

Diamond State Hospital Cost Review Board

Utilization Summary v.2027.0

Instructions

Complete cells shaded in yellow. Total column and total rows sum from the completed inputs.

Each encounter is attributed to one primary payer. Emergency department visits include visits that result in an inpatient admission; the memo line reports that subset and is not additive, as the encounters also appear as an inpatient discharge. Surgical cases, deliveries, and newborn encounters are supplemental and are not additive to discharge, day, or visit counts.

Definitions provides additional detail and Reporting Basis summarizes service classifications.

Reporting Entity

Hospital	
Medicare CCN	
Reporting Period	
Preparer / Title	
Date	

Case Mix

All-Patient Case Mix Index	
Grouper used (e.g., MS-DRG, APR-DRG)	
Grouper / weight version	

Utilization

Utilization Measure	Medicare (Original / FFS)	Medicare Advantage	Medicaid (FFS)	Medicaid Managed Care	Commercial	Self-Pay	Other	Total
Inpatient Discharges								
Acute (Medical / Surgical)								0
Psychiatric Distinct-Part Unit								0
Rehabilitation Distinct-Part Unit								0
Skilled Nursing Subprovider								0
Total Inpatient Discharges	0	0	0	0	0	0	0	0
Inpatient Days								
Acute (Medical / Surgical)								0
Psychiatric Distinct-Part Unit								0

Rehabilitation Distinct-Part Unit								0
Skilled Nursing Subprovider								0
Total Inpatient Days	0	0	0	0	0	0	0	0
Outpatient and Emergency								
Outpatient Visits (excluding ED)								0
Emergency Department Visits								0
<i>of which: resulting in inpatient admission (memo, not additive)</i>								0
Observation Cases								0
Surgical Cases (supplemental, not additive)								
Inpatient Surgical Cases								0
Outpatient Surgical Cases								0
Obstetric (supplemental, not additive)								
Deliveries								0
Newborn (supplemental, not additive)								
Newborn / Nursery Discharges								0