

# 2024

## Top 50 Diagnosis Related Groupings (DRGs)



**Effective Date: January 1, 2025**



YUMA REGIONAL MEDICAL CENTER

(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 1<sup>st</sup>, 2025

# Top 50 DRGs

## 2024 Average Per Day Charge & Average Length of Stay (ALOS)

DRG Code & Description	Estimated ALOS	Estimated Charge Per Case
064 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH MCC	4.8	\$ 74,480
065 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	3.2	\$ 52,539
177 - RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	4.5	\$ 52,662
189 - PULMONARY EDEMA AND RESPIRATORY FAILURE	3.7	\$ 42,438
193 - SIMPLE PNEUMONIA AND PLEURISY WITH MCC	4.3	\$ 48,475
194 - SIMPLE PNEUMONIA AND PLEURISY WITH CC	2.7	\$ 35,655
208 - RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT LESS THAN =96 HOURS	6.8	\$ 108,046
267 - ENDOVASCULAR CARDIAC VALVE REPLACEMENT AND SUPPLEMENT PROCEDURES WITHOUT MCC	1.2	\$ 144,569
274 - PERCUTANEOUS AND OTHER INTRACARDIAC PROCEDURES WITHOUT MCC	1.0	\$ 78,950
280 - ACUTE MYOCARDIAL INFARCTION DISCHARGED ALIVE WITH MCC	4.9	\$ 71,999
281 - ACUTE MYOCARDIAL INFARCTION DISCHARGED ALIVE WITH CC	2.9	\$ 58,548
291 - HEART FAILURE AND SHOCK WITH MCC	4.6	\$ 49,370
308 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH MCC	3.9	\$ 46,924
309 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH CC	2.3	\$ 33,109
321 - PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH INTRALUMINAL DEVICE WITH MCC OR 4+ ARTERIES-INTRALUMINAL DEVICES	5.0	\$ 194,158
322 - PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH INTRALUMINAL DEVICE WITHOUT MCC	2.3	\$ 146,933
330 - MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	5.4	\$ 126,438
377 - GASTROINTESTINAL HEMORRHAGE WITH MCC	5.0	\$ 77,620
378 - GASTROINTESTINAL HEMORRHAGE WITH CC	2.8	\$ 49,972
389 - GASTROINTESTINAL OBSTRUCTION WITH CC	3.7	\$ 39,587
392 - ESOPHAGITIS GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	3.5	\$ 40,622
418 - LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH CC	3.5	\$ 102,070
441 - DISORDERS OF LIVER EXCEPT MALIGNANCY CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH MCC	5.1	\$ 71,486
481 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	3.5	\$ 89,306
603 - CELLULITIS WITHOUT MCC	3.1	\$ 33,973

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## 2024 Average Per Day Charge & Average Length of Stay (ALOS)

DRG Code & Description	Estimated ALOS	Estimated Charge Per Case
621 - O.R. PROCEDURES FOR OBESITY WITHOUT CC-MCC	1.0	\$ 72,634
637 - DIABETES WITH MCC	3.9	\$ 15,697
638 - DIABETES WITH CC	2.8	\$ 14,210
640 - MISCELLANEOUS DISORDERS OF NUTRITION METABOLISM FLUIDS AND ELECTROLYTES WITH MCC	3.6	\$ 15,901
641 - MISCELLANEOUS DISORDERS OF NUTRITION METABOLISM FLUIDS AND ELECTROLYTES WITHOUT MCC	3.1	\$ 14,540
682 - RENAL FAILURE WITH MCC	5.5	\$ 12,079
683 - RENAL FAILURE WITH CC	3.2	\$ 13,376
690 - KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	2.4	\$ 15,987
698 - OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH MCC	4.9	\$ 12,222
785 - CESAREAN SECTION WITH STERILIZATION WITHOUT CC-MCC	2.1	\$ 15,401
786 - CESAREAN SECTION WITHOUT STERILIZATION WITH MCC	3.7	\$ 12,249
787 - CESAREAN SECTION WITHOUT STERILIZATION WITH CC	2.7	\$ 13,133
788 - CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC-MCC	2.6	\$ 12,544
792 - PREMATURITY WITHOUT MAJOR PROBLEMS	11.0	\$ 3,462
794 - NEONATE WITH OTHER SIGNIFICANT PROBLEMS	4.7	\$ 3,449
805 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DANDC WITH MCC	3.0	\$ 11,656
806 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DANDC WITH CC	2.4	\$ 12,249
807 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DANDC WITHOUT CC-MCC	2.1	\$ 12,566
853 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH MCC	10.3	\$ 18,440
854 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH CC	6.0	\$ 16,512
871 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV GREATER THAN 96 HOURS WITH MCC	5.5	\$ 13,973
872 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV GREATER THAN 96 HOURS WITHOUT MCC	3.9	\$ 13,076
880 - ACUTE ADJUSTMENT REACTION AND PSYCHOSOCIAL DYSFUNCTION	5.6	\$ 5,070
885 - PSYCHOSES	7.4	\$ 4,338
897 - ALCOHOL DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	5.8	\$ 8,139

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