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DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES
CENTER FOR MEDICAID & CHIP SERVICES

OCT 22 2013

Stephen Fitton, Director
Medical Services Administration
Department of Community Health
400 South Pine
Lansing, MI 48933

RE: Michigan State Plan Amendment (SPA) 13-008

Dear Mr. Fitton:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 13-008. Effective for services on or after January 1, 2013, this amendment revises reimbursement methodology for inpatient hospital services.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the regulations at 42 CFR 447 Subpart C. We hereby inform you that Medicaid State plan amendment 13-008 is approved effective January 1, 2013. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Todd McMillion at (312) 353-9860.

Sincerely,

Cindy Mann,
Director

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTHCARE FINANCING ADMINISTRATION

FORM APPROVED
OMB NO. 0938-0193

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER: 13 - 08

2. STATE: Michigan

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
HEALTH FINANCING ADMINISTRATION
DEPARTMENT OF HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
January 1, 2013

5. TYPE OF PLAN MATERIAL *(Check One)*:

☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT *(Separate Transmittal for each amendment)*

6. FEDERAL STATUTE/REGULATION CITATION:
42 CFR 447, Subpart C

7. FEDERAL BUDGET IMPACT:
a. FFY 2013 $ 0
b. FFY 2014 $ 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:
Attachment 4.19-A, Pages 4, 8, 8a, 10, 14, 16, 17, 18, and Appendix A, Pages 1-30

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*:
Attachment 4.19-A, Pages 4, 8, 8a, 10, 14, 16, 17, 18, and Appendix A, Pages 1-30

10. SUBJECT OF AMENDMENT:
DRG Update and Per Diem Rebase

11. GOVERNOR'S REVIEW *(Check One)*:

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
☒ OTHER, AS SPECIFIED: Stephen Fitton, Director Medical Services Administration

12. SIGNATURE OF STATE AGENCY OFFICIAL:
Stephen Fitton

13. TYPED NAME:
Stephen Fitton

14. TITLE:
Director, Medical Services Administration

15. DATE SUBMITTED:
March 26, 2013

16. RETURN TO:

Medical Services Administration
Actuarial Division
Capitol Commons Center - 7th Floor
400 South Pine Street
Lansing, Michigan 48933

Attn: Loni Hackney

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

18. DATE APPROVED: OCT 22 2013

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: JAN 01 2013

20. SIGNATURE OF REGIONAL OFFICIAL:
Penny Thompson

21. TYPE NAME:
Penny Thompson

22. TITLE:
Deputy Director, Policy, Finance / Mgt. Ops

23. REMARKS:

FORM HCFA-179(07-92)

Instructions on Back

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Policy and Methods for Establishing Rates
Inpatient Hospital

(Relative Weight x DRG Price) + Outlier Payment

Each inpatient hospital claim is assigned to a DRG using the same DRG grouper version used to establish the relative weights.

A. Relative Weight:

A state wide relative weight is assigned to each DRG. The statewide relative weights are calculated using Medicaid and Children's Special Health Care Services Program Fee-For-Service (FFS) and Medicaid Health Plan (MHP) encounter inpatient paid claims for admissions during two consecutive state fiscal years and hospital specific cost report data drawn from two consecutive cost report years used to establish the relative weights.

The claim file was adjusted to:

1. Combine multiple billings for the same episode of service, including:

    a. Invoices from a single episode of service billed as a transfer from a hospital and an admission to the same hospital caused by a change of ownership and issuance of a new Medicaid ID number,

    a. Invoices for a single episode of service billed as a transfer from a hospital and an admission to a hospital created from a merger of two or more hospitals and the assignment of patient bills from multiple hospitals to a single Medicaid ID number.

2. Eliminate episodes with any Medicare charges (For dual Medicare/Medicaid eligible beneficiaries, only claims paid a full Medicaid DRG are included);

3. Eliminate episodes assigned to DRGs reimbursed by multiplying a hospital's inpatient operating cost to charge ration by charges;

4. Eliminate episodes without any charges or days;

5. Assign alternate weights for neonatal services. Two sets of weights are calculated for six (6) DRG classifications representing neonatal services (789-794). One set of weights is identified as "alternate weights" (789.1, 790.1, 791.1, 792.1, 793.1 AND 794.1). These alternate weights are calculated from episodes that are assigned to one of these DRGs and include charges for services in an intensive care unit of one of the hospitals designated as having a neonatal intensive care unit (NICU). The remaining claims assigned to these DRGs are used for the other set of weights.

    In order to receive the alternate weights, a hospital must have a Certificate of Need (CON) to operate a NICU or a special newborn nursery unit (SNNU) or the hospital must have previously received alternate weight reimbursement by Medicaid for its SNNU.

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d. The adjusted cost for each episode is calculated by multiplying the adjusted charges for the episode by the inpatient operating cost to charge ratio.

   1) Each hospital's Title XIX operating cost to total charge ratio is obtained from the hospital's filed cost reports for the fiscal year ending in the second year of the base period. If the cost to charge ratio is greater than 1.0, then 1.0 is used.
   2) If two or more hospitals merge, and are operating as a single hospital, a cost to charge ratio for the period is computed using the combined cost report data from all hospitals involved in the merger. Cost and charge data will be inflated to a common point in time.

e. The average cost for episodes within each DRG is calculated by dividing the sum of the costs for the episodes by the number of episodes within the DRG.

f. The relative weight for each DRG is calculated by dividing the average cost for episodes within each DRG by the average cost per episode for all episodes. A table showing the relative weights, average lengths of stay, and outlier thresholds for each DRG is included in Appendix A.

g. Bring all charges for discharges to the applicable time period through application of inflation and weighting factors.

Data for current wage adjustors are taken from hospital cost reporting periods ending between September 1, 2006 and August 31, 2008 for the base, and September 1, 2008 through August 31, 2010 for the update period. Each hospital's wage costs are adjusted for different fiscal year end dates by multiplying the hospital's wage costs by inflation and weighting factors. All wages are brought to a common point in time. Filed wage data is used for hospitals where audited data is not available. The following adjustment factors derived from the Global Insight PPS-Type Hospital Market Basket Index, employee cost component relative to the period, are used:

Fiscal Year Ending	Wage Inflation Factors	Base Weighting Factors	Update Weighting Factors
9/30/06	1.1681	0.40	
12/31/06	1.1588	0.40	
3/31/07	1.1489	0.40	
6/30/07	1.1443	0.40	
9/30/07	1.1341	0.60	
12/31/07	1.1228	0.60	
3/31/08	1.1038	0.60	
6/30/08	1.0966	0.60	
9/30/08	1.0849		0.40
12/31/08	1.0734		0.40
3/31/09	1.0583		0.40
6/30/09	1.0512		0.40
9/30/09	1.0410		0.60
12/31/09	1.0306		0.60
3/31/10	1.0175		0.60

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Policy and Methods for Establishing Rates – Inpatient Hospital

Fiscal Year Ending	Wage Inflation Factors	Base Weighting Factors	Update Weighting Factors
6/30/10	1.0102		0.60
8/31/10	1.0000		0.60

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Rates will be adjusted by an inflation factor of 1.120 for the period from August 31, 2009 to December 31, 2012.

5. Determine the DRG base price by:

   a. Calculate each hospital's limited base price. This is the lesser of the hospital specific base price or the mean of all base prices, plus one standard deviation.

   b. Calculate the statewide operating cost limitation. This is a truncated, weighted mean of all hospitals' limited base prices divided by base period discharges.

   c. The lesser of the truncated mean or the hospital specific base price then becomes the DRG base price (before the cost adjustor and incentives are added) for each hospital.

6. Calculate any incentive. For hospitals with base DRG prices below the operating limit (truncated mean), the hospital's base DRG price is increased by adding 10% of the difference between the hospital specific base price and the limit.

   Adjust each hospital's DRG base price, plus any incentive, by the updated cost adjustor. The updated cost adjustor is calculated, to reflect the most current data available, in the same manner as the base cost adjustor, except that:

   1. Wage data is collected using the source described within State policy for the rate-setting period.

   2. The wage and benefit inflation factors are derived from the employee cost component of the Global Insight PPS – Type Hospital Market Basket Index relative to the period.

   3. In the event that changes in federal regulations result in incompatible data between the base and update periods, adjustments are made either to the base or the update period to render the data comparable.

   4. A budget neutrality factor is included in the hospital price calculation. Hospital prices are reduced by the percentage necessary so that total aggregate hospital payments using the new hospital prices and DRG relative weights do not exceed the total aggregate hospital payments made using the prior hospital base period data and DRG Grouper relative weights. The estimate is based on one year's paid claims, including MHP encounter data with FFS rates applied. The calculated DRG prices are deflated by the percentage necessary for the total payments to equate to the amount currently paid. Budget neutrality for CAHS is determined as a group, independent of Non-CAHS.

   5. For payment purposes, a single cost to charge ratio is published on the MDCH website. The single cost to charge ratio is used for calculating payments paid a percent of charge, cost outliers, and low-day outliers. The ratio is calculated from the averages of FFS and MHP ratios, net of IME.

Readmissions for an unrelated condition, whether to the same or a different hospital, are considered separate episodes for payment purposes.

7. Percent of Charge Reimbursement

   The payment amount for claims that fall into DRGs 1, 2, 5, 6, 7, 8, 10, 14, 16, OR 17 is total hospital charges times the hospital's inpatient operating cost to charge ratio excluding IME.

   The ratio is the hospital's Title XIX inpatient operating cost to charge ratio as obtained from weighted filed cost reports for fiscal years ending between September 1, 2007 and August 31, 2009.

8. Hospitals Outside of Michigan

   Medical/surgical hospitals not located in Michigan are reimbursed under the DRG system. The DRG price is the statewide operating cost limit (truncated mean of base prices located in Michigan).

   Hospitals that have charges that exceed $250,000 during a single fiscal year (using the State of Michigan fiscal year – October 1st through September 30th) may be reimbursed the hospital's inpatient operating cost to charge ratio for those Michigan Medicaid DRGs reimbursed by percentage of charge. The hospitals' chief financial officer must submit and the MSA must accept documentation stating the hospital's Medicaid cost to charge ratio in the state that the hospital is located. Once accepted, the hospital's actual cost to charge ratio is applied prospectively to those DRGs and claims subject to percentage of charge reimbursement using the Michigan DRG payment system.

9. New Hospitals

   A new medical/surgical hospital is one for which no Michigan Medicaid program cost or paid claims data exists during the period used to establish hospital specific base rates or one which was not enrolled in the Medicaid program when hospital specific base prices/rates were last established. Hospitals that experience a change of ownership or that are created as the result of a merger are not considered new hospitals.

   The DRG base price for new general hospitals is the statewide operating limit until new DRG base prices are calculated for all hospitals using data from time periods during which the new hospital provided services to Medicaid beneficiaries.

D. Hospitals and Units Exempt from DRG Reimbursement

   1. Calculating Per Diem Rates

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Policy and Methods for Establishing Rates – Inpatient Hospital

1) Multiply the cost per day by the applicable inflation factor. Each hospital's costs are inflated to a common point in time. Inflation factors were obtained from the Global Insight PPS-Type Hospital Market Basket Index relative to the period.

Fiscal Year Ending	Cost Inflation Factors	Weighting Factors
9/30/08	1.0555	0.40
12/31/08	1.0462	0.40
3/31/09	1.0421	0.40
6/30/09	1.0412	0.40
9/30/09	1.0413	0.60
12/31/09	1.0337	0.60
3/31/10	1.0220	0.60
6/30/10	1.0103	0.60
8/31/10	1.0000	0.60

Rates will be adjusted by an inflation factor of 1.076 for the period from August 31, 2010 to DECMBER 31, 2012.

The inflation update for the quarter in which the hospital's fiscal year ends is used.

2) Recognize area cost differences by dividing the cost per day for each hospital by an area cost adjustor factor. Hospitals are grouped by U.S. Census Core Based Statistical Area (CBSAs) as determined by the Centers for Medicare and Medicaid Services for the Medicare program for wage data. Each area cost adjustor is calculated as follows:

COST ADJUSTOR= 0.71066 X WAGE ADJUSTOR + 0.28934

The cost adjuster formula reflects Medicare estimate of labor-related costs as a portion of total hospital costs as published in the Federal Register.

3) Each area wage factor is area wage per full-time equivalent (F.T.E.) divided by the statewide average hospital wage per F.T.E. Contract labor costs are included in determining a hospital's wage costs.

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State of MICHIGAN

Policy and Methods for Establishing Rates – Inpatient Hospital

To determine the per diem rate:

- Calculate the statewide operating cost limit (by provider type). This is a weighted mean of all hospital' specific base prices weighted by base period days (truncated mean), multiplied by the appropriate percentage.
    - For freestanding rehabilitation hospitals the percentages is 150%
    - The 50th percentile is determined by calculating a standardized rate for each unit. The standardized rates for all enrolled Michigan units are sorted in ascending order. The standardized rate of the first unit after the 50% of the units listed becomes the statewide 50th percentile.
    - For distinct part rehabilitation units the percentage is 200%
- Calculate the statewide operating cost minimum (by provider type). This is a truncated, weighted mean of all hospitals' specific base prices weighted by base period days multiplied by 70%.
- The per diem base rate is the lesser of:
    - The greater of the hospital specific base price or the statewide operating cost minimum, or
    - The statewide operating cost limit.

  Adjust each hospital's per diem rate by the updated cost adjustor (to reflect a hospital specific per diem rate). The updated cost adjustor is calculated, to reflect the most current data available, in the same manner as the base cost adjustor, except that:

- Medicare audited wage data for hospital fiscal years ending between September 1, 2007 and August 31, 2009 is used for the base period and September 1, 2008 and August 31, 2010 is used for the update period.
- The wage inflation and weighting factors are derived from the employee cost component of the Global Insight PPS-Type Hospital Market Basket Index relative to the period. The same inflation and weighting factors were used here as were used for the DRG update found in Section III, B., *DRG Price*.
- In the event that changes in federal regulations result in incompatible data between the base and update periods, adjustments are made either to the base or the update period to render the data comparable.

Calculate the final per diem rate by rounding to the nearest whole dollar.

2. Hospitals Outside of Michigan

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Policy and Methods for Establishing Rates – Inpatient Hospital

data is not available. The following adjustment factors, derived from the Global Insight PPS-Type Hospital Market Basket Index relative to the period, employee cost component, are used:

Fiscal Year Ending	Wage Inflation Factors	Base Weighting Factors	Update Weighting Factors
9/30/07	1.1341	0.40	
12/31/07	1.1228	0.40	
3/31/08	1.1038	0.40	
6/30/08	1.0966	0.40	
9/30/08	1.0849	0.60	0.40
12/31/08	1.0734	0.60	0.40
3/31/09	1.0583	0.60	0.40
6/30/09	1.0512	0.60	0.40
9/30/09	1.0410		0.60
12/31/09	1.0306		0.60
3/31/10	1.0175		0.60
6/30/10	1.0102		0.60
8/31/10	1.0000		0.60

For hospitals with cost reporting periods ending other than the end of a quarter, the inflation update for the quarter in which the hospital's fiscal year ends is used.

- The wage data for distinct part rehabilitation units is the same as for the inpatient medical/surgical area of the hospital. The cost reports do not differentiate salaries/hours by unit type.
- If two or more hospitals merge and are now operating as a single hospital, salary and wages are computed using the combined cost report data from all hospitals involved in the merger. Salary data will be inflated to a common point in time.

- Remove indirect medical education (IME) costs by dividing by an adjustor for indirect education. Each hospital's IME adjustor is calculated as follows:

$$1+([(1+\frac{\text{Interns \& Residents}}{\text{Beds}})^{.5795}-1]\times 0.3575)$$

- Distinct part rehabilitation units report this data separately. The IME adjustor is unique to the unit.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of MICHIGAN

Methods and Standards for Establishing Payment Rates
Inpatient Hospital Care

DRG	MDC	Type	Description	Relative Weight	Avg LOS	Low Day	High Day
1	PRE	SURG	Heart transplant or implant of heart assist system w MCC	Paid percent of charge			
2	PRE	SURG	Heart transplant or implant of heart assist system w/o MCC	Paid percent of charge			
3	PRE	SURG	ECMO or trach w MV 96+ hrs or PDX exc face, mouth & neck w maj O.R.	20.6931	44.38	8	83
4	PRE	SURG	Trach w MV 96+ hrs or PDX exc face, mouth & neck w/o maj O.R.	13.0447	34.51	5	69
5	PRE	SURG	Liver transplant w MCC or intestinal transplant	Paid percent of charge			
6	PRE	SURG	Liver transplant w/o MCC	Paid percent of charge			
7	PRE	SURG	Lung transplant	Paid percent of charge			
8	PRE	SURG	Simultaneous pancreas/kidney transplant	Paid percent of charge			
10	PRE	SURG	Pancreas transplant	Paid percent of charge			
11	PRE	SURG	Tracheostomy for face,mouth & neck diagnoses w MCC	4.5539	14.10	2	50
12	PRE	SURG	Tracheostomy for face,mouth & neck diagnoses w CC	3.3229	10.56	2	50
13	PRE	SURG	Tracheostomy for face,mouth & neck diagnoses w/o CC/MCC	2.4500	7.60	2	50
14	PRE	SURG	ALLOGENEIC BONE MARROW TRANSPLANT	Paid percent of charge			
16	PRE	SURG	AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC	Paid percent of charge			
17	PRE	SURG	AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC	Paid percent of charge			
20	01	SURG	Intracranial vascular procedures w PDX hemorrhage w MCC	9.1359	18.62	3	50
21	01	SURG	Intracranial vascular procedures w PDX hemorrhage w CC	7.2637	15.08	4	50
22	01	SURG	Intracranial vascular procedures w PDX hemorrhage w/o CC/MCC	5.7152	11.53	2	50
23	01	SURG	Craniotomy w major device implant or acute complex CNS PDX w MCC	6.5993	15.78	2	50
24	01	SURG	Craniotomy w major device implant or acute complex CNS PDX w/o MCC	4.5168	12.23	1	50
25	01	SURG	Craniotomy & endovascular intracranial procedures w MCC	5.6744	14.86	2	50
26	01	SURG	Craniotomy & endovascular intracranial procedures w CC	3.7154	8.45	1	50
27	01	SURG	Craniotomy & endovascular intracranial procedures w/o CC/MCC	2.7272	4.71	1	50
28	01	SURG	Spinal procedures w MCC	5.0122	14.09	2	50
29	01	SURG	Spinal procedures w CC	3.4188	9.33	1	50

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Methods and Standards for Establishing Payment Rates
Inpatient Hospital Care

DRG	MDC	Type	Description	Relative Weight	Avg LOS	Low Day	High Day
30	01	SURG	Spinal procedures w/o CC/MCC	2.0404	4.67	1	50
31	01	SURG	Ventricular shunt procedures w MCC	3.5673	11.67	2	50
32	01	SURG	Ventricular shunt procedures w CC	1.7608	5.37	1	50
33	01	SURG	Ventricular shunt procedures w/o CC/MCC	1.4976	3.92	1	50
34	01	SURG	Carotid artery stent procedure w MCC	6.2520	16.00	5	50
35	01	SURG	Carotid artery stent procedure w CC	2.8729	6.81	1	50
36	01	SURG	Carotid artery stent procedure w/o CC/MCC	1.9357	3.48	1	50
37	01	SURG	Extracranial procedures w MCC	4.3454	11.38	1	50
38	01	SURG	Extracranial procedures w CC	1.8966	5.33	1	50
39	01	SURG	Extracranial procedures w/o CC/MCC	1.4079	2.26	1	50
40	01	SURG	Periph & cranial nerve & other nerv syst proc w MCC	3.9388	13.55	2	50
41	01	SURG	Periph & cranial nerve & other nerv syst proc w CC	1.9979	7.01	1	50
42	01	SURG	Periph & cranial nerve & other nerv syst proc w/o CC/MCC	1.7013	3.47	1	50
52	01	MED	Spinal disorders & injuries w CC/MCC	2.0407	7.36	1	50
53	01	MED	Spinal disorders & injuries w/o CC/MCC	0.8992	3.30	1	50
54	01	MED	Nervous system neoplasms w MCC	1.6933	6.95	2	50
55	01	MED	Nervous system neoplasms w/o MCC	1.3848	5.21	1	50
56	01	MED	Degenerative nervous system disorders w MCC	1.9027	8.68	1	50
57	01	MED	Degenerative nervous system disorders w/o MCC	1.0112	4.83	1	50
58	01	MED	Multiple sclerosis & cerebellar ataxia w MCC	1.6018	8.60	2	50
59	01	MED	Multiple sclerosis & cerebellar ataxia w CC	1.0813	5.61	1	50
60	01	MED	Multiple sclerosis & cerebellar ataxia w/o CC/MCC	0.8760	4.28	1	50
61	01	MED	Acute ischemic stroke w use of thrombolytic agent w MCC	3.5918	10.57	3	50
62	01	MED	Acute ischemic stroke w use of thrombolytic agent w CC	2.1238	5.03	1	50
63	01	MED	Acute ischemic stroke w use of thrombolytic agent w/o CC/MCC	1.8296	3.47	2	50
64	01	MED	Intracranial hemorrhage or cerebral infarction w MCC	2.3897	9.26	1	50
65	01	MED	Intracranial hemorrhage or cerebral infarction w CC	1.4770	6.19	2	50
66	01	MED	Intracranial hemorrhage or cerebral infarction w/o CC/MCC	1.1090	4.02	1	50
67	01	MED	Nonspecific cva & precerebral occlusion w/o infarct w MCC	2.5395	6.19	1	50

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Methods and Standards for Establishing Payment Rates
Inpatient Hospital Care

DRG	MDC	Type	Description	Relative Weight	Avg LOS	Low Day	High Day
68	01	MED	Nonspecific cva & precerebral occlusion w/o infarct w/o MCC	1.2147	3.71	1	50
69	01	MED	Transient ischemia	0.8443	3.12	1	50
70	01	MED	Nonspecific cerebrovascular disorders w MCC	1.6682	7.54	1	50
71	01	MED	Nonspecific cerebrovascular disorders w CC	1.3090	6.49	1	50
72	01	MED	Nonspecific cerebrovascular disorders w/o CC/MCC	0.8952	3.70	1	50
73	01	MED	Cranial & peripheral nerve disorders w MCC	1.4507	7.07	1	50
74	01	MED	Cranial & peripheral nerve disorders w/o MCC	0.9153	4.63	1	50
75	01	MED	Viral meningitis w CC/MCC	1.0018	4.46	1	50
76	01	MED	Viral meningitis w/o CC/MCC	0.6315	3.24	1	50
77	01	MED	Hypertensive encephalopathy w MCC	1.6984	6.45	1	50
78	01	MED	Hypertensive encephalopathy w CC	1.0837	5.10	2	50
79	01	MED	Hypertensive encephalopathy w/o CC/MCC	0.7150	3.31	1	50
80	01	MED	Nontraumatic stupor & coma w MCC	1.0383	3.95	1	50
81	01	MED	Nontraumatic stupor & coma w/o MCC	0.7608	2.95	1	50
82	01	MED	Traumatic stupor & coma, coma >1 hr w MCC	2.5946	8.70	1	50
83	01	MED	Traumatic stupor & coma, coma >1 hr w CC	1.5977	6.54	1	50
84	01	MED	Traumatic stupor & coma, coma >1 hr w/o CC/MCC	0.9657	2.93	1	50
85	01	MED	Traumatic stupor & coma, coma <1 hr w MCC	2.8566	11.16	1	50
85.1	01	MED	Traumatic stupor & coma, coma <1 hr w MCC	4.0312	8.94	1	50
86	01	MED	Traumatic stupor & coma, coma <1 hr w CC	1.3373	5.12	1	50
86.1	01	MED	Traumatic stupor & coma, coma <1 hr w CC	1.2049	4.35	1	50
87	01	MED	Traumatic stupor & coma, coma <1 hr w/o CC/MCC	0.8261	3.07	1	50
87.1	01	MED	Traumatic stupor & coma, coma <1 hr w/o CC/MCC	0.5279	2.04	1	50
88	01	MED	Concussion w MCC	1.6926	5.68	1	50
88.1	01	MED	Concussion w MCC	0.4604	3.00	2	50
89	01	MED	Concussion w CC	0.9119	3.13	1	50
89.1	01	MED	Concussion w CC	0.7017	1.86	1	50
90	01	MED	Concussion w/o CC/MCC	0.7688	2.02	1	50
90.1	01	MED	Concussion w/o CC/MCC	0.4784	1.50	1	50
91	01	MED	Other disorders of nervous system w MCC	1.8561	7.34	1	50

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Methods and Standards for Establishing Payment Rates
Inpatient Hospital Care

DRG	MDC	Type	Description	Relative Weight	Avg LOS	Low Day	High Day
92	01	MED	Other disorders of nervous system w CC	1.0733	4.74	1	50
93	01	MED	Other disorders of nervous system w/o CC/MCC	0.8405	3.25	1	50
94	01	MED	Bacterial & tuberculous infections of nervous system w MCC	3.1390	11.32	1	50
95	01	MED	Bacterial & tuberculous infections of nervous system w CC	2.1829	8.94	1	50
96	01	MED	Bacterial & tuberculous infections of nervous system w/o CC/MCC	1.9307	6.55	1	50
97	01	MED	Non-bacterial infect of nervous sys exc viral meningitis w MCC	3.3766	12.98	3	50
98	01	MED	Non-bacterial infect of nervous sys exc viral meningitis w CC	2.1144	9.02	2	50
99	01	MED	Non-bacterial infect of nervous sys exc viral meningitis w/o CC/MCC	1.4322	6.00	1	50
100	01	MED	Seizures w MCC	1.3797	6.06	1	50
100.1	01	MED	Seizures w MCC	0.8605	3.91	1	50
101	01	MED	Seizures w/o MCC	0.7287	3.45	1	50
101.1	01	MED	Seizures w/o MCC	0.5007	2.54	1	50
102	01	MED	Headaches w MCC	1.1420	4.31	1	50
102.1	01	MED	Headaches w MCC	0.6501	2.38	1	50
103	01	MED	Headaches w/o MCC	0.7977	3.38	1	50
103.1	01	MED	Headaches w/o MCC	0.6074	2.57	1	50
113	02	SURG	Orbital procedures w CC/MCC	1.7572	4.92	1	50
114	02	SURG	Orbital procedures w/o CC/MCC	1.1935	3.37	1	50
115	02	SURG	Extraocular procedures except orbit	1.5137	4.61	1	50
116	02	SURG	Intraocular procedures w CC/MCC	2.4355	11.67	1	50
117	02	SURG	Intraocular procedures w/o CC/MCC	1.0253	3.19	1	50
121	02	MED	Acute major eye infections w CC/MCC	1.0175	5.68	1	50
122	02	MED	Acute major eye infections w/o CC/MCC	0.5296	3.12	1	50
123	02	MED	Neurological eye disorders	0.8052	3.31	1	50
124	02	MED	Other disorders of the eye w MCC	2.7055	11.98	1	50
125	02	MED	Other disorders of the eye w/o MCC	0.6105	3.06	1	50
129	03	SURG	Major head & neck procedures w CC/MCC or major device	3.3618	6.25	1	50
130	03	SURG	Major head & neck procedures w/o CC/MCC	1.3531	3.44	1	50

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131	03	SURG	Cranial/facial procedures w CC/MCC	2.0933	5.89	1	50
132	03	SURG	Cranial/facial procedures w/o CC/MCC	1.3245	2.56	1	50
133	03	SURG	Other ear, nose, mouth & throat O.R. procedures w CC/MCC	1.4864	5.29	1	50
134	03	SURG	Other ear, nose, mouth & throat O.R. procedures w/o CC/MCC	0.8081	2.43	1	50
135	03	SURG	Sinus & mastoid procedures w CC/MCC	2.0874	7.74	2	50
136	03	SURG	Sinus & mastoid procedures w/o CC/MCC	1.4615	3.47	1	50
137	03	SURG	Mouth procedures w CC/MCC	1.3056	4.86	1	50
138	03	SURG	Mouth procedures w/o CC/MCC	0.7701	3.02	1	50
139	03	SURG	Salivary gland procedures	1.1805	2.56	1	50
146	03	MED	Ear, nose, mouth & throat malignancy w MCC	2.3919	8.25	2	50
147	03	MED	Ear, nose, mouth & throat malignancy w CC	1.5955	7.72	1	50
148	03	MED	Ear, nose, mouth & throat malignancy w/o CC/MCC	0.9053	3.81	1	50
149	03	MED	Dysequilibrium	0.7779	3.32	1	50
150	03	MED	Epistaxis w MCC	1.3292	7.45	2	50
151	03	MED	Epistaxis w/o MCC	0.6751	3.29	1	50
152	03	MED	Otitis media & URI w MCC	1.0133	4.58	1	50
152.1	03	MED	Otitis media & URI w MCC	0.6515	3.71	1	50
153	03	MED	Otitis media & URI w/o MCC	0.5261	2.72	1	50
153.1	03	MED	Otitis media & URI w/o MCC	0.3815	2.40	1	50
154	03	MED	Nasal trauma & deformity w MCC	1.4589	6.31	1	50
155	03	MED	Nasal trauma & deformity w CC	0.8652	4.01	1	50
156	03	MED	Nasal trauma & deformity w/o CC/MCC	0.6313	3.01	1	50
157	03	MED	Dental & Oral Diseases w MCC	1.1393	5.16	1	50
158	03	MED	Dental & Oral Diseases w CC	0.6990	3.19	1	50
159	03	MED	Dental & Oral Diseases w/o CC/MCC	0.6205	2.70	1	50
163	04	SURG	Major chest procedures w MCC	4.7695	15.26	2	50
164	04	SURG	Major chest procedures w CC	3.0951	10.27	2	50
165	04	SURG	Major chest procedures w/o CC/MCC	1.9701	6.02	2	50
166	04	SURG	Other resp system O.R. procedures w MCC	3.8730	13.95	3	50

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167	04	SURG	Other resp system O.R. procedures w CC	2.1929	8.28	2	50
168	04	SURG	Other resp system O.R. procedures w/o CC/MCC	1.5003	5.85	2	50
175	04	MED	Pulmonary embolism w MCC	1.7875	7.70	2	50
176	04	MED	Pulmonary embolism w/o MCC	1.1355	5.30	1	50
177	04	MED	Respiratory infections & inflammations w MCC	2.2760	10.22	2	50
178	04	MED	Respiratory infections & inflammations w CC	1.6396	7.60	1	50
179	04	MED	Respiratory infections & inflammations w/o CC/MCC	1.4663	6.74	1	50
180	04	MED	Respiratory neoplasms w MCC	1.9257	8.48	2	50
181	04	MED	Respiratory neoplasms w CC	1.4699	6.49	1	50
182	04	MED	Respiratory neoplasms w/o CC/MCC	1.1127	4.65	1	50
183	04	MED	Major chest trauma w MCC	1.2593	5.50	1	50
184	04	MED	Major chest trauma w CC	1.0140	3.58	1	50
185	04	MED	Major chest trauma w/o CC/MCC	0.7288	2.73	1	50
186	04	MED	Pleural effusion w MCC	1.6847	7.70	2	50
187	04	MED	Pleural effusion w CC	1.2935	5.31	1	50
188	04	MED	Pleural effusion w/o CC/MCC	0.9209	4.07	1	50
189	04	MED	Pulmonary edema & respiratory failure	1.5250	6.17	1	50
190	04	MED	Chronic obstructive pulmonary disease w MCC	1.1827	5.64	1	50
190.1	04	MED	Chronic obstructive pulmonary disease w MCC	1.4267	6.13	1	50
191	04	MED	Chronic obstructive pulmonary disease w CC	0.9496	4.57	1	50
191.1	04	MED	Chronic obstructive pulmonary disease w CC	1.0938	5.75	1	50
192	04	MED	Chronic obstructive pulmonary disease w/o CC/MCC	0.7189	3.56	1	50
192.1	04	MED	Chronic obstructive pulmonary disease w/o CC/MCC	0.5143	2.72	1	50
193	04	MED	Simple pneumonia & pleurisy w MCC	1.5024	6.82	2	50
193.1	04	MED	Simple pneumonia & pleurisy w MCC	1.0993	5.63	2	50
194	04	MED	Simple pneumonia & pleurisy w CC	0.9880	4.60	1	50
194.1	04	MED	Simple pneumonia & pleurisy w CC	0.5629	3.08	1	50
195	04	MED	Simple pneumonia & pleurisy w/o CC/MCC	0.7323	3.37	1	50
195.1	04	MED	Simple pneumonia & pleurisy w/o CC/MCC	0.4206	2.52	1	50
196	04	MED	Interstitial lung disease w MCC	1.6873	7.89	2	50

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197	04	MED	Interstitial lung disease w CC	1.1185	5.94	1	50
198	04	MED	Interstitial lung disease w/o CC/MCC	0.7863	3.92	1	50
199	04	MED	Pneumothorax w MCC	1.7273	7.43	1	50
200	04	MED	Pneumothorax w CC	1.0031	4.71	1	50
201	04	MED	Pneumothorax w/o CC/MCC	0.6918	3.78	1	50
202	04	MED	Bronchitis & asthma w CC/MCC	0.8076	3.79	1	50
202.1	04	MED	Bronchitis & asthma w CC/MCC	0.5715	3.21	1	50
203	04	MED	Bronchitis & asthma w/o CC/MCC	0.5643	2.86	1	50
203.1	04	MED	Bronchitis & asthma w/o CC/MCC	0.3757	2.24	1	50
204	04	MED	Respiratory signs & symptoms	0.7981	3.17	1	50
204.1	04	MED	Respiratory signs & symptoms	0.5666	3.03	1	50
205	04	MED	Other respiratory system diagnoses w MCC	1.1555	5.62	1	50
206	04	MED	Other respiratory system diagnoses w/o MCC	0.7829	3.22	1	50
207	04	MED	Respiratory system diagnosis w ventilator support 96+ hours	5.4006	16.02	5	50
208	04	MED	Respiratory system diagnosis w ventilator support <96 hours	2.1799	6.90	1	50
215	05	SURG	Other heart assist system implant	4.8756	7.71	1	50
216	05	SURG	Cardiac valve & oth maj cardiothoracic proc w card cath w MCC	11.8731	23.96	7	56
217	05	SURG	Cardiac valve & oth maj cardiothoracic proc w card cath w CC	7.6439	17.18	2	50
218	05	SURG	Cardiac valve & oth maj cardiothoracic proc w card cath w/o CC/MCC	6.4446	7.17	1	50
219	05	SURG	Cardiac valve & oth maj cardiothoracic proc w/o card cath w MCC	8.6228	15.60	4	50
220	05	SURG	Cardiac valve & oth maj cardiothoracic proc w/o card cath w CC	5.2454	9.25	3	50
221	05	SURG	Cardiac valve & oth maj cardiothoracic proc w/o card cath w/o CC/MCC	3.9693	6.10	3	50
222	05	SURG	Cardiac defib implant w cardiac cath w AMI/HF/shock w MCC	9.2125	15.47	3	50
223	05	SURG	Cardiac defib implant w cardiac cath w AMI/HF/shock w/o MCC	7.0504	9.41	2	50
224	05	SURG	Cardiac defib implant w cardiac cath w/o AMI/HF/shock w MCC	8.9735	11.77	1	50

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225	05	SURG	Cardiac defib implant w cardiac cath w/o AMI/HF/shock w/o MCC	5.7217	5.92	1	50
226	05	SURG	Cardiac defibrillator implant w/o cardiac cath w MCC	7.2472	11.14	2	50
227	05	SURG	Cardiac defibrillator implant w/o cardiac cath w/o MCC	5.7917	4.71	1	50
228	05	SURG	Other cardiothoracic procedures w MCC	8.2097	16.21	4	50
229	05	SURG	Other cardiothoracic procedures w CC	5.7827	10.33	2	50
230	05	SURG	Other cardiothoracic procedures w/o CC/MCC	3.7980	6.21	1	50
231	05	SURG	Coronary bypass w PTCA w MCC	6.9936	14.67	2	50
232	05	SURG	Coronary bypass w PTCA w/o MCC	6.0690	10.67	6	50
233	05	SURG	Coronary bypass w cardiac cath w MCC	7.0348	15.83	5	50
234	05	SURG	Coronary bypass w cardiac cath w/o MCC	4.8903	10.75	5	50
235	05	SURG	Coronary bypass w/o cardiac cath w MCC	5.7320	12.60	4	50
236	05	SURG	Coronary bypass w/o cardiac cath w/o MCC	3.9474	7.97	4	50
237	05	SURG	Major cardiovascular procedures w MCC	6.6385	14.16	2	50
238	05	SURG	Major cardiovascular procedures w/o MCC	3.2786	7.20	1	50
239	05	SURG	Amputation for circ sys disorders exc upper limb & toe w MCC	5.2609	19.38	4	50
240	05	SURG	Amputation for circ sys disorders exc upper limb & toe w CC	3.2856	13.01	3	50
241	05	SURG	Amputation for circ sys disorders exc upper limb & toe w/o CC/MCC	1.6815	7.71	2	50
242	05	SURG	Permanent cardiac pacemaker implant w MCC	4.8902	11.24	1	50
243	05	SURG	Permanent cardiac pacemaker implant w CC	3.4627	7.16	1	50
244	05	SURG	Permanent cardiac pacemaker implant w/o CC/MCC	2.4596	4.11	1	50
245	05	SURG	AICD lead & generator procedures	5.2031	5.05	1	50
246	05	SURG	Percutaneous cardiovascular proc w drug-eluting stent w MCC	3.6561	6.57	1	50
247	05	SURG	Percutaneous cardiovascular proc w drug-eluting stent w/o MCC	2.4521	3.03	1	50
248	05	SURG	Percutaneous cardiovasc proc w non-drug-eluting stent w MCC	3.0170	5.56	1	50
249	05	SURG	Percutaneous cardiovasc proc w non-drug-eluting stent w/o MCC	2.1561	3.49	1	50
250	05	SURG	Perc cardiovasc proc w/o coronary artery stent or AMI w MCC	3.9857	10.50	1	50

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251	05	SURG	Perc cardiovasc proc w/o coronary artery stent or AMI w/o MCC	2.2993	3.15	1	50
252	05	SURG	Other vascular procedures w MCC	3.3655	10.24	2	50
253	05	SURG	Other vascular procedures w CC	2.8833	7.39	1	50
254	05	SURG	Other vascular procedures w/o CC/MCC	2.0810	3.42	1	50
255	05	SURG	Upper limb & toe amputation for circ system disorders w MCC	3.4343	13.22	5	50
256	05	SURG	Upper limb & toe amputation for circ system disorders w CC	1.9418	9.44	2	50
257	05	SURG	Upper limb & toe amputation for circ system disorders w/o CC/MCC	1.1476	5.42	1	50
258	05	SURG	Cardiac pacemaker device replacement w MCC	3.6263	4.00	2	50
259	05	SURG	Cardiac pacemaker device replacement w/o MCC	1.7281	3.44	1	50
260	05	SURG	Cardiac pacemaker revision except device replacement w MCC	3.5838	12.95	3	50
261	05	SURG	Cardiac pacemaker revision except device replacement w CC	1.9303	6.79	1	50
262	05	SURG	Cardiac pacemaker revision except device replacement w/o CC/MCC	1.4402	5.56	1	50
263	05	SURG	Vein ligation & stripping	1.4976	4.33	1	50
264	05	SURG	Other circulatory system O.R. procedures	2.4362	10.64	2	50
265	05	SURG	AICD Lead Procedures	2.2283	5.17	1	50
280	05	MED	Acute myocardial infarction, discharged alive w MCC	2.2392	7.65	1	50
281	05	MED	Acute myocardial infarction, discharged alive w CC	1.4732	4.96	1	50
282	05	MED	Acute myocardia infarction, discharged alive w/o CC/MCC	1.3389	3.08	1	50
283	05	MED	Acute myocardial infarction, expired w MCC	3.0904	7.78	1	50
284	05	MED	Acute myocardial infarction, expired w CC	1.8251	6.64	1	50
285	05	MED	Acute myocardial infarction, expired w/o CC/MCC	0.6214	1.00	1	50
286	05	MED	Circulatory disorders except AMI, w card cath w MCC	2.2903	8.11	1	50
287	05	MED	Circulatory disorders except AMI, w card cath w/o MCC	1.3306	3.89	1	50
288	05	MED	Acute & subacute endocarditis w MCC	3.5624	14.63	2	50
289	05	MED	Acute & subacute endocarditis w CC	2.2626	12.08	2	50
290	05	MED	Acute & subacute endocarditis w/o CC/MCC	0.8796	4.00	1	50
291	05	MED	Heart failure & shock w MCC	1.4322	6.53	1	50

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292	05	MED	Heart failure & shock w CC	0.9581	4.92	1	50
293	05	MED	Heart failure & shock w/o CC/MCC	0.7348	3.61	1	50
294	05	MED	Deep vein thrombophlebitis w CC/MCC	1.5122	6.44	3	50
295	05	MED	Deep vein thrombophlebitis w/o CC/MCC	0.4633	3.25	2	50
296	05	MED	Cardiac arrest, unexplained w MCC	1.6788	4.39	1	50
297	05	MED	Cardiac arrest, unexplained w CC	1.5415	3.75	1	50
298	05	MED	Cardiac arrest, unexplained w/o CC/MCC	1.3586	1.00	1	50
299	05	MED	Peripheral vascular disorders w MCC	1.7413	7.91	1	50
300	05	MED	Peripheral vascular disorders w CC	1.0372	5.18	1	50
301	05	MED	Peripheral vascular disorders w/o CC/MCC	0.7197	3.81	1	50
302	05	MED	Atherosclerosis w MCC	1.4828	5.13	1	50
303	05	MED	Atherosclerosis w/o MCC	0.8960	2.96	1	50
304	05	MED	Hypertension w MCC	1.1785	5.24	1	50
305	05	MED	Hypertension w/o MCC	0.7087	3.05	1	50
306	05	MED	Cardiac congenital & valvular disorders w MCC	5.3001	10.85	1	50
307	05	MED	Cardiac congenital & valvular disorders w/o MCC	1.3766	4.86	1	50
308	05	MED	Cardiac arrhythmia & conduction disorders w MCC	1.4734	6.32	1	50
309	05	MED	Cardiac arrhythmia & conduction disorders w CC	0.9215	3.87	1	50
310	05	MED	Cardiac arrhythmia & conduction disorders w/o CC/MCC	0.6606	2.78	1	50
311	05	MED	Angina pectoris	0.7799	2.58	1	50
312	05	MED	Syncope & collapse	0.7359	3.04	1	50
313	05	MED	Chest pain	0.7039	2.64	1	50
314	05	MED	Other circulatory system diagnoses w MCC	2.0393	8.82	2	50
315	05	MED	Other circulatory system diagnoses w CC	1.2199	5.44	1	50
316	05	MED	Other circulatory system diagnoses w/o CC/MCC	0.9604	3.26	1	50
326	06	SURG	Stomach, esophageal & duodenal proc w MCC	5.3945	17.03	2	50
326.1	06	SURG	Stomach, esophageal & duodenal proc w MCC	4.6439	15.19	2	50
327	06	SURG	Stomach, esophageal & duodenal proc w CC	2.8095	10.05	2	50
327.1	06	SURG	Stomach, esophageal & duodenal proc w CC	1.4938	5.61	1	50
328	06	SURG	Stomach, esophageal & duodenal proc w/o CC/MCC	1.5129	3.75	1	50

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328.1	06	SURG	Stomach, esophageal & duodenal proc w/o CC/MCC	0.8520	3.13	1	50
329	06	SURG	Major small & large bowel procedures w MCC	5.0255	16.83	3	50
330	06	SURG	Major small & large bowel procedures w CC	2.7062	10.62	3	50
331	06	SURG	Major small & large bowel procedures w/o CC/MCC	1.8125	6.32	1	50
332	06	SURG	Rectal resection w MCC	3.5178	12.16	3	50
333	06	SURG	Rectal resection w CC	2.4820	8.76	1	50
334	06	SURG	Rectal resection w/o CC/MCC	2.2474	6.51	1	50
335	06	SURG	Peritoneal adhesiolysis w MCC	4.1061	13.82	2	50
336	06	SURG	Peritoneal adhesiolysis w CC	2.2785	8.21	1	50
337	06	SURG	Peritoneal adhesiolysis w/o CC/MCC	1.5506	4.42	1	50
338	06	SURG	Appendectomy w complicated principal diag w MCC	2.7405	9.13	1	50
339	06	SURG	Appendectomy w complicated principal diag w CC	2.2256	7.52	2	50
340	06	SURG	Appendectomy w complicated principal diag w/o CC/MCC	1.4953	4.57	1	50
341	06	SURG	Appendectomy w/o complicated principal diag w MCC	1.9921	5.51	1	50
342	06	SURG	Appendectomy w/o complicated principal diag w CC	1.3340	3.26	1	50
343	06	SURG	Appendectomy w/o complicated principal diag w/o CC/MCC	1.0200	2.05	1	50
344	06	SURG	Minor small & large bowel procedures w MCC	4.2151	15.83	4	50
345	06	SURG	Minor small & large bowel procedures w CC	1.9675	8.07	2	50
346	06	SURG	Minor small & large bowel procedures w/o CC/MCC	1.2909	4.93	2	50
347	06	SURG	Anal & stomal procedures w MCC	1.9528	8.44	2	50
348	06	SURG	Anal & stomal procedures w CC	1.3133	5.15	1	50
349	06	SURG	Anal & stomal procedures w/o CC/MCC	0.7728	2.95	1	50
350	06	SURG	Inguinal & femoral hernia procedures w MCC	2.1373	7.00	2	50
351	06	SURG	Inguinal & femoral hernia procedures w CC	1.1564	4.44	1	50
352	06	SURG	Inguinal & femoral hernia procedures w/o CC/MCC	0.8660	2.06	1	50
353	06	SURG	Hernia procedures except inguinal & femoral w MCC	2.6185	9.96	1	50
354	06	SURG	Hernia procedures except inguinal & femoral w CC	1.7025	5.28	1	50
355	06	SURG	Hernia procedures except inguinal & femoral w/o CC/MCC	1.3276	3.76	1	50
356	06	SURG	Other digestive system O.R. procedures w MCC	3.8560	12.94	2	50
357	06	SURG	Other digestive system O.R. procedures w CC	2.1455	8.08	1	50

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358	06	SURG	Other digestive system O.R. procedures w/o CC/MCC	1.4427	4.74	1	50
368	06	MED	Major esophageal disorders w MCC	1.9291	7.48	2	50
369	06	MED	Major esophageal disorders w CC	1.2346	5.10	1	50
370	06	MED	Major esophageal disorders w/o CC/MCC	0.8275	3.68	1	50
371	06	MED	Major gastrointestinal disorders & peritoneal infections w MCC	1.8645	8.79	2	50
372	06	MED	Major gastrointestinal disorders & peritoneal infections w CC	1.2316	6.42	1	50
373	06	MED	Major gastrointestinal disorders & peritoneal infections w/o CC/MCC	0.8585	4.16	1	50
374	06	MED	Digestive malignancy w MCC	2.1333	9.72	1	50
375	06	MED	Digestive malignancy w CC	1.5046	6.97	1	50
376	06	MED	Digestive malignancy w/o CC/MCC	1.4004	6.05	1	50
377	06	MED	G.I. hemorrhage w MCC	1.9467	7.48	1	50
378	06	MED	G.I. hemorrhage w CC	1.0760	4.45	1	50
379	06	MED	G.I. hemorrhage w/o CC/MCC	0.7626	3.19	1	50
380	06	MED	Complicated peptic ulcer w MCC	1.8946	7.77	1	50
381	06	MED	Complicated peptic ulcer w CC	1.1446	5.25	2	50
382	06	MED	Complicated peptic ulcer w/o CC/MCC	0.8833	3.88	1	50
383	06	MED	Uncomplicated peptic ulcer w MCC	1.3338	5.42	2	50
384	06	MED	Uncomplicated peptic ulcer w/o MCC	0.9228	3.90	1	50
385	06	MED	Inflammatory bowel disease w MCC	1.9445	10.07	2	50
386	06	MED	Inflammatory bowel disease w CC	1.0844	5.91	2	50
387	06	MED	Inflammatory bowel disease w/o CC/MCC	0.7866	4.11	1	50
388	06	MED	G.I. obstruction w MCC	1.4945	7.63	2	50
389	06	MED	G.I. obstruction w CC	1.0089	5.50	1	50
390	06	MED	G.I. obstruction w/o CC/MCC	0.6774	3.53	1	50
391	06	MED	Esophagitis, gastroent & misc digest disorders w MCC	1.1278	5.45	1	50
392	06	MED	Esophagitis, gastroent & misc digest disorders w/o MCC	0.7133	3.44	1	50
393	06	MED	Other digestive system diagnoses w MCC	1.5722	7.12	1	50
394	06	MED	Other digestive system diagnoses w CC	1.0919	5.30	1	50
395	06	MED	Other digestive system diagnoses w/o CC/MCC	0.7979	3.04	1	50

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405	07	SURG	Pancreas, liver & shunt procedures w MCC	5.4947	16.50	3	50
406	07	SURG	Pancreas, liver & shunt procedures w CC	3.0671	11.18	2	50
407	07	SURG	Pancreas, liver & shunt procedures w/o CC/MCC	1.8801	5.22	1	50
408	07	SURG	Biliary tract proc except only cholecyst w or w/o c.d.e. w MCC	3.5190	12.32	4	50
409	07	SURG	Biliary tract proc except only cholecyst w or w/o c.d.e. w CC	2.5000	9.07	3	50
410	07	SURG	Biliary tract proc except only cholecyst w or w/o c.d.e. w/o CC/MCC	2.3145	7.47	2	50
411	07	SURG	Cholecystectomy w c.d.e. w MCC	2.5486	9.13	4	50
412	07	SURG	Cholecystectomy w c.d.e. w CC	1.9246	6.44	2	50
413	07	SURG	Cholecystectomy w c.d.e. w/o CC/MCC	1.9582	4.94	2	50
414	07	SURG	Cholecystectomy except by laparoscope w/o c.d.e. w MCC	2.9846	10.21	2	50
415	07	SURG	Cholecystectomy except by laparoscope w/o c.d.e. w CC	2.1729	6.54	2	50
416	07	SURG	Cholecystectomy except by laparoscope w/o c.d.e. w/o CC/MCC	1.3883	4.04	1	50
417	07	SURG	Laparoscopic cholecystectomy w/o c.d.e. w MCC	1.9793	6.49	2	50
418	07	SURG	Laparoscopic cholecystectomy w/o c.d.e. w CC	1.5757	4.64	1	50
419	07	SURG	Laparoscopic cholecystectomy w/o c.d.e. w/o CC/MCC	1.2389	3.02	1	50
420	07	SURG	Hepatobiliary diagnostic procedures w MCC	2.5196	7.85	1	50
421	07	SURG	Hepatobiliary diagnostic procedures w CC	2.0956	6.53	1	50
422	07	SURG	Hepatobiliary diagnostic procedures w/o CC/MCC	2.3492	6.56	2	50
423	07	SURG	Other hepatobiliary or pancreas O.R. procedures w MCC	5.1628	18.41	5	50
424	07	SURG	Other hepatobiliary or pancreas O.R. procedures w CC	3.2006	11.14	2	50
425	07	SURG	Other hepatobiliary or pancreas O.R. procedures w/o CC/MCC	2.0167	8.60	2	50
432	07	MED	Cirrhosis & alcoholic hepatitis w MCC	1.7860	7.80	1	50
433	07	MED	Cirrhosis & alcoholic hepatitis w CC	1.0010	5.52	1	50
434	07	MED	Cirrhosis & alcoholic hepatitis w/o CC/MCC	0.9172	4.67	1	50
435	07	MED	Malignancy of hepatobiliary system or pancreas w MCC	1.9906	9.90	2	50
436	07	MED	Malignancy of hepatobiliary system or pancreas w CC	1.4855	7.27	2	50
437	07	MED	Malignancy of hepatobiliary system or pancreas w/o CC/MCC	1.1155	4.59	1	50
438	07	MED	Disorders of pancreas except malignancy w MCC	1.9307	9.14	2	50

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439	07	MED	Disorders of pancreas except malignancy w CC	1.0237	5.17	1	50
440	07	MED	Disorders of pancreas except malignancy w/o CC/MCC	0.7397	3.81	1	50
441	07	MED	Disorders of liver except malig,cirr,alc hepa w MCC	2.1157	8.52	1	50
442	07	MED	Disorders of liver except malig,cirr,alc hepa w CC	1.0667	5.45	1	50
443	07	MED	Disorders of liver except malig,cirr,alc hepa w/o CC/MCC	0.7396	3.78	1	50
444	07	MED	Disorders of the biliary tract w MCC	1.7712	7.25	1	50
445	07	MED	Disorders of the biliary tract w CC	1.2434	4.81	1	50
446	07	MED	Disorders of the biliary tract w/o CC/MCC	0.8028	3.03	1	50
453	08	SURG	Combined anterior/posterior spinal fusion w MCC	8.7338	17.30	4	50
454	08	SURG	Combined anterior/posterior spinal fusion w CC	4.6741	8.13	1	50
455	08	SURG	Combined anterior/posterior spinal fusion w/o CC/MCC	2.5702	3.31	1	50
456	08	SURG	Spinal fusion exc cerv w spinal curv, malig or 9+ fusions w MCC	7.2330	11.46	4	50
457	08	SURG	Spinal fusion exc cerv w spinal curv, malig or 9+ fusions w CC	6.9109	7.47	3	50
458	08	SURG	Spinal fusion exc cerv w spinal curv, malig or 9+ fusions w/o CC/MCC	5.3861	4.67	2	50
459	08	SURG	Spinal fusion except cervical w MCC	5.8163	10.42	3	50
460	08	SURG	Spinal fusion except cervical w/o MCC	3.3134	3.81	1	50
461	08	SURG	Bilateral or multiple major joint procs of lower extremity w MCC	7.4026	18.00	6	50
462	08	SURG	Bilateral or multiple major joint procs of lower extremity w/o MCC	3.3896	4.94	3	50
463	08	SURG	Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w MCC	5.9291	20.57	3	51
464	08	SURG	Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w CC	2.6921	11.04	2	50
465	08	SURG	Wnd debrid & skn grft exc hand, for musculo-conn tiss dis w/o CC/MCC	1.8717	5.99	1	50
466	08	SURG	Revision of hip or knee replacement w MCC	4.5564	13.15	4	50
467	08	SURG	Revision of hip or knee replacement w CC	3.0942	5.80	2	50
468	08	SURG	Revision of hip or knee replacement w/o CC/MCC	2.5568	3.69	1	50
469	08	SURG	Major joint replacement or reattachment of lower extremity w MCC	3.3840	8.69	3	50

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470	08	SURG	Major joint replacement or reattachment of lower extremity w/o MCC	2.2922	4.01	2	50
471	08	SURG	Cervical spinal fusion w MCC	4.1810	10.11	1	50
472	08	SURG	Cervical spinal fusion w CC	2.6833	4.48	1	50
473	08	SURG	Cervical spinal fusion w/o CC/MCC	1.8919	2.02	1	50
474	08	SURG	Amputation for musculoskeletal sys & conn tissue dis w MCC	4.2596	14.85	3	50
475	08	SURG	Amputation for musculoskeletal sys & conn tissue dis w CC	2.0857	8.82	1	50
476	08	SURG	Amputation for musculoskeletal sys & conn tissue dis w/o CC/MCC	1.1873	4.57	1	50
477	08	SURG	Biopsies of musculoskeletal system & connective tissue w MCC	2.9971	15.24	4	50
478	08	SURG	Biopsies of musculoskeletal system & connective tissue w CC	2.4480	9.18	1	50
479	08	SURG	Biopsies of musculoskeletal system & connective tissue w/o CC/MCC	1.5049	5.80	1	50
480	08	SURG	Hip & femur procedures except major joint w MCC	3.6827	10.98	2	50
480.1	08	SURG	Hip & femur procedures except major joint w MCC	1.7032	4.95	2	50
481	08	SURG	Hip & femur procedures except major joint w CC	2.4590	7.65	2	50
481.1	08	SURG	Hip & femur procedures except major joint w CC	1.6005	3.95	1	50
482	08	SURG	Hip & femur procedures except major joint w/o CC/MCC	1.8131	4.28	1	50
482.1	08	SURG	Hip & femur procedures except major joint w/o CC/MCC	1.2529	2.67	1	50
483	08	SURG	Major joint & limb reattachment proc of upper extremity w CC/MCC	2.4846	2.94	1	50
484	08	SURG	Major joint & limb reattachment proc of upper extremity w/o CC/MCC	1.9028	2.14	1	50
485	08	SURG	Knee procedures w pdx of infection w MCC	3.4028	12.90	4	50
486	08	SURG	Knee procedures w pdx of infection w CC	2.4824	9.77	2	50
487	08	SURG	Knee procedures w pdx of infection w/o CC/MCC	1.4373	4.59	1	50
488	08	SURG	Knee procedures w/o pdx of infection w CC/MCC	1.8335	5.35	1	50
489	08	SURG	Knee procedures w/o pdx of infection w/o CC/MCC	1.2581	2.16	1	50
490	08	SURG	Back & neck procedures except spinal fusion w CC/MCC or disc devices	2.0500	5.22	1	50
491	08	SURG	Back & neck procedures except spinal fusion w/o CC/MCC	1.0412	2.19	1	50
492	08	SURG	Lower extrem & humer proc except hip,foot,femur w MCC	3.1346	9.70	3	50

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492.1	08	SURG	Lower extrem & humer proc except hip,foot,femur w MCC	1.2476	2.83	1	50
493	08	SURG	Lower extrem & humer proc except hip,foot,femur w CC	2.0947	5.34	1	50
493.1	08	SURG	Lower extrem & humer proc except hip,foot,femur w CC	1.4707	3.12	1	50
494	08	SURG	Lower extrem & humer proc except hip,foot,femur w/o CC/MCC	1.4001	3.11	1	50
494.1	08	SURG	Lower extrem & humer proc except hip,foot,femur w/o CC/MCC	1.0347	2.01	1	50
495	08	SURG	Local excision & removal int fix devices exc hip & femur w MCC	3.0304	9.10	1	50
496	08	SURG	Local excision & removal int fix devices exc hip & femur w CC	2.0236	7.16	1	50
497	08	SURG	Local excision & removal int fix devices exc hip & femur w/o CC/MCC	1.3072	2.85	1	50
498	08	SURG	Local excision & removal int fix devices of hip & femur w CC/MCC	1.8817	6.83	2	50
499	08	SURG	Local excision & removal int fix devices of hip & femur w/o CC/MCC	1.2237	4.00	1	50
500	08	SURG	Soft tissue procedures w MCC	2.5918	9.10	1	50
501	08	SURG	Soft tissue procedures w CC	1.5127	5.75	1	50
502	08	SURG	Soft tissue procedures w/o CC/MCC	1.0726	2.85	1	50
503	08	SURG	Foot procedures w MCC	2.5818	8.90	4	50
504	08	SURG	Foot procedures w CC	1.8040	7.05	2	50
505	08	SURG	Foot procedures w/o CC/MCC	1.0616	2.48	1	50
506	08	SURG	Major thumb or joint procedures	0.9997	3.64	2	50
507	08	SURG	Major shoulder or elbow joint procedures w CC/MCC	1.1200	3.82	1	50
508	08	SURG	Major shoulder or elbow joint procedures w/o CC/MCC	1.2357	3.11	1	50
509	08	SURG	Arthroscopy	1.5546	5.40	1	50
510	08	SURG	Shoulder,elbow or forearm proc,exc major joint proc w MCC	2.1091	5.11	2	50
511	08	SURG	Shoulder,elbow or forearm proc,exc major joint proc w CC	1.5058	3.55	1	50
512	08	SURG	Shoulder,elbow or forearm proc,exc major joint proc w/o CC/MCC	1.0160	2.03	1	50
513	08	SURG	Hand or wrist proc, except major thumb or joint proc w CC/MCC	1.3502	4.19	1	50
514	08	SURG	Hand or wrist proc, except major thumb or joint proc w/o CC/MCC	0.9629	2.67	1	50

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515	08	SURG	Other musculoskelet sys & conn tiss O.R. proc w MCC	3.5676	10.76	1	50
516	08	SURG	Other musculoskelet sys & conn tiss O.R. proc w CC	2.5048	6.00	1	50
517	08	SURG	Other musculoskelet sys & conn tiss O.R. proc w/o CC/MCC	2.0625	3.85	1	50
533	08	MED	Fractures of femur w MCC	1.3522	5.00	2	50
534	08	MED	Fractures of femur w/o MCC	0.8043	3.32	1	50
535	08	MED	Fractures of hip & pelvis w MCC	2.0877	8.91	1	50
536	08	MED	Fractures of hip & pelvis w/o MCC	0.9717	4.52	1	50
537	08	MED	Sprains, strains, & dislocations of hip, pelvis & thigh w CC/MCC	1.0422	7.00	7	50
538	08	MED	Sprains, strains, & dislocations of hip, pelvis & thigh w/o CC/MCC	0.7713	1.80	1	50
539	08	MED	Osteomyelitis w MCC	2.0284	10.71	1	50
540	08	MED	Osteomyelitis w CC	1.2761	7.02	1	50
541	08	MED	Osteomyelitis w/o CC/MCC	0.9951	5.09	1	50
542	08	MED	Pathological fractures & musculoskelet & conn tiss malig w MCC	3.2128	11.91	3	50
543	08	MED	Pathological fractures & musculoskelet & conn tiss malig w CC	1.5249	6.77	1	50
544	08	MED	Pathological fractures & musculoskelet & conn tiss malig w/o CC/MCC	0.9555	4.27	1	50
545	08	MED	Connective tissue disorders w MCC	2.6993	11.03	2	50
546	08	MED	Connective tissue disorders w CC	1.2838	5.94	1	50
547	08	MED	Connective tissue disorders w/o CC/MCC	0.9368	3.92	1	50
548	08	MED	Septic arthritis w MCC	2.4585	10.06	3	50
549	08	MED	Septic arthritis w CC	1.2618	6.91	1	50
550	08	MED	Septic arthritis w/o CC/MCC	0.7131	3.67	1	50
551	08	MED	Medical back problems w MCC	1.7276	6.83	1	50
552	08	MED	Medical back problems w/o MCC	1.0845	3.84	1	50
553	08	MED	Bone diseases & arthropathies w MCC	1.8837	6.09	1	50
554	08	MED	Bone diseases & arthropathies w/o MCC	1.3351	3.63	1	50
555	08	MED	Signs & symptoms of musculoskeletal system & conn tissue w MCC	1.3319	5.54	1	50

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556	08	MED	Signs & symptoms of musculoskeletal system & conn tissue w/o MCC	0.7889	3.33	1	50
557	08	MED	Tendonitis, myositis & bursitis w MCC	2.0723	7.18	1	50
558	08	MED	Tendonitis, myositis & bursitis w/o MCC	0.8523	4.50	1	50
559	08	MED	Aftercare, musculoskeletal system & connective tissue w MCC	1.7760	8.05	1	50
560	08	MED	Aftercare, musculoskeletal system & connective tissue w CC	1.4496	6.00	1	50
561	08	MED	Aftercare, musculoskeletal system & connective tissue w/o CC/MCC	1.4262	3.20	1	50
562	08	MED	Fx, sprn, strn & disl except femur, hip, pelvis & thigh w MCC	1.2917	4.20	1	50
563	08	MED	Fx, sprn, strn & disl except femur, hip, pelvis & thigh w/o MCC	0.8224	3.03	1	50
564	08	MED	Other musculoskeletal sys & connective tissue diagnoses w MCC	1.7548	5.95	2	50
565	08	MED	Other musculoskeletal sys & connective tissue diagnoses w CC	1.0600	5.18	1	50
566	08	MED	Other musculoskeletal sys & connective tissue diagnoses w/o CC/MCC	0.9153	3.44	1	50
570	09	SURG	SKIN DEBRIDEMENT W MCC	2.4659	12.27	2	50
571	09	SURG	SKIN DEBRIDEMENT W CC	1.6268	7.55	1	50
572	09	SURG	SKIN DEBRIDEMENT W/O CC/MCC	1.1575	4.97	1	50
573	09	SURG	Skin graft &/or debrid for skn ulcer or cellulitis w MCC	2.6849	14.00	3	50
574	09	SURG	Skin graft &/or debrid for skn ulcer or cellulitis w CC	2.5848	13.49	3	50
575	09	SURG	Skin graft &/or debrid for skn ulcer or cellulitis w/o CC/MCC	1.5481	7.60	1	50
576	09	SURG	Skin graft &/or debrid exc for skin ulcer or cellulitis w MCC	4.1110	12.33	3	50
577	09	SURG	Skin graft &/or debrid exc for skin ulcer or cellulitis w CC	2.9572	10.18	1	50
578	09	SURG	Skin graft &/or debrid exc for skin ulcer or cellulitis w/o CC/MCC	1.4733	3.95	1	50
579	09	SURG	Other skin, subcut tiss & breast proc w MCC	2.5450	10.86	2	50
580	09	SURG	Other skin, subcut tiss & breast proc w CC	1.6184	6.52	1	50
581	09	SURG	Other skin, subcut tiss & breast proc w/o CC/MCC	0.9760	3.21	1	50
582	09	SURG	Mastectomy for malignancy w CC/MCC	1.2144	2.76	1	50
583	09	SURG	Mastectomy for malignancy w/o CC/MCC	1.1839	2.15	1	50

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584	09	SURG	Breast biopsy, local excision & other breast procedures w CC/MCC	1.4817	5.56	1	50
585	09	SURG	Breast biopsy, local excision & other breast procedures w/o CC/MCC	1.2532	2.76	1	50
592	09	MED	Skin ulcers w MCC	1.2549	7.15	1	50
593	09	MED	Skin ulcers w CC	0.9061	5.58	1	50
594	09	MED	Skin ulcers w/o CC/MCC	0.7717	4.11	1	50
595	09	MED	Major skin disorders w MCC	1.7340	8.10	2	50
596	09	MED	Major skin disorders w/o MCC	0.7755	4.92	1	50
597	09	MED	Malignant breast disorders w MCC	1.6032	7.27	1	50
598	09	MED	Malignant breast disorders w CC	1.3196	5.75	1	50
599	09	MED	Malignant breast disorders w/o CC/MCC	0.9723	4.00	1	50
600	09	MED	Non-malignant breast disorders w CC/MCC	0.8471	4.51	1	50
601	09	MED	Non-malignant breast disorders w/o CC/MCC	0.5973	3.30	1	50
602	09	MED	Cellulitis w MCC	1.3630	6.94	1	50
603	09	MED	Cellulitis w/o MCC	0.6538	3.72	1	50
604	09	MED	Trauma to the skin, subcut tiss & breast w MCC	1.3549	4.25	1	50
605	09	MED	Trauma to the skin, subcut tiss & breast w/o MCC	0.6808	2.54	1	50
606	09	MED	Minor skin disorders w MCC	1.0269	5.25	1	50
607	09	MED	Minor skin disorders w/o MCC	0.5707	3.60	1	50
614	10	SURG	Adrenal & pituitary procedures w CC/MCC	2.6635	7.89	1	50
615	10	SURG	Adrenal & pituitary procedures w/o CC/MCC	1.6755	3.15	1	50
616	10	SURG	Amputat of lower limb for endocrine,nutrit,& metabol dis w MCC	4.6425	18.91	7	50
617	10	SURG	Amputat of lower limb for endocrine,nutrit,& metabol dis w CC	2.1272	9.22	3	50
618	10	SURG	Amputat of lower limb for endocrine,nutrit,& metabol dis w/o CC/MCC	1.7949	7.00	7	50
619	10	SURG	O.R. procedures for obesity w MCC	2.3979	7.33	2	50
620	10	SURG	O.R. procedures for obesity w CC	2.3848	3.59	1	50
621	10	SURG	O.R. procedures for obesity w/o CC/MCC	2.0609	2.19	1	50
622	10	SURG	Skin grafts & wound debrid for endoc, nutrit & metab dis w MCC	4.2649	12.54	3	50

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623	10	SURG	Skin grafts & wound debrid for endoc, nutrit & metab dis w CC	1.6756	8.23	2	50
624	10	SURG	Skin grafts & wound debrid for endoc, nutrit & metab dis w/o CC/MCC	1.6047	8.40	4	50
625	10	SURG	Thyroid, parathyroid & thyroglossal procedures w MCC	2.5684	11.00	3	50
626	10	SURG	Thyroid, parathyroid & thyroglossal procedures w CC	1.4384	3.04	1	50
627	10	SURG	Thyroid, parathyroid & thyroglossal procedures w/o CC/MCC	1.0117	1.85	1	50
628	10	SURG	Other endocrine, nutrit & metab O.R. proc w MCC	3.1955	12.08	2	50
629	10	SURG	Other endocrine, nutrit & metab O.R. proc w CC	2.2287	9.90	2	50
630	10	SURG	Other endocrine, nutrit & metab O.R. proc w/o CC/MCC	1.5674	5.78	1	50
637	10	MED	Diabetes w MCC	1.4845	6.47	1	50
638	10	MED	Diabetes w CC	0.8114	4.03	1	50
639	10	MED	Diabetes w/o CC/MCC	0.5797	2.88	1	50
640	10	MED	Nutritional & misc metabolic disorders w MCC	1.0669	4.99	1	50
640.1	10	MED	Nutritional & misc metabolic disorders w MCC	1.0395	6.27	1	50
641	10	MED	Nutritional & misc metabolic disorders w/o MCC	0.8260	3.94	1	50
641.1	10	MED	Nutritional & misc metabolic disorders w/o MCC	0.4743	3.11	1	50
642	10	MED	Inborn errors of metabolism	2.9799	10.24	2	50
642.1	10	MED	Inborn errors of metabolism	1.4812	6.03	1	50
643	10	MED	Endocrine disorders w MCC	1.6161	8.05	1	50
644	10	MED	Endocrine disorders w CC	1.0682	5.61	1	50
645	10	MED	Endocrine disorders w/o CC/MCC	0.7124	3.19	1	50
652	11	SURG	Kidney transplant	6.7387	7.25	4	50
653	11	SURG	Major bladder procedures w MCC	4.5632	15.23	2	50
654	11	SURG	Major bladder procedures w CC	2.9423	10.19	1	50
655	11	SURG	Major bladder procedures w/o CC/MCC	1.9677	6.47	1	50
656	11	SURG	Kidney & ureter procedures for neoplasm w MCC	3.4229	9.45	1	50
657	11	SURG	Kidney & ureter procedures forneoplasm w CC	2.2269	6.97	2	50
658	11	SURG	Kidney & ureter procedures for neoplasm w/o CC/MCC	1.9149	4.45	1	50
659	11	SURG	Kidney & ureter procedures for non-neoplasm w MCC	4.5853	14.02	2	50
660	11	SURG	Kidney & ureter procedures for non-neoplasm w CC	1.6856	5.44	1	50

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661	11	SURG	Kidney & ureter procedures for non-neoplasm w/o CC/MCC	1.2099	2.74	1	50
662	11	SURG	Minor bladder procedures w MCC	2.9254	11.75	7	50
663	11	SURG	Minor bladder procedures w CC	1.6129	6.00	1	50
664	11	SURG	Minor bladder procedures w/o CC/MCC	1.2228	3.04	1	50
665	11	SURG	Prostatectomy w MCC	3.7350	14.85	1	50
666	11	SURG	Prostatectomy w CC	2.5649	7.67	1	50
667	11	SURG	Prostatectomy w/o CC/MCC	0.9970	3.11	1	50
668	11	SURG	Transurethral procedures w MCC	2.0605	7.60	1	50
669	11	SURG	Transurethral procedures w CC	1.0996	3.57	1	50
670	11	SURG	Transurethral procedures w/o CC/MCC	1.0123	2.64	1	50
671	11	SURG	Urethral procedures w CC/MCC	2.0107	10.21	1	50
672	11	SURG	Urethral procedures w/o CC/MCC	1.4092	3.27	1	50
673	11	SURG	Other kidney & urinary tract procedures w MCC	3.2883	12.36	1	50
674	11	SURG	Other kidney & urinary tract procedures w CC	2.1771	8.48	1	50
675	11	SURG	Other kidney & urinary tract procedures w/o CC/MCC	1.6136	3.76	1	50
682	11	MED	Renal failure w MCC	1.4936	6.68	1	50
683	11	MED	Renal failure w CC	1.0658	5.08	1	50
684	11	MED	Renal failure w/o CC/MCC	0.7800	3.74	1	50
685	11	MED	Admit for renal dialysis	0.9401	3.40	1	50
686	11	MED	Kidney & urinary tract neoplasms w MCC	2.0546	8.25	2	50
687	11	MED	Kidney & urinary tract neoplasms w CC	1.1069	4.68	1	50
688	11	MED	Kidney & urinary tract neoplasms w/o CC/MCC	1.3210	5.00	1	50
689	11	MED	Kidney & urinary tract infections w MCC	1.1001	5.66	1	50
690	11	MED	Kidney & urinary tract infections w/o MCC	0.6198	3.43	1	50
691	11	MED	Urinary stones w esw lithotripsy w CC/MCC	1.0687	4.67	2	50
692	11	MED	Urinary stones w esw lithotripsy w/o CC/MCC	0.9224	2.00	1	50
693	11	MED	Urinary stones w/o esw lithotripsy w MCC	1.2302	4.41	1	50
694	11	MED	Urinary stones w/o esw lithotripsy w/o MCC	0.7578	2.68	1	50
695	11	MED	Kidney & urinary tract signs & symptoms w MCC	0.7377	3.38	1	50
696	11	MED	Kidney & urinary tract signs & symptoms w/o MCC	0.6885	3.24	1	50

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697	11	MED	Urethral stricture	1.3310	2.14	1	50
698	11	MED	Other kidney & urinary tract diagnoses w MCC	1.4833	7.05	1	50
699	11	MED	Other kidney & urinary tract diagnoses w CC	0.9996	4.86	1	50
700	11	MED	Other kidney & urinary tract diagnoses w/o CC/MCC	0.7610	3.60	1	50
707	12	SURG	Major male pelvic procedures w CC/MCC	2.2692	5.18	1	50
708	12	SURG	Major male pelvic procedures w/o CC/MCC	1.5463	2.92	1	50
709	12	SURG	Penis procedures w CC/MCC	1.7880	7.40	1	50
710	12	SURG	Penis procedures w/o CC/MCC	1.0081	2.60	1	50
711	12	SURG	Testes procedures w CC/MCC	1.8155	6.47	1	50
712	12	SURG	Testes procedures w/o CC/MCC	0.8488	2.26	1	50
713	12	SURG	Transurethral prostatectomy w CC/MCC	1.5907	6.88	1	50
714	12	SURG	Transurethral prostatectomy w/o CC/MCC	0.8669	1.79	1	50
715	12	SURG	Other male reproductive system O.R. proc for malignancy w CC/MCC	2.7141	9.20	6	50
716	12	SURG	Other male reproductive system O.R. proc for malignancy w/o CC/MCC	1.6602	3.75	1	50
717	12	SURG	Other male reproductive system O.R. proc exc malignancy w CC/MCC	3.0640	12.86	5	50
718	12	SURG	Other male reproductive system O.R. proc exc malignancy w/o CC/MCC	1.2159	4.00	2	50
722	12	MED	Malignancy, male reproductive system w MCC	2.5336	14.33	12	50
723	12	MED	Malignancy, male reproductive system w CC	1.9188	6.78	2	50
724	12	MED	Malignancy, male reproductive system w/o CC/MCC	1.0623	3.88	1	50
725	12	MED	Benign prostatic hypertrophy w MCC	0.6924	1.00	1	50
726	12	MED	Benign prostatic hypertrophy w/o MCC	1.0642	7.00	1	50
727	12	MED	Inflammation of the male reproductive system w MCC	1.1082	5.14	1	50
727.1	12	MED	Inflammation of the male reproductive system w MCC	0.9437	3.67	2	50
728	12	MED	Inflammation of the male reproductive system w/o MCC	0.7729	4.03	1	50
728.1	12	MED	Inflammation of the male reproductive system w/o MCC	0.3924	2.68	1	50
729	12	MED	Other male reproductive system diagnoses w CC/MCC	1.1546	4.81	1	50
730	12	MED	Other male reproductive system diagnoses w/o CC/MCC	0.5688	2.96	1	50
734	13	SURG	Pelvic evisceration, rad hysterectomy & rad vulvectomy w CC/MCC	2.0750	5.66	1	50

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735	13	SURG	Pelvic evisceration, rad hysterectomy & rad vulvectomy w/o CC/MCC	1.5030	2.89	1	50
736	13	SURG	Uterine & adnexa proc for ovarian or adnexal malignancy w MCC	5.0187	15.13	4	50
737	13	SURG	Uterine & adnexa proc for ovarian or adnexal malignancy w CC	2.0457	7.35	3	50
738	13	SURG	Uterine & adnexa proc for ovarian or adnexal malignancy w/o CC/MCC	1.3213	3.71	2	50
739	13	SURG	Uterine,adnexa proc for non-ovarian/adnexal malig w MCC	2.5341	8.50	2	50
740	13	SURG	Uterine,adnexa proc for non-ovarian/adnexal malig w CC	1.7455	4.91	1	50
741	13	SURG	Uterine,adnexa proc for non-ovarian/adnexal malig w/o CC/MCC	1.0373	2.54	1	50
742	13	SURG	Uterine & adnexa proc for non-malignancy w CC/MCC	1.4733	3.93	1	50
743	13	SURG	Uterine & adnexa proc for non-malignancy w/o CC/MCC	1.0648	2.25	1	50
744	13	SURG	D&C, conization, laparoscopy & tubal interruption w CC/MCC	1.6441	6.41	1	50
745	13	SURG	D&C, conization, laparoscopy & tubal interruption w/o CC/MCC	1.1198	3.00	1	50
746	13	SURG	Vagina, cervix & vulva procedures w CC/MCC	1.2383	4.43	1	50
747	13	SURG	Vagina, cervix & vulva procedures w/o CC/MCC	0.8000	2.70	1	50
748	13	SURG	Female reproductive system reconstructive procedures	0.9645	1.94	1	50
749	13	SURG	Other female reproductive system O.R. procedures w CC/MCC	1.9428	6.07	1	50
750	13	SURG	Other female reproductive system O.R. procedures w/o CC/MCC	0.9970	2.75	1	50
754	13	MED	Malignancy, female reproductive system w MCC	2.1906	8.05	1	50
755	13	MED	Malignancy, female reproductive system w CC	1.4411	6.26	1	50
756	13	MED	Malignancy, female reproductive system w/o CC/MCC	0.9001	3.55	1	50
757	13	MED	Infections, female reproductive system w MCC	1.3875	6.60	2	50
758	13	MED	Infections, female reproductive system w CC	0.8029	3.67	1	50
759	13	MED	Infections, female reproductive system w/o CC/MCC	0.6203	2.91	1	50
760	13	MED	Menstrual & other female reproductive system disorders w CC/MCC	0.8367	3.07	1	50
761	13	MED	Menstrual & other female reproductive system disorders w/o CC/MCC	0.7490	2.18	1	50
765	14	SURG	Cesarean section w CC/MCC	0.9821	4.56	2	50

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766	14	SURG	Cesarean section w/o CC/MCC	0.7656	3.35	2	50
767	14	SURG	Vaginal delivery w sterilization &/or D&C	0.8071	2.67	1	50
768	14	SURG	Vaginal delivery w O.R. proc except steril &/or D&C	0.9786	4.24	1	50
769	14	SURG	Postpartum & post abortion diagnoses w O.R. procedure	1.6107	4.63	1	50
770	14	SURG	Abortion w D&C, aspiration curettage or hysterotomy	0.8102	2.46	1	50
774	14	MED	Vaginal delivery w complicating diagnoses	0.6197	3.07	1	50
775	14	MED	Vaginal delivery w/o complicating diagnoses	0.4787	2.45	1	50
776	14	MED	Postpartum & post abortion diagnoses w/o O.R. procedure	0.6865	3.26	1	50
777	14	MED	Ectopic pregnancy	0.9830	2.37	1	50
778	14	MED	Threatened abortion	0.4735	3.87	1	50
779	14	MED	Abortion w/o D&C	0.5046	2.19	1	50
780	14	MED	False labor	0.3002	2.08	1	50
781	14	MED	Other antepartum diagnoses w medical complications	0.6075	3.87	1	50
782	14	MED	Other antepartum diagnoses w/o medical complications	0.5424	4.07	1	50
789	15	MED	Neonates, died or transferred to another acute care facility	0.2572	1.78	1	50
789.1	15	MED	Neonates, died or transferred to another acute care facility	4.8745	15.65	1	51
790	15	MED	Extreme immaturity or respiratory distress syndrome, neonate	1.3798	10.17	1	50
790.1	15	MED	Extreme immaturity or respiratory distress syndrome, neonate	9.1736	39.04	6	73
791	15	MED	Prematurity w major problems	1.1187	9.41	2	50
791.1	15	MED	Prematurity w major problems	3.9464	21.65	4	53
792	15	MED	Prematurity w/o major problems	0.3991	4.54	1	50
792.1	15	MED	Prematurity w/o major problems	2.0839	13.20	3	50
793	15	MED	Full term neonate w major problems	0.5697	5.06	1	50
793.1	15	MED	Full term neonate w major problems	2.0534	10.56	2	50
794	15	MED	Neonate w other significant problems	0.2218	3.02	1	50
794.1	15	MED	Neonate w other significant problems	0.8874	5.41	2	50
795	15	MED	Normal newborn	0.1418	2.52	1	50
799	16	SURG	Splenectomy w MCC	3.8223	10.30	3	50
800	16	SURG	Splenectomy w CC	2.4524	6.30	2	50

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801	16	SURG	Splenectomy w/o CC/MCC	1.6178	3.76	1	50
802	16	SURG	Other O.R. proc of the blood & blood forming organs w MCC	4.2424	15.56	3	52
803	16	SURG	Other O.R. proc of the blood & blood forming organs w CC	2.0095	8.80	2	50
804	16	SURG	Other O.R. proc of the blood & blood forming organs w/o CC/MCC	1.3914	4.96	1	50
808	16	MED	Major hematol/immun diag exc sickle cell crisis & coagul w MCC	2.3865	9.48	2	50
809	16	MED	Major hematol/immun diag exc sickle cell crisis & coagul w CC	1.3724	6.15	1	50
810	16	MED	Major hematol/immun diag exc sickle cell crisis & coagul w/o CC/MCC	0.9189	3.95	1	50
811	16	MED	Red blood cell disorders w MCC	1.5485	8.27	2	50
811.1	16	MED	Red blood cell disorders w MCC	1.0735	6.17	2	50
812	16	MED	Red blood cell disorders w/o MCC	0.8002	4.84	1	50
812.1	16	MED	Red blood cell disorders w/o MCC	0.4396	3.59	1	50
813	16	MED	Coagulation disorders	1.5347	4.25	1	50
814	16	MED	Reticuloendothelial & immunity disorders w MCC	2.6932	11.14	1	50
815	16	MED	Reticuloendothelial & immunity disorders w CC	0.9334	4.60	1	50
816	16	MED	Reticuloendothelial & immunity disorders w/o CC/MCC	0.6565	3.55	1	50
820	17	SURG	Lymphoma & leukemia w major O.R. procedure w MCC	11.8003	28.78	2	61
821	17	SURG	Lymphoma & leukemia w major O.R. procedure w CC	4.2909	12.19	1	50
822	17	SURG	Lymphoma & leukemia w major O.R. procedure w/o CC/MCC	1.6006	4.59	1	50
823	17	SURG	Lymphoma & non-acute leukemia w other O.R. proc w MCC	5.5228	18.69	1	50
824	17	SURG	Lymphoma & non-acute leukemia w other O.R. proc w CC	2.9439	10.80	2	50
825	17	SURG	Lymphoma & non-acute leukemia w other O.R. proc w/o CC/MCC	1.9086	5.84	2	50
826	17	SURG	Myeloprolif disord or poorly diff neopl w maj O.R. proc w MCC	8.5525	23.83	1	55
827	17	SURG	Myeloprolif disord or poorly diff neopl w maj O.R. proc w CC	3.3938	10.91	1	50
828	17	SURG	Myeloprolif disord or poorly diff neopl w maj O.R. proc w/o CC/MCC	2.1508	5.43	1	50
829	17	SURG	Myeloprolif disord or poorly diff neopl w other O.R. proc w CC/MCC	2.6235	10.08	2	50

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830	17	SURG	Myeloprolif disord or poorly diff neopl w other O.R. proc w/o CC/MCC	1.2458	3.77	2	50
834	17	MED	Acute leukemia w/o major O.R. procedure w MCC	8.3270	22.48	3	54
835	17	MED	Acute leukemia w/o major O.R. procedure w CC	4.1938	13.64	2	50
836	17	MED	Acute leukemia w/o major O.R. procedure w/o CC/MCC	2.0577	7.19	1	50
837	17	MED	Chemo w acute leukemia as sdx or w high dose chemo agent w MCC	5.6911	20.59	5	51
837.1	17	MED	Chemo w acute leukemia as sdx or w high dose chemo agent w MCC	2.7184	10.84	3	50
838	17	MED	Chemo w acute leukemia as sdx or w high dose chemo agent w CC	2.4346	9.24	3	50
838.1	17	MED	Chemo w acute leukemia as sdx or w high dose chemo agent w CC	2.3006	12.27	1	50
839	17	MED	Chemo w acute leukemia as sdx or w high dose chemo agent w/o CC/MCC	0.9958	5.58	2	50
839.1	17	MED	Chemo w acute leukemia as sdx or w high dose chemo agent w/o CC/MCC	0.8714	4.52	1	50
840	17	MED	Lymphoma & non-acute leukemia w MCC	3.7331	13.45	2	50
841	17	MED	Lymphoma & non-acute leukemia w CC	1.9086	7.47	1	50
842	17	MED	Lymphoma & non-acute leukemia w/o CC/MCC	1.3464	5.16	1	50
843	17	MED	Other myeloprolif dis or poorly diff neopl diag w MCC	2.6766	11.94	1	50
844	17	MED	Other myeloprolif dis or poorly diff neopl diag w CC	1.6047	7.31	2	50
845	17	MED	Other myeloprolif dis or poorly diff neopl diag w/o CC/MCC	0.8803	4.62	1	50
846	17	MED	Chemotherapy w/o acute leukemia as secondary diagnosis w MCC	1.9777	8.23	2	50
847	17	MED	Chemotherapy w/o acute leukemia as secondary diagnosis w CC	1.0285	4.28	1	50
848	17	MED	Chemotherapy w/o acute leukemia as secondary diagnosis w/o CC/MCC	0.8397	3.69	1	50
849	17	MED	Radiotherapy	0.8460	2.97	1	50
853	18	SURG	Infectious & parasitic diseases w O.R. procedure w MCC	6.0182	19.49	4	51
854	18	SURG	Infectious & parasitic diseases w O.R. procedure w CC	2.5763	11.32	2	50
855	18	SURG	Infectious & parasitic diseases w O.R. procedure w/o CC/MCC	3.7790	14.08	1	50
856	18	SURG	Postoperative or post-traumatic infections w O.R. proc w MCC	4.0727	14.50	3	50

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857	18	SURG	Postoperative or post-traumatic infections w O.R. proc w CC	1.9300	8.45	2	50
858	18	SURG	Postoperative or post-traumatic infections w O.R. proc w/o CC/MCC	1.4640	5.93	1	50
862	18	MED	Postoperative & post-traumatic infections w MCC	1.8807	8.62	2	50
863	18	MED	Postoperative & post-traumatic infections w/o MCC	0.9360	4.74	1	50
864	18	MED	Fever of unknown origin	0.9920	4.67	1	50
864.1	18	MED	Fever of unknown origin	0.4361	2.73	1	50
865	18	MED	Viral illness w MCC	1.4067	6.00	1	50
865.1	18	MED	Viral illness w MCC	0.8561	5.06	2	50
866	18	MED	Viral illness w/o MCC	0.7188	3.42	1	50
866.1	18	MED	Viral illness w/o MCC	0.4336	2.68	1	50
867	18	MED	Other infectious & parasitic diseases diagnoses w MCC	2.6254	10.89	1	50
868	18	MED	Other infectious & parasitic diseases diagnoses w CC	1.1990	5.75	1	50
869	18	MED	Other infectious & parasitic diseases diagnoses w/o CC/MCC	0.7746	4.46	1	50
870	18	MED	Septicemia w MV 96+ hours	5.9555	16.75	5	50
871	18	MED	Septicemia w/o MV 96+ hours w MCC	1.9993	8.34	1	50
872	18	MED	Septicemia w/o MV 96+ hours w/o MCC	1.1153	5.56	1	50
876	19	SURG	O.R. procedure w principal diagnoses of mental illness	1.5096	7.38	1	50
880	19	MED	Acute adjustment reaction & psychosocial dysfunction	0.7910	3.35	1	50
881	19	MED	Depressive neuroses	0.5721	3.11	1	50
882	19	MED	Neuroses except depressive	0.7831	4.10	1	50
883	19	MED	Disorders of personality & impulse control	1.7462	9.85	1	50
884	19	MED	Organic disturbances & mental retardation	0.8477	4.36	1	50
885	19	MED	Psychoses	0.6760	6.43	1	50
886	19	MED	Behavioral & developmental disorders	0.4070	2.40	2	50
887	19	MED	Other mental disorder diagnoses	0.3979	2.43	1	50
894	20	MED	Alcohol/drug abuse or dependence, left ama	0.4612	2.31	1	50
895	20	MED	Alcohol/drug abuse or dependence w rehabilitation therapy	0.7643	8.05	2	50
896	20	MED	Alcohol/drug abuse or dependence w/o rehabilitation therapy w MCC	1.6673	7.89	1	50

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897	20	MED	Alcohol/drug abuse or dependence w/o rehabilitation therapy w/o MCC	0.7186	4.27	1	50
901	21	SURG	Wound debridements for injuries w MCC	5.9727	22.21	4	53
902	21	SURG	Wound debridements for injuries w CC	2.5890	12.04	2	50
903	21	SURG	Wound debridements for injuries w/o CC/MCC	1.5392	5.83	1	50
904	21	SURG	Skin grafts for injuries w CC/MCC	5.4873	20.31	2	53
905	21	SURG	Skin grafts for injuries w/o CC/MCC	1.9349	7.65	2	50
906	21	SURG	Hand procedures for injuries	1.0494	2.70	1	50
907	21	SURG	Other O.R. procedures for injuries w MCC	4.1787	12.41	1	50
908	21	SURG	Other O.R. procedures for injuries w CC	1.9420	6.67	1	50
909	21	SURG	Other O.R. procedures for injuries w/o CC/MCC	1.1909	3.23	1	50
913	21	MED	Traumatic injury w MCC	1.2459	6.35	1	50
914	21	MED	Traumatic injury w/o MCC	0.6521	2.65	1	50
915	21	MED	Allergic reactions w MCC	1.7678	6.42	2	50
915.1	21	MED	Allergic reactions w MCC	0.4290	1.50	1	50
916	21	MED	Allergic reactions w/o MCC	0.5209	2.48	1	50
916.1	21	MED	Allergic reactions w/o MCC	0.3378	1.97	1	50
917	21	MED	Poisoning & toxic effects of drugs w MCC	1.5186	5.03	1	50
917.1	21	MED	Poisoning & toxic effects of drugs w MCC	0.8758	3.00	1	50
918	21	MED	Poisoning & toxic effects of drugs w/o MCC	0.5817	2.66	1	50
918.1	21	MED	Poisoning & toxic effects of drugs w/o MCC	0.4448	2.19	1	50
919	21	MED	Complications of treatment w MCC	1.6989	7.49	1	50
919.1	21	MED	Complications of treatment w MCC	1.0580	5.14	1	50
920	21	MED	Complications of treatment w CC	1.1110	5.41	1	50
920.1	21	MED	Complications of treatment w CC	0.8499	4.06	1	50
921	21	MED	Complications of treatment w/o CC/MCC	0.7538	3.49	1	50
921.1	21	MED	Complications of treatment w/o CC/MCC	0.4168	2.10	1	50
922	21	MED	Other injury, poisoning & toxic effect diag w MCC	1.4404	6.46	1	50
923	21	MED	Other injury, poisoning & toxic effect diag w/o MCC	0.7885	4.30	1	50
927	22	SURG	Extensive burns or full thickness burns w MV 96+ hrs w skin graft	12.9817	27.23	9	50

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DRG	MDC	Type	Description	Relative Weight	Avg LOS	Low Day	High Day
928	22	SURG	Full thickness burn w skin graft or inhal inj w CC/MCC	5.0794	17.48	2	50
929	22	SURG	Full thickness burn w skin graft or inhal inj w/o CC/MCC	2.6665	9.43	1	50
933	22	MED	Extensive burns or full thickness burns w MV 96+ hrs w/o skin graft	5.3283	11.90	1	50
934	22	MED	Full thickness burn w/o skin grft or inhal inj	1.5378	6.46	1	50
935	22	MED	Non-extensive burns	0.8636	3.89	1	50
939	23	SURG	O.R. proc w diagnoses of other contact w health services w MCC	4.3030	15.44	1	50
940	23	SURG	O.R. proc w diagnoses of other contact w health services w CC	1.9319	9.04	1	50
941	23	SURG	O.R. proc w diagnoses of other contact w health services w/o CC/MCC	1.1165	3.23	1	50
945	23	MED	Rehabilitation w CC/MCC	1.9367	13.11	3	50
946	23	MED	Rehabilitation w/o CC/MCC	1.3392	9.56	2	50
947	23	MED	Signs & symptoms w MCC	1.1678	5.53	1	50
948	23	MED	Signs & symptoms w/o MCC	0.7419	3.85	1	50
949	23	MED	Aftercare w CC/MCC	1.2309	4.93	1	50
950	23	MED	Aftercare w/o CC/MCC	0.3650	2.89	1	50
951	23	MED	Other factors influencing health status	0.3551	2.30	1	50
955	24	SURG	Craniotomy for multiple significant trauma	7.1468	18.56	3	50
956	24	SURG	Limb reattachment, hip & femur proc for multiple significant trauma	5.6608	13.37	1	50
957	24	SURG	Other O.R. procedures for multiple significant trauma w MCC	7.3355	16.75	1	50
958	24	SURG	Other O.R. procedures for multiple significant trauma w CC	4.1564	9.94	3	50
959	24	SURG	Other O.R. procedures for multiple significant trauma w/o CC/MCC	2.2488	5.73	1	50
963	24	MED	Other multiple significant trauma w MCC	3.8803	11.29	1	50
964	24	MED	Other multiple significant trauma w CC	1.4976	4.96	1	50
965	24	MED	Other multiple significant trauma w/o CC/MCC	1.1106	3.51	1	50
969	25	SURG	HIV w extensive O.R. procedure w MCC	5.0437	17.58	2	50
970	25	SURG	HIV w extensive O.R. procedure w/o MCC	2.4869	7.90	3	50
974	25	MED	HIV w major related condition w MCC	2.4832	11.65	1	50
975	25	MED	HIV w major related condition w CC	1.4038	7.58	1	50

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976	25	MED	HIV w major related condition w/o CC/MCC	0.8366	4.82	1	50
977	25	MED	HIV w or w/o other related condition	1.1964	6.15	1	50
981		SURG	Extensive O.R. procedure unrelated to principal diagnosis w MCC	5.5437	17.49	2	50
982		SURG	Extensive O.R. procedure unrelated to principal diagnosis w CC	2.7983	9.43	2	50
983		SURG	Extensive O.R. procedure unrelated to principal diagnosis w/o CC/MCC	1.6973	5.09	1	50
984		SURG	Prostatic O.R. procedure unrelated to principal diagnosis w MCC	2.7740	15.05	1	50
985		SURG	Prostatic O.R. procedure unrelated to principal diagnosis w CC	2.1266	10.00	1	50
986		SURG	Prostatic O.R. procedure unrelated to principal diagnosis w/o CC/MCC	0.9737	2.00	2	50
987		SURG	Non-extensive O.R. proc unrelated to principal diagnosis w MCC	3.1717	13.03	2	50
988		SURG	Non-extensive O.R. proc unrelated to principal diagnosis w CC	1.9681	8.84	2	50
989		SURG	Non-extensive O.R. proc unrelated to principal diagnosis w/o CC/MCC	1.2382	4.72	1	50
998			Principal diagnosis invalid as discharge diagnosis	0.0000	0.00	0	0
999			Ungroupable	0.0000	0.00	0	0