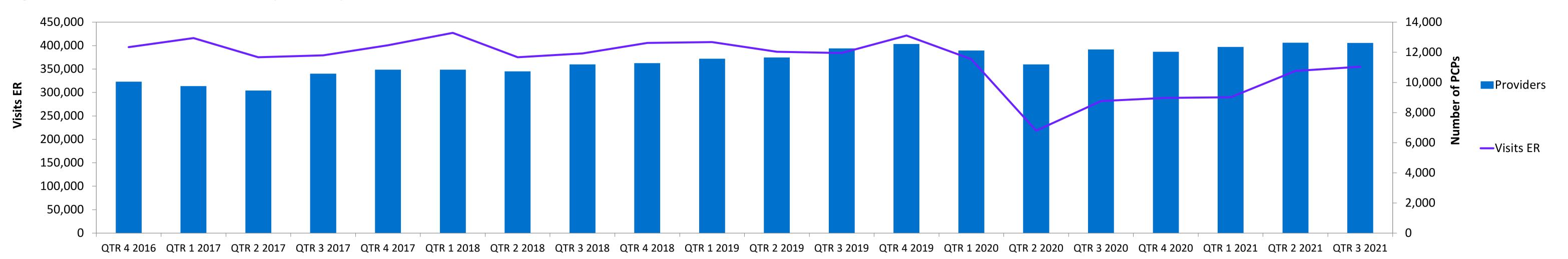
## Georgia Department of Community Health

Provider Report

Claims Incurred through September 2021 and Paid through December 2021

Trending of Visits ER and Number of Primary Care Physicians 2016 to 2021



Providers with at least one claim in the time period specified were included in this analysis.

Top 10 Hospitals Based on Inpatient Admissions (Jul 2021 - Sep 2021)

Excludes members with Medicare coverage. Sorted by Payments.

	CMO									
Rank	Hospital Name	# of Inpatient Admissions	Average Length of Stay (ALOS)	ALOS Medicaid MarketScan Benchmark*	Readmission Rate**	CMO Plan Paid Amount Fac per Admit***				
1	NORTHSIDE HOSPITAL	1,893	3.93	3.43	2%	\$4,248				
2	EMORY UNIVERSITY HOSPITAL MIDTOWN	1,667	3.52	3.98	3%	\$4,968				
3	SAVANNAH HEALTH SERVICES, LLC	1,442	5.29	5.43	6%	\$9,222				
4	CHILDRENS HEALTHCARE OF ATLANTA	1,337	5.56	4.87	8%	\$18,656				
5	NORTHEAST GEORGIA MEDICAL CENTER IN	1,295	3.57	4.48	2%	\$4,987				
6	WELLSTAR KENNESTONE HOSPITAL	1,250	3.16	3.73	2%	\$5,503				
7	GRADY MEMORIAL HOSPITAL	1,087	4.91	4.49	4%	\$9,854				
8	DEKALB MEDICAL CENTER	994	3.48	3.12	1%	\$3,958				
9	NORTHSIDE HOSPITAL, INC.	944	3.36	3.80	2%	\$5,065				
10	PHOEBE PUTNEY MEMORIAL HOSPITAL, INC.	863	4.80	5.63	2%	\$6,773				
	All Other	29,001	4.23	4.30	3%	\$6,237				
	Total	41,773	4.21	4.29	3%	\$6,561				

			FFS			
Rank	Hospital Name	# of Inpatient Admissions	Average Length of Stay (ALOS)	ALOS Medicaid MarketScan Benchmark*	Readmission Rate**	Net Pay Fac Per Admit
1	NORTHSIDE HOSPITAL	1,257	3.95	3.60	3%	\$4,931
2	GRADY MEMORIAL HOSPITAL	1,206	6.44	5.62	11%	\$12,662
3	NORTHEAST GEORGIA MEDICAL CENTER IN	593	5.80	5.92	7%	\$9,817
4	CHILDRENS HEALTHCARE OF ATLANTA AT	570	6.41	5.84	12%	\$24,802
5	WELLSTAR KENNESTONE HOSPITAL	562	5.11	4.90	6%	\$7,974
6	CHILDRENS HEALTHCARE OF ATLANTA	559	7.58	5.90	7%	\$21,950
7	NORTHSIDE HOSPITAL, INC.	503	4.54	4.68	6%	\$8,493
8	SAVANNAH HEALTH SERVICES, LLC	470	6.30	6.85	11%	\$13,049
9	EMORY UNIVERSITY HOSPITAL MIDTOWN	465	7.07	6.27	15%	\$12,292
10	WELLSTAR COBB HOSPITAL	457	4.80	5.24	7%	\$6,909
	All Other	11,304	6.23	5.91	11%	\$10,577
	Total	17,946	6.02	5.68	10%	\$10,978

\*Benchmarks are based on MarketScan 2019 Medicaid Data.

\*\*Readmission rate is based on readmissions for any diagnosis within 15 days. This is the standard used as an indicator of quality of care by Medicare Payment Advisory Committee.

\*\*\*CMO Plan Paid Amount is the amount the plan pays to providers.

Claims Incurred through September 2021 and Paid through December 2021

Top 10 Hospitals Based on Emergent Visits (Jul 2021 - Sep 2021)

Excludes members with Medicare coverage.

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		СМО				
Rank	Facility Name	ER Visits per 1,000	% Emergent	Emergent ER Visits	Non-Emergent ER Visits	CMO Plan Paid Amount Facility*
1	CHILDRENS HEALTHCARE OF ATLANTA	27	42%	5,163	7,081	\$11,958,479
2	HUGHES SPALDING CHILDRENS HOSP	24	37%	4,170	6,976	\$8,626,806
3	SAVANNAH HEALTH SERVICES, LLC	18	41%	3,117	4,526	\$2,506,795
4	EGLESTON CHILDRENS HOSPITAL AT EMORY	14	45%	2,818	3,456	\$6,278,424
5	MIDTOWN MEDICAL CENTER	12	38%	1,956	3,216	\$1,595,336
6	CHILDRENS HEALTHCARE OF ATLANTA AT	10	45%	2,132	2,582	\$4,935,404
7	NORTHEAST GEORGIA MEDICAL CENTER IN	9	51%	2,096	2,029	\$2,189,364
8	AU MEDICAL CENTER, INC	9	46%	1,759	2,064	\$1,285,977
9	WELLSTAR KENNESTONE HOSPITAL	8	45%	1,563	1,889	\$1,747,298
10	WELLSTAR PAULDING HOSPITAL	8	46%	1,552	1,836	\$1,429,574
	All Other	N/A	49%	73,739	77,935	\$56,284,646
	Total	N/A	47%	99,725	113,425	\$98,838,104

	FFS							
Rank	Facility Name	ER Visits per 1,000	% Emergent	Emergent ER Visits	Non-Emergent ER Visits	Net Payment Facility*		
1	GRADY MEMORIAL HOSPITAL	41	62%	1,427	883	\$2,377,600		
2	SAVANNAH HEALTH SERVICES, LLC	21	51%	613	581	\$537,160		
3	CHILDRENS HEALTHCARE OF ATLANTA AT	18	50%	517	508	\$932,157		
4	AU MEDICAL CENTER, INC	18	51%	517	489	\$744,944		
5	CHILDRENS HEALTHCARE OF ATLANTA	17	50%	475	468	\$1,099,114		
6	MIDTOWN MEDICAL CENTER	16	47%	416	465	\$653,762		
7	PIEDMONT ATHENS REGIONAL MEDICAL CENTER, INC.	16	58%	499	368	\$587,794		
8	WELLSTAR ATLANTA MEDICAL CENTER, INC	15	55%	477	387	\$476,663		
9	EMORY UNIVERSITY HOSPITAL MIDTOWN	15	56%	481	379	\$613,437		
10	SOUTH GEORGIA MEDICAL CENTER	14	54%	419	354	\$490,155		
	All Other	N/A	54%	19,820	16,556	\$21,957,099		
	Total	N/A	54%	25,544	21,381	\$30,469,886		

\* Includes both emergent and non-emergent ER visits payments, facilities with at least one emergent visit, out of state locations, and urgent care centers. Net Payment is the amount DCH pays providers.

Note: Emergent and Non-emergent visits are defined by diagnosis codes. ER visits are a count of unique patient and service day combinations. Unique count total may be different from the same day. All COVID-19 related diagnosis for 2020 and 2021 are considered Emergent.

Top 10 Principal Diagnosis in Emergency Room (Jul 2021 - Sep 2021)

Emergent & Non-Emergent Visits are defined by Diagnosis codes.

	CMO					
Rank	Diagnosis*	ER Visits per 1,000	% Emergent	Emergent ER Visits	Non-Emergent ER Visits	CMO Plan Paid Amount Facility**
1	J06 Acute upper respiratory infections of multiple and unspecified sites	36	100%	17,237	0	\$7,439,111
2	R10 Abdominal and pelvic pain	10	0%	0	16,085	\$2,259,297
3	H66 Suppurative and unspecified otitis media	14	0%	0	9,031	\$3,508,035
4	B34 Viral infection of unspecified site	6	93%	6,376	491	\$956,010
5	J02 Acute pharyngitis	33	0%	0	6,668	\$5,543,986
6	R50 Fever of other and unknown origin	5	0%	0	5,140	\$833,165
7	R07 Pain in throat and chest	5	0%	0	540	\$737,141
8	R11 Nausea and vomiting	1	100%	4,910	0	\$374,598
9	O26 Maternal care for other conditions predominantly related to pregnancy	3	97%	4,693	129	\$665,937
10	S01 Open wound of head	8	4%	152	3,921	\$1,529,397
	All Other	N/A	48%	66,433	71,518	\$74,991,427
	Total	N/A	47%	99,725	113,425	\$98,838,104

FFS .									
Rank	Diagnosis*	ER Visits per 1,000	% Emergent	Emergent ER Visits	Non-Emergent ER Visits	Net Payment Facility**			
1	U07 Emergency use of U07	43	100%	2,644	0	\$1,479,461			
2	R07 Pain in throat and chest	39	99%	2,360	25	\$2,084,352			
3	R10 Abdominal and pelvic pain	34	96%	1,984	74	\$1,653,198			
4	M54 Dorsalgia	23	0%	0	1,400	\$573,296			
5	J06 Acute upper respiratory infections of multiple and unspecified sites	19	0%	0	1,168	\$400,922			
6	M25 Other joint disorder, not elsewhere classified	18	0%	1	1,073	\$345,858			
7	M79 Other and unspecified soft tissue disorders, not elsewhere classified	17	81%	846	197	\$437,291			
8	D57 Sickle-cell disorders	17	94%	959	64	\$758,030			
9	R45 Symptoms and signs involving emotional state	16	8%	76	878	\$528,448			
10	R11 Nausea and vomiting	13	3%	27	796	\$478,329			
	All Other	N/A	51%	16,683	15,742	\$21,730,700			
	Total	N/A	54%	25,544	21,381	\$30,469,886			

\* Diagnosis refers to the principal diagnosis.

\*\* Includes both emergent and non-emergent ER visits payments, facilities with at least one emergent visit, out of state locations, and urgent care centers. CMO Plan Paid Amount is the amount the plan pays to providers. Net Payment is the amount DCH pays providers.

Note: Emergent and Non-emergent visits are defined by diagnosis codes. ER visits are a count of unique patient and service day combinations. Unique count total may be different from the same day. All COVID-19 related diagnosis for 2020 and 2021 are considered Emergent.