



**Average (Mean) Charges for the 2016 Top 25 Statewide Benchmark MS-DRGs Compared to  
October 1, 2015 to September 30, 2016  
DAMERON HOSPITAL**

Statewide Rank	MS-DRG Code	MS-DRG Description	Number of Discharges	Average (Mean) Charge Per Stay (this hospital)	Average (Mean) Charge Per Stay Statewide	Percent Higher/Lower than Statewide
1	795	NORMAL NEWBORN	405	\$ 10,214	\$ 5,468	87%
2	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	320	\$ 28,610	\$ 21,016	36%
3	885	PSYCHOSES	1	\$ 58,300	\$ 28,146	107%
4	871	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W MCC	197	\$ 149,130	\$ 99,894	49%
5	794	NEONATE W OTHER SIGNIFICANT PROBLEMS	102	\$ 16,913	\$ 11,229	51%
6	470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	352	\$ 141,347	\$ 96,444	47%
7	766	CESAREAN SECTION W/O CC/MCC	114	\$ 47,116	\$ 35,882	31%
8	765	CESAREAN SECTION W CC/MCC	81	\$ 58,220	\$ 50,532	15%
9	872	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W/O MCC	117	\$ 76,763	\$ 51,827	48%
10	392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	74	\$ 51,609	\$ 36,623	41%
11	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	44	\$ 37,735	\$ 29,304	29%
12	291	HEART FAILURE & SHOCK W MCC	73	\$ 116,278	\$ 78,008	49%
13	603	CELLULITIS W/O MCC	67	\$ 53,024	\$ 37,862	40%
14	292	HEART FAILURE & SHOCK W CC	81	\$ 78,897	\$ 52,865	49%
15	690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	37	\$ 57,143	\$ 37,938	51%
16	897	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W/O MCC	11	\$ 66,594	\$ 27,621	141%
17	313	CHEST PAIN	55	\$ 52,598	\$ 32,195	63%
18	189	PULMONARY EDEMA & RESPIRATORY FAILURE	61	\$ 108,276	\$ 170,348	-36%
19	194	SIMPLE PNEUMONIA & PLEURISY W CC	66	\$ 77,683	\$ 48,194	61%
20	793	FULL TERM NEONATE W MAJOR PROBLEMS	41	\$ 43,501	\$ 73,905	-41%
21	853	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W MCC	36	\$ 349,495	\$ 286,715	22%
22	641	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	31	\$ 64,363	\$ 38,609	67%
23	683	RENAL FAILURE W CC	48	\$ 85,672	\$ 50,043	71%
24	378	G.I. HEMORRHAGE W CC	65	\$ 74,373	\$ 49,725	50%
25	065	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W CC OR TPA IN 24 HRS	53	\$ 77,970	\$ 67,197	16%

Kaiser hospitals do not report charges. Those hospitals, along with all other invalid charge (\$0) records, are excluded from charge calculations

## Top 25 MS-DRGs for DAMERON HOSPITAL

October 1, 2015 through September 30, 2016

Sorted by: Mean Charge Per Stay

MS-DRG Code	MS-DRG Description	Number of Discharges	Number of Discharges with Valid Charges	Total Charges	Mean Charge Per Stay	Mean Charge Per Day	Mean Length Of Stay
453	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W MCC	1	1	\$ 1,387,599	\$ 1,387,599	\$ 99,114	14.0
003	ECMO OR TRACH W MV >96 HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	10	10	\$ 12,226,826	\$ 1,222,683	\$ 33,498	36.5
231	CORONARY BYPASS W PTCA W MCC	1	1	\$ 1,204,929	\$ 1,204,929	\$ 109,539	11.0
216	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W MCC	1	1	\$ 907,608	\$ 907,608	\$ 53,389	17.0
004	TRACH W MV >96 HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	12	12	\$ 9,738,685	\$ 811,557	\$ 27,052	30.0
150	EPISTAXIS W MCC	1	1	\$ 802,913	\$ 802,913	\$ 27,687	29.0
233	CORONARY BYPASS W CARDIAC CATH W MCC	7	7	\$ 4,956,216	\$ 708,031	\$ 47,656	14.9
235	CORONARY BYPASS W/O CARDIAC CATH W MCC	4	4	\$ 2,720,179	\$ 680,045	\$ 42,503	16.0
466	REVISION OF HIP OR KNEE REPLACEMENT W MCC	2	2	\$ 1,301,726	\$ 650,863	\$ 24,561	26.5
335	PERITONEAL ADHESIOLYSIS W MCC	1	1	\$ 596,891	\$ 596,891	\$ 45,915	13.0
228	OTHER CARDIOTHORACIC PROCEDURES W MCC	1	1	\$ 586,514	\$ 586,514	\$ 58,651	10.0
790	EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	8	8	\$ 4,589,098	\$ 573,637	\$ 11,828	48.5
234	CORONARY BYPASS W CARDIAC CATH W/O MCC	9	9	\$ 4,539,163	\$ 504,351	\$ 40,893	12.3
870	SEPTICEMIA OR SEVERE SEPSIS W MV >96 HOURS	29	29	\$ 14,556,735	\$ 501,956	\$ 29,113	17.2
232	CORONARY BYPASS W PTCA W/O MCC	2	2	\$ 1,002,866	\$ 501,433	\$ 66,858	7.5
459	SPINAL FUSION EXCEPT CERVICAL W MCC	3	3	\$ 1,444,200	\$ 481,400	\$ 103,157	4.7
454	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W CC	14	14	\$ 6,672,120	\$ 476,580	\$ 86,651	5.5
455	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W/O CC/MCC	17	17	\$ 7,984,438	\$ 469,673	\$ 101,069	4.6
411	CHOLECYSTECTOMY W C.D.E. W MCC	1	1	\$ 440,064	\$ 440,064	\$ 25,886	17.0
229	OTHER CARDIOTHORACIC PROCEDURES W CC	1	1	\$ 424,984	\$ 424,984	\$ 32,691	13.0
236	CORONARY BYPASS W/O CARDIAC CATH W/O MCC	6	6	\$ 2,534,556	\$ 422,426	\$ 43,699	9.7
207	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT >96 HOURS	12	12	\$ 4,825,045	\$ 402,087	\$ 29,421	13.7
329	MAJOR SMALL & LARGE BOWEL PROCEDURES W MCC	5	5	\$ 1,975,287	\$ 395,057	\$ 25,324	15.6
221	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W/O CC/MCC	1	1	\$ 378,258	\$ 378,258	\$ 75,652	5.0
091	OTHER DISORDERS OF NERVOUS SYSTEM W MCC	2	2	\$ 709,109	\$ 354,555	\$ 30,831	11.5

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## Top 25 MS-DRGs for DAMERON HOSPITAL

October 1, 2015 through September 30, 2016

Sorted by: Mean Length of Stay

MS-DRG Code	MS-DRG Description	Number of Discharges	Number of Discharges with Valid Charges	Total Charges	Mean Charge Per Stay	Mean Charge Per Day	Mean Length Of Stay
790	EXTREME IMMATURITY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	8	8	\$ 4,589,098	\$ 573,637	\$ 11,828	48.5
003	ECMO OR TRACH W MV >96 HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	10	10	\$ 12,226,826	\$ 1,222,683	\$ 33,498	36.5
004	TRACH W MV >96 HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	12	12	\$ 9,738,685	\$ 811,557	\$ 27,052	30.0
150	EPISTAXIS W MCC	1	1	\$ 802,913	\$ 802,913	\$ 27,687	29.0
466	REVISION OF HIP OR KNEE REPLACEMENT W MCC	2	2	\$ 1,301,726	\$ 650,863	\$ 24,561	26.5
791	PREMATURITY W MAJOR PROBLEMS	9	9	\$ 1,354,413	\$ 150,490	\$ 8,209	18.3
326	STOMACH, ESOPHAGEAL & DUODENAL PROC W MCC	5	5	\$ 1,500,854	\$ 300,171	\$ 17,055	17.6
579	OTHER SKIN, SUBCUT TISS & BREAST PROC W MCC	2	2	\$ 532,500	\$ 266,250	\$ 15,214	17.5
870	SEPTICEMIA OR SEVERE SEPSIS W MV >96 HOURS	29	29	\$ 14,556,735	\$ 501,956	\$ 29,113	17.2
216	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W MCC	1	1	\$ 907,608	\$ 907,608	\$ 53,389	17.0
411	CHOLECYSTECTOMY W C.D.E. W MCC	1	1	\$ 440,064	\$ 440,064	\$ 25,886	17.0
380	COMPLICATED PEPTIC ULCER W MCC	2	2	\$ 477,482	\$ 238,741	\$ 14,469	16.5
235	CORONARY BYPASS W/O CARDIAC CATH W MCC	4	4	\$ 2,720,179	\$ 680,045	\$ 42,503	16.0
329	MAJOR SMALL & LARGE BOWEL PROCEDURES W MCC	5	5	\$ 1,975,287	\$ 395,057	\$ 25,324	15.6
233	CORONARY BYPASS W CARDIAC CATH W MCC	7	7	\$ 4,956,216	\$ 708,031	\$ 47,656	14.9
453	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W MCC	1	1	\$ 1,387,599	\$ 1,387,599	\$ 99,114	14.0
207	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT >96 HOURS	12	12	\$ 4,825,045	\$ 402,087	\$ 29,421	13.7
163	MAJOR CHEST PROCEDURES W MCC	4	4	\$ 1,201,865	\$ 300,466	\$ 22,257	13.5
166	OTHER RESP SYSTEM O.R. PROCEDURES W MCC	5	5	\$ 1,714,467	\$ 342,893	\$ 25,977	13.2
853	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W MCC	36	36	\$ 12,581,802	\$ 349,495	\$ 26,770	13.1
229	OTHER CARDIOTHORACIC PROCEDURES W CC	1	1	\$ 424,984	\$ 424,984	\$ 32,691	13.0
335	PERITONEAL ADHESIOLYSIS W MCC	1	1	\$ 596,891	\$ 596,891	\$ 45,915	13.0
500	SOFT TISSUE PROCEDURES W MCC	1	1	\$ 216,065	\$ 216,065	\$ 16,620	13.0
260	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W MCC	2	2	\$ 499,526	\$ 249,763	\$ 19,981	12.5
234	CORONARY BYPASS W CARDIAC CATH W/O MCC	9	9	\$ 4,539,163	\$ 504,351	\$ 40,893	12.3

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795	NORMAL NEWBORN	405	405	\$ 4,136,712	\$ 10,214	\$ 4,788	2.1
470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	352	352	\$ 49,754,057	\$ 141,347	\$ 49,261	2.9
775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	320	320	\$ 9,155,202	\$ 28,610	\$ 13,154	2.2
621	O.R. PROCEDURES FOR OBESITY W/O CC/MCC	267	267	\$ 19,015,066	\$ 71,217	\$ 39,045	1.8
871	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W MCC	197	197	\$ 29,378,553	\$ 149,130	\$ 24,101	6.2
872	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W/O MCC	117	117	\$ 8,981,292	\$ 76,763	\$ 19,610	3.9
766	CESAREAN SECTION W/O CC/MCC	114	114	\$ 5,371,205	\$ 47,116	\$ 12,974	3.6
247	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W/O MCC	106	106	\$ 15,355,599	\$ 144,864	\$ 79,563	1.8
794	NEONATE W OTHER SIGNIFICANT PROBLEMS	102	102	\$ 1,725,170	\$ 16,913	\$ 6,075	2.8
292	HEART FAILURE & SHOCK W CC	81	81	\$ 6,390,697	\$ 78,897	\$ 19,020	4.1
765	CESAREAN SECTION W CC/MCC	81	81	\$ 4,715,805	\$ 58,220	\$ 14,737	4.0
392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	74	74	\$ 3,819,032	\$ 51,609	\$ 21,455	2.4
291	HEART FAILURE & SHOCK W MCC	73	73	\$ 8,488,283	\$ 116,278	\$ 21,435	5.4
603	CELLULITIS W/O MCC	67	67	\$ 3,552,605	\$ 53,024	\$ 15,182	3.5
194	SIMPLE PNEUMONIA & PLEURISY W CC	66	66	\$ 5,127,106	\$ 77,683	\$ 19,495	4.0
378	G.I. HEMORRHAGE W CC	65	65	\$ 4,834,260	\$ 74,373	\$ 22,278	3.3
190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	64	64	\$ 6,638,488	\$ 103,726	\$ 22,352	4.6
189	PULMONARY EDEMA & RESPIRATORY FAILURE	61	61	\$ 6,604,806	\$ 108,276	\$ 26,525	4.1
287	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W/O MCC	59	59	\$ 6,297,755	\$ 106,742	\$ 34,042	3.1
638	DIABETES W CC	57	57	\$ 3,554,970	\$ 62,368	\$ 20,912	3.0
313	CHEST PAIN	55	55	\$ 2,892,916	\$ 52,598	\$ 27,292	1.9
065	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W CC OR TPA IN 24 HRS	53	53	\$ 4,132,415	\$ 77,970	\$ 22,098	3.5
191	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W CC	48	48	\$ 4,090,978	\$ 85,229	\$ 23,377	3.6
419	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W/O CC/MCC	48	48	\$ 3,690,463	\$ 76,885	\$ 35,147	2.2
683	RENAL FAILURE W CC	48	48	\$ 4,112,241	\$ 85,672	\$ 20,769	4.1

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