

National Average Payment Table Update

The national average payment for each DRG is calculated by multiplying the current relative weight of the DRG by the national average hospital Medicare base rate. The national average hospital Medicare base rate is an average of the sum of four categories: Hospital Submitted Quality Data and is a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is a Meaningful EHR User, Hospital Submitted Quality Data and is NOT a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is NOT a Meaningful EHR User, using dollar amounts from new data published in the Federal Register FY 2022 Final Rule Correcting Amendment, Table 1A. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index greater than 1) or Table 1B. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index less than or equal to 1). This information is provided as a benchmark reference only. There is no official publication of the average hospital base rate; therefore, the national average payments provided in this table are approximate.

DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
001	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM WITH MCC	28.9132	30.1	39.1	\$174,653.65
002	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM WITHOUT MCC	14.9701	15.4	18.2	\$90,428.69
TI 003	ECMO OR TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITH MAJOR O.R. PROCEDURES	19.1055	22.4	30.2	\$115,409.07
TI 004	TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITHOUT MAJOR O.R. PROCEDURES	11.9225	20.0	24.6	\$72,019.29
005	LIVER TRANSPLANT WITH MCC OR INTESTINAL TRANSPLANT	10.2350	14.4	19.4	\$61,825.75
006	LIVER TRANSPLANT WITHOUT MCC	4.6964	7.5	8.1	\$28,369.17
007	LUNG TRANSPLANT	11.5800	17.4	20.8	\$69,950.38
008	SIMULTANEOUS PANCREAS AND KIDNEY TRANSPLANT	5.4333	9.0	10.2	\$32,820.50
010	PANCREAS TRANSPLANT	3.6200	8.0	9.1	\$21,867.04
011	TRACHEOSTOMY FOR FACE, MOUTH AND NECK DIAGNOSES OR LARYNGECTOMY WITH MCC	5.0214	10.9	13.8	\$30,332.37
012	TRACHEOSTOMY FOR FACE, MOUTH AND NECK DIAGNOSES OR LARYNGECTOMY WITH CC	3.8328	8.3	9.4	\$23,152.49
013	TRACHEOSTOMY FOR FACE, MOUTH AND NECK DIAGNOSES OR LARYNGECTOMY WITHOUT CC/MCC	2.7238	6.0	6.8	\$16,453.44
014	ALLOGENEIC BONE MARROW TRANSPLANT	10.6770	24.1	27.2	\$64,495.70
016	AUTOLOGOUS BONE MARROW TRANSPLANT WITH CC/MCC	6.7363	17.1	18.3	\$40,691.43
017	AUTOLOGOUS BONE MARROW TRANSPLANT WITHOUT CC/MCC	4.8557	8.9	11.6	\$29,331.44
018	CHIMERIC ANTIGEN RECEPTOR (CAR) T-CELL AND OTHER IMMUNOTHERAPIES	37.4501	15.6	17.6	\$226,221.82
019	SIMULTANEOUS PANCREAS AND KIDNEY TRANSPLANT WITH HEMODIALYSIS	6.6797	11.0	12.9	\$40,349.53
020	INTRACRANIAL VASCULAR PROCEDURES WITH PRINCIPAL DIAGNOSIS HEMORRHAGE WITH MCC	10.3370	12.7	16.1	\$62,441.89
021	INTRACRANIAL VASCULAR PROCEDURES WITH PRINCIPAL DIAGNOSIS HEMORRHAGE WITH CC	7.5435	10.0	12.3	\$45,567.42
022	INTRACRANIAL VASCULAR PROCEDURES WITH PRINCIPAL DIAGNOSIS HEMORRHAGE WITHOUT CC/MCC	4.8428	4.0	5.8	\$29,253.51
SP 023	CRANIOTOMY WITH MAJOR DEVICE IMPLANT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS WITH MCC OR CHEMOTHERAPY IMPLANT OR EPILEPSY WITH NEUROSTIMULATOR	5.6719	7.1	9.8	\$34,261.79
SP 024	CRANIOTOMY WITH MAJOR DEVICE IMPLANT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS WITHOUT MCC	3.9390	4.1	5.2	\$23,794.00
TI 025	CRANIOTOMY AND ENDOVASCULAR INTRACRANIAL PROCEDURES WITH MCC	4.4974	6.6	8.8	\$27,167.08
TI 026	CRANIOTOMY AND ENDOVASCULAR INTRACRANIAL PROCEDURES WITH CC	3.0620	3.8	5.3	\$18,496.38
TI 027	CRANIOTOMY AND ENDOVASCULAR INTRACRANIAL PROCEDURES WITHOUT CC/MCC	2.5143	1.9	2.5	\$15,187.93
SP 028	SPINAL PROCEDURES WITH MCC	5.8231	9.3	12.2	\$35,175.13
SP 029	SPINAL PROCEDURES WITH CC OR SPINAL NEUROSTIMULATORS	3.2968	4.5	6.0	\$19,914.72
SP 030	SPINAL PROCEDURES WITHOUT CC/MCC	2.3568	2.4	3.1	\$14,236.53
TI 031	VENTRICULAR SHUNT PROCEDURES WITH MCC	4.3717	7.2	10.3	\$26,407.78
TI 032	VENTRICULAR SHUNT PROCEDURES WITH CC	2.2165	3.0	4.3	\$13,389.03
TI 033	VENTRICULAR SHUNT PROCEDURES WITHOUT CC/MCC	1.7222	1.7	2.2	\$10,403.16
034	CAROTID ARTERY STENT PROCEDURES WITH MCC	3.9781	4.7	7.0	\$24,030.19
035	CAROTID ARTERY STENT PROCEDURES WITH CC	2.3397	2.1	3.0	\$14,133.24
036	CAROTID ARTERY STENT PROCEDURES WITHOUT CC/MCC	1.8523	1.2	1.4	\$11,189.04
037	EXTRACRANIAL PROCEDURES WITH MCC	3.2776	5.0	7.3	\$19,798.74
038	EXTRACRANIAL PROCEDURES WITH CC	1.6588	2.1	3.0	\$10,020.18
039	EXTRACRANIAL PROCEDURES WITHOUT CC/MCC	1.1391	1.2	1.4	\$6,880.87
SP 040	PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITH MCC	3.8648	6.9	10.0	\$23,345.79
SP 041	PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITH CC OR PERIPHERAL NEUROSTIMULATOR	2.3497	3.9	4.9	\$14,193.64
SP 042	PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITHOUT CC/MCC	1.9012	2.4	2.9	\$11,484.43
052	SPINAL DISORDERS AND INJURIES WITH CC/MCC	1.8535	4.2	6.0	\$11,196.29

Calculated with an average hospital Medicare base rate of \$6040.62. Each hospital's base rate and corresponding payment will vary. The national average hospital Medicare base rate is an average of the sum of four categories: Hospital Submitted Quality Data and is a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is a Meaningful EHR User, Hospital Submitted Quality Data and is NOT a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is NOT a Meaningful EHR User, using dollar amounts published in the Federal Register FY 2022 Final Rule Correcting Amendment, Table 1A. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index greater than 1) or Table 1B. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index less than or equal to 1).

MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
053	SPINAL DISORDERS AND INJURIES WITHOUT CC/MCC	1.1364	2.8	3.7	\$6,864.56
T 054	NERVOUS SYSTEM NEOPLASMS WITH MCC	1.3683	3.8	5.2	\$8,265.38
T 055	NERVOUS SYSTEM NEOPLASMS WITHOUT MCC	1.0446	3.0	4.1	\$6,310.03
T 056	DEGENERATIVE NERVOUS SYSTEM DISORDERS WITH MCC	2.1953	5.5	8.3	\$13,260.97
T 057	DEGENERATIVE NERVOUS SYSTEM DISORDERS WITHOUT MCC	1.2675	3.9	5.8	\$7,656.49
058	MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA WITH MCC	1.7378	4.9	7.1	\$10,497.39
059	MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA WITH CC	1.1273	3.6	4.6	\$6,809.59
060	MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA WITHOUT CC/MCC	0.9177	3.0	3.6	\$5,543.48
061	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITH MCC	2.8912	4.7	6.2	\$17,464.64
062	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITH CC	1.9883	3.2	3.7	\$12,010.56
063	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITHOUT CC/MCC	1.7097	2.3	2.6	\$10,327.65
T 064	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH MCC	1.9189	4.4	6.1	\$11,591.35
T 065	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	1.0200	2.9	3.6	\$6,161.43
T 066	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITHOUT CC/MCC	0.7116	2.0	2.4	\$4,298.51
067	NONSPECIFIC CVA AND PRECEREBRAL OCCLUSION WITHOUT INFARCTION WITH MCC	1.4258	3.3	4.4	\$8,612.72
068	NONSPECIFIC CVA AND PRECEREBRAL OCCLUSION WITHOUT INFARCTION WITHOUT MCC	0.8889	2.1	2.6	\$5,369.51
069	TRANSIENT ISCHEMIA WITHOUT THROMBOLYTIC	0.7871	2.1	2.5	\$4,754.57
T 070	NONSPECIFIC CEREBROVASCULAR DISORDERS WITH MCC	1.6796	4.5	6.2	\$10,145.83
T 071	NONSPECIFIC CEREBROVASCULAR DISORDERS WITH CC	1.0118	3.3	4.4	\$6,111.90
T 072	NONSPECIFIC CEREBROVASCULAR DISORDERS WITHOUT CC/MCC	0.7717	2.3	2.9	\$4,661.55
073	CRANIAL AND PERIPHERAL NERVE DISORDERS WITH MCC	1.4529	3.7	5.1	\$8,776.42
074	CRANIAL AND PERIPHERAL NERVE DISORDERS WITHOUT MCC	1.0190	2.9	3.6	\$6,155.39
075	VIRAL MENINGITIS WITH CC/MCC	1.6270	4.7	6.1	\$9,828.09
076	VIRAL MENINGITIS WITHOUT CC/MCC	0.9849	3.0	3.6	\$5,949.41
077	HYPERTENSIVE ENCEPHALOPATHY WITH MCC	1.5329	4.0	5.2	\$9,259.67
078	HYPERTENSIVE ENCEPHALOPATHY WITH CC	0.9499	2.8	3.5	\$5,737.98
079	HYPERTENSIVE ENCEPHALOPATHY WITHOUT CC/MCC	0.7288	2.0	2.4	\$4,402.40
080	NONTRAUMATIC STUPOR AND COMA WITH MCC	2.0954	5.1	7.5	\$12,657.52
081	NONTRAUMATIC STUPOR AND COMA WITHOUT MCC	0.7732	2.5	3.3	\$4,670.61
082	TRAUMATIC STUPOR AND COMA >1 HOUR WITH MCC	2.2639	4.2	6.4	\$13,675.36
083	TRAUMATIC STUPOR AND COMA >1 HOUR WITH CC	1.3440	3.3	4.3	\$8,118.59
084	TRAUMATIC STUPOR AND COMA >1 HOUR WITHOUT CC/MCC	0.9056	2.1	2.6	\$5,470.39
T 085	TRAUMATIC STUPOR AND COMA <1 HOUR WITH MCC	2.3117	4.6	6.5	\$13,964.10
T 086	TRAUMATIC STUPOR AND COMA <1 HOUR WITH CC	1.2745	3.0	3.9	\$7,698.77
T 087	TRAUMATIC STUPOR AND COMA <1 HOUR WITHOUT CC/MCC	0.8636	2.0	2.4	\$5,216.68
088	CONCUSSION WITH MCC	1.4552	3.6	4.7	\$8,790.31
089	CONCUSSION WITH CC	1.0635	2.7	3.3	\$6,424.20
090	CONCUSSION WITHOUT CC/MCC	0.8546	1.9	2.3	\$5,162.31
T 091	OTHER DISORDERS OF NERVOUS SYSTEM WITH MCC	1.6508	4.2	5.8	\$9,971.86
T 092	OTHER DISORDERS OF NERVOUS SYSTEM WITH CC	0.9889	3.0	3.9	\$5,973.57
T 093	OTHER DISORDERS OF NERVOUS SYSTEM WITHOUT CC/MCC	0.7822	2.2	2.8	\$4,724.97
094	BACTERIAL AND TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM WITH MCC	3.6379	8.0	10.7	\$21,975.17
095	BACTERIAL AND TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM WITH CC	2.5073	5.8	7.2	\$15,145.65
096	BACTERIAL AND TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM WITHOUT CC/MCC	2.3327	4.2	5.0	\$14,090.95
097	NON-BACTERIAL INFECTION OF NERVOUS SYSTEM EXCEPT VIRAL MENINGITIS WITH MCC	3.7604	8.7	11.9	\$22,715.15
098	NON-BACTERIAL INFECTION OF NERVOUS SYSTEM EXCEPT VIRAL MENINGITIS WITH CC	2.1125	5.6	7.3	\$12,760.81
099	NON-BACTERIAL INFECTION OF NERVOUS SYSTEM EXCEPT VIRAL MENINGITIS WITHOUT CC/MCC	1.4019	3.9	4.8	\$8,468.35
T 100	SEIZURES WITH MCC	1.8764	4.3	6.0	\$11,334.62
T 101	SEIZURES WITHOUT MCC	0.8884	2.6	3.4	\$5,366.49
102	HEADACHES WITH MCC	1.1531	3.0	4.1	\$6,965.44

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103	HEADACHES WITHOUT MCC	0.8295	2.3	3.0	\$5,010.69
113	ORBITAL PROCEDURES WITH CC/MCC	2.1944	4.5	6.3	\$13,255.54
114	ORBITAL PROCEDURES WITHOUT CC/MCC	1.4476	2.3	2.8	\$8,744.40
115	EXTRAOCULAR PROCEDURES EXCEPT ORBIT	1.4566	3.5	4.5	\$8,798.77
116	INTRAOCULAR PROCEDURES WITH CC/MCC	1.8827	4.1	6.1	\$11,372.68
117	INTRAOCULAR PROCEDURES WITHOUT CC/MCC	1.0412	2.1	2.8	\$6,289.49
121	ACUTE MAJOR EYE INFECTIONS WITH CC/MCC	1.1906	4.2	5.5	\$7,191.96
122	ACUTE MAJOR EYE INFECTIONS WITHOUT CC/MCC	0.6455	3.0	3.8	\$3,899.22
123	NEUROLOGICAL EYE DISORDERS	0.7668	2.0	2.5	\$4,631.95
124	OTHER DISORDERS OF THE EYE WITH MCC	1.4020	3.7	5.1	\$8,468.95
125	OTHER DISORDERS OF THE EYE WITHOUT MCC	0.8370	2.5	3.3	\$5,056.00
135	SINUS AND MASTOID PROCEDURES WITH CC/MCC	2.1435	4.0	5.7	\$12,948.07
136	SINUS AND MASTOID PROCEDURES WITHOUT CC/MCC	1.2555	1.6	2.2	\$7,584.00
137	MOUTH PROCEDURES WITH CC/MCC	1.5097	3.7	5.0	\$9,119.52
138	MOUTH PROCEDURES WITHOUT CC/MCC	0.8565	1.9	2.4	\$5,173.79
139	SALIVARY GLAND PROCEDURES	1.2341	2.3	3.2	\$7,454.73
140	MAJOR HEAD AND NECK PROCEDURES WITH MCC	3.9779	7.0	9.2	\$24,028.98
141	MAJOR HEAD AND NECK PROCEDURES WITH CC	2.2061	3.3	4.4	\$13,326.21
142	MAJOR HEAD AND NECK PROCEDURES WITHOUT CC/MCC	1.6051	2.1	2.7	\$9,695.80
143	OTHER EAR, NOSE, MOUTH AND THROAT O.R. PROCEDURES WITH MCC	2.9798	5.8	8.0	\$17,999.84
144	OTHER EAR, NOSE, MOUTH AND THROAT O.R. PROCEDURES WITH CC	1.7615	3.1	4.2	\$10,640.55
145	OTHER EAR, NOSE, MOUTH AND THROAT O.R. PROCEDURES WITHOUT CC/MCC	1.2246	1.9	2.4	\$7,397.34
146	EAR, NOSE, MOUTH AND THROAT MALIGNANCY WITH MCC	2.0411	5.1	7.4	\$12,329.51
147	EAR, NOSE, MOUTH AND THROAT MALIGNANCY WITH CC	1.3011	3.4	4.9	\$7,859.45
148	EAR, NOSE, MOUTH AND THROAT MALIGNANCY WITHOUT CC/MCC	0.7870	2.2	3.0	\$4,753.97
149	DYSEQUILIBRIUM	0.7370	2.0	2.4	\$4,451.94
150	EPISTAXIS WITH MCC	1.3275	3.4	4.6	\$8,018.92
151	EPISTAXIS WITHOUT MCC	0.7384	2.1	2.6	\$4,460.39
152	OTITIS MEDIA AND URI WITH MCC	1.0805	3.1	4.0	\$6,526.89
153	OTITIS MEDIA AND URI WITHOUT MCC	0.7132	2.3	2.8	\$4,308.17
154	OTHER EAR, NOSE, MOUTH AND THROAT DIAGNOSES WITH MCC	1.5468	3.9	5.3	\$9,343.63
155	OTHER EAR, NOSE, MOUTH AND THROAT DIAGNOSES WITH CC	0.9095	2.9	3.5	\$5,493.94
156	OTHER EAR, NOSE, MOUTH AND THROAT DIAGNOSES WITHOUT CC/MCC	0.6584	2.1	2.5	\$3,977.14
157	DENTAL AND ORAL DISEASES WITH MCC	1.5762	4.3	5.8	\$9,521.23
158	DENTAL AND ORAL DISEASES WITH CC	0.9002	2.8	3.4	\$5,437.77
159	DENTAL AND ORAL DISEASES WITHOUT CC/MCC	0.6631	2.1	2.4	\$4,005.54
T 163	MAJOR CHEST PROCEDURES WITH MCC	5.0068	9.2	11.6	\$30,244.18
T 164	MAJOR CHEST PROCEDURES WITH CC	2.6556	4.4	5.4	\$16,041.47
T 165	MAJOR CHEST PROCEDURES WITHOUT CC/MCC	1.9166	2.6	3.1	\$11,577.45
T 166	OTHER RESPIRATORY SYSTEM O.R. PROCEDURES WITH MCC	3.7235	7.9	10.6	\$22,492.25
T 167	OTHER RESPIRATORY SYSTEM O.R. PROCEDURES WITH CC	1.8187	3.7	5.0	\$10,986.08
T 168	OTHER RESPIRATORY SYSTEM O.R. PROCEDURES WITHOUT CC/MCC	1.3544	2.0	2.5	\$8,181.42
T 175	PULMONARY EMBOLISM WITH MCC OR ACUTE COR PULMONALE	1.5460	4.1	5.1	\$9,338.80
T 176	PULMONARY EMBOLISM WITHOUT MCC	0.8878	2.6	3.2	\$5,362.86
T 177	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	1.8491	5.4	6.8	\$11,169.71
T 178	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH CC	1.2078	4.0	5.0	\$7,295.86
T 179	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITHOUT CC/MCC	0.8727	3.0	3.7	\$5,271.65
180	RESPIRATORY NEOPLASMS WITH MCC	1.7399	4.9	6.4	\$10,510.07
181	RESPIRATORY NEOPLASMS WITH CC	1.1201	3.3	4.2	\$6,766.10
182	RESPIRATORY NEOPLASMS WITHOUT CC/MCC	0.7920	2.2	2.7	\$4,784.17
183	MAJOR CHEST TRAUMA WITH MCC	1.5589	4.3	5.5	\$9,416.72
184	MAJOR CHEST TRAUMA WITH CC	1.0409	3.1	3.7	\$6,287.68

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185	MAJOR CHEST TRAUMA WITHOUT CC/MCC	0.7749	2.4	2.8	\$4,680.88
T 186	PLEURAL EFFUSION WITH MCC	1.5438	4.3	5.6	\$9,325.51
T 187	PLEURAL EFFUSION WITH CC	1.0329	3.2	4.0	\$6,239.36
T 188	PLEURAL EFFUSION WITHOUT CC/MCC	0.7295	2.4	3.0	\$4,406.63
189	PULMONARY EDEMA AND RESPIRATORY FAILURE	1.2261	3.6	4.6	\$7,406.40
T 190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH MCC	1.1251	3.6	4.4	\$6,796.30
T 191	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH CC	0.8843	2.9	3.5	\$5,341.72
T 192	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITHOUT CC/MCC	0.6956	2.4	2.8	\$4,201.86
T 193	SIMPLE PNEUMONIA AND PLEURISY WITH MCC	1.3120	4.1	5.1	\$7,925.29
T 194	SIMPLE PNEUMONIA AND PLEURISY WITH CC	0.8639	3.1	3.7	\$5,218.49
T 195	SIMPLE PNEUMONIA AND PLEURISY WITHOUT CC/MCC	0.6658	2.5	2.9	\$4,021.84
T 196	INTERSTITIAL LUNG DISEASE WITH MCC	1.7386	4.8	6.4	\$10,502.22
T 197	INTERSTITIAL LUNG DISEASE WITH CC	1.0070	3.2	4.0	\$6,082.90
T 198	INTERSTITIAL LUNG DISEASE WITHOUT CC/MCC	0.7434	2.4	2.9	\$4,490.60
199	PNEUMOTHORAX WITH MCC	1.7900	5.1	6.6	\$10,812.71
200	PNEUMOTHORAX WITH CC	1.0765	3.2	4.0	\$6,502.73
201	PNEUMOTHORAX WITHOUT CC/MCC	0.7096	2.3	2.9	\$4,286.42
202	BRONCHITIS AND ASTHMA WITH CC/MCC	0.9670	3.0	3.7	\$5,841.28
203	BRONCHITIS AND ASTHMA WITHOUT CC/MCC	0.7070	2.3	2.8	\$4,270.72
204	RESPIRATORY SIGNS AND SYMPTOMS	0.7936	2.1	2.7	\$4,793.84
T 205	OTHER RESPIRATORY SYSTEM DIAGNOSES WITH MCC	1.6848	4.1	5.7	\$10,177.24
T 206	OTHER RESPIRATORY SYSTEM DIAGNOSES WITHOUT MCC	0.8860	2.5	3.1	\$5,351.99
T 207	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT >96 HOURS	5.7361	11.9	14.0	\$34,649.60
208	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <=96 HOURS	2.5448	4.9	6.8	\$15,372.17
215	OTHER HEART ASSIST SYSTEM IMPLANT	10.5584	5.1	8.6	\$63,779.28
EB 216	CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETERIZATION WITH MCC	10.0393	11.6	14.7	\$60,643.60
EB 217	CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETERIZATION WITH CC	6.4835	6.2	7.9	\$39,164.36
EB 218	CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETERIZATION WITHOUT CC/MCC	6.1093	3.1	4.2	\$36,903.96
EB 219	CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITHOUT CARDIAC CATHETERIZATION WITH MCC	8.0576	8.9	10.9	\$48,672.90
EB 220	CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITHOUT CARDIAC CATHETERIZATION WITH CC	5.4053	5.9	6.5	\$32,651.36
EB 221	CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITHOUT CARDIAC CATHETERIZATION WITHOUT CC/MCC	4.5799	3.8	4.4	\$27,665.44
222	CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITH AMI, HF OR SHOCK WITH MCC	7.9510	8.8	10.6	\$48,028.97
223	CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITH AMI, HF OR SHOCK WITHOUT MCC	5.7986	4.7	5.6	\$35,027.14
224	CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITHOUT AMI, HF OR SHOCK WITH MCC	7.5191	7.6	9.3	\$45,420.03
225	CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITHOUT AMI, HF OR SHOCK WITHOUT MCC	5.6178	4.2	4.9	\$33,935.00
226	CARDIAC DEFIBRILLATOR IMPLANT WITHOUT CARDIAC CATHETERIZATION WITH MCC	6.5650	6.1	7.8	\$39,656.67
227	CARDIAC DEFIBRILLATOR IMPLANT WITHOUT CARDIAC CATHETERIZATION WITHOUT MCC	5.2121	3.0	3.9	\$31,484.32
228	OTHER CARDIOTHORACIC PROCEDURES WITH MCC	5.3303	7.0	9.6	\$32,198.32
229	OTHER CARDIOTHORACIC PROCEDURES WITHOUT MCC	3.4412	3.0	4.0	\$20,786.98
231	CORONARY BYPASS WITH PTCA WITH MCC	8.7159	10.8	12.5	\$52,649.44
232	CORONARY BYPASS WITH PTCA WITHOUT MCC	5.9538	7.7	8.5	\$35,964.64
T 233	CORONARY BYPASS WITH CARDIAC CATHETERIZATION OR OPEN ABLATION WITH MCC	7.9223	11.4	12.8	\$47,855.60
T 234	CORONARY BYPASS WITH CARDIAC CATHETERIZATION OR OPEN ABLATION WITHOUT MCC	5.3360	8.1	8.6	\$32,232.75
T 235	CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITH MCC	6.1041	8.6	9.8	\$36,872.55
T 236	CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITHOUT MCC	4.0970	6.0	6.4	\$24,748.42
T 239	AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE WITH MCC	4.8160	10.4	13.2	\$29,091.63

Calculated with an average hospital Medicare base rate of \$6040.62. Each hospital's base rate and corresponding payment will vary. The national average hospital Medicare base rate is an average of the sum of four categories: Hospital Submitted Quality Data and is a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is a Meaningful EHR User, Hospital Submitted Quality Data and is NOT a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is NOT a Meaningful EHR User, using dollar amounts published in the Federal Register FY 2022 Final Rule Correcting Amendment, Table 1A. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index greater than 1) or Table 1B. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index less than or equal to 1).

MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

Note: If there is no value in either the geometric mean length of stay or the arithmetic mean length of stay columns, the volume of cases is insufficient to determine a meaningful computation of these statistics.

DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
T 240	AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE WITH CC	2.7888	7.0	8.6	\$16,846.08
T 241	AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE WITHOUT CC/MCC	1.5924	4.4	5.2	\$9,619.08
T 242	PERMANENT CARDIAC PACEMAKER IMPLANT WITH MCC	3.7276	5.2	6.7	\$22,517.02
T 243	PERMANENT CARDIAC PACEMAKER IMPLANT WITH CC	2.5185	3.1	3.8	\$15,213.30
T 244	PERMANENT CARDIAC PACEMAKER IMPLANT WITHOUT CC/MCC	2.0633	2.2	2.6	\$12,463.61
245	AICD GENERATOR PROCEDURES	5.4178	4.7	6.5	\$32,726.87
246	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH DRUG-ELUTING STENT WITH MCC OR 4+ ARTERIES OR STENTS	3.1243	3.9	5.2	\$18,872.71
247	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH DRUG-ELUTING STENT WITHOUT MCC	1.9732	2.1	2.5	\$11,919.35
248	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH NON-DRUG-ELUTING STENT WITH MCC OR 4+ ARTERIES OR STENTS	3.1622	4.5	6.0	\$19,101.65
249	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH NON-DRUG-ELUTING STENT WITHOUT MCC	1.8737	2.2	2.7	\$11,318.31
250	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITHOUT CORONARY ARTERY STENT WITH MCC	2.5218	3.7	5.0	\$15,233.24
251	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITHOUT CORONARY ARTERY STENT WITHOUT MCC	1.6584	2.1	2.6	\$10,017.76
252	OTHER VASCULAR PROCEDURES WITH MCC	3.3257	5.2	7.5	\$20,089.29
253	OTHER VASCULAR PROCEDURES WITH CC	2.6536	4.0	5.4	\$16,029.39
254	OTHER VASCULAR PROCEDURES WITHOUT CC/MCC	1.8159	2.1	2.6	\$10,969.16
T 255	UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS WITH MCC	2.5353	6.5	8.2	\$15,314.78
T 256	UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS WITH CC	1.6442	5.0	5.9	\$9,931.99
T 257	UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS WITHOUT CC/MCC	1.1652	3.5	4.4	\$7,038.53
258	CARDIAC PACEMAKER DEVICE REPLACEMENT WITH MCC	3.1681	5.0	6.6	\$19,137.29
259	CARDIAC PACEMAKER DEVICE REPLACEMENT WITHOUT MCC	2.0892	2.6	3.3	\$12,620.06
260	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITH MCC	3.5673	6.4	8.8	\$21,548.70
261	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITH CC	1.9939	3.2	4.0	\$12,044.39
262	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITHOUT CC/MCC	1.7062	2.2	2.7	\$10,306.51
263	VEIN LIGATION AND STRIPPING	2.3132	4.4	6.5	\$13,973.16
T 264	OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	3.2536	6.5	9.2	\$19,653.76
265	AICD LEAD PROCEDURES	3.3655	3.7	5.2	\$20,329.71
SP 266	ENDOVASCULAR CARDIAC VALVE REPLACEMENT AND SUPPLEMENT PROCEDURES WITH MCC	7.0479	3.2	5.2	\$42,573.69
SP 267	ENDOVASCULAR CARDIAC VALVE REPLACEMENT AND SUPPLEMENT PROCEDURES WITHOUT MCC	5.5980	1.7	2.1	\$33,815.39
268	AORTIC AND HEART ASSIST PROCEDURES EXCEPT PULSATION BALLOON WITH MCC	6.9633	6.3	9.3	\$42,062.65
269	AORTIC AND HEART ASSIST PROCEDURES EXCEPT PULSATION BALLOON WITHOUT MCC	4.3151	1.6	2.2	\$26,065.88
270	OTHER MAJOR CARDIOVASCULAR PROCEDURES WITH MCC	5.1870	6.6	9.5	\$31,332.70
271	OTHER MAJOR CARDIOVASCULAR PROCEDURES WITH CC	3.5654	4.3	5.7	\$21,537.23
272	OTHER MAJOR CARDIOVASCULAR PROCEDURES WITHOUT CC/MCC	2.6883	2.0	2.6	\$16,239.00
273	PERCUTANEOUS AND OTHER INTRACARDIAC PROCEDURES WITH MCC	3.8267	4.3	6.1	\$23,115.64
274	PERCUTANEOUS AND OTHER INTRACARDIAC PROCEDURES WITHOUT MCC	3.2866	1.5	2.0	\$19,853.10
T 280	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH MCC	1.6069	4.1	5.3	\$9,706.67
T 281	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH CC	0.9306	2.5	3.0	\$5,621.40
T 282	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITHOUT CC/MCC	0.7261	1.8	2.1	\$4,386.09
283	ACUTE MYOCARDIAL INFARCTION, EXPIRED WITH MCC	1.8647	2.9	4.8	\$11,263.94
284	ACUTE MYOCARDIAL INFARCTION, EXPIRED WITH CC	0.7234	1.6	2.1	\$4,369.78
285	ACUTE MYOCARDIAL INFARCTION, EXPIRED WITHOUT CC/MCC	0.4947	1.2	1.4	\$2,988.29
286	CIRCULATORY DISORDERS EXCEPT AMI, WITH CARDIAC CATHETERIZATION WITH MCC	2.1363	5.2	6.8	\$12,904.58
287	CIRCULATORY DISORDERS EXCEPT AMI, WITH CARDIAC CATHETERIZATION WITHOUT MCC	1.1151	2.2	2.7	\$6,735.90
T 288	ACUTE AND SUBACUTE ENDOCARDITIS WITH MCC	2.6854	7.1	9.3	\$16,221.48
T 289	ACUTE AND SUBACUTE ENDOCARDITIS WITH CC	1.6436	5.3	6.7	\$9,928.36
T 290	ACUTE AND SUBACUTE ENDOCARDITIS WITHOUT CC/MCC	1.0269	3.6	4.5	\$6,203.11
T 291	HEART FAILURE AND SHOCK WITH MCC	1.2683	3.8	4.9	\$7,661.32
T 292	HEART FAILURE AND SHOCK WITH CC	0.8635	3.0	3.8	\$5,216.08
T 293	HEART FAILURE AND SHOCK WITHOUT CC/MCC	0.5899	2.2	2.6	\$3,563.36
294	DEEP VEIN THROMBOPHLEBITIS WITH CC/MCC	1.2828	3.3	4.4	\$7,748.91

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
295	DEEP VEIN THROMBOPHLEBITIS WITHOUT CC/MCC	0.9841	2.6	3.3	\$5,944.57
296	CARDIAC ARREST, UNEXPLAINED WITH MCC	1.5952	2.0	3.2	\$9,636.00
297	CARDIAC ARREST, UNEXPLAINED WITH CC	0.7070	1.3	1.7	\$4,270.72
298	CARDIAC ARREST, UNEXPLAINED WITHOUT CC/MCC	0.4888	1.1	1.1	\$2,952.66
T 299	PERIPHERAL VASCULAR DISORDERS WITH MCC	1.5326	3.9	5.2	\$9,257.85
T 300	PERIPHERAL VASCULAR DISORDERS WITH CC	1.0438	3.1	4.0	\$6,305.20
T 301	PERIPHERAL VASCULAR DISORDERS WITHOUT CC/MCC	0.7431	2.2	2.7	\$4,488.78
302	ATHEROSCLEROSIS WITH MCC	1.0948	2.7	3.7	\$6,613.27
303	ATHEROSCLEROSIS WITHOUT MCC	0.6776	1.9	2.3	\$4,093.12
304	HYPERTENSION WITH MCC	1.0970	2.9	3.8	\$6,626.56
305	HYPERTENSION WITHOUT MCC	0.7399	2.2	2.7	\$4,469.45
306	CARDIAC CONGENITAL AND VALVULAR DISORDERS WITH MCC	1.5074	3.7	5.1	\$9,105.63
307	CARDIAC CONGENITAL AND VALVULAR DISORDERS WITHOUT MCC	0.8704	2.4	3.0	\$5,257.76
308	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH MCC	1.2009	3.5	4.5	\$7,254.18
309	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH CC	0.7505	2.4	2.9	\$4,533.49
310	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITHOUT CC/MCC	0.5592	1.9	2.2	\$3,377.91
311	ANGINA PECTORIS	0.6985	1.9	2.4	\$4,219.37
312	SYNCOPE AND COLLAPSE	0.8387	2.3	2.9	\$5,066.27
313	CHEST PAIN	0.7214	1.7	2.1	\$4,357.70
T 314	OTHER CIRCULATORY SYSTEM DIAGNOSES WITH MCC	2.0847	4.8	6.6	\$12,592.88
T 315	OTHER CIRCULATORY SYSTEM DIAGNOSES WITH CC	0.9734	2.8	3.6	\$5,879.94
T 316	OTHER CIRCULATORY SYSTEM DIAGNOSES WITHOUT CC/MCC	0.7234	1.9	2.3	\$4,369.78
319	OTHER ENDOVASCULAR CARDIAC VALVE PROCEDURES WITH MCC	4.3179	7.7	10.0	\$26,082.79
320	OTHER ENDOVASCULAR CARDIAC VALVE PROCEDURES WITHOUT MCC	2.4056	2.4	3.5	\$14,531.32
T 326	STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITH MCC	5.3163	9.5	13.0	\$32,113.75
T 327	STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITH CC	2.5647	4.6	6.3	\$15,492.38
T 328	STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITHOUT CC/MCC	1.6669	2.3	2.9	\$10,069.11
T 329	MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH MCC	4.8862	10.3	13.0	\$29,515.68
T 330	MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	2.5493	5.7	6.9	\$15,399.35
T 331	MAJOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC	1.7105	3.3	3.8	\$10,332.48
T 332	RECTAL RESECTION WITH MCC	4.1615	7.9	10.2	\$25,138.04
T 333	RECTAL RESECTION WITH CC	2.1413	4.1	5.1	\$12,934.78
T 334	RECTAL RESECTION WITHOUT CC/MCC	1.6086	2.5	3.0	\$9,716.94
T 335	PERITONEAL ADHESIOLYSIS WITH MCC	3.9135	9.3	11.5	\$23,639.97
T 336	PERITONEAL ADHESIOLYSIS WITH CC	2.2913	5.9	7.3	\$13,840.87
T 337	PERITONEAL ADHESIOLYSIS WITHOUT CC/MCC	1.6373	3.7	4.6	\$9,890.31
338	APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITH MCC	2.7973	6.4	8.1	\$16,897.43
339	APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITH CC	1.6974	4.0	5.0	\$10,253.35
340	APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	1.2283	2.4	2.9	\$7,419.69
341	APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITH MCC	2.3224	4.3	5.9	\$14,028.74
342	APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITH CC	1.4329	2.7	3.4	\$8,655.60
343	APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	1.1086	1.7	2.0	\$6,696.63
344	MINOR SMALL AND LARGE BOWEL PROCEDURES WITH MCC	2.8184	7.0	9.2	\$17,024.88
345	MINOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	1.5788	4.3	5.4	\$9,536.93
346	MINOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC	1.2754	3.1	3.6	\$7,704.21
347	ANAL AND STOMAL PROCEDURES WITH MCC	2.4647	5.6	7.5	\$14,888.32
348	ANAL AND STOMAL PROCEDURES WITH CC	1.3481	3.3	4.1	\$8,143.36
349	ANAL AND STOMAL PROCEDURES WITHOUT CC/MCC	0.9793	1.9	2.3	\$5,915.58
350	INGUINAL AND FEMORAL HERNIA PROCEDURES WITH MCC	2.4548	5.2	6.9	\$14,828.51
351	INGUINAL AND FEMORAL HERNIA PROCEDURES WITH CC	1.4927	3.2	3.9	\$9,016.83
352	INGUINAL AND FEMORAL HERNIA PROCEDURES WITHOUT CC/MCC	1.1044	2.0	2.4	\$6,671.26
353	HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITH MCC	3.0249	5.9	7.7	\$18,272.27

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
354	HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITH CC	1.7848	3.6	4.5	\$10,781.30
355	HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITHOUT CC/MCC	1.3602	2.4	2.8	\$8,216.45
T 356	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITH MCC	4.3078	7.7	10.5	\$26,021.78
T 357	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITH CC	2.2685	4.6	5.9	\$13,703.15
T 358	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITHOUT CC/MCC	1.3491	2.8	3.5	\$8,149.40
368	MAJOR ESOPHAGEAL DISORDERS WITH MCC	1.9491	4.6	6.0	\$11,773.77
369	MAJOR ESOPHAGEAL DISORDERS WITH CC	1.0772	3.1	3.7	\$6,506.96
370	MAJOR ESOPHAGEAL DISORDERS WITHOUT CC/MCC	0.7481	2.1	2.5	\$4,518.99
T 371	MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITH MCC	1.7312	5.2	6.8	\$10,457.52
T 372	MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITH CC	1.0293	3.8	4.7	\$6,217.61
T 373	MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITHOUT CC/MCC	0.7446	2.9	3.5	\$4,497.85
T 374	DIGESTIVE MALIGNANCY WITH MCC	2.0737	5.5	7.4	\$12,526.43
T 375	DIGESTIVE MALIGNANCY WITH CC	1.2076	3.6	4.6	\$7,294.65
T 376	DIGESTIVE MALIGNANCY WITHOUT CC/MCC	0.8989	2.5	3.1	\$5,429.91
T 377	GASTROINTESTINAL HEMORRHAGE WITH MCC	1.8012	4.4	5.7	\$10,880.36
T 378	GASTROINTESTINAL HEMORRHAGE WITH CC	0.9935	3.0	3.5	\$6,001.36
T 379	GASTROINTESTINAL HEMORRHAGE WITHOUT CC/MCC	0.6372	2.1	2.4	\$3,849.08
T 380	COMPLICATED PEPTIC ULCER WITH MCC	1.8866	4.9	6.3	\$11,396.23
T 381	COMPLICATED PEPTIC ULCER WITH CC	1.0593	3.2	3.9	\$6,398.83
T 382	COMPLICATED PEPTIC ULCER WITHOUT CC/MCC	0.7686	2.4	2.9	\$4,642.82
383	UNCOMPLICATED PEPTIC ULCER WITH MCC	1.3126	3.8	4.8	\$7,928.92
384	UNCOMPLICATED PEPTIC ULCER WITHOUT MCC	0.8928	2.5	3.1	\$5,393.07
385	INFLAMMATORY BOWEL DISEASE WITH MCC	1.6223	5.0	6.6	\$9,799.70
386	INFLAMMATORY BOWEL DISEASE WITH CC	0.9951	3.5	4.3	\$6,011.02
387	INFLAMMATORY BOWEL DISEASE WITHOUT CC/MCC	0.7147	2.6	3.2	\$4,317.23
T 388	GASTROINTESTINAL OBSTRUCTION WITH MCC	1.5146	4.7	6.1	\$9,149.12
T 389	GASTROINTESTINAL OBSTRUCTION WITH CC	0.8232	3.2	3.9	\$4,972.64
T 390	GASTROINTESTINAL OBSTRUCTION WITHOUT CC/MCC	0.5831	2.4	2.8	\$3,522.29
391	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITH MCC	1.2492	3.7	4.9	\$7,545.94
392	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	0.7658	2.6	3.2	\$4,625.91
393	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH MCC	1.6612	4.3	6.0	\$10,034.68
394	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH CC	0.9409	3.0	3.8	\$5,683.62
395	OTHER DIGESTIVE SYSTEM DIAGNOSES WITHOUT CC/MCC	0.6515	2.2	2.6	\$3,935.46
T 405	PANCREAS, LIVER AND SHUNT PROCEDURES WITH MCC	5.7376	9.5	13.0	\$34,658.66
T 406	PANCREAS, LIVER AND SHUNT PROCEDURES WITH CC	2.8809	5.1	6.4	\$17,402.42
T 407	PANCREAS, LIVER AND SHUNT PROCEDURES WITHOUT CC/MCC	2.1180	3.7	4.4	\$12,794.03
408	BILIARY TRACT PROCEDURES EXCEPT ONLY CHOLECYSTECTOMY WITH OR WITHOUT C.D.E. WITH MCC	3.7529	8.5	10.8	\$22,669.84
409	BILIARY TRACT PROCEDURES EXCEPT ONLY CHOLECYSTECTOMY WITH OR WITHOUT C.D.E. WITH CC	2.1164	4.8	5.9	\$12,784.37
410	BILIARY TRACT PROCEDURES EXCEPT ONLY CHOLECYSTECTOMY WITH OR WITHOUT C.D.E. WITHOUT CC/MCC	1.5683	3.5	4.1	\$9,473.50
411	CHOLECYSTECTOMY WITH C.D.E. WITH MCC	3.7535	7.8	9.7	\$22,673.47
412	CHOLECYSTECTOMY WITH C.D.E. WITH CC	2.2775	5.0	6.2	\$13,757.51
413	CHOLECYSTECTOMY WITH C.D.E. WITHOUT CC/MCC	1.7309	3.6	4.1	\$10,455.71
T 414	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE WITHOUT C.D.E. WITH MCC	3.6283	8.0	9.9	\$21,917.18
T 415	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE WITHOUT C.D.E. WITH CC	2.0317	4.9	5.8	\$12,272.73
T 416	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE WITHOUT C.D.E. WITHOUT CC/MCC	1.4223	3.0	3.6	\$8,591.57
417	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH MCC	2.4243	5.1	6.4	\$14,644.28
418	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH CC	1.6890	3.5	4.2	\$10,202.61
419	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITHOUT CC/MCC	1.3153	2.4	2.8	\$7,945.23
420	HEPATOBIILIARY DIAGNOSTIC PROCEDURES WITH MCC	3.5165	7.3	10.2	\$21,241.84
421	HEPATOBIILIARY DIAGNOSTIC PROCEDURES WITH CC	1.9075	3.8	5.2	\$11,522.48
422	HEPATOBIILIARY DIAGNOSTIC PROCEDURES WITHOUT CC/MCC	1.4536	2.7	3.3	\$8,780.65

Calculated with an average hospital Medicare base rate of \$6040.62. Each hospital's base rate and corresponding payment will vary. The national average hospital Medicare base rate is an average of the sum of four categories: Hospital Submitted Quality Data and is a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is a Meaningful EHR User, Hospital Submitted Quality Data and is NOT a Meaningful EHR User, Hospital Did NOT Submit Quality Data and is NOT a Meaningful EHR User, using dollar amounts published in the Federal Register FY 2022 Final Rule Correcting Amendment, Table 1A. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index greater than 1) or Table 1B. National Adjusted Operating Standardized Amounts; Labor/Nonlabor (if wage index less than or equal to 1).

MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

Note: If there is no value in either the geometric mean length of stay or the arithmetic mean length of stay columns, the volume of cases is insufficient to determine a meaningful computation of these statistics.

DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
423	OTHER HEPATOBILIARY OR PANCREAS O.R. PROCEDURES WITH MCC	4.1859	8.4	11.8	\$25,285.43
424	OTHER HEPATOBILIARY OR PANCREAS O.R. PROCEDURES WITH CC	2.2841	4.7	6.3	\$13,797.38
425	OTHER HEPATOBILIARY OR PANCREAS O.R. PROCEDURES WITHOUT CC/MCC	1.5427	2.2	2.8	\$9,318.86
432	CIRRHOSIS AND ALCOHOLIC HEPATITIS WITH MCC	1.8808	4.7	6.4	\$11,361.20
433	CIRRHOSIS AND ALCOHOLIC HEPATITIS WITH CC	1.0299	3.3	4.2	\$6,221.23
434	CIRRHOSIS AND ALCOHOLIC HEPATITIS WITHOUT CC/MCC	0.6207	2.2	2.8	\$3,749.41
435	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH MCC	1.7534	4.8	6.3	\$10,591.62
436	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH CC	1.1215	3.4	4.3	\$6,774.56
437	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITHOUT CC/MCC	0.8959	2.4	3.0	\$5,411.79
438	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH MCC	1.5978	4.6	6.2	\$9,651.70
439	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH CC	0.8452	3.1	3.8	\$5,105.53
440	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITHOUT CC/MCC	0.6063	2.4	2.8	\$3,662.43
T 441	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH MCC	1.8795	4.7	6.4	\$11,353.35
T 442	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH CC	0.9300	3.2	4.0	\$5,617.78
T 443	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITHOUT CC/MCC	0.6632	2.4	2.9	\$4,006.14
444	DISORDERS OF THE BILIARY TRACT WITH MCC	1.6716	4.4	5.7	\$10,097.50
445	DISORDERS OF THE BILIARY TRACT WITH CC	1.0775	3.0	3.8	\$6,508.77
446	DISORDERS OF THE BILIARY TRACT WITHOUT CC/MCC	0.8166	2.2	2.6	\$4,932.77
453	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH MCC	9.1880	7.5	9.6	\$55,501.22
454	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH CC	6.0931	3.8	4.4	\$36,806.10
455	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITHOUT CC/MCC	4.7813	2.4	2.8	\$28,882.02
456	SPINAL FUSION EXCEPT CERVICAL WITH SPINAL CURVATURE, MALIGNANCY, INFECTION OR EXTENSIVE FUSIONS WITH MCC	8.6000	9.5	11.6	\$51,949.33
457	SPINAL FUSION EXCEPT CERVICAL WITH SPINAL CURVATURE, MALIGNANCY, INFECTION OR EXTENSIVE FUSIONS WITH CC	6.4959	5.2	6.1	\$39,239.26
458	SPINAL FUSION EXCEPT CERVICAL WITH SPINAL CURVATURE, MALIGNANCY, INFECTION OR EXTENSIVE FUSIONS WITHOUT CC/MCC	5.0076	3.0	3.4	\$30,249.01
T 459	SPINAL FUSION EXCEPT CERVICAL WITH MCC	6.7335	6.9	8.6	\$40,674.51
T 460	SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC	3.9307	2.7	3.3	\$23,743.87
461	BILATERAL OR MULTIPLE MAJOR JOINT PROCEDURES OF LOWER EXTREMITY WITH MCC	6.0817	6.7	9.1	\$36,737.24
462	BILATERAL OR MULTIPLE MAJOR JOINT PROCEDURES OF LOWER EXTREMITY WITHOUT MCC	3.1414	2.6	2.9	\$18,976.00
T 463	WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS WITH MCC	5.3703	9.9	13.4	\$32,439.94
T 464	WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS WITH CC	2.9759	5.5	7.2	\$17,976.28
T 465	WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS WITHOUT CC/MCC	1.8441	2.6	3.4	\$11,139.51
T 466	REVISION OF HIP OR KNEE REPLACEMENT WITH MCC	5.3457	7.0	8.8	\$32,291.34
T 467	REVISION OF HIP OR KNEE REPLACEMENT WITH CC	3.5775	3.3	4.1	\$21,610.32
T 468	REVISION OF HIP OR KNEE REPLACEMENT WITHOUT CC/MCC	2.8024	1.9	2.2	\$16,928.23
T 469	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITH MCC OR TOTAL ANKLE REPLACEMENT	3.0859	3.1	4.2	\$18,640.75
T 470	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	1.9003	1.8	2.0	\$11,478.99
471	CERVICAL SPINAL FUSION WITH MCC	5.0197	6.8	9.0	\$30,322.10
472	CERVICAL SPINAL FUSION WITH CC	3.0537	2.5	3.4	\$18,446.24
473	CERVICAL SPINAL FUSION WITHOUT CC/MCC	2.5390	1.6	2.0	\$15,337.13
T 474	AMPUTATION FOR MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DISORDERS WITH MCC	4.0761	9.4	12.0	\$24,622.17
T 475	AMPUTATION FOR MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DISORDERS WITH CC	2.1963	5.8	7.2	\$13,267.01
T 476	AMPUTATION FOR MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DISORDERS WITHOUT CC/MCC	1.1603	2.9	3.5	\$7,008.93
SP 477	BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	3.3589	8.1	10.1	\$20,289.84
SP 478	BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC	2.3584	5.2	6.5	\$14,246.20
SP 479	BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT CC/MCC	1.8095	3.3	4.0	\$10,930.50
SP 480	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH MCC	3.0258	6.2	7.3	\$18,277.71
SP 481	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	2.0961	4.3	4.7	\$12,661.74

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
482	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITHOUT CC/MCC	1.6458	3.3	3.6	\$9,941.65
483	MAJOR JOINT OR LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITIES	2.3857	1.4	1.7	\$14,411.11
485	KNEE PROCEDURES WITH PRINCIPAL DIAGNOSIS OF INFECTION WITH MCC	3.4096	8.0	9.6	\$20,596.10
486	KNEE PROCEDURES WITH PRINCIPAL DIAGNOSIS OF INFECTION WITH CC	2.1494	5.2	6.1	\$12,983.71
487	KNEE PROCEDURES WITH PRINCIPAL DIAGNOSIS OF INFECTION WITHOUT CC/MCC	1.6402	3.6	4.1	\$9,907.82
488	KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITH CC/MCC	1.9757	3.1	4.2	\$11,934.45
489	KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITHOUT CC/MCC	1.2982	1.7	2.1	\$7,841.93
492	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH MCC	3.4700	6.2	7.8	\$20,960.95
493	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH CC	2.3258	4.0	4.8	\$14,049.27
494	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITHOUT CC/MCC	1.8517	2.7	3.2	\$11,185.42
495	LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITH MCC	3.6419	7.3	9.6	\$21,999.33
496	LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITH CC	1.9864	3.4	4.5	\$11,999.09
497	LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITHOUT CC/MCC	1.4515	1.8	2.3	\$8,767.96
498	LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES OF HIP AND FEMUR WITH CC/MCC	2.5837	5.6	8.0	\$15,607.15
499	LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES OF HIP AND FEMUR WITHOUT CC/MCC	1.1990	2.0	2.5	\$7,242.70
500	SOFT TISSUE PROCEDURES WITH MCC	3.1895	7.4	9.8	\$19,266.56
501	SOFT TISSUE PROCEDURES WITH CC	1.7541	4.1	5.2	\$10,595.85
502	SOFT TISSUE PROCEDURES WITHOUT CC/MCC	1.3328	2.4	3.0	\$8,050.94
503	FOOT PROCEDURES WITH MCC	2.6406	6.8	8.6	\$15,950.86
504	FOOT PROCEDURES WITH CC	1.7750	4.0	4.9	\$10,722.10
505	FOOT PROCEDURES WITHOUT CC/MCC	1.7750	4.0	4.9	\$10,722.10
506	MAJOR THUMB OR JOINT PROCEDURES	1.4836	3.9	4.9	\$8,961.86
507	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES WITH CC/MCC	2.0609	4.7	5.9	\$12,449.11
508	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES WITHOUT CC/MCC	1.4097	2.3	2.8	\$8,515.46
509	ARTHROSCOPY	1.6865	4.1	5.2	\$10,187.51
510	SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITH MCC	2.7437	4.9	6.1	\$16,573.65
511	SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITH CC	1.9674	3.4	4.0	\$11,884.32
512	SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITHOUT CC/MCC	1.5545	2.1	2.5	\$9,390.14
513	HAND OR WRIST PROCEDURES, EXCEPT MAJOR THUMB OR JOINT PROCEDURES WITH CC/MCC	1.5720	4.0	5.1	\$9,495.85
514	HAND OR WRIST PROCEDURES, EXCEPT MAJOR THUMB OR JOINT PROCEDURES WITHOUT CC/MCC	0.9991	2.4	2.8	\$6,035.18
515	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITH MCC	3.1406	6.4	8.2	\$18,971.17
516	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITH CC	1.9628	3.7	4.6	\$11,856.53
517	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITHOUT CC/MCC	1.3982	2.1	2.6	\$8,445.99
518	BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITH MCC OR DISC DEVICE OR NEUROSTIMULATOR	3.5869	4.2	6.4	\$21,667.10
519	BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITH CC	1.9600	3.2	4.1	\$11,839.62
520	BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITHOUT CC/MCC	1.4183	2.0	2.4	\$8,567.41
521	HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITH MCC	3.0662	6.2	7.2	\$18,521.75
522	HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITHOUT MCC	2.1894	4.1	4.5	\$13,225.33
533	FRACTURES OF FEMUR WITH MCC	1.4162	4.0	5.2	\$8,554.73
534	FRACTURES OF FEMUR WITHOUT MCC	0.7902	2.8	3.4	\$4,773.30
535	FRACTURES OF HIP AND PELVIS WITH MCC	1.2328	3.8	4.7	\$7,446.88
536	FRACTURES OF HIP AND PELVIS WITHOUT MCC	0.7717	2.9	3.3	\$4,661.55
537	SPRAINS, STRAINS, AND DISLOCATIONS OF HIP, PELVIS AND THIGH WITH CC/MCC	0.9354	3.1	3.7	\$5,650.40
538	SPRAINS, STRAINS, AND DISLOCATIONS OF HIP, PELVIS AND THIGH WITHOUT CC/MCC	0.7232	2.6	3.1	\$4,368.58
539	OSTEOMYELITIS WITH MCC	1.9477	5.9	7.9	\$11,765.32
540	OSTEOMYELITIS WITH CC	1.3016	4.3	5.7	\$7,862.47
541	OSTEOMYELITIS WITHOUT CC/MCC	0.8432	3.1	3.9	\$5,093.45
542	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITH MCC	1.8092	5.0	6.7	\$10,928.69
543	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITH CC	1.0452	3.5	4.3	\$6,313.66
544	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITHOUT CC/MCC	0.7777	2.8	3.2	\$4,697.79

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MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

Note: If there is no value in either the geometric mean length of stay or the arithmetic mean length of stay columns, the volume of cases is insufficient to determine a meaningful computation of these statistics.

DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
T 545	CONNECTIVE TISSUE DISORDERS WITH MCC	2.5031	5.5	7.9	\$15,120.28
T 546	CONNECTIVE TISSUE DISORDERS WITH CC	1.2080	3.5	4.5	\$7,297.07
T 547	CONNECTIVE TISSUE DISORDERS WITHOUT CC/MCC	0.8336	2.5	3.1	\$5,035.46
548	SEPTIC ARTHRITIS WITH MCC	2.0508	5.7	7.8	\$12,388.10
549	SEPTIC ARTHRITIS WITH CC	1.2499	4.0	5.2	\$7,550.17
550	SEPTIC ARTHRITIS WITHOUT CC/MCC	0.8789	3.0	3.5	\$5,309.10
T 551	MEDICAL BACK PROBLEMS WITH MCC	1.6274	4.3	5.7	\$9,830.50
T 552	MEDICAL BACK PROBLEMS WITHOUT MCC	0.9434	2.9	3.6	\$5,698.72
553	BONE DISEASES AND ARTHROPATHIES WITH MCC	1.2715	3.9	5.0	\$7,680.65
554	BONE DISEASES AND ARTHROPATHIES WITHOUT MCC	0.7925	2.8	3.3	\$4,787.19
555	SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	1.3685	3.8	5.1	\$8,266.59
556	SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT MCC	0.8087	2.6	3.2	\$4,885.05
T 557	TENDONITIS, MYOSITIS AND BURSITIS WITH MCC	1.3991	4.6	5.8	\$8,451.43
T 558	TENDONITIS, MYOSITIS AND BURSITIS WITHOUT MCC	0.8614	3.1	3.8	\$5,203.39
T 559	AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	1.8653	4.9	6.8	\$11,267.57
T 560	AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC	1.0760	3.7	5.0	\$6,499.71
T 561	AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT CC/MCC	0.7924	2.7	3.7	\$4,786.59
T 562	FRACTURE, SPRAIN, STRAIN AND DISLOCATION EXCEPT FEMUR, HIP, PELVIS AND THIGH WITH MCC	1.4118	4.0	5.1	\$8,528.15
T 563	FRACTURE, SPRAIN, STRAIN AND DISLOCATION EXCEPT FEMUR, HIP, PELVIS AND THIGH WITHOUT MCC	0.8722	3.0	3.5	\$5,268.63
564	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITH MCC	1.5236	4.6	5.8	\$9,203.49
565	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITH CC	1.0093	3.4	4.1	\$6,096.80
566	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITHOUT CC/MCC	0.7519	2.5	3.0	\$4,541.94
T 570	SKIN DEBRIDEMENT WITH MCC	2.8417	7.3	9.5	\$17,165.63
T 571	SKIN DEBRIDEMENT WITH CC	1.6354	4.8	6.0	\$9,878.83
T 572	SKIN DEBRIDEMENT WITHOUT CC/MCC	1.1044	3.0	3.7	\$6,671.26
T 573	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS WITH MCC	5.5391	10.8	15.9	\$33,459.60
T 574	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS WITH CC	3.2465	7.6	11.0	\$19,610.87
T 575	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS WITHOUT CC/MCC	1.7632	4.5	5.7	\$10,650.82
576	SKIN GRAFT EXCEPT FOR SKIN ULCER OR CELLULITIS WITH MCC	5.0637	9.3	13.4	\$30,587.89
577	SKIN GRAFT EXCEPT FOR SKIN ULCER OR CELLULITIS WITH CC	2.5496	4.6	6.6	\$15,401.16
578	SKIN GRAFT EXCEPT FOR SKIN ULCER OR CELLULITIS WITHOUT CC/MCC	1.5952	2.8	3.7	\$9,636.00
T 579	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH MCC	3.1449	7.3	9.9	\$18,997.15
T 580	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH CC	1.7288	4.1	5.5	\$10,443.02
T 581	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITHOUT CC/MCC	1.3768	2.2	2.8	\$8,316.73
582	MASTECTOMY FOR MALIGNANCY WITH CC/MCC	1.6431	2.3	3.1	\$9,925.34
583	MASTECTOMY FOR MALIGNANCY WITHOUT CC/MCC	1.5415	1.7	2.0	\$9,311.62
584	BREAST BIOPSY, LOCAL EXCISION AND OTHER BREAST PROCEDURES WITH CC/MCC	1.8367	3.5	4.4	\$11,094.81
585	BREAST BIOPSY, LOCAL EXCISION AND OTHER BREAST PROCEDURES WITHOUT CC/MCC	1.7396	2.2	2.7	\$10,508.26
T 592	SKIN ULCERS WITH MCC	1.6943	5.4	7.2	\$10,234.62
T 593	SKIN ULCERS WITH CC	1.1406	4.1	5.3	\$6,889.93
T 594	SKIN ULCERS WITHOUT CC/MCC	0.8160	3.2	4.0	\$4,929.15
595	MAJOR SKIN DISORDERS WITH MCC	2.0165	5.5	7.5	\$12,180.91
596	MAJOR SKIN DISORDERS WITHOUT MCC	0.9947	3.3	4.3	\$6,008.60
597	MALIGNANT BREAST DISORDERS WITH MCC	1.6440	4.6	6.3	\$9,930.78
598	MALIGNANT BREAST DISORDERS WITH CC	1.1129	3.3	4.5	\$6,722.61
599	MALIGNANT BREAST DISORDERS WITHOUT CC/MCC	0.6714	2.5	3.2	\$4,055.67
600	NON-MALIGNANT BREAST DISORDERS WITH CC/MCC	0.9969	3.5	4.3	\$6,021.89
601	NON-MALIGNANT BREAST DISORDERS WITHOUT CC/MCC	0.6868	2.8	3.3	\$4,148.70
T 602	CELLULITIS WITH MCC	1.4500	4.6	5.8	\$8,758.90
T 603	CELLULITIS WITHOUT MCC	0.8536	3.2	3.8	\$5,156.27
604	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST WITH MCC	1.4779	3.8	5.1	\$8,927.43
605	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST WITHOUT MCC	0.9039	2.7	3.3	\$5,460.12

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
606	MINOR SKIN DISORDERS WITH MCC	1.5121	4.3	6.0	\$9,134.02
607	MINOR SKIN DISORDERS WITHOUT MCC	0.8282	2.9	3.6	\$5,002.84
614	ADRENAL AND PITUITARY PROCEDURES WITH CC/MCC	2.3897	3.2	4.6	\$14,435.27
615	ADRENAL AND PITUITARY PROCEDURES WITHOUT CC/MCC	1.5750	1.8	2.2	\$9,513.98
† 616	AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH MCC	3.9662	10.0	12.3	\$23,958.31
† 617	AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	2.0298	5.8	7.0	\$12,261.25
† 618	AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITHOUT CC/MCC	1.3032	4.2	4.8	\$7,872.14
619	O.R. PROCEDURES FOR OBESITY WITH MCC	3.0617	2.8	4.7	\$18,494.57
620	O.R. PROCEDURES FOR OBESITY WITH CC	1.7627	1.8	2.2	\$10,647.80
621	O.R. PROCEDURES FOR OBESITY WITHOUT CC/MCC	1.5971	1.4	1.6	\$9,647.47
† 622	SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH MCC	3.6149	8.3	11.1	\$21,836.24
† 623	SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	1.8715	5.3	6.5	\$11,305.02
† 624	SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITHOUT CC/MCC	1.0989	3.2	3.9	\$6,638.04
625	THYROID, PARATHYROID AND THYROID GLOSSAL PROCEDURES WITH MCC	2.8402	4.8	7.0	\$17,156.57
626	THYROID, PARATHYROID AND THYROID GLOSSAL PROCEDURES WITH CC	1.6529	2.3	3.3	\$9,984.54
627	THYROID, PARATHYROID AND THYROID GLOSSAL PROCEDURES WITHOUT CC/MCC	1.1828	1.4	1.7	\$7,144.85
† 628	OTHER ENDOCRINE, NUTRITIONAL AND METABOLIC O.R. PROCEDURES WITH MCC	3.6794	7.4	10.4	\$22,225.86
† 629	OTHER ENDOCRINE, NUTRITIONAL AND METABOLIC O.R. PROCEDURES WITH CC	2.3453	6.1	7.3	\$14,167.07
† 630	OTHER ENDOCRINE, NUTRITIONAL AND METABOLIC O.R. PROCEDURES WITHOUT CC/MCC	1.4093	2.3	3.0	\$8,513.05
† 637	DIABETES WITH MCC	1.3766	3.8	5.0	\$8,315.52
† 638	DIABETES WITH CC	0.8794	2.9	3.6	\$5,312.12
† 639	DIABETES WITHOUT CC/MCC	0.6096	2.1	2.5	\$3,682.36
† 640	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITH MCC	1.2308	3.3	4.5	\$7,434.80
† 641	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITHOUT MCC	0.7542	2.6	3.2	\$4,555.84
642	INBORN AND OTHER DISORDERS OF METABOLISM	1.2898	3.3	4.4	\$7,791.19
† 643	ENDOCRINE DISORDERS WITH MCC	1.6677	5.0	6.3	\$10,073.94
† 644	ENDOCRINE DISORDERS WITH CC	1.0198	3.5	4.2	\$6,160.22
† 645	ENDOCRINE DISORDERS WITHOUT CC/MCC	0.7686	2.7	3.2	\$4,642.82
650	KIDNEY TRANSPLANT WITH HEMODIALYSIS WITH MCC	4.5207	6.8	8.3	\$27,307.83
651	KIDNEY TRANSPLANT WITH HEMODIALYSIS WITHOUT MCC	3.6984	6.0	6.8	\$22,340.63
652	KIDNEY TRANSPLANT	3.1851	4.7	5.3	\$19,239.98
† 653	MAJOR BLADDER PROCEDURES WITH MCC	5.4592	10.2	13.0	\$32,976.95
† 654	MAJOR BLADDER PROCEDURES WITH CC	2.9028	5.6	6.7	\$17,534.71
† 655	MAJOR BLADDER PROCEDURES WITHOUT CC/MCC	2.0803	3.6	4.2	\$12,566.30
656	KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITH MCC	3.2850	5.6	7.6	\$19,843.44
657	KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITH CC	1.9347	3.2	4.0	\$11,686.79
658	KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITHOUT CC/MCC	1.5779	2.1	2.3	\$9,531.49
† 659	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH MCC	2.6664	5.9	7.9	\$16,106.71
† 660	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH CC	1.4431	3.1	4.0	\$8,717.22
† 661	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC	1.0637	1.9	2.2	\$6,425.41
662	MINOR BLADDER PROCEDURES WITH MCC	2.9373	6.9	9.6	\$17,743.11
663	MINOR BLADDER PROCEDURES WITH CC	1.5995	3.7	5.0	\$9,661.97
664	MINOR BLADDER PROCEDURES WITHOUT CC/MCC	1.1838	1.9	2.4	\$7,150.89
665	PROSTATECTOMY WITH MCC	3.0417	7.6	9.7	\$18,373.75
666	PROSTATECTOMY WITH CC	1.7397	4.0	5.3	\$10,508.87
667	PROSTATECTOMY WITHOUT CC/MCC	0.9975	2.0	2.5	\$6,025.52
668	TRANSURETHRAL PROCEDURES WITH MCC	2.8063	7.1	9.3	\$16,951.79
669	TRANSURETHRAL PROCEDURES WITH CC	1.5635	3.8	4.9	\$9,444.51
670	TRANSURETHRAL PROCEDURES WITHOUT CC/MCC	0.9785	2.1	2.6	\$5,910.75

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MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
671	URETHRAL PROCEDURES WITH CC/MCC	1.7813	3.9	5.8	\$10,760.16
672	URETHRAL PROCEDURES WITHOUT CC/MCC	1.1504	1.6	2.0	\$6,949.13
673	OTHER KIDNEY AND URINARY TRACT PROCEDURES WITH MCC	3.4683	7.7	10.5	\$20,950.68
674	OTHER KIDNEY AND URINARY TRACT PROCEDURES WITH CC	2.3832	5.9	7.6	\$14,396.01
675	OTHER KIDNEY AND URINARY TRACT PROCEDURES WITHOUT CC/MCC	1.7547	2.7	3.7	\$10,599.48
T 682	RENAL FAILURE WITH MCC	1.4727	4.3	5.7	\$8,896.02
T 683	RENAL FAILURE WITH CC	0.8793	3.1	3.8	\$5,311.52
T 684	RENAL FAILURE WITHOUT CC/MCC	0.6079	2.2	2.6	\$3,672.09
686	KIDNEY AND URINARY TRACT NEOPLASMS WITH MCC	1.8753	5.0	7.0	\$11,327.97
687	KIDNEY AND URINARY TRACT NEOPLASMS WITH CC	1.0501	3.3	4.3	\$6,343.26
688	KIDNEY AND URINARY TRACT NEOPLASMS WITHOUT CC/MCC	0.6858	1.9	2.2	\$4,142.66
T 689	KIDNEY AND URINARY TRACT INFECTIONS WITH MCC	1.1142	3.8	4.7	\$6,730.46
T 690	KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	0.7940	2.9	3.5	\$4,796.25
693	URINARY STONES WITH MCC	1.3355	3.7	5.0	\$8,067.25
694	URINARY STONES WITHOUT MCC	0.7712	2.1	2.6	\$4,658.53
695	KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS WITH MCC	1.1377	3.6	4.7	\$6,872.41
696	KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS WITHOUT MCC	0.6919	2.3	2.9	\$4,179.50
697	URETHRAL STRICTURE	0.9993	2.8	3.6	\$6,036.39
T 698	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH MCC	1.6106	4.7	6.0	\$9,729.02
T 699	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH CC	1.0270	3.3	4.1	\$6,203.72
T 700	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITHOUT CC/MCC	0.7465	2.4	2.9	\$4,509.32
707	MAJOR MALE PELVIC PROCEDURES WITH CC/MCC	1.9222	2.5	3.4	\$11,611.28
708	MAJOR MALE PELVIC PROCEDURES WITHOUT CC/MCC	1.4912	1.4	1.6	\$9,007.77
709	PENIS PROCEDURES WITH CC/MCC	2.3159	4.0	6.5	\$13,989.47
710	PENIS PROCEDURES WITHOUT CC/MCC	1.6016	1.7	2.1	\$9,674.66
711	TESTES PROCEDURES WITH CC/MCC	2.1316	5.3	7.4	\$12,876.19
712	TESTES PROCEDURES WITHOUT CC/MCC	1.0600	2.5	3.1	\$6,403.06
713	TRANSURETHRAL PROSTATECTOMY WITH CC/MCC	1.4934	2.8	4.0	\$9,021.06
714	TRANSURETHRAL PROSTATECTOMY WITHOUT CC/MCC	0.9288	1.6	1.9	\$5,610.53
715	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES FOR MALIGNANCY WITH CC/MCC	2.0216	5.0	6.8	\$12,211.72
716	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES FOR MALIGNANCY WITHOUT CC/MCC	1.2758	1.4	1.6	\$7,706.62
717	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES EXCEPT MALIGNANCY WITH CC/MCC	1.8006	3.7	5.2	\$10,876.74
718	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES EXCEPT MALIGNANCY WITHOUT CC/MCC	1.2346	2.2	2.7	\$7,457.75
722	MALIGNANCY, MALE REPRODUCTIVE SYSTEM WITH MCC	1.7126	5.1	7.1	\$10,345.17
723	MALIGNANCY, MALE REPRODUCTIVE SYSTEM WITH CC	1.0919	3.5	4.5	\$6,595.75
724	MALIGNANCY, MALE REPRODUCTIVE SYSTEM WITHOUT CC/MCC	0.6481	1.8	2.3	\$3,914.93
725	BENIGN PROSTATIC HYPERTROPHY WITH MCC	1.2855	4.0	5.4	\$7,765.22
726	BENIGN PROSTATIC HYPERTROPHY WITHOUT MCC	0.7447	2.5	3.1	\$4,498.45
727	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM WITH MCC	1.4210	4.4	5.6	\$8,583.72
728	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM WITHOUT MCC	0.8057	3.0	3.6	\$4,866.93
729	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES WITH CC/MCC	1.0075	3.1	4.1	\$6,085.92
730	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES WITHOUT CC/MCC	0.5689	1.8	2.2	\$3,436.51
734	PELVIC EVISCERATION, RADICAL HYSTERECTOMY AND RADICAL VULVECTOMY WITH CC/MCC	2.2243	3.5	5.0	\$13,436.15
735	PELVIC EVISCERATION, RADICAL HYSTERECTOMY AND RADICAL VULVECTOMY WITHOUT CC/MCC	1.4136	1.7	2.0	\$8,539.02
736	UTERINE AND ADNEXA PROCEDURES FOR OVARIAN OR ADNEXAL MALIGNANCY WITH MCC	4.2607	8.4	10.5	\$25,737.27
737	UTERINE AND ADNEXA PROCEDURES FOR OVARIAN OR ADNEXAL MALIGNANCY WITH CC	2.0581	4.2	4.9	\$12,432.20
738	UTERINE AND ADNEXA PROCEDURES FOR OVARIAN OR ADNEXAL MALIGNANCY WITHOUT CC/MCC	1.4759	2.6	2.9	\$8,915.35
739	UTERINE AND ADNEXA PROCEDURES FOR NON-OVARIAN AND NON-ADNEXAL MALIGNANCY WITH MCC	3.8240	6.6	9.5	\$23,099.33
740	UTERINE AND ADNEXA PROCEDURES FOR NON-OVARIAN AND NON-ADNEXAL MALIGNANCY WITH CC	1.8016	2.8	3.7	\$10,882.78
741	UTERINE AND ADNEXA PROCEDURES FOR NON-OVARIAN AND NON-ADNEXAL MALIGNANCY WITHOUT CC/MCC	1.2799	1.6	1.9	\$7,731.39
742	UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITH CC/MCC	1.7181	2.8	3.8	\$10,378.39

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
743	UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITHOUT CC/MCC	1.1328	1.7	1.9	\$6,842.81
744	D&C, CONIZATION, LAPAROSCOPY AND TUBAL INTERRUPTION WITH CC/MCC	1.7954	4.4	5.9	\$10,845.33
745	D&C, CONIZATION, LAPAROSCOPY AND TUBAL INTERRUPTION WITHOUT CC/MCC	1.1700	2.2	2.6	\$7,067.53
746	VAGINA, CERVIX AND VULVA PROCEDURES WITH CC/MCC	1.6115	3.2	4.9	\$9,734.46
747	VAGINA, CERVIX AND VULVA PROCEDURES WITHOUT CC/MCC	0.9391	1.5	1.8	\$5,672.75
748	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES	1.3476	1.6	2.0	\$8,140.34
749	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES WITH CC/MCC	2.7138	5.6	7.7	\$16,393.03
750	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES WITHOUT CC/MCC	1.4638	2.3	2.8	\$8,842.26
754	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITH MCC	1.8262	5.0	7.0	\$11,031.38
755	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITH CC	1.1293	3.3	4.3	\$6,821.67
756	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITHOUT CC/MCC	0.9184	2.1	2.5	\$5,547.71
757	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM WITH MCC	1.5247	4.7	6.3	\$9,210.13
758	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM WITH CC	0.9697	3.6	4.4	\$5,857.59
759	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM WITHOUT CC/MCC	0.6834	2.7	3.2	\$4,128.16
760	MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS WITH CC/MCC	0.9201	2.6	3.4	\$5,557.97
761	MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS WITHOUT CC/MCC	0.5908	1.8	2.3	\$3,568.80
768	VAGINAL DELIVERY WITH O.R. PROCEDURES EXCEPT STERILIZATION AND/OR D&C	1.1696	3.1	4.5	\$7,065.11
769	POSTPARTUM AND POST ABORTION DIAGNOSES WITH O.R. PROCEDURES	1.6176	2.9	4.3	\$9,771.31
770	ABORTION WITH D&C, ASPIRATION CURETTAGE OR HYSTEROTOMY	0.8898	1.8	2.3	\$5,374.94
776	POSTPARTUM AND POST ABORTION DIAGNOSES WITHOUT O.R. PROCEDURES	0.7745	2.5	3.4	\$4,678.46
779	ABORTION WITHOUT D&C	1.0590	2.0	2.9	\$6,397.02
783	CESAREAN SECTION WITH STERILIZATION WITH MCC	1.8749	4.8	7.2	\$11,325.56
784	CESAREAN SECTION WITH STERILIZATION WITH CC	1.0959	3.3	4.4	\$6,619.92
785	CESAREAN SECTION WITH STERILIZATION WITHOUT CC/MCC	0.9168	2.7	3.3	\$5,538.04
786	CESAREAN SECTION WITHOUT STERILIZATION WITH MCC	1.5944	4.3	5.7	\$9,631.16
787	CESAREAN SECTION WITHOUT STERILIZATION WITH CC	1.0644	3.5	4.1	\$6,429.64
788	CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC/MCC	0.8874	3.0	3.2	\$5,360.45
789	NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY	1.7200	1.8	1.8	\$10,389.87
790	EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	5.6721	17.9	17.9	\$34,263.00
791	PREMATURITY WITH MAJOR PROBLEMS	3.8738	13.3	13.3	\$23,400.15
792	PREMATURITY WITHOUT MAJOR PROBLEMS	2.3374	8.6	8.6	\$14,119.35
793	FULL TERM NEONATE WITH MAJOR PROBLEMS	3.9792	4.7	4.7	\$24,036.84
794	NEONATE WITH OTHER SIGNIFICANT PROBLEMS	1.4084	3.4	3.4	\$8,507.61
795	NORMAL NEWBORN	0.1907	3.1	3.1	\$1,151.95
796	VAGINAL DELIVERY WITH STERILIZATION AND/OR D&C WITH MCC	1.0708	3.6	5.7	\$6,468.30
797	VAGINAL DELIVERY WITH STERILIZATION AND/OR D&C WITH CC	0.9194	2.4	2.6	\$5,553.75
798	VAGINAL DELIVERY WITH STERILIZATION AND/OR D&C WITHOUT CC/MCC	0.8275	2.1	2.3	\$4,998.61
799	SPLENECTOMY WITH MCC	5.1474	7.8	10.7	\$31,093.49
800	SPLENECTOMY WITH CC	2.9539	5.0	6.4	\$17,843.39
801	SPLENECTOMY WITHOUT CC/MCC	1.6840	2.6	3.1	\$10,172.40
802	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS WITH MCC	3.7117	7.5	11.0	\$22,420.97
803	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS WITH CC	1.8865	3.9	5.2	\$11,395.63
804	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS WITHOUT CC/MCC	1.3659	2.0	2.5	\$8,250.88
805	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH MCC	1.0299	2.9	4.0	\$6,221.23
806	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH CC	0.7346	2.3	2.7	\$4,437.44
807	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC/MCC	0.6423	2.1	2.3	\$3,879.89
808	MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISIS AND COAGULATION DISORDERS WITH MCC	2.1858	5.4	7.3	\$13,203.59
809	MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISIS AND COAGULATION DISORDERS WITH CC	1.2234	3.5	4.4	\$7,390.09
810	MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISIS AND COAGULATION DISORDERS WITHOUT CC/MCC	0.9617	2.5	3.2	\$5,809.26
811	RED BLOOD CELL DISORDERS WITH MCC	1.3793	3.6	4.8	\$8,331.83

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812	RED BLOOD CELL DISORDERS WITHOUT MCC	0.8803	2.7	3.4	\$5,317.56
813	COAGULATION DISORDERS	1.5451	3.6	4.7	\$9,333.36
814	RETICULOENDOTHELIAL AND IMMUNITY DISORDERS WITH MCC	1.8917	4.5	6.5	\$11,427.04
815	RETICULOENDOTHELIAL AND IMMUNITY DISORDERS WITH CC	0.9934	2.9	3.8	\$6,000.75
816	RETICULOENDOTHELIAL AND IMMUNITY DISORDERS WITHOUT CC/MCC	0.6611	2.2	2.6	\$3,993.45
817	OTHER ANTEPARTUM DIAGNOSES WITH O.R. PROCEDURES WITH MCC	2.3068	4.1	6.6	\$13,934.50
818	OTHER ANTEPARTUM DIAGNOSES WITH O.R. PROCEDURES WITH CC	1.3598	3.0	4.2	\$8,214.04
819	OTHER ANTEPARTUM DIAGNOSES WITH O.R. PROCEDURES WITHOUT CC/MCC	0.9872	1.7	2.1	\$5,963.30
820	LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURES WITH MCC	5.6917	10.6	14.7	\$34,381.40
821	LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURES WITH CC	2.1552	3.7	5.4	\$13,018.74
822	LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURES WITHOUT CC/MCC	1.2515	1.8	2.3	\$7,559.84
823	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH OTHER PROCEDURES WITH MCC	4.5018	10.3	13.6	\$27,193.66
824	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH OTHER PROCEDURES WITH CC	2.3644	5.3	7.1	\$14,282.44
825	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH OTHER PROCEDURES WITHOUT CC/MCC	1.4015	2.4	3.4	\$8,465.93
826	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH MAJOR O.R. PROCEDURES WITH MCC	5.0445	9.9	13.5	\$30,471.91
827	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH MAJOR O.R. PROCEDURES WITH CC	2.5006	4.9	6.2	\$15,105.17
828	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH MAJOR O.R. PROCEDURES WITHOUT CC/MCC	1.6740	2.8	3.4	\$10,112.00
829	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH OTHER PROCEDURES WITH CC/MCC	3.2084	6.2	9.0	\$19,380.73
830	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH OTHER PROCEDURES WITHOUT CC/MCC	1.4820	2.3	2.9	\$8,952.20
831	OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITH MCC	1.1218	3.4	4.7	\$6,776.37
832	OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITH CC	0.7783	2.5	4.0	\$4,701.41
833	OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITHOUT CC/MCC	0.5370	1.9	2.7	\$3,243.81
834	ACUTE LEUKEMIA WITHOUT MAJOR O.R. PROCEDURES WITH MCC	6.0522	10.0	16.6	\$36,559.04
835	ACUTE LEUKEMIA WITHOUT MAJOR O.R. PROCEDURES WITH CC	2.1137	4.2	6.6	\$12,768.06
836	ACUTE LEUKEMIA WITHOUT MAJOR O.R. PROCEDURES WITHOUT CC/MCC	1.1735	2.7	3.9	\$7,088.67
837	CHEMOTHERAPY WITH ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS OR WITH HIGH DOSE CHEMOTHERAPY AGENT WITH MCC	5.6993	11.5	17.1	\$34,427.31
838	CHEMOTHERAPY WITH ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH CC OR HIGH DOSE CHEMOTHERAPY AGENT	2.2602	5.5	7.3	\$13,653.01
839	CHEMOTHERAPY WITH ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITHOUT CC/MCC	1.4872	4.4	4.9	\$8,983.61
840	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH MCC	3.2205	6.7	9.6	\$19,453.82
841	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH CC	1.6216	4.0	5.4	\$9,795.47
842	LYMPHOMA AND NON-ACUTE LEUKEMIA WITHOUT CC/MCC	1.0970	2.8	3.6	\$6,626.56
843	OTHER MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASTIC DIAGNOSES WITH MCC	1.9076	5.3	7.3	\$11,523.09
844	OTHER MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASTIC DIAGNOSES WITH CC	1.1842	3.6	4.7	\$7,153.30
845	OTHER MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASTIC DIAGNOSES WITHOUT CC/MCC	0.8489	2.6	3.4	\$5,127.88
846	CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH MCC	2.6729	5.9	7.9	\$16,145.97
847	CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH CC	1.3361	3.6	4.1	\$8,070.87
848	CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITHOUT CC/MCC	1.0323	3.0	3.5	\$6,235.73
849	RADIOTHERAPY	2.4936	6.2	9.3	\$15,062.89
853	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH MCC	4.9678	9.6	12.5	\$30,008.59
854	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH CC	2.1222	5.3	6.6	\$12,819.40
855	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITHOUT CC/MCC	1.5198	3.3	4.1	\$9,180.53
856	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITH MCC	4.6639	9.2	12.3	\$28,172.85
857	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITH CC	2.1024	5.4	6.7	\$12,699.80
858	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITHOUT CC/MCC	1.3596	3.5	4.4	\$8,212.83
862	POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITH MCC	1.8967	5.0	6.7	\$11,457.24
863	POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITHOUT MCC	1.0114	3.5	4.2	\$6,109.48

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MS-DRGs 998 and 999 contain cases that could not be assigned to valid DRGs.

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
864	FEVER AND INFLAMMATORY CONDITIONS	0.8765	2.7	3.3	\$5,294.60
865	VIRAL ILLNESS WITH MCC	1.4778	3.9	5.5	\$8,926.83
866	VIRAL ILLNESS WITHOUT MCC	0.8390	2.7	3.4	\$5,068.08
T 867	OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES WITH MCC	2.2371	5.5	7.6	\$13,513.47
T 868	OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES WITH CC	1.0660	3.5	4.4	\$6,439.30
T 869	OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES WITHOUT CC/MCC	0.7285	2.5	3.0	\$4,400.59
T 870	SEPTICEMIA OR SEVERE SEPSIS WITH MV >96 HOURS	6.4390	12.4	14.5	\$38,895.55
T 871	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	1.8722	4.8	6.2	\$11,309.25
T 872	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	1.0263	3.5	4.2	\$6,199.49
876	O.R. PROCEDURES WITH PRINCIPAL DIAGNOSIS OF MENTAL ILLNESS	3.2680	7.0	13.7	\$19,740.75
880	ACUTE ADJUSTMENT REACTION AND PSYCHOSOCIAL DYSFUNCTION	0.8645	2.6	3.7	\$5,222.12
881	DEPRESSIVE NEUROSES	0.8020	3.9	5.3	\$4,844.58
882	NEUROSES EXCEPT DEPRESSIVE	0.8236	3.2	4.7	\$4,975.05
883	DISORDERS OF PERSONALITY AND IMPULSE CONTROL	1.5818	5.1	9.8	\$9,555.05
T 884	ORGANIC DISTURBANCES AND INTELLECTUAL DISABILITY	1.4473	4.5	7.3	\$8,742.59
885	PSYCHOSES	1.2394	5.9	8.8	\$7,486.74
886	BEHAVIORAL AND DEVELOPMENTAL DISORDERS	1.2237	4.3	7.6	\$7,391.91
887	OTHER MENTAL DISORDER DIAGNOSES	1.0798	3.0	4.7	\$6,522.66
894	ALCOHOL, DRUG ABUSE OR DEPENDENCE, LEFT AMA	0.5490	2.0	2.7	\$3,316.30
895	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITH REHABILITATION THERAPY	1.5992	8.9	11.9	\$9,660.16
T 896	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITH MCC	1.7803	4.9	7.0	\$10,754.12
T 897	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	0.8270	3.4	4.3	\$4,995.59
901	WOUND DEBRIDEMENTS FOR INJURIES WITH MCC	4.2687	8.8	12.9	\$25,785.59
902	WOUND DEBRIDEMENTS FOR INJURIES WITH CC	1.9643	4.8	6.6	\$11,865.59
903	WOUND DEBRIDEMENTS FOR INJURIES WITHOUT CC/MCC	1.1353	2.6	3.4	\$6,857.92
904	SKIN GRAFTS FOR INJURIES WITH CC/MCC	3.7270	7.1	10.6	\$22,513.39
905	SKIN GRAFTS FOR INJURIES WITHOUT CC/MCC	1.6500	3.3	4.3	\$9,967.02
906	HAND PROCEDURES FOR INJURIES	1.8038	2.8	4.5	\$10,896.07
T 907	OTHER O.R. PROCEDURES FOR INJURIES WITH MCC	3.9482	6.8	9.6	\$23,849.58
T 908	OTHER O.R. PROCEDURES FOR INJURIES WITH CC	2.0504	3.9	5.2	\$12,385.69
T 909	OTHER O.R. PROCEDURES FOR INJURIES WITHOUT CC/MCC	1.3710	2.4	2.9	\$8,281.69
913	TRAUMATIC INJURY WITH MCC	1.6386	3.7	5.5	\$9,898.16
914	TRAUMATIC INJURY WITHOUT MCC	0.8869	2.5	3.2	\$5,357.43
915	ALLERGIC REACTIONS WITH MCC	1.6995	3.7	5.0	\$10,266.03
916	ALLERGIC REACTIONS WITHOUT MCC	0.6584	1.8	2.2	\$3,977.14
T 917	POISONING AND TOXIC EFFECTS OF DRUGS WITH MCC	1.4785	3.5	4.9	\$8,931.06
T 918	POISONING AND TOXIC EFFECTS OF DRUGS WITHOUT MCC	0.7916	2.3	3.1	\$4,781.75
919	COMPLICATIONS OF TREATMENT WITH MCC	1.8441	4.3	6.0	\$11,139.51
920	COMPLICATIONS OF TREATMENT WITH CC	1.0246	2.9	3.8	\$6,189.22
921	COMPLICATIONS OF TREATMENT WITHOUT CC/MCC	0.6979	2.1	2.6	\$4,215.75
922	OTHER INJURY, POISONING AND TOXIC EFFECT DIAGNOSES WITH MCC	1.5882	4.1	6.3	\$9,593.71
923	OTHER INJURY, POISONING AND TOXIC EFFECT DIAGNOSES WITHOUT MCC	0.9398	2.7	4.3	\$5,676.97
927	EXTENSIVE BURNS OR FULL THICKNESS BURNS WITH MV >96 HOURS WITH SKIN GRAFT	21.0913	26.0	35.4	\$127,404.53
928	FULL THICKNESS BURN WITH SKIN GRAFT OR INHALATION INJURY WITH CC/MCC	6.5316	11.7	16.4	\$39,454.91
929	FULL THICKNESS BURN WITH SKIN GRAFT OR INHALATION INJURY WITHOUT CC/MCC	3.0139	5.9	7.9	\$18,205.82
933	EXTENSIVE BURNS OR FULL THICKNESS BURNS WITH MV >96 HOURS WITHOUT SKIN GRAFT	2.2629	2.4	4.1	\$13,669.32
934	FULL THICKNESS BURN WITHOUT SKIN GRAFT OR INHALATION INJURY	1.9409	4.3	6.8	\$11,724.24
935	NON-EXTENSIVE BURNS	1.9329	3.6	5.5	\$11,675.91
939	O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITH MCC	3.3746	6.6	9.8	\$20,384.68
940	O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITH CC	2.2209	3.5	4.9	\$13,415.61
941	O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITHOUT CC/MCC	1.9231	2.2	2.8	\$11,616.72
T 945	REHABILITATION WITH CC/MCC	1.4819	5.0	7.1	\$8,951.59

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DRG	Description	RW	GMLOS	AMLOS	National Payment Rate
T 946	REHABILITATION WITHOUT CC/MCC	1.1262	3.2	4.3	\$6,802.95
T 947	SIGNS AND SYMPTOMS WITH MCC	1.1940	3.5	4.8	\$7,212.50
T 948	SIGNS AND SYMPTOMS WITHOUT MCC	0.7871	2.6	3.3	\$4,754.57
949	AFTERCARE WITH CC/MCC	1.1099	4.3	6.1	\$6,704.48
950	AFTERCARE WITHOUT CC/MCC	0.7402	3.0	4.3	\$4,471.27
951	OTHER FACTORS INFLUENCING HEALTH STATUS	0.5596	1.8	2.6	\$3,380.33
955	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA	6.2893	7.3	11.1	\$37,991.27
T 956	LIMB REATTACHMENT, HIP AND FEMUR PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA	3.8500	6.0	7.4	\$23,256.39
957	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITH MCC	7.4209	9.1	13.1	\$44,826.84
958	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITH CC	4.2057	6.7	8.2	\$25,405.04
959	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITHOUT CC/MCC	2.7361	4.2	5.1	\$16,527.74
963	OTHER MULTIPLE SIGNIFICANT TRAUMA WITH MCC	2.7299	5.2	7.6	\$16,490.29
964	OTHER MULTIPLE SIGNIFICANT TRAUMA WITH CC	1.4918	3.9	4.9	\$9,011.40
965	OTHER MULTIPLE SIGNIFICANT TRAUMA WITHOUT CC/MCC	0.9125	2.6	3.1	\$5,512.07
969	HIV WITH EXTENSIVE O.R. PROCEDURES WITH MCC	5.8519	11.1	15.5	\$35,349.10
970	HIV WITH EXTENSIVE O.R. PROCEDURES WITHOUT MCC	2.9887	6.6	8.9	\$18,053.60
974	HIV WITH MAJOR RELATED CONDITION WITH MCC	2.6905	6.3	8.8	\$16,252.29
975	HIV WITH MAJOR RELATED CONDITION WITH CC	1.2821	4.0	5.3	\$7,744.68
976	HIV WITH MAJOR RELATED CONDITION WITHOUT CC/MCC	0.9496	3.0	4.4	\$5,736.17
977	HIV WITH OR WITHOUT OTHER RELATED CONDITION	1.3243	3.6	5.0	\$7,999.59
T 981	EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH MCC	4.6145	8.4	11.7	\$27,874.44
T 982	EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH CC	2.5366	4.6	6.2	\$15,322.64
T 983	EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	1.6523	2.3	3.0	\$9,980.92
987	NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH MCC	3.2759	7.7	10.4	\$19,788.47
988	NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH CC	1.7064	4.3	5.6	\$10,307.71
989	NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	1.1236	2.3	3	\$6,787.24
998	PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS	.			
999	UNGROUPABLE	.			

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