

**Maryland 2001  
Hospital Discharge Data from General Hospitals  
For Maryland Residents with Cancer Diagnoses**

Center for Cancer Surveillance and Control  
Maryland Department of Health and Mental Hygiene  
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## Highlights of the 2001 Maryland hospital discharge data:

- 3.3% of all Maryland hospital discharges in 2001 had a primary diagnosis of cancer. Of the 613,529 Maryland hospital discharges in 2001, 33,926, or 5.5% had cancer listed in any one of the 15 discharge diagnostic categories. Of these 33,926 discharges, 20,518 (3.3% of all discharges) had cancer as the primary diagnostic category.
- 9,056 of 20,518 (44.1%) of hospital discharges for cancer as a primary diagnosis in Maryland have one of the Cigarette Restitution Fund (CRF) targeted cancers as the primary diagnosis, i.e., lung and bronchus, colon and rectum, prostate, female breast, oral, melanoma, and cervical.
- The total hospital costs for Maryland residents in whom the primary diagnosis on discharge was any type of cancer was \$273,797,246. See caveats in Definitions and Notes as to why this is an underestimate of the total cost.
- Among the targeted cancers, total hospital-specific costs (not including physician fees and laboratory fees) in 2001 had a median cost of \$8,584 per hospitalization for all targeted cancers together.
- At the top of the cost list is colon and rectum cancer, having a median total hospital cost of \$11,835; the second highest cost was lung and bronchus with a median cost of \$10,512, followed by oral cancer with a median of cost of \$9,984.

## Background

The Cigarette Restitution Fund (CRF) in Maryland required that funding be provided to local health departments in Maryland's 23 counties and to Johns Hopkins Medical Institutions and the University of Maryland Medical Group in Baltimore City after the jurisdictions submitted plans for Cancer Prevention, Education, Screening, and Treatment. The CRF law requires that DHMH determine "targeted cancers," The targeted cancers selected were lung, colorectal, female breast, prostate, oral, cervical, and melanoma.

The CRF law also requires that the local screening programs either pay for treatment of clients or link clients to treatment if they are diagnosed with a targeted or non-targeted cancer identified through the screening. Because of this requirement, determining the costs of cancer care is important for CRF planning in Maryland.

Maryland's hospital rates are regulated by the Health Services Cost Review Commission (HSCRC). Among other data, the HSCRC collects data from hospitals in Maryland about each hospital discharge and uses these data

to determine the rates allowed for that facility. Because costs of hospitalization account for a major portion of the cost of cancer treatment, we sought to determine the number of hospitalizations and the cost of those hospitalizations among the residents of Maryland who have been discharged from reporting Maryland hospitals with a diagnosis of cancer.

The analysis presented in this document is designed to help planners at DHMH and the local programs allocate CRF funds among cancer prevention, education, screening, and treatment.

## **Methods**

General hospitals in Maryland report a standard set of information to the Health Services Cost Review Commission (HSCRC) on each hospital discharge. The HSCRC maintains a database, by year, of this information and makes available a database containing non-confidential (unidentified) discharge information for analysis.

DHMH staff analyzed the calendar year 2001 discharge file using SAS software.

Data obtained from HSCRC is secure from unauthorized access and disclosure. DHMH manages and releases this information in accordance with the HSCRC Data Use Agreement. Cells with counts of 0-5 hospital discharges are suppressed and presented as "<6." Complementary suppression of discharge counts in additional cell(s) is used, denoted by "s," to prevent back-calculation of numbers in those cells with primary suppression.

## **Definitions and Notes**

**"General hospital"** means any of Maryland's 66 general hospitals. These exclude specialty hospitals such as chronic care, rehabilitation, psychiatric, Veterans, or orthopedic hospitals.

**"ICD-9"** codes mean codes from the International Classification of Disease 9<sup>th</sup> Revision, Clinical Modification 2001 code book (AMA Press, July, 2000).

**"Any cancer"** means having an International Classification of Disease (ICD-9) code denoting cancer in the hospital discharge dataset. ICD-9 codes that denote primary or secondary cancer are found in Attachment 1.

**"Targeted cancer"** means one of seven cancers selected as "targeted" under the Cigarette Restitution Fund program. These include lung, colorectal, female breast, prostate, cervical, oral, and melanoma, and their ICD-9 codes are found in Attachment 1.

**“All other cancers” or “Non-targeted cancers”** mean all other cancers found in the list in Attachment 1 other than the targeted cancers—and do include secondary cancers.

**“Secondary cancer”** means having an ICD-9 code of 197.0–198.99 that denotes secondary cancer in various sites.

**“Diagnostic position” or “Diagnosis category.”** Upon discharge from a hospital, the hospital codes each individual discharge by up to 15 diagnostic ICD-9 codes that reflect the diagnoses the patient has. The coding instructions to the hospital state that the *primary diagnosis* is the “condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital.”

When an ICD-9 code appears in a “secondary,” “tertiary,” or subsequent diagnostic category, it is less certain the patient was admitted *because of* that diagnosis or whether this is another diagnosis the patient has that is *unrelated to* this hospitalization. For example, a patient admitted for a heart attack will have “myocardial infarction” coded as the primary diagnosis; if the patient *also* has colorectal (CRC) cancer, colorectal cancer may be coded in one of the subsequent diagnostic categories. Having a diagnosis in a secondary, tertiary, or subsequent diagnostic category may or may not indicate that the hospitalization was *due to* the cancer for purposes of attributing the reason for or the costs of the hospitalization to that cancer.

We have chosen to use “cancer as the primary diagnosis” in most of the tables and figures because we were certain that those represented a hospitalization *due to* that cancer. We recognize that these data are an *underestimate* of the total number of hospitalizations due to that cancer. Ideally, we would include the cancer-related causes of hospitalization but the exact number of these is difficult or impossible to determine.

**“Hospital discharge” versus “Patient discharge.”** In one year of HSCRC hospital discharge data, each hospital discharge is listed as a separate record. The analyses contained in this document looked at *hospital discharges*. Some patients may have been hospitalized more than once during the period and are thus counted more than once in our analysis. Because the HSCRC database does not have identifiers, it is not possible to determine whether a patient had one or multiple hospital discharges within that year and we could *not* analyze based on the number of *patients* discharged from Maryland hospitals in that period.

**“Jurisdiction of residence”** is the Maryland location where the hospitalized patient was noted to reside when admitted to the hospital. These include Maryland’s 23 counties and Baltimore City.

**“Total costs”** are the total costs billed for the hospitalization, such as room, pharmacy, radiology, laboratory, operating room, and central supply costs, but excluding costs that are not part of the hospital bill, such as the physician, internist, oncologist, or surgeon, or laboratory. Hospitalizations for which the total costs were zero dollars were removed from the dataset for this analysis because they likely reflected patients who were not actually admitted. The amount paid for the services will be the entire amount or 94%-96% of the amount if the insurer receives a discounted rate; Medicare and Medical Assistance receive the 6% reduction in the rate.

**“Primary source of payment”** and **“Secondary source of payment”** mean the first and second sources of payment for the hospitalization as declared by the patient at the time of admission. Because this is declared on admission, it may not accurately reflect who actually is billed for the hospitalization after discharge. For example, a patient may lose insurance coverage, or may have said “self pay” but be found eligible for Medical Assistance and therefore not be billed for the hospitalization.

**Number of hospital discharges—confidentiality considerations.** Because of confidentiality restrictions on the use of the non-confidential dataset, all cells in the tables with a number less than 6 (i.e., 0-5) were suppressed and presented as “<6.” Complementary suppression of discharge counts in additional cell(s) is used, denoted by “s,” to prevent back-calculation of numbers in those cells with primary suppression.

## Results

Figure 1 compares the number and percent of discharges of Maryland residents from General Hospitals in Maryland where any cancer is listed in any of 15 diagnosis positions, with the number of discharges where cancer was not among any of the listed diagnoses. Of the hospital discharges in 2001, 33,926 of 613,529, or 5.5%, had a cancer listed in one or more of the diagnostic categories; 20,518 discharges, or 3.3%, had cancer listed as the primary diagnosis.

Figure 2 plots the total number of hospital discharges where cancer was listed as the primary diagnosis by the jurisdiction of residence of the patient. Total number of hospital discharges ranged from 72 discharges for Garrett County to a high of 4,240 discharges for Baltimore County residents.

Figure 3 depicts the crude rate of general hospital discharges where cancer was listed as the primary diagnosis per 10,000 population for the jurisdiction, showing a range of 21.6 hospitalizations with a primary diagnosis of cancer in Prince George's County to a high of 72.7 per 10,000 population in Talbot County.

Figures 5 through 11 show the total hospital costs for all of the targeted cancers. These figures also show that based on median hospital costs, the targeted cancers that are the most expensive to treat are colon and rectum, lung, and oral cancers.

Table 1 analyzes each of the 15 diagnostic positions separately and asks whether any type of cancer was coded in that diagnostic position. Those listed in the primary diagnostic position (20,518 discharges) were most likely people hospitalized for that diagnosis. For discharges where cancer is listed in a 2<sup>nd</sup> through 15<sup>th</sup> position, the discharge may have already been counted in that same cancer under the primary diagnosis, under another cancer, or under an entirely different diagnosis. Therefore, one cannot add the columns to get a total number of hospitalizations for that cancer. In a percentage of the hospitalizations where cancer is listed in 2<sup>nd</sup> through 15<sup>th</sup> diagnostic category, the reason for the hospitalization will be because of that cancer; however, determining that percentage is difficult. Additionally, the next to the last column in Table 1 lists the number of hospitalizations for which "metastatic cancer" is listed as the primary or other diagnostic position.

About half (44.1%) of hospital discharges in Maryland where primary or metastatic cancer is listed as the primary diagnosis have one of the targeted cancers as the primary diagnosis. Examining the row of Primary Diagnosis, of Table 1 reveals targeted cancers (lung, colon and rectum, prostate, female breast, oral, melanoma, and cervical) contribute a total of 9,056 of 20,518, or 44.1%, of total discharges where cancer is listed as the

primary diagnosis. By way of comparison, metastatic cancers are listed as the primary diagnosis 4,111 of 20,518, or 20.0%, of these discharges.

Table 2 gives a breakdown of discharges in Maryland, where cancer was listed as the primary diagnosis by type of cancer and jurisdiction among the 20,518 discharges where cancer was the primary diagnosis.

The total of hospital costs for patients where cancer was the primary diagnosis is shown in Table 3. The HSCRC data gives the sum of the total hospital costs. Listed for each cancer are the number of discharges, the mean, median, minimum, and maximum costs, and the total hospital costs for that cancer. Hospital costs do *not* reflect physician and other costs that are billed separately. The total hospital costs for Maryland residents in whom the primary diagnosis on discharge was any type of cancer was \$273,797,246 (see Definitions and Notes as to why this is an underestimate of the total cost).

Besides providing data about hospital costs for all cancer types, Table 3 further reveals information about the relative cost burden or cost of treatment among the seven targeted cancers. Median costs were used for comparing and ranking hospital costs. Total hospital costs (not including physician fees and some laboratory fees) in 2001 for all targeted cancers together had a median total cost of \$8,584 per hospitalization. Based on median hospital cost, the three targeted cancers with the highest hospital cost burden are, in order of cost: 1) colon and rectum (\$11,835), 2) lung and bronchus (\$10,512), and 3) oral (\$9,984).

Tables 4, 5, and 6, display the data on the number of hospital discharges and hospital costs by type of cancer for three different age groups: 40-49 year olds, 50-64 year olds, and for those residents 65 years and over. For the 49 and under age category, median total costs in 2001 were \$8,343; for discharges of persons ages 50 to 64, the median was \$8,089; for the age group 65 and over, the median cost for targeted cancers at discharge was \$9,072.

Tables 4, 5, and 6 further show that the median total hospital charges due to the seven targeted cancers decreased \$254 between the 49 and under and 50 to 64 age groups. The median total hospital charges due to the seven targeted cancers increased \$983 between the 50 to 64 and 65 and over age groups.

Figure 1.

**Total General Hospital Discharges among Maryland Residents for Calendar Year 2001  
(N=613,529)**

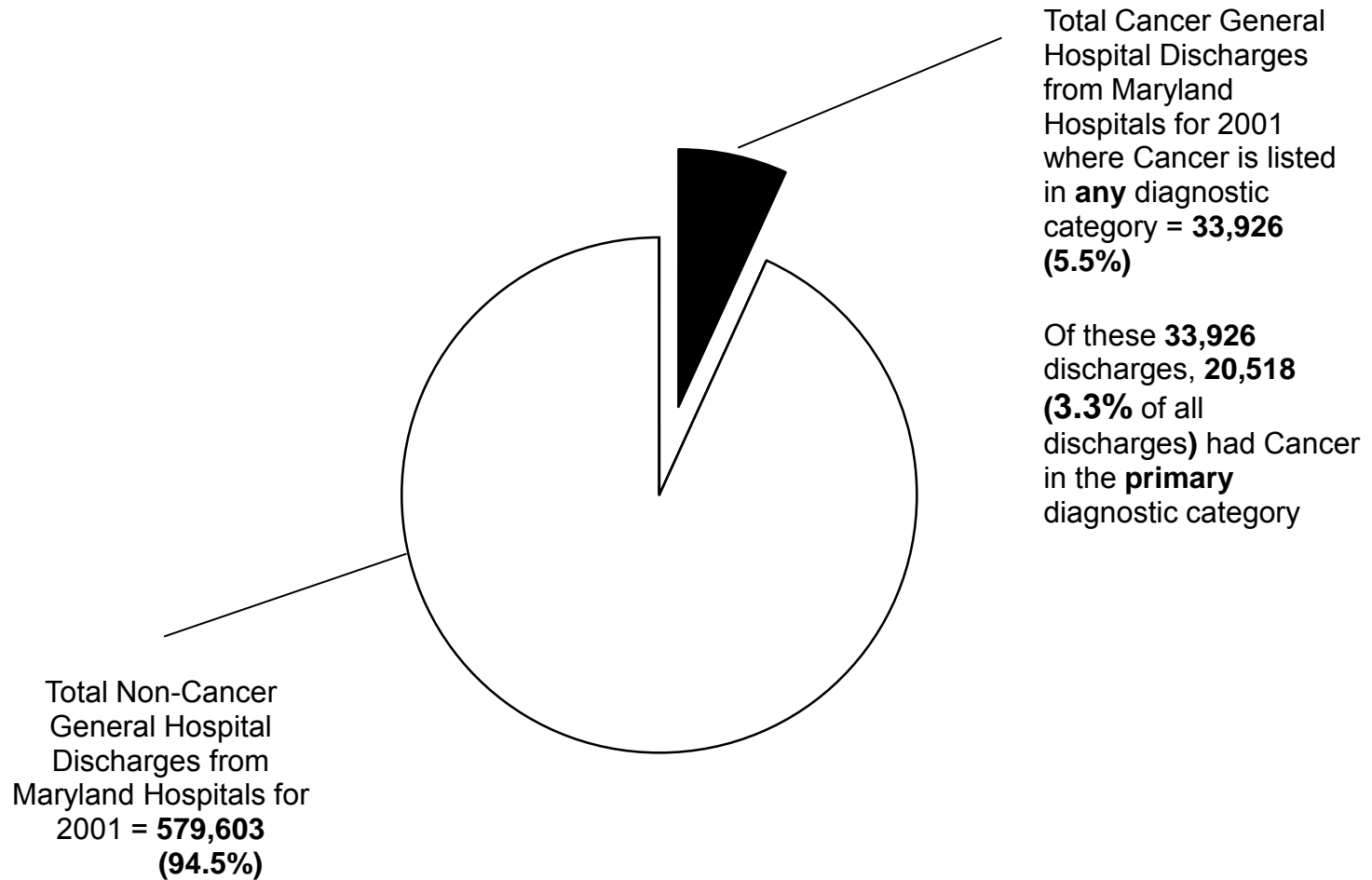




Table 1.

**Frequency of General Hospital Discharges in 2001 With Targeted and All Other Cancers Listed as the Primary Diagnosis\* and Subsequent Diagnoses\* among Maryland Residents**

Hospital diagnosis position where cancer is listed	Type of Cancer										
	Lung and Bronchus	Colon and Rectum	Female Breast	Prostate	Oral	Melanoma	Cervix	Total Targeted Cancer	Other Cancer	Metastatic Cancer	Total Cancer
as Primary Dx	2,600	2,625	1,675	1,528	320	93	215	9,056	7,351	4,111	20,518
as 2nd Dx	532	150	74	44	17	7	10	834	565	5,003	6,402
as 3rd Dx	157	49	64	55	s	22	<6	368	297	2,346	3,011
as 4th Dx	65	32	64	38	<6	11	<6	217	241	1,212	1,670
as 5th Dx	27	11	40	26	11	s	<6	125	136	599	860
as 6th Dx	14	<6	18	28	8	<6	<6	78	119	322	519
as 7th Dx	<6	<6	19	18	7	<6	<6	59	86	192	337
as 8th Dx	<6	<6	20	18	<6	<6	<6	49	67	100	216
as 9th Dx	<6	<6	7	8	<6	<6	<6	21	46	62	129
as 10th Dx	<6	<6	<6	12	<6	<6	<6	28	40	31	99
as 11th Dx	<6	<6	<6	<6	<6	<6	<6	10	25	17	52
as 12th Dx	<6	<6	<6	<6	<6	<6	<6	7	17	17	41
as 13th Dx	<6	<6	<6	<6	<6	<6	<6	<6	15	s	25
as 14th Dx	<6	<6	<6	6	<6	<6	<6	8	13	9	30
as 15th Dx	<6	<6	<6	<6	<6	<6	<6	<6	11	<6	17

<6=Cells containing 0-5 hospital discharges are suppressed per HSCRC Data Use Agreement.

s= Data in a cell is suppressed to prevent disclosure of data in other cell(s).

\* International Classification of Diseases, Version 9 (See Attachment 1)

Table 2.

**Frequency of General Hospital Discharges in 2001 With Targeted and All Other Cancers Listed as the Primary Diagnosis Among Maryland Residents  
by Jurisdiction of Residence**

Jurisdiction or County	Type of Cancer									
	Lung and Bronchus	Colon and Rectum	Female Breast	Prostate	Oral	Melanoma	Cervical	Other Cancer	Metastatic	Total
Allegany	44	52	18	16	<6	<6	<6	122	93	349
Anne Arundel	214	193	116	105	37	13	15	609	344	1,646
Baltimore County	558	540	301	292	59	23	42	1,558	867	4,240
Baltimore City	564	420	273	251	95	14	55	1,211	801	3,684
Calvert	29	35	24	22	<6	<6	<6	69	38	221
Caroline	11	26	16	9	<6	<6	<6	39	34	138
Carroll	88	104	60	66	10	9	7	286	159	789
Cecil	36	32	22	24	<6	<6	<6	84	58	264
Charles	49	44	24	25	7	<6	<6	105	63	320
Dorchester	37	18	19	14	<6	<6	<6	72	44	209
Frederick	53	105	49	59	<6	<6	<6	231	146	653
Garrett	6	16	12	<6	<6	<6	<6	21	12	72
Harford	129	101	68	71	9	9	7	315	159	868
Howard	58	98	73	51	11	<6	s	330	134	765
Kent	19	20	14	11	<6	<6	<6	47	22	140
Montgomery	200	287	251	216	s	<6	33	944	466	2,426
Prince George's	232	250	167	165	s	<6	28	593	297	1,755
Queen Anne's	22	21	13	16	<6	<6	<6	56	29	163
St. Mary's	26	38	25	15	10	<6	<6	76	24	215
Somerset	12	12	s	<6	<6	<6	<6	39	22	96
Talbot	23	36	39	20	6	<6	<6	60	61	248
Washington	59	80	61	33	6	<6	<6	202	99	543
Wicomico	61	49	10	17	<6	<6	<6	134	81	358
Worcester	62	44	10	18	<6	<6	<6	110	47	294
Maryland, Unspecified	8	6	<6	<6	<6	<6	<6	26	11	62
<b>Total</b>	2,600	2,625	1,675	1,528	320	93	215	7,351	4,111	20,518

<6=Cells containing 0-5 hospital discharges are suppressed per HSCRC Data Use Agreement.

s= Data in a cell is suppressed to prevent disclosure of data in other cell(s).

Figure 2. **Total of General Hospital Discharges in 2001 With Targeted and All Other Cancers Listed as the Primary Diagnosis, by Jurisdiction of Residence**

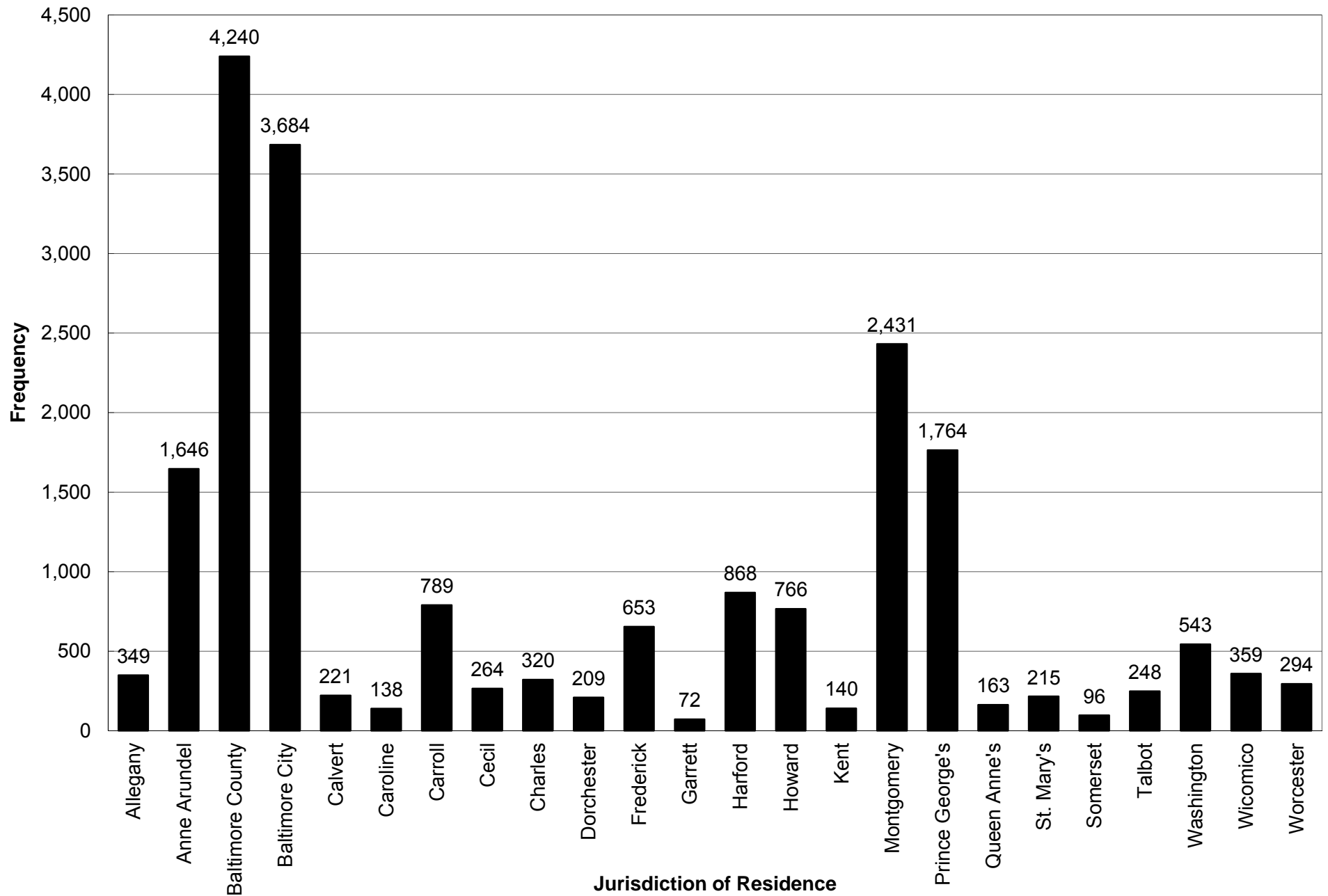


Figure 3. **Crude Rate of General Hospital Discharges per 10,000 Jurisdiction Population in 2001 With Targeted and All Other Cancers Listed as the Primary Diagnosis, by Jurisdiction of Residence**

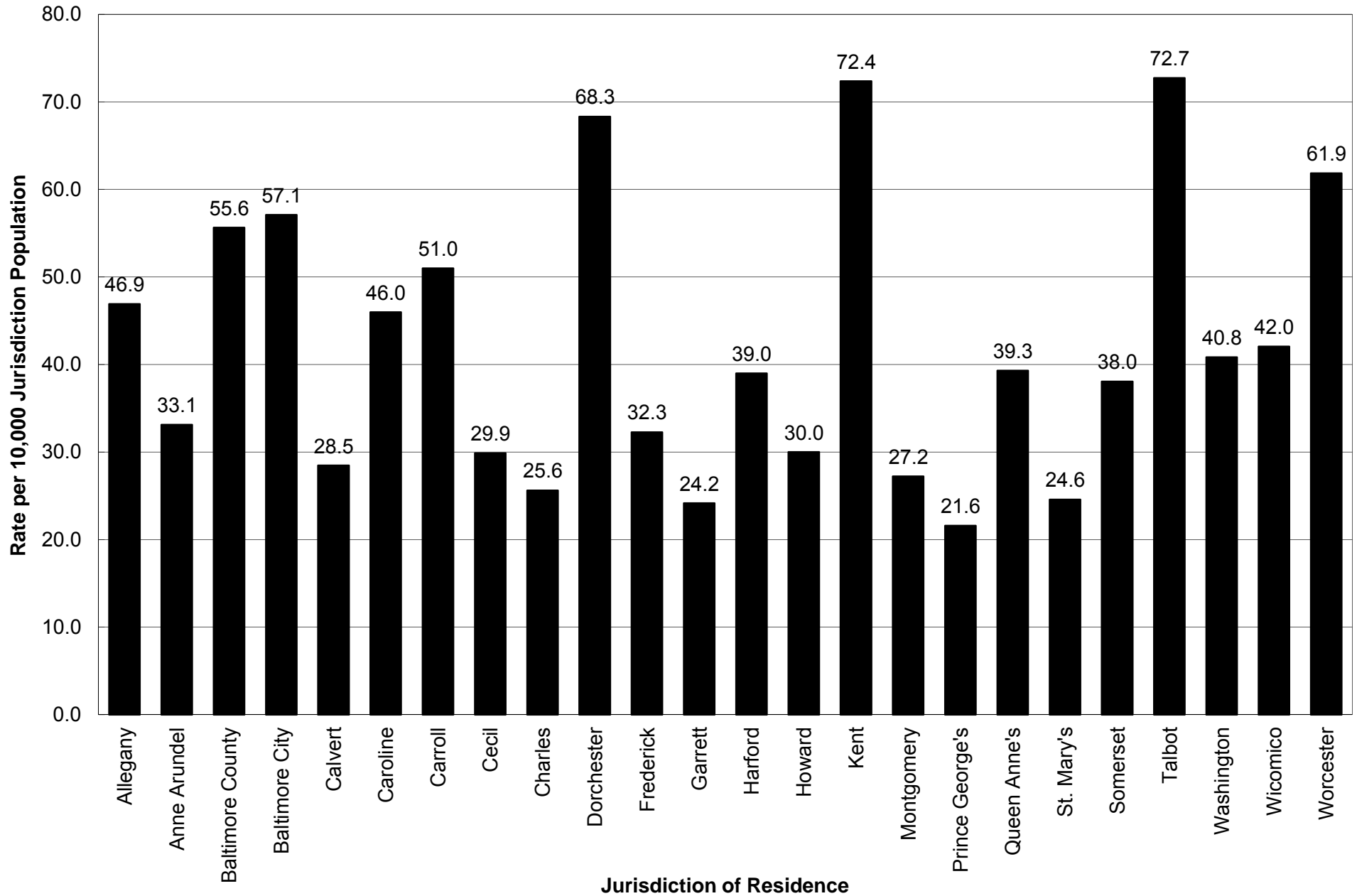
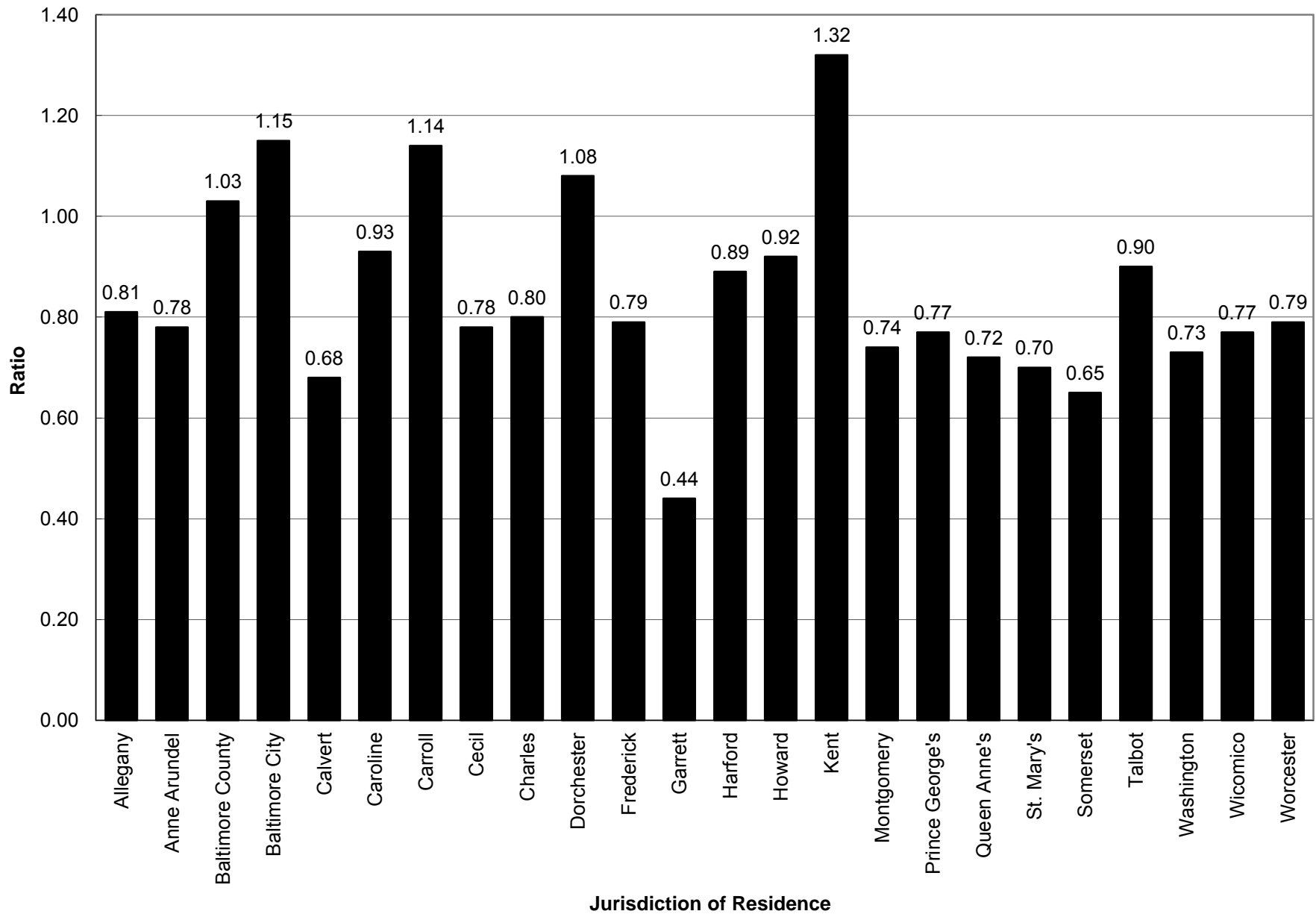


Figure 4.

**Ratio of General Hospital Cancer Discharges in 2001 With Targeted and All Other Cancers Listed as the Primary Diagnosis to the Number of All New Cancer Cases Reported\*, by Jurisdiction of Residence**



\* Total Cancer Cases reported to the Maryland Cancer Registry for 2001

Table 3.

**General Hospital Discharges in Maryland in 2001  
Costs\* by Type of Cancer Among Maryland Residents,  
Where Cancer is Listed as the Primary Diagnosis for All Ages**

Cancer	Total Discharges	Total Cost for Hospitalization				
		Mean	Median	Minimum	Maximum	Total
Lung and Bronchus	2,600	\$13,542	\$10,512	\$437	\$281,774	\$35,210,490
Colon and Rectum	2,625	\$15,392	\$11,835	\$377	\$159,199	\$40,404,784
Female Breast	1,675	\$6,763	\$5,069	\$542	\$127,458	\$11,327,794
Prostate	1,528	\$7,643	\$7,066	\$510	\$89,697	\$11,678,623
Oral	320	\$17,838	\$9,984	\$853	\$282,755	\$5,708,165
Melanoma	93	\$7,846	\$6,265	\$652	\$31,480	\$729,657
Cervix	215	\$10,351	\$7,315	\$847	\$92,320	\$2,225,449
<b>Total of Targeted Cancers</b>	<b>9,056</b>	<b>\$11,847</b>	<b>\$8,584</b>	<b>\$377</b>	<b>\$282,755</b>	<b>\$107,284,963</b>
<b>Total Other Cancers</b>	<b>11,460</b>	<b>\$14,530</b>	<b>\$8,713</b>	<b>\$338</b>	<b>\$616,548</b>	<b>\$166,512,283</b>
<b>Total of All Cancers</b>	<b>20,516</b>	<b>\$13,346</b>	<b>\$8,655</b>	<b>\$338</b>	<b>\$616,548</b>	<b>\$273,797,246</b>

\*Hospitalizations where the total costs was zero dollars were removed from this analysis.

Table 4.

**General Hospital Discharges in Maryland in 2001**  
**Costs\* by Type of Cancer Among Maryland Residents,**  
**Where Cancer is Listed as the Primary Diagnosis for Ages 49 and Under**

Cancer	Total Discharges	Total Cost for Hospitalization				
		Mean	Median	Minimum	Maximum	Total
Lung and Bronchus	184	\$15,151	\$11,669	\$1,257	\$129,847	\$2,787,765
Colon and Rectum	230	\$13,486	\$10,780	\$656	\$130,750	\$3,101,679
Female Breast	415	\$8,209	\$6,219	\$542	\$66,666	\$3,406,893
Prostate	78	\$7,742	\$7,341	\$3,883	\$21,181	\$603,859
Oral	75	\$17,087	\$9,311	\$1,592	\$107,626	\$1,281,509
Melanoma	20	\$8,372	\$6,557	\$2,390	\$26,893	\$167,446
Cervix	104	\$9,906	\$7,037	\$1,836	\$74,999	\$1,030,174
<b>Total of Targeted Cancers</b>	<b>1,106</b>	<b>\$11,193</b>	<b>\$8,343</b>	<b>\$542</b>	<b>\$130,750</b>	<b>\$12,379,325</b>
<b>Total Other Cancers</b>	<b>2,277</b>	<b>\$17,645</b>	<b>\$8,484</b>	<b>\$338</b>	<b>\$616,548</b>	<b>\$40,176,683</b>
<b>Total of All Cancers</b>	<b>3,383</b>	<b>\$15,535</b>	<b>\$8,391</b>	<b>\$338</b>	<b>\$616,548</b>	<b>\$52,556,008</b>

\*Hospitalizations where the total costs was zero dollars were removed from this analysis.

Table 5.

**General Hospital Discharges in Maryland in 2001**  
**Costs\* by Type of Cancer Among Maryland Residents**  
**Where Cancer is Listed as the Primary Diagnosis for Ages 50 to 64**

Cancer	Total Discharges	Total Cost for Hospitalization				
		Mean	Median	Minimum	Maximum	Total
Lung and Bronchus	822	\$13,722	\$11,010	\$503	\$151,618	\$11,279,889
Colon and Rectum	649	\$14,048	\$10,912	\$619	\$159,199	\$9,117,342
Female Breast	573	\$7,407	\$5,679	\$806	\$127,458	\$4,244,050
Prostate	781	\$7,787	\$7,189	\$912	\$52,698	\$6,081,628
Oral	110	\$18,954	\$12,104	\$1,502	\$119,244	\$2,084,925
Melanoma	24	\$8,468	\$6,907	\$652	\$31,480	\$203,232
Cervix	75	\$9,529	\$7,258	\$846	\$47,029	\$714,686
<b>Total of Targeted Cancers</b>	<b>3,034</b>	<b>\$11,116</b>	<b>\$8,089</b>	<b>\$503</b>	<b>\$159,199</b>	<b>\$33,725,752</b>
<b>Total Other Cancers</b>	<b>3,454</b>	<b>\$14,537</b>	<b>\$8,749</b>	<b>\$365</b>	<b>\$358,916</b>	<b>\$50,209,945</b>
<b>Total of All Cancers</b>	<b>6,488</b>	<b>\$12,937</b>	<b>\$8,374</b>	<b>\$365</b>	<b>\$358,916</b>	<b>\$83,935,697</b>

\*Hospitalizations where the total costs was zero dollars were removed from this analysis.



Table 6.

**General Hospital Discharges in Maryland in 2001**  
**Costs\* by Type of Cancer Among Maryland Residents,**  
**Where Cancer is Listed as the Primary Diagnosis for Ages 65 and Over**

Cancer	Total Discharges	Total Cost for Hospitalization				Total
		Mean	Median	Minimum	Maximum	
Lung and Bronchus	1,594	\$13,264	\$10,130	\$437	\$281,774	\$21,142,836
Colon and Rectum	1,746	\$16,151	\$12,442	\$377	\$143,809	\$28,296,503
Female Breast	687	\$5,352	\$4,329	\$683	\$62,535	\$3,676,851
Prostate	669	\$7,464	\$6,649	\$510	\$89,697	\$4,993,136
Oral	135	\$17,346	\$9,693	\$853	\$282,755	\$2,341,731
Melanoma	49	\$7,326	\$5,656	\$2,606	\$30,309	\$358,979
Cervix	36	\$13,350	\$8,752	\$1,819	\$92,320	\$480,589
<b>Total of Targeted Cancers</b>	<b>4,916</b>	<b>\$12,445</b>	<b>\$9,072</b>	<b>\$377</b>	<b>\$282,755</b>	<b>\$61,179,887</b>
<b>Total Other Cancers</b>	<b>5,729</b>	<b>\$13,288</b>	<b>\$8,777</b>	<b>\$472</b>	<b>\$262,199</b>	<b>\$76,125,655</b>
<b>Total of All Cancers</b>	<b>10,645</b>	<b>\$12,899</b>	<b>\$8,936</b>	<b>\$377</b>	<b>\$282,754</b>	<b>\$137,305,542</b>

\*Hospitalizations where the total costs was zero dollars were removed from this analysis.

Figure 5.

### Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001 Where Lung and Bronchus Cancer is Listed as the Primary Diagnosis

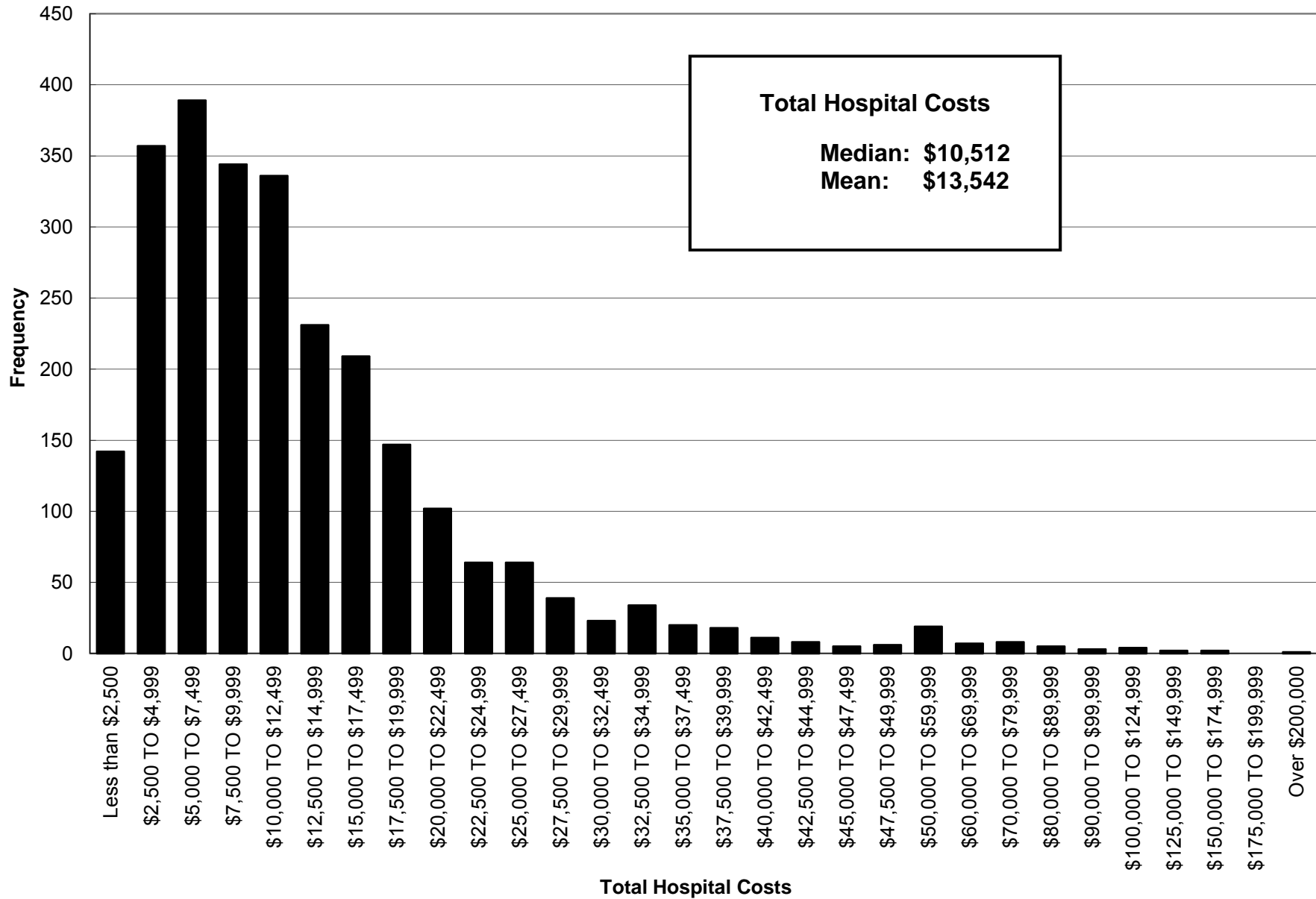


Figure 6.

**Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001  
Where Colon and Rectum Cancer is Listed as the Primary Diagnosis**

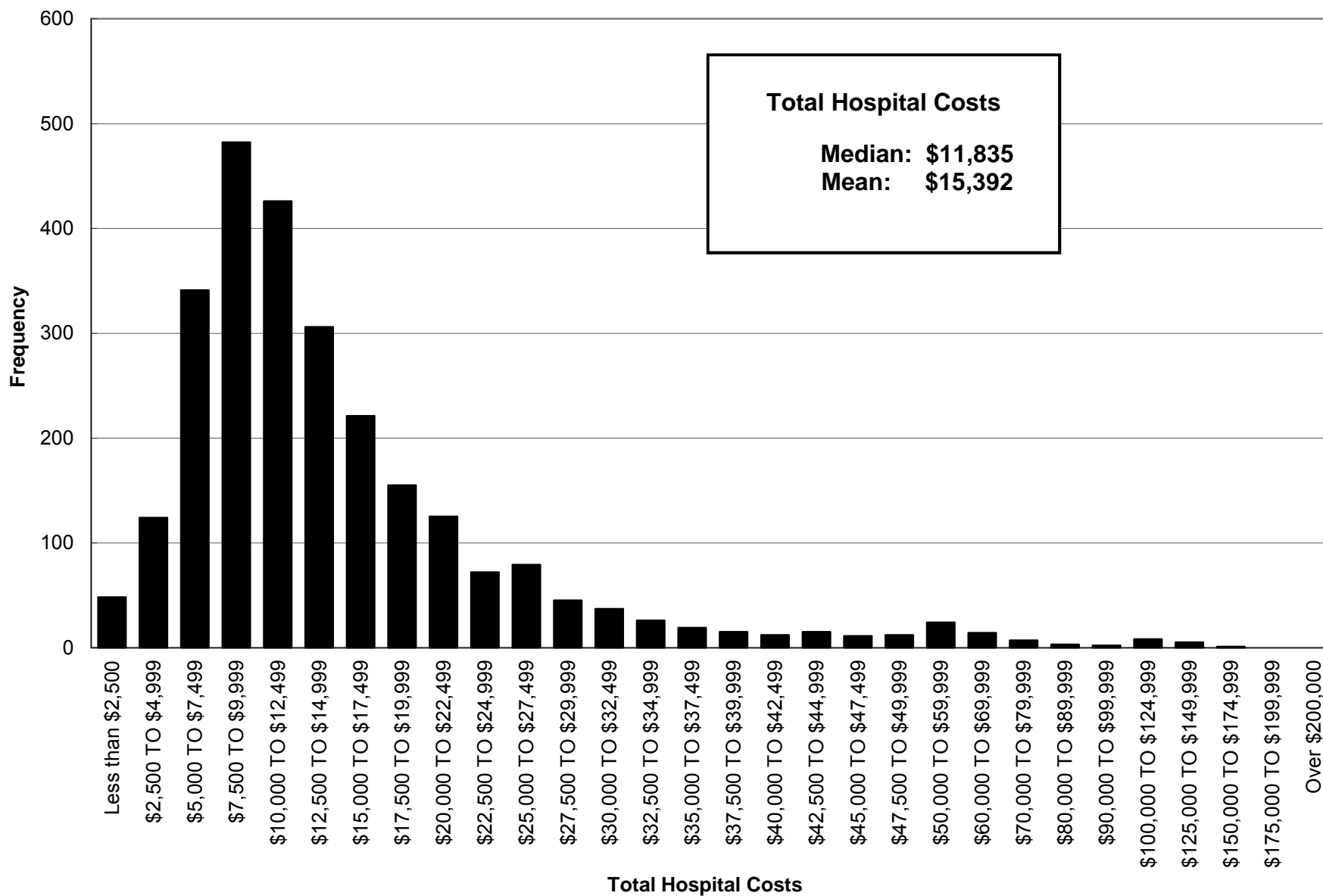


Figure 7.

### Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001 Where Female Breast Cancer is Listed as the Primary Diagnosis

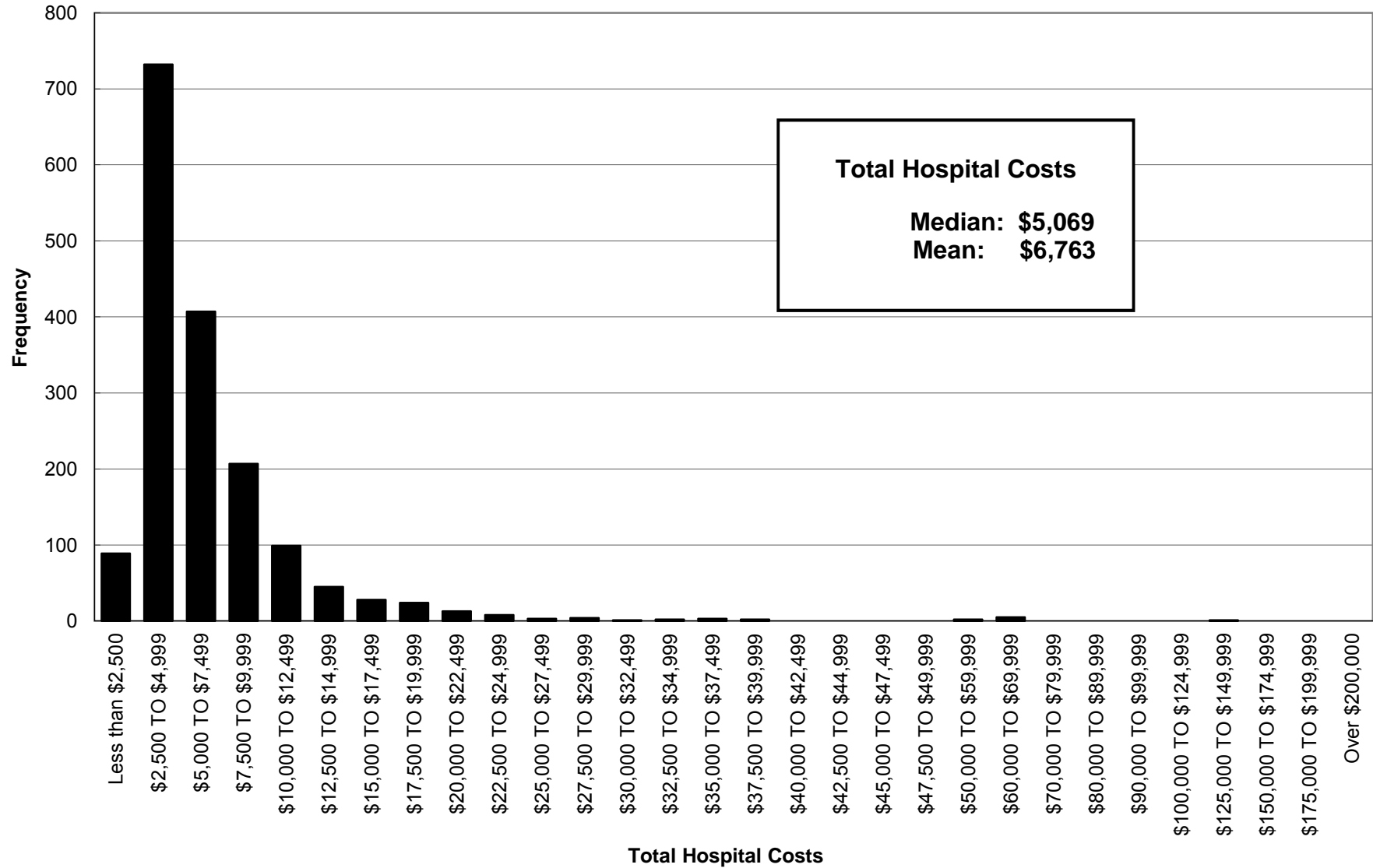


Figure 8.

**Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001  
Where Prostate Cancer is Listed as the Primary Diagnosis**

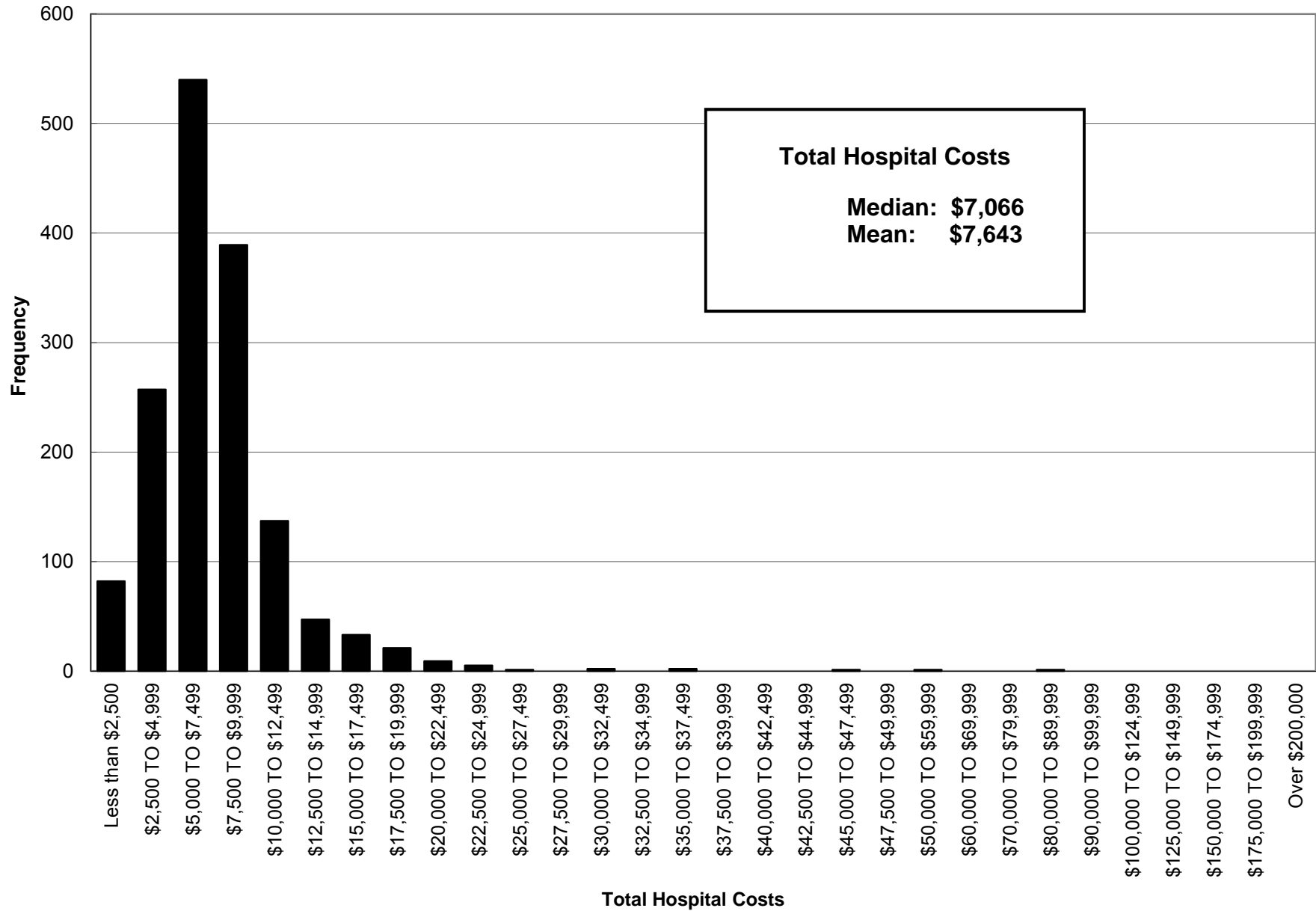


Figure 9.

**Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001  
Where Oral Cancer is Listed as the Primary Diagnosis**

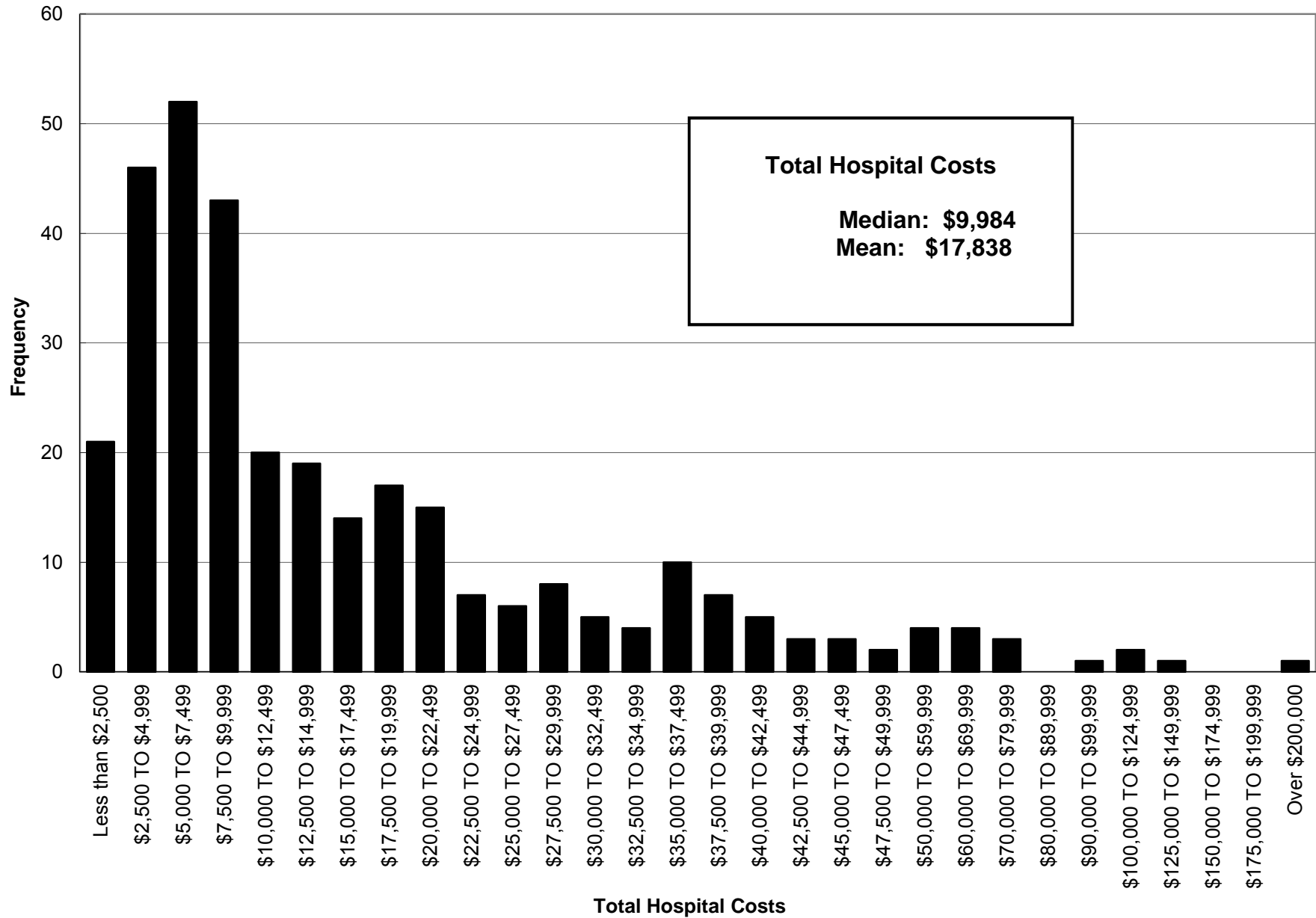


Figure 10.

### Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001 Where Melanoma is Listed as the Primary Diagnosis

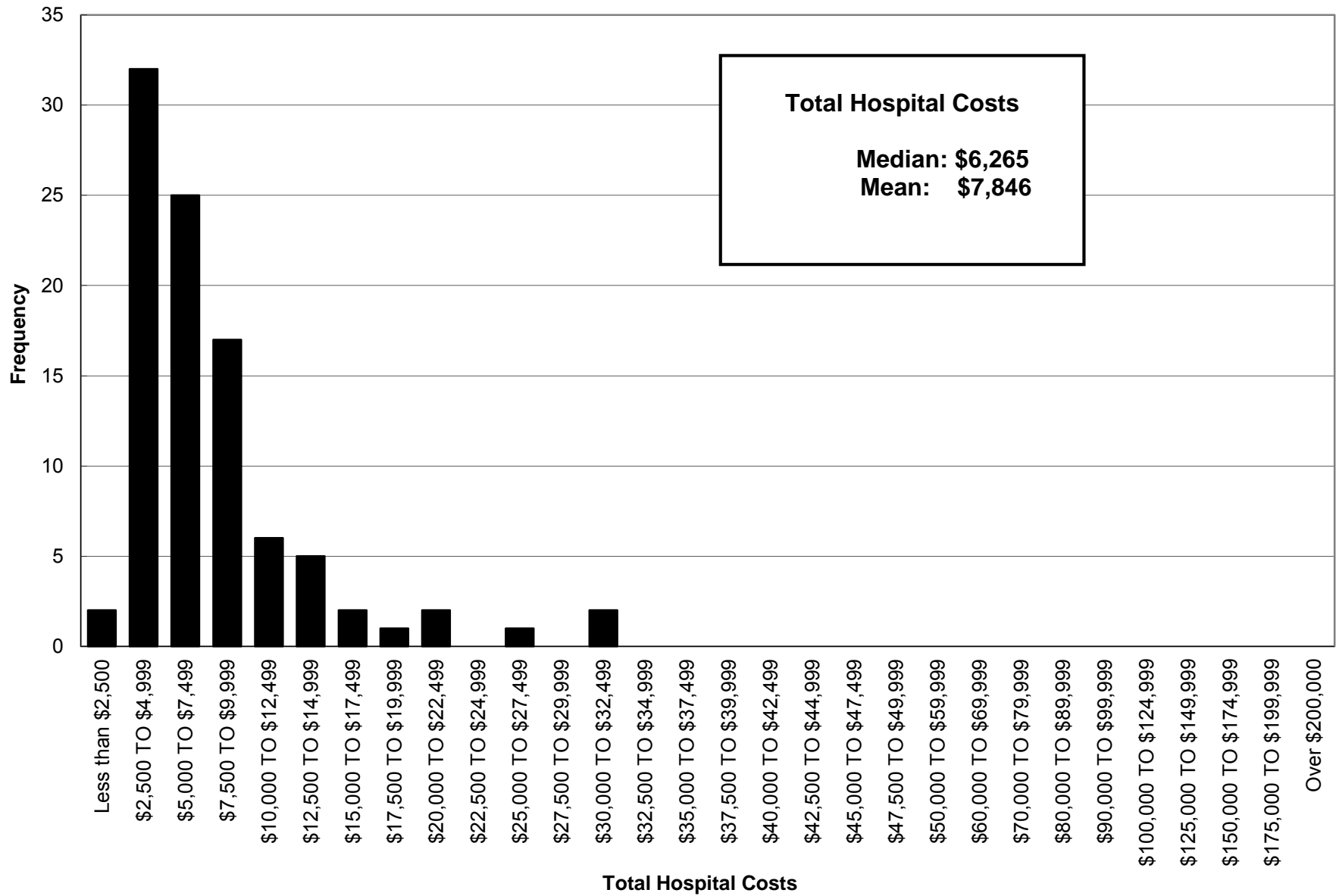


Figure 11.

### Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001 Where Cervix Cancer is Listed as the Primary Diagnosis

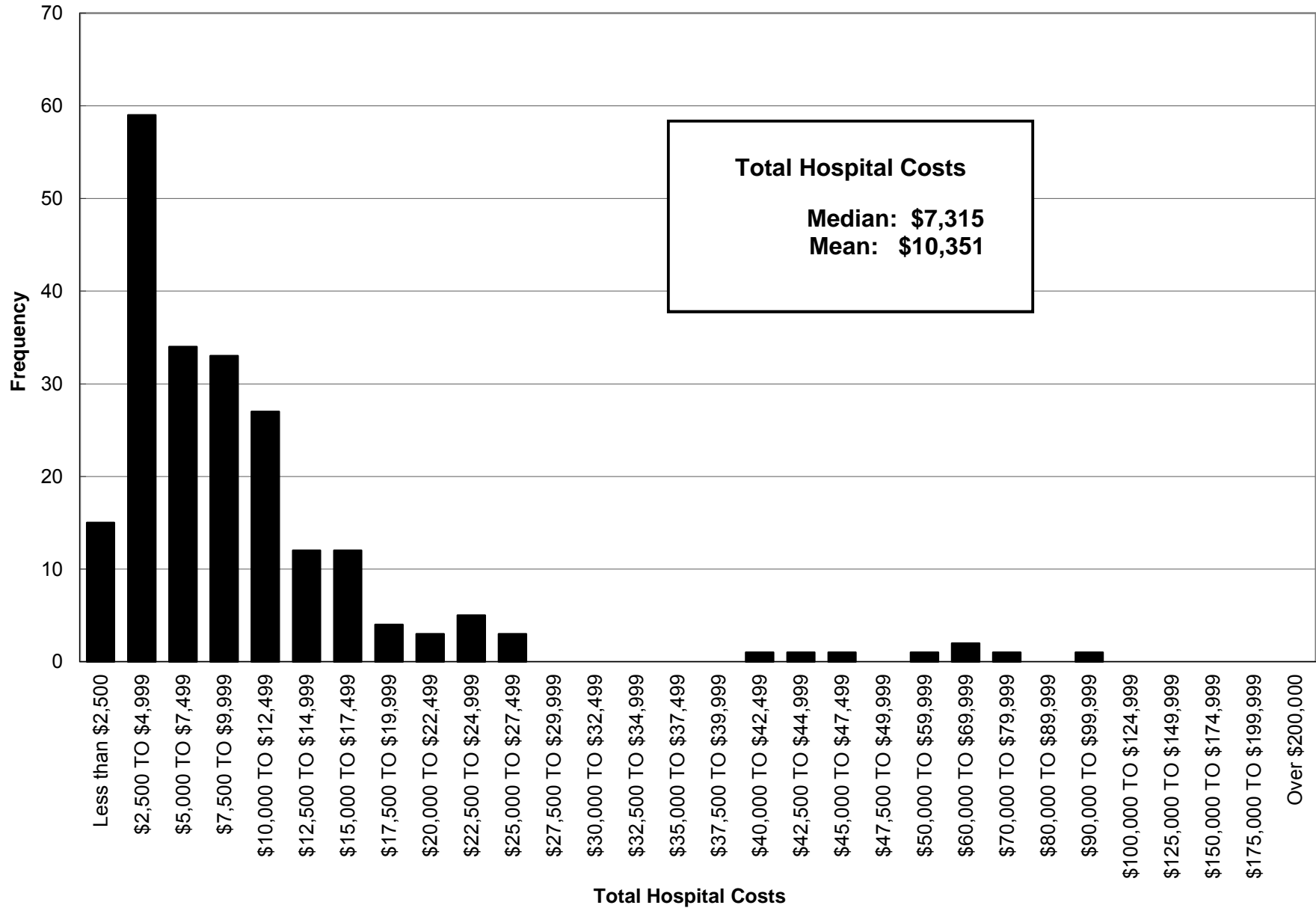




Figure 12.

**Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001  
Where Other Non-Targeted Cancer is Listed as the Primary Diagnosis**

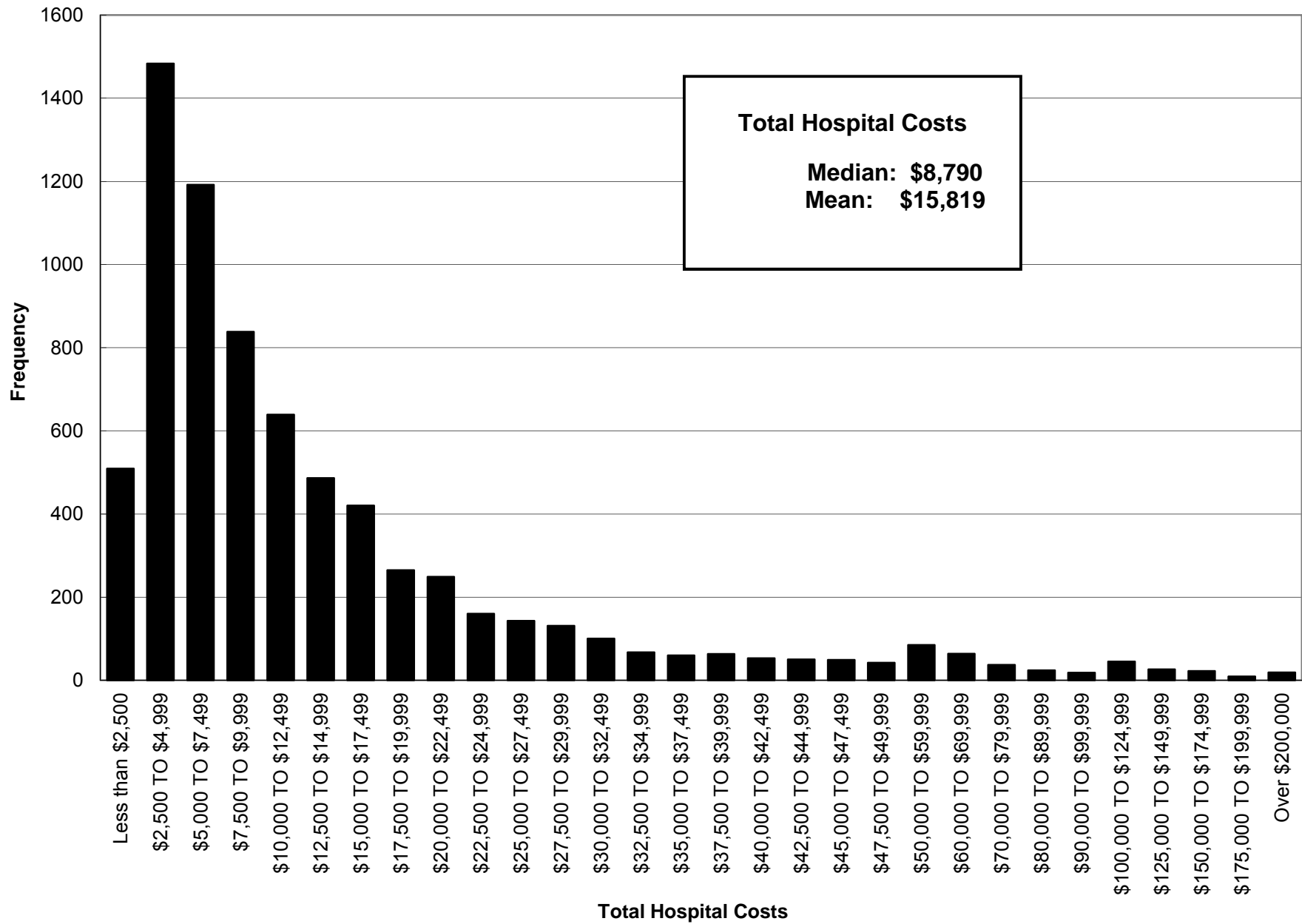


Figure 13.

### Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001 Where Metastatic Cancer is Listed as the Primary Diagnosis

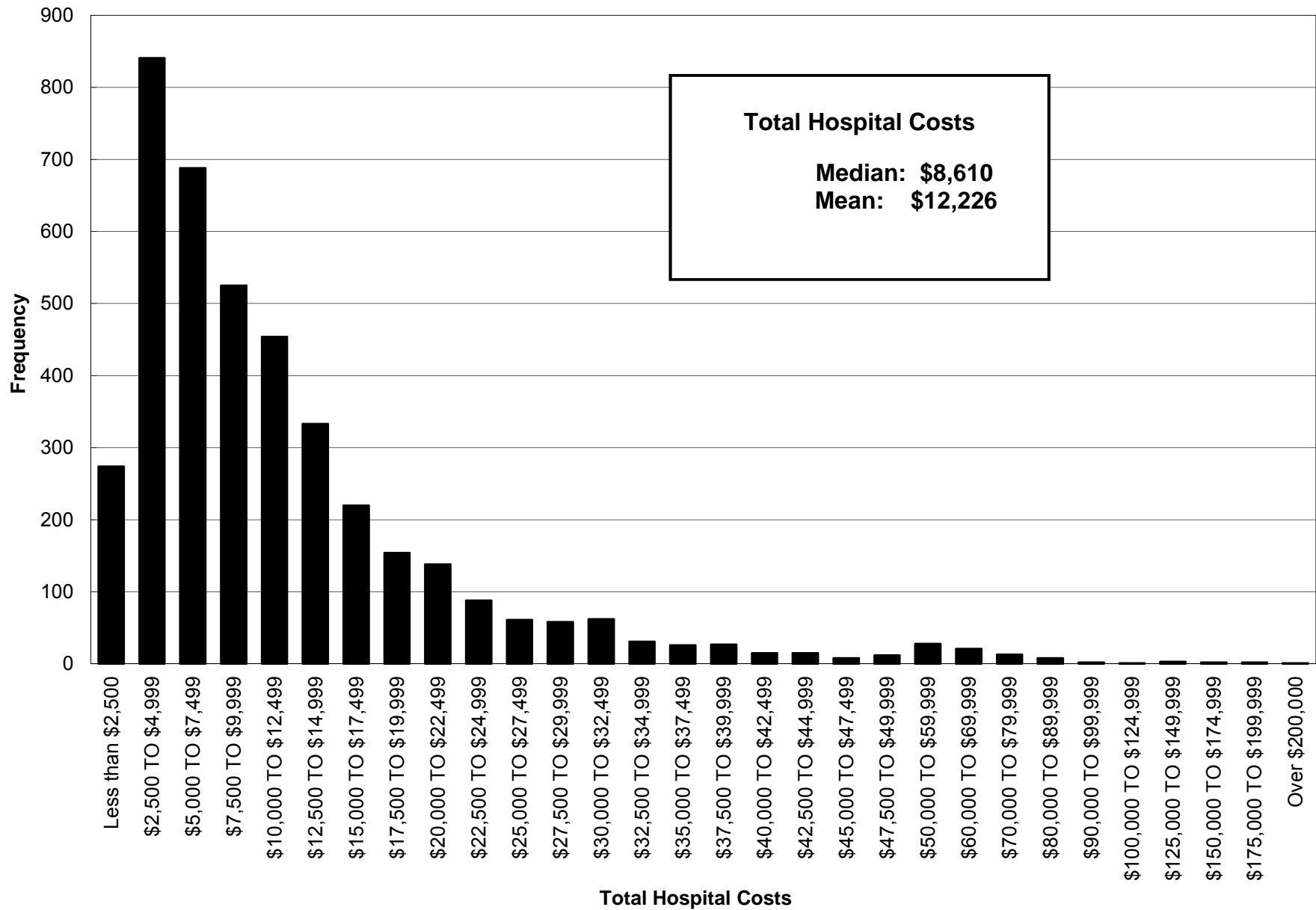
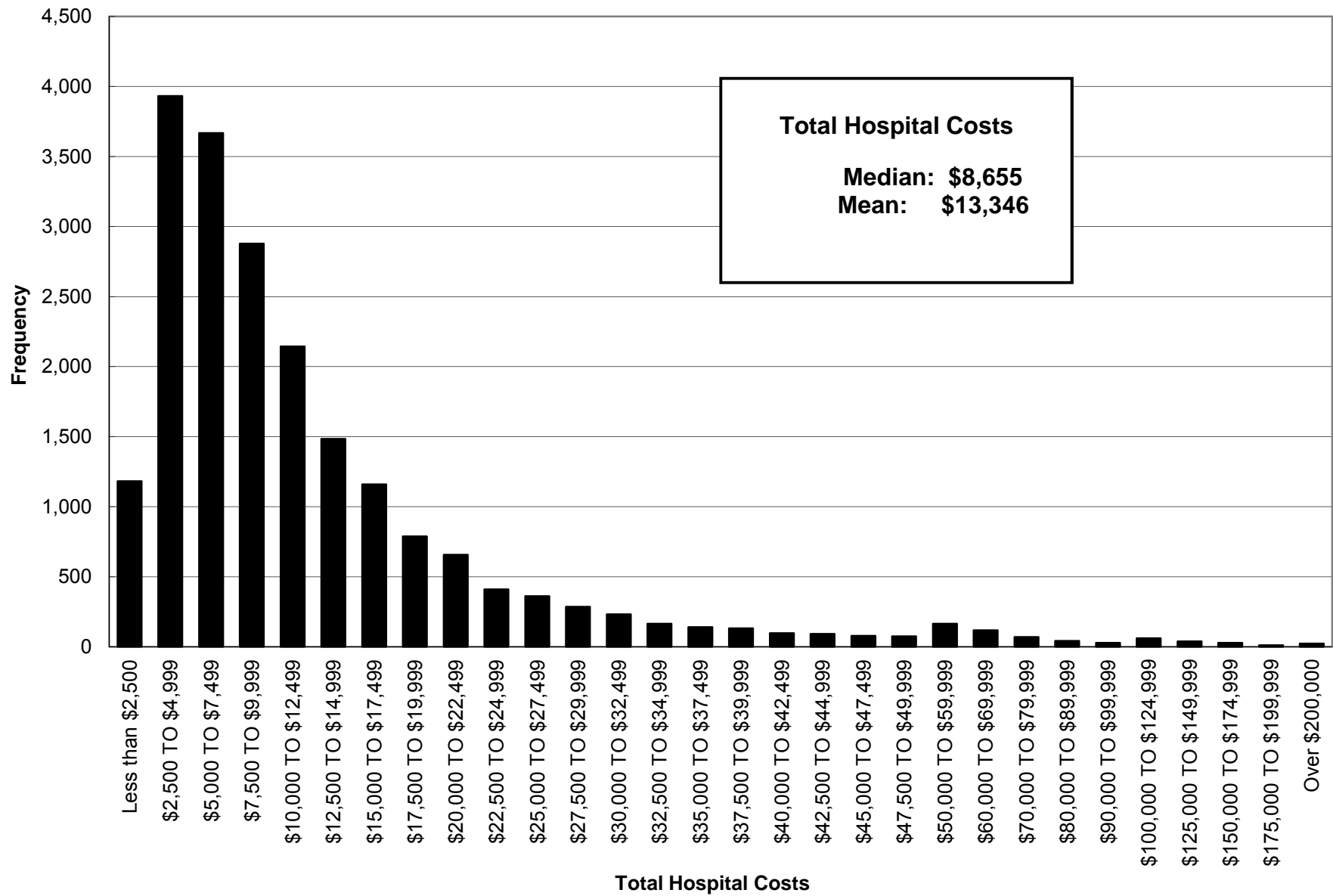


Figure 14.

**Frequency of Hospital Discharges by Category of Total Hospital Costs for 2001  
Where Any Type of Cancer is Listed as the Primary Diagnosis**



Attachment 1: International Classification of Diseases, Version 9 (ICD-9) Diagnostic Codes  
Used to Define "Targeted Cancers" in the Preparation of this Report

Targeted Cancer	ICD-9 Codes Included
Breast (female)	174.00 - 174.99
Cervix, Invasive	180.00 - 180.99
Colon and Rectum	153.00 - 154.19, 154.40 - 154.89
Lung and Bronchus	162.20 - 162.99
Melanoma	172.00 - 172.99
Oral	140.00 - 149.99
Prostate	185.00 - 185.99
All Other (Primary)	150.00 - 152.99, 154.20 - 154.39, 154.90 - 162.19, 163.00 - 171.99, 173.00 - 173.99, 175.00 - 179.99, 181.00 - 184.99, 186.00 - 195.99, 199.00 - 208.99
Metastatic (Secondary)	196.00 - 198.99
Total	140.00 - 208.99