

CBM-1

UTILIZATION STATISTICS INSTRUCTIONS

INPATIENT DISCHARGES

For the projected actual and budget fiscal years, provide inpatient discharge totals for the five payor groups for acute and the Distinct Part Unit(s)*.

NOTE: Include Hospice on line 1 and line 4 with acute.

Do **NOT** include nursery discharges in the calculations. **Nursery discharges to be EXCLUDED are MS-DRG 794 and 795 with revenue code 170 and 171.**

NOTE: Out-of-State Medicaid should be reported in the **Medicaid payor class** and **DOL Black Lung** should be **reported in Medicare or the Other Governmental** payor class as determined by the primary payor.

*The Authority no longer sets Distinct Part Unit rates. The data for the Distinct Part Units are **NOT** to be included with acute care data. The data for all of the hospital's Distinct Part Units should be combined and included under the category of "**Hospital Distinct Part Units**".