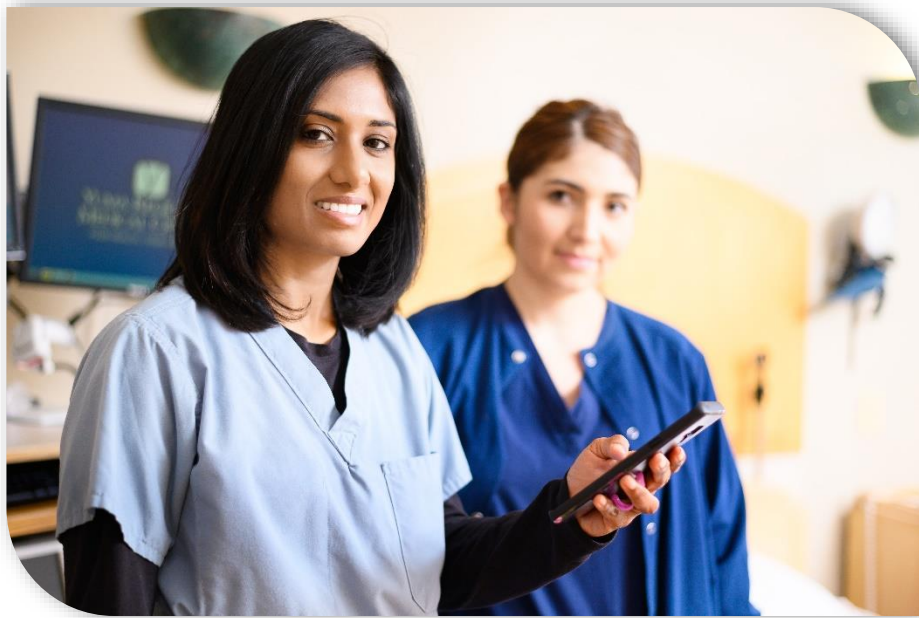


2021 Top 50 Diagnosis Related Groupings (DRGs)



Effective Date: January 1, 2022



DECISION SUPPORT (CHARGEMASTER | SERVICE LINE COSTING & ANALYTICS)

DISCLAIMER

The pricing presented herein is based on combined patient level account information which can have large differences based on their treatment patterns. Each patient is different and unique and Yuma Regional Medical Center strives to treat each patient as an individual with specific healthcare needs. Therefore, pricing will be individual as well. A physician may well believe a specific diagnosis is appropriate for someone, yet upon admission or treatment, there may be complications or comorbidities; for example, someone may have diabetes which contributes a condition creating the need for a different course of treatment. Charges listed do not reflect additional charges related to Physician Billing.

Effective Date: January 1st, 2022

Top 50 DRGs

2021 Average Per Day Charge & Average Length of Stay (ALOS)

DRG Code & Description	Estimated ALOS	Estimated Charge Per Day
064 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH MCC	4.4	\$ 12,283
065 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	2.5	\$ 15,764
177 - RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	6.1	\$ 8,175
189 - PULMONARY EDEMA AND RESPIRATORY FAILURE	4.0	\$ 10,338
190 - CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH MCC	3.2	\$ 10,241
193 - SIMPLE PNEUMONIA AND PLEURISY WITH MCC	4.8	\$ 9,515
207 - RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT >96 HOURS	22.4	\$ 12,746
208 - RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <=96 HOURS	8.5	\$ 13,135
246 - PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH DRUG-ELUTING STENT WITH MCC OR 4+ ARTERIES OR STENTS	5.0	\$ 36,857
247 - PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH DRUG-ELUTING STENT WITHOUT MCC	2.6	\$ 48,720
280 - ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH MCC	4.6	\$ 12,225
281 - ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH CC	2.9	\$ 16,422
291 - HEART FAILURE AND SHOCK WITH MCC	4.5	\$ 8,657
292 - HEART FAILURE AND SHOCK WITH CC	3.3	\$ 9,325
308 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH MCC	4.0	\$ 9,596
309 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH CC	2.7	\$ 11,797
329 - MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH MCC	11.5	\$ 15,278
330 - MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	6.2	\$ 18,619
377 - GASTROINTESTINAL HEMORRHAGE WITH MCC	5.5	\$ 12,467
378 - GASTROINTESTINAL HEMORRHAGE WITH CC	3.2	\$ 13,060
392 - ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	3.5	\$ 10,510
418 - LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH CC	4.2	\$ 19,555
419 - LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITHOUT CC/MCC	3.3	\$ 23,636
432 - CIRRHOSIS AND ALCOHOLIC HEPATITIS WITH MCC	5.4	\$ 12,306
470 - MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	1.7	\$ 44,735

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Top 50 DRGs

2021 Average Per Day Charge & Average Length of Stay (ALOS)

DRG Code & Description	Estimated ALOS	Estimated Charge Per Day
481 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	3.7	\$ 24,279
603 - CELLULITIS WITHOUT MCC	3.6	\$ 8,642
617 - AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	4.5	\$ 13,535
638 - DIABETES WITH CC	3.3	\$ 11,486
640 - MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITH MCC	3.7	\$ 10,860
641 - MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITHOUT MCC	3.2	\$ 10,680
682 - RENAL FAILURE WITH MCC	4.7	\$ 9,126
683 - RENAL FAILURE WITH CC	3.8	\$ 9,658
690 - KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	3.4	\$ 9,209
698 - OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH MCC	4.8	\$ 9,483
768 - VAGINAL DELIVERY WITH O.R. PROCEDURES EXCEPT STERILIZATION AND/OR DC	2.2	\$ 11,574
785 - CESAREAN SECTION WITH STERILIZATION WITHOUT CC/MCC	2.3	\$ 11,828
786 - CESAREAN SECTION WITHOUT STERILIZATION WITH MCC	4.3	\$ 12,248
787 - CESAREAN SECTION WITHOUT STERILIZATION WITH CC	2.6	\$ 11,643
788 - CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC/MCC	2.5	\$ 11,173
792 - PREMATURITY WITHOUT MAJOR PROBLEMS	8.7	\$ 3,294
794 - NEONATE WITH OTHER SIGNIFICANT PROBLEMS	2.2	\$ 2,927
795 - NORMAL NEWBORN	1.4	\$ 2,378
805 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DC WITH MCC	2.6	\$ 11,183
806 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DC WITH CC	2.2	\$ 11,705
807 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DC WITHOUT CC/MCC	1.8	\$ 12,115
853 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH MCC	10.7	\$ 14,844
854 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH CC	5.5	\$ 14,239
871 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	6.9	\$ 10,113
872 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	4.5	\$ 9,281

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