

## Average Charges for the Top 25 Statewide DRGs Compared to DAMERON HOSPITAL

Statewide Rank	MS-DRG Code	MS-DRG Description	Number of Discharges	Average Charge Per Stay (this hospital)	Average Charge Per Stay Statewide*	Percent Higher/Lower than Statewide
1	795	NORMAL NEWBORN	1,899	5,713	3,561	60.4%
2	775	VAGINAL DELIVERY WITHOUT COMPLICATING DIAGNOSIS	1,476	14,366	13,351	7.6%
3	885	PSYCHOSES	4	60,441	20,967	188.3%
4	766	CESAREAN SECTION WITHOUT CC/MCC	449	26,169	22,888	14.3%
5	794	NEONATE WITH OTHER SIGNIFICANT PROBLEMS	344	12,318	8,631	42.7%
6	470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	613	85,598	75,400	13.5%
7	392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS WITHOUT MCC	224	25,851	24,765	4.4%
8	313	CHEST PAIN	355	24,086	19,895	21.1%
9	871	SEPTICEMIA WITHOUT MECH VENT 96+ HOURS WITH MCC	111	103,348	79,870	29.4%
10	765	CESAREAN SECTION WITH CC/MCC	314	34,397	33,323	3.2%
11	743	UTERINE & ADNEXA PROCEDURE FOR NON-MALIGNANCY WITHOUT CC/MCC	215	32,881	33,599	(2.1%)
12	603	CELLULITIS WITHOUT MCC	105	33,746	26,566	27.0%
13	194	SIMPLE PNEUMONIA & PLEURISY WITH CC	140	52,106	37,318	39.6%
14	690	KIDNEY & URINARY TRACT INFECTIONS WITHOUT MCC	139	29,268	26,186	11.8%
16	641	NUTRITIONAL & MISC METABOLIC DISORDERS WITHOUT MCC	138	31,536	23,273	35.5%
17	774	VAGINAL DELIVERY WITH COMPLICATING DIAGNOSIS	158	18,798	18,782	0.1%
18	291	HEART FAILURE & SHOCK WITH MCC	80	76,849	57,940	32.6%
19	897	ALCOHOL/DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	23	37,758	16,167	133.5%
20	247	PERC CARDIOVASC PROCEDURE WITH DRUG-ELUTING STENT WITHOUT MCC	100	107,475	82,014	31.0%
21	343	APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	177	34,305	31,616	8.5%
22	292	HEART FAILURE & SHOCK WITH CC	96	45,480	38,201	19.1%
23	203	BRONCHITIS & ASTHMA WITHOUT CC/MCC	145	22,585	17,510	29.0%
24	312	SYNCOPE & COLLAPSE	70	33,422	26,056	28.3%
25	195	SIMPLE PNEUMONIA & PLEURISY WITHOUT CC/MCC	128	31,335	23,879	31.2%

\* This figure has been adjusted for Kaisers, Shriner's, and other hospitals that do not report charges (Calculation: adjusted total charges/# of valid discharges)