

Table 3A.3.1.1.4: Number of Hospitalizations, Average Length of Hospital Stay (LOS), and Mean Hospital Charges¹ for Arthritis and Other Rheumatic Condition (AORC) Diagnoses Among Adults Age 18 & Older, by Geographic Region, United States, 2013

	Hospitalizations				
	Geographic Region				
	Total	Northeast	Midwest	South	West
Osteoarthritis and allied disorders (N in 1,000s)	2,946.5	515.0	792.3	1,114.9	524.3
Mean LOS (days)	4.4	4.6	4.2	4.4	4.1
Mean hospital charges (in 000s)	\$ 46.96	\$ 46.29	\$ 38.27	\$ 45.56	\$ 65.22
Total hospital charges (in billions)	\$ 138.4	\$ 23.8	\$ 30.3	\$ 50.8	\$ 34.2
Rheumatoid arthritis (N in 1,000s)	512.6	89.4	122.8	206.3	94.1
Mean LOS (days)	5.0	5.3	4.9	5.1	4.8
Mean hospital charges (in 000s)	\$ 46.50	\$ 46.21	\$ 37.27	\$ 44.87	\$ 62.99
Total hospital charges (in billions)	\$ 23.8	\$ 4.1	\$ 4.6	\$ 9.3	\$ 5.9
Gout and other crystal arthropathies (N in 1,000s)	856.3	166.2	210.3	317.8	162.0
Mean LOS (days)	5.4	5.6	5.3	5.4	5.1
Mean hospital charges (in 000s)	\$ 48.64	\$ 53.62	\$ 40.60	\$ 44.05	\$ 69.14
Total hospital charges (in billions)	\$ 41.7	\$ 8.9	\$ 8.5	\$ 14.0	\$ 11.2
Joint pain/effusion/other unspecified joint disorders (N in 1,000s)	1,126.6	169.6	297.5	478.6	180.8
Mean LOS (days)	5.1	5.6	5.0	5.0	5.1
Mean hospital charges (in 000s)	\$ 42.74	\$ 42.44	\$ 35.57	\$ 40.79	\$ 59.64
Total hospital charges (in billions)	\$ 48.2	\$ 7.2	\$ 10.6	\$ 19.5	\$ 10.8
Spondyloarthropathies (N in 1,000s)	493.4	81.7	121.1	188.2	102.5
Mean LOS (days)	4.6	4.9	4.5	4.5	4.5
Mean hospital charges (in 000s)	\$ 60.05	\$ 55.74	\$ 46.27	\$ 59.25	\$ 83.84
Total hospital charges (in billions)	\$ 29.6	\$ 4.6	\$ 5.6	\$ 11.2	\$ 8.6
Fibromyalgia (N in 1,000s)	442.0	66.3	119.8	175.1	80.9
Mean LOS (days)	4.6	4.8	4.4	4.6	4.5
Mean hospital charges (in 000s)	\$ 40.43	\$ 38.69	\$ 33.94	\$ 39.61	\$ 54.46
Total hospital charges (in billions)	\$ 17.9	\$ 2.6	\$ 4.1	\$ 6.9	\$ 4.4
Diffuse connective tissue disease (Sjögren's syndrome, SSC, SLE) (N in 1,000s)	265.0	48.5	55.8	111.0	49.7
Mean LOS (days)	5.4	5.9	5.1	5.4	5.4
Mean hospital charges (in 000s)	\$ 50.44	\$ 53.62	\$ 39.91	\$ 46.40	\$ 69.31
Total hospital charges (in billions)	\$ 13.4	\$ 2.6	\$ 2.2	\$ 5.2	\$ 3.4
Carpal tunnel syndrome (N in 1,000s)	37.2	6.6	9.8	12.5	8.3
Mean LOS (days)	4.5	4.8	4.5	4.4	4.4
Mean hospital charges (in 000s)	\$ 45.64	44.7	38.5	42.6	63.7
Total hospital charges (in billions)	\$ 1.7	\$ 0.3	\$ 0.4	\$ 0.5	\$ 0.5

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	Hospitalizations				
	Total	Geographic Region			
		Northeast	Midwest	South	West
Soft tissue disorders (excluding back) (N in 1,000s)	685.4	125.2	149.5	269.6	141.1
Mean LOS (days)	6.5	6.7	6.0	6.6	6.7
Mean hospital charges (in 000s)	\$ 58.80	\$ 59.11	\$ 46.32	\$ 56.11	\$ 81.13
Total hospital charges (in billions)	\$ 40.3	\$ 7.4	\$ 6.9	\$ 15.1	\$ 11.4
Other specified rheumatic conditions (N in 1,000s)	312.2	65.4	80.4	102.8	63.6
Mean LOS (days)	6.5	6.6	5.8	6.9	6.4
Mean hospital charges (in 000s)	\$ 59.55	\$ 60.57	\$ 44.86	\$ 57.39	\$ 81.89
Total hospital charges (in billions)	\$ 18.6	\$ 4.0	\$ 3.6	\$ 5.9	\$ 5.2
Total Stays with Any AORC Diagnoses (N in 1,000s)	6,403.7	1,134.4	1,621.7	2,482.0	1,165.6
Mean LOS (days)	4.9	5.2	4.7	5.0	4.8
Mean hospital charges (in 000s)	\$ 48.55	\$ 48.66	\$ 39.10	\$ 46.32	\$ 67.96
Total hospital charges (in billions)	\$ 310.9	\$ 55.2	\$ 63.4	\$ 115.0	\$ 79.2
Total Stays with Admitting (1st) AORC Diagnoses (N in 1,000s)	341.3	65.9	76.3	131.4	67.8
Mean LOS (days)	4.1	4.4	3.8	4.1	4.0
Mean hospital charges (in 000s)	\$ 54.76	\$ 50.10	\$ 43.44	\$ 52.93	\$ 70.94
Total hospital charges (in billions)	\$ 18.7	\$ 3.3	\$ 3.3	\$ 7.0	\$ 4.8
All Hospitalizations (N in 1,000s)	29,969.5	5,785.7	6,792.3	11,666.8	5,724.7
Mean LOS (days)	4.7	5.0	4.4	4.6	4.3
Mean hospital charges (in 000s)	\$ 42.69	\$ 41.66	\$ 32.08	\$ 36.80	\$ 51.81
Total hospital charges (in billions)	\$ 1,279.4	\$ 241.0	\$ 217.9	\$ 429.3	\$ 296.6
Proportion Total Hospital Charges Attributed to Stays with any AORC Diagnosis	24.3%	22.9%	29.1%	26.8%	26.7%
Proportion Total Hospital Charges Attributed to Stays with Admitting (1st) AORC Diagnosis	1.5%	1.4%	1.5%	1.6%	1.6%

[1] Average charges are based on individual record discharges. The fees included may vary from patient to patient, but generally include hospital room, supplies, medications, laboratory fees, and care staff, such as nurses. They generally do not include professional fees (doctors) and non-covered charges. In a small proportion of the discharge cases, professional fees (doctors) are not removed from total charges because the data source cannot provide the information. Emergency charges incurred prior to admission to the hospital may be included in total charges. Medicare requires a bundled bill for Medicare patients admitted to the hospital through the emergency department; other payers may or may not have similar requirements.

Source: HCUP National Inpatient Sample (NIS). Healthcare Cost and Utilization Project (HCUP). 2013. Agency for Healthcare Research and Quality, Rockville, MD. www.hcup-us.ahrq.gov/nisoverview.jsp