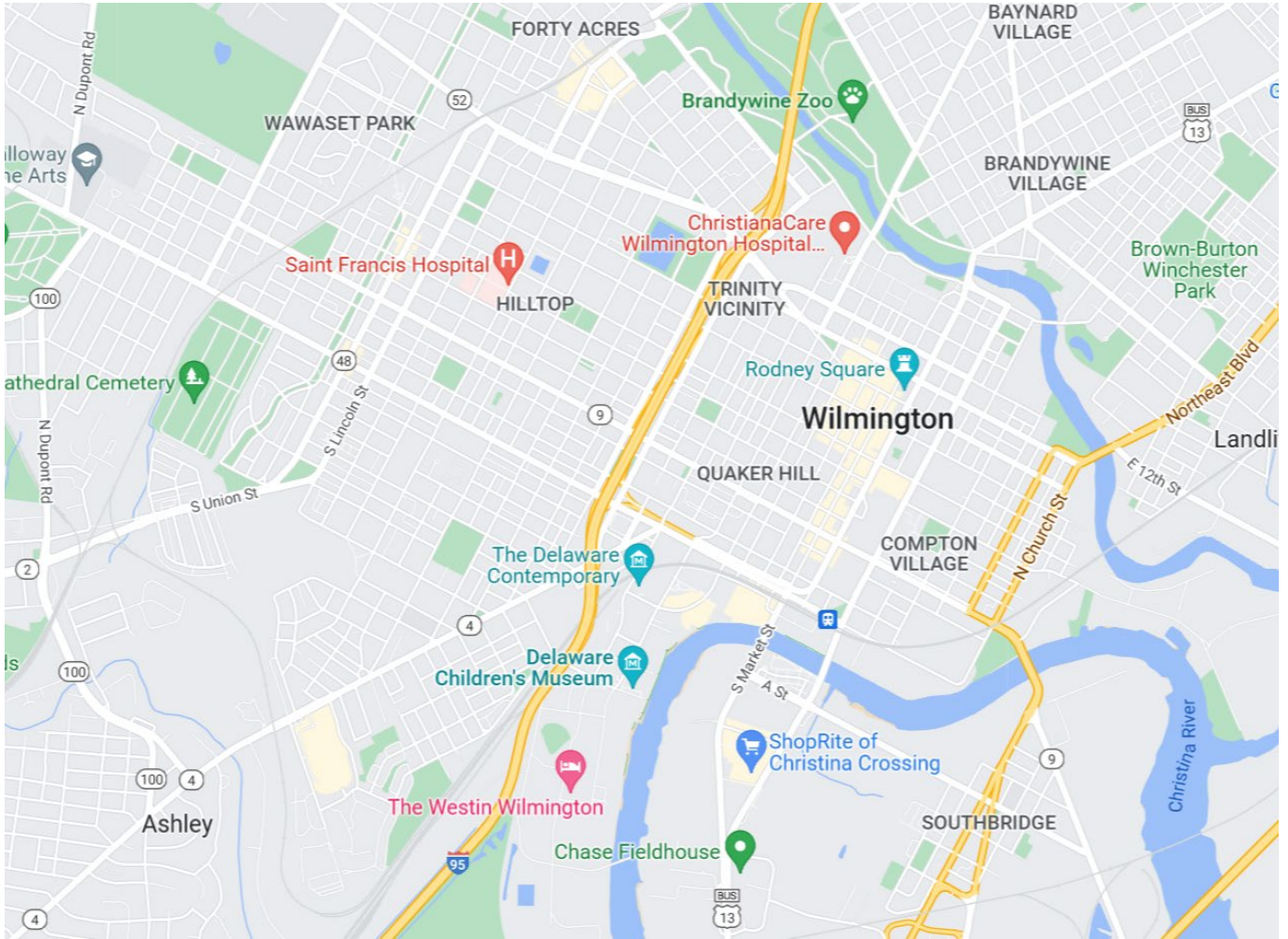


Contact Information:

1600 Rockland Rd
Wilmington, DE 19899

(302) 651-4000

St. Francis Hospital

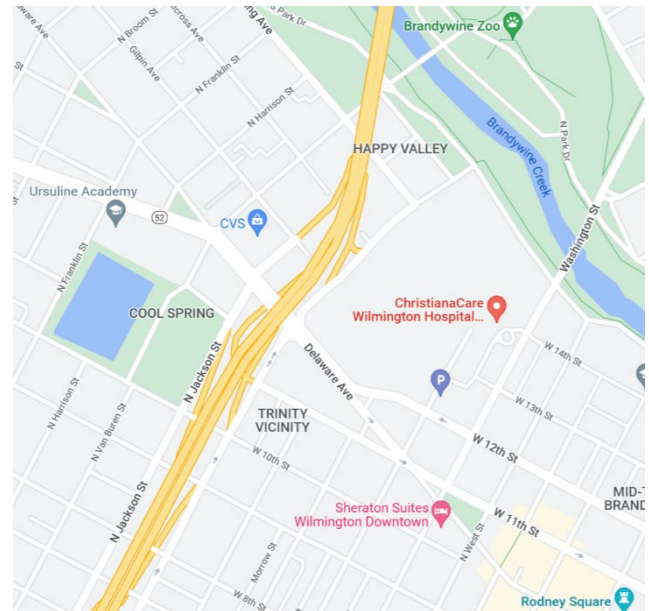
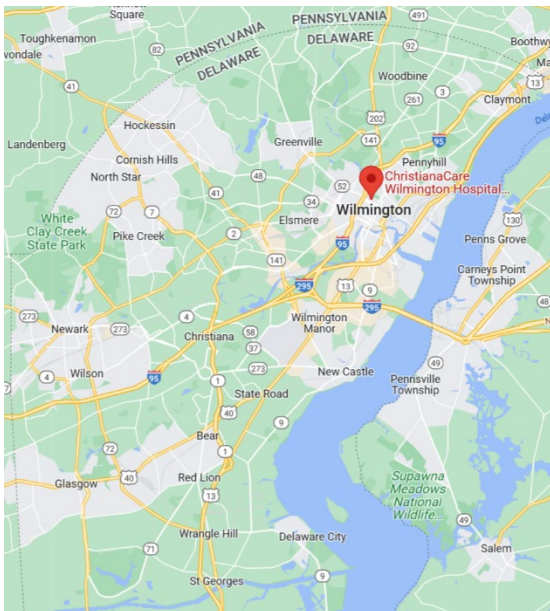
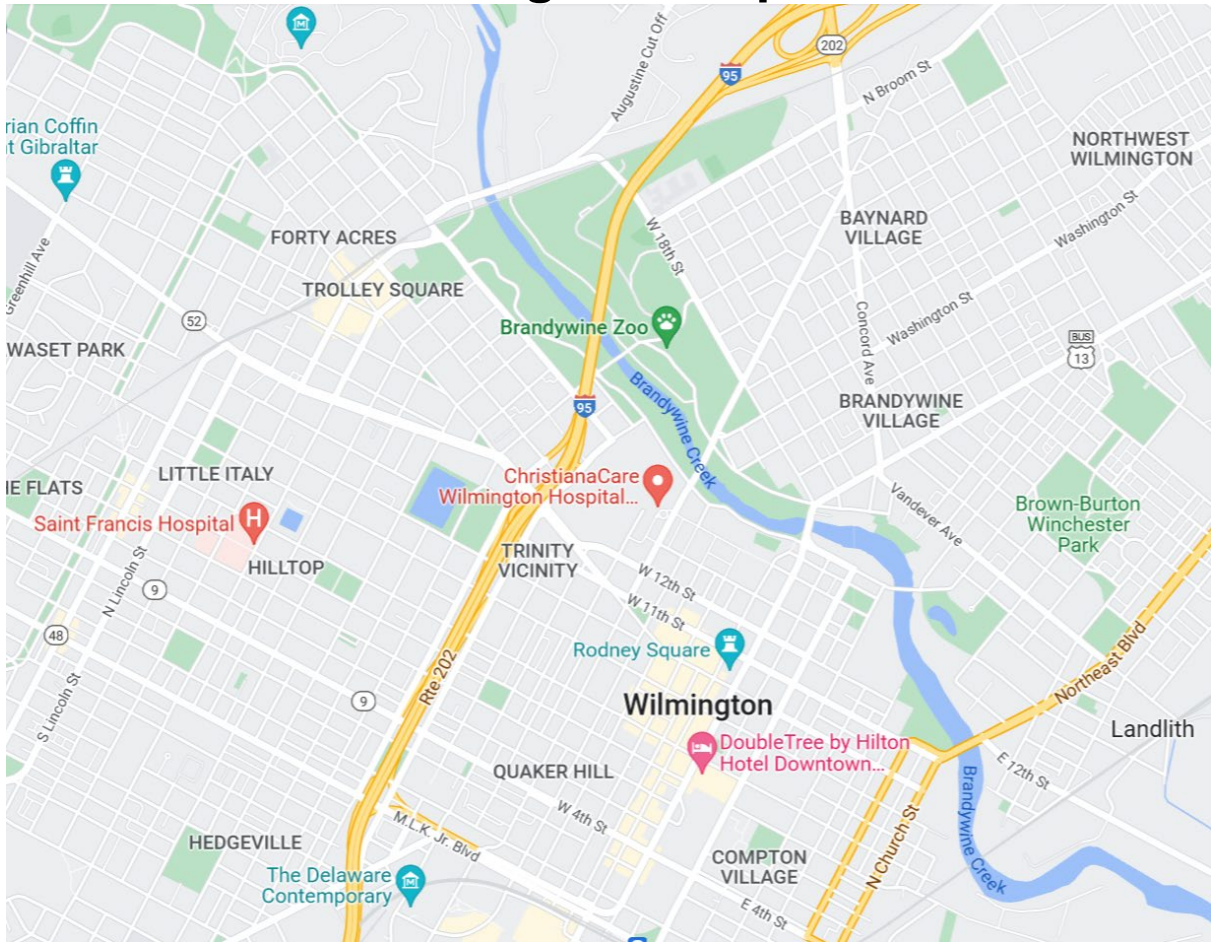


Contact Information:

7th and Clayton Streets
Wilmington, DE 19805

(302) 421-4100

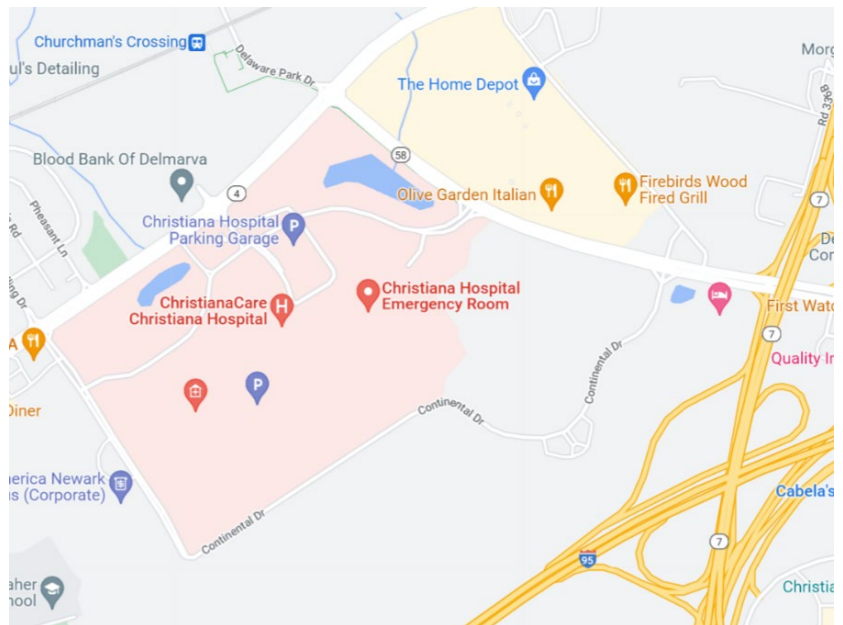
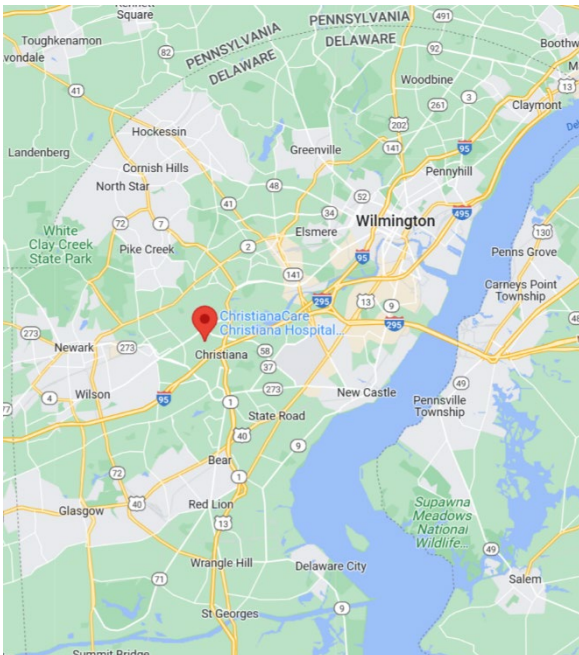
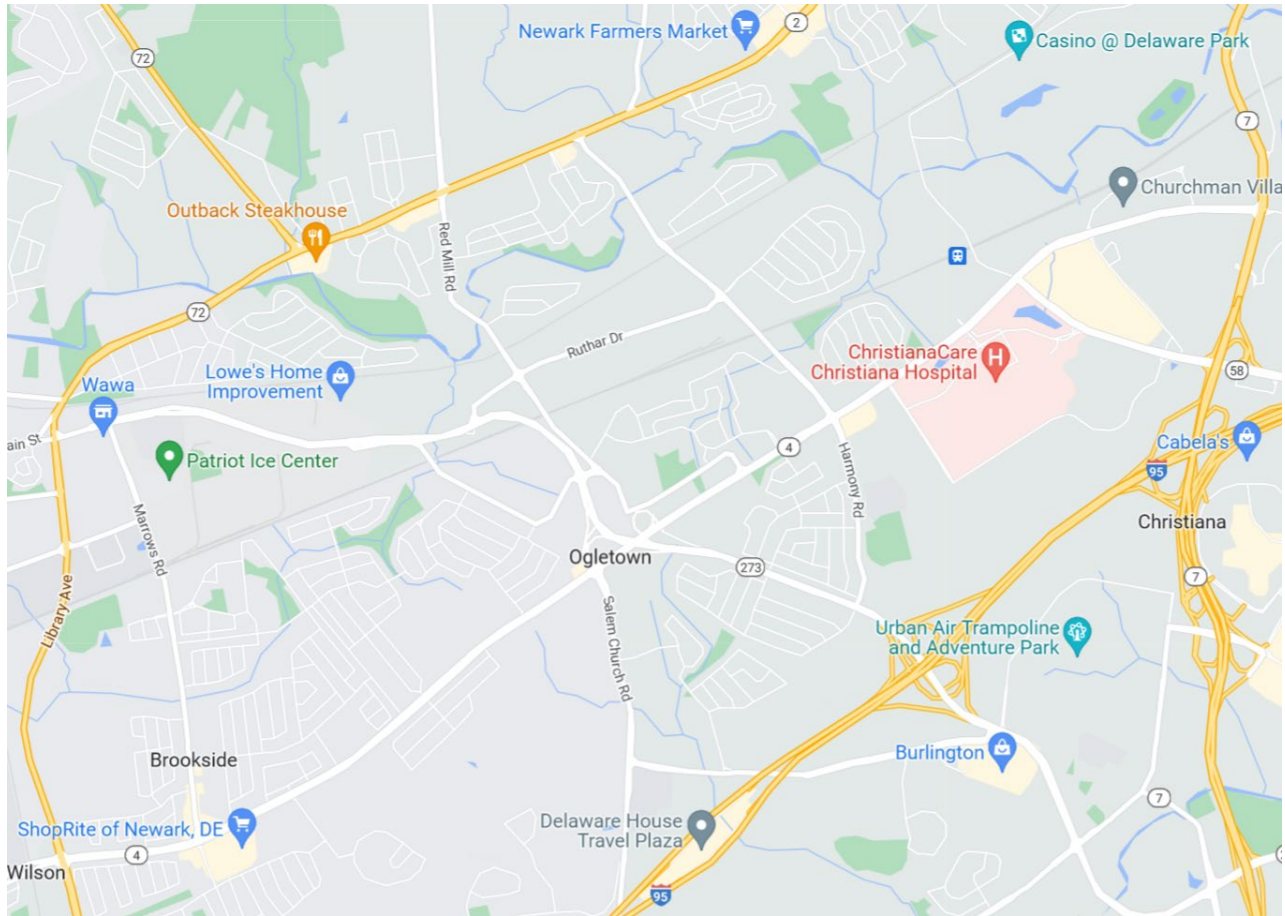
Christiana Care Health System Wilmington Hospital



Contact Information:

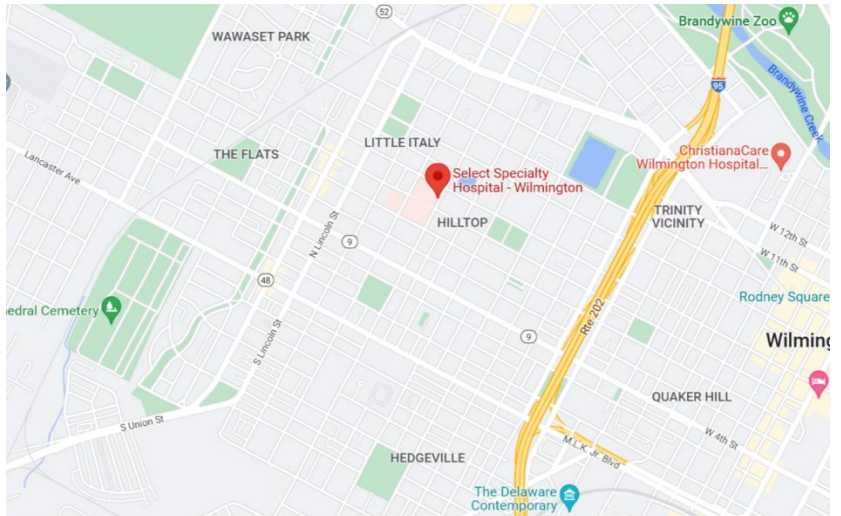
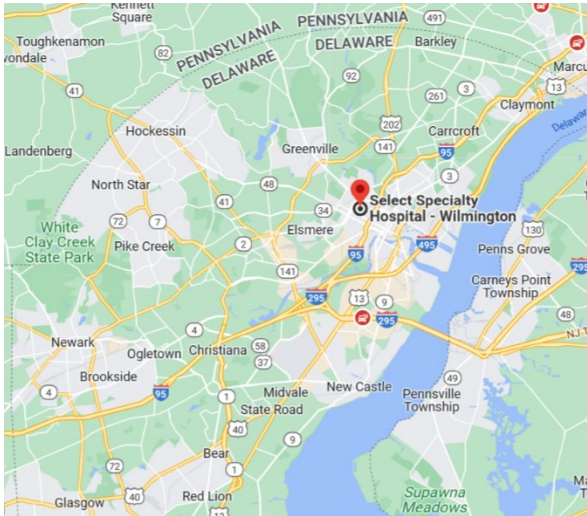
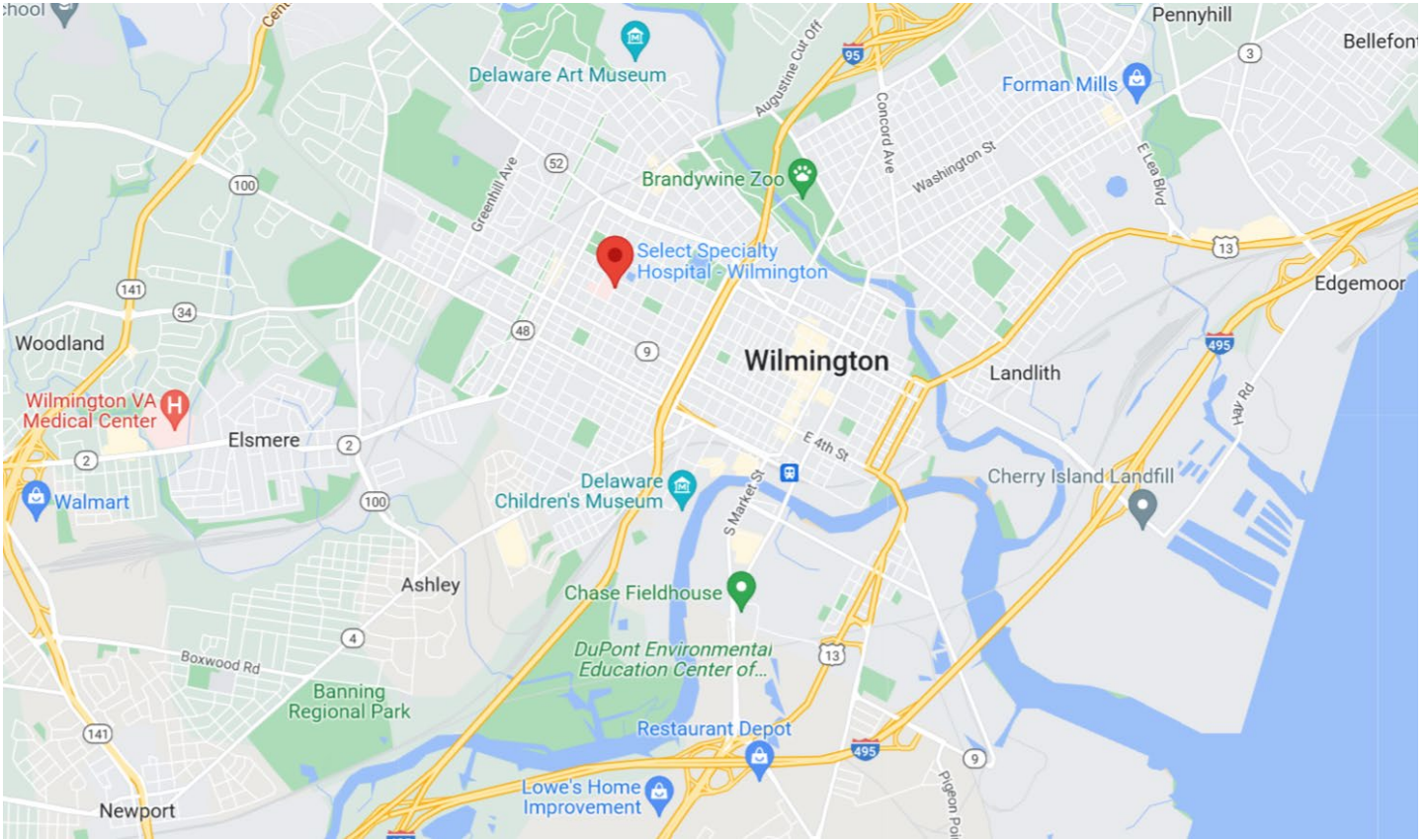
501 W. 14th St.
Wilmington, DE 19801
(302) 733-1000

ChristianaCare Health System Christiana Hospital



Contact Information:
4755 Ogletown-Stanton Rd
Newark, DE 19718
(302) 733-1000

Select Specialty Hospital

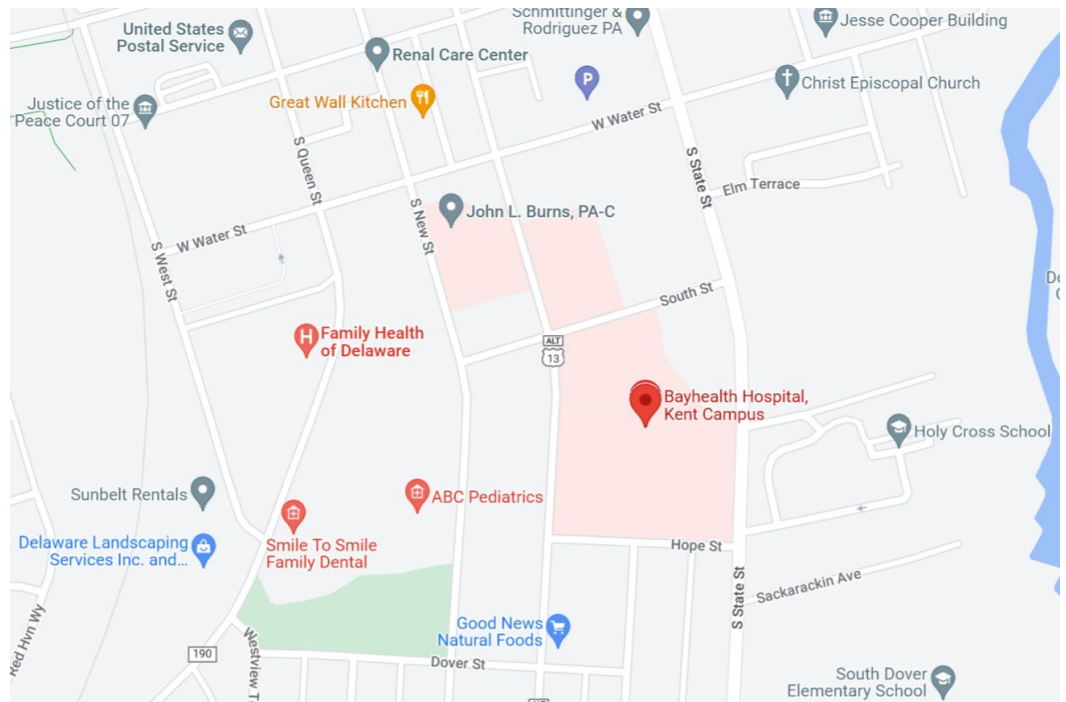
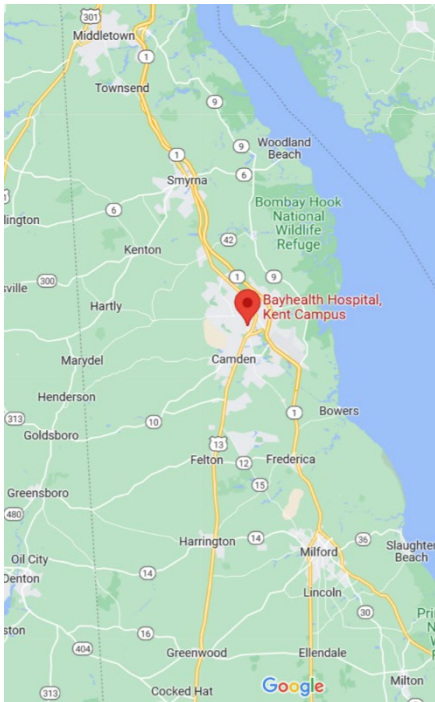
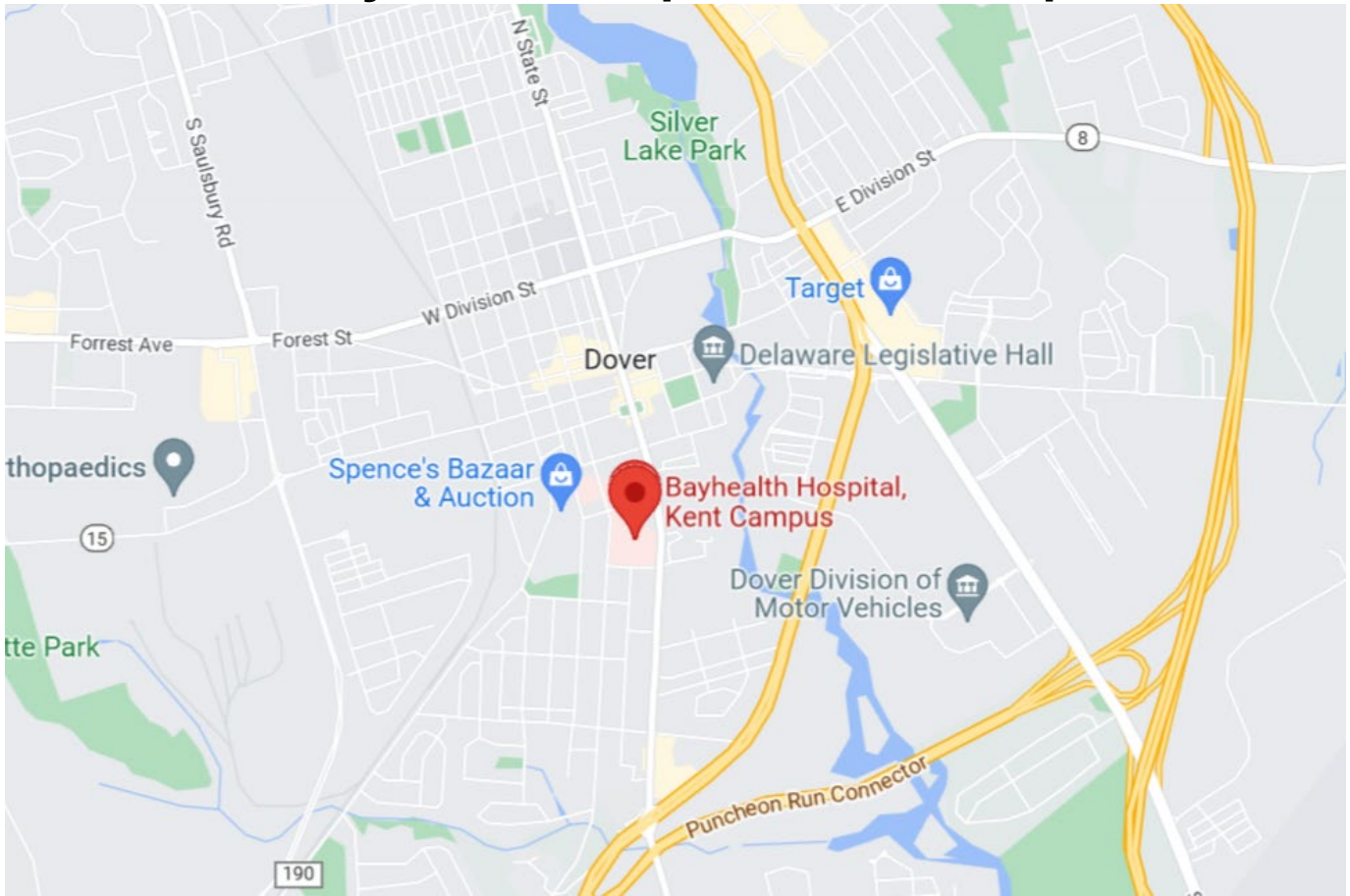


Contact Information:

701 North Clayton Street, 5th Floor
Wilmington, DE 19805

(302) 421-4545

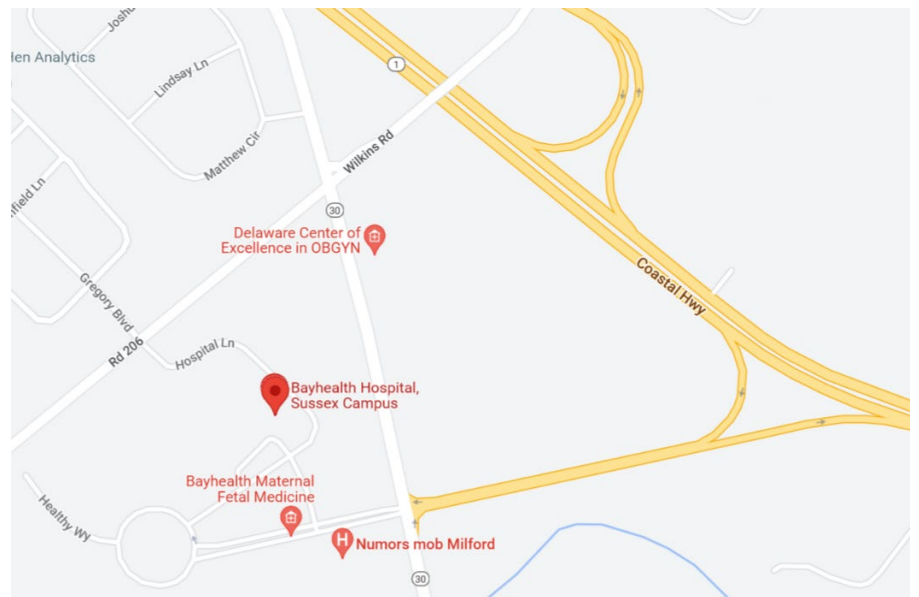
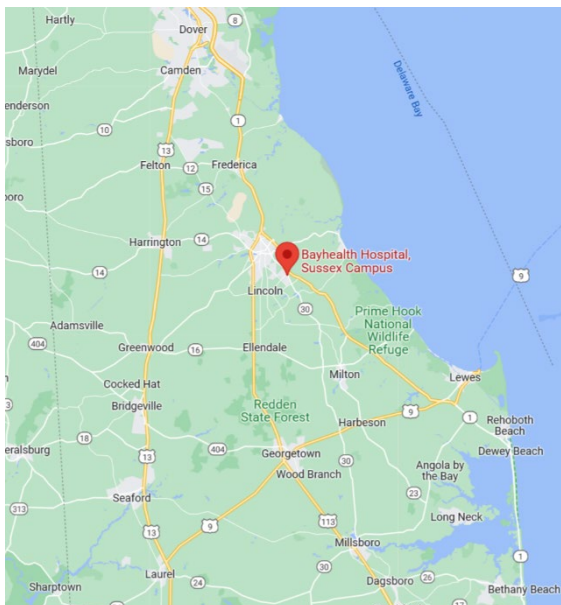
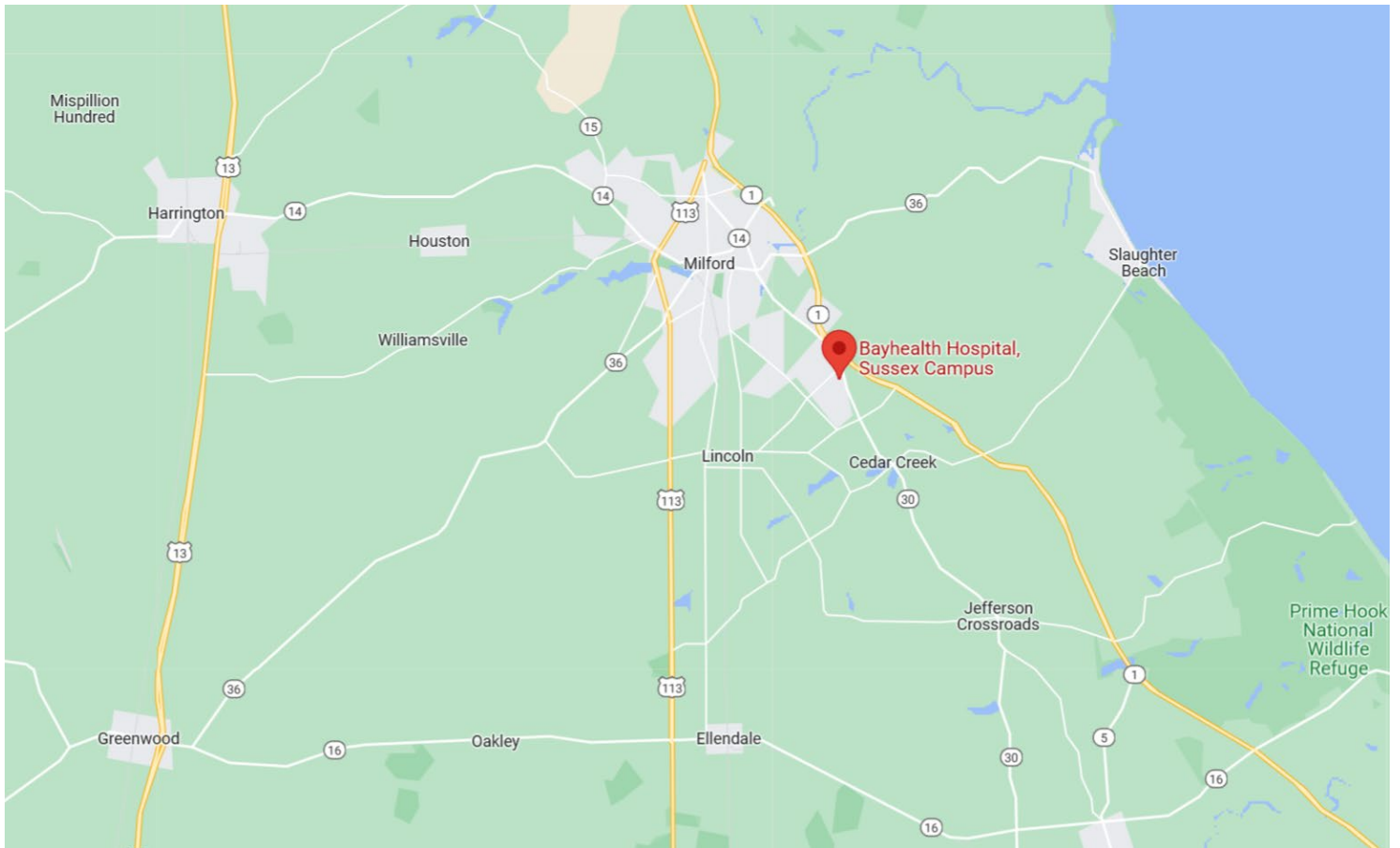
Bayhealth Hospital, Kent Campus



Contact Information:

640 South State St.
Dover, DE 19901
(302) 674-4700

Bayhealth Hospital, Sussex Campus

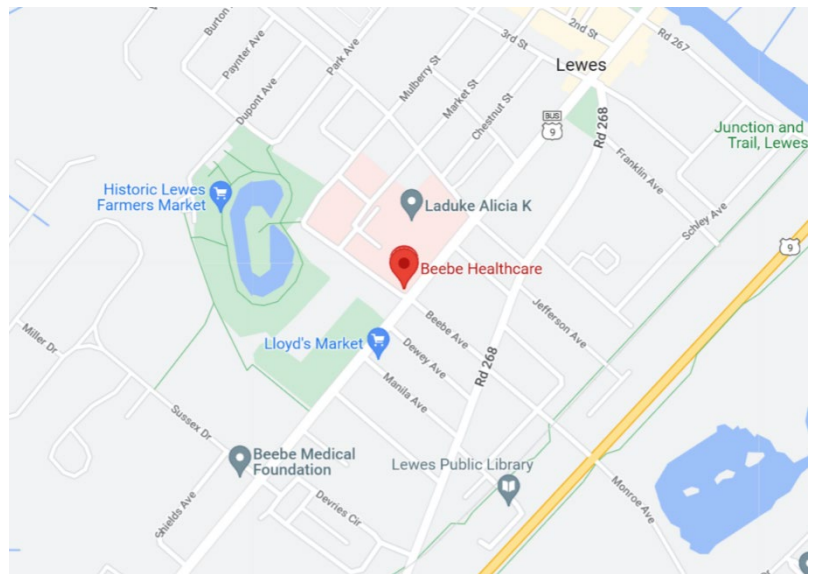
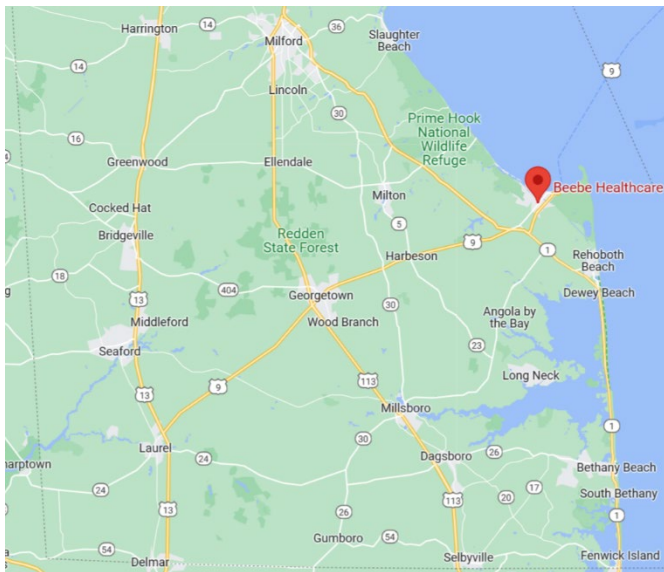
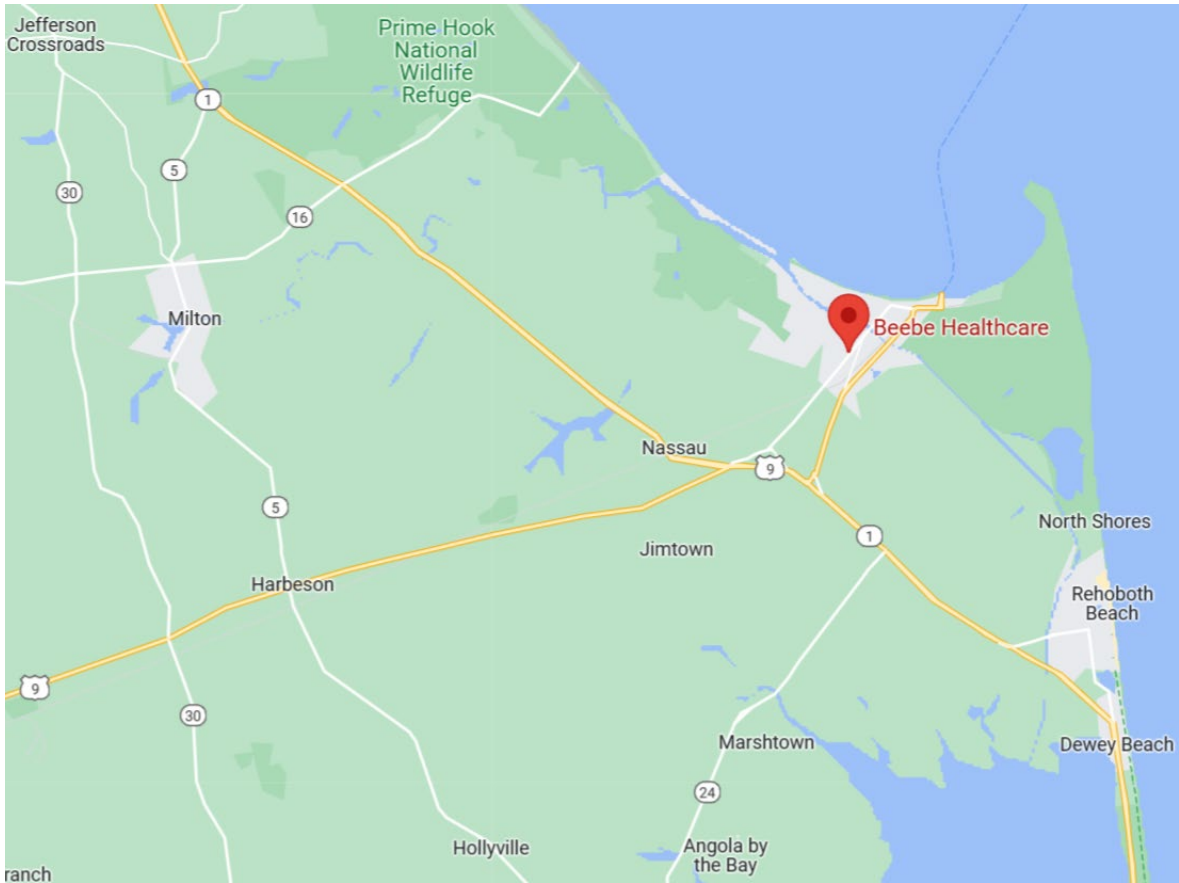


Contact Information:

100 Wellness Way
Milford, DE 19963

(302) 422-3311

Beebe Hospital

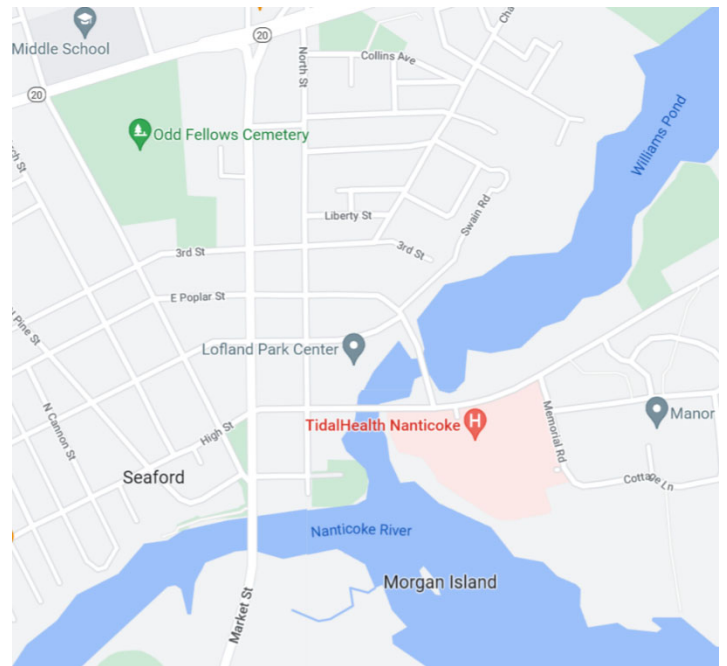
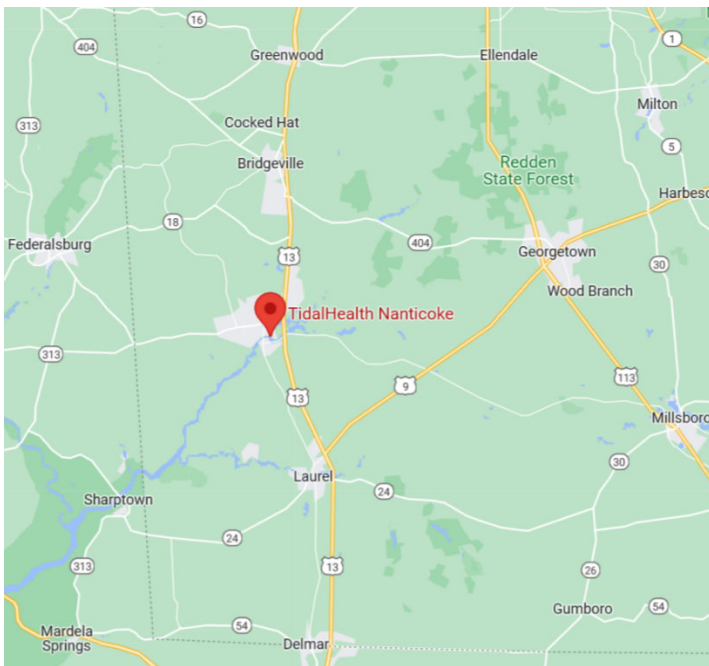
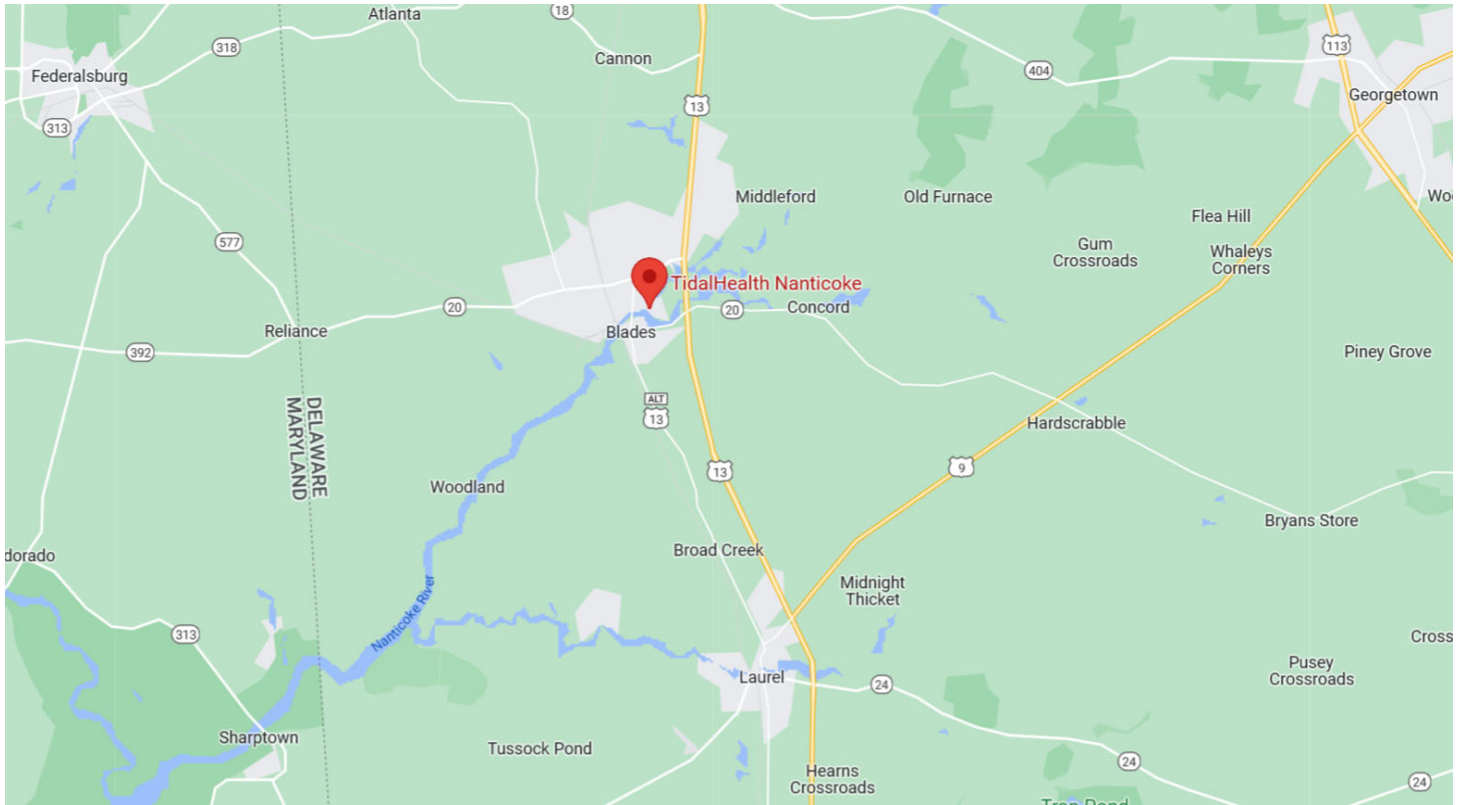


Contact Information:

24 Savannah Rd
Lewes, DE 19958

(302) 645-3300

TidalHealth- Nanticoke Hospital



Contact Information:

801 Middleford Rd.
Seaford, DE 19973

(302) 629-6611

Methods:

Hospital discharge data is recorded in the state’s uniform claims and billing database, which is maintained under contract by the University of Delaware. Pursuant to the Uniform Health Data Act (16 Del Code, C.20), Delaware hospitals must submit uniform claims and billing data each quarter. These quarterly submissions are checked for data quality and completeness, and collated into an annual file by the University of Delaware. Each annual data file is stored at the Delaware Health Statistics Center, which is responsible for all data analysis, reports, and fulfilling of data requests.

Rate calculations and significance testing:

Hospital Discharge Rates were calculated using the Delaware Population Consortium’s (DPC) October 2015 population projections, and were presented as the number of discharges per 10,000 population. Significance testing for the difference between rates was performed using the following formula:

Rates - When the absolute value of the following statistic is greater than 1.96, then the difference between two rates ($R_1 - R_2$) is considered statistically significant at the 95-percent confidence level.

$$z = \frac{R_1 - R_2}{\sqrt{\left(\frac{R_1^2}{N_1} + \frac{R_2^2}{N_2}\right)}}$$

where

- R₁ = first rate
- R₂ = second rate
- N₁ = first number of discharges
- N₂ = second number of discharges

Percents - When the absolute difference between two proportions is greater than the statistic in the formula below, the difference is considered statistically significant at the 95-percent confidence level.

$$1.96 \times \sqrt{p(1-p) \left(\frac{1}{N_1} + \frac{1}{N_2}\right)}$$

where

- N₁ = first denominator
- N₂ = second denominator

$$p = \frac{N_1 * p_1 + N_2 * p_2}{N_1 + N_2}$$

- p₁=the first percent
- p₂=the second percent

Definitions:

Admission source - The source of the patient's admission, e.g., emergency, another hospital, or long term care facility, which describes how the patient was admitted.

Aggregate charges - The sum of all charges for all hospital stays.

Body System - In this report, it represents the more generalized grouping of CCS categories that correspond with ICD-9 CM chapter headings.

Clinical Classification System (CCS) - This refers to the classification system developed at the Agency for Healthcare Research and Quality (AHRQ) used to aggregate ICD-9-CM codes into broader, homogeneous groups. In this report, the 2019 version of the single-level diagnosis classification scheme is used for both diagnoses and procedures. Because CCS codes are based on ICD-9-CM diagnoses, they can be mapped to ICD-9-CM chapter headings. Data in this report are presented by both CCS diagnoses and by ICD-9-CM chapters. For more information, see <https://www.ahrq.gov/research/data/hcup/index.html>.

Discharge - A completed inpatient hospitalization. A hospitalization may be completed by death or by releasing the patient to his or her home, a long-term care facility, another hospital, or if the patient leaves against medical advice.

Discharge Status - The disposition of a patient at discharge from the hospital into one of the following categories:

- Home or routine discharge - patient returned to previous place of residence after discharge from the hospital.
- Long-term care facility - patient entered a nursing home including skilled nursing facilities, extended care facilities, custodial care facilities, or other long term care placement upon discharge from the hospital.
- Another short-term hospital - patient transferred to another short-term hospital at discharge, including short-term maternity hospitals.
- Against medical advice (AMA) - patient left the hospital against medical advice.
- Expired - patient who died during the inpatient stay.
- Home health care - patient discharge to home where care is provided by a home health care agency for the purpose of promoting, maintaining, or restoring health, or for minimizing the effects of disability and illness, including terminal illness.
- Unknown - patient whose status was not entered.

Ecodes - Indicate the external causes of injuries and poisonings as well as the adverse effects of drugs and substances. They are intended to provide data for injury research and evaluation of injury prevention strategies. These codes capture how the injury or health condition happened (cause), the intent (unintentional or accidental; or intentional, such as suicide or assault), the place where the event occurred, the activity of the patient at the time of the event, and the person's status (e.g. civilian, military).

Expected source of payment - The principal expected source of payment for the hospitalization.

- Medicare - The health insurance program for the aged and disabled administered by the Centers for Medicare and Medicaid Services (formerly the Health Care Financing Administration).
- Medicaid - A jointly funded Federal-State health insurance program providing medical care to those unable to afford it.
- Worker's compensation - A State or municipal disability insurance or industrial accident insurance.
- Private health insurance- Includes HMO/PPO, Blue Cross/Blue Shield, and other private insurance.
 - HMO/PPO - Any health maintenance organization (HMO) or preferred provider organization (PPO) sponsored by consumers, communities, physicians, or hospitals.
 - Blue Cross/Blue Shield and other private - A private insurance plan not specified as an HMO/PPO. This includes Blue Cross/Blue Shield plans, medical coverage provided by life insurance companies, casualty insurance companies, health insurance companies, and independent plans such as employer/union-sponsored plans and/or self-funded plans (partial or total).
- Self-pay - The majority of the costs for the hospitalization were expected to be paid by the patient, spouse, family, or next-of-kin.

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- Other government - Other Federal, State, or local government other than worker's compensation, Medicare, and Medicaid not listed separately, including casualty insurance paid by the State, Federal or State medical research grant.
- No charge - Patients admitted with the understanding that payment would not be expected because the medical services are free, e.g., charity patients or research or teaching patients.
- Other and not stated.

Hospital charges - The amount the hospital charged for the entire hospital stay.

International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) - The ICD-10-CM (International Classification of Diseases, Tenth Revision, Clinical Modification) is a system used by physicians and other healthcare providers to classify and code all diagnoses, symptoms and procedures recorded in conjunction with hospital care in the United States. It provides a level of detail that is necessary for diagnostic specificity and morbidity classification in the U.S. Like its predecessor ICD-9-CM, ICD-10-CM is based on the International Classification of Diseases, which is published by the World Health Organization (WHO) and which uses unique alphanumeric codes to identify known diseases and other health problems. According to WHO, physicians, coders, health information managers, nurses and other healthcare professionals also use ICD-10-CM to assist them in the storage and retrieval of diagnostic information. ICD records are also used in the compilation of national mortality and morbidity statistics. All Health Insurance Portability and Accountability Act (HIPAA)-covered entities must adhere to ICD-10-CM codes, as mandated by the U.S Department of Health and Human Services (HHS). More information can be found online at: <https://www.cdc.gov/nchs/icd/icd-10-cm.htm>.

Length of stay - The number of nights the patient remained in the hospital for this stay.

Liveborn - The term for the hospitalization that results from an infant being born in the hospital, also referred to as newborn. They are identified by a specific range of ICD-9 CM codes on the discharge record. Records of infants born in the hospital are separate and distinct from the mothers' discharge records, so excluding liveborn infants does not remove the mother's discharge data from the analysis.

Long-term care facility - A facility that provides a specific level of personal or medical care or supervision to residents. Types of long-term care facilities include licensed nursing homes, skilled nursing facilities (SNF), intermediate care facilities (ICF), hospice medical facilities, and other health care institutions, such as institutions for those with intellectual disabilities.

Mean length of stay - Average length of stay for discharges. It is calculated by dividing the total number of days of care by the number of discharges.

Obstetric (OB) - The branch of care that deals with the management of pregnancy, labor, and the puerperium.

Primary diagnosis - The diagnosis chiefly responsible for the admission of the patient to the hospital; it is the first-listed diagnosis specified on the discharge summary of the medical record.

Procedures - Up to six procedures, the principal and five additional, may be recorded on a single hospital stay.

- Principal procedure - refers to the first-listed procedure, which is the procedure performed as a specific treatment for the hospitalization, or the one most closely related to the principal diagnosis.
- All-listed procedures - refers to the principal plus any secondary procedures appearing on a single discharge record/performed during a hospital stay. Because patients often receive more than one procedure, the number of all-listed procedures usually exceeds the number of discharge with procedures.

Procedure classes - Refers to AHRQ's HCUP classification system for procedures, which are categorized into four general categories: minor diagnostic, minor therapeutic, major diagnostic, and major therapeutic. The two minor categories are considered non-operating procedures and the two major categories are considered valid operating procedures. The Procedure Classes Refined for ICD-10-PCS is updated annually to coincide with fiscal year updates to the ICD-10-PCS coding system and retains procedure codes valid from the start of ICD-10-PCS in October 2015. More information can be found at: https://www.hcup-us.ahrq.gov/toolssoftware/procedureicd10/procedure_icd10.jsp.

Puerperium - The period or state of confinement after labor and giving birth.

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Rate - A rate is a measure of an event, disease, or condition in relation to a unit of population for a specified time. For example, the five-year average discharge rate per 10,000 population is calculated as follows:

$$(\text{Five-year total number of discharges} / \text{Five-year total population}) * 10,000$$

Short-stay Hospitals - A short-stay hospital is one where the average length of stay is less than 30 days.

Uninsured patients - A term for those patients whose primary payer is listed as self-pay.

REFERENCES

CMS National Health Expenditure Data. Accessed 3/24/2006. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/nationalHealthAccountsHistorical.html>

DeFrances CJ, Hall MJ, Podogornik MN. *2003 National Hospital Discharge Survey*. Advance data from vital and health statistics; no 359. Hyattsville, MD: National Center for Health Statistics. 2005.

DHSC Hospital Discharge Summary Report, 1992-2000. Division of Public Health, Delaware Department of Health and Social Services, Jan 2002. Doc. No. 350520-020106.

Elixhauser A, Steiner C, Palmer L. Clinical Classifications Software (CCS), 2014. U.S. Agency for Healthcare Research and Quality. Available: <https://www.hcup-us.ahrq.gov/toolsoftware/ccs/CCSUsersGuide.pdf>

HCUPnet, Healthcare Cost and Utilization Project. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/HCUPnet/>

Levit K, Ryan K, Elixhauser A, Stranges E, Kassed C, Coffey R. *HCUP Facts and Figures: Statistics on Hospital-based Care in the United States in 2005*. Rockville, MD: Agency for Healthcare Research and Quality, 2007. <http://www.hcup-us.ahrq.gov/reports.jsp>

Merrill CT, Elixhauser A. *Hospitalization in the United States, 2002*. Rockville, MD: Agency for Healthcare Research and Quality, 2005. HCUP Fact Book No. 6. AHRW Publication No. 05-0056. ISBN 1-58763-217-9.

National Center for Health Statistics. *Health, United States, 2005 with Chartbook on Trends in the Health of Americans*. Hyattsville, Maryland: 2005.

National Center for Health Statistics. *National Trends in Injury Hospitalizations 1979-2001*. Hyattsville, Maryland: 2005. https://www.cdc.gov/nchs/injury/injury_chartbook.htm

The National Health Expenditure Accounts (NHEA). <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/nationalHealthAccountsHistorical.html>

Owens P, Myers M, Elixhauser A, Brach C. *Care of Adults With Mental Health and Substance Abuse Disorders in U.S. Community Hospitals, 2004*. Agency for Healthcare Research and Quality, 2007. HCUP Fact Book No.10. AHRQ Publication No.0 7-0008.I SBN 1-58763-229-2.

The National Association of Health Data Organizations. 2005. *Public Health Data Dissemination Guidelines: NAHDO Working Technical Paper Series*. https://www.nahdo.org/data_resources/data_dissemination