



T E N N E S S E E   D E P A R T M E N T   O F   H E A L T H

## TENNESSEE HOSPITAL CHARGE REPORTS 2007

### Introduction

Hospitalizations are a major component in the cost of health care. Information on hospitalizations is important to researchers, analysts, and to the public for making informed decisions about health care.

The Tennessee Department of Health, Division of Health Statistics has created this series of charge reports which examine the fifty (50) most costly diagnostic categories and compare them among hospitals. These reports are based on approximately 900,000 inpatient records.

### Description of the Charge Report

The reports give data for patients discharged in 2007. The charge listed in each report is the base charge for a hospitalization. It is not necessarily the actual charge made to the patient or his insurer. Nevertheless, the hospital's base charge is useful for comparison and it is the only generally available figure for making case by case comparisons.

The inpatient discharge records are analyzed based on primary diagnosis, other diagnoses and on procedures used in patient treatment. The records are then assigned to diagnostic categories by use of All Patient Refined-Diagnosis Related Groups or APR-DRG\*.

Next, the records are assigned to one of four severity groups for which similar types and amounts of treatment are needed. This allows for better comparisons of similar cases in terms of cost. In

addition, because hospitals differ by the proportion of difficult and complex cases they see, the severity level grouping compensates for differences in the amount of needed treatment and resources, which affect the cost of treating the patient.

The data are presented for Tennessee hospitals having six or more cases falling into a particular DRG severity group. In certain reports some hospitals will not be listed because there was no DRG severity group with six or more cases reported from that facility. Also, certain DRGs that contained ungroupable records or were of a residual or "catch-all" definition were omitted from these reports.

For the purpose of comparability certain discharges were deleted from the reports. This included those patients with no charge or with a zero or negative charge. Also deleted were patients that transferred from an acute care or critical care hospital, patients that were discharged to a general or critical care hospital, and those patients that left against medical advice or that discontinued care.

Discharge records to the Department of Health are limited in the number of diagnoses and procedures that can be reported. An occasional severe case may exceed these limits and certain diagnoses and/or procedures might not be reported. This could result in an under-estimation of the severity of that discharge.

Each hospital's data is on one row of the report. The hospitals are listed in county order and are sorted alphabetically in each county. The last line in each report is the state total giving information based on all the discharges in Tennessee for that APR-DRG.

## Using the Charge Report

To best illustrate the use of these reports, look at the report “Pulmonary Edema & Respiratory Failure (DRG 133)”. The first row lists information on Methodist Medical Center of Oak Ridge which is located in Anderson County. In 2007, 58 cases of pulmonary edema were reported at this facility in the moderate severity group. These 58 cases had a median charge of \$11,978 (rounded to the nearest dollar amount). A total of 131 cases were reported in the major severity level, having a median charge of \$15,817 and 103 cases fell into the severe group, having a median charge of \$33,452. Fewer than six cases fell into the minor severity group and as a result, this information was not reported.

## Conclusion

The purpose of these reports is to show comparative charges among Tennessee hospitals for performing comparable treatments at similar levels of difficulty and complexity. This information, while not an exact representation of the actual cost per patient, provides useful information to public health researchers, business analysts, and the general public.

For more information, contact the Tennessee Department of Health, Division of Health Statistics at 615-741-4939 or at [HealthStatistics.Health@state.tn.us](mailto:HealthStatistics.Health@state.tn.us).

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### Number of Cases and Median Charges (\$) By County and Hospital Based on APR-DRGs\* from 2007 Hospital Discharge Data PULMONARY EDEMA & RESPIRATORY FAILURE (DRG 133)

County	Hospital Name	Minor Number	Charge	Moderate Number	Charge	Major Number	Charge	Severe Number	Charge
Anderson	Methodist Medical Ctr. Oak Ridge	.	.	58	11,978	131	15,817	103	33,452
State	All Hospitals	48	10,501	1,549	13,199	3,591	19,853	2,959	34,317

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Source: Tennessee Department of Health, Division of Policy, Planning and Assessment, Hospital Discharge Data System.

The mission of the Department of Health is to protect, promote and improve the health and prosperity of people in Tennessee.