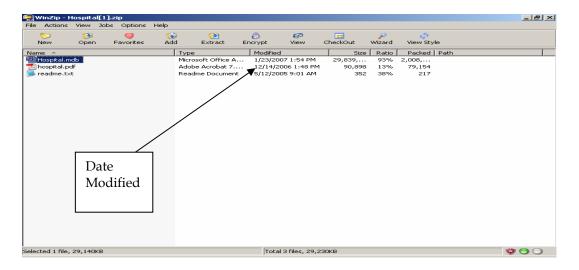
IMPORTANT NOTE: March 2008 CMS added the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey and Medicare Payment and Volume for 44 high use DRGs. The downloadable files have been revised to include the new information that are displayed on the website.

This functionality is primarily used by health policy researchers and the media. The data provided in the eight tables comes from the data that is displayed in the Hospital Compare Tool and includes additional information about the hospital ownership that is not displayed on the website. The date "Modified" in the zipped file indicates the date of the last refresh of the data. For information about hospitals in a particular geographical area, you should use the Hospital Compare tool instead of downloading the data.

Generally, the downloadable databases are refreshed within 24 hours after the data are refreshed on medicare.gov. The date "Modified" in the zipped file indicates the date of the last refresh of the downloadable database.



#### **Data Collection Period for Process of Care Quality Measures**

The collection period for the starter set measures is 12 months. The collection period for the additional measures varies by measure. Currently, the Hospital Compare quality measures are refreshed the third month of each quarter. The chart below provides the 12-month collection period for the starter set measures in Hospital Compare.

Month Hospital Compare Refresh/Release	Starter Set Me	Starter Set Measure Collection Dates	
Keir esii/ Keicase	From	Through	
March 2008	July 2006	June 2007	
July 2008	October 2006	September 2007	
September 2008	January 2007	December 2007	
December 2008	April 2007	March 2008	

### **Data Collection Period for Mortality Quality Measures**

The collection period for the mortality measures is 12 months. The risk-adjusted 30-day risk-adjusted mortality measures for heart attack and heart failure are produced from Medicare claims and enrollment data. The mortality quality measures will be refreshed once annually. The chart below provides the 12-month collection period for the starter set measures in Hospital Compare.

Month Hospital Compare Refresh/Release	Mortality Quality Measure Dates	
	From	Through
March 2008	July 2005	June 2006
July 2008	July 2006	June 2007
September 2008	July 2006	June 2007
December 2007	July 2006	June 2007

There are fourteen tables in the Hospital Compare database.

- 1) dbo\_vwHQI\_FTNT
- 2) dbo vwHQI HOSP
- 3) dbo\_vwHQI\_HOSP\_MSR\_XWLK
- 4) dbo vwHQI PCTL MSR XWLK
- 5) dbo\_vwHQI\_STATE\_MSR\_AVG
- 6) dbo\_vwHQI\_HOSP\_MORTALITY\_XWLK
- 7) dbo\_vwHQI\_STATE\_US\_MORTALITY\_COUNTS
- 8) dbo vwHOI NATIONAL MORTALITY RATE
- 9) dbo vwHQI HOSP HCAHPS MSR
- 10) dbo vwHQI STATE HCAHPS MSR
- 11) dbo\_vwHQI\_US\_NATIONAL\_HCAHPS\_MSR
- 12) dbo vwHQI HOSP MPV MSR
- 13) dbo\_vwHQI\_STATE\_MPV\_MSR
- 14) dbo vwHQI UA NATIONAL MPV MSR

The quality measures in the downloadable database are arranged to match the manner in which they are displayed in the Hospital Compare tool. See Quality Measure chart at the end of this document.

#### Table one

The first table, dbo\_vwHQI\_FTNT, contains two (2) fields. This table provides the footnote text.

- 1. Footnote (1)
- 2. Footnote Text (varies)

Hospital Compare Footnote values:

#### Footnote Footnote Text

- 1 The number of cases is too small (n<25) for purposes of reliably predicting hospital's performance.
- 2 Measure reflects the hospital's indication that its submission was based on a sample of its relevant discharges.
- Rate reflects fewer than the maximum possible quarters of data for the measure.
- 4 Inaccurate information submitted and suppressed for one or more quarters.
- No data is available from the hospital for this measure.
- Fewer than 100 patients completed the HCAHPS survey. Use these rates with caution, as the number of surveys may be too low to reliable assess hospital performance.
- 7 This displays less than 9 months of accurate data.
- 8 Survey results are not available for this period.
- 9 No patients were eligible for the HCAHPS Survey.

#### Table two

The second table, dbo\_vwHQI\_HOSP, contains fourteen (14) fields. This table provides general Hospital information in response to a Hospital Compare search.

- 1. ProvNum: varchar(6)
  - Lists the hospitals by their provider identification number.
- 2. HospitalName: varchar(50)

Lists the name of the hospital.

3. Address1: varchar(50)

Lists the first line of the street address of the hospital.

4. Address2: varchar(50)

Lists the second line of the street address of the hospital.

5. Address3: varchar(50)

Lists the third line of the street address of the hospital.

6. City: varchar(28)

Lists the city in which the hospital is located.

7. State: varchar(2)

Lists the 2 letter State code in which the hospital is located.

8. ZIP Code: char(5)

Lists the 5 digit numeric ZIP for the hospital.

9. County Name: char (15)

Lists the county in which the hospital is located.

#### 10. Phone Number: char (10)

Lists the 10-digit numeric telephone number, including area code, for the Hospital.

## 11. Hospital Type: char (25)

Lists the type of hospital. The values are:

- Acute Care Hospitals
- Critical Access Hospitals

## 12. Hospital Ownership: varchar (44)

Lists the type of ownership the Hospital falls under. The values are:

- Government Federal
- Government Hospital District or Authority
- Government Local
- Government State

- Proprietary
- Voluntary non-profit Church
- Voluntary non-profit Other
- Voluntary non-profit Private
- Not Available

#### 13. Accreditation: varchar(3)

Returns "Yes" or "No" to specify whether or not the hospital is accredited.

### 14. Emergency Service: char(3)

Returns "Yes" or "No" to specify whether or not the hospital provides emergency service.

#### Table three

The third table, dbo\_vwHQI\_HOSP\_MSR\_XWLK, contains seven (7) fields. This table provides the quality measure scores for each hospital that reported information.

#### 1. ProvNum: varchar(6)

Lists the hospitals by their provider identification number.

### 2. HospitalName: varchar(50)

Lists the name of the hospital.

#### 3. Condition: varchar (29)

Lists the clinical condition. The values are:

Heart Attack Pneumonia

Heart Failure Surgical Infection Prevention

#### 4. Measure Name: varchar (100)

Lists the measure names, see chart at the end of this document.

The quality measures in the downloadable database are arranged to match the manner in which they are displayed in the Hospital Compare tool. See Quality Measure Chart at the end of this document.

5. Score: varchar (4)

Lists the score (percentage) for each measure that the hospital submitted.

6. Sample: varchar (12)

Lists the patient sample size for each measure that the hospital submitted.

- 7. Footnote: (1) Lists the footnote value when appropriate. The values are:
  - 1 The number of cases is too small (n<25) for purposes of reliably predicting hospital's performance.
  - 2 Measure reflects the hospital's indication that its submission was based on a sample of its relevant discharges.
  - 3 Rate reflects fewer than the maximum possible quarters of data for the measure.
  - 4 Inaccurate information submitted and suppressed for one or more quarters.
  - 5 No data is available from the hospital for this measure.

#### **Table Four**

The fourth table, dbo\_vwHQI\_PCTL\_MSR\_XWLK, contains four (4) fields. It provides the score achieved by the top ten (10) percent of hospitals and the national average score for each process of care quality measure.

1. Measure Name: varchar (100)

Lists the measure names, see chart at the end of this document.

The quality measures in the downloadable database are arranged to match the manner in which they are displayed in the Hospital Compare tool. See Quality Measure Chart at the end of this document.

2. Condition: (29) Lists the clinical condition. The values are:

Heart Attack Pneumonia

Heart Failure Surgical Infection Prevention

3. Percentile:

Identifies which score is listed. The values are:

- Top 10% of Hospitals submitting data scored equal to or higher than:
- National Average of Hospitals submitting data:
- 4. Score: (4) Lists the top 10% and national score for each measure.

#### Table five

The fifth table, dbo\_vwHQI\_STATE\_MSR\_AVG, contains (4) fields. This table provides the State average for each **hospital process of care quality** measure.

1. State: (2)

Lists the alphabetic postal code used to identify each individual state. All fifty (50) states are listed, as well as:

• DC = Washington D.C.

• GU = Guam

• MP = Northern Mariana Islands

• VI = Virgin Islands

- PR = Puerto Rico
- 2. Condition: (29) Lists the clinical condition. The values are:

Heart Attack Pneumonia

Heart Failure Surgical Infection Prevention

3. Measure Name: varchar (100)

Lists the measure names, chart at the end of this document.

The quality measures in the downloadable database are arranged to match the manner in which they are displayed in the Hospital Compare tool. See Quality Measure Chart at the end of this document.

4. State Average: char(3) Lists the measure average for each State

#### **Table Six**

The sixth table, dbo\_vwHQI\_HOSP\_MORTALITY\_XWLK, contains (6) fields. This table provides each hospital's risk-adjusted 30-Day Death (mortality) category.

1. ProvNum: varchar(6)

Lists the hospitals by their provider identification number.

2. HospitalName: varchar(50)

Lists the name of the hospital.

3. Condition: varchar(255) (29?)

Lists the clinical condition. The values are: Heart Attack Heart Failure

4. Measure Name: varchar (100)

Lists the measure names. The values are:

Hospital 30-Day Death (Mortality) Rates from Heart Attack

Hospital 30-Day Death (Mortality) Rates from Heart Failure

5. Category: varchar (50)

Lists the mortality category in which the hospital falls. The values are:

- Better than U.S. National Rate
- No Different than U.S. National Rate
- Worse than U.S. National Rate
- 6. Footnote: char(10)

Lists the footnote value when appropriate. The value is:

5 No data is available from the hospital for this measure.

#### Table seven

The seventh table, dbo\_vwHQI\_STATE\_MORTALITY\_SCRE, contains (5) fields. This table provides that total number of Hospitals in each state and nationally that are Better, No Different and Worse than the U.S. National Rate for each measure.

1. State: (2)

Lists the alphabetic postal code used to identify each individual state. All fifty (50) states are listed, as well as:

- DC = Washington D.C.
- GU = Guam
- MP = Northern Mariana Islands

- PR = Puerto Rico
- VI = Virgin Islands

2. Condition: varchar(55)

Lists the clinical condition. The values are: Heart Attack Heart Failure

3. Measure Name: varchar (100)

Lists the mortality measure names:

Hospital 30-Day Death (Mortality) Rates from Heart Attack Hospital 30-Day Death (Mortality) Rates from Heart Failure

4. Category: varchar (50)

Lists the comparison category in which the hospital falls. The values are:

- Better than U.S. National Rate
- No Different than U.S. National Rate
- Worse than U.S. National Rate
- 5. Number of Hospital: integer

Lists the number of hospitals for each measure/category combination.

#### Table eight

The eighth table, dbo\_vwHQI\_U.S. National MORTALITY\_RATE, contains (3) fields. This table provides the total number nationally rate for each Mortality measure.

1. Condition: varchar(255)

Lists the clinical condition. The values are: Heart Attack Heart Failure

2. Measure Name: varchar (100)

Lists the measure names.

Hospital 30-Day Death (Mortality) Rates from Heart Attack Hospital 30-Day Death (Mortality) Rates from Heart Failure

3. National Mortality Rate: integer (2)

The national risk-adjusted 30-Day Death (mortality) rate.

## Table nine

The ninth table, dbo\_vwHQI\_HOSP\_HCAHPS\_MSR, contains (9) fields. This table provides the average for each of the patient survey topics answered for each hospital that reported information.

1. Provider ID: varchar(6)

Lists the hospitals by their provider identification number.

2. Hospital Name: varchar(50)

Lists the name of the hospital.

- 3. HCAHPS Question: varchar(100)Lists the survey questions about patients' hospital experiences. The values are:
  - How often did doctors communicate well with patients?
  - How often did nurses communicate well with patients?
  - How often did patients receive help quickly from hospital staff?
  - How often was patients pain well controlled?
  - How often did staff explain about medicines before giving them to patients?
  - How often were the patients rooms and bathrooms kept clean?
  - How often was the area around patients rooms kept quiet at night?
  - Were patients given information about what to do during their recovery at home?
  - How do patients rate the hospital overall?
  - Would patients recommend the hospital to family and friends?
- 4. HCAHPS Answer Description: char(100)

Lists the answers to the survey questions about patients' hospital experiences. The values are:

- Doctors always communicated well
- Doctors usually communicated well
- Doctors sometimes or never communicated well
- Nurses always communicated well
- Nurses usually communicated well
- Nurses sometimes or never communicated well
- Patients always received help as soon as they wanted
- Patients usually received help as soon as they wanted
- Patients sometimes or never received help as soon as they wanted
- Pain always controlled
- Pain usually controlled
- Pain sometimes or never controlled
- Staff always explained
- Staff usually explained
- Staff sometimes or never explained
- Room always clean
- Room usually clean
- Room sometimes or never clean
- Always quiet at night

- Usually quiet at night
- Sometimes or never quiet at night
- Yes, staff did give patients this information
- No, staff did not give patients this information
- Patients who gave a rating of 9 or 10 (high)
- Patients who gave a rating of 7 or 8 (medium)
- Patients who gave a rating of 6 or lower (low)
- Yes, patients would definitely recommend the hospital
- Yes, patients would probably recommend the hospital
- No, patients would not recommend the hospital (they probably would not or definitely would not recommend it)
- 5. HCAHPS Answer Percent: char(3)

Lists the percentage for each patient survey topic answered.

6. Number of Completed Surveys: varchar(?)

Lists the total number of patients who completed a survey. The values are:

- 300 or More
- Between 100 and 299
- Fewer then 100
- 7. Survey Response Rate Percent: char(3)

Lists the percentage of patients who actually completed the survey.

- 8. Survey Footnote: varchar(?) associated with number of completed surveys Lists the footnote value when appropriate, as related to the survey. The values are:
  - Fewer than 100 patients completed the HCAHPS survey. Use these rates with caution, as the number of surveys may be too low to reliable assess hospital performance.
  - 8 Survey results are not available for this period.
- 9. Hospital Footnote: varchar(?) associated with availability of data

Lists the footnote value when appropriate, as related to the hospital. The values are:

- 7 This displays less than 9 months of accurate data.
- 8 Survey results are not available for this period.
- 9 No patients were eligible for the HCAHPS Survey.

#### Table ten

The tenth table, dbo\_vwHQI\_STATE\_HCAHPS\_MSR, contains (4) fields. This table provides the state average for each of the patient survey topics answered.

#### 1. State: (2)

Lists the alphabetic postal code used to identify each individual state. All fifty (50) states are listed, as well as:

- DC = Washington D.C.
- GU = Guam
- MP = Northern Mariana Islands

- PR = Puerto Rico
- VI = Virgin Islands

## 2. HCAHPS Question: char(100)

Lists the survey questions about patients' hospital experiences. The values are:

- How often did doctors communicate well with patients?
- How often did nurses communicate well with patients?
- How often did patients receive help quickly from hospital staff?
- How often was patients pain well controlled?
- How often did staff explain about medicines before giving them to patients?
- How often were the patients rooms and bathrooms kept clean?
- How often was the area around patients rooms kept quiet at night?
- Were patients given information about what to do during their recovery at home?
- How do patients rate the hospital overall?
- Would patients recommend the hospital to family and friends?

#### 3. HCAHPS Answer Description: char(50)

Lists the answers to the survey questions about patients' hospital experiences. The values are:

- Doctors always communicated well
- Doctors usually communicated well
- Doctors sometimes or never communicated well
- Nurses always communicated well
- Nurses usually communicated well
- Nurses sometimes or never communicated well
- Patients always received help as soon as they wanted
- Patients usually received help as soon as they wanted
- Patients sometimes or never received help as soon as they wanted
- Pain always controlled
- Pain usually controlled
- Pain sometimes or never controlled
- Staff always explained
- Staff usually explained
- Staff sometime or never explained
- Room always clean

- Room usually clean
- Room sometime or never clean
- Always quiet at night
- Usually quiet at night
- Sometimes or never quiet at night
- Yes, staff did give patients this information
- No, staff did not give patients this information
- Patients who gave a rating of 9 or 10 (high)
- Patients who gave a rating of 7 or 8 (medium)
- Patients who gave a rating of 6 or lower (low)
- Yes, patients would definitely recommend the hospital
- Yes, patients would probably recommend the hospital
- No, patients would not recommend the hospital (they probably would not or definitely would not recommend it)

#### 4. HCAHPS Answer Percent: char(3)

Lists the percentage for each patient survey topic answered.

#### Table eleven

The eleventh table, dbo\_vwHQI\_US\_NATIONAL\_HCAHPS\_MSR, contains (3) fields. This table provides the total number nationally of patient survey topics answered.

#### 1. HCAHPS Question: char(100)

Lists the survey questions about patients' hospital experiences. The values are:

- How often did doctors communicate well with patients?
- How often did nurses communicate well with patients?
- How often did patients receive help quickly from hospital staff?
- How often was patients pain well controlled?
- How often did staff explain about medicines before giving them to patients?
- How often were the patients rooms and bathrooms kept clean?
- How often was the area around patients rooms kept quiet at night?
- Were patients given information about what to do during their recovery at home?
- How do patients rate the hospital overall?
- Would patients recommend the hospital to family and friends?

#### 2. HCAHPS Answer Description: char(50)

Lists the answers to the survey questions about patients' hospital experiences. The values are:

- Doctors always communicated well
- Doctors usually communicated well
- Doctors sometimes or never communicated well
- Nurses always communicated well

- Nurses usually communicated well
- Nurses sometimes or never communicated well
- Patients always received help as soon as they wanted
- Patients usually received help as soon as they wanted
- Patients sometimes or never received help as soon as they wanted
- Pain always controlled
- Pain usually controlled
- Pain sometimes or never controlled
- Staff always explained
- Staff usually explained
- Staff sometime or never explained
- Room always clean
- Room usually clean
- Room sometime or never clean
- Always quiet at night
- Usually quiet at night
- Sometimes or never quiet at night
- Yes, staff did give patients this information
- No, staff did not give patients this information
- Patients who gave a rating of 9 or 10 (high)
- Patients who gave a rating of 7 or 8 (medium)
- Patients who gave a rating of 6 or lower (low)
- Yes, patients would definitely recommend the hospital
- Yes, patients would probably recommend the hospital
- No, patients would not recommend the hospital (they probably would not or definitely would not recommend it)
- 3. HCAHPS Answer Percent: char(3)

Lists the percentage for each patient survey topic answered.

#### Table twelve

The twelfth table, dbo\_vwHQI\_HOSP\_MPV\_MSR, contains (6) fields. This table provides the average Medicare payment and number of cases for each hospital that reported information, for the top forty-four utilized Diagnosis Related Groups.

- 1. Hospital ID: varchar(6)
  - Lists the hospitals by their provider identification number.
- 2. Hospital Name: varchar(50)

Lists the name of the hospital.

- 3. Diagnosis Related Group ID: varchar(3)
  - Lists the Diagnosis Related Group ID.

4. Diagnosis Related Group Name: varchar(50)

Lists the name of each Diagnosis Related Group.

- 5. Medicare Average Payment: varchar(5)
  Lists the average Medicare payment for each Diagnosis Related Group.
- 6. Number of Cases: varchar(4)
  Lists the number of cases for each Diagnosis Related Group where data is available (more than 11 cases).

#### Table thirteen

The thirteenth table, dbo\_vwHQI\_STATE\_MPV\_MSR, contains (5) fields. This table provides the state average Medicare payment and Number of cases for the top forty-four utilized Diagnosis Related Groups.

1. State: (2)

Lists the alphabetic postal code used to identify each individual state. All fifty (50) states are listed, as well as:

- DC = Washington D.C.
- GU = Guam
- MP = Northern Mariana Islands
- PR = Puerto Rico
- VI = Virgin Islands
- 2. Diagnosis Related Group ID: varchar(3) Lists the Diagnosis Related Group ID.
- 3. Diagnosis Related Group Name: varchar(50) Lists the name of each Diagnosis Related Group.
- 4. Medicare Average Payment: varchar(?)
  Lists the Medicare payment range for each Diagnosis Related Group by state.
- 5. Number of Cases: varchar(4)
  Lists the number of cases for each Diagnosis Related Group by state.

#### Table fourteen

The fourteenth table, dbo\_vwHQI\_UA\_NATIONAL\_MPV\_MSR, contains (4) fields. This table provides the national total Medicare payment range and number of cases for the top forty-four utilized Diagnosis Related Groups.

- 1. Diagnosis Related Group ID: varchar(3) Lists the Diagnosis Related Group ID.
- 2. Diagnosis Related Group Name: varchar(50)

Lists the name of each Diagnosis Related Group.

- 3. Medicare Average Payment: varchar(?)
  Lists the Medicare payment range for each Diagnosis Related Group nationally.
- 4. Number of Cases: varchar(4)
  Lists the number of cases for each Diagnosis Related Group nationally.

# **Process of Care Quality Measures Chart**

(For the complete measure specifications see the *Specifications Manual for National Hospital Quality Measures* at www.qualitynet.org)

Con	Condition ~ Acute Myocardial Infarction (Heart Attack)			
	Measure	Add Date	Starter Set	
1	Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	Nov 2004	Yes AMI 3	
2	Patients Given Aspirin at Arrival	Nov 2004	Yes AMI 1	
3	Patients Given Aspirin at Discharge	Nov 2004	Yes AMI 2	
4	Patients Given Beta Blocker at Arrival	Nov 2004	Yes AMI 6	
5	Patients Given Beta Blocker at Discharge	Nov 2004	Yes AMI 5	
6	Patients Given PCI Within 120 Minutes Of Arrival	Apr 2005	No AMI 8	
7	Patients Given Smoking Cessation Advice/Counseling	Apr 2005	No AMI 4	
8	Patients Given Thrombolytic Medication Within 30 Minutes Of Arrival	Apr 2005	No AMI 7	

Cor	Condition ~ Heart Failure			
	Measure	Add Date	Starter	
			Set	
9	Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	Nov 2004	Yes HF 3	
10	Patients Given An Evaluation of Left Ventricular Systolic (LVS) Function	Nov 2004	Yes HF 2	
11	Patients Given Discharge Instructions	Apr 2005	No HF 1	
12	Patients Given Smoking Cessation Advice/Counseling	Apr 2005	No HF 4	

Coı	Condition ~ Pneumonia			
	Measure	Add Date	Starter	
			Set	
13	Pneumonia Patients Assessed and Given Influenza Vaccination	Dec 2006	No PN 7	
14	Patients Assessed and Given Pneumococcal Vaccination	Nov 2004	Yes	
			PN 2	
15	Patients Given Initial Antibiotic(s) within 4 Hours After Arrival	Nov 2004	Yes	
	`,		PN 5	
16	Patients Given Oxygenation Assessment	Nov 2004	Yes	
			PN 1	
17	Patients Given Smoking Cessation Advice/Counseling	Apr 2005	No PN 4	
18	Patients Given the Most Appropriate Initial Antibiotic(s)	Sep 2005	No PN 6	
19	Patients Whose Initial Emergency Room Blood Culture Was Performed Prior to	Apr 2005	No PN 3	
	the Administration of the First Hospital Dose of Antibiotics			

Cor	Condition ~ Surgical Care Improvement/Surgical Infection Prevention (SCIP)			
	Measure	Add Date	Starter	
			Set	
20	Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before	Sep 2005	No SCIP	
	Incision		1	
21	Percent of Surgery Patients who Received the Appropriate Preventative	Jun 2007	No SCIP	
	Antibiotic(s) for Their Surgery		2	
22	Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours	Sep 2005	No SCIP	
	After Surgery		3	

Page Last Updated: March 27, 2008

# **Outcome Quality Measures Chart**

Con	Condition ~ Acute Myocardial Infarction (Heart Attack)			
	Measure			
			Set	
22	Hospital 30-Day Death (Mortality) Rates from Heart Attack Compared	Jun 2007	No	
	to US Rate			

Cor	Condition ~ Heart Failure			
	Measure Add Date Starte			
			Set	
23	Hospital 30-Day Death (Mortality) Rates from Heart Failure Compared	Jun 2007	No	
	to US Rate			

# Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey Topics

	HCAHPS Topics	Add Date
1	How often did nurses communicate well with patients?	Mar 08
2	How often did doctors communicate well with patients?	Mar 08
3	How often did patients receive help quickly from hospital staff?	Mar 08
4	How often was patients pain well controlled?	Mar 08
5	How often did staff explain about medicines before giving them to patients?	Mar 08
6	How often were the patients rooms and bathrooms kept clean?	Mar 08
7	How often was the area around patients rooms kept quiet at night?	Mar 08
8	Were patients given information about what to do during their recovery at home?	Mar 08
9	How do patients rate the hospital overall?	Mar 08
10	Would patients recommend the hospital to family and friends?	Mar 08

# **Top Forty-Four Diagnosis Related Group Chart**

	Diagnosis Related Group DRG Name	DRG ID	Add Date
1	Heart Attack without Complications	122	Mar 08
2	Heart Attack with Major Complications	121	Mar 08
3	Heart Failure	127	Mar 08
4	Chronic Lung Disease	088	Mar 08
5	Pneumonia and Pleurisy in Adults With Complications or Preexisting	089	Mar 08
	Conditions		
6	Diabetes in Adults	294	Mar 08
7	Chest Pain	143	Mar 08
8	Angioplasty Procedures and Insertion of Drug Coated Stent into	558	Mar 08
	Heart Artery		
9	Heart Bypass Surgery	550	Mar 08
10	Heart Bypass Surgery with Complications or Preexisting Conditions	549	Mar 08
11	Heart Valve Operations	105	Mar 08
12	Insertion of Heart Defibrillator	515	Mar 08
13	Insertion of Heart Defibrillator with Examination of Heart through a	536	Mar 08

Page Last Updated: March 27, 2008

	Catheter		
14	Pacemaker Implant	552	Mar 08
15	Major Heart and Blood Vessel Procedures with Complications or	110	Mar 08
	Preexisting Conditions		
16	Head and Neck Blood Vessel Operations	534	Mar 08
17	Gallbladder Removal By Laparoscope	494	Mar 08
18	Gallbladder Removal by Laparoscope with Complications or	493	Mar 08
	Preexisting Conditions		
19	Gallbladder Removal Except By (non) Laparoscope with	197	Mar 08
	Complications or Preexisting Conditions		
20	Hernia Operations in Adults	160	Mar 08
21	Hernia Operations in Adults with Complications or Preexisting	159	Mar 08
	Conditions		
22	Major Small & Large Intestine Operations	149	Mar 08
23	Minor Small and Large Bowel Procedures With Complications	153	Mar 08
24	Stomach & Esophagus Operations in Adults with Complications or	156	Mar 08
	Preexisting Conditions		
25	Back Fusion to Join Spine Bones, not Neck	498	Mar 08
26	Back Fusion to Join Spine Bones, not Neck, with Complications or	497	Mar 08
	Preexisting Conditions		
27	Neck Fusion to Join Neck Bones	520	Mar 08
28	Neck Fusion to Join Bones with Complications or Preexisting	519	Mar 08
	Conditions		
29	Back & Neck Operations Except Back or Neck Fusion	500	Mar 08
30	Back & Neck Operations Except Back or Neck Fusion with	499	Mar 08
	Complications or Preexisting Conditions		
31	Major Arm & Shoulder Operations with Complications or Preexisting	223	Mar 08
	Conditions		1.
32	Replacement of Hip, Knee or Ankle or Reattachment of Thigh, Foot	544	Mar 08
	or Ankle		11 00
33	Repair of Previous Hip or Knee Replacement	545	Mar 08
34	Two or More Hip, Knee or Ankle Operations	471	Mar 08
35	Other Bone, Joint & Organ Operations with Complications or	233	Mar 08
26	Preexisting Conditions	24.6	M 00
36	Sample of Bone Removed for Evaluation of Cancer, Infections or	216	Mar 08
27	Other Bone Disorders	202	Mar 08
37	Kidney and Bladder Operations for Cancer	303	
38	Kidney and Bladder Operations with Complications or Preexisting	304	Mar 08
20	Conditions	015	Man 00
39	Other Kidney & Urinary Tract Operations	315	Mar 08 Mar 08
40	Other Bladder Operations Via the Urethra with Complications or	310	Mar 08
41	Preexisting Conditions  Preexisting Conditions	227	Mo= 09
41 42	Removal of Prostate Via Urethra	337	Mar 08 Mar 08
42	Removal of Prostate Via Urethra with Complications or Preexisting	336	wiar 08
12	Conditions  Formula Reproductive System Reconstructive Operations	256	Mar 08
43	Female Reproductive System Reconstructive Operations	356	Mar 08
44	Uterus & Ovary Operations	359	Mar 08