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TRICARE
MANAGEMENT ACTIVITY

MB&RB

**CHANGE 58
6010.58-M
NOVEMBER 10, 2011**

**PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE REIMBURSEMENT MANUAL (TRM), FEBRUARY 2008**

The TRICARE Management Activity has authorized the following addition(s)/revision(s).

CHANGE TITLE: FISCAL YEAR (FY) 2012 REIMBURSEMENT UPDATE

CONREQ: 15614

PAGE CHANGE(S): See pages 2 and 3.

SUMMARY OF CHANGE(S): This change provides FY 2012 annual updates to the TRM for Ambulatory Surgery Center (ASC) rates, Diagnosis Related Group (DRG) rates, Hospice rates, Skilled Nursing Facility (SNF) Prospective Payment System (PPS) Rate and Wage Index to include updates for Extended Care Health Option (ECHO) Home Health Care (EHHC) reimbursement for inpatient mental health care, partial hospitalization care, and Residential Treatment Center (RTC) care to include 3.0% inpatient PPS market basket update factor.

EFFECTIVE DATE: As listed in the policy.

IMPLEMENTATION DATE: Upon direction of the Contracting Officer.

This change is made in conjunction with Feb 2008 TPM, Change No. 57.

**Ann N. Fazzini
Chief, Medical Benefits and
Reimbursement Branch**

**ATTACHMENT(S): 134 PAGE(S)
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[paragraph 1.3.1.2](#) applies), neither the family nor the individual deductible will have been met and no TRICARE benefits are payable.

1.3.1.5 In the case of family members of an active duty member of pay grade E-5 or above, with Persian Gulf conflict service who is, or was, entitled to special pay for hostile fire/imminent danger authorized by 37 USC 310, for services in the Persian Gulf area in connection with Operation Desert Shield or Operation Desert Storm, the deductible shall be the amount specified in [paragraph 1.3.1.2](#), for care rendered after October 1, 1991.

Note: The provisions of [paragraph 1.3.1.5](#), also apply to family members of service members who were killed in the Gulf, or who died subsequent to Gulf service; and to service members who retired prior to October 1, 1991, after having served in the Gulf war, and to their family members.

1.3.1.6 Effective December 8, 1995, the annual TRICARE deductible has been waived for family members of selected reserve members called to active duty for 31 days or more in support of Operation Joint Endeavor (the Bosnia peacekeeping mission). Under a nationwide demonstration, TRICARE may immediately begin cost-sharing in accordance with standard TRICARE rules. These beneficiaries will be eligible to use established TRICARE Extra network providers at a reduced cost-share rate. Additionally, in those areas where TRICARE is in full operation, selected reserve members called to active duty for 31 days or more will have the option of enrolling their families in TRICARE Prime.

Note: This demonstration is effective December 8, 1995, and is in effect until such time as Executive Order 12982 expires. TRICARE eligible beneficiaries other than family members of reservists called to active duty in support of Operation Joint Endeavor are not eligible for participation. This demonstration is limited to the annual TRICARE Standard and Extra deductible; other TRICARE cost-sharing continues to apply. All current TRICARE rules, unless specifically provided otherwise, will continue to apply.

Note: Initially the option to enroll in TRICARE Prime was limited to family members of selected reserve members who were called to active duty for 179 days or more. This changed to 31 days or more as of March 10, 2003.

Note: Claims for these beneficiaries are to be paid from financially underwritten funds and reported as such. TMA periodically will calculate and reimburse the contractors for the additional costs incurred as a result of waiving the deductibles on these claims.

1.3.1.7 Adjustment of Excess. Any beneficiary identified under [paragraphs 1.3.1.4, 1.3.1.5, and 1.3.1.6](#), who paid any deductible in excess of the amounts stipulated is entitled to an adjustment of any amount paid in excess against the annual deductible required under those paragraphs.

1.3.1.8 The deductible amounts identified in this section shall be deemed to have been satisfied if the catastrophic cap amounts identified in [Section 2](#) have been met for the same fiscal year in which the deductible applies.

1.3.2 Deductible Amount: Inpatient Care

None.

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1.3.3 Cost-share Amount

1.3.3.1 Outpatient Care

1.3.3.1.1 ADFM or Authorized NATO Beneficiary. The cost-share for outpatient care is 20% of the allowable amount in excess of the annual deductible amount. This includes the professional charges of an individual professional provider for services rendered in a non-TRICARE-approved ASC or birthing center.

1.3.3.1.2 Other Beneficiary. The cost-share applicable to outpatient care for other than active duty and authorized NATO family member beneficiaries is 25% of the allowable amount in excess of the annual deductible amount. This includes: partial hospitalization for alcohol rehabilitation; professional charges of an individual professional provider for services rendered in a non-TRICARE-approved ASC.

1.3.3.2 Inpatient Care

1.3.3.2.1 ADFM: Except in the case of mental health services, ADFMs or their sponsors are responsible for the payment of the first \$25 of the allowable institutional costs incurred with each covered inpatient admission to a hospital or other authorized institutional provider, or the daily charge the beneficiary or sponsor would have been charged had the inpatient care been provided in a Uniformed Service hospital, whichever is greater. (Please reference daily rate chart below.)

FIGURE 2.1-1 UNIFORMED SERVICES HOSPITAL DAILY CHARGE AMOUNTS

PERIOD	DAILY CHARGE
October 1, 2000 - September 30, 2001	\$11.45
April 1, 2001 - Present (for Prime ADFMs only)	\$0.00
October 1, 2001 - September 30, 2002 (for ADFMs not enrolled in Prime)	\$11.90
October 1, 2002 - September 30, 2003 (for ADFMs not enrolled in Prime)	\$12.72
October 1, 2003 - September 30, 2004 (for ADFMs not enrolled in Prime)	\$13.32
October 1, 2004 - September 30, 2005 (for ADFMs not enrolled in Prime)	\$13.90
October 1, 2005 - September 30, 2006 (for ADFMs not enrolled in Prime)	\$14.35
October 1, 2006 - September 30, 2007 (for ADFMs not enrolled in Prime)	\$14.80
October 1, 2007 - September 30, 2008 (for ADFMs not enrolled in Prime)	\$15.15
October 1, 2008 - September 30, 2009 (for ADFMs not enrolled in Prime)	\$15.65
October 1, 2009 - September 30, 2010 (for ADFMs not enrolled in Prime)	\$16.30
October 1, 2010 - September 30, 2011 (for ADFMs not enrolled in Prime)	\$16.85
October 1, 2011 - September 30, 2012 (for ADFMs not enrolled in Prime)	\$17.05

Use the daily charge (per diem rate) in effect for each day of the stay to calculate a cost-share for a stay which spans periods.

1.3.3.2.2 Other Beneficiaries: For services exempt from the DRG-based payment system and the mental health per diem payment system and services provided by institutions other than

hospitals (i.e., Residential Treatment Centers (RTCs)), the cost-share shall be 25% of the allowable charges.

1.3.3.3 Cost-Shares: Maternity

1.3.3.3.1 Determination. Maternity care cost-share shall be determined as follows:

1.3.3.3.1.1 Inpatient cost-share formula applies to maternity care ending in childbirth in, or on the way to, a hospital inpatient childbirth unit, and for maternity care ending in a non-birth outcome not otherwise excluded.

Note 1: Inpatient cost-share formula applies to prenatal and postnatal care provided in the office of a civilian physician or certified nurse-midwife in connection with maternity care ending in childbirth or termination of pregnancy in, or on the way to, a Military Treatment Facility (MTF) inpatient childbirth unit. ADFMs pay a per diem charge (or a \$25.00 minimum charge) for an admission and there is no separate cost-share for them for separately billed professional charges or prenatal or postnatal care.

1.3.3.3.1.2 Ambulatory surgery cost-share formula applies to maternity care ending in childbirth in, or on the way to, a birthing center to which the beneficiary is admitted, and from which the beneficiary has received prenatal care, or a hospital-based outpatient birthing room.

1.3.3.3.1.3 Outpatient cost-share formula applies to maternity care which terminates in a planned childbirth at home.

1.3.3.3.1.4 Otherwise covered medical services and supplies directly related to "complications of pregnancy", as defined in the Regulation, will be cost-shared on the same basis as the related maternity care for a period not to exceed 42 days following termination of the pregnancy and thereafter cost-shared on the basis of the inpatient or outpatient status of the beneficiary when medically necessary services and supplies are received.

1.3.3.3.2 Otherwise authorized services and supplies related to maternity care, including maternity related prescription drugs, shall be cost-shared on the same basis as the termination of pregnancy.

1.3.3.3.3 Claims for **pregnancy testing** are cost-shared on an outpatient basis when the delivery is on an inpatient basis.

1.3.3.3.4 Where the beneficiary delivers in a **professional office birthing suite** located in the office of a physician or certified nurse-midwife (which is not otherwise a TRICARE-approved birthing center) the delivery is to be adjudicated as an at-home birth.

1.3.3.3.5 Claims for **prescription drugs** provided on an outpatient basis during the maternity episode but not directly related to the maternity care are cost-shared on an outpatient basis.

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1.3.3.3.6 Newborn cost-share. Effective for all inpatient admissions occurring on or after October 1, 1987, separate claims must be submitted for the mother and newborn. The cost-share for inpatient claims for services rendered to a beneficiary newborn is determined as follows:

1.3.3.3.6.1 In a DRG hospital:

1.3.3.3.6.1.1 Same newborn date of birth and date of admission:

- For ADFMs, there will be no cost-share during the period the newborn is deemed enrolled in Prime.
- For newborn family members of other than active duty members, unless the newborn is deemed enrolled in Prime, the cost-share will be the lower of the number of hospital days minus three multiplied by the per diem amount, OR 25% of the total billed charges (less duplicates and DRG non-reimbursables such as hospital-based professional charges).

1.3.3.3.6.1.2 Different newborn date of birth and date of admission:

- For ADFMs, there will be no cost-share during the period the newborn is deemed enrolled in Prime.
- For all other beneficiaries, the cost-share is applied to all days in the inpatient stay unless the newborn is deemed enrolled in Prime.

1.3.3.3.6.2 In DRG exempt hospital:

1.3.3.3.6.2.1 Same newborn date of birth and date of admission:

- For ADFMs, there will be no cost-share during the period the newborn is deemed enrolled in Prime.
- For family members of other than active duty members, the cost-share will be calculated based on 25% of the total allowed charges unless the newborn is deemed enrolled in Prime.

1.3.3.3.6.2.2 Different newborn date of birth and date of admission:

- For ADFMs, there will be no cost-share during the period the newborn is deemed enrolled in Prime.
- For family members of other than active duty members, the cost-share will be calculated based on 25% of the total allowed charges unless the newborn is deemed enrolled in Prime.

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1.3.3.3.7 Maternity Related Care. Medically necessary treatment rendered to a pregnant woman for a non-obstetrical medical, anatomical, or physiological illness or condition shall be cost-shared as a part of the maternity episode when:

- The treatment is otherwise allowable as a benefit; and,
- Delay of the treatment until after the conclusion of the pregnancy is medically contraindicated; and,
- The illness or condition is, or increases the likelihood of, a threat to the life of the mother; or,
- The illness or condition will cause, or increase the likelihood of, a stillbirth or newborn injury or illness; or,
- The usual course of treatment must be altered or modified to minimize a defined risk of newborn injury or illness.

1.3.3.4 Cost-Shares: DRG-Based Payment System

1.3.3.4.1 General

These special cost-sharing procedures apply only to claims paid under the DRG-based payment system.

1.3.3.4.2 TRICARE Standard

1.3.3.4.2.1 Cost-shares for ADFMs.

1.3.3.4.2.1.1 Except in the case of mental health services, ADFMs or their sponsors are responsible for the payment of the first \$25 of the allowable institutional costs incurred with each covered inpatient admission to a hospital or other authorized institutional provider, or the amount the beneficiary or sponsor would have been charged had the inpatient care been provided in a Uniformed Service hospital, whichever is greater.

1.3.3.4.2.1.2 Effective for care on or after October 1, 1995, the inpatient cost-sharing for mental health services is \$20 per day for each day of the inpatient admission.

1.3.3.4.2.2 Cost-shares for beneficiaries other than ADFMs.

1.3.3.4.2.2.1 The cost-share will be the lesser of:

1.3.3.4.2.2.1.1 An amount based on a single, specific per diem amount which will not vary regardless of the DRG involved. The following is the DRG inpatient TRICARE Standard cost-sharing per diems for beneficiaries other than ADFMs.

- For FY 2005, the daily rate is \$512.
- For FY 2006, the daily rate is \$535.

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- For FY 2007, the daily rate is capped at the FY 2006 level of \$535, per Section 704 of NDAA FY 2007.
- For FYs 2008, 2009, 2010, and 2011, the daily rate is \$535.
- For FY 2012, the daily rate is \$708.

1.3.3.4.2.2.1.1.1 The per diem amount will be calculated as follows:

- Determine the total allowable DRG-based amounts for services subject to the DRG-based payment system and for beneficiaries other than ADFMs during the same database period used for determining the DRG weights and rates.
- Add in the allowance for Capital and Direct Medical Education (CAP/DME) which have been paid to hospitals during the same database period used for determining the DRG weights and rates.
- Divide this amount by the total number of patient days for these beneficiaries. This amount will be the average cost per day for these beneficiaries.
- Multiply this amount by 0.25. In this way total cost-sharing amounts will continue to be 25% of the allowable amount.
- Determine any cost-sharing amounts which exceed 25% of the billed charge (see [paragraph 1.3.3.4.2.2.1.2](#)) and divide this amount by the total number of patient days in [paragraph 1.3.3.4.2.2.1.1](#). Add this amount to the amount in [paragraph 1.3.3.4.2.2.1.1](#). This is the per diem cost-share to be used for these beneficiaries.

1.3.3.4.2.2.1.1.2 The per diem amount will be required for each actual day of the beneficiary's hospital stay which the DRG-based payment covers except for the day of discharge. When the payment ends on a specific day because eligibility ends on either a long-stay or short-stay outlier day, the last day of eligibility is to be counted for determining the per diem cost-sharing amount. For claims involving a same-day discharge which qualify as an inpatient stay (e.g., the patient was admitted with the expectation of a stay of several days, but died the same day) the cost-share is to be based on a one-day stay. (The number of hospital days must contain one day in this situation.) Where long-stay outlier days are subsequently determined to be not medically necessary by a Peer Review Organization (PRO), no cost-share will be required for those days, since payment for such days will be the beneficiary's responsibility entirely.

1.3.3.4.2.2.1.2 Twenty-five percent (25%) of the billed charge. The billed charge to be used includes all inpatient institutional line items billed by the hospital minus any duplicate charges and any charges which can be billed separately (e.g., hospital-based professional services, outpatient services, etc.). The net billed charges for the cost-share computation include comfort and convenience items.

1.3.3.4.2.2.2 Under no circumstances can the cost-share exceed the DRG-based amount.

1.3.3.4.2.2.3 Where the dates of service span different fiscal years, the per diem cost-share amount for each year is to be applied to the appropriate days of the stay.

1.3.3.4.3 TRICARE Extra

1.3.3.4.3.1 Cost-shares for ADFMs. The cost-sharing provisions for ADFMs are the same as those for TRICARE Standard.

1.3.3.4.3.2 Cost-shares for beneficiaries other than ADFMs. The cost-sharing provisions for beneficiaries other than ADFMs is the same as those for TRICARE Standard, except the per diem copayment is \$250.

1.3.3.4.4 TRICARE Prime

There is no cost-share for ADFMs. For beneficiaries other than ADFMs, the cost-sharing provision is the first \$25 of the allowable institutional costs incurred with each covered inpatient admission to a hospital or other authorized institutional provider, or a per diem rate of \$11, whichever is greater.

1.3.3.4.5 Maternity Services

See [paragraph 1.3.3.3](#), for the cost-sharing provisions for maternity services.

1.3.3.5 Cost-Shares: Inpatient Mental Health Per Diem Payment System

1.3.3.5.1 General. These special cost-sharing procedures apply only to claims paid under the inpatient mental health per diem payment system. For inpatient claims exempt from this system, the procedures in [paragraph 1.3.3.2](#) or [1.3.3.4](#) are to be followed.

1.3.3.5.2 Cost-shares for ADFMs. Effective for care on or after October 1, 1995, the inpatient cost-sharing for mental health services is \$20 per day for each day of the inpatient admission. This \$20 per day cost-sharing amount applies to admissions to any hospital for mental health services, any RTC, any Substance Use Disorder Rehabilitation Facility (SUDRF), and any PHP providing mental health or substance use disorder rehabilitation services. For Prime ADFMs care provided on or after April 1, 2001, cost-share is \$0 per day. See [Addendum A](#) for further information.

1.3.3.5.3 Cost-shares for beneficiaries other than ADFMs.

1.3.3.5.3.1 Higher volume hospitals and units. With respect to care paid for on the basis of a hospital specific per diem, the cost-share shall be 25% of the hospital specific per diem amount.

1.3.3.5.3.2 Lower volume hospitals and units. For care paid for on the basis of a regional per diem, the cost-share shall be the lower of [paragraph 1.3.3.5.3.2.1](#) or [paragraph 1.3.3.5.3.2.2](#):

1.3.3.5.3.2.1 A fixed daily amount multiplied by the number of covered days. The fixed daily amount shall be 25% of the per diem adjusted so that total beneficiary cost-shares will equal 25% of total payments under the inpatient mental health per diem payment system. This fixed daily amount shall be updated annually and published in the **Federal Register** along with the per diems published pursuant to [Chapter 7, Section 1](#). This fixed daily amount will also be furnished to

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contractors by TMA. The following fixed daily amounts are effective for services rendered on or after October 1 of each fiscal year.

- Fiscal Year 2000 - \$144 per day.
- Fiscal Year 2001 - \$149 per day.
- Fiscal Year 2002 - \$154 per day.
- Fiscal Year 2003 - \$159 per day.
- Fiscal Year 2004 - \$164 per day.
- Fiscal Year 2005 - \$169 per day.
- Fiscal Year 2006 - \$175 per day.
- Fiscal Year 2007 - \$181 per day.
- Fiscal Year 2008 - \$187 per day.
- Fiscal Year 2009 - \$193 per day.
- Fiscal Year 2010 - \$197 per day.
- Fiscal Year 2011 - \$202 per day.
- **Fiscal Year 2012 - \$208 per day.**

1.3.3.5.3.2.2 Twenty-five percent (25%) of the hospital's billed charges (less any duplicates).

1.3.3.5.4 Claim which spans a period in which two separate per diems exist. A claim subject to the inpatient mental health per diem payment system which spans a period in which two separate per diems exist shall have the cost-share computed on the actual per diem in effect for each day of care.

1.3.3.5.5 Cost-share whenever leave days are involved. There is no patient cost-share for leave days when such days are included in a hospital stay.

1.3.3.5.6 Claims for services that are provided during an inpatient admission which are not included in the per diem rate are to be cost-shared as an inpatient claim if the contractor cannot determine where the service was rendered and the status of the patient when the service was provided. The contractor would need to examine the claim for place of service and type of service to determine if the care was rendered in the hospital while the beneficiary was an inpatient of the hospital. This would include non-mental health claims and mental health claims submitted by individual professional providers rendering medically necessary services during the inpatient admission.

1.3.3.6 Cost-Shares: Partial Hospitalization

Cost-sharing for partial hospitalization is on an inpatient basis. The inpatient cost-share also applies to the associated psychotherapy billed separately by the individual professional provider. These providers will have to identify on the claim form that the psychotherapy is related to a partial hospitalization stay so the proper inpatient cost-sharing can be applied. Effective for care on or after October 1, 1995, the cost-share for ADFMs for inpatient mental health services is \$20 per day for each day of the inpatient admission. For care provided on or after April 1, 2001, the cost-share for ADFMs enrolled in Prime for inpatient mental health services is \$0. For retirees and their family members, the cost-share is 25% of the allowed amount. Since inpatient cost-sharing is being applied, no deductible is to be taken for partial hospitalization regardless of sponsor status. The cost-share for ADFMs is to be taken from the PHP claim.

Chapter 6

Diagnostic Related Groups (DRGs)

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C (FY 2012)	Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

Hospital Reimbursement - TRICARE DRG-Based Payment System (Adjusted Standardized Amounts (ASAs))

Issue Date: October 8, 1987
Authority: [32 CFR 199.14\(a\)\(1\)](#)

1.0 APPLICABILITY

This policy is mandatory for reimbursement of services provided by either network or non-network providers. However, alternative network reimbursement methodologies are permitted when approved by the TRICARE Management Activity (TMA) and specifically included in the network provider agreement.

2.0 ISSUE

What are the Adjusted Standardized Amounts (ASAs) under the TRICARE Diagnosis Related Group (DRG)-based payment system, and how are they used and calculated?

3.0 POLICY

3.1 General

The ASA represents the adjusted average operating cost for treating all TRICARE beneficiaries in all DRGs during the database period. During Fiscal Year (FY) 1988 the TRICARE DRG-based payment system used two ASAs--one for urban areas and one for rural areas. Beginning in FY 1989 (admissions on or after October 1, 1988), three ASAs are used--one for large urban areas, one for other urban areas, and one for rural areas. Effective October 1, 1994, rural hospitals will receive the same payment rate as other urban hospitals. Effective April 1, through September 30, 2003, and November 1, 2003 forward, hospitals located in other areas shall receive the same ASA payment rate as large urban hospitals.

3.2 Calculation Of The ASA

The following procedures will be followed in calculating the TRICARE ASA.

3.2.1 Apply the Cost-to-Charge Ratio (CCR). In this step each charge is reduced to a representative cost by using the Medicare CCR. Effective FY 2010, the CCR is 0.3740. Effective FY 2011, the CCR is 0.3664. **Effective FY 2012, the CCR is 0.3460.**

3.2.2 Increase for Bad Debts. The base standardized amount will be increased by 0.01 in order to reimburse hospitals for bad debt expenses attributable to TRICARE beneficiaries. The base

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(Adjusted Standardized Amounts (ASAs))

standardized amount will be increased by 0.0060 for FY 2000, 0.0055 for FY 2001, and through July 14, 2001, and by 0.0070 as of July 15, 2001 and subsequent years.

3.2.3 Update for Inflation. Each record in the database will be updated to FY 1988 using a factor equal to 1.07. Thereafter, any recalculation of the ASA will use an inflation factor equal to the hospital market basket index used by the Centers of Medicare and Medicaid Services (CMS) in their Prospective Payment System (PPS).

3.2.4 Preliminary Non-Teaching Standardized Amount. At this point Indirect Medical Education (IDME) costs have been removed through standardization in the weight methodology and direct medical education costs have been removed through the application of the Medicare CCR which does not include direct medical education costs. Therefore, a non-teaching standardized amount will be computed by dividing aggregate costs by the number of discharges in the database.

3.2.5 Preliminary Teaching Standardized Amounts. A separate standardized amount will be calculated for each teaching hospital to reimburse for IDME expenses. This will be done by multiplying the non-teaching standardized amount by 1.0 plus each hospital's IDME factor.

3.2.6 System Standardization. The preliminary standardized amounts will be further standardized using a factor which equals total DRG payments using the preliminary standardized amounts divided by the sum of all costs in the database (updated for inflation). To achieve standardization, each preliminary standardized amount will be divided by this factor. This step is necessary so that total DRG system outlays, given the same distribution among hospitals and diagnoses, are equal whether based on DRGs or on charges reduced to costs.

3.2.7 Labor-Related and Nonlabor-Related Portions of the ASA. The ASA shall be divided into labor-related and nonlabor-related portions according to the ratio of these amounts in the national ASA under the Medicare PPS. Since October 1, 1997, the labor-related portion of the ASA equals 71.1% and the non-labor portion equals 28.9%. Effective October 1, 2004, and subsequent years, for wage indexes less than or equal to 1.0 the labor related portion of the ASA shall equal 62%. Effective October 1, 2005, and subsequent years, for wage index values greater than 1.0, the labor related portion of the ASA shall equal 69.7%. Effective October 1, 2009 and subsequent years, for wage index values greater than 1.0, the labor related portion of the ASA shall equal 68.8%.

3.2.8 Updating the Standardized Amounts. For years subsequent to the initial year, the standardized amounts will be updated by the final published Medicare annual update factor, unless the standardized amounts are recalculated.

- END -

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3.2.6.4 Cost Outliers

3.2.6.4.1 Any discharge which has standardized costs that exceed the thresholds outlined below, will be classified as a cost outlier.

3.2.6.4.1.1 For admissions occurring prior to October 1, 1997, the standardized costs will be calculated by first subtracting the noncovered charges, multiplying the total charges (less lines 7, N, and X) by the CCR and adjusting this amount for IDME costs by dividing the amount by one plus the hospital's IDME adjustment factor. For admissions occurring on or after October 1, 1997, the costs for IDME are no longer standardized.

3.2.6.4.1.2 Cost outliers will be reimbursed the DRG-based amount plus 80% effective October 1, 1994 of the standardized costs exceeding the threshold.

3.2.6.4.1.3 For admissions occurring on or after October 1, 1997, the following steps shall be followed when calculating cost outlier payments for all cases other than neonates and children's hospitals:

$$\text{Standard Cost} = (\text{Billed Charges} \times \text{CCR})$$

$$\text{Outlier Payment} = 80\% \text{ of } (\text{Standard Cost} - \text{Threshold})$$

$$\text{Total Payments} = \text{Outlier Payments} + (\text{DRG Base Rate} \times (1 + (\text{IDME})))$$

Note: Noncovered charges should continue to be subtracted from the billed charges prior to multiplying the billed charges by the CCR.

3.2.6.4.1.4 The CCR for admissions occurring on or after October 1, 2009, is 0.3740. The CCR for admissions occurring on or after October 1, 2010, is 0.3664. **The CCR for admissions occurring on or after October 1, 2011, is 0.3460.**

3.2.6.4.1.5 The National Operating Standard Cost as a Share of Total Costs (NOSCASTC) for calculating the cost-outlier threshold for FY 2010 is 0.923, for FY 2011 is 0.920, **and for FY 2012 is 0.919.**

3.2.6.4.2 For FY 2010, a TRICARE fixed loss cost-outlier threshold is set **at** \$21,358. Effective October 1, 2009, the cost-outlier threshold shall be the DRG-based amount (wage-adjusted) plus the IDME payment, plus the flat rate of \$21,358 (also wage-adjusted).

3.2.6.4.3 For FY 2011, a TRICARE fixed loss cost-outlier threshold is set **at** \$21,229. Effective October 1, 2010, the cost-outlier threshold shall be the DRG-based amount (wage-adjusted) plus the IDME payment, plus the flat rate of \$21,229 (also wage-adjusted).

3.2.6.4.4 For FY 2012, a TRICARE fixed loss cost-outlier threshold is set **at** \$21,482. Effective October 1, 2011, the cost-outlier threshold shall be the DRG-based amount (wage-adjusted) plus the IDME payment, plus the flat rate of \$21,482 (also wage-adjusted).

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3.2.6.4.5 The cost-outlier threshold shall be calculated as follows:

{[Fixed Loss Threshold x ((Labor-Related Share x Applicable wage index) + Non-labor-related share) x NOSCASTC] + (DRG Base Payment (wage-adjusted) x (1 + IDME))}

Example: Using FY 1999 figures {[10,129 x ((0.7110 x Applicable wage index) + 0.2890) x 0.913] + (DRG Based Payment (wage-adjusted) x (1 + IDME))}

3.2.6.5 Burn Outliers

3.2.6.5.1 Burn outliers generally will be subject to the same outlier policies applicable to the TRICARE DRG-based payment system except as indicated below. For admissions prior to October 1, 1998, there are six DRGs related to burn cases. They are:

- 456 - Burns, transferred to another acute care facility
- 457 - Extensive burns w/o O.R. procedure
- 458 - Non-extensive burns with skin graft
- 459 - Non-extensive burns with wound debridement or other O.R. procedure
- 460 - Non-extensive burns w/o O.R. procedure
- 472 - Extensive burns with O.R. procedure

3.2.6.5.2 Effective for admissions on or after October 1, 1998, the above listed DRGs are no longer valid.

3.2.6.5.3 For admissions on or after October 1, 1998, there are eight DRGs related to burn cases. They are:

- 504 - Extensive 3rd degree burn w skin graft
- 505 - Extensive 3rd degree burn w/o skin graft
- 506 - Full thick burn w sk graft or inhal inj w cc or sig tr
- 507 - Full thick burn w sk graft or inhal inj w/o cc or sig tr
- 508 - Full thick burn w/o sk graft or inhal inj w cc or sig tr
- 509 - Full thick burn w/o sk graft or inhal inj w/o cc or sig tr
- 510 - Non-extensive burns w cc or significant trauma
- 511 - Non-extensive burns w/o cc or significant trauma

3.2.6.5.3.1 Effective October 1, 2008, and thereafter, the DRGs for these descriptions can be found at <http://www.tricare.mil/drgrates/>.

3.2.6.5.3.2 For burn cases with admissions occurring prior to October 1, 1988, there are no special procedures. The marginal cost factor for outliers for all such cases will be 60%.

3.2.6.5.3.3 Burn cases which qualify as short-stay outliers, regardless of the date of admission, will be reimbursed according to the procedures for short-stay outliers.

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3.2.6.5.3.4 Burn cases with admissions occurring on or after October 1, 1988, which qualify as cost outliers will be reimbursed using a marginal cost factor of 90%.

3.2.6.5.3.5 For a burn outlier in a children's hospital, the appropriate children's hospital outlier threshold is to be used (see below), but the marginal cost factor is to be either 60% or 90% according to the criteria above.

3.2.6.6 Children's Hospital Outliers

The following special provisions apply to cost outliers.

3.2.6.6.1 The threshold shall be the same as that applied to other hospitals.

3.2.6.6.2 Effective October 1, 2009, the standardized costs are calculated using a CCR of 0.4047. Effective October 1, 2010, the standardized costs are calculated using a CCR of 0.3974. **Effective October 1, 2011, the standardized costs are calculated using a CCR of 0.3757.** (This is equivalent to the Medicare CCR increased to account for CAP/DME costs.)

3.2.6.6.3 The marginal cost factor shall be 80%.

3.2.6.6.4 For admissions occurring during FY 2010, the marginal cost factor shall be adjusted by 1.10. For admissions occurring during FY 2011, the marginal cost factor shall be adjusted by 1.00. **For admissions occurring during FY 2012, the marginal cost factor shall be adjusted by 1.02.**

3.2.6.6.5 The NOSCASTC for calculating the cost-outlier threshold for FY 2010 is 0.923. The NOSCASTC for calculating the cost-outlier threshold for FY 2011 is 0.920. **The NOSCASTC for calculating the cost-outlier threshold for FY 2012 is 0.919.**

3.2.6.6.6 The following calculation shall be used in determining cost outlier payments for children's hospitals and neonates:

Step 1: Computation of Standardized Costs:

Billed Charges x CCR

(Non-covered charges shall be subtracted from the billed charges prior to multiplying the charges by the CCR.)

Step 2: Determination of Cost-Outlier Threshold:

{[Fixed Loss Threshold x ((Labor-Related Share x Applicable wage index) + Non-labor-related share) x NOSCASTC] + [DRG Based Payment (wage-adjusted) x (1 + IDME)]}

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Step 3: Determination of Cost Outlier Payment

$$\frac{[(\text{Standardized costs} - \text{Cost-Outlier Threshold}) \times \text{Marginal Cost Factor}] \times \text{Adjustment Factor}}$$

Step 4: Total Payments = Outlier Payments + [DRG Base Rate x (1 + IDME)]

3.2.6.7 Neonatal Outliers

Neonatal outliers in hospitals subject to the TRICARE DRG-based payment system (other than children's hospitals) shall be determined under the same rules applicable to children's hospitals, except that the standardized costs for cost outliers shall be calculated using the CCR of 0.64. Effective for admissions occurring on or after October 1, 2005, and subsequent years, the CCR used to calculate cost outliers for neonates in acute care hospitals shall be reduced to the same CCR used for all other acute care hospitals.

3.2.7 IDME adjustment

3.2.7.1 General

The DRG-based payments for any hospital which has a teaching program approved under Medicare Regulation Section 413.85, Title 42 CFR shall be adjusted to account for IDME costs. The adjustment factor used shall be the one in effect on the date of discharge (see below). The adjustment will be made by multiplying the total DRG-based amount by 1.0 plus a hospital-specific factor equal to:

$$1.04 \times \left[\left(1.0 + \frac{\text{number of interns + residents}}{\text{number of beds}} \right)^{.5795} - 1.0 \right]$$

- For admissions occurring during FYs 2008 and subsequent years, the same formula shall be used except the first number shall be 1.02.

3.2.7.2 Number of Interns and Residents

TRICARE will use the number of interns and residents from CMS most recently available Provider Specific File.

3.2.7.3 Number of Beds

TRICARE will use the number of beds from CMS' most recently available Provider Specific File.

3.2.7.4 Updates of IDME Factors

3.2.7.4.1 TRICARE will use the ration of interns and residents to beds from CMS' most recently available Provider Specific File to update the IDME adjustment factors. The ratio will be provided to

TRICARE Adjusted Standardized Amounts (ASAs) - FY 2012

These amounts are effective for admissions occurring on or after October 1, 2011 through September 30, 2012.

FIGURE 6.B.2012-1 68.8% LABOR SHARE/31.2% NON-LABOR SHARE IF WAGE INDEX GREATER THAN 1

LABOR RELATED	NON-LABOR RELATED	TOTAL
\$3,588.55	\$1,627.37	\$5,215.92

FIGURE 6.B.2012-2 62% LABOR SHARE/38% NON-LABOR SHARE IF WAGE INDEX LESS THAN OR EQUAL TO 1

LABOR RELATED	NON-LABOR RELATED	TOTAL
\$3,233.87	\$1,982.05	\$5,215.92

FY 2012 cost-share per diem for beneficiaries other than dependents of active duty member - \$708.00.

- END -

Chapter 6

Addendum C (FY 2011)

Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2011

Effective for admissions on or after October 1, 2010. The second column labeled "PAC XFER" indicates whether the DRG is subject to the post acute care transfer policy. The third column labeled "PAC PAY" indicates whether the DRG is subject to the post acute care special payment provision.

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
1	No	No	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W MCC	25.3823	39.1	29.7	5
2	No	No	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W/O MCC	12.5238	20.0	18.0	7
3	Yes	No	ECMO OR TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	19.5904	37.7	28.7	6
4	Yes	No	TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	12.1023	28.6	22.7	5
5	No	No	LIVER TRANSPLANT W MCC OR INTESTINAL TRANSPLANT	11.5308	23.1	15.9	3
6	No	No	LIVER TRANSPLANT W/O MCC	5.4189	10.9	8.1	2
7	No	No	LUNG TRANSPLANT	11.5846	22.4	16.5	3
8	No	No	SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT	5.5092*	11.7	10.1	7
10	No	No	PANCREAS TRANSPLANT	4.1992*	9.7	8.6	5
11	No	No	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W MCC	4.7145	13.0	11.2	3
12	No	No	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W CC	3.2815	9.4	7.2	1
13	No	No	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W/O CC/MCC	2.6885	7.3	6.3	2
14	No	No	ALLOGENEIC BONE MARROW TRANSPLANT	12.8826	36.2	25.5	3
15	No	No	AUTOLOGOUS BONE MARROW TRANSPLANT	5.5725	18.8	16.8	6
20	No	No	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W MCC	8.9093	17.6	15.8	6
21	No	No	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W CC	6.5751	14.4	12.7	4
22	No	No	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W/O CC/MCC	4.3378	9.3	8.3	2
23	No	No	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W MCC OR CHEMO IMPLANT	6.5113	13.3	9.2	1

Notes: (1) * = low volume DRG with fewer than 10 cases. The Medicare weights are used for these DRGs.
(2) # = PM-DRGs with fewer than 10 cases. An average weight over the past five years were used for these DRGs.
(3) w CC = with Complications or Comorbidities.
(4) w/o CC = without Complications or Comorbidities.

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Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2011

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
24	No	No	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W/O MCC	4.2771	10.2	6.7	1
25	Yes	No	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES AGE >17 W MCC	4.6711	9.7	7.4	1
26	Yes	No	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES AGE >17 W CC	3.1019	6.0	4.7	1
27	Yes	No	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES AGE >17 W/O CC/MCC	2.5609	3.7	2.9	1
28	Yes	Yes	SPINAL PROCEDURES W MCC	4.8236	8.7	6.7	1
29	Yes	Yes	SPINAL PROCEDURES W CC OR SPINAL NEUROSTIMULATORS	3.2920	5.7	4.1	1
30	Yes	Yes	SPINAL PROCEDURES W/O CC/MCC	1.9829	3.4	2.5	1
31	No	No	VENTRICULAR SHUNT PROCEDURES AGE >17 W MCC	4.7668	13.5	9.7	1
32	No	No	VENTRICULAR SHUNT PROCEDURES AGE >17 W CC	1.9328	5.1	3.6	1
33	No	No	VENTRICULAR SHUNT PROCEDURES AGE >17 W/O CC/MCC	1.4864	3.0	2.0	1
34	No	No	CAROTID ARTERY STENT PROCEDURE W MCC	3.9119*	7.0	4.7	2
35	No	No	CAROTID ARTERY STENT PROCEDURE W CC	2.5844	2.9	1.9	1
36	No	No	CAROTID ARTERY STENT PROCEDURE W/O CC/MCC	2.0574	1.9	1.4	1
37	No	No	EXTRACRANIAL PROCEDURES W MCC	3.6395	6.7	4.4	1
38	No	No	EXTRACRANIAL PROCEDURES W CC	1.9728	3.5	2.4	1
39	No	No	EXTRACRANIAL PROCEDURES W/O CC/MCC	1.2017	1.6	1.4	1
40	Yes	Yes	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W MCC	3.9935	10.5	7.3	1
41	Yes	Yes	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W CC OR PERIPH NEUROSTIM	1.9283	5.4	3.7	1
42	Yes	Yes	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W/O CC/MCC	1.6866	2.5	1.9	1
52	No	No	SPINAL DISORDERS & INJURIES W CC/MCC	2.2852	10.1	5.5	1
53	No	No	SPINAL DISORDERS & INJURIES W/O CC/MCC	0.7293	2.8	2.1	1
54	Yes	No	NERVOUS SYSTEM NEOPLASMS W MCC	1.5480	5.7	4.1	1
55	Yes	No	NERVOUS SYSTEM NEOPLASMS W/O MCC	1.0733	3.9	2.8	1
56	Yes	No	DEGENERATIVE NERVOUS SYSTEM DISORDERS W MCC	1.6042	8.7	5.9	1
57	Yes	No	DEGENERATIVE NERVOUS SYSTEM DISORDERS W/O MCC	1.1134	5.3	3.6	1
58	No	No	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W MCC	1.3830	4.9	4.3	1
59	No	No	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W CC	1.0089	4.4	3.7	1
60	No	No	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W/O CC/MCC	0.8473	3.5	2.9	1
61	No	No	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W MCC	2.5349	6.0	4.3	1
62	No	No	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W CC	2.1396	5.4	4.8	1
63	No	No	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W/O CC/MCC	1.4879	2.6	2.3	1
64	Yes	No	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W MCC	2.3332	7.0	5.0	1
65	Yes	No	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W CC	1.3357	4.4	3.6	1

Notes: (1) * = low volume DRG with fewer than 10 cases. The Medicare weights are used for these DRGs.
(2) # = PM-DRGs with fewer than 10 cases. An average weight over the past five years were used for these DRGs.
(3) w CC = with Complications or Comorbidities.
(4) w/o CC = without Complications or Comorbidities.

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
66	Yes	No	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W/O CC/MCC	1.0142	2.9	2.4	1
67	No	No	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT W MCC	1.2752	3.3	3.0	1
68	No	No	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT W/O MCC	1.0983	2.9	2.3	1
69	No	No	TRANSIENT ISCHEMIA	0.8274	2.2	1.8	1
70	Yes	No	NONSPECIFIC CEREBROVASCULAR DISORDERS W MCC	2.6668	9.4	5.8	1
71	Yes	No	NONSPECIFIC CEREBROVASCULAR DISORDERS W CC	1.0971	4.7	3.4	1
72	Yes	No	NONSPECIFIC CEREBROVASCULAR DISORDERS W/O CC/MCC	0.8831	2.9	2.1	1
73	No	No	CRANIAL & PERIPHERAL NERVE DISORDERS W MCC	2.4019	9.1	4.9	1
74	No	No	CRANIAL & PERIPHERAL NERVE DISORDERS W/O MCC	0.9380	3.6	2.8	1
75	No	No	VIRAL MENINGITIS W CC/MCC	1.1859	4.3	3.5	1
76	No	No	VIRAL MENINGITIS W/O CC/MCC	0.6387	2.9	2.4	1
77	No	No	HYPERTENSIVE ENCEPHALOPATHY W MCC	1.5557	5.5	4.0	1
78	No	No	HYPERTENSIVE ENCEPHALOPATHY W CC	0.9252	2.8	2.4	1
79	No	No	HYPERTENSIVE ENCEPHALOPATHY W/O CC/MCC	1.0987	3.2	2.8	1
80	No	No	NONTRAUMATIC STUPOR & COMA W MCC	1.2587	3.2	2.8	1
81	No	No	NONTRAUMATIC STUPOR & COMA W/O MCC	0.7918	2.7	1.9	1
82	No	No	TRAUMATIC STUPOR & COMA, COMA >1 HR W MCC	2.8355	7.5	4.8	1
83	No	No	TRAUMATIC STUPOR & COMA, COMA >1 HR W CC	1.4891	3.8	2.7	1
84	No	No	TRAUMATIC STUPOR & COMA, COMA >1 HR W/O CC/MCC	0.7787	2.4	1.9	1
85	Yes	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W MCC	2.3770	7.4	5.0	1
86	Yes	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W CC	1.3150	4.2	3.1	1
87	Yes	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W/O CC/MCC	0.7635	2.2	1.8	1
88	No	No	CONCUSSION AGE >17 W MCC	1.8122	3.1	2.2	1
89	No	No	CONCUSSION AGE >17 W CC	1.0514	2.0	1.8	1
90	No	No	CONCUSSION AGE >17 W/O CC/MCC	0.8941	1.5	1.3	1
91	Yes	No	OTHER DISORDERS OF NERVOUS SYSTEM W MCC	1.8320	6.5	3.9	1
92	Yes	No	OTHER DISORDERS OF NERVOUS SYSTEM W CC	0.9635	3.7	2.6	1
93	Yes	No	OTHER DISORDERS OF NERVOUS SYSTEM W/O CC/MCC	0.7885	2.4	2.0	1
94	No	No	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W MCC	4.5099	13.3	9.2	1
95	No	No	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W CC	3.3418	7.3	5.9	1
96	No	No	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W/O CC/MCC	2.2474	5.8	4.5	1
97	No	No	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W MCC	2.8527	9.2	7.9	2
98	No	No	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W CC	2.7084	10.0	6.4	1

Notes: (1) * = low volume DRG with fewer than 10 cases. The Medicare weights are used for these DRGs.
(2) # = PM-DRGs with fewer than 10 cases. An average weight over the past five years were used for these DRGs.
(3) w CC = with Complications or Comorbidities.
(4) w/o CC = without Complications or Comorbidities.

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Chapter 6, Addendum C (FY 2011)

Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2011

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
99	No	No	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W/O CC/MCC	1.1026	4.2	3.3	1
100	Yes	No	SEIZURES AGE >17 W MCC	1.5076	4.6	3.5	1
101	Yes	No	SEIZURES AGE >17 W/O MCC	0.7784	2.9	2.4	1
102	No	No	HEADACHES AGE >17 W MCC	1.3510	5.2	3.6	1
103	No	No	HEADACHES AGE >17 W/O MCC	0.7691	3.1	2.4	1
104	No	No	CRANIOTOMY, VENTRICULAR SHUNT & ENDOVASC INTRACRANIAL PROC AGE 0-17	2.8195	6.4	3.6	1
105	No	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE 0-17	0.4963	1.9	1.5	1
106	No	No	CONCUSSION AGE 0-17	0.5547	1.3	1.2	1
107	No	No	SEIZURES & HEADACHES AGE 0-17	0.5367	2.4	1.9	1
108	No	No	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 0-17	2.2347	9.6	3.8	1
109	No	No	OTHER DISORDERS OF THE EYE AGE 0-17	0.7063	4.0	2.3	1
110	No	No	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES AGE 0-17	0.8043	2.3	1.7	1
111	No	No	SINUS & MASTOID PROCEDURES AGE 0-17	1.6771	6.8	4.2	1
112	No	No	OTITIS MEDIA & URI AGE 0-17	0.3193	2.1	1.8	1
113	No	No	ORBITAL PROCEDURES W CC/MCC	1.9387	3.8	2.8	1
114	No	No	ORBITAL PROCEDURES W/O CC/MCC	1.0342	2.2	1.7	1
115	No	No	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE >17	1.0459	3.6	2.6	1
116	No	No	INTRAOCULAR PROCEDURES W CC/MCC	1.4069*	4.4	3.0	2
117	No	No	INTRAOCULAR PROCEDURES W/O CC/MCC	0.8541	1.7	1.6	1
118	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE 0-17	0.4446	2.4	2.0	1
119	No	No	DENTAL & ORAL DISEASES AGE 0-17	0.5353	2.9	2.3	1
120	No	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE 0-17	1.7403	9.2	6.7	1
121	No	No	ACUTE MAJOR EYE INFECTIONS W CC/MCC	0.9050	4.0	3.1	1
122	No	No	ACUTE MAJOR EYE INFECTIONS W/O CC/MCC	0.5803	3.5	2.9	1
123	No	No	NEUROLOGICAL EYE DISORDERS	0.8563	2.7	2.2	1
124	No	No	OTHER DISORDERS OF THE EYE AGE >17 W MCC	0.8190#	2.1	2.3	2
125	No	No	OTHER DISORDERS OF THE EYE AGE >17 W/O MCC	0.6913	2.7	2.1	1
129	No	No	MAJOR HEAD & NECK PROCEDURES W CC/MCC OR MAJOR DEVICE	1.9658	3.5	2.6	1
130	No	No	MAJOR HEAD & NECK PROCEDURES W/O CC/MCC	1.2951	2.5	2.1	1
131	No	No	CRANIAL/FACIAL PROCEDURES W CC/MCC	2.3984	3.9	2.9	1
132	No	No	CRANIAL/FACIAL PROCEDURES W/O CC/MCC	1.3885	1.6	1.4	1
133	No	No	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES AGE >17 W CC/MCC	1.1496	3.4	2.5	1
134	No	No	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES AGE >17 W/O CC/MCC	0.9424	1.8	1.5	1
135	No	No	SINUS & MASTOID PROCEDURES AGE >17 W CC/MCC	2.1428	7.3	4.7	1
136	No	No	SINUS & MASTOID PROCEDURES AGE >17 W/O CC/MCC	1.1184	2.1	1.8	1
137	No	No	MOUTH PROCEDURES W CC/MCC	1.0520	3.4	3.0	1
138	No	No	MOUTH PROCEDURES W/O CC/MCC	0.7563	2.3	1.8	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
139	No	No	SALIVARY GLAND PROCEDURES	0.8963	1.5	1.4	1
140	No	No	SIMPLE PNEUMONIA & PLEURISY AGE 0-17	0.4672	2.7	2.3	1
141	No	No	BRONCHITIS & ASTHMA AGE 0-17	0.4002	2.4	2.0	1
142	No	No	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE 0-17	2.7449	8.1	3.4	1
143	No	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE 0-17	0.9589	4.1	3.0	1
144	No	No	HERNIA PROCEDURES AGE 0-17	0.6106	2.0	1.5	1
145	No	No	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE 0-17	0.3994	2.5	1.9	1
146	No	No	EAR, NOSE, MOUTH & THROAT MALIGNANCY W MCC	1.3891	6.4	5.3	1
147	No	No	EAR, NOSE, MOUTH & THROAT MALIGNANCY W CC	1.1795	6.0	4.6	1
148	No	No	EAR, NOSE, MOUTH & THROAT MALIGNANCY W/O CC/MCC	0.8953*	3.3	2.4	3
149	No	No	DYSEQUILIBRIUM	0.7057	2.1	1.8	1
150	No	No	EPISTAXIS W MCC	1.4217*	5.0	3.7	2
151	No	No	EPISTAXIS W/O MCC	0.6255	2.3	1.9	1
152	No	No	OTITIS MEDIA & URI AGE >17 W MCC	0.7911	3.8	3.3	1
153	No	No	OTITIS MEDIA & URI AGE >17 W/O MCC	0.5345	2.5	2.1	1
154	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17 W MCC	0.9052	3.9	2.9	1
155	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17 W CC	0.6866	2.7	2.3	1
156	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17 W/O CC/MCC	0.5825	2.3	1.9	1
157	No	No	DENTAL & ORAL DISEASES AGE >17 W MCC	1.9074	6.0	4.3	1
158	No	No	DENTAL & ORAL DISEASES AGE >17 W CC	0.9269	3.6	2.7	1
159	No	No	DENTAL & ORAL DISEASES AGE >17 W/O CC/MCC	0.7379	2.6	2.0	1
160	No	No	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 0-17	0.5575	2.9	1.9	1
161	No	No	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 0-17	1.3546	3.1	2.4	1
162	No	No	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE 0-17	0.9497	1.8	1.5	1
163	Yes	No	MAJOR CHEST PROCEDURES W MCC	4.5039	11.8	9.8	2
164	Yes	No	MAJOR CHEST PROCEDURES W CC	2.3144	6.3	5.3	1
165	Yes	No	MAJOR CHEST PROCEDURES W/O CC/MCC	1.6311	4.1	3.3	1
166	Yes	No	OTHER RESP SYSTEM O.R. PROCEDURES W MCC	3.9375	11.4	8.3	1
167	Yes	No	OTHER RESP SYSTEM O.R. PROCEDURES W CC	2.1237	6.4	5.1	1
168	Yes	No	OTHER RESP SYSTEM O.R. PROCEDURES W/O CC/MCC	1.2841	4.0	3.1	1
169	No	No	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH AGE 0-17	0.4413	1.5	1.3	1
170	No	No	CELLULITIS AGE 0-17	0.4250	2.5	2.1	1
171	No	No	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE 0-17	0.6266	1.7	1.5	1
172	No	No	NUTRITIONAL & MISC METABOLIC DISORDERS AGE 0-17	0.3334	2.5	1.9	1
173	No	No	URETHRAL PROCEDURES AGE 0-17	0.7732#	3.0	2.6	2
174	No	No	KIDNEY & URINARY TRACT INFECTIONS AGE 0-17	0.4411	2.9	2.5	1
175	Yes	No	PULMONARY EMBOLISM W MCC	1.8252	6.6	5.4	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
176	Yes	No	PULMONARY EMBOLISM W/O MCC	0.9862	4.2	3.6	1
177	Yes	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W MCC	2.3630	9.3	7.1	1
178	Yes	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W CC	1.6396	6.8	5.5	1
179	Yes	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W/O CC/MCC	1.1450	5.2	3.8	1
180	No	No	RESPIRATORY NEOPLASMS W MCC	2.1110	7.7	5.7	1
181	No	No	RESPIRATORY NEOPLASMS W CC	1.2831	5.4	4.0	1
182	No	No	RESPIRATORY NEOPLASMS W/O CC/MCC	1.0069	4.2	3.1	1
183	No	No	MAJOR CHEST TRAUMA W MCC	1.5871	5.3	3.9	1
184	No	No	MAJOR CHEST TRAUMA W CC	0.9189	3.3	2.7	1
185	No	No	MAJOR CHEST TRAUMA W/O CC/MCC	0.7393	2.0	1.7	1
186	Yes	No	PLEURAL EFFUSION W MCC	1.5473	6.2	4.5	1
187	Yes	No	PLEURAL EFFUSION W CC	1.1369	4.3	3.3	1
188	Yes	No	PLEURAL EFFUSION W/O CC/MCC	0.8518	3.1	2.5	1
189	No	No	PULMONARY EDEMA & RESPIRATORY FAILURE	1.2201	4.9	3.8	1
190	Yes	No	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	1.2035	5.2	4.1	1
191	Yes	No	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W CC	1.0258	4.3	3.5	1
192	Yes	No	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W/O CC/MCC	0.7596	3.4	2.8	1
193	Yes	No	SIMPLE PNEUMONIA & PLEURISY AGE >17 W MCC	1.5532	6.0	4.9	1
194	Yes	No	SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	0.9976	4.2	3.5	1
195	Yes	No	SIMPLE PNEUMONIA & PLEURISY AGE >17 W/O CC/MCC	0.6650	3.0	2.6	1
196	Yes	No	INTERSTITIAL LUNG DISEASE W MCC	1.6919	7.0	5.6	1
197	Yes	No	INTERSTITIAL LUNG DISEASE W CC	1.1322	4.4	3.7	1
198	Yes	No	INTERSTITIAL LUNG DISEASE W/O CC/MCC	1.0981	4.0	3.2	1
199	No	No	PNEUMOTHORAX W MCC	1.6490	6.1	5.0	1
200	No	No	PNEUMOTHORAX W CC	0.9180	3.8	3.1	1
201	No	No	PNEUMOTHORAX W/O CC/MCC	0.5965	3.1	2.5	1
202	No	No	BRONCHITIS & ASTHMA AGE >17 W CC/MCC	0.8868	4.0	3.1	1
203	No	No	BRONCHITIS & ASTHMA AGE >17 W/O CC/MCC	0.6032	2.8	2.4	1
204	No	No	RESPIRATORY SIGNS & SYMPTOMS	0.6465	2.3	1.8	1
205	Yes	No	OTHER RESPIRATORY SYSTEM DIAGNOSES W MCC	1.2846	4.9	3.4	1
206	Yes	No	OTHER RESPIRATORY SYSTEM DIAGNOSES W/O MCC	0.7694	2.5	1.9	1
207	Yes	No	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT 96+ HOURS	5.9663	14.6	12.6	4
208	No	No	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT <96 HOURS	2.1737	5.7	4.2	1
209	No	No	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE 0-17	0.3291	1.6	1.4	1
210	No	No	URETHRAL STRICTURE AGE 0-17	0.4968#	1.9	1.9	2
211	No	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE 0-17	0.7937	4.2	3.2	1
212	No	No	TESTES PROCEDURES AGE 0-17	0.6958	1.7	1.4	1
213	No	No	SPLENECTOMY AGE 0-17	1.3016	2.9	2.7	1
214	No	No	RED BLOOD CELL DISORDERS AGE 0-17	0.5430	3.5	2.7	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
284	No	No	ACUTE MYOCARDIAL INFARCTION, EXPIRED W CC	0.9866*	3.0	2.1	2
285	No	No	ACUTE MYOCARDIAL INFARCTION, EXPIRED W/O CC/MCC	0.6340*	1.8	1.4	2
286	No	No	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W MCC	2.1289	5.5	4.0	1
287	No	No	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W/O MCC	1.2297	2.3	1.9	1
288	Yes	No	ACUTE & SUBACUTE ENDOCARDITIS W MCC	4.5787	12.9	9.7	1
289	Yes	No	ACUTE & SUBACUTE ENDOCARDITIS W CC	2.0526*	7.8	6.4	4
290	Yes	No	ACUTE & SUBACUTE ENDOCARDITIS W/O CC/MCC	1.4384*	5.6	4.4	4
291	Yes	No	HEART FAILURE & SHOCK W MCC	1.6120	6.0	4.4	1
292	Yes	No	HEART FAILURE & SHOCK W CC	1.0280	4.3	3.5	1
293	Yes	No	HEART FAILURE & SHOCK W/O CC/MCC	0.7101	2.8	2.4	1
294	No	No	DEEP VEIN THROMBOPHLEBITIS W CC/MCC	0.8088	6.0	4.2	1
295	No	No	DEEP VEIN THROMBOPHLEBITIS W/O CC/MCC	0.7107*	4.0	3.4	3
296	No	No	CARDIAC ARREST, UNEXPLAINED W MCC	1.8271	3.6	2.0	1
297	No	No	CARDIAC ARREST, UNEXPLAINED W CC	1.3671	1.8	1.5	1
298	No	No	CARDIAC ARREST, UNEXPLAINED W/O CC/MCC	0.4992*	1.2	1.1	2
299	Yes	No	PERIPHERAL VASCULAR DISORDERS W MCC	1.0973	4.6	3.7	1
300	Yes	No	PERIPHERAL VASCULAR DISORDERS W CC	0.8596	4.0	3.3	1
301	Yes	No	PERIPHERAL VASCULAR DISORDERS W/O CC/MCC	0.6427	3.1	2.5	1
302	No	No	ATHEROSCLEROSIS W MCC	1.0562	3.0	2.3	1
303	No	No	ATHEROSCLEROSIS W/O MCC	0.6357	1.8	1.6	1
304	No	No	HYPERTENSION W MCC	1.1617	4.5	3.4	1
305	No	No	HYPERTENSION W/O MCC	0.6397	2.2	1.8	1
306	No	No	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 W MCC	1.0348	5.0	3.9	1
307	No	No	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 W/O MCC	0.8185	2.7	2.2	1
308	No	No	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W MCC	1.2481	4.7	3.6	1
309	No	No	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	0.7581	2.8	2.2	1
310	No	No	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC/MCC	0.5386	1.9	1.6	1
311	No	No	ANGINA PECTORIS	0.5799	1.7	1.5	1
312	No	No	SYNCOPE & COLLAPSE	0.7602	2.3	1.9	1
313	No	No	CHEST PAIN	0.6174	1.6	1.4	1
314	Yes	No	OTHER CIRCULATORY SYSTEM DIAGNOSES W MCC	2.1470	7.5	5.5	1
315	Yes	No	OTHER CIRCULATORY SYSTEM DIAGNOSES W CC	1.0590	4.2	3.1	1
316	Yes	No	OTHER CIRCULATORY SYSTEM DIAGNOSES W/O CC/MCC	0.5950	2.1	1.8	1
326	Yes	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W MCC	5.6411	14.6	10.3	1
327	Yes	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W CC	2.5650	7.2	5.2	1
328	Yes	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W/O CC/MCC	1.5117	2.9	2.2	1
329	Yes	No	MAJOR SMALL & LARGE BOWEL PROCEDURES W MCC	5.0604	14.0	10.7	2

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
330	Yes	No	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	2.4396	7.9	6.6	2
331	Yes	No	MAJOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	1.6218	4.6	4.1	1
332	Yes	No	RECTAL RESECTION W MCC	7.5368	16.1	12.0	2
333	Yes	No	RECTAL RESECTION W CC	2.2769	6.5	5.7	2
334	Yes	No	RECTAL RESECTION W/O CC/MCC	1.7772	4.5	4.1	1
335	Yes	No	PERITONEAL ADHESIOLYSIS W MCC	3.7531	10.6	8.4	1
336	Yes	No	PERITONEAL ADHESIOLYSIS W CC	2.0781	7.0	5.6	1
337	Yes	No	PERITONEAL ADHESIOLYSIS W/O CC/MCC	1.3784	3.8	3.1	1
338	No	No	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W MCC	2.8156	8.1	6.7	1
339	No	No	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W CC	1.9565	6.7	5.6	1
340	No	No	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W/O CC/MCC	1.2818	3.5	3.0	1
341	No	No	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W MCC	1.6428	3.6	2.8	1
342	No	No	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W CC	1.2897	2.8	2.2	1
343	No	No	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W/O CC/MCC	0.9932	1.6	1.4	1
344	No	No	MINOR SMALL & LARGE BOWEL PROCEDURES W MCC	2.8989	9.8	7.8	2
345	No	No	MINOR SMALL & LARGE BOWEL PROCEDURES W CC	1.4233	5.8	4.9	1
346	No	No	MINOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	1.1414	4.3	3.8	1
347	No	No	ANAL & STOMAL PROCEDURES W MCC	1.7875	6.1	4.7	1
348	No	No	ANAL & STOMAL PROCEDURES W CC	1.2010	4.0	3.0	1
349	No	No	ANAL & STOMAL PROCEDURES W/O CC/MCC	0.8099	2.6	2.1	1
350	No	No	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W MCC	1.8753#	4.4	3.8	2
351	No	No	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W CC	1.5769	3.5	2.7	1
352	No	No	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W/O CC/MCC	1.0882	2.0	1.7	1
353	No	No	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W MCC	3.1851	7.9	5.6	1
354	No	No	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W CC	1.5813	4.1	3.4	1
355	No	No	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W/O CC/MCC	1.2460	2.6	2.2	1
356	Yes	No	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W MCC	3.6168	11.1	8.3	1
357	Yes	No	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W CC	2.0852	6.3	4.8	1
358	Yes	No	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC	1.3122	3.5	2.9	1
368	No	No	MAJOR ESOPHAGEAL DISORDERS W MCC	2.0320	5.6	4.0	1
369	No	No	MAJOR ESOPHAGEAL DISORDERS W CC	0.7935	3.2	2.6	1
370	No	No	MAJOR ESOPHAGEAL DISORDERS W/O CC/MCC	0.5991	2.2	1.9	1
371	Yes	No	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W MCC	2.2263	8.0	6.3	1
372	Yes	No	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W CC	1.1336	5.3	4.2	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
461	No	No	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W MCC	5.4817*	8.2	6.7	3
462	No	No	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W/O MCC	3.3359	4.0	3.8	1
463	Yes	No	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W MCC	7.1312	20.8	13.6	2
464	Yes	No	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W CC	3.4541	8.7	6.6	1
465	Yes	No	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W/O CC/MCC	1.9088	4.3	3.4	1
466	Yes	No	REVISION OF HIP OR KNEE REPLACEMENT W MCC	5.4345	8.8	6.9	1
467	Yes	No	REVISION OF HIP OR KNEE REPLACEMENT W CC	3.0888	4.0	3.6	1
468	Yes	No	REVISION OF HIP OR KNEE REPLACEMENT W/O CC/MCC	2.5388	3.2	2.9	1
469	Yes	No	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W MCC	3.1526	6.1	5.2	1
470	Yes	No	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	2.1474	3.1	2.9	1
471	No	No	CERVICAL SPINAL FUSION W MCC	4.0914	6.0	4.1	1
472	No	No	CERVICAL SPINAL FUSION W CC	2.6255	2.3	1.7	1
473	No	No	CERVICAL SPINAL FUSION W/O CC/MCC	2.0714	1.3	1.2	1
474	Yes	No	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W MCC	3.9748	13.8	11.1	2
475	Yes	No	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W CC	1.8618	7.1	5.5	1
476	Yes	No	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W/O CC/MCC	1.1273	2.9	2.2	1
477	Yes	Yes	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC	4.2174	16.5	10.6	1
478	Yes	Yes	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC	2.5175	6.9	4.9	1
479	Yes	Yes	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC	1.7830	3.7	2.6	1
480	Yes	Yes	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W MCC	3.3865	7.2	5.9	1
481	Yes	Yes	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W CC	2.2378	5.3	4.6	1
482	Yes	Yes	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W/O CC/MCC	1.5555	3.2	2.6	1
483	Yes	No	MAJOR JOINT & LIMB REATTACHMENT PROC OF UPPER EXTREMITY W CC/MCC	2.7277	3.0	2.5	1
484	Yes	No	MAJOR JOINT & LIMB REATTACHMENT PROC OF UPPER EXTREMITY W/O CC/MCC	1.9641	1.9	1.7	1
485	No	No	KNEE PROCEDURES W PDX OF INFECTION W MCC	2.6631	8.2	7.3	2
486	No	No	KNEE PROCEDURES W PDX OF INFECTION W CC	2.3673	7.3	5.9	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
487	No	No	KNEE PROCEDURES W PDX OF INFECTION W/O CC/MCC	1.2637	4.2	3.8	1
488	Yes	No	KNEE PROCEDURES W/O PDX OF INFECTION W CC/MCC	1.4872	3.1	2.8	1
489	Yes	No	KNEE PROCEDURES W/O PDX OF INFECTION W/O CC/MCC	1.2966	2.1	1.8	1
490	No	No	BACK & NECK PROC EXC SPINAL FUSION W CC/MCC OR DISC DEVICE/NEUROSTIM	2.0928	3.1	2.2	1
491	No	No	BACK & NECK PROC EXC SPINAL FUSION W/O CC/MCC	1.1762	1.5	1.3	1
492	Yes	Yes	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W MCC	3.7089	8.5	6.5	1
493	Yes	Yes	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W CC	2.1035	4.3	3.5	1
494	Yes	Yes	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W/O CC/MCC	1.4121	2.6	2.2	1
495	Yes	Yes	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W MCC	3.8876	9.8	5.2	1
496	Yes	Yes	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W CC	1.5981	4.0	3.1	1
497	Yes	Yes	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W/O CC/MCC	1.1749	2.1	1.6	1
498	No	No	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W CC/MCC	1.9931	4.8	3.5	1
499	No	No	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W/O CC/MCC	0.9457	2.0	1.6	1
500	Yes	Yes	SOFT TISSUE PROCEDURES W MCC	3.1836	8.6	6.2	1
501	Yes	Yes	SOFT TISSUE PROCEDURES W CC	1.3571	4.3	3.2	1
502	Yes	Yes	SOFT TISSUE PROCEDURES W/O CC/MCC	1.1277	2.3	1.9	1
503	No	No	FOOT PROCEDURES W MCC	2.5318*	8.5	6.5	2
504	No	No	FOOT PROCEDURES W CC	1.8619	4.3	3.6	1
505	No	No	FOOT PROCEDURES W/O CC/MCC	1.2984	2.5	2.0	1
506	No	No	MAJOR THUMB OR JOINT PROCEDURES	1.1377	2.4	2.0	1
507	No	No	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W CC/MCC	1.3731	3.6	3.3	1
508	No	No	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W/O CC/MCC	1.3648	2.0	1.6	1
509	No	No	ARTHROSCOPY	1.4594*	3.5	2.3	1
510	Yes	No	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W MCC	2.4005	4.8	3.9	1
511	Yes	No	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W CC	1.6780	2.6	2.2	1
512	Yes	No	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W/O CC/MCC	1.1713	1.7	1.5	1
513	No	No	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W CC/MCC	1.0886	2.7	2.1	1
514	No	No	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W/O CC/MCC	0.9068	2.3	1.8	1
515	Yes	Yes	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W MCC	3.2624	8.7	5.1	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
516	Yes	Yes	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W CC	2.3921	5.4	4.0	1
517	Yes	Yes	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W/O CC/MCC	1.5681	2.7	2.2	1
533	Yes	No	FRACTURES OF FEMUR W MCC	1.7379*	6.5	4.9	2
534	Yes	No	FRACTURES OF FEMUR W/O MCC	0.5409	1.9	1.6	1
535	Yes	No	FRACTURES OF HIP & PELVIS W MCC	0.9346	3.9	3.1	1
536	Yes	No	FRACTURES OF HIP & PELVIS W/O MCC	0.6984	2.9	2.4	1
537	No	No	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH W CC/MCC	0.9185*	4.1	3.5	1
538	No	No	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH W/O CC/MCC	0.7157	2.0	1.6	1
539	Yes	No	OSTEOMYELITIS W MCC	2.0049	8.6	7.4	2
540	Yes	No	OSTEOMYELITIS W CC	1.4770	7.0	5.1	1
541	Yes	No	OSTEOMYELITIS W/O CC/MCC	0.7539	4.0	3.2	1
542	Yes	No	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W MCC	3.5084	12.1	8.2	1
543	Yes	No	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W CC	1.4344	6.0	4.3	1
544	Yes	No	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W/O CC/MCC	0.9903	3.7	2.9	1
545	Yes	No	CONNECTIVE TISSUE DISORDERS W MCC	3.7800	11.2	6.8	1
546	Yes	No	CONNECTIVE TISSUE DISORDERS W CC	1.2652	4.9	3.8	1
547	Yes	No	CONNECTIVE TISSUE DISORDERS W/O CC/MCC	0.8528	3.3	2.5	1
548	No	No	SEPTIC ARTHRITIS W MCC	2.1809*	8.8	6.7	3
549	No	No	SEPTIC ARTHRITIS W CC	0.9696	4.8	4.0	1
550	No	No	SEPTIC ARTHRITIS W/O CC/MCC	0.6160	3.7	3.2	1
551	Yes	No	MEDICAL BACK PROBLEMS W MCC	1.6331	5.4	3.9	1
552	Yes	No	MEDICAL BACK PROBLEMS W/O MCC	0.7354	2.8	2.3	1
553	No	No	BONE DISEASES & ARTHROPATHIES W MCC	1.2604*	5.5	4.3	3
554	No	No	BONE DISEASES & ARTHROPATHIES W/O MCC	0.7529	2.9	2.4	1
555	No	No	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE W MCC	0.8099	3.1	2.5	1
556	No	No	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE W/O MCC	0.6979	2.7	2.0	1
557	Yes	No	TENDONITIS, MYOSITIS & BURSITIS W MCC	1.1567	5.7	4.3	1
558	Yes	No	TENDONITIS, MYOSITIS & BURSITIS W/O MCC	0.6780	3.3	2.6	1
559	Yes	No	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC	1.5719	5.8	4.1	1
560	Yes	No	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC	0.6897	3.6	2.6	1
561	Yes	No	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC	0.6111	2.0	1.6	1
562	Yes	No	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH AGE >17 W MCC	1.6984	6.0	4.1	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
563	Yes	No	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH AGE >17 W/O MCC	0.7768	2.6	2.0	1
564	No	No	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W MCC	2.4093	7.7	4.3	1
565	No	No	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W CC	0.9419	3.4	2.6	1
566	No	No	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W/O CC/MCC	0.5162	2.0	1.7	1
573	Yes	No	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W MCC	2.7862	11.4	8.4	1
574	Yes	No	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W CC	1.8453	7.7	5.9	1
575	Yes	No	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W/O CC/MCC	1.0051	4.1	3.4	1
576	No	No	SKIN GRAFT &/OR DEBRID EXC FOR SKIN ULCER OR CELLULITIS W MCC	4.3565*	13.0	9.1	2
577	No	No	SKIN GRAFT &/OR DEBRID EXC FOR SKIN ULCER OR CELLULITIS W CC	2.3029	6.4	4.7	1
578	No	No	SKIN GRAFT &/OR DEBRID EXC FOR SKIN ULCER OR CELLULITIS W/O CC/MCC	1.4190	2.8	2.1	1
579	Yes	No	OTHER SKIN, SUBCUT TISS & BREAST PROC W MCC	2.5010	8.4	6.3	1
580	Yes	No	OTHER SKIN, SUBCUT TISS & BREAST PROC W CC	1.5354	3.8	2.7	1
581	Yes	No	OTHER SKIN, SUBCUT TISS & BREAST PROC W/O CC/MCC	1.3973	2.3	1.9	1
582	No	No	MASTECTOMY FOR MALIGNANCY W CC/MCC	1.7358	2.3	1.9	1
583	No	No	MASTECTOMY FOR MALIGNANCY W/O CC/MCC	1.6393	1.9	1.7	1
584	No	No	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W CC/MCC	1.8496	3.4	2.5	1
585	No	No	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W/O CC/MCC	1.5306	2.2	1.8	1
592	Yes	No	SKIN ULCERS W MCC	1.1412	5.2	4.2	1
593	Yes	No	SKIN ULCERS W CC	0.9183	5.3	4.4	1
594	Yes	No	SKIN ULCERS W/O CC/MCC	0.7913	3.5	3.0	1
595	No	No	MAJOR SKIN DISORDERS W MCC	2.0746*	7.8	5.9	3
596	No	No	MAJOR SKIN DISORDERS W/O MCC	0.7335	4.0	3.0	1
597	No	No	MALIGNANT BREAST DISORDERS W MCC	1.3925	7.9	6.4	1
598	No	No	MALIGNANT BREAST DISORDERS W CC	0.8670	4.7	3.4	1
599	No	No	MALIGNANT BREAST DISORDERS W/O CC/MCC	0.6954*	3.2	2.5	3
600	No	No	NON-MALIGNANT BREAST DISORDERS W CC/MCC	0.8828	4.2	3.5	1
601	No	No	NON-MALIGNANT BREAST DISORDERS W/O CC/MCC	0.5032	2.9	2.5	1
602	No	No	CELLULITIS AGE >17 W MCC	1.3114	6.0	4.8	1
603	No	No	CELLULITIS AGE >17 W/O MCC	0.6995	3.7	3.1	1
604	No	No	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE >17 W MCC	1.1712	3.7	2.7	1
605	No	No	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE >17 W/O MCC	0.8092	1.9	1.5	1
606	No	No	MINOR SKIN DISORDERS W MCC	1.4776	6.5	3.9	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
607	No	No	MINOR SKIN DISORDERS W/O MCC	0.4558	2.8	2.3	1
608	No	No	BPD & OTH CHRONIC RESPIRATORY DISEASES ARISING IN PERINATAL PERIOD	1.5275#	11.2	9.0	5
609	No	No	OTHER RESPIRATORY PROBLEMS AFTER BIRTH	0.9060#	6.0	4.5	3
610	No	No	NEONATE, DIED W/IN ONE DAY OF BIRTH	0.1962	1.0	1.0	1
611	No	No	NEONATE, TRANSFERRED <5 DAYS OLD	0.2588	1.2	1.1	1
612	No	No	NEONATE, BIRTHWT <750G, DISCHARGED ALIVE	27.9016	95.8	78.3	16
613	No	No	NEONATE, BIRTHWT <750G, DIED	4.2947	9.7	3.3	1
614	No	No	ADRENAL & PITUITARY PROCEDURES W CC/MCC	2.0767	4.3	3.6	1
615	No	No	ADRENAL & PITUITARY PROCEDURES W/O CC/MCC	1.5796	2.8	2.5	1
616	Yes	No	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W MCC	4.9877*	15.6	12.4	4
617	Yes	No	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W CC	2.2303	7.0	6.0	2
618	Yes	No	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W/O CC/MCC	1.3327*	5.1	4.1	4
619	No	No	O.R. PROCEDURES FOR OBESITY W MCC	3.4812	4.8	3.8	1
620	No	No	O.R. PROCEDURES FOR OBESITY W CC	2.1568	2.8	2.3	1
621	No	No	O.R. PROCEDURES FOR OBESITY W/O CC/MCC	1.7503	1.7	1.5	1
622	Yes	No	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W MCC	3.7924*	12.5	9.4	4
623	Yes	No	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W CC	1.6711	6.0	5.2	1
624	Yes	No	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W/O CC/MCC	1.1235*	4.7	3.8	4
625	No	No	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W MCC	2.5604	6.5	4.8	1
626	No	No	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W CC	1.2444	2.0	1.7	1
627	No	No	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W/O CC/MCC	0.9802	1.4	1.2	1
628	Yes	No	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W MCC	5.3336	11.9	7.0	1
629	Yes	No	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W CC	1.9506	7.0	5.6	1
630	Yes	No	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W/O CC/MCC	1.7619	3.3	2.5	1
631	No	No	NEONATE, BIRTHWT 750-999G, DISCHARGED ALIVE	16.6234	74.3	66.6	23
632	No	No	NEONATE, BIRTHWT 750-999G, DIED	6.9116#	16.0	12.1	9
633	No	No	NEONATE, BIRTHWT 1000-1499G, W SIGNIF O.R. PROC, DISCHARGED ALIVE	18.0062	79.1	73.8	35
634	No	No	NEONATE, BIRTHWT 1000-1499G, W/O SIGNIF O.R. PROC, DISCHARGED ALIVE	7.9711	42.3	37.6	13
635	No	No	NEONATE, BIRTHWT 1000-1499G, DIED	5.5977	11.6	4.6	1
636	No	No	NEONATE, BIRTHWT 1500-1999G, W SIGNIF O.R. PROC, W MULT MAJOR PROB	14.4921	51.4	39.7	8
637	Yes	No	DIABETES W MCC	1.6803	6.2	4.4	1
638	Yes	No	DIABETES W CC	0.7471	3.4	2.7	1

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639	Yes	No	DIABETES W/O CC/MCC	0.4802	2.3	2.0	1
640	Yes	No	NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W MCC	1.1553	4.7	3.4	1
641	Yes	No	NUTRITIONAL & MISC METABOLIC DISORDERS AGE >17 W/O MCC	0.6244	2.9	2.3	1
642	No	No	INBORN ERRORS OF METABOLISM	0.9953	3.9	2.7	1
643	Yes	No	ENDOCRINE DISORDERS W MCC	1.6949	6.2	4.7	1
644	Yes	No	ENDOCRINE DISORDERS W CC	0.9404	4.1	3.1	1
645	Yes	No	ENDOCRINE DISORDERS W/O CC/MCC	0.5704	2.4	2.0	1
646	No	No	NEONATE, BIRTHWT 1500-1999G, W SIGNIF O.R. PROC, W/O MULT MAJOR PROB	5.0203#	26.7	23.6	13
647	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W MULT MAJOR PROB	5.8576	27.7	23.0	5
648	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W MAJOR PROB	3.6052	21.8	19.0	6
649	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W MINOR PROB	1.7482	16.5	14.2	4
650	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W OTHER PROB	1.9593	14.3	11.0	2
651	No	No	NEONATE, BIRTHWT 2000-2499G, W SIGNIF O.R. PROC, W MULT MAJOR PROB	6.6692	29.4	25.1	8
652	No	No	KIDNEY TRANSPLANT	3.0197	5.9	5.4	2
653	Yes	No	MAJOR BLADDER PROCEDURES W MCC	5.3633	13.5	11.5	3
654	Yes	No	MAJOR BLADDER PROCEDURES W CC	2.6525	7.8	6.7	2
655	Yes	No	MAJOR BLADDER PROCEDURES W/O CC/MCC	1.6319	4.5	3.7	1
656	No	No	KIDNEY & URETER PROCEDURES FOR NEOPLASM W MCC	3.7968	8.8	6.7	1
657	No	No	KIDNEY & URETER PROCEDURES FOR NEOPLASM W CC	2.1092	4.7	4.2	1
658	No	No	KIDNEY & URETER PROCEDURES FOR NEOPLASM W/O CC/MCC	1.5461	3.2	2.8	1
659	Yes	No	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W MCC	2.8432	9.1	6.7	1
660	Yes	No	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W CC	1.5936	3.9	3.0	1
661	Yes	No	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W/O CC/MCC	1.2810	2.2	1.9	1
662	No	No	MINOR BLADDER PROCEDURES W MCC	3.3475*	10.7	7.5	2
663	No	No	MINOR BLADDER PROCEDURES W CC	0.8818	2.5	2.1	1
664	No	No	MINOR BLADDER PROCEDURES W/O CC/MCC	1.1477	1.6	1.4	1
665	No	No	PROSTATECTOMY W MCC	3.1805*	11.3	8.7	3
666	No	No	PROSTATECTOMY W CC	1.8248*	6.4	4.5	3
667	No	No	PROSTATECTOMY W/O CC/MCC	0.8546	1.7	1.5	1
668	No	No	TRANSURETHRAL PROCEDURES W MCC	2.1447	6.0	4.3	1
669	No	No	TRANSURETHRAL PROCEDURES W CC	1.1283	2.5	2.0	1
670	No	No	TRANSURETHRAL PROCEDURES W/O CC/MCC	0.8618	1.7	1.5	1
671	No	No	URETHRAL PROCEDURES AGE >17 W CC/MCC	1.2872#	3.3	3.1	2
672	No	No	URETHRAL PROCEDURES AGE >17 W/O CC/MCC	0.8452	1.7	1.4	1
673	No	No	OTHER KIDNEY & URINARY TRACT PROCEDURES W MCC	3.5976	9.9	5.4	1

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Chapter 6, Addendum C (FY 2011)

Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2011

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
674	No	No	OTHER KIDNEY & URINARY TRACT PROCEDURES W CC	2.1493	6.1	4.1	1
675	No	No	OTHER KIDNEY & URINARY TRACT PROCEDURES W/O CC/MCC	1.5745	1.9	1.4	1
676	No	No	NEONATE, BIRTHWT 2000-2499G, W SIGNIF O.R. PROC, W/O MULT MAJOR PROB	4.0160#	20.5	17.6	11
677	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W MULT MAJOR PROB	3.5567	17.0	13.3	3
678	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W MAJOR PROB	1.9885	12.2	10.4	3
679	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W MINOR PROB	1.4745	10.5	8.0	1
680	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W OTHER PROB	0.9344	7.0	5.1	1
681	No	No	NEONATE, BIRTHWT >2499G, W SIGNIF O.R. PROC, W MULT MAJOR PROB	8.9744	30.8	20.5	3
682	Yes	No	RENAL FAILURE W MCC	1.8341	6.7	4.8	1
683	Yes	No	RENAL FAILURE W CC	0.9848	4.3	3.4	1
684	Yes	No	RENAL FAILURE W/O CC/MCC	0.6645	2.8	2.3	1
685	No	No	ADMIT FOR RENAL DIALYSIS	0.8841	3.6	2.8	1
686	No	No	KIDNEY & URINARY TRACT NEOPLASMS W MCC	2.3763	8.6	6.5	1
687	No	No	KIDNEY & URINARY TRACT NEOPLASMS W CC	0.9439	3.3	2.8	1
688	No	No	KIDNEY & URINARY TRACT NEOPLASMS W/O CC/MCC	0.6350	2.3	1.8	1
689	Yes	No	KIDNEY & URINARY TRACT INFECTIONS AGE >17 W MCC	1.1646	5.1	4.0	1
690	Yes	No	KIDNEY & URINARY TRACT INFECTIONS AGE >17 W/O MCC	0.7020	3.2	2.6	1
691	No	No	URINARY STONES W ESW LITHOTRIPSY W CC/MCC	1.1964	2.5	2.0	1
692	No	No	URINARY STONES W ESW LITHOTRIPSY W/O CC/MCC	1.1111	1.8	1.5	1
693	No	No	URINARY STONES W/O ESW LITHOTRIPSY W MCC	1.1523	3.4	2.9	1
694	No	No	URINARY STONES W/O ESW LITHOTRIPSY W/O MCC	0.6611	1.9	1.6	1
695	No	No	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 W MCC	0.8884#	3.2	3.2	2
696	No	No	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 W/O MCC	0.7496	3.2	2.4	1
697	No	No	URETHRAL STRICTURE AGE >17	0.6383	2.3	1.8	1
698	Yes	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W MCC	1.7733	7.1	4.9	1
699	Yes	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W CC	1.0091	4.1	3.2	1
700	Yes	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W/O CC/MCC	0.7272	2.5	2.0	1
707	No	No	MAJOR MALE PELVIC PROCEDURES W CC/MCC	1.9848	3.1	2.5	1
708	No	No	MAJOR MALE PELVIC PROCEDURES W/O CC/MCC	1.5846	1.6	1.4	1
709	No	No	PENIS PROCEDURES W CC/MCC	1.2562	2.8	1.9	1
710	No	No	PENIS PROCEDURES W/O CC/MCC	1.3823	1.7	1.4	1
711	No	No	TESTES PROCEDURES AGE >17 W CC/MCC	1.9352	4.9	4.1	1
712	No	No	TESTES PROCEDURES AGE >17 W/O CC/MCC	0.8316	1.5	1.3	1
713	No	No	TRANSURETHRAL PROSTATECTOMY W CC/MCC	1.0232	2.8	2.1	1

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Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2011

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
714	No	No	TRANSURETHRAL PROSTATECTOMY W/O CC/MCC	0.7768	1.5	1.4	1
715	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W CC/MCC	1.9351*	6.0	4.1	1
716	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W/O CC/MCC	1.2906	1.6	1.4	1
717	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W CC/MCC	1.7913*	6.4	4.6	3
718	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W/O CC/MCC	0.8929*	2.6	2.0	3
722	No	No	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W MCC	1.8749*	7.7	5.4	3
723	No	No	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W CC	1.1311*	5.1	3.9	3
724	No	No	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.6894*	2.7	2.1	3
725	No	No	BENIGN PROSTATIC HYPERTROPHY W MCC	1.4144*	6.1	4.7	2
726	No	No	BENIGN PROSTATIC HYPERTROPHY W/O MCC	0.4548	2.4	2.0	1
727	No	No	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM W MCC	1.3444	7.7	4.9	1
728	No	No	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM W/O MCC	0.5737	2.8	2.4	1
729	No	No	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES W CC/MCC	0.7462	2.4	2.2	1
730	No	No	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES W/O CC/MCC	0.7120*	2.9	2.3	2
734	No	No	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W CC/MCC	2.1364	4.8	3.9	1
735	No	No	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W/O CC/MCC	1.4709	2.2	1.9	1
736	No	No	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W MCC	4.5892	14.2	11.3	2
737	No	No	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W CC	1.9881	6.0	5.0	1
738	No	No	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W/O CC/MCC	1.3593	3.1	2.7	1
739	No	No	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W MCC	2.8145	6.3	5.3	1
740	No	No	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W CC	1.6058	4.0	3.3	1
741	No	No	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W/O CC/MCC	1.1834	2.0	1.8	1
742	No	No	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC/MCC	1.3875	3.1	2.6	1
743	No	No	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC/MCC	1.0680	1.9	1.7	1
744	No	No	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W CC/MCC	1.0852	3.0	2.1	1
745	No	No	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W/O CC/MCC	1.0248	2.0	1.6	1
746	No	No	VAGINA, CERVIX & VULVA PROCEDURES W CC/MCC	1.2458	3.3	2.5	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
827	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W CC	2.3412	7.1	5.6	1
828	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W/O CC/MCC	2.0113	4.4	3.1	1
829	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R. PROC W CC/MCC	2.9785	10.0	6.4	1
830	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R. PROC W/O CC/MCC	1.3471	3.7	3.0	1
834	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17 W MCC	8.2002	25.0	16.7	2
835	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17 W CC	4.9904	19.5	11.5	1
836	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17 W/O CC/MCC	1.9859	7.8	3.9	1
837	No	No	CHEMO W ACUTE LEUKEMIA AS SDX OR W HIGH DOSE CHEMO AGENT W MCC	6.2365	22.4	16.4	3
838	No	No	CHEMO W ACUTE LEUKEMIA AS SDX W CC OR HIGH DOSE CHEMO AGENT	2.8065	10.2	6.8	1
839	No	No	CHEMO W ACUTE LEUKEMIA AS SDX W/O CC/MCC	1.1596	5.3	4.3	1
840	Yes	No	LYMPHOMA & NON-ACUTE LEUKEMIA W MCC	4.6953	14.7	10.1	1
841	Yes	No	LYMPHOMA & NON-ACUTE LEUKEMIA W CC	1.9900	6.7	4.7	1
842	Yes	No	LYMPHOMA & NON-ACUTE LEUKEMIA W/O CC/MCC	1.2723	4.2	2.8	1
843	No	No	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W MCC	2.4031	8.2	6.3	1
844	No	No	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W CC	1.3085	5.5	3.8	1
845	No	No	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W/O CC/MCC	0.8724	3.9	3.0	1
846	No	No	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W MCC	3.1127	9.7	6.7	1
847	No	No	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W CC	1.0674	3.7	3.1	1
848	No	No	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W/O CC/MCC	1.1092	3.5	2.8	1
849	No	No	RADIOTHERAPY	0.9861	5.1	2.7	1
853	Yes	No	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W MCC	6.5981	15.8	12.2	2
854	Yes	No	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W CC	2.5605	8.2	6.9	2
855	Yes	No	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W/O CC/MCC	1.3892	4.7	3.9	1
856	Yes	No	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W MCC	5.0426	14.1	9.4	1
857	Yes	No	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W CC	1.8205	6.4	4.7	1
858	Yes	No	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W/O CC/MCC	1.2496	4.4	3.6	1
862	Yes	No	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS W MCC	1.5725	6.2	4.8	1
863	Yes	No	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS W/O MCC	0.8251	3.9	3.2	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
864	No	No	FEVER AGE >17	0.8306	3.3	2.6	1
865	No	No	VIRAL ILLNESS AGE >17 W MCC	2.0599	5.5	4.1	1
866	No	No	VIRAL ILLNESS AGE >17 W/O MCC	0.7309	3.1	2.5	1
867	Yes	No	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W MCC	2.5722	8.3	6.3	1
868	Yes	No	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W CC	0.8620	3.8	3.3	1
869	Yes	No	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W/O CC/MCC	0.8912	3.5	2.9	1
870	Yes	No	SEPTICEMIA OR SEVERE SEPSIS W MV 96+ HOURS AGE >17	7.0338	15.2	13.2	4
871	Yes	No	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS AGE >17 W MCC	2.1547	6.7	5.0	1
872	Yes	No	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS AGE >17 W/O MCC	1.0672	4.5	3.7	1
876	No	No	O.R. PROCEDURE W PRINCIPAL DIAGNOSES OF MENTAL ILLNESS	3.1239*	12.7	8.1	5
880	No	No	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	0.6997	3.2	2.2	1
881	No	No	DEPRESSIVE NEUROSES	0.3570	4.0	3.0	1
882	No	No	NEUROSES EXCEPT DEPRESSIVE	0.3894	4.2	2.9	1
883	No	No	DISORDERS OF PERSONALITY & IMPULSE CONTROL	1.0887	11.5	6.1	1
884	Yes	No	ORGANIC DISTURBANCES & MENTAL RETARDATION	0.9649	7.8	3.4	1
885	No	No	PSYCHOSES	0.6334	7.0	5.1	1
886	No	No	BEHAVIORAL & DEVELOPMENTAL DISORDERS	0.7596	11.1	7.6	1
887	No	No	OTHER MENTAL DISORDER DIAGNOSES	1.2462	14.5	6.6	1
894	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AMA	0.3874	4.1	2.3	1
895	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W REHABILITATION THERAPY	0.7557	16.0	12.5	2
896	Yes	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W MCC	1.5404	5.8	4.4	1
898	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY AGE >21 W/O MCC	0.4312	5.1	3.6	1
899	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY AGE <=21 W/O MCC	0.2981	5.8	3.8	1
901	No	No	WOUND DEBRIDEMENTS FOR INJURIES W MCC	5.1987	21.1	13.2	1
902	No	No	WOUND DEBRIDEMENTS FOR INJURIES W CC	1.6457	5.9	4.2	1
903	No	No	WOUND DEBRIDEMENTS FOR INJURIES W/O CC/MCC	1.2182	4.2	2.9	1
904	No	No	SKIN GRAFTS FOR INJURIES W CC/MCC	4.8632	14.7	7.1	1
905	No	No	SKIN GRAFTS FOR INJURIES W/O CC/MCC	1.2334	4.3	2.9	1
906	No	No	HAND PROCEDURES FOR INJURIES	1.2243	2.8	2.2	1
907	Yes	No	OTHER O.R. PROCEDURES FOR INJURIES W MCC	4.8845	11.8	8.0	1
908	Yes	No	OTHER O.R. PROCEDURES FOR INJURIES W CC	1.9817	5.8	4.0	1
909	Yes	No	OTHER O.R. PROCEDURES FOR INJURIES W/O CC/MCC	1.1736	2.6	2.1	1
913	No	No	TRAUMATIC INJURY AGE >17 W MCC	1.2178#	4.0	3.5	2
914	No	No	TRAUMATIC INJURY AGE >17 W/O MCC	0.7616	2.0	1.7	1

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(3) w CC = with Complications or Comorbidities.
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Chapter 6

Addendum C (FY 2012)

Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

Effective for admissions on or after October 1, 2011. The second column labeled "PAC XFER" indicates whether the DRG is subject to the post acute care transfer policy. The third column labeled "PAC PAY" indicates whether the DRG is subject to the post acute care special payment provision.

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
1	No	No	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W MCC	23.8227	35.5	26.2	5
2	No	No	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W/O MCC	14.1653	22.7	21.0	9
3	Yes	No	ECMO OR TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	17.7953	35.7	27.1	6
4	Yes	No	TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	12.7083	31.2	24.3	6
5	No	No	LIVER TRANSPLANT W MCC OR INTESTINAL TRANSPLANT	9.8649	18.9	14.2	3
6	No	No	LIVER TRANSPLANT W/O MCC	5.2323	7.9	7.4	3
7	No	No	LUNG TRANSPLANT	11.9422	19.1	16.3	5
8	No	No	SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT	5.6805*	12.0	10.1	3
10	No	No	PANCREAS TRANSPLANT	4.3179*	9.9	8.5	2
11	No	No	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W MCC	5.4244	16.2	13.4	4
12	No	No	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W CC	2.6479	8.7	7.1	1
13	No	No	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W/O CC/MCC	2.1009	6.9	5.8	1
14	No	No	ALLOGENEIC BONE MARROW TRANSPLANT	11.8322	33.7	28.8	10
16	No	No	AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC	5.5424	19.6	17.7	6
17	No	No	AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC	4.1768	13.5	8.9	1
20	No	No	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W MCC	10.1552	16.7	13.7	3
21	No	No	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W CC	6.5743	15.9	14.5	5
22	No	No	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W/O CC/MCC	6.7975	13.0	10.9	2

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(2) # = PM-DRGs with fewer than 10 cases. An average weight over the past five years were used for these DRGs.
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Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
23	Yes	No	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W MCC OR CHEMO IMPLANT	6.2999	11.3	7.3	1
24	Yes	No	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W/O MCC	3.7964	6.8	4.3	1
25	Yes	No	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES AGE >17 W MCC	4.7974	9.8	7.2	1
26	Yes	No	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES AGE >17 W CC	3.2495	6.2	4.7	1
27	Yes	No	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES AGE >17 W/O CC/MCC	2.4323	3.4	2.7	1
28	Yes	Yes	SPINAL PROCEDURES W MCC	5.3179	12.5	9.5	2
29	Yes	Yes	SPINAL PROCEDURES W CC OR SPINAL NEUROSTIMULATORS	2.9689	5.3	3.9	1
30	Yes	Yes	SPINAL PROCEDURES W/O CC/MCC	1.9508	3.2	2.5	1
31	Yes	No	VENTRICULAR SHUNT PROCEDURES AGE >17 W MCC	3.8322	14.2	7.4	1
32	Yes	No	VENTRICULAR SHUNT PROCEDURES AGE >17 W CC	1.6015	3.7	2.8	1
33	Yes	No	VENTRICULAR SHUNT PROCEDURES AGE >17 W/O CC/MCC	1.5260	2.6	1.9	1
34	No	No	CAROTID ARTERY STENT PROCEDURE W MCC	3.8853*	6.9	4.5	1
35	No	No	CAROTID ARTERY STENT PROCEDURE W CC	2.6219	3.6	2.2	1
36	No	No	CAROTID ARTERY STENT PROCEDURE W/O CC/MCC	2.0807	1.4	1.2	1
37	No	No	EXTRACRANIAL PROCEDURES W MCC	4.2306	9.5	6.7	1
38	No	No	EXTRACRANIAL PROCEDURES W CC	2.1466	3.8	2.7	1
39	No	No	EXTRACRANIAL PROCEDURES W/O CC/MCC	1.3347	1.6	1.3	1
40	Yes	Yes	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W MCC	3.2505	10.1	6.6	1
41	Yes	Yes	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W CC OR PERIPH NEUROSTIM	1.8436	5.0	3.5	1
42	Yes	Yes	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W/O CC/MCC	1.9560	3.1	2.0	1
52	No	No	SPINAL DISORDERS & INJURIES W CC/MCC	3.0387	14.0	5.6	1
53	No	No	SPINAL DISORDERS & INJURIES W/O CC/MCC	0.9309	2.8	2.3	1
54	Yes	No	NERVOUS SYSTEM NEOPLASMS W MCC	1.2746	5.2	3.4	1
55	Yes	No	NERVOUS SYSTEM NEOPLASMS W/O MCC	1.0708	3.7	2.6	1
56	Yes	No	DEGENERATIVE NERVOUS SYSTEM DISORDERS W MCC	2.0624	6.5	4.7	1
57	Yes	No	DEGENERATIVE NERVOUS SYSTEM DISORDERS W/O MCC	1.1177	5.3	3.6	1
58	No	No	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W MCC	3.5944	13.8	7.6	1
59	No	No	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W CC	1.2926	4.6	3.8	1
60	No	No	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W/O CC/MCC	0.8079	3.3	2.7	1
61	No	No	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W MCC	3.4352	9.0	5.9	1
62	No	No	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W CC	2.4220	5.2	4.4	1
63	No	No	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W/O CC/MCC	1.9858	2.9	2.5	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
64	Yes	No	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W MCC	2.0835	6.4	4.6	1
65	Yes	No	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W CC	1.3524	4.6	3.7	1
66	Yes	No	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W/O CC/MCC	1.0424	2.8	2.3	1
67	No	No	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT W MCC	1.6856	4.8	3.5	1
68	No	No	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT W/O MCC	1.0889	2.8	2.5	1
69	No	No	TRANSIENT ISCHEMIA	0.8491	2.1	1.8	1
70	Yes	No	NONSPECIFIC CEREBROVASCULAR DISORDERS W MCC	1.6778	6.2	4.3	1
71	Yes	No	NONSPECIFIC CEREBROVASCULAR DISORDERS W CC	1.2539	4.7	3.3	1
72	Yes	No	NONSPECIFIC CEREBROVASCULAR DISORDERS W/O CC/MCC	0.7593	2.3	1.8	1
73	No	No	CRANIAL & PERIPHERAL NERVE DISORDERS W MCC	1.1944	5.5	4.5	1
74	No	No	CRANIAL & PERIPHERAL NERVE DISORDERS W/O MCC	0.9537	3.5	2.8	1
75	No	No	VIRAL MENINGITIS W CC/MCC	1.1887	4.8	3.8	1
76	No	No	VIRAL MENINGITIS W/O CC/MCC	0.6173	2.7	2.4	1
77	No	No	HYPERTENSIVE ENCEPHALOPATHY W MCC	2.6480	9.0	7.3	2
78	No	No	HYPERTENSIVE ENCEPHALOPATHY W CC	1.3362	3.9	3.3	1
79	No	No	HYPERTENSIVE ENCEPHALOPATHY W/O CC/MCC	0.8012*	2.9	2.4	1
80	No	No	NONTRAUMATIC STUPOR & COMA W MCC	1.3659	5.5	3.0	1
81	No	No	NONTRAUMATIC STUPOR & COMA W/O MCC	0.7150	2.6	2.2	1
82	No	No	TRAUMATIC STUPOR & COMA, COMA >1 HR W MCC	2.7337	6.3	3.9	1
83	No	No	TRAUMATIC STUPOR & COMA, COMA >1 HR W CC	1.0469	3.6	2.8	1
84	No	No	TRAUMATIC STUPOR & COMA, COMA >1 HR W/O CC/MCC	0.9003	2.6	1.9	1
85	Yes	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W MCC	2.3395	7.7	5.4	1
86	Yes	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W CC	1.0581	3.5	2.8	1
87	Yes	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 W/O CC/MCC	0.7020	2.1	1.7	1
88	No	No	CONCUSSION AGE >17 W MCC	1.3581	3.4	2.6	1
89	No	No	CONCUSSION AGE >17 W CC	1.0550	2.4	1.9	1
90	No	No	CONCUSSION AGE >17 W/O CC/MCC	0.7981	1.4	1.2	1
91	Yes	No	OTHER DISORDERS OF NERVOUS SYSTEM W MCC	1.7212	6.7	4.1	1
92	Yes	No	OTHER DISORDERS OF NERVOUS SYSTEM W CC	0.8882	3.4	2.5	1
93	Yes	No	OTHER DISORDERS OF NERVOUS SYSTEM W/O CC/MCC	0.7034	2.3	1.9	1
94	No	No	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W MCC	3.9242	12.6	10.4	2
95	No	No	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W CC	2.4297	7.3	6.0	1
96	No	No	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W/O CC/MCC	2.1944	5.6	4.9	1
97	No	No	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W MCC	2.9578	8.9	6.4	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
98	No	No	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W CC	1.9919	7.6	5.3	1
99	No	No	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W/O CC/MCC	1.1069	4.2	3.3	1
100	Yes	No	SEIZURES AGE >17 W MCC	1.4414	5.1	3.7	1
101	Yes	No	SEIZURES AGE >17 W/O MCC	0.7762	2.8	2.3	1
102	No	No	HEADACHES AGE >17 W MCC	0.8403	3.3	2.6	1
103	No	No	HEADACHES AGE >17 W/O MCC	0.7545	2.9	2.2	1
104	No	No	CRANIOTOMY, VENTRICULAR SHUNT & ENDOVASC INTRACRANIAL PROC AGE 0-17	2.4070	5.6	3.4	1
105	No	No	TRAUMATIC STUPOR & COMA, COMA <1 HR AGE 0-17	0.4723	2.0	1.6	1
106	No	No	CONCUSSION AGE 0-17	0.5466	1.4	1.2	1
107	No	No	SEIZURES & HEADACHES AGE 0-17	0.5421	2.4	1.9	1
108	No	No	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 0-17	0.6972	2.4	2.1	1
109	No	No	OTHER DISORDERS OF THE EYE AGE 0-17	0.3481	2.1	1.8	1
110	No	No	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES AGE 0-17	0.7506	2.1	1.6	1
111	No	No	SINUS & MASTOID PROCEDURES AGE 0-17	1.5915#	5.6	3.7	1
112	No	No	OTITIS MEDIA & URI AGE 0-17	0.3103	2.0	1.8	1
113	No	No	ORBITAL PROCEDURES W CC/MCC	2.2828	5.7	4.0	1
114	No	No	ORBITAL PROCEDURES W/O CC/MCC	1.0836	2.2	1.7	1
115	No	No	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE >17	0.8840	3.3	2.6	1
116	No	No	INTRAOCULAR PROCEDURES W CC/MCC	1.4410*	4.5	3.0	1
117	No	No	INTRAOCULAR PROCEDURES W/O CC/MCC	0.9140	3.2	2.4	1
118	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE 0-17	0.4711	2.3	1.9	1
119	No	No	DENTAL & ORAL DISEASES AGE 0-17	0.6166	2.4	1.9	1
120	No	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE 0-17	1.8446	8.3	6.1	1
121	No	No	ACUTE MAJOR EYE INFECTIONS W CC/MCC	0.4114	3.4	2.9	1
122	No	No	ACUTE MAJOR EYE INFECTIONS W/O CC/MCC	0.4251	3.1	2.7	1
123	No	No	NEUROLOGICAL EYE DISORDERS	0.8529	2.8	2.4	1
124	No	No	OTHER DISORDERS OF THE EYE AGE >17 W MCC	0.8325#	3.4	2.6	1
125	No	No	OTHER DISORDERS OF THE EYE AGE >17 W/O MCC	0.7238	2.7	2.1	1
129	No	No	MAJOR HEAD & NECK PROCEDURES W CC/MCC OR MAJOR DEVICE	2.1762	4.6	3.4	1
130	No	No	MAJOR HEAD & NECK PROCEDURES W/O CC/MCC	1.3125	2.1	1.8	1
131	No	No	CRANIAL/FACIAL PROCEDURES W CC/MCC	2.1811	3.8	2.9	1
132	No	No	CRANIAL/FACIAL PROCEDURES W/O CC/MCC	1.5298	1.8	1.5	1
133	No	No	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES AGE >17 W CC/MCC	1.4535	3.2	2.3	1
134	No	No	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES AGE >17 W/O CC/MCC	0.8817	1.7	1.4	1
135	No	No	SINUS & MASTOID PROCEDURES AGE >17 W CC/MCC	2.6940	5.3	3.8	1
136	No	No	SINUS & MASTOID PROCEDURES AGE >17 W/O CC/MCC	1.4012	2.3	1.7	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
137	No	No	MOUTH PROCEDURES W CC/MCC	1.1419	3.8	2.9	1
138	No	No	MOUTH PROCEDURES W/O CC/MCC	0.7514	2.7	2.1	1
139	No	No	SALIVARY GLAND PROCEDURES	1.0766	1.6	1.3	1
140	No	No	SIMPLE PNEUMONIA & PLEURISY AGE 0-17	0.4580	2.7	2.3	1
141	No	No	BRONCHITIS & ASTHMA AGE 0-17	0.3857	2.4	2.0	1
142	No	No	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE 0-17	0.4628	2.8	2.1	1
143	No	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE 0-17	1.2306	4.9	3.0	1
144	No	No	HERNIA PROCEDURES AGE 0-17	0.6865	1.7	1.4	1
145	No	No	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE 0-17	0.4004	2.4	1.9	1
146	No	No	EAR, NOSE, MOUTH & THROAT MALIGNANCY W MCC	2.2943*	8.4	5.9	1
147	No	No	EAR, NOSE, MOUTH & THROAT MALIGNANCY W CC	0.9580	4.7	3.4	1
148	No	No	EAR, NOSE, MOUTH & THROAT MALIGNANCY W/O CC/MCC	0.8348*	3.2	2.2	1
149	No	No	DYSEQUILIBRIUM	0.7258	2.0	1.7	1
150	No	No	EPISTAXIS W MCC	1.4544*	5.2	3.8	1
151	No	No	EPISTAXIS W/O MCC	0.6576	2.5	2.1	1
152	No	No	OTITIS MEDIA & URI AGE >17 W MCC	0.8685	3.7	2.9	1
153	No	No	OTITIS MEDIA & URI AGE >17 W/O MCC	0.5864	2.5	2.0	1
154	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17 W MCC	1.3815	5.5	4.3	1
155	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17 W CC	0.9677	3.7	2.8	1
156	No	No	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17 W/O CC/MCC	0.4462	2.0	1.7	1
157	No	No	DENTAL & ORAL DISEASES AGE >17 W MCC	0.8474	3.4	3.0	1
158	No	No	DENTAL & ORAL DISEASES AGE >17 W CC	0.9077	3.7	2.7	1
159	No	No	DENTAL & ORAL DISEASES AGE >17 W/O CC/MCC	0.6051	2.1	1.8	1
160	No	No	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 0-17	0.5360	2.6	1.9	1
161	No	No	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 0-17	1.3680	2.8	2.3	1
162	No	No	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE 0-17	0.8950	1.7	1.5	1
163	Yes	No	MAJOR CHEST PROCEDURES W MCC	4.7510	12.7	10.6	3
164	Yes	No	MAJOR CHEST PROCEDURES W CC	2.5199	6.3	5.3	1
165	Yes	No	MAJOR CHEST PROCEDURES W/O CC/MCC	1.6761	4.1	3.4	1
166	Yes	No	OTHER RESP SYSTEM O.R. PROCEDURES W MCC	3.5991	11.1	8.8	2
167	Yes	No	OTHER RESP SYSTEM O.R. PROCEDURES W CC	1.9582	5.9	4.7	1
168	Yes	No	OTHER RESP SYSTEM O.R. PROCEDURES W/O CC/MCC	1.4859	4.0	3.1	1
169	No	No	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH AGE 0-17	0.4116	1.6	1.3	1
170	No	No	CELLULITIS AGE 0-17	0.3959	2.4	2.1	1
171	No	No	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE 0-17	0.4456	1.4	1.3	1
172	No	No	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES 0-17	0.3238	2.5	1.9	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
173	No	No	URETHRAL PROCEDURES AGE 0-17	0.8866#	3.0	2.6	1
174	No	No	KIDNEY & URINARY TRACT INFECTIONS AGE 0-17	0.4086	2.9	2.4	1
175	Yes	No	PULMONARY EMBOLISM W MCC	1.6070	5.9	5.0	1
176	Yes	No	PULMONARY EMBOLISM W/O MCC	0.9493	3.9	3.3	1
177	Yes	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W MCC	2.4290	9.3	7.0	1
178	Yes	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W CC	1.6802	6.5	5.2	1
179	Yes	No	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 W/O CC/MCC	1.1225	5.1	3.8	1
180	No	No	RESPIRATORY NEOPLASMS W MCC	1.7652	6.7	5.2	1
181	No	No	RESPIRATORY NEOPLASMS W CC	1.2112	4.6	3.5	1
182	No	No	RESPIRATORY NEOPLASMS W/O CC/MCC	0.9674	3.2	2.5	1
183	No	No	MAJOR CHEST TRAUMA W MCC	1.4775	4.8	3.6	1
184	No	No	MAJOR CHEST TRAUMA W CC	1.0666	3.4	2.6	1
185	No	No	MAJOR CHEST TRAUMA W/O CC/MCC	0.9122	2.7	2.0	1
186	Yes	No	PLEURAL EFFUSION W MCC	1.5998	5.5	4.2	1
187	Yes	No	PLEURAL EFFUSION W CC	1.1116	4.5	3.4	1
188	Yes	No	PLEURAL EFFUSION W/O CC/MCC	0.5957	2.5	2.0	1
189	No	No	PULMONARY EDEMA & RESPIRATORY FAILURE	1.2253	4.7	3.7	1
190	Yes	No	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	1.1323	4.9	4.0	1
191	Yes	No	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W CC	0.9804	4.1	3.4	1
192	Yes	No	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W/O CC/MCC	0.7324	3.2	2.7	1
193	Yes	No	SIMPLE PNEUMONIA & PLEURISY AGE >17 W MCC	1.4819	6.0	4.8	1
194	Yes	No	SIMPLE PNEUMONIA & PLEURISY AGE >17 W CC	0.9475	4.0	3.3	1
195	Yes	No	SIMPLE PNEUMONIA & PLEURISY AGE >17 W/O CC/MCC	0.6832	3.0	2.6	1
196	Yes	No	INTERSTITIAL LUNG DISEASE W MCC	1.6261	5.8	4.6	1
197	Yes	No	INTERSTITIAL LUNG DISEASE W CC	1.2211	5.0	3.8	1
198	Yes	No	INTERSTITIAL LUNG DISEASE W/O CC/MCC	0.7877	3.2	2.8	1
199	No	No	PNEUMOTHORAX W MCC	1.4782	6.1	4.5	1
200	No	No	PNEUMOTHORAX W CC	0.7952	3.2	2.5	1
201	No	No	PNEUMOTHORAX W/O CC/MCC	0.5359	3.2	2.6	1
202	No	No	BRONCHITIS & ASTHMA AGE >17 W CC/MCC	0.8306	3.8	3.0	1
203	No	No	BRONCHITIS & ASTHMA AGE >17 W/O CC/MCC	0.5775	2.7	2.2	1
204	No	No	RESPIRATORY SIGNS & SYMPTOMS	0.6672	2.3	1.8	1
205	Yes	No	OTHER RESPIRATORY SYSTEM DIAGNOSES W MCC	1.5850	6.2	4.3	1
206	Yes	No	OTHER RESPIRATORY SYSTEM DIAGNOSES W/O MCC	0.6968	2.5	2.0	1
207	Yes	No	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT 96+ HOURS	6.5742	15.4	13.0	4
208	No	No	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT <96 HOURS	2.1684	5.7	4.0	1
209	No	No	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE 0-17	0.3964	1.9	1.6	1
210	No	No	URETHRAL STRICTURE AGE 0-17	0.4563#	1.9	1.9	1
211	No	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE 0-17	0.8763	4.1	2.9	1

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Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
212	No	No	TESTES PROCEDURES AGE 0-17	0.5431	1.2	1.1	1
213	No	No	SPLENECTOMY AGE 0-17	1.1304	2.1	1.8	1
214	No	No	RED BLOOD CELL DISORDERS AGE 0-17	0.4808	3.2	2.4	1
215	No	No	OTHER HEART ASSIST SYSTEM IMPLANT	15.2768*	13.4	7.5	2
216	Yes	Yes	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W MCC	12.3916	19.5	13.6	2
217	Yes	Yes	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W CC	7.0912	9.4	8.4	3
218	Yes	Yes	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W/O CC/MCC	6.6175	7.5	6.7	2
219	Yes	Yes	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W MCC	8.0103	10.6	8.8	2
220	Yes	Yes	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W CC	4.9121	6.1	5.6	2
221	Yes	Yes	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W/O CC/MCC	4.8681	5.1	4.6	1
222	No	No	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK W MCC	8.9072	11.5	9.6	2
223	No	No	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK W/O MCC	6.8676	5.4	4.2	1
224	No	No	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK W MCC	7.6928	8.9	7.9	2
225	No	No	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK W/O MCC	6.1660	4.4	3.7	1
226	No	No	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH W MCC	7.1987	7.8	5.7	1
227	No	No	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH W/O MCC	4.9254	2.5	1.8	1
228	No	No	OTHER CARDIOTHORACIC PROCEDURES W MCC	6.0091	9.9	7.7	1
229	No	No	OTHER CARDIOTHORACIC PROCEDURES W CC	4.6120	6.5	5.6	1
230	No	No	OTHER CARDIOTHORACIC PROCEDURES W/O CC/MCC	3.5782	5.0	4.2	1
231	No	No	CORONARY BYPASS W PTCA W MCC	8.8519	10.7	9.0	2
232	No	No	CORONARY BYPASS W PTCA W/O MCC	6.4527	8.5	7.7	3
233	Yes	No	CORONARY BYPASS W CARDIAC CATH W MCC	7.3508	11.3	10.0	3
234	Yes	No	CORONARY BYPASS W CARDIAC CATH W/O MCC	5.3718	7.5	7.1	3
235	Yes	No	CORONARY BYPASS W/O CARDIAC CATH W MCC	5.7651	8.4	7.5	3
236	Yes	No	CORONARY BYPASS W/O CARDIAC CATH W/O MCC	3.8689	5.7	5.3	2
237	No	No	MAJOR CARDIOVASC PROCEDURES W MCC	5.3623	9.0	6.4	1
238	No	No	MAJOR CARDIOVASC PROCEDURES W/O MCC	3.0060	4.1	3.0	1
239	Yes	No	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W MCC	5.5361	16.9	13.8	3
240	Yes	No	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W CC	2.6796	8.8	7.7	2
241	Yes	No	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W/O CC/MCC	1.6582*	5.8	4.8	3

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
242	Yes	No	PERMANENT CARDIAC PACEMAKER IMPLANT W MCC	3.9480	6.9	5.0	1
243	Yes	No	PERMANENT CARDIAC PACEMAKER IMPLANT W CC	2.8996	4.3	3.3	1
244	Yes	No	PERMANENT CARDIAC PACEMAKER IMPLANT W/O CC/MCC	2.2448	2.6	2.1	1
245	No	No	AICD GENERATOR PROCEDURES	3.9156	5.2	2.3	1
246	No	No	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W MCC OR 4+ VESSELS/STENTS	3.5100	3.8	2.9	1
247	No	No	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W/O MCC	2.5891	2.2	1.9	1
248	No	No	PERC CARDIOVASC PROC W NON-DRUG-ELUTING STENT W MCC OR 4+ VES/STENTS	3.2468	4.2	3.4	1
249	No	No	PERC CARDIOVASC PROC W NON-DRUG-ELUTING STENT W/O MCC	2.3135	2.5	2.2	1
250	No	No	PERC CARDIOVASC PROC W/O CORONARY ARTERY STENT W MCC	3.1963	5.4	4.1	1
251	No	No	PERC CARDIOVASC PROC W/O CORONARY ARTERY STENT W/O MCC	2.6169	2.3	1.8	1
252	No	No	OTHER VASCULAR PROCEDURES W MCC	3.2677	7.3	5.1	1
253	No	No	OTHER VASCULAR PROCEDURES W CC	2.8110	5.0	3.7	1
254	No	No	OTHER VASCULAR PROCEDURES W/O CC/MCC	1.9918	2.5	1.9	1
255	Yes	No	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W MCC	2.7963*	9.0	6.7	2
256	Yes	No	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W CC	1.5585	6.8	5.3	1
257	Yes	No	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W/O CC/MCC	1.0069*	4.1	3.1	2
258	No	No	CARDIAC PACEMAKER DEVICE REPLACEMENT W MCC	3.2983*	7.0	5.3	1
259	No	No	CARDIAC PACEMAKER DEVICE REPLACEMENT W/O MCC	2.0221*	3.3	2.5	1
260	No	No	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W MCC	3.8694	11.4	8.5	1
261	No	No	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W CC	1.4811	3.9	3.0	1
262	No	No	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W/O CC/MCC	1.3262	2.5	2.0	1
263	No	No	VEIN LIGATION & STRIPPING	2.3671	9.0	5.3	1
264	Yes	No	OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	2.5696	7.9	4.8	1
265	No	No	AICD LEAD PROCEDURES	2.9943	3.6	2.2	1
266	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE 0-17	2.9251	12.4	8.5	1
267	No	No	VIRAL ILLNESS & FEVER AGE 0-17	0.3516	2.3	2.0	1
268	No	No	SEPTICEMIA OR SEVERE SEPSIS AGE 0-17	1.4010	6.0	4.1	1
269	No	No	TRAUMATIC INJURY AGE 0-17	0.3744	1.6	1.4	1
270	No	No	ALLERGIC REACTIONS AGE 0-17	0.2750	1.5	1.3	1
271	No	No	POISONING & TOXIC EFFECTS OF DRUGS AGE 0-17	0.4544	2.0	1.5	1
280	Yes	No	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE W MCC	2.1751	5.8	4.4	1
281	Yes	No	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE W CC	1.2440	2.9	2.4	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
282	Yes	No	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE W/O CC/MCC	1.0197	2.0	1.7	1
283	No	No	ACUTE MYOCARDIAL INFARCTION, EXPIRED W MCC	2.0023	3.3	2.4	1
284	No	No	ACUTE MYOCARDIAL INFARCTION, EXPIRED W CC	0.9324*	2.8	2.0	1
285	No	No	ACUTE MYOCARDIAL INFARCTION, EXPIRED W/O CC/MCC	0.5995*	1.7	1.4	1
286	No	No	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W MCC	2.2174	5.7	4.2	1
287	No	No	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W/O MCC	1.2482	2.4	2.0	1
288	Yes	No	ACUTE & SUBACUTE ENDOCARDITIS W MCC	3.2641	13.1	9.5	1
289	Yes	No	ACUTE & SUBACUTE ENDOCARDITIS W CC	1.2581	6.0	4.5	1
290	Yes	No	ACUTE & SUBACUTE ENDOCARDITIS W/O CC/MCC	1.2367*	5.0	4.1	2
291	Yes	No	HEART FAILURE & SHOCK W MCC	1.4721	5.7	4.4	1
292	Yes	No	HEART FAILURE & SHOCK W CC	1.0257	4.4	3.5	1
293	Yes	No	HEART FAILURE & SHOCK W/O CC/MCC	0.6709	2.7	2.3	1
294	No	No	DEEP VEIN THROMBOPHLEBITIS W CC/MCC	1.1007*	5.3	4.4	1
295	No	No	DEEP VEIN THROMBOPHLEBITIS W/O CC/MCC	0.7761*	4.1	3.5	1
296	No	No	CARDIAC ARREST, UNEXPLAINED W MCC	1.4924	2.6	1.8	1
297	No	No	CARDIAC ARREST, UNEXPLAINED W CC	0.7297*	1.6	1.3	1
298	No	No	CARDIAC ARREST, UNEXPLAINED W/O CC/MCC	0.4493*	1.1	1.1	1
299	Yes	No	PERIPHERAL VASCULAR DISORDERS W MCC	1.1111	4.7	3.7	1
300	Yes	No	PERIPHERAL VASCULAR DISORDERS W CC	0.8396	3.8	3.1	1
301	Yes	No	PERIPHERAL VASCULAR DISORDERS W/O CC/MCC	0.6637	3.3	2.6	1
302	No	No	ATHEROSCLEROSIS W MCC	1.9480	5.4	3.5	1
303	No	No	ATHEROSCLEROSIS W/O MCC	0.6807	1.9	1.6	1
304	No	No	HYPERTENSION W MCC	0.7176	3.3	2.5	1
305	No	No	HYPERTENSION W/O MCC	0.6339	2.1	1.8	1
306	No	No	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 W MCC	1.0033#	3.9	2.9	1
307	No	No	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 W/O MCC	0.7684	2.6	2.1	1
308	No	No	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W MCC	1.3427	4.7	3.6	1
309	No	No	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	0.7354	2.8	2.3	1
310	No	No	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC/MCC	0.5237	1.9	1.6	1
311	No	No	ANGINA PECTORIS	0.5706	1.7	1.4	1
312	No	No	SYNCOPE & COLLAPSE	0.7412	2.1	1.8	1
313	No	No	CHEST PAIN	0.6183	1.6	1.4	1
314	Yes	No	OTHER CIRCULATORY SYSTEM DIAGNOSES W MCC	2.1568	7.4	5.5	1
315	Yes	No	OTHER CIRCULATORY SYSTEM DIAGNOSES W CC	1.0696	4.0	3.1	1
316	Yes	No	OTHER CIRCULATORY SYSTEM DIAGNOSES W/O CC/MCC	0.6259	2.1	1.7	1
326	Yes	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W MCC	5.1867	13.1	10.0	2
327	Yes	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W CC	2.5229	6.4	4.6	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
328	Yes	No	STOMACH, ESOPHAGEAL & DUODENAL PROC AGE >17 W/O CC/MCC	1.5279	2.7	2.1	1
329	Yes	No	MAJOR SMALL & LARGE BOWEL PROCEDURES W MCC	4.9239	13.9	10.7	2
330	Yes	No	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	2.4623	7.6	6.4	2
331	Yes	No	MAJOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	1.6940	4.7	4.1	1
332	Yes	No	RECTAL RESECTION W MCC	3.8086	12.8	11.7	5
333	Yes	No	RECTAL RESECTION W CC	2.1022	5.7	5.0	1
334	Yes	No	RECTAL RESECTION W/O CC/MCC	1.8624	4.7	4.2	1
335	Yes	No	PERITONEAL ADHESIOLYSIS W MCC	5.3958	13.5	10.3	2
336	Yes	No	PERITONEAL ADHESIOLYSIS W CC	2.2189	7.3	5.8	1
337	Yes	No	PERITONEAL ADHESIOLYSIS W/O CC/MCC	1.4412	4.0	3.1	1
338	No	No	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W MCC	3.5214	9.3	7.7	2
339	No	No	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W CC	1.7963	5.8	5.0	1
340	No	No	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W/O CC/MCC	1.2277	3.6	3.1	1
341	No	No	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W MCC	2.2014	4.4	3.1	1
342	No	No	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W CC	1.3709	2.7	2.1	1
343	No	No	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W/O CC/MCC	0.9957	1.5	1.3	1
344	No	No	MINOR SMALL & LARGE BOWEL PROCEDURES W MCC	4.6799	11.5	9.3	2
345	No	No	MINOR SMALL & LARGE BOWEL PROCEDURES W CC	1.3474	5.3	4.6	1
346	No	No	MINOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	1.0678	3.9	3.5	1
347	No	No	ANAL & STOMAL PROCEDURES W MCC	2.3137	7.6	5.2	1
348	No	No	ANAL & STOMAL PROCEDURES W CC	1.4189	4.3	3.5	1
349	No	No	ANAL & STOMAL PROCEDURES W/O CC/MCC	0.7772	2.3	1.9	1
350	No	No	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W MCC	1.9346#	4.5	3.3	1
351	No	No	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W CC	1.5870	3.4	2.6	1
352	No	No	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 W/O CC/MCC	0.8873	1.8	1.6	1
353	No	No	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W MCC	2.4607	6.9	5.0	1
354	No	No	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W CC	1.6644	4.4	3.6	1
355	No	No	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 W/O CC/MCC	1.2599	2.5	2.1	1
356	Yes	No	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W MCC	3.6216	10.7	7.8	1
357	Yes	No	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W CC	2.0310	6.7	5.1	1
358	Yes	No	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC	1.3171	3.8	3.0	1
368	No	No	MAJOR ESOPHAGEAL DISORDERS W MCC	1.5818	5.0	3.6	1
369	No	No	MAJOR ESOPHAGEAL DISORDERS W CC	0.8556	3.1	2.7	1
370	No	No	MAJOR ESOPHAGEAL DISORDERS W/O CC/MCC	0.8621	3.0	2.4	1
371	Yes	No	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W MCC	1.8124	7.5	5.7	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
372	Yes	No	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W CC	1.0320	4.7	3.9	1
373	Yes	No	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W/O CC/MCC	0.7254	3.6	3.1	1
374	Yes	No	DIGESTIVE MALIGNANCY W MCC	2.5812	8.8	6.5	1
375	Yes	No	DIGESTIVE MALIGNANCY W CC	1.2739	6.1	4.2	1
376	Yes	No	DIGESTIVE MALIGNANCY W/O CC/MCC	0.6889	2.9	2.3	1
377	Yes	No	G.I. HEMORRHAGE W MCC	1.7289	5.9	4.2	1
378	Yes	No	G.I. HEMORRHAGE W CC	0.9132	3.3	2.7	1
379	Yes	No	G.I. HEMORRHAGE W/O CC/MCC	0.6462	2.2	1.9	1
380	Yes	No	COMPLICATED PEPTIC ULCER W MCC	1.6486	6.4	5.2	1
381	Yes	No	COMPLICATED PEPTIC ULCER W CC	0.9760	3.8	3.2	1
382	Yes	No	COMPLICATED PEPTIC ULCER W/O CC/MCC	0.8249	3.0	2.5	1
383	No	No	UNCOMPLICATED PEPTIC ULCER W MCC	1.1130	4.3	3.7	1
384	No	No	UNCOMPLICATED PEPTIC ULCER W/O MCC	0.9084	3.1	2.6	1
385	No	No	INFLAMMATORY BOWEL DISEASE W MCC	1.4773	6.5	5.3	1
386	No	No	INFLAMMATORY BOWEL DISEASE W CC	1.0420	4.9	3.9	1
387	No	No	INFLAMMATORY BOWEL DISEASE W/O CC/MCC	0.7645	3.8	3.2	1
388	Yes	No	G.I. OBSTRUCTION W MCC	1.4915	6.8	4.8	1
389	Yes	No	G.I. OBSTRUCTION W CC	0.8318	3.9	3.1	1
390	Yes	No	G.I. OBSTRUCTION W/O CC/MCC	0.5542	2.6	2.2	1
391	No	No	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W MCC	1.2084	4.7	3.6	1
392	No	No	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS AGE >17 W/O MCC	0.7206	2.9	2.3	1
393	No	No	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 W MCC	1.6914	6.1	4.1	1
394	No	No	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 W CC	0.9171	4.0	3.1	1
395	No	No	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 W/O CC/MCC	0.6942	2.7	2.2	1
405	Yes	No	PANCREAS, LIVER & SHUNT PROCEDURES W MCC	5.2204	15.6	10.8	2
406	Yes	No	PANCREAS, LIVER & SHUNT PROCEDURES W CC	2.6777	7.2	5.6	1
407	Yes	No	PANCREAS, LIVER & SHUNT PROCEDURES W/O CC/MCC	1.8255	4.5	3.8	1
408	No	No	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W MCC	4.7293	13.4	11.3	3
409	No	No	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W CC	2.7906	8.6	7.4	2
410	No	No	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W/O CC/MCC	1.6070	5.0	4.3	1
411	No	No	CHOLECYSTECTOMY W C.D.E. W MCC	3.0776	8.2	7.1	2
412	No	No	CHOLECYSTECTOMY W C.D.E. W CC	2.0561	5.2	4.0	1
413	No	No	CHOLECYSTECTOMY W C.D.E. W/O CC/MCC	1.0898	3.0	2.5	1
414	Yes	No	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W MCC	4.5550	11.9	9.0	2

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Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
415	Yes	No	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W CC	1.8995	5.9	5.2	2
416	Yes	No	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W/O CC/MCC	1.4118	3.6	3.1	1
417	No	No	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W MCC	2.0561	5.2	4.2	1
418	No	No	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W CC	1.6116	3.7	3.1	1
419	No	No	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W/O CC/MCC	1.2407	2.4	2.0	1
420	No	No	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W MCC	16.4016	33.1	8.2	1
421	No	No	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W CC	3.2263	9.9	4.9	1
422	No	No	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W/O CC/MCC	1.3680*	3.7	2.9	2
423	No	No	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W MCC	6.2218	15.2	10.7	1
424	No	No	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W CC	2.5383	9.5	5.7	1
425	No	No	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W/O CC/MCC	1.8897*	5.0	3.7	2
432	No	No	CIRRHOSIS & ALCOHOLIC HEPATITIS W MCC	2.1079	6.9	5.0	1
433	No	No	CIRRHOSIS & ALCOHOLIC HEPATITIS W CC	0.9642	4.2	3.3	1
434	No	No	CIRRHOSIS & ALCOHOLIC HEPATITIS W/O CC/MCC	0.6121	3.8	3.3	1
435	No	No	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS W MCC	1.8940	6.9	5.2	1
436	No	No	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS W CC	1.3604	5.3	4.0	1
437	No	No	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS W/O CC/MCC	0.9689	3.0	2.4	1
438	No	No	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W MCC	2.2665	8.3	5.9	1
439	No	No	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W CC	1.0574	4.8	3.8	1
440	No	No	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W/O CC/MCC	0.7190	3.3	2.8	1
441	Yes	No	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W MCC	2.2052	7.7	5.3	1
442	Yes	No	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W CC	1.0564	4.4	3.2	1
443	Yes	No	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W/O CC/MCC	0.6777	3.1	2.5	1
444	No	No	DISORDERS OF THE BILIARY TRACT W MCC	1.6240	5.4	4.1	1
445	No	No	DISORDERS OF THE BILIARY TRACT W CC	0.9698	3.5	2.8	1
446	No	No	DISORDERS OF THE BILIARY TRACT W/O CC/MCC	0.7281	2.3	1.9	1
453	No	No	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W MCC	11.7668	12.0	8.5	1
454	No	No	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W CC	7.3366	4.9	4.3	1
455	No	No	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W/O CC/MCC	5.5906	3.1	2.6	1
456	No	No	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFEC OR 9+ FUS W MCC	8.8908	10.0	8.3	2
457	No	No	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFEC OR 9+ FUS W CC	7.0567	6.0	5.4	2
458	No	No	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFEC OR 9+ FUS W/O CC/MCC	5.1879	4.4	4.0	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
459	Yes	No	SPINAL FUSION EXCEPT CERVICAL W MCC	6.2479	8.1	6.6	1
460	Yes	No	SPINAL FUSION EXCEPT CERVICAL W/O MCC	4.0243	3.0	2.6	1
461	No	No	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W MCC	5.9923*	8.6	6.7	2
462	No	No	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W/O MCC	3.4111	4.0	3.7	1
463	Yes	No	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W MCC	6.0409	16.0	11.9	2
464	Yes	No	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W CC	3.0452	7.8	5.8	1
465	Yes	No	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W/O CC/MCC	1.9407	4.8	3.5	1
466	Yes	No	REVISION OF HIP OR KNEE REPLACEMENT W MCC	4.3593	6.7	5.6	1
467	Yes	No	REVISION OF HIP OR KNEE REPLACEMENT W CC	3.2237	3.9	3.5	1
468	Yes	No	REVISION OF HIP OR KNEE REPLACEMENT W/O CC/MCC	2.6151	3.1	2.9	1
469	Yes	No	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W MCC	3.4337	6.5	5.4	1
470	Yes	No	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	2.1160	3.0	2.8	1
471	No	No	CERVICAL SPINAL FUSION W MCC	3.9709	5.9	4.3	1
472	No	No	CERVICAL SPINAL FUSION W CC	2.6593	2.1	1.7	1
473	No	No	CERVICAL SPINAL FUSION W/O CC/MCC	2.1239	1.3	1.2	1
474	Yes	No	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W MCC	4.0058*	11.8	8.9	2
475	Yes	No	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W CC	1.4533	6.1	4.8	1
476	Yes	No	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W/O CC/MCC	1.0544	3.7	2.9	1
477	Yes	Yes	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC	2.7658	10.3	7.5	1
478	Yes	Yes	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC	2.5072	6.5	4.6	1
479	Yes	Yes	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC	1.8635	3.5	2.4	1
480	Yes	Yes	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W MCC	3.4088	8.2	6.6	1
481	Yes	Yes	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W CC	2.1362	5.1	4.5	1
482	Yes	Yes	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 W/O CC/MCC	1.6633	3.0	2.5	1
483	Yes	No	MAJOR JOINT & LIMB REATTACHMENT PROC OF UPPER EXTREMITY W CC/MCC	2.2904	2.4	2.1	1
484	Yes	No	MAJOR JOINT & LIMB REATTACHMENT PROC OF UPPER EXTREMITY W/O CC/MCC	1.9672	1.9	1.7	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
485	No	No	KNEE PROCEDURES W PDX OF INFECTION W MCC	3.4882*	10.7	8.7	3
486	No	No	KNEE PROCEDURES W PDX OF INFECTION W CC	2.0990	8.6	6.3	1
487	No	No	KNEE PROCEDURES W PDX OF INFECTION W/O CC/MCC	1.3656	4.0	3.5	1
488	Yes	No	KNEE PROCEDURES W/O PDX OF INFECTION W CC/MCC	1.7205	3.8	3.0	1
489	Yes	No	KNEE PROCEDURES W/O PDX OF INFECTION W/O CC/MCC	1.4210	2.3	1.9	1
490	No	No	BACK & NECK PROC EXC SPINAL FUSION W CC/MCC OR DISC DEVICE/NEUROSTIM	2.1308	2.9	2.1	1
491	No	No	BACK & NECK PROC EXC SPINAL FUSION W/O CC/MCC	1.2507	1.6	1.3	1
492	Yes	Yes	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W MCC	3.9465	9.4	6.8	1
493	Yes	Yes	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W CC	2.2452	4.6	3.6	1
494	Yes	Yes	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR AGE >17 W/O CC/MCC	1.4279	2.5	2.1	1
495	Yes	Yes	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W MCC	4.1698	10.4	5.3	1
496	Yes	Yes	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W CC	1.5930	4.2	3.2	1
497	Yes	Yes	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W/O CC/MCC	1.1118	2.1	1.6	1
498	No	No	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W CC/MCC	1.5932	6.0	3.5	1
499	No	No	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W/O CC/MCC	0.9784	2.1	1.6	1
500	Yes	Yes	SOFT TISSUE PROCEDURES W MCC	2.8792	7.4	5.7	1
501	Yes	Yes	SOFT TISSUE PROCEDURES W CC	1.7493	5.7	4.0	1
502	Yes	Yes	SOFT TISSUE PROCEDURES W/O CC/MCC	1.1552	2.5	1.9	1
503	No	No	FOOT PROCEDURES W MCC	3.9925	9.4	7.1	1
504	No	No	FOOT PROCEDURES W CC	1.7496	5.4	4.1	1
505	No	No	FOOT PROCEDURES W/O CC/MCC	1.1685	2.3	1.9	1
506	No	No	MAJOR THUMB OR JOINT PROCEDURES	1.0308	2.6	2.3	1
507	No	No	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W CC/MCC	1.8532	4.0	3.1	1
508	No	No	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W/O CC/MCC	1.2293	1.7	1.4	1
509	No	No	ARTHROSCOPY	1.3125	3.3	2.6	1
510	Yes	No	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W MCC	2.4085	5.5	4.8	1
511	Yes	No	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W CC	1.7906	3.2	2.6	1
512	Yes	No	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W/O CC/MCC	1.1322	1.6	1.5	1
513	No	No	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W CC/MCC	1.3815	3.9	2.7	1

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514	No	No	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W/O CC/MCC	0.9095	1.9	1.6	1
515	Yes	Yes	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W MCC	2.9347	8.7	7.2	2
516	Yes	Yes	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W CC	2.4691	5.1	3.9	1
517	Yes	Yes	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W/O CC/MCC	1.6266	2.5	2.0	1
533	Yes	No	FRACTURES OF FEMUR W MCC	1.7924*	6.3	4.6	1
534	Yes	No	FRACTURES OF FEMUR W/O MCC	0.5306	1.9	1.6	1
535	Yes	No	FRACTURES OF HIP & PELVIS W MCC	0.9896	4.8	4.1	1
536	Yes	No	FRACTURES OF HIP & PELVIS W/O MCC	0.7938	3.7	2.8	1
537	No	No	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH W CC/MCC	0.9348*	4.0	3.4	1
538	No	No	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH W/O CC/MCC	0.6960*	3.1	2.6	1
539	Yes	No	OSTEOMYELITIS W MCC	1.7751	9.0	6.4	1
540	Yes	No	OSTEOMYELITIS W CC	1.0645	5.9	4.1	1
541	Yes	No	OSTEOMYELITIS W/O CC/MCC	0.7929	3.4	2.9	1
542	Yes	No	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W MCC	3.4657	12.9	8.9	1
543	Yes	No	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W CC	1.3769	6.3	4.5	1
544	Yes	No	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W/O CC/MCC	0.9603	3.1	2.6	1
545	Yes	No	CONNECTIVE TISSUE DISORDERS W MCC	3.5397	9.4	6.3	1
546	Yes	No	CONNECTIVE TISSUE DISORDERS W CC	1.4341	5.3	4.1	1
547	Yes	No	CONNECTIVE TISSUE DISORDERS W/O CC/MCC	0.8735	3.4	2.7	1
548	No	No	SEPTIC ARTHRITIS W MCC	2.0936*	8.2	6.5	1
549	No	No	SEPTIC ARTHRITIS W CC	1.0882	5.6	4.3	1
550	No	No	SEPTIC ARTHRITIS W/O CC/MCC	0.7240	3.2	2.9	1
551	Yes	No	MEDICAL BACK PROBLEMS W MCC	1.4189	5.0	4.1	1
552	Yes	No	MEDICAL BACK PROBLEMS W/O MCC	0.7391	2.8	2.2	1
553	No	No	BONE DISEASES & ARTHROPATHIES W MCC	1.3212*	5.5	4.4	1
554	No	No	BONE DISEASES & ARTHROPATHIES W/O MCC	0.6618	3.0	2.3	1
555	No	No	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE W MCC	1.1478	3.8	2.8	1
556	No	No	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE W/O MCC	0.7679	2.7	2.1	1
557	Yes	No	TENDONITIS, MYOSITIS & BURSITIS W MCC	1.6483	6.7	5.2	1
558	Yes	No	TENDONITIS, MYOSITIS & BURSITIS W/O MCC	0.5977	3.1	2.5	1
559	Yes	No	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC	1.3852	5.3	3.7	1
560	Yes	No	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC	1.0471	5.8	4.1	1

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561	Yes	No	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC	0.6445	2.5	2.0	1
562	Yes	No	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH AGE >17 W MCC	1.2673	5.0	3.7	1
563	Yes	No	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH AGE >17 W/O MCC	0.6983	2.3	1.8	1
564	No	No	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W MCC	1.2224	4.2	3.8	1
565	No	No	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W CC	0.8870	4.2	2.9	1
566	No	No	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W/O CC/MCC	0.5476	2.1	1.8	1
570	Yes	No	SKIN DEBRIDEMENT W MCC	4.5104	13.5	11.1	2
571	Yes	No	SKIN DEBRIDEMENT W CC	1.6072	6.0	4.9	1
572	Yes	No	SKIN DEBRIDEMENT W/O CC/MCC	0.9430	3.7	3.1	1
573	Yes	No	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W MCC	3.5384	16.0	11.3	2
574	Yes	No	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W CC	1.9895	10.5	6.7	1
575	Yes	No	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W/O CC/MCC	1.4225	4.1	3.5	1
576	No	No	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W MCC	3.8779*	10.7	7.1	1
577	No	No	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W CC	2.6513	7.0	4.4	1
578	No	No	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W/O CC/MCC	1.7871	3.4	2.4	1
579	Yes	No	OTHER SKIN, SUBCUT TISS & BREAST PROC W MCC	2.5644	7.5	5.6	1
580	Yes	No	OTHER SKIN, SUBCUT TISS & BREAST PROC W CC	1.4865	3.7	2.7	1
581	Yes	No	OTHER SKIN, SUBCUT TISS & BREAST PROC W/O CC/MCC	1.4874	2.4	1.9	1
582	No	No	MASTECTOMY FOR MALIGNANCY W CC/MCC	1.5892	2.2	1.7	1
583	No	No	MASTECTOMY FOR MALIGNANCY W/O CC/MCC	1.7476	2.0	1.7	1
584	No	No	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W CC/MCC	2.4794	4.4	3.4	1
585	No	No	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W/O CC/MCC	1.6717	2.2	1.8	1
592	Yes	No	SKIN ULCERS W MCC	1.5229	8.3	6.5	1
593	Yes	No	SKIN ULCERS W CC	0.8367	4.9	4.1	1
594	Yes	No	SKIN ULCERS W/O CC/MCC	0.7749*	4.1	3.3	2
595	No	No	MAJOR SKIN DISORDERS W MCC	2.1796*	7.9	5.7	1
596	No	No	MAJOR SKIN DISORDERS W/O MCC	0.7716	3.8	3.1	1
597	No	No	MALIGNANT BREAST DISORDERS W MCC	1.8415*	7.5	5.5	1
598	No	No	MALIGNANT BREAST DISORDERS W CC	0.9353	4.4	3.4	1
599	No	No	MALIGNANT BREAST DISORDERS W/O CC/MCC	0.7546*	3.4	2.4	1
600	No	No	NON-MALIGNANT BREAST DISORDERS W CC/MCC	0.8632	4.0	3.5	1
601	No	No	NON-MALIGNANT BREAST DISORDERS W/O CC/MCC	0.5595	3.3	2.8	1
602	Yes	No	CELLULITIS AGE >17 W MCC	1.2838	6.1	4.8	1
603	Yes	No	CELLULITIS AGE >17 W/O MCC	0.6733	3.6	3.0	1
604	No	No	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE >17 W MCC	1.4735	3.2	2.4	1

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Chapter 6, Addendum C (FY 2012)

Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
605	No	No	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST AGE >17 W/O MCC	0.7723	1.9	1.6	1
606	No	No	MINOR SKIN DISORDERS W MCC	1.0713	5.9	4.0	1
607	No	No	MINOR SKIN DISORDERS W/O MCC	0.4495	2.7	2.2	1
608	No	No	BPD & OTH CHRONIC RESPIRATORY DISEASES ARISING IN PERINATAL PERIOD	3.6403	14.9	6.6	1
609	No	No	OTHER RESPIRATORY PROBLEMS AFTER BIRTH	1.0143#	6.9	3.8	1
610	No	No	NEONATE, DIED W/IN ONE DAY OF BIRTH	0.1946	1.0	1.0	1
611	No	No	NEONATE, TRANSFERRED <5 DAYS OLD	0.2569	1.2	1.1	1
612	No	No	NEONATE, BIRTHWT <750G, DISCHARGED ALIVE	23.0815	82.6	60.6	7
613	No	No	NEONATE, BIRTHWT <750G, DIED	5.1910	10.5	4.6	1
614	No	No	ADRENAL & PITUITARY PROCEDURES W CC/MCC	2.0626	4.5	3.6	1
615	No	No	ADRENAL & PITUITARY PROCEDURES W/O CC/MCC	1.4709	2.7	2.2	1
616	Yes	No	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W MCC	4.4464	15.8	13.6	4
617	Yes	No	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W CC	2.0936	7.5	6.3	1
618	Yes	No	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W/O CC/MCC	1.2894*	4.9	3.6	2
619	No	No	O.R. PROCEDURES FOR OBESITY W MCC	4.5083	8.5	5.2	1
620	No	No	O.R. PROCEDURES FOR OBESITY W CC	2.1007	2.6	2.2	1
621	No	No	O.R. PROCEDURES FOR OBESITY W/O CC/MCC	1.7638	1.7	1.6	1
622	Yes	No	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W MCC	4.2556*	13.9	10.0	2
623	Yes	No	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W CC	2.2461	6.5	5.7	2
624	Yes	No	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W/O CC/MCC	1.1061*	4.3	3.5	2
625	No	No	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W MCC	2.1519	4.4	3.3	1
626	No	No	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W CC	1.4244	2.2	1.7	1
627	No	No	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W/O CC/MCC	1.0244	1.4	1.2	1
628	Yes	No	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W MCC	4.5542	10.3	7.5	1
629	Yes	No	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W CC	2.0963	6.4	4.9	1
630	Yes	No	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W/O CC/MCC	2.1302	5.0	3.2	1
631	No	No	NEONATE, BIRTHWT 750-999G, DISCHARGED ALIVE	17.4874	73.4	63.2	17
632	No	No	NEONATE, BIRTHWT 750-999G, DIED	3.9052	9.3	4.8	1
633	No	No	NEONATE, BIRTHWT 1000-1499G, W SIGNIF O.R. PROC, DISCHARGED ALIVE	18.2726	70.1	62.8	22
634	No	No	NEONATE, BIRTHWT 1000-1499G, W/O SIGNIF O.R. PROC, DISCHARGED ALIVE	8.7058	45.2	40.9	16
635	No	No	NEONATE, BIRTHWT 1000-1499G, DIED	4.9719#	14.0	5.3	1

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Diagnosis Related Groups (DRGs), DRG Relative Weights, Arithmetic And Geometric Mean Lengths-Of-Stay (LOS), And Short-Stay Outlier Thresholds - FY 2012

DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
636	No	No	NEONATE, BIRTHWT 1500-1999G, W SIGNIF O.R. PROC, W MULT MAJOR PROB	11.9885	46.1	35.8	6
637	Yes	No	DIABETES W MCC	1.5272	5.0	4.0	1
638	Yes	No	DIABETES W CC	0.7207	3.1	2.7	1
639	Yes	No	DIABETES W/O CC/MCC	0.4617	2.2	1.9	1
640	Yes	No	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES >17 W MCC	1.0558	4.1	3.1	1
641	Yes	No	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES >17 W/O MCC	0.6250	2.8	2.2	1
642	No	No	INBORN AND OTHER DISORDERS OF METABOLISM	0.8473	4.3	3.2	1
643	Yes	No	ENDOCRINE DISORDERS W MCC	1.3968	6.0	4.4	1
644	Yes	No	ENDOCRINE DISORDERS W CC	0.8736	4.0	3.0	1
645	Yes	No	ENDOCRINE DISORDERS W/O CC/MCC	0.5931	2.2	1.9	1
646	No	No	NEONATE, BIRTHWT 1500-1999G, W SIGNIF O.R. PROC, W/O MULT MAJOR PROB	9.2612#	34.3	31.3	20
647	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W MULT MAJOR PROB	5.8852	28.5	24.3	7
648	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W MAJOR PROB	3.7550	21.8	19.1	6
649	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W MINOR PROB	2.7208	17.1	12.7	2
650	No	No	NEONATE, BIRTHWT 1500-1999G, W/O SIGNIF O.R. PROC, W OTHER PROB	1.9976	14.5	11.6	2
651	No	No	NEONATE, BIRTHWT 2000-2499G, W SIGNIF O.R. PROC, W MULT MAJOR PROB	8.2969	35.7	26.6	4
652	No	No	KIDNEY TRANSPLANT	3.0991	6.2	5.6	2
653	Yes	No	MAJOR BLADDER PROCEDURES W MCC	6.5766*	16.1	13.3	3
654	Yes	No	MAJOR BLADDER PROCEDURES W CC	2.6859	8.3	7.0	2
655	Yes	No	MAJOR BLADDER PROCEDURES W/O CC/MCC	2.0177	4.9	3.9	1
656	No	No	KIDNEY & URETER PROCEDURES FOR NEOPLASM W MCC	4.1438	8.7	6.5	1
657	No	No	KIDNEY & URETER PROCEDURES FOR NEOPLASM W CC	2.2140	4.6	4.0	1
658	No	No	KIDNEY & URETER PROCEDURES FOR NEOPLASM W/O CC/MCC	1.6984	2.9	2.6	1
659	Yes	No	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W MCC	3.1785	9.6	7.2	1
660	Yes	No	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W CC	1.5093	3.7	2.9	1
661	Yes	No	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W/O CC/MCC	1.2660	2.2	1.9	1
662	No	No	MINOR BLADDER PROCEDURES W MCC	3.3004*	10.2	7.6	1
663	No	No	MINOR BLADDER PROCEDURES W CC	1.7437	5.0	3.2	1
664	No	No	MINOR BLADDER PROCEDURES W/O CC/MCC	1.1037	1.4	1.3	1
665	No	No	PROSTATECTOMY W MCC	3.7490*	12.2	9.5	1
666	No	No	PROSTATECTOMY W CC	1.7653*	6.3	4.4	1
667	No	No	PROSTATECTOMY W/O CC/MCC	0.9141	2.0	1.7	1
668	No	No	TRANSURETHRAL PROCEDURES W MCC	2.8049	5.6	3.9	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
669	No	No	TRANSURETHRAL PROCEDURES W CC	1.1192	2.3	1.9	1
670	No	No	TRANSURETHRAL PROCEDURES W/O CC/MCC	0.8657	1.9	1.6	1
671	No	No	URETHRAL PROCEDURES AGE >17 W CC/MCC	1.4161	3.8	2.5	1
672	No	No	URETHRAL PROCEDURES AGE >17 W/O CC/MCC	1.1310	2.1	1.8	1
673	No	No	OTHER KIDNEY & URINARY TRACT PROCEDURES W MCC	3.7961	11.4	6.5	1
674	No	No	OTHER KIDNEY & URINARY TRACT PROCEDURES W CC	2.4200	7.7	4.9	1
675	No	No	OTHER KIDNEY & URINARY TRACT PROCEDURES W/O CC/MCC	1.7094	2.5	1.9	1
676	No	No	NEONATE, BIRTHWT 2000-2499G, W SIGNIF O.R. PROC, W/O MULT MAJOR PROB	4.6698#	22.3	18.6	6
677	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W MULT MAJOR PROB	4.0653	17.2	13.5	3
678	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W MAJOR PROB	2.2353	12.8	10.7	3
679	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W MINOR PROB	1.6875	11.5	8.1	1
680	No	No	NEONATE, BIRTHWT 2000-2499G, W/O SIGNIF O.R. PROC, W OTHER PROB	0.9510	6.9	5.0	1
681	No	No	NEONATE, BIRTHWT >2499G, W SIGNIF O.R. PROC, W MULT MAJOR PROB	10.7061	35.1	23.1	3
682	Yes	No	RENAL FAILURE W MCC	1.7935	6.3	4.7	1
683	Yes	No	RENAL FAILURE W CC	1.0169	4.1	3.3	1
684	Yes	No	RENAL FAILURE W/O CC/MCC	0.5624	2.5	2.1	1
685	No	No	ADMIT FOR RENAL DIALYSIS	0.9724	4.6	3.6	1
686	No	No	KIDNEY & URINARY TRACT NEOPLASMS W MCC	2.3339	10.3	7.4	1
687	No	No	KIDNEY & URINARY TRACT NEOPLASMS W CC	1.4087	5.2	3.4	1
688	No	No	KIDNEY & URINARY TRACT NEOPLASMS W/O CC/MCC	0.4946	1.9	1.7	1
689	Yes	No	KIDNEY & URINARY TRACT INFECTIONS AGE >17 W MCC	1.2596	5.3	4.2	1
690	Yes	No	KIDNEY & URINARY TRACT INFECTIONS AGE >17 W/O MCC	0.6965	3.0	2.5	1
691	No	No	URINARY STONES W ESW LITHOTRIPSY W CC/MCC	1.4508	2.6	2.0	1
692	No	No	URINARY STONES W ESW LITHOTRIPSY W/O CC/MCC	1.0087	1.9	1.6	1
693	No	No	URINARY STONES W/O ESW LITHOTRIPSY W MCC	1.4039	4.6	3.7	1
694	No	No	URINARY STONES W/O ESW LITHOTRIPSY W/O MCC	0.6527	1.8	1.6	1
695	No	No	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 W MCC	0.8312#	3.7	3.0	1
696	No	No	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 W/O MCC	0.6303	2.9	2.3	1
697	No	No	URETHRAL STRICTURE AGE >17	0.7435#	2.6	2.0	1
698	Yes	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W MCC	2.1303	7.3	5.3	1
699	Yes	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W CC	0.8886	3.4	2.7	1
700	Yes	No	OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 W/O CC/MCC	0.5962	2.4	2.0	1
707	No	No	MAJOR MALE PELVIC PROCEDURES W CC/MCC	2.0401	3.5	2.6	1
708	No	No	MAJOR MALE PELVIC PROCEDURES W/O CC/MCC	1.7090	1.6	1.4	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
709	No	No	PENIS PROCEDURES W CC/MCC	2.8113	3.0	2.2	1
710	No	No	PENIS PROCEDURES W/O CC/MCC	1.4397	1.5	1.3	1
711	No	No	TESTES PROCEDURES AGE >17 W CC/MCC	1.6325#	5.5	3.7	1
712	No	No	TESTES PROCEDURES AGE >17 W/O CC/MCC	0.8967	1.9	1.5	1
713	No	No	TRANSURETHRAL PROSTATECTOMY W CC/MCC	1.1268	3.4	2.6	1
714	No	No	TRANSURETHRAL PROSTATECTOMY W/O CC/MCC	0.8092	1.5	1.4	1
715	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W CC/MCC	1.9487*	5.9	4.0	1
716	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W/O CC/MCC	0.9879	1.5	1.3	1
717	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W CC/MCC	1.8146*	6.1	4.4	1
718	No	No	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W/O CC/MCC	0.9042*	2.5	2.0	1
722	No	No	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W MCC	1.7465*	7.1	5.2	1
723	No	No	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W CC	1.1298*	5.0	3.9	1
724	No	No	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.7464*	2.8	2.1	1
725	No	No	BENIGN PROSTATIC HYPERTROPHY W MCC	1.3827*	6.0	4.6	1
726	No	No	BENIGN PROSTATIC HYPERTROPHY W/O MCC	1.1403	3.8	2.8	1
727	No	No	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM W MCC	1.2615	5.3	4.7	1
728	No	No	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM W/O MCC	0.6455	3.2	2.7	1
729	No	No	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES W CC/MCC	1.2102*	5.0	3.6	1
730	No	No	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES W/O CC/MCC	0.4601	1.9	1.5	1
734	No	No	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W CC/MCC	2.2389	5.1	4.2	1
735	No	No	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W/O CC/MCC	1.4941	2.2	1.7	1
736	No	No	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W MCC	4.1564	9.5	7.4	1
737	No	No	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W CC	1.9632	5.8	4.7	1
738	No	No	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W/O CC/MCC	1.3545	2.8	2.6	1
739	No	No	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W MCC	2.3475	5.6	4.6	1
740	No	No	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W CC	1.6268	3.0	2.4	1
741	No	No	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W/O CC/MCC	1.2663	1.8	1.6	1
742	No	No	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC/MCC	1.4565	2.9	2.5	1
743	No	No	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC/MCC	1.1147	1.8	1.6	1

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744	No	No	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W CC/MCC	1.3606	3.4	2.6	1
745	No	No	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W/O CC/MCC	0.9128	2.0	1.7	1
746	No	No	VAGINA, CERVIX & VULVA PROCEDURES W CC/MCC	1.2684	2.8	2.2	1
747	No	No	VAGINA, CERVIX & VULVA PROCEDURES W/O CC/MCC	0.9931	1.6	1.4	1
748	No	No	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES	1.1329	1.5	1.3	1
749	No	No	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES W CC/MCC	2.1365	5.5	4.2	1
750	No	No	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC	1.0876	2.8	2.3	1
754	No	No	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W MCC	3.1199	11.7	7.2	1
755	No	No	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W CC	1.0999	4.7	3.2	1
756	No	No	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.6884*	3.0	2.2	1
757	No	No	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM W MCC	1.7299*	7.4	5.9	1
758	No	No	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM W CC	0.8822	3.9	3.2	1
759	No	No	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.5936	2.7	2.4	1
760	No	No	MENSTRUAL & OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS W CC/MCC	0.7240	2.7	2.1	1
761	No	No	MENSTRUAL & OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS W/O CC/MCC	0.5156	1.8	1.6	1
765	No	No	CESAREAN SECTION W CC/MCC	0.8779	4.3	3.6	1
766	No	No	CESAREAN SECTION W/O CC/MCC	0.6835	3.0	2.8	1
767	No	No	VAGINAL DELIVERY W STERILIZATION &/OR D&C	0.7157	2.5	2.2	1
768	No	No	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	0.8228	3.5	2.6	1
769	No	No	POSTPARTUM & POST ABORTION DIAGNOSES W O.R. PROCEDURE	1.8782	4.2	2.7	1
770	No	No	ABORTION W D&C, ASPIRATION CURETTAGE OR HYSTEROTOMY	0.6290	1.5	1.3	1
774	No	No	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	0.4989	2.7	2.4	1
775	No	No	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	0.4056	2.1	2.0	1
776	No	No	POSTPARTUM & POST ABORTION DIAGNOSES W/O O.R. PROCEDURE	0.5003	2.7	2.2	1
777	No	No	ECTOPIC PREGNANCY	0.9249	1.8	1.5	1
778	No	No	THREATENED ABORTION	0.4523	3.7	2.4	1
779	No	No	ABORTION W/O D&C	0.3667	1.5	1.3	1
780	No	No	FALSE LABOR	0.1793	1.5	1.2	1
781	No	No	OTHER ANTEPARTUM DIAGNOSES W MEDICAL COMPLICATIONS	0.5243	3.2	2.2	1
782	No	No	OTHER ANTEPARTUM DIAGNOSES W/O MEDICAL COMPLICATIONS	0.3725	2.8	1.8	1
787	No	No	NEONATE, BIRTHWT >2499G, W SIGNIF O.R. PROC, W/O MULT MAJOR PROB	1.8199	7.7	4.8	1
788	No	No	NEONATE, BIRTHWT >2499G, W MINOR ABDOM PROCEDURE	0.6668	2.4	2.2	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
789	No	No	NEONATE, BIRTHWT >2499G, W/O SIGNIF O.R. PROC, W MULT MAJOR PROB	2.4964	9.9	6.6	1
790	No	No	NEONATE, BIRTHWT >2499G, W/O SIGNIF O.R. PROC, W MAJOR PROB	0.8259	4.8	3.6	1
791	No	No	NEONATE, BIRTHWT >2499G, W/O SIGNIF O.R. PROC, W MINOR PROB	0.3854	3.0	2.5	1
792	No	No	NEONATE, BIRTHWT >2499G, W/O SIGNIF O.R. PROC, W OTHER PROB	0.2198	2.6	2.3	1
793	No	No	NEONATAL AFTERCARE FOR WEIGHT GAIN	0.4179#	6.9	6.4	5
794	No	No	NEONATAL DIAGNOSIS, AGE > 28 DAYS	2.7102	13.3	6.2	1
795	No	No	NORMAL NEWBORN	0.1130	2.0	1.9	1
796	No	No	MULTIPLE, OTHER AND UNSPECIFIED CONGENITAL ANOMALIES, W CC/MCC	2.0840#	8.8	4.9	2
797	No	No	MULTIPLE, OTHER AND UNSPECIFIED CONGENITAL ANOMALIES, W/O CC/MCC	0.6160#	4.7	3.5	2
799	No	No	SPLENECTOMY AGE >17 W MCC	3.5970	9.3	6.2	1
800	No	No	SPLENECTOMY AGE >17 W CC	2.4782	5.5	4.4	1
801	No	No	SPLENECTOMY AGE >17 W/O CC/MCC	1.4484	2.9	2.5	1
802	No	No	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W MCC	5.7864	18.5	11.2	2
803	No	No	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W CC	2.5906	7.6	5.4	1
804	No	No	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W/O CC/MCC	1.2884	3.1	2.2	1
808	No	No	MAJOR HEMATOL/IMMUN DIAG EXC SICKLE CELL CRISIS & COAGUL W MCC	2.4673	8.0	6.0	1
809	No	No	MAJOR HEMATOL/IMMUN DIAG EXC SICKLE CELL CRISIS & COAGUL W CC	1.1544	4.8	3.7	1
810	No	No	MAJOR HEMATOL/IMMUN DIAG EXC SICKLE CELL CRISIS & COAGUL W/O CC/MCC	0.7233	3.1	2.6	1
811	No	No	RED BLOOD CELL DISORDERS AGE >17 W MCC	1.3786	6.0	4.2	1
812	No	No	RED BLOOD CELL DISORDERS AGE >17 W/O MCC	0.7498	3.2	2.4	1
813	No	No	COAGULATION DISORDERS	1.1790	3.3	2.4	1
814	No	No	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W MCC	1.7489	5.3	4.4	1
815	No	No	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W CC	0.9952	4.4	3.3	1
816	No	No	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W/O CC/MCC	0.5780	2.7	2.3	1
820	No	No	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W MCC	8.3975	17.2	12.0	2
821	No	No	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W CC	2.8856	6.1	3.8	1
822	No	No	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W/O CC/MCC	1.1926	2.5	1.9	1
823	No	No	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W MCC	4.9073	13.1	9.8	2
824	No	No	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W CC	2.6329	6.5	4.9	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
825	No	No	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W/O CC/MCC	1.4036	3.4	2.6	1
826	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W MCC	6.8411	17.6	12.7	2
827	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W CC	2.3960	5.8	4.5	1
828	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W/O CC/MCC	1.9601	3.8	3.1	1
829	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R. PROC W CC/MCC	3.0690	9.8	6.3	1
830	No	No	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R. PROC W/O CC/MCC	1.2894*	3.1	2.3	2
834	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17 W MCC	8.3374	26.1	18.3	2
835	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17 W CC	4.2455	15.5	10.1	1
836	No	No	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE AGE >17 W/O CC/MCC	2.1312	7.4	4.5	1
837	No	No	CHEMO W ACUTE LEUKEMIA AS SDX OR W HIGH DOSE CHEMO AGENT W MCC	5.2315	21.0	14.6	2
838	No	No	CHEMO W ACUTE LEUKEMIA AS SDX W CC OR HIGH DOSE CHEMO AGENT	3.0984	9.9	6.9	1
839	No	No	CHEMO W ACUTE LEUKEMIA AS SDX W/O CC/MCC	0.9286	4.2	3.7	1
840	Yes	No	LYMPHOMA & NON-ACUTE LEUKEMIA W MCC	5.8036	17.9	11.6	1
841	Yes	No	LYMPHOMA & NON-ACUTE LEUKEMIA W CC	2.1499	7.7	5.6	1
842	Yes	No	LYMPHOMA & NON-ACUTE LEUKEMIA W/O CC/MCC	1.2767	3.9	3.0	1
843	No	No	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W MCC	2.7390	8.8	6.4	1
844	No	No	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W CC	1.2285	5.5	4.2	1
845	No	No	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W/O CC/MCC	0.9801	3.7	3.0	1
846	No	No	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W MCC	2.5476	8.3	5.9	1
847	No	No	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W CC	1.1016	3.7	3.1	1
848	No	No	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W/O CC/MCC	0.7304	2.5	2.0	1
849	No	No	RADIOTHERAPY	1.0386	3.8	2.9	1
853	Yes	No	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W MCC	6.2013	16.0	11.5	2
854	Yes	No	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W CC	2.6111	7.7	5.8	1
855	Yes	No	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W/O CC/MCC	1.5068	4.9	3.8	1
856	Yes	No	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W MCC	4.3517	12.1	8.9	1
857	Yes	No	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W CC	1.7265	5.7	4.5	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
858	Yes	No	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W/O CC/MCC	1.2619	4.4	3.5	1
862	Yes	No	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS W MCC	1.5190	6.0	4.3	1
863	Yes	No	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS W/O MCC	0.8260	3.9	3.1	1
864	No	No	FEVER AGE > 17	0.7599	3.2	2.6	1
865	No	No	VIRAL ILLNESS AGE >17 W MCC	2.4624	6.6	5.0	1
866	No	No	VIRAL ILLNESS AGE >17 W/O MCC	0.7082	3.2	2.5	1
867	Yes	No	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W MCC	2.8008	8.0	5.9	1
868	Yes	No	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W CC	0.8353	3.9	3.2	1
869	Yes	No	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W/O CC/MCC	1.0525	3.3	2.6	1
870	Yes	No	SEPTICEMIA OR SEVERE SEPSIS W MV 96+ HOURS AGE >17	7.3004	15.4	13.2	4
871	Yes	No	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS AGE >17 W MCC	2.1280	6.7	5.0	1
872	Yes	No	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS AGE >17 W/O MCC	1.0181	4.3	3.6	1
876	No	No	O.R. PROCEDURE W PRINCIPAL DIAGNOSES OF MENTAL ILLNESS	3.1434*	12.3	7.6	2
880	No	No	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	0.6715	3.4	2.3	1
881	No	No	DEPRESSIVE NEUROSES	0.3728	4.1	3.0	1
882	No	No	NEUROSES EXCEPT DEPRESSIVE	0.4073	4.4	3.1	1
883	No	No	DISORDERS OF PERSONALITY & IMPULSE CONTROL	1.1213	12.5	7.1	1
884	Yes	No	ORGANIC DISTURBANCES & MENTAL RETARDATION	0.6942	3.7	2.5	1
885	No	No	PSYCHOSES	0.5920	6.3	4.7	1
886	No	No	BEHAVIORAL & DEVELOPMENTAL DISORDERS	0.6834	8.6	6.0	1
887	No	No	OTHER MENTAL DISORDER DIAGNOSES	1.1705	11.8	5.1	1
894	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AMA	0.3239	3.4	2.1	1
895	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W REHABILITATION THERAPY	0.8849	17.2	12.9	2
896	Yes	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W MCC	1.3759	5.5	3.9	1
898	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY AGE >21 W/O MCC	0.4656	4.6	3.3	1
899	No	No	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY AGE <=21 W/O MCC	0.3239	3.8	2.9	1
901	No	No	WOUND DEBRIDEMENTS FOR INJURIES W MCC	6.1262	14.6	12.1	3
902	No	No	WOUND DEBRIDEMENTS FOR INJURIES W CC	2.5387	11.4	5.7	1
903	No	No	WOUND DEBRIDEMENTS FOR INJURIES W/O CC/MCC	1.0069	3.2	2.4	1
904	No	No	SKIN GRAFTS FOR INJURIES W CC/MCC	4.6193	12.2	8.1	1
905	No	No	SKIN GRAFTS FOR INJURIES W/O CC/MCC	1.3148	4.4	3.5	1
906	No	No	HAND PROCEDURES FOR INJURIES	1.0918	2.4	1.9	1
907	Yes	No	OTHER O.R. PROCEDURES FOR INJURIES W MCC	4.3444	11.7	7.7	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
908	Yes	No	OTHER O.R. PROCEDURES FOR INJURIES W CC	1.8206	5.2	3.7	1
909	Yes	No	OTHER O.R. PROCEDURES FOR INJURIES W/O CC/MCC	1.1220	2.7	2.1	1
913	No	No	TRAUMATIC INJURY AGE >17 W MCC	1.2962#	4.5	3.0	1
914	No	No	TRAUMATIC INJURY AGE >17 W/O MCC	0.6998	2.5	2.0	1
915	No	No	ALLERGIC REACTIONS AGE >17 W MCC	1.2266	3.0	2.3	1
916	No	No	ALLERGIC REACTIONS AGE >17 W/O MCC	0.4403	2.0	1.6	1
917	Yes	No	POISONING & TOXIC EFFECTS OF DRUGS AGE >17 W MCC	1.3910	4.2	3.0	1
918	Yes	No	POISONING & TOXIC EFFECTS OF DRUGS AGE >17 W/O MCC	0.5246	2.1	1.7	1
919	No	No	COMPLICATIONS OF TREATMENT W MCC	1.6427	5.9	3.9	1
920	No	No	COMPLICATIONS OF TREATMENT W CC	0.8671	3.5	2.7	1
921	No	No	COMPLICATIONS OF TREATMENT W/O CC/MCC	0.5828	2.3	1.9	1
922	No	No	OTHER INJURY, POISONING & TOXIC EFFECT DIAG W MCC	2.0358	6.6	4.6	1
923	No	No	OTHER INJURY, POISONING & TOXIC EFFECT DIAG W/O MCC	0.5754	2.1	1.6	1
927	No	No	EXTENSIVE BURNS OR FULL THICKNESS BURNS W MV 96+ HRS W SKIN GRAFT	14.4636	28.2	17.2	1
928	No	No	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W CC/MCC	3.3560	10.3	7.3	1
929	No	No	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W/O CC/MCC	1.6960	6.0	4.0	1
933	No	No	EXTENSIVE BURNS OR FULL THICKNESS BURNS W MV 96+ HRS W/O SKIN GRAFT	2.5364*	5.4	2.6	1
934	No	No	FULL THICKNESS BURN W/O SKIN GRFT OR INHAL INJ	0.8463	3.8	2.7	1
935	No	No	NON-EXTENSIVE BURNS	0.7984	3.6	2.2	1
939	No	No	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W MCC	4.1370	21.3	15.2	2
940	No	No	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W CC	1.9205	6.3	3.6	1
941	No	No	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W/O CC/MCC	1.5540	2.4	1.9	1
945	Yes	No	REHABILITATION W CC/MCC	1.7003	13.5	10.2	2
946	Yes	No	REHABILITATION W/O CC/MCC	0.7659	7.1	5.9	1
947	Yes	No	SIGNS & SYMPTOMS W MCC	1.1085	4.5	3.1	1
948	Yes	No	SIGNS & SYMPTOMS W/O MCC	0.6717	2.8	2.2	1
949	No	No	AFTERCARE W CC/MCC	1.4623	7.1	2.8	1
950	No	No	AFTERCARE W/O CC/MCC	0.5744*	3.3	2.3	2
951	No	No	OTHER FACTORS INFLUENCING HEALTH STATUS	0.3282	2.1	1.8	1
955	No	No	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA	7.8483	13.3	9.7	1
956	Yes	No	LIMB REATTACHMENT, HIP & FEMUR PROC FOR MULTIPLE SIGNIFICANT TRAUMA	5.1394	10.5	8.3	2
957	No	No	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W MCC	7.2509	15.0	10.9	1
958	No	No	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W CC	4.2884	9.0	6.9	1

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DRG #	PAC XFER	PAC PAY	DESCRIPTION	TRICARE WEIGHT	ARITH MEAN LOS	GEOM MEAN LOS	SHORT-STAY THRESHOLD
959	No	No	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W/O CC/MCC	3.3039	6.8	5.5	1
963	No	No	OTHER MULTIPLE SIGNIFICANT TRAUMA W MCC	2.8375	8.6	4.8	1
964	No	No	OTHER MULTIPLE SIGNIFICANT TRAUMA W CC	1.5082	4.9	3.9	1
965	No	No	OTHER MULTIPLE SIGNIFICANT TRAUMA W/O CC/MCC	1.1027	3.2	2.7	1
969	No	No	HIV W EXTENSIVE O.R. PROCEDURE W MCC	6.2335*	17.2	12.8	2
970	No	No	HIV W EXTENSIVE O.R. PROCEDURE W/O MCC	2.6257*	8.3	5.8	2
974	No	No	HIV W MAJOR RELATED CONDITION W MCC	4.1817	13.9	8.7	1
975	No	No	HIV W MAJOR RELATED CONDITION W CC	1.5295	7.0	5.2	1
976	No	No	HIV W MAJOR RELATED CONDITION W/O CC/MCC	1.1418	4.9	3.1	1
977	No	No	HIV W OR W/O OTHER RELATED CONDITION	1.2334	4.2	3.2	1
981	Yes	No	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W MCC	5.0000	14.1	9.8	1
982	Yes	No	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W CC	2.6422	6.4	4.6	1
983	Yes	No	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC	1.2883	3.0	2.3	1
984	No	No	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W MCC	3.9176*	13.9	10.8	2
985	No	No	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W CC	2.3576*	8.7	6.4	2
986	No	No	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC	1.2188*	3.8	2.6	2
987	Yes	No	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W MCC	3.4713	11.6	7.9	1
988	Yes	No	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W CC	1.5720	5.6	4.1	1
989	Yes	No	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC	1.0496	2.5	1.8	1
998	No	No	PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS	0.0000*	0.0	0.0	1
999	No	No	UNGROUPABLE	0.0000*	0.0	0.0	1

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(3) w CC = with Complications or Comorbidities.
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- END -

Chapter 7

Mental Health

Section/Addendum	Subject/Addendum Title
1	Hospital Reimbursement - TRICARE Inpatient Mental Health Per Diem Payment System
2	Psychiatric Partial Hospitalization Program (PHP) Reimbursement
3	Substance Use Disorder Rehabilitation Facilities (SUDRFs) Reimbursement
4	Residential Treatment Center (RTC) Reimbursement
A	Table Of Regional Specific Rates For Psychiatric Hospitals And Units With Low TRICARE Volume - FY 2010 - FY 2012
B	Table Of Maximum Rates For Freestanding Psychiatric Partial Hospitalization Programs (PHPs) Reimbursement - FY 2010 - FY 2012
C	Guidelines For The Calculation Of Individual Residential Treatment Center (RTC) Per Diem Rates Figure 7.C-1 TMA Form 771
D (FY 2010)	TRICARE-Authorized Residential Treatment Centers (RTCs) - FY 2010
D (FY 2011)	TRICARE-Authorized Residential Treatment Centers (RTCs) - FY 2011
D (FY 2012)	TRICARE-Authorized Residential Treatment Centers (RTCs) - FY 2012

Hospital Reimbursement - TRICARE Inpatient Mental Health Per Diem Payment System

Issue Date: November 28, 1988
Authority: [32 CFR 199.14\(a\)](#)

1.0 APPLICABILITY

This policy is mandatory for reimbursement of services provided by either network or non-network providers. However, alternative network reimbursement methodologies are permitted when approved by the TRICARE Management Activity (TMA) and specifically included in the network provider agreement.

2.0 ISSUE

How is the TRICARE inpatient mental health per diem payment system to be used in determining reimbursement for psychiatric hospitals and psychiatric units of general acute hospitals that are exempt from the **Diagnosis** Related Groups (DRG)-based payment system?

3.0 POLICY

3.1 Inpatient Mental Health Per Diem Payment System

The inpatient mental health per diem payment system shall be used to reimburse for inpatient mental health hospital care in specialty psychiatric hospitals and psychiatric units of general acute hospitals that are exempt from the DRG-based payment system. The system uses two sets of per diems. One set of per diems applies to psychiatric hospitals and psychiatric units of general acute hospitals that have a relatively high number (25 or more per federal fiscal year) of TRICARE mental health discharges. For higher volume hospitals and units, the system uses hospital-specific per diem rates. The other set of per diems applies to psychiatric hospitals and units with a relatively low number (less than 25 per federal fiscal year) of TRICARE mental health discharges. For higher volume providers, the contractors are to maintain files which will identify when a provider becomes a high volume provider; the federal fiscal year when the provider had 25 or more TRICARE mental health discharges; the calculation of each provider's high volume rate; and the current high volume rate for the provider. For lower volume hospitals and units, the system uses regional per diems, and further provides for adjustments for area wage differences and Indirect Medical Education (IDME) costs and additional pass-through payments for direct medical education costs.

3.2 Applicability of the Inpatient Mental Health Per Diem Payment System

3.2.1 Facilities. The inpatient mental health per diem payment system applies to services covered that are provided in a Medicare DRG-exempt psychiatric hospitals and a Medicare DRG-

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Hospital Reimbursement - TRICARE Inpatient Mental Health Per Diem Payment System

exempt unit of a hospital. In addition, any psychiatric hospital that does not participate in Medicare, or any hospital that has a psychiatric unit that has not been so designated for exemption from Medicare DRG because the hospital does not participate in Medicare, must be designated as a psychiatric hospital or psychiatric specialty unit for purposes of the inpatient mental health per diem payment system upon demonstrating that it meets the same Medicare criteria. The contractor is responsible for requesting from a hospital that does not participate in Medicare sufficient information from that hospital which will allow it to make a determination as to whether the hospital meets the Medicare criteria in order to designate it as a DRG-exempt hospital or unit. The inpatient mental health per diem payment system does not apply to mental health services provided in non-psychiatric hospitals or non-psychiatric units. Substance use disorder rehabilitation facilities are not reimbursed under the inpatient mental health per diem payment system (see [Section 3](#)).

3.2.2 DRGs. All psychiatric hospitals' and psychiatric units' covered inpatient claims which are classified into a mental health DRG of 425 - 432 or a substance use disorder DRG of 433, DRGs 521 - 523, and DRGs 900 and 901 shall be subject to the TRICARE inpatient mental health per diem payment system. Effective October 1, 2008, all psychiatric hospitals and psychiatric units covered claims which are classified into a mental health DRG of 880 - 887 or a substance use disorder DRG of 894 - 896, 898, and 899 shall be subject to the TRICARE inpatient mental health per diem system.

3.2.3 State Waivers. The DRG-based payment system provides for state waivers for states utilizing state developed rates applicable to all payers, i.e., Maryland. Psychiatric hospitals and units in these states, may also qualify for the waiver; however, the per diem may not exceed the cap amount applicable to other higher volume hospitals.

3.3 Hospital-Specific Per Diems for Higher Volume Psychiatric Hospitals and Units

3.3.1 Hospital-Specific Per Diem. A hospital-specific per diem amount shall be calculated for each hospital or unit with a higher volume of TRICARE mental health discharges. The base period per diem amount shall be equal to the hospital's average daily charge for charges allowed by the government in the base period (July 1, 1987 through May 31, 1988). The average daily charge in the base period shall be calculated by reference to all TRICARE claims paid (processed) during the base period. The base period amount, however, may not exceed the cap.

3.3.2 Cap Amount. The cap amount is established at the 70th percentile.

CAP PER DIEM AMOUNT	FOR SERVICES RENDERED
832	October 1, 2005 through September 30, 2006
860	October 1, 2006 through September 30, 2007
889	October 1, 2007 through September 30, 2008
917	October 1, 2008 through September 30, 2009
936	October 1, 2009 through September 30, 2010
960	October 1, 2010 through September 30, 2011
989	October 1, 2011 through September 30, 2012

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3.3.3 Request for Recalculation of Per Diem Amount. Any psychiatric hospital or unit which has determined TMA calculated a hospital-specific per diem which differs by more than five (\$5) dollars from that calculated by the hospital or unit, may apply to the appropriate contractor for a recalculation unless the calculated rate has exceeded the cap amount described in the previous paragraph. The recalculation does not constitute an appeal, as the per diem rates are not appealable. Unless the provider can prove that the contractor calculation is incorrect, the contractor's calculation is final. The burden of proof shall be on the hospital or unit.

3.4 Regional Per Diems for Lower Volume Psychiatric Hospitals and Units

3.4.1 Regional Per Diem. Hospitals and units with a lower volume of TRICARE patients shall be paid on the basis of a regional per diem amount, adjusted for area wages and IDME. Base period regional per diems shall be calculated based upon all TRICARE/ lower volume hospitals' and units' claims paid (processed) during the base period. Each regional per diem amount shall be the quotient of all covered charges (without consideration of other health insurance payments) divided by all covered days of care, reported on all TRICARE claims from lower volume hospitals and units in the region paid (processed) during the base period, after having been standardized for IDME costs, and area wage indexes. Direct medical education costs shall be subtracted from the calculation. The regions shall be the same as the federal census regions. See [Addendum A](#), for the regional per diems used for hospitals and units with a lower volume of TRICARE patients.

3.4.2 Adjustments to Regional Per Diem Rates. Two adjustments shall be made to the regional per diem rates when applicable.

3.4.2.1 Wage Portion or Labor-Related Share. The wage portion or labor-related share is adjusted by the DRG-based area wage adjustment. See [Addendum A](#), for area wage adjustment rates. The calculated adjusted regional per diem is not to be rounded up to the next whole dollar.

3.4.2.2 IDME Adjustment. The IDME adjustment factors shall be calculated for teaching hospitals in the same manner as in the DRG-based payment system and applied to the applicable regional per diem rate for each day of the admission. For an exempt psychiatric unit in a teaching hospital, there should be a separate IDME adjustment factor for the unit (separate from the rest of the hospital) when medical education applies to the unit.

3.4.3 Reimbursement of Direct Medical Education Costs. In addition to payments made to lower volume hospitals and units, the government shall annually reimburse hospitals for actual direct medical education costs associated with TRICARE beneficiaries. This reimbursement shall be done pursuant to the same procedures as are applicable to the DRG-based payment system.

Note: No additional payment is to be made for capital costs. Such costs have been covered in the regional per diem rates which are based on charges.

3.5 Base Period and Update Factors

3.5.1 Hospital-Specific Per Diem Calculated Using Date of Payment. The base period for calculating the hospital-specific and regional per diems, as described above is federal FY 1988. The base period calculations shall be based on actual claims paid (processed) during the period July 1, 1987 through May 31, 1988, trended forward to September 30, 1988, using a factor of 1.1%.

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3.5.2 Hospital-Specific Per Diem Calculated Using Date of Discharge. Upon application by a higher volume hospital or unit to the appropriate contractor, the hospital or unit may have its hospital-specific base period calculations based on TRICARE claims with a date of discharge (rather than date of payment) between July 1, 1987 through May 31, 1988, if it has generally experienced unusual delays in TRICARE claims payments and if the use of such an alternative data base would result in a difference in the per diem amount of at least \$5.00 with the revised per diem not exceeding the cap amount. For this purpose, the unusual delays mean that the hospital's or unit's average time period between date of discharge and date of payment is more than two standard deviations (204 days) longer than the national average (94 days). The burden of proof shall be on the hospital.

3.5.3 Updating Hospital-Specific and Regional Per Diems. Per diems shall be updated by the Medicare update factor. Hospitals and units with hospital-specific rates will be notified of their respective rates prior to the beginning of each federal fiscal year by the contractors. New hospitals shall be notified by the contractor at such time as the hospital rate is determined. The actual amounts of each regional per diem that will apply in any federal fiscal year shall be published in the **Federal Register** prior to the start of that fiscal year. Initiating FY 2007, Medicare has determined a market basket and subsequent update factor specific to psychiatric facilities.

FISCAL YEAR	UPDATE FACTOR
2006	3.8%
2007	3.4%
2008	3.4%
2009	3.2%
2010	2.1%
2011	2.6%
2012	3.0%

3.6 Higher Volume Hospitals and Units

3.6.1 Higher Volume of TRICARE Mental Health Discharges and Hospital-Specific Per Diem Calculation

3.6.1.1 In any federal fiscal year in which a hospital or unit not previously classified as a higher volume hospital or unit has 25 or more TRICARE mental health discharges, that hospital or unit shall be considered to be a higher volume hospital or unit during the next federal fiscal year and all subsequent fiscal years. All other hospitals and units covered by the TRICARE inpatient mental health per diem payment system shall be considered lower volume hospitals and units.

3.6.1.2 The hospital-specific per diem amount shall be calculated in accordance with the above provisions, except that the base period average daily charge shall be deemed to be the hospital's or unit's average daily charge in the year in which the hospital or unit had 25 or more TRICARE mental health discharges, adjusted by the percentage change in average daily charges for all higher volume hospitals and units between the year in which the hospital or unit had 25 or more TRICARE mental health discharges and the base period. The base period amount, however, can not exceed the cap described in this section. Once a statistically valid rate is established based on a year in which the hospital or unit had at least 25 mental health discharges, it becomes the basis for all

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future rates. The number of mental health discharges thereafter have no bearing on the hospital-specific per diem.

3.6.1.2.1 The TRICARE contractor shall be requested at least annually to submit to the TMA Office of Medical Benefits and Reimbursement Branch (MB&RB) a listing of high volume providers.

3.6.1.2.2 Percent of change and Deflator Factor (DF).

FOR 12 MONTHS ENDED:	PERCENT OF CHANGE	DF
September 30, 1991	63.18%	1.6318
September 30, 1992	85.81%	1.8581
September 30, 1993	94.48%	1.9448
September 30, 1994	106.94%	2.0694
September 30, 1995	117.20%	2.1720
September 30, 1996	123.83%	2.2383
September 30, 1997	126.20%	2.2620
September 30, 1998	116.93%	2.1693
September 30, 1999	129.19%	2.2919
September 30, 2000	128.82%	2.2882
September 30, 2001	131.83%	2.3183
September 30, 2002	141.57%	2.4157
September 30, 2003	159.90%	2.5990
September 30, 2004	171.39%	2.7139
September 30, 2005	185.93%	2.8593
September 30, 2006	200.58%	2.9724
September 30, 2007	205.85%	2.9785
September 30, 2008	233.63%	3.3363
September 30, 2009	246.31%	3.4631
September 30, 2010	234.40%	3.3440

3.6.2 New Hospitals and Units

3.6.2.1 The inpatient mental health per diem payment system has a special retrospective payment provision for new hospitals and units. A new hospital is one which meets the Medicare requirements under Tax Equity and Fiscal Responsibility Act (TEFRA) rules. Such hospitals qualify for the Medicare exemption from the rate of increase ceiling applicable to new hospitals which are DRG-exempt psychiatric hospitals. Any new hospital or unit that becomes a higher volume hospital or unit may additionally, upon application to the appropriate contractor, receive a retrospective adjustment. The retrospective adjustment shall be calculated so that the hospital or unit receives the same government share payments it would have received had it been designated a higher volume hospital or unit for the federal fiscal year in which it first had 25 or more TRICARE mental health discharges. This provision also applies to the preceding fiscal year (if it had any TRICARE

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patients during the preceding fiscal year). A retrospective payment shall be required if payments were originally made at a lower regional per diem. This payment will be the result of an adjustment based upon each claim processed during the retrospective period for which an adjustment is needed, and will be subject to the claims processing standards.

3.6.2.2 By definition, a new hospital is an institution that has operated as the type of facility (or the equivalent thereof) for which it is certified in the Medicare and or TRICARE programs under the present and previous ownership for less than three full years. A change in ownership in itself does not constitute a new hospital.

3.6.2.3 Such new hospitals must agree not to bill beneficiaries for any additional cost-share beyond that determined initially based on the regional rate.

3.6.3 Request for a Review of Higher or Lower Volume Classification

Any hospital or unit which TMA improperly fails to classify as a higher or lower volume hospital or unit may apply to the appropriate contractor for such a classification. The hospital or unit shall have the burden of proof.

3.7 Payment for Hospital Based Professional Services

3.7.1 Lower Volume Hospitals and Units. Lower volume hospitals and units may not bill separately for hospital based professional services; payment for those services is included in the per diems.

3.7.2 Higher Volume Hospitals and Units. Higher volume hospitals and units, whether they billed separately for hospital based professional services or included those services in the hospital's or unit's charges, shall continue the practice in effect during the period July 1, 1987 to May 31, 1988 (or other data base period used for calculating the hospital's or unit's per diem), except that any such hospital or unit may change its prior practice (and obtain an appropriate revision in its per diem) by providing to the appropriate contractor notice of its request to change its billing procedures for hospital-based professional services.

3.8 Leave Days

3.8.1 No Payment. The government shall not pay (including holding charges) for days where the patient is absent on leave (including therapeutic absences) from the specialty psychiatric hospital or unit. The hospital must identify these days when claiming reimbursement.

3.8.2 Does Not Constitute a Discharge/Do Not Count Toward Day Limit. The government shall not count a patient's departure for a leave of absence as a discharge in determining whether a facility should be classified as a higher volume hospital.

3.9 Exemptions from the TRICARE Inpatient Mental Health Per Diem Payment System

3.9.1 Providers Subject to the DRG-Based Payment System. Providers of inpatient care which are neither psychiatric hospitals nor psychiatric units as described earlier, or which otherwise qualify under that discussion, are exempt from the inpatient mental health per diem payment system.

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3.9.2 Services Which Group into Mental Health DRG. Admissions to psychiatric hospitals and units for operating room procedures involving a principal diagnosis of mental illness (services which group into DRG 424 prior to October 1, 2008, or services which group into DRG 876 on or after October 1, 2008) are exempt from the per diem payment system. They will be reimbursed on the basis of billed charges.

3.9.3 Non-Mental Health Procedures. Admissions for non-mental health procedures that group into non-mental health DRG, in specialty psychiatric hospitals and units are exempt from the per diem payment system. They will be reimbursed on the basis of billed charges.

3.9.4 Sole Community Hospital (SCH). Any hospital which has qualified for special treatment under the Medicare Prospective Payment System (PPS) as a SCH and has not given up that classification is exempt. For additional information on SCHs, refer to [Chapter 14, Section 1](#).

3.9.5 Hospital Outside the 50 States, the District of Columbia, or Puerto Rico. A hospital is exempt if it is not located in one of the 50 states, the District of Columbia, or Puerto Rico.

3.9.6 Billed charges and set rates. The allowable costs for authorized care in all hospitals not subject to the DRG-based payment system or the inpatient mental health per diem payment system shall be determined on the basis of billed charges or set rates.

- END -

Table Of Regional Specific Rates For Psychiatric Hospitals
And Units With Low TRICARE Volume - FY 2010 - FY 2012

UNITED STATES CENSUS REGIONS	FY 2010 REGIONAL RATES 10/01/09 - 09/30/10	FY 2011 REGIONAL RATES 10/01/10 - 09/30/11	FY 2012 REGIONAL RATES 10/01/11 - 09/30/12
NORTHEAST:			
New England (ME, NH, VT, MA, RI, CT)	\$745	\$764	\$787
Mid-Atlantic (NY, NJ, PA)	\$718	\$736	\$758
MIDWEST:			
East North Central (OH, IN, IL, MI, WI)	\$620	\$636	\$655
West North Central (MN, IA, MO, ND, SD, NE, KS)	\$585	\$600	\$618
SOUTH:			
South Atlantic (DE, MD, DC, VA, WV, NC, SC, GA, FL)	\$738	\$757	\$780
East South Central (KY, TN, AL, MS)	\$790	\$810	\$834
West South Central (AR, LA, TX, OK)	\$673	\$690	\$711
WEST:			
Mountain (MT, ID, WY, CO, NM, AZ, UT, NV)	\$672	\$689	\$710
Pacific (WA, OR, CA, AK, HI)	\$794	\$814	\$838
Puerto Rico	\$506	\$519	\$535

Note: This table reflects maximum rates.

For FYs 2010, 2011, and 2012: For wage index values greater than 1.0, the wage portion or labor related share subject to the area wage adjustment is 68.8%. The non-labor related share is 31.2%. For wage index values less than or equal to 1.0, the wage portion or labor related share subject to the area wage adjustment is 62%. The non-labor related share is 38%. Utilize the appropriate year DRG wage index file for area wage adjustment calculations.

For FY 2010/Beneficiary Cost-Share: Beneficiary cost-share (other than active duty members) for care paid on a basis of a regional per diem rate is the lower of \$197 per day or 25% of the hospital billed charges effective for services rendered on or after October 1, 2009.

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Table Of Regional Specific Rates For Psychiatric Hospitals And Units With Low
TRICARE Volume - FY 2010 - FY 2012

For FY 2011/Beneficiary Cost-Share: Beneficiary cost-share (other than active duty members) for care paid on a basis of a regional per diem rate is the lower of \$202 per day or 25% of the hospital billed charges effective for services rendered on or after October 1, 2010.

For FY 2012/Beneficiary Cost-Share: Beneficiary cost-share (other than active duty members) for care paid on a basis of a regional per diem rate is the lower of \$208 per day or 25% of the hospital billed charges effective for services rendered on or after October 1, 2011.

- END -

Chapter 7

Addendum B

Table Of Maximum Rates For Freestanding Psychiatric **Partial Hospitalization Programs (PHPs)** Reimbursement - **FY 2010 - FY 2012**

UNITED STATES CENSUS REGIONS	FULL-DAY RATE (6 HOURS OR MORE)			HALF-DAY RATE (3-5 HOURS)		
	10/01/09-09/30/10	10/01/10-09/30/11	10/01/11-09/30/12	10/01/09-09/30/10	10/01/10-09/30/11	10/01/11-09/30/12
NORTHEAST:						
New England (ME, NH, VT, MA, RI, CT)	\$299	\$306	\$315	\$222	\$227	\$234
Mid-Atlantic (NY, NJ, PA)	\$325	\$333	\$343	\$244	\$250	\$258
MIDWEST:						
East North Central (OH, IN, IL, MI, WI)	\$286	\$293	\$302	\$213	\$218	\$225
West North Central (MN, IA, MO, ND, SD, NE, KS)	\$286	\$293	\$302	\$213	\$218	\$225
SOUTH:						
South Atlantic (DE, MD, DC, VA, WV, NC, SC, GA, FL)	\$307	\$314	\$323	\$231	\$237	\$244
East South Central (KY, TN, AL, MS)	\$332	\$340	\$350	\$250	\$256	\$264
West South Central (AR, LA, TX, OK)	\$332	\$340	\$350	\$250	\$256	\$264
WEST:						
Mountain (MT, ID, WY, CO, NM, AZ, UT, NV)	\$334	\$343	\$353	\$253	\$259	\$267
Pacific (WA, OR, CA, AK, HI)	\$328	\$337	\$347	\$246	\$252	\$260
Puerto Rico	\$213	\$218	\$225	\$161	\$165	\$170
Days of three hours or less: no payment authorized.						

Note: This table reflects maximum rates.

- END -

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Chapter 7, Addendum C

Guidelines For The Calculation Of Individual Residential Treatment Center (RTC) Per Diem Rates

Step 2: Sum the patient days in column 2, which in this particular example equals **2,804** patient days.

Step 3: Calculate 33-1/3% of the total patient days by multiplying total patient days figured in Step 2 by 0.3333.

(2,804 patient days x 0.3333 = 934.57 patient days)

Step 4: Go down in the cumulative patient day column (column 3) to where 33-1/3% of the patient days lie (934.57).

Step 5: Go across to the rate in column 1 in which 33-1/3 of the cumulative patient days fall. This represents the base year/period facility rate. The base year/period rate in this example would be **\$317** (refer to table above).

Example: RTC H provided the following third-party reimbursement data under Item #9 of the TMA Form 771 as part of the certification process:

ITEM #9 OF TMA FORM 771 (MODIFIED FOR EXAMPLE)

THIRD-PARTY PAYERS	RATE ACCEPTED	PATIENT DAYS
AA	\$425	201
BB ***	288	600
CC ***	235	63
DD ***	215	1,040
EE	365	276
FF	515	168
GG ***	288	346
HH	489	538
II	425	319
JJ	450	132

***** - State or local government agency.**

Step 1: Array the rates in descending order from lowest to highest with corresponding patient days paid at each rate:

(1) RATES	(2) PATIENT DAYS	(3) CUMULATIVE PATIENT DAYS	(4) PERCENT CUMULATIVE PATIENT DAYS
\$215	1,040	1,040	28.2%
235	63	1,103	29.9
288	946	2,049	55.6
365	276	2,325	63.1
425	520	2,845	77.2
450	132	2,977	80.8

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Guidelines For The Calculation Of Individual Residential Treatment Center (RTC) Per Diem Rates

(1) RATES	(2) PATIENT DAYS	(3) CUMULATIVE PATIENT DAYS	(4) PERCENT CUMULATIVE PATIENT DAYS
489	538	3,515	95.4
515	168	3,683	100.0
Total	3,683 Patient Days		

Step 2: Sum the patient days in column 2, which in this particular example equals **3,683** patient days.

Step 3: Calculate 33-1/3% of the total patient days by multiplying total patient days figured in Step 2 by 0.3333.

$$(3,683 \text{ patient days} \times 0.3333 = 1,227.54 \text{ patient days})$$

Step 4: Go down in the cumulative patient day column (column 3) to where 33-1/3% of the patient days lie (1,227.54).

Step 5: Go across to the rate in column 1 in which 33-1/3 of the cumulative patient days fall. This represents the base year/period facility rate. The base year/period rate in this example would be **\$288** (refer to table above).

6.3 The above methodology for deriving the rate at 33-1/3 of the total patient days would only be applicable under the following conditions:

6.3.1 If the rates in Item #9 were all-inclusive for payment of RTC care (i.e., included all payments for institutional and professional services), no additional charges would be added on to the facility rates from Item #10 of the data collection form. The rate established in Step 5 of the above examples would represent the all-inclusive base year rate prior to the inflationary adjustment.

6.3.2 If the charges for additional services listed in Item #10 applied to all of the third-party payers identified in Item #9 (i.e., all of the third-party payers listed in Item #9 allowed payment for additional services outside the facility rate-- rate derived at 33-1/3% of total RTC patient days during the base period-- at the charges PPD established in Item #10), the sum of these charges are added to the facility rate prior to inflationary adjustment.

6.4 In cases where payment of additional services listed in Item #10 do not apply to all of the third-party payers listed in Item #9, or payments vary among the payers for the same services, the sum of the charges PPD for additional services (reported in the last column of Item #10) must be added to the facility rate prior to establishing the rate derived at 33-1/3% of the total patient days. The following example provides the methodology for incorporating these additional charges into the base year rate computations:

Example: RTC I has provided a revised TMA Form 771 indicating that payments for additional services had been overlooked in completing its initial form. The following service charges PPD were provided under Item #10 with the proviso that the additional

Chapter 7

Addendum D (FY 2011)

TRICARE-Authorized Residential Treatment Centers (RTCs) -
FY 2011

The rates in this Addendum will be used for payment of claims for services rendered on or after October 1, 2010. The rates were adjusted by the lesser of the FY 2010 Medicare update factor (2.6%) or the amount that brought the rate up to the new cap amount of \$777.

This listing is for RTC per diem rates only. It does not reflect a facility's current status as a TRICARE-authorized RTC. Information regarding a facility's current status as an authorized provider can be obtained from the appropriate contractor.

FACILITY	TRICARE RATE
ALASKA	
DeBarr Residential Treatment Center Frontline Hospital, LLC 1500 DeBarr Circle Anchorage, AK 99508 EIN: 72-1539254	777.00
ARKANSAS	
BHC Pinnacle Pointe Hospital 11501 Financial Center Parkway Little Rock, AR 72211 EIN: 62-1658502	772.00
COLORADO	
PSI Cedar Springs Hospital, Inc. Cedar Springs Behavioral Health Systems, Inc 2135 Southgate Road Colorado Springs, CO 80906 EIN: 74-3081810	777.00
CBR Youth Connect 28071 Hwy 109 La Junta, CO 81050 EIN: 84-0500375	715.00
FLORIDA	
LaAmistad Behavioral Health Services 1650 Park Avenue North Maitland, FL 32751 EIN: 58-1791069	737.00

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FACILITY	TRICARE RATE
Manatee Palms Youth Service 4480 51st Street West Bradenton, FL 34210 EIN: 65-0816927	692.00
The National Deaf Academy, LLC RTC 19650 Hwy 441 Mt. Dora, FL 32757 EIN 59-3653865	777.00
River Point Behavioral Health TBJ Behavioral, LLC 6300 Beach Blvd Jacksonville, FL 32216 EIN: 20-4865566	599.00
Tampa Bay Academy Youth & Family Centered Services of Florida, Inc 12012 Boyette Road Riverview, FL 33569 EIN: 52-1955335	605.00
Ten Broeck Ocala Behavioral 3130 SW 27th Ave Ocala, FL 34474 EIN: 32-0235544	397.00
GEORGIA	
Costal Harbor Treatment Center UHS of Savannah, LLC 1150 Cornell Avenue Savannah, GA 31406 EIN: 20-0931196	429.00
HAWAII	
Kahi Mohala Behavioral Health Sutter Health Pacific 91-2301 Fort Weaver Road Ewa Beach, HI 96706 EIN: 99-0298651	777.00
Queen's Medical Center/Family Treatment Ctr The Queen's Healthcare System 1301 Punchbowl Honolulu, HI 96813 EIN: 99-0073524	750.00

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 TRICARE-Authorized Residential Treatment Centers (RTCs) - FY 2011

FACILITY	TRICARE RATE
IDAHO	
Eastern Idaho Regional Medical Center - Behavioral Health Center 2280 E 25th Street Idaho Falls, ID 83404 EIN: 82-0436622	352.00
Kootenai Medical Center 2003 Lincoln Way Coeur d'Alene, ID 83814 EIN: 82-0231746	447.00
INDIANA	
Michiana Behavioral Health Center HHC Indiana, Inc 1800 North Oak Road Plymouth, IN 46563 EIN: 20-0768028	438.00
Valle Vista Hospital, LLC Valle Vista Health System 898 East Main Street Greenwood, IN 46143 EIN: 62-1740366	464.00
KENTUCKY	
Ten Broeck Hospital -- Louisville KMI Acquisition, LLC 8521 LaGrange Road Louisville, KY 40242 EIN: 20-5048153	699.00
Ten Broeck Hospital -- Dupont TBD Acquisition, LLC Louisville, KY 40207 EIN: 20-5048087	657.00
MARYLAND	
Adventist Healthcare Inc dba Adventist Behavior Health 14901 Broschart Road Rockville, MD 20850 EIN: 52-1532556	403.00
MISSOURI	
Crittenton Children's Center 10918 Elm Avenue Kansas City, MO 64134 EIN: 44-0545808	334.00

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TRICARE-Authorized Residential Treatment Centers (RTCs) - FY 2011

FACILITY	TRICARE RATE
Heartland Behavioral Health Services, Inc Great Plains Hospital, Inc 1500 W. Asland Nevada, MO 64772 EIN: 43-1328523	409.00
Lakeland Regional Hospital Lakeland Hospital Acquisition Corporation 440 South Market Avenue Springfield, MO 65806 EIN: 58-2291915	418.00
MONTANA	
Shodair Children's Hospital Montana Children's Home & Hospital 2755 Colonial Drive Helena, MT 59601 EIN: 81-0231789	447.00
NEVADA	
Willow Springs Center Willow Springs, LLC 690 Edison Way Reno, NV 89502 EIN: 62-1814471	777.00
NEW MEXICO	
BHC Lovelace Sandia Health System BHC Mesilla Valley Hospital, LLC 3751 Del Ray Blvd Las Cruces, NM 88012 EIN: 20-2612295	328.00
NORTH CAROLINA	
Brynn Marr Hospital 192 Village Drive Jacksonville, NC 28546 EIN: 56-1317433	476.00
OHIO	
Belmont Pines Hospital 615 Churchill-Hubbard Road Youngstown, OH 44505 EIN: 62-1658523	410.00
SOUTH CAROLINA	
Palmetto Lowcountry Behavioral Health 2777 Speissegger Drive Charleston, SC 29405 EIN: 57-1101380	446.00

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TRICARE-Authorized Residential Treatment Centers (RTCs) - FY 2011

FACILITY	TRICARE RATE
Three Rivers Residential Treatment - Midlands Campus 200 Ermine Road West Columbia, SC 29170 EIN: 57-0884924	745.00
TENNESSEE	
Compass Intervention Center Keystone Memphis, LLC 7900 Lowrance Road Memphis, TN 38125 EIN: 62-1837606	462.00
Youth Villages, Inc 3320 Brother Blvd Memphis, TN 38133 EIN: 58-1716970	777.00
TEXAS	
Cedar Crest Hospital and RTC HMTH Cedar Crest, LLC 3500 South IOH - 35 Belton, TX 76513 EIN: 20-1915868	714.00
Laurel Ridge Treatment Center Texas Laurel Ridge Hospital 17720 Corporate Woods Drive San Antonio, TX 78259 EIN: 43-2002326	777.00
Meridell Achievement Center 12550 W Hwy 29 Liberty Hill, TX 78642 EIN 74-1655289	648.00
San Marcos Treatment Center Texas San Marcos Treatment, LP 120 Bert Brown Road San Marcos, TX 78666 EIN: 43-2002231	729.00
Southwest Mental Health Center 8535 Tom Slick Drive San Antonio, TX 78229-3363 EIN: 74-1153067	669.00
UTAH	
UHS of Provo Canyon, Inc 1350 East 750 North Orem, UT 84097 EIN: 23-3044423	460.00

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FACILITY	TRICARE RATE
VIRGINIA	
Cumberland Hospital for Children and Adolescents dba Cumberland Hospital 9407 Cumberland Road New Kent, VA 23124 EIN: 02-0567575	762.00
Hallmark Youthcare - Richmond 12800 West Creek Parkway Richmond, VA 23238 EIN: 58-2156548	772.00
Newport News Behavioral Health Center 17579 Warwick Blvd Newport News, VA 23603 EIN: 32-0066225	456.00
The Pines Residential Treatment Center - Kempsville, The 860 Kempsville Road Norfolk, VA 23502 EIN: 54-1465094	648.00
Poplar Springs West HHC Poplar Springs, Inc 350 Poplar Drive Petersburg, VA 23805 EIN: 20-0959684	748.00
Riverside Health Behavioral Center 2244 Executive Drive Hampton, VA 23666 EIN: 54-1979321	507.00
WASHINGTON	
Tamarack Center 2901 West Fort George Wright Drive Spokane, WA 99224 EIN: 91-1216841	644.00

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Chapter 7

Addendum D (FY 2012)

**TRICARE-Authorized Residential Treatment Centers (RTCs) -
FY 2012**

The rates in this Addendum will be used for payment of claims for services rendered on or after October 1, 2011. The rates were adjusted by the lesser of the FY 2012 Medicare update factor (3.0%) or the amount that brought the rate up to the new cap amount of \$801.

This listing is for RTC per diem rates only. It does not reflect a facility's current status as a TRICARE-authorized RTC. Information regarding a facility's current status as an authorized provider can be obtained from the appropriate contractor.

FACILITY	TRICARE RATE
ALASKA	
DeBarr Residential Treatment Center Frontline Hospital, LLC 1500 DeBarr Circle Anchorage, AK 99508 EIN: 72-1539254	801.00
ARKANSAS	
BHC Pinnacle Pointe Hospital 11501 Financial Center Parkway Little Rock, AR 72211 EIN: 62-1658502	796.00
COLORADO	
CBR Youth Connect 28071 Hwy 109 La Junta, CO 81050 EIN: 84-0500375	737.00
PSI Cedar Springs Hospital, Inc. Cedar Springs Behavioral Health Systems, Inc 2135 Southgate Road Colorado Springs, CO 80906 EIN: 74-3081810	801.00
FLORIDA	
LaAmistad Behavioral Health Services 1650 Park Avenue North Maitland, FL 32751 EIN: 58-1791069	760.00

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FACILITY	TRICARE RATE
Manatee Palms Youth Service 4480 51st Street West Bradenton, FL 34210 EIN: 65-0816927	713.00
The National Deaf Academy, LLC RTC 19650 Hwy 441 Mt. Dora, FL 32757 EIN 59-3653865	801.00
River Point Behavioral Health TBJ Behavioral, LLC 6300 Beach Blvd Jacksonville, FL 32216 EIN: 20-4865566	617.00
Tampa Bay Academy Youth & Family Centered Services of Florida, Inc 12012 Boyette Road Riverview, FL 33569 EIN: 52-1955335	624.00
GEORGIA	
Costal Harbor Treatment Center UHS of Savannah, LLC 1150 Cornell Avenue Savannah, GA 31406 EIN: 20-0931196	442.00
HAWAII	
Kahi Mohala Behavioral Health Sutter Health Pacific 91-2301 Fort Weaver Road Ewa Beach, HI 96706 EIN: 99-0298651	801.00
Queen's Medical Center/Family Treatment Ctr The Queen's Healthcare System 1301 Punchbowl Honolulu, HI 96813 EIN: 99-0073524	773.00
IDAHO	
Eastern Idaho Regional Medical Center - Behavioral Health Center 2280 E 25th Street Idaho Falls, ID 83404 EIN: 82-0436622	363.00
Kootenai Medical Center 2003 Lincoln Way Coeur d'Alene, ID 83814 EIN: 82-0231746	461.00

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FACILITY	TRICARE RATE
INDIANA	
Michiana Behavioral Health Center HHC Indiana, Inc 1800 North Oak Road Plymouth, IN 46563 EIN: 20-0768028	452.00
Valle Vista Hospital, LLC Valle Vista Health System 898 East Main Street Greenwood, IN 46143 EIN: 62-1740366	478.00
KENTUCKY	
Ten Broeck Hospital -- Dupont TBD Acquisition, LLC Louisville, KY 40207 EIN: 20-5048087	677.00
Ten Broeck Hospital -- Louisville KMI Acquisition, LLC 8521 LaGrange Road Louisville, KY 40242 EIN: 20-5048153	720.00
MARYLAND	
Adventist Healthcare Inc dba Adventist Behavior Health 14901 Broschart Road Rockville, MD 20850 EIN: 52-1532556	416.00
MISSOURI	
Crittenton Children's Center 10918 Elm Avenue Kansas City, MO 64134 EIN: 44-0545808	345.00
Heartland Behavioral Health Services, Inc Great Plains Hospital, Inc 1500 W. Asland Nevada, MO 64772 EIN: 43-1328523	422.00
Lakeland Regional Hospital Lakeland Hospital Acquisition Corporation 440 South Market Avenue Springfield, MO 65806 EIN: 58-2291915	431.00

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FACILITY	TRICARE RATE
MONTANA	
Shodair Children's Hospital Montana Children's Home & Hospital 2755 Colonial Drive Helena, MT 59601 EIN: 81-0231789	461.00
NEVADA	
Willow Springs Center Willow Springs, LLC 690 Edison Way Reno, NV 89502 EIN: 62-1814471	801.00
NEW MEXICO	
BHC Lovelace Sandia Health System BHC Mesilla Valley Hospital, LLC 3751 Del Ray Blvd Las Cruces, NM 88012 EIN: 20-2612295	338.00
NORTH CAROLINA	
Brynn Marr Hospital 192 Village Drive Jacksonville, NC 28546 EIN: 56-1317433	491.00
OHIO	
Belmont Pines Hospital 615 Churchill-Hubbard Road Youngstown, OH 44505 EIN: 62-1658523	423.00
SOUTH CAROLINA	
Palmetto Lowcountry Behavioral Health 2777 Speissegger Drive Charleston, SC 29405 EIN: 57-1101380	460.00
Three Rivers Residential Treatment - Midlands Campus 200 Ermine Road West Columbia, SC 29170 EIN: 57-0884924	768.00
TENNESSEE	
Compass Intervention Center Keystone Memphis, LLC 7900 Lowrance Road Memphis, TN 38125 EIN: 62-1837606	476.00

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FACILITY	TRICARE RATE
Youth Villages, Inc 3320 Brother Blvd Memphis, TN 38133 EIN: 58-1716970	801.00
TEXAS	
Cedar Crest Hospital and RTC HMTH Cedar Crest, LLC 3500 South IOH - 35 Belton, TX 76513 EIN: 20-1915868	736.00
Laurel Ridge Treatment Center Texas Laurel Ridge Hospital 17720 Corporate Woods Drive San Antonio, TX 78259 EIN: 43-2002326	801.00
Meridell Achievement Center 12550 W Hwy 29 Liberty Hill, TX 78642 EIN 74-1655289	668.00
San Marcos Treatment Center Texas San Marcos Treatment, LP 120 Bert Brown Road San Marcos, TX 78666 EIN: 43-2002231	751.00
Southwest Mental Health Center 8535 Tom Slick Drive San Antonio, TX 78229-3363 EIN: 74-1153067	690.00
UTAH	
UHS of Provo Canyon, Inc 1350 East 750 North Orem, UT 84097 EIN: 23-3044423	474.00
VIRGINIA	
Cumberland Hospital for Children and Adolescents dba Cumberland Hospital 9407 Cumberland Road New Kent, VA 23124 EIN 02-0567575	785.00
Hallmark Youthcare - Richmond 12800 West Creek Parkway Richmond, VA 23238 EIN: 58-2156548	796.00

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FACILITY	TRICARE RATE
Newport News Behavioral Health Center 17579 Warwick Blvd Newport News, VA 23603 EIN: 32-0066225	470.00
The Pines Residential Treatment Center - Kempsville, The 860 Kempsville Road Norfolk, VA 23502 EIN: 54-1465094	668.00
Poplar Springs West HHC Poplar Springs, Inc 350 Poplar Drive Petersburg, VA 23805 EIN: 20-0959684	771.00
Riverside Health Behavioral Center 2244 Executive Drive Hampton, VA 23666 EIN: 54-1979321	523.00
WASHINGTON	
Tamarack Center 2901 West Fort George Wright Drive Spokane, WA 99224 EIN: 91-1216841	664.00

- END -

Chapter 8

Skilled Nursing Facilities (SNFs)

Section/Addendum	Subject/Addendum Title
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Section/Addendum	Subject/Addendum Title
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Example Of Computation of Adjusted Prospective Payment System (PPS) Rates And Skilled Nursing Facility (SNF) Payment - FY 2012

Using the SNF XYZ, the following shows the adjustments made to the Federal per diem rate to compute the provider's actual per diem PPS payment. SNF XYZ's total PPS payment would equal \$40,053.06. The Labor and Non-Labor columns are derived from [Addendum D \(FY 2012\)](#). Wage index is derived from [Addendum E \(FY 2012\)](#).

SNF XYZ: LOCATED IN CEDAR RAPIDS, IA (URBAN CBSA 16300) WAGE INDEX: 0.8831

RUG-IV GROUP	LABOR	WAGE INDEX	ADJ. LABOR	NON-LABOR	ADJ. RATE	PERCENT ADJ.	SNF DAYS	PAYMENT
RVX	\$450.97	0.8831	\$397.99	\$205.39	\$603.38	\$603.38	14	\$8,447.32
ES2	\$361.85	0.8831	\$319.55	\$164.92	\$484.47	\$484.47	30	\$14,534.10
RHA	\$227.35	0.8831	\$200.77	\$103.62	\$304.39	\$304.39	16	\$4,870.24
CC2	\$209.59	0.8831	\$185.09	\$95.52	\$280.61	\$639.79	10	\$6,397.90
IA2	\$144.49	0.8831	\$127.60	\$65.85	\$193.45	\$193.45	30	\$5,803.50
							100	\$40,053.06

* Reflects a 128% adjustment from section 511 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003. All CC2 days should be considered to be for a resident with AIDS.

Source: 76 FR 48508; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities For FY 2012.

- END -

Case-Mix Adjusted Federal Rates For Skilled Nursing Facilities (SNFs) - FY 2012

FIGURE 8.D.2012-1 CASE-MIX ADJUSTED FEDERAL RATES FOR URBAN SNFs BY LABOR AND NON-LABOR COMPONENT (RUG-66 RATES)

Source: 76 FR 48505; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Final Rule. August 8, 2011.

RUG-IV CATEGORY	TOTAL RATE	LABOR PORTION	NON-LABOR PORTION	RUG-IV CATEGORY	TOTAL RATE	LABOR PORTION	NON-LABOR PORTION
RUX	737.08	506.32	230.76	HB1	332.42	228.35	104.07
RUL	721.01	495.28	225.73	LE2	412.73	283.52	129.21
RVX	656.06	450.67	205.39	LE1	345.26	237.17	108.09
RVL	588.60	404.33	184.27	LD2	396.66	272.48	124.18
RHX	594.39	408.30	186.09	LD1	332.42	228.35	104.07
RHL	530.14	364.17	165.97	LC2	348.48	239.38	109.10
RMX	545.24	374.54	170.70	LC1	293.87	201.87	92.00
RML	500.27	343.65	156.62	LB2	330.81	227.24	103.57
RLX	478.85	328.94	149.91	LB1	281.02	193.04	87.98
RUC	558.79	383.85	174.94	CE2	367.75	252.62	115.13
RUB	558.79	383.85	174.94	CE1	338.84	232.76	106.08
RUA	467.23	320.95	146.28	CD2	348.48	239.38	109.10
RVC	479.38	329.30	150.08	CD1	319.57	219.52	100.05
RVB	415.13	285.17	129.96	CC2	305.11	209.59	95.52
RVA	413.52	284.06	129.46	CC1	282.62	194.14	88.48
RHC	417.71	286.94	130.77	CB2	282.62	194.14	88.48
RHB	375.95	258.25	117.70	CB1	261.74	179.80	81.94
RHA	330.97	227.35	103.62	CA2	239.26	164.35	74.91
RMC	366.95	252.07	114.88	CA1	223.19	153.32	69.87
RMB	344.47	236.63	107.84	BB2	253.71	174.28	79.43
RMA	283.43	194.70	88.73	BB1	242.47	166.56	75.91
RLB	356.78	245.08	111.70	BA2	210.34	144.49	65.85
RLA	229.89	157.92	71.97	BA1	200.71	137.87	62.84
ES3	672.93	462.26	210.67	PE2	338.84	232.76	106.08
ES2	526.77	361.85	164.92	PE1	322.78	221.73	101.05
ES1	470.55	323.23	147.32	PD2	319.57	219.52	100.05
HE2	454.49	312.20	142.29	PD1	303.50	208.48	95.02
HE1	377.39	259.24	118.15	PC2	274.59	188.62	85.97
HD2	425.57	292.34	133.23	PC1	261.74	179.80	81.94
HD1	354.92	243.79	111.11	PB2	232.83	159.94	72.89
HC2	401.48	275.79	125.69	PB1	223.19	153.32	69.87
HC1	335.63	230.55	105.08	PA2	192.68	132.36	60.32
HB2	396.66	272.48	124.18	PA1	184.64	126.83	57.81

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Case-Mix Adjusted Federal Rates For Skilled Nursing Facilities (SNFs) - FY 2012

FIGURE 8.D.2012-2 CASE-MIX ADJUSTED FEDERAL RATES FOR RURAL SNFs BY LABOR AND NON-LABOR COMPONENT (RUG-66 RATES)

Source: 76 FR 48506; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Final Rule. August 8, 2011.

RUG-IV CATEGORY	TOTAL RATE	LABOR PORTION	NON-LABOR PORTION	RUG-IV CATEGORY	TOTAL RATE	LABOR PORTION	NON-LABOR PORTION
RUX	754.11	518.02	236.09	LD2	385.95	265.12	120.83
RUL	738.76	507.48	231.28	LD1	324.56	222.95	101.61
RVX	662.59	455.15	207.44	LC2	339.91	233.49	106.42
RVL	598.14	410.88	187.26	LC1	287.73	197.65	90.08
RHX	593.39	407.62	185.77	LB2	323.03	221.90	101.13
RHL	532.01	365.45	166.56	LB1	275.45	189.21	86.24
RMX	539.27	370.44	168.83	CE2	358.32	246.14	112.18
RML	496.30	340.92	155.38	CE1	330.70	227.17	103.53
RLX	469.37	322.42	146.95	CD2	339.91	233.49	106.42
RUC	583.77	401.01	182.76	CD1	312.28	214.51	97.77
RUB	583.77	401.01	182.76	CC2	298.47	205.03	93.44
RUA	496.30	340.92	155.38	CC1	276.99	190.27	86.72
RVC	493.78	339.19	154.59	CB2	276.99	190.27	86.72
RVB	432.40	297.03	135.37	CB1	257.04	176.57	80.47
RVA	430.87	295.98	134.89	CA2	235.55	161.81	73.74
RHC	424.59	291.66	132.93	CA1	220.21	151.27	68.94
RHB	384.69	264.26	120.43	BB2	249.37	171.30	78.07
RHA	341.72	234.74	106.98	BB1	238.62	163.92	74.70
RMC	368.93	253.43	115.50	BA2	207.93	142.83	65.10
RMB	347.44	238.67	108.77	BA1	198.72	136.51	62.21
RMA	289.13	198.61	90.52	PE2	330.70	227.17	103.53
RLB	352.74	242.31	110.43	PE1	315.35	216.62	98.73
RLA	231.51	159.03	72.48	PD2	312.28	214.51	97.77
ES3	649.90	446.44	203.46	PD1	296.94	203.98	92.96
ES2	510.25	350.51	159.74	PC2	269.32	185.00	84.32
ES1	456.54	313.61	142.93	PC1	257.04	176.57	80.47
HE2	441.19	303.07	138.12	PB2	229.42	157.60	71.82
HE1	367.53	252.47	115.06	PB1	220.21	151.27	68.94
HD2	413.57	284.09	129.48	PA2	191.05	131.24	59.81
HD1	346.05	237.71	108.34	PA1	183.38	125.97	57.41
HC2	390.55	268.28	122.27				
HC1	327.63	225.06	102.57				
HB2	385.95	265.12	120.83				
HB1	324.56	222.95	101.61				
LE2	401.29	275.66	125.63				
LE1	336.84	231.39	105.45				

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Case-Mix Adjusted Federal Rates For Skilled Nursing Facilities (SNFs) - FY 2012

FIGURE 8.D.2012-3 CASE-MIX ADJUSTED FEDERAL RATES AND ASSOCIATED INDEXES - URBAN (RUG-66 RATES)

Source: 76 FR 48501; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Final Rule. August 8, 2011.

RUG-IV CATEGORY	NURSING INDEX	THERAPY INDEX	NURSING COMPONENT	THERAPY COMPONENT	NON-CASE MIX THERAPY COMPONENT	NON-CASE MIX COMPONENT	TOTAL RATE
RUX	2.67	1.87	428.86	226.25	.....	81.97	737.08
RUL	2.57	1.87	412.79	226.25	.....	81.97	721.01
RVX	2.61	1.28	419.22	154.87	.....	81.97	656.06
RVL	2.19	1.28	351.76	154.84	.....	81.97	588.60
RHX	2.55	0.85	409.58	102.84	.....	81.97	594.39
RHL	2.15	0.85	345.33	102.84	.....	81.97	530.14
RMX	2.47	0.55	396.73	66.54	.....	81.97	545.24
RML	2.19	0.55	351.76	66.54	.....	81.97	500.27
RLX	2.26	0.28	363.00	33.88	.....	81.97	478.85
RUC	1.56	1.87	250.57	226.25	.....	81.97	558.79
RUB	1.56	1.87	250.57	226.25	.....	81.97	558.79
RUA	0.99	1.87	159.01	226.25	.....	81.97	467.23
RVC	1.51	1.28	242.54	154.87	.....	81.97	479.38
RVB	1.11	1.28	178.29	154.87	.....	81.97	415.13
RVA	1.10	1.28	176.68	154.87	.....	81.97	413.52
RHC	1.45	0.85	232.90	102.84	.....	81.97	417.71
RHB	1.19	0.85	191.14	102.84	.....	81.97	375.95
RHA	0.91	0.85	146.16	102.84	.....	81.97	330.97
RMC	1.36	0.55	218.44	66.54	.....	81.97	366.95
RMB	1.22	0.55	195.96	66.54	.....	81.97	344.47
RMA	0.84	0.55	134.92	66.54	.....	81.97	283.43
RLB	1.50	0.28	240.93	33.88	.....	81.97	356.78
RLA	0.71	0.28	114.04	33.29	.....	81.97	229.89
ES3	3.58	.....	575.02	.....	15.94	81.97	672.93
ES2	2.67	.....	428.86	.....	15.94	81.97	526.77
ES1	2.32	.....	372.64	.....	15.94	81.97	470.55
HE2	2.22	.....	356.58	.....	15.94	81.97	454.49
HE1	1.74	.....	279.48	.....	15.94	81.97	377.39
HD2	2.04	.....	327.66	.....	15.94	81.97	425.57
HD1	1.60	.....	256.99	.....	15.94	81.97	354.90
HC2	1.89	.....	303.57	.....	15.94	81.97	401.48
HC1	1.48	.....	237.72	.....	15.94	81.97	335.63
HB2	1.86	298.75	15.94	81.97	396.66
HB1	1.46	234.51	15.94	81.97	332.42
LE2	1.96	314.82	15.94	81.97	412.73

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Case-Mix Adjusted Federal Rates For Skilled Nursing Facilities (SNFs) - FY 2012

FIGURE 8.D.2012-3 CASE-MIX ADJUSTED FEDERAL RATES AND ASSOCIATED INDEXES - URBAN (RUG-66 RATES) (CONTINUED)

Source: 76 FR 48501; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Final Rule. August 8, 2011.

RUG-IV CATEGORY	NURSING INDEX	THERAPY INDEX	NURSING COMPONENT	THERAPY COMPONENT	NON-CASE MIX THERAPY COMPONENT	NON-CASE MIX COMPONENT	TOTAL RATE
LE1	1.54	.....	247.35	.....	15.94	81.97	345.26
LD2	1.86	.....	298.75	.....	15.94	81.97	396.66
LD1	1.46	.....	234.51	.....	15.94	81.97	332.42
LC2	1.56	.....	250.57	.....	15.94	81.97	348.48
LC1	1.22	.....	195.96	.....	15.94	81.97	293.87
LB2	1.45	.....	232.90	.....	15.94	81.97	330.81
LB1	1.14	.....	183.11	.....	15.94	81.97	281.02
CE2	1.68	.....	269.84	.....	15.94	81.97	367.75
CE1	1.50	.....	240.93	.....	15.94	81.97	338.84
CD2	1.56	.....	250.57	.....	15.94	81.97	348.48
CD1	1.38	.....	221.66	.....	15.94	81.97	319.57
CC2	1.29	.....	207.20	.....	15.94	81.97	305.11
CC1	1.15	.....	184.71	.....	15.94	81.97	282.62
CB2	1.15	.....	184.71	.....	15.94	81.97	282.62
CB1	1.02	.....	163.83	.....	15.94	81.97	261.74
CA2	0.88	.....	141.35	.....	15.94	81.97	239.26
CA1	0.78	.....	125.28	.....	15.94	81.97	223.19
BB2	0.97	.....	155.80	.....	15.94	81.97	253.71
BB1	0.90	.....	144.56	.....	15.94	81.97	242.47
BA2	0.70	.....	112.43	.....	15.94	81.97	210.34
BA1	0.64	.....	102.80	.....	15.94	81.97	200.71
PE2	1.50	.....	240.93	.....	15.94	81.97	338.84
PE1	1.40	.....	224.87	.....	15.94	81.97	322.78
PD2	1.38	.....	221.66	.....	15.94	81.97	319.57
PD1	1.28	.....	205.59	.....	15.94	81.97	303.50
PC2	1.10	.....	176.68	.....	15.94	81.97	274.59
PC1	1.02	.....	163.83	.....	15.94	81.97	261.74
PB2	0.84	.....	134.92	.....	15.94	81.97	232.93
PB1	0.78	125.28	15.94	81.97	223.19
PA2	0.59	94.77	15.94	81.97	192.68
PA1	0.54	86.73	15.94	81.97	184.64

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Chapter 8, Addendum D (FY 2012)

Case-Mix Adjusted Federal Rates For Skilled Nursing Facilities (SNFs) - FY 2012

FIGURE 8.D.2012-4 CASE-MIX ADJUSTED FEDERAL RATES AND ASSOCIATED INDEXES - RURAL (RUG-66 RATES)

Source: 76 FR 48501; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Final Rule. August 8, 2011.

RUG-IV CATEGORY	NURSING INDEX	THERAPY INDEX	NURSING COMPONENT	THERAPY COMPONENT	NON-CASE MIX THERAPY COMPONENT	NON-CASE MIX COMPONENT	TOTAL RATE
RUX	2.67	1.87	409.74	260.88	.....	83.49	754.11
RUL	2.57	1.87	394.39	260.88	.....	83.49	738.76
RVX	2.61	1.28	400.53	178.57	.....	83.49	662.59
RVL	2.19	1.28	336.08	178.57	.....	83.49	598.14
RHX	2.55	0.85	391.32	118.58	.....	83.49	593.39
RHL	2.15	0.85	329.94	118.58	.....	83.49	532.01
RMX	2.47	0.55	379.05	76.73	.....	83.49	539.27
RML	2.19	0.55	336.08	76.73	.....	83.49	496.30
RLX	2.26	0.28	346.83	39.06	.....	83.49	469.37
RUC	1.56	1.87	239.40	260.88	.....	83.49	583.77
RUB	1.56	1.87	239.40	260.88	.....	83.49	583.77
RUA	0.99	1.87	151.93	260.88	.....	83.49	496.30
RVC	1.51	1.28	231.72	178.57	.....	83.49	493.78
RVB	1.11	1.28	170.34	178.57	.....	83.49	432.40
RVA	1.10	1.28	168.81	178.57	.....	83.49	430.87
RHC	1.45	0.85	222.52	118.58	.....	83.49	242.59
RHB	1.19	0.85	182.62	118.58	.....	83.49	384.69
RHA	0.91	0.85	139.65	118.58	.....	83.49	341.72
RMC	1.36	0.55	208.71	76.73	.....	83.49	368.93
RMB	1.22	0.55	187.22	76.73	.....	83.49	347.44
RMA	0.84	0.55	128.91	76.73	.....	83.49	289.13
RLB	1.50	0.28	230.19	39.06	.....	83.49	352.74
RLA	0.71	0.28	108.96	39.06	.....	83.49	231.51
ES3	3.58	.....	549.39	.....	17.02	83.49	649.90
ES2	2.67	.....	409.74	.....	17.02	83.49	510.25
ES1	2.32	.....	356.03	.....	17.02	83.49	456.54
HE2	2.22	.....	340.68	.....	17.02	83.49	441.19
HE1	1.74	.....	267.02	.....	17.02	83.49	367.53
HD2	2.04	.....	313.06	.....	17.02	83.49	413.57
HD1	1.60	.....	245.54	.....	17.02	83.49	346.05
HC2	1.89	.....	290.04	.....	17.02	83.49	390.55
HC1	1.48	.....	227.12	.....	17.02	83.49	327.63
HB2	1.86	285.44	17.02	83.49	385.95
HB1	1.46	224.05	17.02	83.49	324.56
LE2	1.96	300.78	17.02	83.49	401.29

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Chapter 8, Addendum D (FY 2012)

Case-Mix Adjusted Federal Rates For Skilled Nursing Facilities (SNFs) - FY 2012

FIGURE 8.D.2012-4 CASE-MIX ADJUSTED FEDERAL RATES AND ASSOCIATED INDEXES - RURAL (RUG-66 RATES) (CONTINUED)

Source: 76 FR 48501; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Final Rule. August 8, 2011.

RUG-IV CATEGORY	NURSING INDEX	THERAPY INDEX	NURSING COMPONENT	THERAPY COMPONENT	NON-CASE MIX THERAPY COMPONENT	NON-CASE MIX COMPONENT	TOTAL RATE
LE1	1.54	.....	236.33	.....	17.02	83.49	336.84
LD2	1.86	.....	285.44	.....	17.02	83.49	385.95
LD1	1.46	.....	224.05	.....	17.02	83.49	324.56
LC2	1.56	.....	239.40	.....	17.02	83.49	339.91
LC1	1.22	.....	187.22	.....	17.02	83.49	287.73
LB2	1.45	.....	222.52	.....	17.02	83.49	323.03
LB1	1.14	.....	174.94	.....	17.02	83.49	275.45
CE2	1.68	.....	257.81	.....	17.02	83.49	358.32
CE1	1.50	.....	230.19	.....	17.02	83.49	330.70
CD2	1.56	.....	239.40	.....	17.02	83.49	339.91
CD1	1.38	.....	211.77	.....	17.02	83.49	312.28
CC2	1.29	.....	197.96	.....	17.02	83.49	298.47
CC1	1.15	.....	176.48	.....	17.02	83.49	276.99
CB2	1.15	.....	176.48	.....	17.02	83.49	276.99
CB1	1.02	.....	156.53	.....	17.02	83.49	257.04
CA2	0.88	.....	135.04	.....	17.02	83.49	235.55
CA1	0.78	.....	119.70	.....	17.02	83.49	220.21
BB2	0.97	.....	148.86	.....	17.02	83.49	249.37
BB1	0.90	.....	138.11	.....	17.02	83.49	238.62
BA2	0.70	.....	107.42	.....	17.02	83.49	207.93
BA1	0.64	.....	98.21	.....	17.02	83.49	198.72
PE2	1.50	.....	230.19	.....	17.02	83.49	330.70
PE1	1.40	.....	214.84	.....	17.02	83.49	315.35
PD2	1.38	.....	211.77	.....	17.02	83.49	312.28
PD1	1.28	.....	196.43	.....	17.02	83.49	296.94
PC2	1.10	.....	168.81	.....	17.02	83.49	269.32
PC1	1.02	.....	156.53	.....	17.02	83.49	257.04
PB2	0.84	.....	128.91	.....	17.02	83.49	229.42
PB1	0.78	.....	119.70	.....	17.02	83.49	220.21
PA2	0.59	.....	90.54	.....	17.02	83.49	191.05
PA1	0.54	.....	82.87	.....	17.02	83.49	183.38

- END -

Chapter 8

Addendum E (FY 2012)

Wage Indexes For Urban Areas For Skilled Nursing Facilities (SNFs) Based On Core-Based Statistical Area (CBSA) Labor Market Areas - FY 2012

Source: 76 FR 48541; Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012.

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX
10180	Abilene, TX Callahan, TX Jones, TX Taylor, TX	0.8444		Carbon, PA Lehigh, PA Northampton, PA			Butts, GA Carroll, GA Cherokee, GA	
10380	Aguadilla-Isabela-San Sebastian, PR Aguada, PR Aguadilla, PR Anasco, PR Isabela, PR Lares, PR Moca, PR Rincon, PR San Sebastian, PR	0.3611	11020	Altoona, PA	0.8917		Clayton, GA Cobb, GA	
			11100	Blair, PA Amarillo, TX Armstrong, TX Carson, TX Potter, TX Randall, TX	0.8714		Coweta, GA Dawson, GA DeKalb, GA Douglas, GA Fayette, GA	
			11180	Ames, IA	1.0009		Forsyth, GA Fulton, GA	
			11260	Anchorage, AK Anchorage Municipality, AK Matanuska-Susitna Borough, AK	1.2133		Gwinnett, GA Haralson, GA Heard, GA	
10420	Akron, OH Portage, OH Summit, OH	0.8814	11300	Anderson, IN Madison, IN	0.9266		Henry, GA Jasper, GA	
10500	Albany, GA Baker, GA Dougherty, GA Lee, GA Terrell, GA Worth, GA	0.8687	11340	Anderson, SC Anderson, SC	0.8524		Lamar, GA Meriwether, GA	
			11460	Ann Arbor, MI Washtenaw, MI	1.0128		Newton, GA Paulding, GA	
			11500	Anniston-Oxford, AL Calhoun, AL	0.7979		Pickens, GA Pike, GA	
10580	Albany-Schenectady-Troy, NY Albany, NY Rensselaer, NY Saratoga, NY Schenectady, NY Schoharie, NY	0.8680	11540	Appleton, WI Calumet, WI Outagamie, WI	0.9226		Rockdale, GA Spalding, GA Walton, GA	
			11700	Asheville, NC Buncombe, NC Haywood, NC	0.8918	12100	Atlantic City-Hammonton, NJ Atlantic, NJ	1.1033
10740	Albuquerque, NM Bernalillo, NM Sandoval, NM Torrance, NM Valencia, NM	0.9550		Henderson, NC Madison, NC		12220	Auburn-Opelika, AL Lee, AL	0.7877
			12020	Athens-Clarke, GA Clarke, GA Madison, GA	0.9642	12260	Augusta-Richmond, GA-SC Burke, GA Columbia, GA McDuffie, GA	0.9529
10780	Alexandria, LA Grant, LA Rapides, LA	0.8026		Oconee, GA Oglethorpe, GA			Richmond, GA Aiken, SC	
10900	Allentown-Bethlehem-Easton, PA-NJ Warren, NJ	0.9260	12060	Atlanta-Sandy Springs-Marietta, GA Barrow, GA Bartow, GA	0.9575	12420	Edgefield, SC Austin-Round Rock, TX Bastrop, TX	0.9535
<p>¹ At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>			<p>¹ At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>			<p>¹ At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>		

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Wage Indexes For Urban Areas For Skilled Nursing Facilities (SNFs) Based On
Core-Based Statistical Area (CBSA) Labor Market Areas - FY 2012

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX
	Caldwell, TX			Shelby, AL			Camden, NJ	
	Hays, TX			Walker, AL			Gloucester, NJ	
	Travis, TX		13900	Bismarck, ND	0.7232	15940	Canton-Massillon, OH	0.8939
	Williamson, TX			Burleigh, ND			Carroll, OH	
12540	Bakersfield, CA	1.1817		Morton, ND			Stark, OH	
	Kern, CA		13980	Blacksburg-Christiansburg-Radford, VA	0.8281	15980	Cape Coral-Fort Myers, FL	0.9341
12580	Baltimore-Towson, MD	1.0151		Giles, VA			Lee, FL	
	Anne Arundel, MD			Montgomery, VA		16020	Cape Girardeau-Jackson, MO-IL	0.8672
	Baltimore, MD			Pulaski, VA			Alexander, IL	
	Carroll, MD			Radford City, VA			Bollinger, MO	
	Harford, MD		14020	Bloomington, IN	0.8725	16180	Cape Girardeau, MO	
	Howard, MD			Greene, IN			Carson City, NV	1.0597
	Queen Anne's, MD			Monroe, IN			Carson City, NV	
	Baltimore City, MD			Owen, IN		16220	Casper, WY	1.0117
12620	Bangor, ME	0.9979		Bloomington-Normal, IL	0.9477	16300	Natrona, WY	
	Penobscot, ME		14060	McLean, IL			Cedar Rapids, IA	0.8831
12700	Barnstable Town, MA	1.2838		Boise City-Nampa, ID	0.9279		Benton, IA	
	Barnstable, MA		14260	Ada, ID			Jones, IA	
12940	Baton Rouge, LA	0.8523		Boise, ID			Linn, IA	
	Ascension, LA			Canyon, ID		16580	Champaign-Urbana, IL	0.9890
	East Baton Rouge, LA			Gem, ID			Champaign, IL	
	East Feliciana, LA			Owyhee, ID			Ford, IL	
	Iberville, LA		14484	Boston-Quincy, MA	1.2283	16620	Charleston, WV	0.8144
	Livingston, LA			Norfolk, MA			Boone, WV	
	Pointe Coupee, LA			Plymouth, MA			Clay, WV	
	St. Helena, LA			Suffolk, MA			Kanawha, WV	
	West Baton Rouge, LA		14500	Boulder, CO	1.0086		Lincoln, WV	
	West Feliciana, LA			Boulder, CO			Putnam, WV	
12980	Battle Creek, MI	0.9935		Bowling Green, KY	0.8599	16700	Charleston-North Charleston-Summerville, SC	0.9063
	Calhoun, MI		14540	Edmonson, KY			Berkeley, SC	
13020	Bay City, MI	0.8927		Warren, KY			Charleston, SC	
	Bay, MI		14740	Bremerton-Silverdale, WA	1.1288		Dorchester, SC	
13140	Beaumont-Port Arthur, TX	0.8723		Kitsap, WA		16740	Charlotte-Gastonia-Concord, NC-SC	0.9321
	Hardin, TX		14860	Bridgeport-Stamford-Norwalk, CT	1.2914		Anson, NC	
	Jefferson, TX			Fairfield, CT			Cabarrus, NC	
	Orange, TX		15180	Brownsville-Harlingen, TX	0.9183		Gaston, NC	
13380	Bellingham, WA	1.1748		Cameron, TX			Mecklenburg, NC	
	Whatcom, WA		15260	Brunswick, GA	0.9068		Union, NC	
13460	Bend, OR	1.1395		Brantley, GA			York, SC	
	Deschutes, OR			Glynn, GA			Charlottesville, VA	0.9188
13644	Bethesda-Frederick-Gaithersburg, MD	1.0305		McIntosh, GA		16820	Albemarle, VA	
	Frederick, MD		15380	Buffalo-Niagara Falls, NY	0.9750		Fluvanna, VA	
	Montgomery, MD			Erie, NY			Greene, VA	
13740	Billings, MT	0.8576		Niagara, NY			Nelson, VA	
	Carbon, MT		15500	Burlington, NC	0.8665		Charlottesville City, VA	
	Yellowstone, MT			Alamance, NC			Chattanooga, TN-GA	0.8740
13780	Binghamton, NY	0.8731	15540	Burlington-South Burlington, VT	1.0021	16860	Catoosa, GA	
	Broome, NY			Chittenden, VT			Dade, GA	
	Tioga, NY			Franklin, VT			Walker, GA	
13820	Birmingham-Hoover, AL	0.8436		Grand Isle, VT			Hamilton, TN	
	Bibb, AL		15764	Cambridge-Newton-Framingham, MA	1.1210		Marion, TN	
	Blount, AL			Middlesex, MA			Sequatchie, TN	
	Chilton, AL		15804	Camden, NJ	1.0202		Cheyenne, WY	0.9844
	Jefferson, AL			Burlington, NJ		16940		
	St. Clair, AL							

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Core-Based Statistical Area (CBSA) Labor Market Areas - FY 2012

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX
16974	Laramie, WY Chicago-Naperville-Joliet, IL Cook, IL DeKalb, IL DuPage, IL Grundy, IL Kane, IL Kendall, IL McHenry, IL Will, IL	1.0600		Fairfield, SC Kershaw, SC Lexington, SC Richland, SC Saluda, SC		19380	Scott, IA Dayton, OH Greene, OH Miami, OH Montgomery, OH Preble, OH	0.9281
17020	Chico, CA Butte, CA	1.1094	17980	Columbus, GA-AL Russell, AL Chattahoochee, GA Harris, GA Marion, GA Muscogee, GA	0.9040	19460	Decatur, AL Lawrence, AL Morgan, AL	0.7334
17140	Cincinnati-Middletown, OH-KY-IN Dearborn, IN Franklin, IN Ohio, IN Boone, KY Bracken, KY Campbell, KY Gallatin, KY Grant, KY Kenton, KY Pendleton, KY Brown, OH Butler, OH Clermont, OH Hamilton, OH Warren, OH	0.9430	18020	Columbus, IN Bartholomew, IN	0.9723	19660	Deltona-Daytona Beach-Ormond Beach, FL Volusia, FL	0.8865
17300	Clarksville, TN-KY Christian, KY Trigg, KY Montgomery, TN Stewart, TN	0.8193	18140	Columbus, OH Delaware, OH Fairfield, OH Franklin, OH Licking, OH Madison, OH Morrow, OH Pickaway, OH Union, OH	0.9994	19740	Denver-Aurora, CO Adams, CO Arapahoe, CO Broomfield, CO Clear Creek, CO Denver, CO Douglas, CO Elbert, CO Gilpin, CO Jefferson, CO Park, CO	1.0647
17420	Cleveland, TN Bradley, TN Polk, TN	0.7674	18580	Corpus Christi, TX Aransas, TX Nueces, TX San Patricio, TX	0.8677	19780	Des Moines-West Des Moines, IA Dallas, IA Guthrie, IA Madison, IA Polk, IA Warren, IA	0.9801
17460	Cleveland-Elyria-Mentor, OH Cuyahoga, OH Geauga, OH Lake, OH Lorain, OH Medina, OH	0.8941	18700	Corvallis, OR Benton, OR	1.0898	19804	Detroit-Livonia-Dearborn, MI Wayne, MI	0.9511
17660	Coeur d'Alene, ID Kootenai, ID	0.9367	18880	Crestview-Fort Walton Beach-Destin, FL Okaloosa, FL	0.8961	20020	Dothan, AL Geneva, AL Henry, AL Houston, AL	0.7130
17780	College Station-Bryan, TX Brazos, TX Burlleson, TX Robertson, TX	0.9690	19060	Cumberland, MD-WV Allegany, MD Mineral, WV	0.7825	20100	Dover, DE Kent, DE	0.9909
17820	Colorado Springs, CO El Paso, CO Teller, CO	0.9846	19124	Dallas-Plano-Irving, TX Collin, TX Dallas, TX Delta, TX Denton, TX Ellis, TX Hunt, TX Kaufman, TX Rockwall, TX	0.9844	20220	Dubuque, IA Dubuque, IA	0.8698
17860	Columbia, MO Boone, MO Howard, MO	0.8105	19140	Dalton, GA Murray, GA Whitfield, GA	0.8374	20260	Duluth, MN-WI Carlton, MN St. Louis, MN	1.0335
17900	Columbia, SC Calhoun, SC	0.8758	19180	Danville, IL Vermilion, IL	0.9832	20500	Durham, NC Chatham, NC Durham, NC Orange, NC Person, NC	0.9699
			19260	Danville, VA Pittsylvania, VA Danville City, VA	0.7896	20740	Eau Claire, WI Chippewa, WI Eau Claire, WI	0.9597
			19340	Davenport-Moline-Rock Island, IA-IL Henry, IL Mercer, IL Rock Island, IL	0.9056	20764	Edison-New Brunswick, NJ Middlesex, NJ Monmouth, NJ	1.0868
<p>At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>			<p>At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>			<p>At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>		

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Core-Based Statistical Area (CBSA) Labor Market Areas - FY 2012

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX
	Ocean, NJ		22660	Fort Collins-Loveland, CO	0.9876		Oconto, WI	
20940	Somerset, NJ	0.9601		Larimer, CO		24660	Greensboro-High Point, NC	0.8798
	El Centro, CA		22744	Fort Lauderdale-Pompano Beach-Deerfield Beach, FL	1.0160		Guilford, NC	
21060	Imperial, CA	0.8719		Broward, FL			Randolph, NC	
	Elizabethtown, KY		22900	Fort Smith, AR-OK	0.7620	24780	Rockingham, NC	
	Hardin, KY			Crawford, AR			Greenville, NC	0.9637
	Larue, KY			Franklin, AR			Greene, NC	
21140	Elkhart-Goshen, IN	0.9405		Sebastian, AR		24860	Pitt, NC	
	Elkhart, IN			Le Flore, OK			Greenville-Mauldin-Easley, SC	0.9620
21300	Elmira, NY	0.8522		Sequoyah, OK			Greenville, SC	
	Chemung, NY		23060	Fort Wayne, IN	0.9368		Laurens, SC	
21340	El Paso, TX	0.8515		Allen, IN		25020	Pickens, SC	
	El Paso, TX			Wells, IN			Guayama, PR	0.3730
21500	Erie, PA	0.8147		Whitley, IN			Arroyo, PR	
	Eugene-Springfield, OR		23104	Fort Worth-Arlington, TX	0.9525		Guayama, PR	
	Lane, OR			Johnson, TX			Patillas, PR	
21780	Evansville, IN-KY	0.8679		Parker, TX		25060	Gulfport-Biloxi, MS	0.8505
	Gibson, IN			Tarrant, TX			Hancock, MS	
	Posey, IN		23420	Wise, TX			Harrison, MS	
	Vanderburgh, IN			Fresno, CA	1.1281	25180	Stone, MS	
	Warrick, IN			Fresno, CA			Hagerstown-Martinsburg, MD-WV	0.9168
	Henderson, KY		23460	Gadsden, AL	0.7934		Washington, MD	
	Webster, KY			Etowah, AL			Berkeley, WV	
21820	Fairbanks, AK	1.1322	23540	Gainesville, FL	0.9375	25260	Morgan, WV	
	Fairbanks North Star Borough, AK			Alachua, FL			Hanford-Corcoran, CA	1.0700
21940	Fajardo, PR	0.3823		Gilchrist, FL		25420	Kings, CA	
	Ceiba, PR		23580	Gainesville, GA	0.9010		Harrisburg-Carlisle, PA	0.9400
	Fajardo, PR			Hall, GA			Cumberland, PA	
	Luquillo, PR		23844	Gary, IN	0.9193		Dauphin, PA	
22020	Fargo, ND-MN	0.8136		Jasper, IN			Perry, PA	
	Cass, ND			Lake, IN		25500	Harrisonburg, VA	0.8773
	Clay, MN			Newton, IN			Rockingham, VA	
22140	Farmington, NM	0.9795		Porter, IN			Harrisonburg City, VA	
	San Juan, NM		24020	Glens Falls, NY	0.8504	25540	Hartford-West Hartford-East	1.0700
22180	Fayetteville, NC	0.9213		Warren, NY			Hartford, CT	
	Cumberland, NC			Washington, NY			Hartford, CT	
	Hoke, NC		24140	Goldsboro, NC	0.8690		Middlesex, CT	
22220	Fayetteville-Springdale-Rogers, AR-MO	0.9263		Wayne, NC		25620	Tolland, CT	
	Benton, AR		24220	Grand Forks, ND-MN	0.7573		Hattiesburg, MS	0.7940
	Madison, AR			Polk, MN			Forrest, MS	
	Washington, AR			Grand Forks, ND			Lamar, MS	
	McDonald, MO		24300	Grand Junction, CO	0.9394	25860	Perry, MS	
22380	Flagstaff, AZ	1.2427		Mesa, CO			Hickory-Lenoir-Morganton, NC	0.8859
	Coconino, AZ		24340	Grand Rapids-Wyoming, MI	0.9145		Alexander, NC	
22420	Flint, MI	1.1137		Barry, MI			Burke, NC	
	Genesee, MI			Ionia, MI			Caldwell, NC	
22500	Florence, SC	0.8217		Kent, MI		25980	Catawba, NC	
	Darlington, SC		24500	Newaygo, MI	0.8462		Hinesville-Fort Stewart, GA ¹	0.8926
	Florence, SC			Great Falls, MT			Liberty, GA	
22520	Florence-Muscle Shoals, AL	0.7738		Cascade, MT		26100	Long, GA	
	Colbert, AL		24540	Greeley, CO	0.9553		Holland-Grand Haven, MI	0.8523
	Lauderdale, AL			Weld, CO			Ottawa, MI	
22540	Fond du Lac, WI	0.9291	24580	Green Bay, WI	0.9824	26180	Honolulu, HI	1.1698
	Fond du Lac, WI			Brown, WI			Honolulu, HI	
				Kewaunee, WI		26300	Hot Springs, AR	0.9076
							Garland, AR	

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26380	Houma-Bayou Cane-Thibodaux, LA Lafourche, LA Terrebonne, LA	0.7841		Clay, FL Duval, FL Nassau, FL St. Johns, FL			Bristol City, VA Scott, VA Washington, VA	
26420	Houston-Sugar Land-Baytown, TX Austin, TX Brazoria, TX Chambers, TX Fort Bend, TX Galveston, TX Harris, TX Liberty, TX Montgomery, TX San Jacinto, TX Waller, TX	0.9945	27340	Jacksonville, NC Onslow, NC	0.8074	28740	Kingston, NY Ulster, NY	0.9170
			27500	Janesville, WI Rock, WI	0.9234	28940	Knoxville, TN Anderson, TN Blount, TN	0.7838
			27620	Jefferson City, MO Callaway, MO Cole, MO Moniteau, MO Osage, MO	0.8222		Knox, TN Loudon, TN Union, TN	
			27740	Johnson City, TN Carter, TN	0.7796	29020	Kokomo, IN Howard, IN	0.9186
26580	Huntington-Ashland, WV-KY-OH Boyd, KY Greenup, KY Lawrence, OH Cabell, WV Wayne, WV	0.8893		Unicoi, TN Washington, TN		29100	La Crosse, WI-MN Houston, MN La Crosse, WI	0.9685
			27780	Johnstown, PA Cambria, PA	0.8715	29140	Lafayette, IN Benton, IN	0.9507
			27860	Jonesboro, AR Craighead, AR	0.7718		Carroll, IN Tippecanoe, IN	
26620	Huntsville, AL Limestone, AL Madison, AL	0.8996		Poinsett, AR		29180	Lafayette, LA Lafayette, LA St. Martin, LA	0.8319
			27900	Joplin, MO Jasper, MO	0.8227			
26820	Idaho Falls, ID Bonneville, ID Jefferson, ID	0.9336		Newton, MO		29340	Lake Charles, LA Calcasieu, LA Cameron, LA	0.7998
			28020	Kalamazoo-Portage, MI Kalamazoo, MI	0.9939			
26900	Indianapolis-Carmel, IN Boone, IN Brown, IN Hamilton, IN Hancock, IN Hendricks, IN Johnson, IN Marion, IN Morgan, IN Putnam, IN Shelby, IN	0.9662		Van Buren, MI		29404	Lake County-Kenosha, IL-WI Lake, IL Kenosha, WI	1.0311
			28100	Kankakee-Bradley, IL Kankakee, IL	0.9807			
			28140	Kansas City, MO-KS Franklin, KS Johnson, KS Leavenworth, KS Linn, KS Miami, KS Wyandotte, KS	0.9637	29420	Lake Havasu City-Kingman, AZ Mohave, AZ	0.9967
				Bates, MO Caldwell, MO Cass, MO Clay, MO Clinton, MO Jackson, MO Lafayette, MO Platte, MO		29460	Lakeland-Winter Haven, FL Polk, FL	0.8432
26980	Iowa City, IA Johnson, IA Washington, IA	1.0070		Leavenworth, KS Linn, KS Miami, KS Wyandotte, KS		29540	Lancaster, PA Lancaster, PA	0.9439
				Bates, MO Caldwell, MO		29620	Lansing-East Lansing, MI Clinton, MI Eaton, MI Ingham, MI	1.0477
27060	Ithaca, NY Tompkins, NY	0.8819		Cass, MO Clay, MO		29700	Laredo, TX Webb, TX	0.7730
				Clay, MO				
27100	Jackson, MI Jackson, MI	0.8938		Clinton, MO Jackson, MO		29740	Las Cruces, NM Dona Ana, NM	0.9106
				Lafayette, MO Platte, MO				
27140	Jackson, MS Copiah, MS Hinds, MS Madison, MS Rankin, MS Simpson, MS	0.8172		Ray, MO		29820	Las Vegas-Paradise, NV Clark, NV	1.2050
			28420	Kennewick-Pasco-Richland, WA Benton, WA Franklin, WA	0.9582	29940	Lawrence, KS Douglas, KS	0.8853
				Killeen-Temple-Fort Hood, TX Bell, TX Coryell, TX Lampasas, TX	0.9501	30020	Lawton, OK Comanche, OK	0.8545
27180	Jackson, TN Chester, TN Madison, TN	0.8149		Bell, TX Coryell, TX Lampasas, TX		30140	Lebanon, PA Lebanon, PA	0.8042
			28700	Kingsport-Bristol-Bristol, TN-VA Hawkins, TN Sullivan, TN	0.7399	30300	Lewiston, ID-WA Nez Perce, ID Asotin, WA	0.9067
27260	Jacksonville, FL Baker, FL	0.8882				30340	Lewiston-Auburn, ME	0.9038
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30460	Androscoggin, ME Lexington-Fayette, KY Bourbon, KY Clark, KY Fayette, KY Jessamine, KY Scott, KY Woodford, KY	0.8833	31420	Macon, GA Bibb, GA Crawford, GA Jones, GA Monroe, GA Twiggs, GA	0.9122		Carver, MN Chisago, MN Dakota, MN Hennepin, MN Isanti, MN Ramsey, MN	
30620	Lima, OH Allen, OH	0.9371	31460	Madera, CA Madera, CA	0.8114		Scott, MN Sherburne, MN	
30700	Lincoln, NE Lancaster, NE Seward, NE	0.9612	31540	Madison, WI Columbia, WI Dane, WI Iowa, WI	1.1234		Washington, MN Wright, MN Pierce, WI St. Croix, WI	
30780	Little Rock-North Little Rock-Conway, AR Faulkner, AR Grant, AR Lonoke, AR Perry, AR Pulaski, AR Saline, AR	0.8558	31700	Manchester-Nashua, NH Hillsborough, NH	1.0083	33540	Missoula, MT Missoula, MT	0.9154
30860	Logan, UT-ID Franklin, ID Cache, UT	0.8592	31740	Manhattan, KS Geary, KS Pottawatomie, KS Riley, KS	0.7912	33660	Mobile, AL Mobile, AL	0.8002
30980	Longview, TX Gregg, TX Rusk, TX Upshur, TX	0.8530	31860	Mankato-North Mankato, MN Blue Earth, MN Nicollet, MN	0.9346	33700	Modesto, CA Stanislaus, CA	1.2670
31020	Longview, WA Cowlitz, WA	0.9989	31900	Mansfield, OH Richland, OH	0.9215	33740	Monroe, LA Ouachita, LA Union, LA	0.7915
31084	Los Angeles-Long Beach-Santa Ana, CA Los Angeles, CA	1.2287	32420	Mayaguez, PR Hormigueros, PR Mayaguez, PR	0.3676	33780	Monroe, MI Monroe, MI	0.8727
31140	Louisville-Jefferson, KY-IN Clark, IN Floyd, IN Harrison, IN Washington, IN Bullitt, KY Henry, KY Meade, KY Nelson, KY Oldham, KY Shelby, KY Spencer, KY Trimble, KY	0.8900	32580	McAllen-Edinburg-Mission, TX Hidalgo, TX	0.8878	33860	Montgomery, AL Autauga, AL Elmore, AL Lowndes, AL Montgomery, AL	0.8103
31180	Lubbock, TX Crosby, TX Lubbock, TX	0.8794	32780	Medford, OR Jackson, OR	1.0318	34060	Morgantown, WV Monongalia, WV Preston, WV	0.8197
31340	Lynchburg, VA Amherst, VA Appomattox, VA Bedford, VA Campbell, VA Bedford City, VA Lynchburg City, VA	0.8768	32820	Memphis, TN-MS-AR Crittenden, AR DeSoto, MS Marshall, MS Tate, MS Tunica, MS Fayette, TN Shelby, TN Tipton, TN	0.9275	34100	Morristown, TN Grainger, TN Hamblen, TN Jefferson, TN	0.7031
			32900	Merced, CA Merced, CA	1.2424	34580	Mount Vernon-Anacortes, WA Skagit, WA	1.0235
			33124	Miami-Miami Beach-Kendall, FL Miami-Dade, FL	1.0085	34620	Muncie, IN Delaware, IN	0.7817
			33140	Michigan City-La Porte, IN LaPorte, IN	0.9358	34740	Muskegon-Norton Shores, MI Muskegon, MI	0.9967
			33260	Midland, TX Midland, TX	1.0514	34820	Myrtle Beach-North Myrtle Beach-Conway, SC Horry, SC	0.8653
			33340	Milwaukee-Waukesha-West Allis, WI Milwaukee, WI Ozaukee, WI Washington, WI Waukesha, WI	0.9961	34900	Napa, CA Napa, CA	1.4511
			33460	Minneapolis-St. Paul--Bloomington, MN-WI Anoka, MN	1.1105	34940	Naples-Marco Island, FL Collier, FL	0.9740
						34980	Nashville-Davidson-Murfreesboro-Franklin, TN Cannon, TN Cheatham, TN Davidson, TN Dickson, TN Hickman, TN Macon, TN	0.9340
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	Robertson, TN			Ector, TX			Escambia, FL	
	Rutherford, TN		36260	Ogden-Clearfield, UT	0.9220		Santa Rosa, FL	
	Smith, TN			Davis, UT		37900	Peoria, IL	0.8830
	Sumner, TN			Morgan, UT			Marshall, IL	
	Trousdale, TN			Weber, UT			Peoria, IL	
	Williamson, TN		36420	Oklahoma City, OK	0.8934		Stark, IL	
	Wilson, TN			Canadian, OK			Tazewell, IL	
35004	Nassau-Suffolk, NY	1.2416		Cleveland, OK			Woodford, IL	
	Nassau, NY			Grady, OK		37964	Philadelphia, PA	1.0760
	Suffolk, NY			Lincoln, OK			Bucks, PA	
35084	Newark-Union, NJ-PA	1.1322		Logan, OK			Chester, PA	
	Essex, NJ			McClain, OK			Delaware, PA	
	Hunterdon, NJ			Oklahoma, OK			Montgomery, PA	
	Morris, NJ		36500	Olympia, WA	1.1339		Philadelphia, PA	
	Sussex, NJ			Thurston, WA		38060	Phoenix-Mesa-Scottsdale, AZ	1.0566
	Union, NJ		36540	Omaha-Council Bluffs, NE-IA	0.9864		Maricopa, AZ	
	Pike, PA			Harrison, IA			Pinal, AZ	
35300	New Haven-Milford, CT	1.1556		Mills, IA		38220	Pine Bluff, AR	0.7700
	New Haven, CT			Pottawattamie, IA			Cleveland, AR	
35380	New Orleans-Metairie-Kenner, LA	0.9026		Cass, NE			Jefferson, AR	
	Jefferson, LA			Douglas, NE			Lincoln, AR	
	Orleans, LA			Sarpy, NE		38300	Pittsburgh, PA	0.8669
	Plaquemines, LA			Saunders, NE			Allegheny, PA	
	St. Bernard, LA			Washington, NE			Armstrong, PA	
	St. Charles, LA		36740	Orlando-Kissimmee, FL	0.9128		Beaver, PA	
	St. John the Baptist, LA			Lake, FL			Butler, PA	
	St. Tammany, LA			Orange, FL			Fayette, PA	
35644	New York-White Plains-Wayne, NY-NJ	1.3052		Osceola, FL			Washington, PA	
	Bergen, NJ			Seminole, FL			Westmoreland, PA	
	Hudson, NJ		36780	Oshkosh-Neenah, WI	0.9319	38340	Pittsfield, MA	1.0616
	Passaic, NJ			Winnebago, WI			Berkshire, MA	
	Bronx, NY		36980	Owensboro, KY	0.8202	38540	Pocatello, ID	0.9426
	Kings, NY			Daviess, KY			Bannock, ID	
	New York, NY			Hancock, KY			Power, ID	
	Putnam, NY			McLean, KY		38660	Ponce, PR	0.4185
	Queens, NY		37100	Oxnard-Thousand Oaks-Ventura, CA	1.2830		Juana Diaz, PR	
	Richmond, NY			Ventura, CA			Ponce, PR	
	Rockland, NY		37340	Palm Bay-Melbourne-Titusville, FL	0.9042	38860	Portland-South Portland-Biddeford, ME	0.9661
	Westchester, NY			Brevard, FL			Cumberland, ME	
35660	Niles-Benton Harbor, MI	0.8653	37380	Palm Coast, FL	0.9373		Sagadahoc, ME	
	Berrien, MI			Flagler, FL			York, ME	
35840	North Port-Bradenton-Sarasota-Venice, FL	0.9435	37460	Panama City-Lynn Haven, FL	0.8388		Portland-Vancouver-Beaverton, OR-WA	1.1454
	Manatee, FL			Bay, FL		38900	Clackamas, OR	
	Sarasota, FL		37620	Parkersburg-Marietta-Vienna, WV-OH	0.7647		Columbia, OR	
35980	Norwich-New London, CT	1.1227		Washington, OH			Multnomah, OR	
	New London, CT			Pleasants, WV			Washington, OR	
36084	Oakland-Fremont-Hayward, CA	1.6080		Wirt, WV			Yamhill, OR	
	Alameda, CA			Wood, WV			Clark, WA	
	Contra Costa, CA		37700	Pascagoula, MS	0.7885		Skamania, WA	
36100	Ocala, FL	0.8449		George, MS			Port St. Lucie, FL	0.9784
	Marion, FL			Jackson, MS		38940	Martin, FL	
36140	Ocean City, NJ	1.0641	37764	Peabody, MA	1.0698		St. Lucie, FL	
	Cape May, NJ			Essex, MA				
36220	Odessa, TX	0.9809	37860	Pensacola-Ferry Pass-Brent, FL	0.8013			
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39100	Poughkeepsie-Newburgh-Middletown, NY Dutchess, NY Orange, NY	1.1339		Petersburg City, VA Richmond City, VA			Jersey, IL Macoupin, IL	
39140	Prescott, AZ Yavapai, AZ	1.2261	40140	Riverside-San Bernardino-Ontario, CA Riverside, CA San Bernardino, CA	1.1463		Madison, IL Monroe, IL St. Clair, IL Crawford, MO	
39300	Providence-New Bedford-Fall River, RI-MA Bristol, MA Bristol, RI Kent, RI Newport, RI Providence, RI Washington, RI	1.0639	40220	Roanoke, VA Botetourt, VA Craig, VA Franklin, VA Roanoke, VA Roanoke City, VA Salem City, VA	0.9166		Franklin, MO Jefferson, MO Lincoln, MO St. Charles, MO St. Louis, MO Warren, MO Washington, MO St. Louis City, MO	
39340	Provo-Orem, UT Juab, UT Utah, UT	0.9404	40340	Rochester, MN Dodge, MN Olmsted, MN Wabasha, MN	1.0802	41420	Salem, OR Marion, OR Polk, OR	1.1224
39380	Pueblo, CO Pueblo, CO	0.8668	40380	Rochester, NY Livingston, NY	0.8602	41500	Salinas, CA Monterey, CA	1.5604
39460	Punta Gorda, FL Charlotte, FL	0.8801		Monroe, NY Ontario, NY		41540	Salisbury, MD Somerset, MD Wicomico, MD	0.9227
39540	Racine, WI Racine, WI	0.8630		Orleans, NY Wayne, NY		41620	Salt Lake City, UT Salt Lake, UT Summit, UT Tooele, UT	0.9415
39580	Raleigh-Cary, NC Franklin, NC Johnston, NC Wake, NC	0.9648	40420	Rockford, IL Boone, IL Winnebago, IL	0.9938			
39660	Rapid City, SD Meade, SD Pennington, SD	1.0203	40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
39740	Reading, PA Berks, PA	0.9212	40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
39820	Redding, CA Shasta, CA	1.5584	40660	Rome, GA Floyd, GA	0.8838			
39900	Reno-Sparks, NV Storey, NV Washoe, NV	1.0596	40900	Sacramento--Arden-Arcade--Roseville, CA El Dorado, CA Placer, CA	1.3777			
40060	Richmond, VA Amelia, VA Caroline, VA Charles City, VA Chesterfield, VA Cumberland, VA Dinwiddie, VA Goochland, VA Hanover, VA Henrico, VA King and Queen, VA King William, VA Louisa, VA New Kent, VA Powhatan, VA Prince George, VA Sussex, VA Colonial Heights City, VA Hopewell City, VA	0.9791	40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
			40660	Rome, GA Floyd, GA	0.8838			
			40900	Sacramento--Arden-Arcade--Roseville, CA El Dorado, CA Placer, CA	1.3777			
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			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
			40660	Rome, GA Floyd, GA	0.8838			
			40900	Sacramento--Arden-Arcade--Roseville, CA El Dorado, CA Placer, CA	1.3777			
			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
			40660	Rome, GA Floyd, GA	0.8838			
			40900	Sacramento--Arden-Arcade--Roseville, CA El Dorado, CA Placer, CA	1.3777			
			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
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			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
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			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
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			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
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			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
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			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
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			40484	Rockingham, NH Strafford, NH	1.0185	41660	San Angelo, TX Irion, TX	0.8273
			40580	Rocky Mount, NC Edgecombe, NC	0.9018	41700	San Antonio, TX Atascosa, TX Bandera, TX Bexar, TX Comal, TX Guadalupe, TX Kendall, TX Medina, TX Wilson, TX	0.9006
			40660	Rome, GA Floyd, GA</				

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Chapter 8, Addendum E (FY 2012)

Wage Indexes For Urban Areas For Skilled Nursing Facilities (SNFs) Based On
Core-Based Statistical Area (CBSA) Labor Market Areas - FY 2012

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX
41980	Santa Clara, CA San Juan-Caguas-Guaynabo, PR Aguas Buenas, PR Aibonito, PR Arecibo, PR Barceloneta, PR Barranquitas, PR Bayamon, PR Caguas, PR Camuy, PR Canovanas, PR Carolina, PR Catano, PR Cayey, PR Ciales, PR Cidra, PR Comerio, PR Corozal, PR Dorado, PR Florida, PR Guaynabo, PR Gurabo, PR Hatillo, PR Humacao, PR Juncos, PR Las Piedras, PR Loiza, PR Manati, PR Maunabo, PR Morovis, PR Naguabo, PR Naranjito, PR Orocovis, PR Quebradillas, PR Rio Grande, PR San Juan, PR San Lorenzo, PR Toa Alta, PR Toa Baja, PR Trujillo Alto, PR Vega Alta, PR Vega Baja, PR Yabucoa, PR	0.4340	42340	Savannah, GA Bryan, GA Chatham, GA Effingham, GA 42540 Scranton--Wilkes-Barre, PA Lackawanna, PA Luzerne, PA Wyoming, PA 42644 Seattle-Bellevue-Everett, WA King, WA Snohomish, WA 42680 Sebastian-Vero Beach, FL Indian River, FL 43100 Sheboygan, WI Sheboygan, WI 43300 Sherman-Denison, TX Grayson, TX 43340 Shreveport-Bossier City, LA Bossier, LA Caddo, LA De Soto, LA 43580 Sioux City, IA-NE-SD Woodbury, IA Dakota, NE Dixon, NE Union, SD 43620 Sioux Falls, SD Lincoln, SD McCook, SD Minnehaha, SD Turner, SD 43780 South Bend-Mishawaka, IN-MI St. Joseph, IN Cass, MI 43900 Spartanburg, SC Spartanburg, SC 44060 Spokane, WA Spokane, WA 44100 Springfield, IL Menard, IL Sangamon, IL 44140 Springfield, MA Franklin, MA 42020 San Luis Obispo-Paso Robles, CA Hampden, MA San Luis Obispo, CA Hampshire, MA 42044 Santa Ana-Anaheim-Irvine, CA Christian, MO 42060 Santa Barbara-Santa Maria-Goleta, CA Dallas, MO Greene, MO Santa Barbara, CA Polk, MO 42100 Santa Cruz-Watsonville, CA Webster, MO Santa Cruz, CA 42140 Santa Fe, NM 42220 Santa Rosa-Petaluma, CA Centre, PA Sonoma, CA 44600 Steubenville-Weirton, OH-WV	0.9095 0.8328 1.1541 0.9032 0.9303 0.8011 0.8505 0.9538 0.9153 0.9426 0.9325 1.0504 0.8958 1.0247 0.7054	Jefferson, OH Brooke, WV Hancock, WV 44700 Stockton, CA San Joaquin, CA 44940 Sumter, SC Sumter, SC 45060 Syracuse, NY Madison, NY Onondaga, NY Oswego, NY 45104 Tacoma, WA Pierce, WA 45220 Tallahassee, FL Gadsden, FL Jefferson, FL Leon, FL Wakulla, FL 45300 Tampa-St. Petersburg-Clearwater, FL Hernando, FL Hillsborough, FL Pasco, FL Pinellas, FL 45460 Terre Haute, IN Clay, IN Sullivan, IN Vermillion, IN Vigo, IN 45500 Texarkana, TX-Texarkana, AR Miller, AR Bowie, TX 45780 Toledo, OH Fulton, OH Lucas, OH Ottawa, OH Wood, OH 45820 Topeka, KS Jackson, KS Jefferson, KS Osage, KS Shawnee, KS Wabaunsee, KS 45940 Trenton-Ewing, NJ Mercer, NJ 46060 Tucson, AZ Pima, AZ 46140 Tulsa, OK Creek, OK Okmulgee, OK Osage, OK Pawnee, OK Rogers, OK Tulsa, OK Wagoner, OK 46220 Tuscaloosa, AL	1.3052 0.7551 0.9776 1.1384 0.8593 0.9072 0.9209 0.7937 0.9148 0.8818 0.8362 1.0062 0.9318 0.8362 0.8664	
<p>At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>			<p>At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>			<p>At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy.</p>		

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CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES)	WAGE INDEX
46340	Greene, AL Hale, AL Tuscaloosa, AL Tyler, TX Smith, TX	0.8335		Prince George's, MD Arlington, VA Clarke, VA Fairfax, VA Fauquier, VA		49180	Winston-Salem, NC Davie, NC Forsyth, NC Stokes, NC Yadkin, NC	0.9343
46540	Utica-Rome, NY Herkimer, NY Oneida, NY	0.8441		Loudoun, VA Prince William, VA Spotsylvania, VA Stafford, VA Warren, VA		49340	Worcester, MA Worcester, MA	1.1076
46660	Valdosta, GA Brooks, GA Echols, GA Lanier, GA Lowndes, GA	0.7997		Fredericksburg City, VA Manassas City, VA Manassas Park City, VA Jefferson, WV		49420	Yakima, WA Yakima, WA	1.0433
46700	Vallejo-Fairfield, CA Solano, CA	1.4636		47940	0.8372	49500	Yauco, PR Guanica, PR Guayanilla, PR Penuelas, PR Yauco, PR	0.3757
47020	Victoria, TX Calhoun, TX Goliad, TX Victoria, TX	0.8434		Black Hawk, IA Bremer, IA Grundy, IA		49620	York-Hanover, PA York, PA	0.9675
47220	Vineland-Millville-Bridgeton, NJ Cumberland, NJ	1.0222	48140	Wausau, WI Marathon, WI	0.8962	49660	Youngstown-Warren-Boardman, OH-PA Mahoning, OH Trumbull, OH Mercer, PA	0.8328
47260	Virginia Beach-Norfolk-Newport News, VA-NC Currituck, NC Gloucester, VA Isle of Wight, VA James City, VA Mathews, VA Surry, VA York, VA Chesapeake City, VA Hampton City, VA Newport News City, VA Norfolk City, VA Poquoson City, VA Portsmouth City, VA Suffolk City, VA Virginia Beach City, VA Williamsburg City, VA	0.9001	48300	Wenatchee, WA Chelan, WA Douglas, WA	1.0168	49700	Yuba City, CA Sutter, CA Yuba, CA	1.1808
47300	Visalia-Porterville, CA Tulare, CA	1.0343	48424	West Palm Beach-Boca Raton-Boynton Beach, FL Palm Beach, FL	0.9823	49740	Yuma, AZ Yuma, AZ	0.9350
47380	Waco, TX McLennan, TX	0.8559	48540	Wheeling, WV-OH Belmont, OH Marshall, WV Ohio, WV	0.6735	<div style="border: 1px solid black; padding: 5px;"> At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy. </div> <p align="center">- END -</p>		
47580	Warner Robins, GA Houston, GA	0.8245	48620	Wichita, KS Butler, KS Harvey, KS Sedgwick, KS Sumner, KS	0.8696			
47644	Warren-Troy-Farmington Hills, MI Lapeer, MI Livingston, MI Macomb, MI Oakland, MI St. Clair, MI	0.9625	48660	Wichita Falls, TX	1.0097			
47894	Washington-Arlington-Alexandria, DC-VA-MD-WV District of Columbia, DC Calvert, MD Charles, MD	1.0807	48700	Williamsport, PA Lycoming, PA	0.8084			
			48864	Wilmington, DE-MD-NJ New Castle, DE Cecil, MD Salem, NJ	1.0662			
			48900	Wilmington, NC Brunswick, NC New Hanover, NC Pender, NC	0.9107			
			49020	Winchester, VA-WV Frederick, VA Winchester City, VA Hampshire, WV	0.9106			
<div style="border: 1px solid black; padding: 5px;"> At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy. </div>			<div style="border: 1px solid black; padding: 5px;"> At this time, there are no hospitals located in this urban area on which to base a wage index. We use the average wage index of all of the urban areas within the State to serve as a reasonable proxy. </div>					

Chapter 8

Addendum F (FY 2012)

Wage Indexes For Rural Areas For Skilled Nursing Facilities (SNFs) Based On Core-Based Statistical Area (CBSA) Labor Market Areas - FY 2012

Source: 76 FR 48561. Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012.

CBSA CODE	RURAL AREA	WAGE INDEX	CBSA CODE	RURAL AREA	WAGE INDEX
1	Alabama	0.7260	30	New Hampshire	1.0441
2	Alaska	1.2846	31	New Jersey ¹	.....
3	Arizona	0.8826	32	New Mexico	0.8878
4	Arkansas	0.7194	33	New York	0.8152
5	California	1.2194	34	North Carolina	0.8288
6	Colorado	1.0126	35	North Dakota	0.7295
7	Connecticut	1.1287	36	Ohio	0.8455
8	Delaware	1.0008	37	Oklahoma	0.7848
10	Florida	0.8361	38	Oregon	1.0337
11	Georgia	0.7547	39	Pennsylvania	0.8450
12	Hawaii	1.1200	40	Puerto Rico ¹	0.4047
13	Idaho	0.7531	41	Rhode Island ¹	.....
14	Illinois	0.8426	42	South Carolina	0.8277
15	Indiana	0.8551	43	South Dakota	0.8300
16	Iowa	0.8618	44	Tennessee	0.7734
17	Kansas	0.8041	45	Texas	0.7934
18	Kentucky	0.7825	46	Utah	0.8719
19	Louisiana	0.7769	47	Vermont	0.9709
20	Maine	0.8581	48	Virgin Islands	0.7505
21	Maryland	0.9291	49	Virginia	0.7817
22	Massachusetts	1.3962	50	Washington	1.0231
23	Michigan	0.8295	51	West Virginia	0.7371
24	Minnesota	0.9107	52	Wisconsin	0.8977
25	Mississippi	0.7539	53	Wyoming	0.9433
26	Missouri	0.7673	65	Guam	0.9611
27	Montana	0.8615			
28	Nebraska	0.8872			
29	Nevada	0.9637			

¹ All counties within the State are classified as urban, with the exception of Massachusetts and Puerto Rico. Massachusetts and Puerto Rico have areas designated as rural; however, no short-term, acute care hospitals are located in the area(s) for FY 2012. The rural Massachusetts wage index is calculated as the average of all contiguous CBSAs. The Puerto Rico wage index is the same as FY 2011.

¹ All counties within the State are classified as urban, with the exception of Massachusetts and Puerto Rico. Massachusetts and Puerto Rico have areas designated as rural; however, no short-term, acute care hospitals are located in the area(s) for FY 2012. The rural Massachusetts wage index is calculated as the average of all contiguous CBSAs. The Puerto Rico wage index is the same as FY 2011.

- END -

2.1.5.3.2 Discounting for Bilateral Procedures

2.1.5.3.2.1 Following are the different categories/classifications of bilateral procedures:

- Conditional bilateral (i.e., procedure is considered bilateral if the modifier 50 is present).
- Inherent bilateral (i.e., procedure in and of itself is bilateral).
- Independent bilateral (i.e., procedure is considered bilateral if the modifier 50 is present, but full payment should be made for each procedure (e.g., certain radiological procedures).

2.1.5.3.2.2 Terminated bilateral procedures or terminated procedures with units greater than one should not occur. Line items with terminated bilateral procedures or terminated procedures with units greater than one are denied.

2.1.5.3.2.3 Inherent bilateral procedures will be treated as a non-bilateral procedure since the bilateralism of the procedure is encompassed in the code.

2.1.5.3.3 Modifiers for Discounting Terminated Surgical Procedures

2.1.5.3.3.1 Industry standard modifiers may be billed on outpatient hospital or individual professional claims to further define the procedure code or indicate that certain reimbursement situations may apply to the billing. Recognition and utilization of modifiers are essential for ensuring accurate processing and payment of these claim types.

2.1.5.3.3.2 Industry standard modifiers are used to identify surgical procedures which have been terminated prior to and after the delivery of anesthesia.

- Modifiers 52 and 73 are used to identify a surgical procedure that is terminated prior to the delivery of anesthesia and is reimbursed at 50% of the allowable; i.e., the ASC tier rate, the Ambulatory Payment Classification (APC) allowable amount for OPSS claims, or the CHAMPUS Maximum Allowable Charge (CMAC) for individual professional providers.
- Modifiers 53 and 74 are used for terminated surgical procedures after delivery of anesthesia which are reimbursed at 100% of the appropriated allowable amounts referenced above.

2.1.5.3.4 Unbundling of Procedures

Contractors should ensure that reimbursement for claims involving multiple procedures conforms to the unbundling guidelines as outlined in [Chapter 1, Section 3](#).

2.1.5.3.5 Incidental Procedures

The rules for reimbursing incidental procedures as contained in [Chapter 1, Section 3](#), are to be applied to ambulatory surgery procedures reimbursed under the rules set forth in this

section. That is, no reimbursement is to be made for incidental procedures performed in conjunction with other procedures which are not classified as incidental. This limitation applies to payments for facility claims as well as to professional services.

2.1.6 Updating Payment Rates

2.1.6.1 The rates will be updated annually by TMA by the same update factor as is used in the Medicare annual updates for ASC payments.

2.1.6.2 The rates were updated by 0.6% effective November 1, 2009.

2.1.6.3 The rates were updated by 0.9% effective November 1, 2011.

2.2 Reimbursement for Procedures Not Listed On TMA's Ambulatory Surgery Web Site

Ambulatory surgery procedures that are not listed on TMA's ambulatory surgery web site, and are performed in either a freestanding ASC may be cost-shared, but only if doing so results in no additional costs to the program.

2.3 Reimbursement System On Or After May 1, 2009 (Implementation Of OPPS)

2.3.1 For ambulatory surgery procedures performed in an OPPS qualified facility, the provisions in [Chapter 13](#) shall apply.

2.3.2 For ambulatory surgery procedures performed in freestanding ASCs and non-OPPS facilities, the provisions in [paragraph 2.1](#) shall apply, except as follows:

- Contractors will no longer be allowed to group other procedures not listed on TMA's ambulatory surgery web site. On May 1, 2009 (implementation of OPPS), these groupers will be end dated. Only ambulatory surgery procedures listed on TMA's ambulatory surgery web site are to be grouped.
- Multiple and Terminated Procedures. For services rendered on or after May 1, 2009 (implementation of OPPS), the professional services shall be reimbursed according to the multiple surgery guidelines in [Chapter 13, Section 3, paragraphs 3.1.5.2 and 3.1.5.3](#).
- Discounting for Multiple Surgical Procedures. For services rendered on or after May 1, 2009 (implementation of OPPS), discounting for multiple surgical procedures are subject to the provisions in [Chapter 13, Section 3](#).
- Discounting for Bilateral Procedures. For services rendered on or after May 1, 2009 (implementation of OPPS), bilateral procedures will be discounted based on the application of discounting formulas appearing in [Chapter 13, Section 3, paragraphs 3.1.5.3.6 and 3.1.5.3.7](#).

2.4 CAHs

Effective December 1, 2009, ambulatory surgery services performed in CAHs shall be reimbursed under the reasonable cost method, reference [Chapter 15, Section 1](#).

2.5 Claims for Ambulatory Surgery

2.5.1 Claim Forms

Claims for facility charges must be submitted on a Centers for Medicare and Medicaid Services (CMS) 1450 UB-04. Claims for professional charges may be submitted on either a CMS 1450 UB-04 or a CMS 1500 (08/2005) claim form. The preferred form is the CMS 1500 (08/2005). When professional services are billed on a CMS 1450 UB-04, the information on the CMS 1450 UB-04 should indicate that these services are professional in nature and be identified by the appropriate CPT-4 code and revenue code.

2.5.2 Claim Data

2.5.2.1 Billing Data. The claim must identify all procedures which were performed (by CPT-4 or HCPCS code). The facility claim shall be submitted on the CMS 1450 UB-04, the procedure code will be shown in Form Locator (FL) 44.

Note: Claims from ASCs must be submitted on the CMS 1450 UB-04 claim form. Claims not submitted on the appropriate claim form will be denied.

2.5.2.2 TRICARE Encounter Data (TED). All ambulatory surgery services are to be reported on the TED using the appropriate CPT-4 code. The only exception is services which are billed using a HCPCS code and for which no CPT-4 code exists. These services are to be reported on the TED using one of the codes in the TRICARE Systems Manual (TSM), [Chapter 2, Addendum N](#).

2.6 Wage Index Changes

If, during the year, Medicare revises any of the wage indexes used for ambulatory surgery reimbursement, such changes will not be incorporated into the TRICARE payment rates until the next routine update. These changes will not be incorporated regardless of the reason Medicare revised the wage index.

2.7 Subsequent Hospital Admissions

If a beneficiary is admitted to a hospital subject to the DRG-based payment system as a result of complications, etc. of ambulatory surgery, the ambulatory surgery procedures are to be billed and reimbursed separately from the hospital inpatient services. The same rules applicable to ER services are to be followed.

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Chapter 9, Section 1

Ambulatory Surgical Center (ASC) Reimbursement

2.8 Cost-Shares For Ambulatory Surgery Procedures

All surgical procedures performed in an outpatient setting shall be cost-shared at the ASC cost-sharing levels. Refer to [Chapter 2, Section 1, paragraph 1.3.3.7](#).

- END -

Chapter 11

Hospice

Section/Addendum	Subject/Addendum Title
1	Hospice Reimbursement - General Overview
2	Hospice Reimbursement - Coverage/Benefits
3	Hospice Reimbursement - Conditions For Coverage
4	Hospice Reimbursement - Guidelines For Payment Of Designated Levels Of Care
A (FY 2010)	Hospice Care Rates - FY 2010
A (FY 2011)	Hospice Care Rates - FY 2011
A (FY 2012)	Hospice Care Rates - FY 2012
B (FY 2010)	Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2010
B (FY 2011)	Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2011
B (FY 2012)	Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2012
C (FY 2010)	Hospice Rate Information - Hospice Wage Indexes For Rural Areas - FY 2010
C (FY 2011)	Hospice Rate Information - Hospice Wage Indexes For Rural Areas - FY 2011
C (FY 2012)	Hospice Rate Information - Hospice Wage Indexes For Rural Areas - FY 2012
D	Participation Agreement For Hospice Program Services For TRICARE Beneficiaries

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Hospice Reimbursement - General Overview

on a CMS 1500 (08/2005) using the appropriate CPT codes. These services will be subject to standard TRICARE reimbursement and cost-sharing/deductible provisions.

3.4 Authorized Providers

3.4.1 Social workers, hospice counselors, and home health aides which are not otherwise authorized providers of care under Basic Program may provide those services necessary for the palliation or management of terminally ill patients electing hospice coverage. These services are part of a package of services for which there is single all-inclusive rate for each day of care.

3.4.2 Hospice programs must be Medicare certified and meet all Medicare conditions of participation (42 CFR 418) in relation to patients in order to receive payment under the TRICARE program.

Note: The hospice program will be responsible for assuring that the individuals rendering hospice services meet the qualification standards specified in [Section 2](#). The contractor will not be responsible for certification of individuals employed by or contracted with a hospice program.

3.5 Implementing Instructions

Since this issuance only deals with a general overview of the hospice benefit the following cross referencing is provided to facilitate access to specific implementing instructions within Chapter 11:

IMPLEMENTING INSTRUCTIONS	
POLICIES	
General Overview	Section 1
Coverage/Benefits	Section 2
Conditions for Coverage	Section 3
Reimbursement	Section 4
ADDENDA	
National Rates Cap Amount for FY 2010	Addendum A (FY 2010)
National Rates Cap Amount for FY 2011	Addendum A (FY 2011)
National Rates Cap Amount for FY 2012	Addendum A (FY 2012)
Urban Wage Indexes for FY 2010	Addendum B (FY 2010)
Urban Wage Indexes for FY 2011	Addendum B (FY 2011)
Urban Wage Indexes for FY 2012	Addendum B (FY 2012)
Rural Wage Indexes for FY 2010	Addendum C (FY 2010)
Rural Wage Indexes for FY 2011	Addendum C (FY 2011)
Rural Wage Indexes for FY 2012	Addendum C (FY 2012)

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4.0 EFFECTIVE DATE

Implementation of the hospice program is effective for admissions occurring on or after June 1, 1995. Unless specified differently in sections of this instruction, this is to be considered the effective date for reimbursement of hospice care.

- END -

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Chapter 11, Section 4

Hospice Reimbursement - Guidelines For Payment Of Designated Levels Of Care

be converted to 78 (non-hospital based hospice) and code 82 will be converted to 79 (hospital-based hospice).

3.1.12.2.2 The third digit will be reported on a separate institutional reporting field (FREQUENCY CODE), TSM, [Chapter 2, Section 2.5](#).

3.1.12.3 Type of institution codes 78 and 79 along with the special processing code # (TSM, [Chapter 2, Addendum D](#)) will allow hospice institutional claims to by-pass all cost-sharing edits.

3.1.12.4 The revenue code 0657 will be used to identify the charges for services furnished to patients by physicians employed by, or receiving compensation from the hospice.

3.1.12.4.1 Physician procedure codes (CPT procedure codes) will be entered in Item 44 of the CMS 1450 UB-04 to the right of the revenue code 0657 (Item 42). The CPT procedure codes are required in order that the contractor may make allowable charge (CMAC) determinations when reimbursing hospice physicians.

3.1.12.4.2 Hospice professional services will be paid at 100% of the allowed charge.

3.1.12.4.3 Place of service code 34 (TSM, [Chapter 2, Section 2.7](#)) along with the special processing code number will allow hospice non-institutional claims (hospice physician charges) to by-pass all cost-sharing edits and to be paid at 100% of the allowed charge (CMAC).

3.1.12.5 Institutional services (i.e., routine home care-651, continuous home care-652, inpatient respite care-655, and general inpatient care-656) will be reported on an institutional claim format while hospice physician services (revenue code 657 and accompanying CPT procedure codes) will be reported on a non-institutional claim format. The claim will be split for reporting purposes.

3.1.12.6 Patient care services rendered by an independent attending physician or NP (physician or NP who is not considered employed by, or under contract with the hospice) are not considered a part of the hospice benefit, and as such, will be billed in his/her own right.

3.1.12.6.1 Independent attending physician or NP services will be subject to standard TRICARE allowable charge methodology (i.e., subject to standard deductible and cost-sharing provisions).

3.1.12.6.2 The physician speciality code (TSM, [Chapter 2, Addendum C](#)) will be reported on the TED.

3.1.13 Billing for Covered TRICARE Services Unrelated to Hospice Care

3.1.13.1 Any covered TRICARE services not related to the treatment of the terminal condition for which hospice care was elected, which are provided during a hospice period, are billed to the contractor for non-hospice reimbursement.

3.1.13.2 Non-hospice services are billed by the provider in accordance with existing claims processing procedures under the TRICARE Basic program.

3.1.13.3 The contractor will identify and review all inpatient claims for beneficiaries who have elected hospice care to make sure that for:

- Nonrelated hospital admissions, nonhospice TRICARE coverage is provided to a beneficiary only when hospitalization was for a condition not related to his or her terminal illness; and
- Conditions related to a beneficiary's terminal illness, the claims were denied.

Note: Many illnesses may occur when an individual is terminally ill which are brought on by the underlying condition of the patient. For example, it is not unusual for a terminally ill patient to develop pneumonia or some other illness as a result of his or her weakened condition. Similarly, the setting of bones after fractures occur in a bone cancer patient would be treatment of a related condition. The treatment of these related conditions is part of the overall hospice benefit, and as such, cannot be billed under TRICARE standard, except for services of an attending physician who is not employed by, or under contract with, the hospice program.

3.1.14 Frequency of Hospice Billing

While inpatient billing is generally deferred until discharge, hospice programs may bill patient stays requiring longer than 30 days in 30-day intervals. This requirement applies to both the institutional and hospice-based physician claims.

3.1.15 Updated Hospice Rates

- The rates in [Addendum A \(FY 2010\)](#) will be used for payment of claims for services rendered on or after October 1, 2009, through September 30, 2010. The hospice cap amount applies to the cap year ending October 31, 2009.
- The rates in [Addendum A \(FY 2011\)](#) will be used for payment of claims for services rendered on or after October 1, 2010, through September 30, 2011. The hospice cap amount applies to the cap year ending October 31, 2010.
- [The rates in Addendum A \(FY 2012\) will be used for payment of claims for services rendered on or after October 1, 2011, through September 30, 2012. The hospice cap amount applies to the cap year ending October 31, 2011.](#)

3.2 Beneficiary Cost-Sharing

There are no deductibles under the hospice benefit. TRICARE pays the full cost of all covered services for the terminal illness, except for small cost-share amounts which **may be** collected by the individual hospice for outpatient drugs and biologicals and inpatient respite care.

Note: The collection of cost-share amounts are optional under the hospice program.

3.2.1 The patient is responsible for 5% of the cost of outpatient drugs, or \$5 toward each prescription, whichever is less. Additionally, the cost of prescription drugs (drugs or biologicals) may not exceed that which a prudent buyer would pay in similar circumstances; that is, a buyer

Chapter 11

Addendum A (FY 2012)

Hospice Care Rates - FY 2012

The following national hospice rates are for care and services provided on or after October 1, 2011, through September 30, 2012. The hospice rates applicable to the above period are:

DESCRIPTION	RATE	WAGE COMPONENT SUBJECT	UNWEIGHTED AMOUNT
Routine Home Care	\$151.03	\$103.77	\$ 47.26
Continuous Home Care	\$881.46 full rate = 24 hours of care/\$36.73 hourly rate	\$605.65	\$275.81
Inpatient Respite Care	\$156.22	\$ 84.56	\$ 71.66
General Inpatient Care	\$671.84	\$430.04	\$241.80
Allow the provider to split bills if they span the effective date. Use the previous year's rates if the provider chooses not to split the bill.			
Hospice Cap Amount:	The latest hospice cap amount, for the cap year ending October 31, 2011, is \$24,527.69 .		

- END -

Chapter 11

Addendum B (FY 2012)

Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2012

The following Hospice Indexes for Urban Areas (Core Based Statistical Area (CBSA)-based) are for care and services provided on or after October 1, 2011.

1. This column lists each CBSA area name and each county or county equivalent, in the CBSA area. Counties not listed in this table are considered to be rural areas. Wage index values for rural areas are found in [Addendum C \(FY 2012\)](#).
2. Wage index values are based on FY 2007 hospital cost report data before reclassification. These data form the basis for the pre-floor, pre-reclassified hospital wage index. The Budget Neutrality Adjustment Factor (BNAF) or the hospital floor is then applied to the pre-floor, pre-reclassified hospital wage index to derive the hospice wage index. Wage index values greater than or equal to 0.8 are subject to a BNAF. The hospice floor calculation is as follows: wage index values below 0.8 are adjusted by the greater of (a) the 40% reduced BNAF OR (b) 15%, subject to a maximum adjusted wage index of 0.8000. For the FY 2012 hospice wage index, the BNAF was reduced by a total of 40%.
3. Because there are no hospitals in this CBSA, the wage index value is calculated by taking the average of all other urban CBSAs in Georgia.

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²
10180	Abilene, TX	0.8284		Saratoga, NY			Anchorage Municipality, AK	
	Callahan, TX			Schenectady, NY			Matanuska-Susitna Borough, AK	
	Jones, TX			Schoharie, NY				
	Taylor, TX		10740	Albuquerque, NM	0.9788	11300	Anderson, IN	0.9515
10380	Aguadilla-Isabela-San Sebastian, PR	0.3992		Bernalillo, NM			Madison, IN	
	Aguada, PR			Sandoval, NM		11340	Anderson, SC	0.8997
	Aguadilla, PR			Torrance, NM			Anderson, SC	
	Anasco, PR		10780	Valencia, NM		11460	Ann Arbor, MI	1.0480
	Isabela, PR			Alexandria, LA	0.8276		Washtenaw, MI	
	Lares, PR			Grant, LA		11500	Anniston-Oxford, AL	0.8196
	Moca, PR			Rapides, LA			Calhoun, AL	
	Rincon, PR		10900	Allentown-Bethlehem-Easton, PA-NJ	0.9517	11540	Appleton, WI	0.9690
	San Sebastian, PR			Warren, NJ			Calumet, WI	
10420	Akron, OH	0.9154		Carbon, PA		11700	Outagamie, WI	0.9317
	Portage, OH			Lehigh, PA			Asheville, NC	
	Summit, OH			Northampton, PA			Buncombe, NC	
10500	Albany, GA	0.9354	11020	Altoona, PA	0.8923		Haywood, NC	
	Baker, GA			Blair, PA			Henderson, NC	
	Dougherty, GA		11100	Amarillo, TX	0.8948		Madison, NC	
	Lee, GA			Armstrong, TX		12020	Athens-Clarke, GA	0.9999
	Terrell, GA			Carson, TX			Clarke, GA	
	Worth, GA			Potter, TX			Madison, GA	
10580	Albany-Schenectady-Troy, NY	0.8957		Randall, TX			Oconee, GA	
	Albany, NY		11180	Ames, IA	1.0321	12060	Oglethorpe, GA	
	Rensselaer, NY			Story, IA			Atlanta-Sandy Springs-Marietta, GA	0.9885
			11260	Anchorage, AK	1.2385			

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CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²
	Barrow, GA			Anne Arundel, MD			Walker, AL	
	Bartow, GA			Baltimore, MD		13900	Bismarck, ND	0.8000
	Butts, GA			Carroll, MD			Burleigh, ND	
	Carroll, GA			Harford, MD			Morton, ND	
	Cherokee, GA			Howard, MD		13980	Blacksburg-Christiansburg-Radford, VA	0.8606
	Clayton, GA			Queen Anne's, MD			Giles, VA	
	Cobb, GA			Baltimore City, MD			Montgomery, VA	
	Coweta, GA		12620	Bangor, ME	1.0121		Pulaski, VA	
	Dawson, GA			Penobscot, ME			Radford City, VA	
	DeKalb, GA		12700	Barnstable Town, MA	1.3274		Bloomington, IN	0.9305
	Douglas, GA			Barnstable, MA		14020	Greene, IN	
	Fayette, GA		12940	Baton Rouge, LA	0.8885		Monroe, IN	
	Forsyth, GA			Ascension, LA			Owen, IN	
	Fulton, GA			East Baton Rouge, LA		14060	Bloomington-Normal, IL	0.9771
	Gwinnett, GA			East Feliciana, LA			McLean, IL	
	Haralson, GA			Iberville, LA		14260	Boise City-Nampa, ID	0.9599
	Heard, GA			Livingston, LA			Ada, ID	
	Henry, GA			Pointe Coupee, LA			Boise, ID	
	Jasper, GA			St. Helena, LA			Canyon, ID	
	Lamar, GA			West Baton Rouge, LA			Gem, ID	
	Meriwether, GA			West Feliciana, LA			Owyhee, ID	
	Newton, GA		12980	Battle Creek, MI	0.9995	14484	Boston-Quincy, MA	1.2606
	Paulding, GA			Calhoun, MI			Norfolk, MA	
	Pickens, GA		13020	Bay City, MI	0.9545		Plymouth, MA	
	Pike GA			Bay, MI			Suffolk, MA	
	Rockdale, GA		13140	Beaumont-Port Arthur, TX	0.8786	14500	Boulder, CO	1.0419
	Spalding, GA			Hardin, TX			Boulder, CO	
	Walton, GA			Jefferson, TX		14540	Bowling Green, KY	0.8971
12100	Atlantic City-Hammonton, NJ	1.1520		Orange, TX			Edmonson, KY	
	Atlantic, NJ		13380	Bellingham, WA	1.1790		Warren, KY	
12220	Auburn-Opelika, AL	0.8000		Whatcom, WA		14740	Bremerton-Silverdale, WA	1.1042
	Lee, AL		13460	Bend, OR	1.1772		Kitsap, WA	
12260	Augusta-Richmond County, GA-SC	0.9873		Deschutes, OR		14860	Bridgeport-Stamford-Norwalk, CT	1.2988
	Burke, GA		13644	Bethesda-Rockville-Frederick, MD	1.0895		Fairfield, CT	
	Columbia, GA			Frederick, MD		15180	Brownsville-Harlingen, TX	0.9495
	McDuffie, GA			Montgomery, MD			Cameron, TX	
	Richmond, GA		13740	Billings, MT	0.8979	15260	Brunswick, GA	0.9533
	Aiken, SC			Carbon, MT			Brantley, GA	
	Edgefield, SC			Yellowstone, MT			Glynn, GA	
12420	Austin-Round Rock-San Marcos, TX	0.9848	13780	Binghamton, NY	0.9026		McIntosh, GA	
	Bastrop, TX			Broome, NY		15380	Buffalo-Niagara Falls, NY	0.9865
	Caldwell, TX		13820	Birmingham-Hoover, AL	0.8914		Erie, NY	
	Hays, TX			Bibb, AL			Niagara, NY	
	Travis, TX			Blount, AL		15500	Burlington, NC	0.9175
	Williamson, TX			Chilton, AL			Alamance, NC	
12540	Bakersfield-Delano, CA	1.2119		Jefferson, AL				
	Kern, CA			St. Clair, AL				
12580	Baltimore-Towson, MD	1.0616		Shelby, AL				

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Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2012

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²
15540	Burlington-South Burlington, VT Chittenden, VT Franklin, VT Grand Isle, VT	1.0297		Gaston, NC Mecklenburg, NC Union, NC York, SC			Montgomery, TN Stewart, TN	
15764	Cambridge-Newton-Framingham, MA Middlesex, MA	1.1646	16820	Charlottesville, VA	0.9670	17420	Cleveland, TN Bradley, TN Polk, TN	0.8003
15804	Camden, NJ Burlington, NJ Camden, NJ Gloucester, NJ	1.0751		Albemarle, VA Fluvanna, VA Greene, VA Nelson, VA Charlottesville City, VA		17460	Cleveland-Elyria-Mentor, OH Cuyahoga, OH Geauga, OH Lake, OH Lorain, OH Medina, OH	0.9368
15940	Canton-Massillon, OH Carroll, OH Stark, OH	0.9057	16860	Chattanooga, TN-GA Catoosa, GA Dade, GA Walker, GA Hamilton, TN	0.9139	17660	Coeur d'Alene, ID Kootenai, ID	0.9693
15980	Cape Coral-Fort Myers, FL Lee, FL	0.9518		Marion, TN Sequatchie, TN		17780	College Station-Bryan, TX Brazos, TX Burlinson, TX Robertson, TX	0.9925
16020	Cape Girardeau-Jackson, MO-IL Alexander, IL Bollinger, MO Cape Girardeau, MO	0.9299	16940	Cheyenne, WY Laramie, WY	0.9722	17820	Colorado Springs, CO El Paso, CO Teller, CO	0.9814
16180	Carson City, NV Carson City, NV	1.0833	16974	Chicago-Joliet-Naperville, IL Cook, IL DeKalb, IL DuPage, IL Grundy, IL	1.0965	17860	Columbia, MO Boone, MO Howard, MO	0.8573
16220	Casper, WY Natrona, WY	0.9994		Kane, IL Kendall, IL McHenry, IL Will, IL		17900	Columbia, SC Calhoun, SC Fairfield, SC Kershaw, SC Lexington, SC Richland, SC Saluda, SC	0.9040
16300	Cedar Rapids, IA Benton, IA Jones, IA Linn, IA	0.9155	17020	Chico, CA Butte, CA	1.1938	17980	Columbus, GA-AL Russell, AL Chattahoochee, GA Harris, GA Marion, GA Muscogee, GA	0.9344
16580	Champaign-Urbana, IL Champaign, IL Ford, IL Piatt, IL	1.0595	17140	Cincinnati-Middletown, OH-KY-IN Dearborn, IN Franklin, IN Ohio, IN Boone, KY Bracken, KY Campbell, KY Gallatin, KY Grant, KY Kenton, KY Pendleton, KY Brown, OH Butler, OH Clermont, OH Hamilton, OH Warren, OH	1.0040		Columbus, IN Bartholomew, IN Columbus, OH Delaware, OH Fairfield, OH Franklin, OH Licking, OH Madison, OH Morrow, OH Pickaway, OH Union, OH	0.9766
16620	Charleston, WV Boone, WV Clay, WV Kanawha, WV Lincoln, WV Putnam, WV	0.8173		Clarksville, TN-KY Christian, KY Trigg, KY	0.8165	18140	Columbus, OH Delaware, OH Fairfield, OH Franklin, OH Licking, OH Madison, OH Morrow, OH Pickaway, OH Union, OH	1.0498
16700	Charleston-North Charleston-Summerville, SC Berkeley, SC Charleston, SC Dorchester, SC	0.9683				18580	Corpus Christi, TX Aransas, TX	0.8887
16740	Charlotte-Gastonia-Rock Hill, NC-SC Anson, NC Cabarrus, NC	0.9751						

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CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²
	Nueces, TX			Broomfield, CO		21300	Elmira, NY	0.8742
	San Patricio, TX			Clear Creek, CO			Chemung, NY	
18700	Corvallis, OR	1.0823		Denver, CO		21340	El Paso, TX	0.8773
	Benton, OR			Douglas, CO			El Paso, TX	
18880	Crestview-Fort Walton Beach-Destin, FL	0.9153		Elbert, CO		21500	Erie, PA	0.8654
	Okaloosa, FL			Gilpin, CO			Erie, PA	
19060	Cumberland, MD-WV	0.8474		Jefferson, CO		21660	Eugene-Springfield, OR	1.1784
	Allegany, MD			Park, CO			Lane, OR	
	Mineral, WV		19780	Des Moines-West Des Moines, IA	0.9959	21780	Evansville, IN-KY	0.8729
19124	Dallas-Plano-Irving, TX	1.0207		Dallas, IA			Gibson, IN	
	Collin, TX			Guthrie, IA			Posey, IN	
	Dallas, TX			Madison, IA			Vanderburgh, IN	
	Delta, TX			Polk, IA			Warrick, IN	
	Denton, TX			Warren, IA			Henderson, KY	
	Ellis, TX		19804	Detroit-Livonia-Dearborn, MI	1.0040	21820	Fairbanks, AK	1.1470
	Hunt, TX			Wayne, MI			Fairbanks North Star, AK	
	Kaufman, TX		20020	Dothan, AL	0.8000	21940	Fajardo, PR	0.4465
	Rockwall, TX			Geneva, AL			Ceiba, PR	
19140	Dalton, GA	0.8925		Henry, AL			Fajardo, PR	
	Murray, GA			Houston, AL		22020	Luquillo, PR	
	Whitfield, GA						Fargo, ND-MN	0.8347
19180	Danville, IL	1.0034	20100	Dover, DE	1.0270		Cass, ND	
	Vermilion, IL			Kent, DE			Clay, MN	
19260	Danville, VA	0.8455	20220	Dubuque, IA	0.9082	22140	Farmington, NM	0.9667
	Pittsylvania, VA			Dubuque, IA			San Juan, NM	
	Danville City, VA		20260	Duluth, MN-WI	1.0936	22180	Fayetteville, NC	0.9651
19340	Davenport-Moline-Rock Island, IA-IL	0.8695		Carlton, MN			Cumberland, NC	
	Henry, IL			St. Louis, MN			Hoke, NC	
	Mercer, IL			Douglas, WI		22220	Fayetteville-Springdale-Rogers, AR-MO	0.8919
	Rock Island, IL		20500	Durham-Chapel Hill, NC	1.0004		Benton, AR	
	Scott, IA			Chatham, NC			Madison, AR	
19380	Dayton, OH	0.9461		Durham, NC			Washington, AR	
	Greene, OH			Orange, NC			McDonald, MO	
	Miami, OH		20740	Person, NC		22380	Flagstaff, AZ	1.2880
	Montgomery, OH			Eau Claire, WI	0.9978		Coconino, AZ	
	Preble, OH			Chippewa, WI		22420	Flint, MI	1.1900
19460	Decatur, AL	0.8000	20764	Eau Claire, WI			Genesee, MI	
	Lawrence, AL			Edison-New Brunswick, NJ	1.1393	22500	Florence, SC	0.8542
	Morgan, AL			Middlesex, NJ			Darlington, SC	
19500	Decatur, IL	0.8194		Monmouth, NJ			Florence, SC	
	Macon, IL			Ocean, NJ		22520	Florence-Muscle Shoals, AL	0.8430
19660	Deltona-Daytona Beach-Ormond Beach, FL	0.9043		Somerset, NJ			Colbert, AL	
	Volusia, FL		20940	El Centro, CA	0.9583		Lauderdale, AL	
19740	Denver-Aurora-Broomfield, CO	1.1095		Imperial, CA		22540	Fond Du Lac, WI	0.9547
	Adams, CO		21060	Elizabethtown, KY	0.8746		Fond Du Lac, WI	
	Arapahoe, CO			Hardin, KY		22660	Fort Collins-Loveland, CO	1.0240
				Larue, KY				
			21140	Elkhart-Goshen, IN	0.9798			
				Elkhart, IN			Larimer, CO	

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Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2012

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22744	Ft. Lauderdale-Pompano Beach-Deerfield Beach, FL	1.0517		Cascade, MT		25860	Hickory-Lenoir-Morganton, NC	0.8999
	Broward, FL		24540	Greeley, CO	0.9830		Alexander, NC	
22900	Fort Smith, AR-OK	0.8000	24580	Green Bay, WI	0.9923		Burke, NC	
	Crawford, AR			Brown, WI			Caldwell, NC	
	Franklin, AR			Kewaunee, WI			Catawba, NC	
	Sebastian, AR		24660	Oconto, WI		25980	Hinesville-Fort Stewart, GA ³	0.9273
	Le Flore, OK			Greensboro-High Point, NC	0.9194		Liberty, GA	
	Sequoyah, OK			Guilford, NC			Long, GA	
23060	Fort Wayne, IN	0.9691		Randolph, NC		26100	Holland-Grand Haven, MI	0.8935
	Allen, IN			Rockingham, NC			Ottawa, MI	
	Wells, IN		24780	Greenville, NC	0.9699	26180	Honolulu, HI	1.2222
	Whitley, IN			Greene, NC			Honolulu, HI	
23104	Forth Worth-Arlington, TX	0.9807		Pitt, NC		26300	Hot Springs, AR	0.9473
	Johnson, TX		24860	Greenville-Mauldin-Easley, SC	0.9983		Garland, AR	
	Parker, TX			Greenville, SC		26380	Houma-Bayou Cane-Thibodaux, LA	0.8128
	Tarrant, TX			Laurens, SC			Lafourche, LA	
	Wise, TX			Pickens, SC			Terrebonne, LA	
23420	Fresno, CA	1.1824	25020	Guayama, PR	0.4239	26420	Houston-Sugar Land-Baytown, TX	1.0169
	Fresno, CA			Arroyo, PR			Austin, TX	
23460	Gadsden, AL	0.8000		Guayama, PR			Brazoria, TX	
	Etowah, AL			Patillas, PR			Chambers, TX	
23540	Gainesville, FL	0.9482	25060	Gulfport-Biloxi, MS	0.9189		Fort Bend, TX	
	Alachua, FL			Hancock, MS			Galveston, TX	
	Gilchrist, FL			Harrison, MS			Harris, TX	
23580	Gainesville, GA	0.9547		Stone, MS			Liberty, TX	
	Hall, GA		25180	Hagerstown-Martinsburg, MD-WV	0.9579		Montgomery, TX	
23844	Gary, IN	0.9403		Washington, MD			San Jacinto, TX	
	Jasper, IN			Berkeley, WV			Waller, TX	
	Lake, IN			Morgan, WV		26580	Huntington-Ashland, WV-KY-OH	0.9268
	Newton, IN		25260	Hanford-Corcoran, CA	1.1599		Boyd, KY	
	Porter, IN			Kings, CA			Greenup, KY	
24020	Glens Falls, NY	0.8806	25420	Harrisburg-Carlisle, PA	0.9623		Lawrence, OH	
	Warren, NY			Cumberland, PA			Cabell, WV	
	Washington, NY			Dauphin, PA			Wayne, WV	
24140	Goldsboro, NC	0.9386		Perry, PA		26620	Huntsville, AL	0.9514
	Wayne, NC			Harrisonburg, VA	0.9480		Limestone, AL	
24220	Grand Forks, ND-MN	0.8000	25500	Rockingham, VA			Madison, AL	
	Polk, MN			Harrisonburg City, VA		26820	Idaho Falls, ID	1.0003
	Grand Forks, ND		25540	Hartford-West Hartford-East Hartford, CT	1.1311		Bonneville, ID	
24300	Grand Junction, CO	1.0196		Hartford, CT			Jefferson, ID	
	Mesa, CO			Middlesex, CT		26900	Indianapolis-Carmel, IN	1.0012
24340	Grand Rapids-Wyoming, MI	0.9491		Tolland, CT			Boone, IN	
	Barry, MI		25620	Hattiesburg, MS	0.8000		Brown, IN	
	Ionia, MI			Forrest, MS			Hamilton, IN	
	Kent, MI			Lamar, MS			Hancock, IN	
	Newaygo, MI			Perry, MS				
24500	Great Falls, MT	0.8580						

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	Hendricks, IN			Van Buren, MI			Carroll, IN	
	Johnson, IN		28100	Kankakee-Bradley, IL	1.0992		Tippecanoe, IN	
	Marion, IN			Kankakee, IL		29180	Lafayette, LA	0.8787
	Morgan, IN		28140	Kansas City, MO-KS	0.9991		Lafayette, LA	
	Putnam, IN			Franklin, KS			St. Martin, LA	
	Shelby, IN			Johnson, KS		29340	Lake Charles, LA	0.8484
26980	Iowa City, IA	0.9997		Leavenworth, KS			Calcasieu, LA	
	Johnson, IA			Linn, KS			Cameron, LA	
	Washington, IA			Miami, KS		29404	Lake County-Kenosha County, IL-WI	1.1160
27060	Ithaca, NY	1.0188		Wyandotte, KS			Lake, IL	
	Tompkins, NY			Bates, MO			Kenosha, WI	
27100	Jackson, MI	0.9477		Caldwell, MO		29420	Lake Havasu City-Kingman, AZ	1.0595
	Jackson, MI			Cass, MO			Mohave, AZ	
27140	Jackson, MS	0.8325		Clay, MO		29460	Lakeland-Winter Haven, FL	0.8744
	Copiah, MS			Clinton, MO			Polk, FL	
	Hinds, MS			Jackson, MO		29540	Lancaster, PA	0.9672
	Madison, MS			Lafayette, MO			Lancaster, PA	
	Rankin, MS			Platte, MO		29620	Lansing-East Lansing, MI	1.0660
	Simpson, MS			Ray, MO			Clinton, MI	
27180	Jackson, TN	0.8699	28420	Kennewick-Pasco-Richland, WA	1.0327		Eaton, MI	
	Chester, TN			Benton, WA		29700	Ingham, MI	0.8192
	Madison, TN			Franklin, WA			Laredo, TX	
27260	Jacksonville, FL	0.9196		Franklin, WA		29740	Webb, TX	0.8192
	Baker, FL		28660	Killeen-Temple-Fort Hood, TX	0.9107		Las Cruces, NM	0.9623
	Clay, FL			Bell, TX		29820	Dona Ana, NM	
	Duval, FL			Coryell, TX		29940	Las Vegas-Paradise, NV	1.2524
	Nassau, FL			Lampasas, TX			Clark, NV	
	St. Johns, FL					30020	Lawrence, KS	0.8833
27340	Jacksonville, NC	0.8081	28700	Kingsport-Bristol-Bristol, TN-VA	0.8000		Douglas, KS	
	Onslow, NC			Hawkins, TN		30140	Lawton, OK	0.8576
27500	Janesville, WI	0.9746		Sullivan, TN			Comanche, OK	
	Rock, WI			Bristol City, VA		30140	Lebanon, PA	0.8081
27620	Jefferson City, MO	0.8731		Scott, VA			Lebanon, PA	
	Callaway, MO			Washington, VA		30300	Lewiston, ID-WA	0.9687
	Cole, MO						Nez Perce, ID	
	Moniteau, MO		28740	Kingston, NY	0.9394	30340	Asotin, WA	0.9216
	Osage, MO			Ulster, NY			Lewiston-Auburn, ME	
27740	Johnson City, TN	0.8390	28940	Knoxville, TN	0.8118	30460	Androscoggin, ME	0.9127
	Carter, TN			Anderson, TN			Bourbon, KY	
	Unicoi, TN			Blount, TN			Clark, KY	
	Washington, TN			Knox, TN			Fayette, KY	
27780	Johnstown, PA	0.8374		Loudon, TN			Jessamine, KY	
	Cambria, PA			Union, TN			Scott, KY	
27860	Jonesboro, AR	0.8030	29020	Kokomo, IN	0.9451		Woodford, KY	
	Craighead, AR			Howard, IN			Lima, OH	0.9597
	Poinsett, AR			Tipton, IN			Allen, OH	
27900	Joplin, MO	0.8503	29100	La Crosse, WI-MN	1.0148			
	Jasper, MO			Houston, MN				
	Newton, MO			La Crosse, WI				
28020	Kalamazoo-Portage, MI	1.0654	29140	Lafayette, IN	0.9616	30620		
	Kalamazoo, MI			Benton, IN				

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30700	Lincoln, NE Lancaster, NE Seward, NE	0.9955		Jones, GA Monroe, GA Twiggs, GA			Milwaukee, WI Ozaukee, WI Washington, WI Waukesha, WI	
30780	Little Rock-North Little Rock-Conway, AR Faulkner, AR Grant, AR Lonoke, AR Perry, AR Pulaski, AR Saline, AR	0.8846	31460	Madera-Chowchilla, CA Madera, CA	0.8267	33460	Minneapolis-St. Paul-Bloomington, MN-WI Anoka, MN Carver, MN Chisago, MN Dakota, MN Hennepin, MN Isanti, MN Ramsey, MN Scott, MN Sherburne, MN Washington, MN Wright, MN Pierce, WI St. Croix, WI	1.1535
30860	Logan, UT-ID Franklin, ID Cache, UT	0.9103	31540	Madison, WI Columbia, WI Dane, WI Iowa, WI	1.1691			
30980	Longview, TX Gregg, TX Rusk, TX Upshur, TX	0.8864	31700	Manchester-Nashua, NH Hillsborough, NH	1.0216			
31020	Longview, WA Cowlitz, WA	1.0658	31740	Manhattan, KS Geary, KS	0.8123			
31084	Los Angeles-Long Beach-Glendale, CA Los Angeles, CA	1.2556		Pottawatomie, KS Riley, KS				
31140	Louisville-Jefferson County, KY-IN Clark, IN Floyd, IN Harrison, IN Washington, IN Bullitt, KY Henry, KY Jefferson, KY Meade, KY Nelson, KY Oldham, KY Shelby, KY Spencer, KY Trimble, KY	0.9209	31860	Mankato-North Mankato, MN Blue Earth, MN Nicollet, MN	0.9402	33540	Missoula, MT	0.9235
			31900	Mansfield, OH Richland, OH	0.9232	33660	Mobile, AL	0.8240
			32420	Mayaguez, PR Hormigueros, PR Mayaguez, PR	0.4186	33700	Mobile, AL Modesto, CA Stanislaus, CA	1.2530
			32580	McAllen-Edinburg-Mission, TX Hidalgo, TX	0.9148	33740	Monroe, LA Ouachita, LA Union, LA	0.8274
			32780	Medford, OR Jackson, OR	1.0415	33780	Monroe, MI Monroe, MI	0.8989
			32820	Memphis, TN-MS-AR Crittenden, AR DeSoto, MS Marshall, MS Tate, MS Tunica, MS Fayette, TN Shelby, TN	0.9594	33860	Montgomery, AL Autauga, AL Elmore, AL Lowndes, AL Montgomery, AL	0.8739
31180	Lubbock, TX Crosby, TX Lubbock, TX	0.9158		Tipton, TN		34060	Morgantown, WV Monongalia, WV Preston, WV	0.8423
			32900	Merced, CA Merced, CA	1.2793	34100	Morristown, TN Grainger, TN Hamblen, TN Jefferson, TN	0.8000
31340	Lynchburg, VA Amherst, VA Appomattox, VA Bedford, VA Campbell, VA Bedford City, VA Lynchburg City, VA	0.9000	33124	Miami-Miami Beach-Kendall, FL Miami-Dade, FL	1.0484	34580	Mount Vernon-Anacortes, WA Skagit, WA	1.0727
			33140	Michigan City-La Porte, IN LaPorte, IN	0.9803	34620	Muncie, IN Delaware, IN	0.8494
			33260	Midland, TX Midland, TX	1.0052	34740	Muskegon-Norton Shores, MI Muskegon, MI	1.0154
31420	Macon, GA Bibb, GA Crawford, GA	0.9526	33340	Milwaukee-Waukesha-West Allis, WI	1.0541			

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34820	Myrtle Beach-North Myrtle Beach-Conway, SC	0.9045		Kings, NY		36740	Orlando-Kissimmee-Sanford, FL	0.9485
	Horry, SC			New York, NY			Lake, FL	
34900	Napa, CA	1.5117		Putnam, NY			Orange, FL	
	Napa, CA			Queens, NY			Osceola, FL	
34940	Naples-Marco Island, FL	1.0039		Richmond, NY			Seminole, FL	
	Collier, FL			Rockland, NY		36780	Oshkosh-Neenah, WI	0.9902
34980	Nashville-Davidson-Murfreesboro-Franklin, TN	0.9789	35660	Westchester, NY	0.9184		Winnebago, WI	
	Cannon, TN			Berrien, MI		36980	Owensboro, KY	0.8664
	Cheatham, TN		35840	North Port-Bradenton-Sarasota, FL	0.9814		Daviess, KY	
	Davidson, TN			Manatee, FL			Hancock, KY	
	Dickson, TN			Sarasota, FL		37100	Oxnard-Thousand Oaks-Ventura, CA	1.2812
	Hickman, TN		35980	Norwich-New London, CT	1.1609		Ventura, CA	
	Macon, TN			New London, CT		37340	Palm Bay-Melbourne-Titusville, FL	0.9535
	Robertson, TN		36084	Oakland-Fremont-Hayward, CA	1.6929		Brevard, FL	
	Rutherford TN			Alameda, CA		37380	Palm Coast, FL	0.8700
	Smith, TN			Contra Costa, CA			Flagler, FL	
	Sumner, TN		36100	Ocala, FL	0.8766	37460	Panama City-Lynn Haven-Panama City Beach, FL	0.8234
	Trousdale, TN			Marion, FL			Bay, FL	
	Williamson, TN		36140	Ocean City, NJ	1.1261	37620	Parkersburg-Marietta-Vienna, WV-OH	0.8000
	Wilson, TN			Cape May, NJ			Washington, OH	
35004	Nassau-Suffolk, NY	1.2748	36220	Odessa, TX	0.9768		Pleasants, WV	
	Nassau, NY			Ector, TX			Wirt, WV	
	Suffolk, NY		36260	Ogden-Clearfield, UT	0.9593		Wood, WV	
35084	Newark-Union, NJ-PA	1.1863		Davis, UT		37700	Pascagoula, MS	0.8591
	Essex, NJ			Morgan, UT			George, MS	
	Hunterdon, NJ			Weber, UT		37764	Peabody, MA	1.1365
	Morris, NJ		36420	Oklahoma City, OK	0.9189		Essex, MA	
	Sussex, NJ			Canadian, OK		37860	Pensacola-Ferry Pass-Brent, FL	0.8544
	Union, NJ			Cleveland, OK			Escambia, FL	
	Pike, PA			Grady, OK			Santa Rosa, FL	
35300	New Haven-Milford, CT	1.1920		Lincoln, OK		37900	Peoria, IL	0.9471
	New Haven, CT			Logan, OK			Marshall, IL	
35380	New Orleans-Metairie-Kenner, LA	0.9389		McClain, OK			Peoria, IL	
	Jefferson, LA			Oklahoma, OK			Stark, IL	
	Orleans, LA		36500	Olympia, WA	1.1665		Tazewell, IL	
	Plaquemines, LA			Thurston, WA		37964	Woodford, IL	
	St. Bernard, LA		36540	Omaha-Council Bluffs, NE-IA	0.9920		Philadelphia, PA	1.1183
	St. Charles, LA			Harrison, IA			Bucks, PA	
	St. John the Baptist, LA			Mills, IA			Chester, PA	
	St. Tammany, LA			Pottawattamie, IA			Delaware, PA	
35644	New York-White Plains-Wayne, NY-NJ	1.3410		Cass, NE			Montgomery, PA	
	Bergen, NJ			Douglas, NE			Philadelphia, PA	
	Hudson, NJ			Sarpy, NE				
	Passaic, NJ			Saunders, NE				
	Bronx, NY			Washington, NE				

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38060	Phoenix-Mesa-Glendale, AZ Maricopa, AZ Pinal, AZ	1.1016	39300	Providence-New Bedford-Fall River, RI-MA Bristol, MA	1.1091		Hopewell City, VA Petersburg City, VA Richmond City, VA	
38220	Pine Bluff, AR Cleveland, AR Jefferson, AR Lincoln, AR	0.8294		Bristol, RI Kent, RI Newport, RI Providence, RI Washington, RI		40140	Riverside-San Bernardino-Ontario, CA Riverside, CA San Bernardino, CA	1.1977
38300	Pittsburgh, PA Allegheny, PA Armstrong, PA Beaver, PA Butler, PA Fayette, PA Washington, PA Westmoreland, PA	0.8908	39340	Provo-Orem, UT Juab, UT Utah, UT	0.9649	40220	Roanoke, VA Botetourt, VA Craig, VA Franklin, VA Roanoke, VA	0.9137
38340	Pittsfield, MA Berkshire, MA	1.0736	39380	Pueblo, CO Pueblo, CO	0.9028	40340	Roanoke City, VA Salem City, VA Rochester, MN Dodge, MN Olmsted, MN Wabasha, MN	1.1327
38540	Pocatello, ID Bannock, ID Power, ID	0.9841	39460	Punta Gorda, FL Charlotte, FL	0.9067	40380	Rochester, NY Livingston, NY Monroe, NY Ontario, NY Orleans, NY Wayne, NY	0.8897
38660	Ponce, PR Juana Diaz, PR Ponce, PR Villalba, PR	0.4975	39540	Racine, WI Racine, WI	1.0952	40420	Rockford, IL Boone, IL Winnebago, IL	1.0386
38860	Portland-South Portland-Biddeford, ME Cumberland, ME Sagadahoc, ME York, ME	1.0247	39580	Raleigh-Cary, NC Franklin, NC Johnston, NC Wake, NC	1.0156	40484	Rockingham County-Strafford County, NH Rockingham, NH Strafford, NH	1.0378
38900	Portland-Vancouver-Hillsboro, OR-WA Clackamas, OR Columbia, OR Multnomah, OR Washington, OR Yamhill, OR Clark, WA Skamania, WA	1.1879	39660	Rapid City, SD Meade, SD Pennington, SD	1.0809	40580	Rocky Mount, NC Edgecombe, NC Nash, NC	0.9352
38940	Port St. Lucie, FL Martin, FL St. Lucie, FL	1.1100	39740	Reading, PA Berks, PA	0.9217	40660	Rome, GA Floyd, GA	0.8939
39100	Poughkeepsie-Newburgh-Middletown, NY Dutchess, NY Orange, NY	1.1753	39820	Redding, CA Shasta, CA	1.4631	40900	Sacramento--Arden-Arcade--Roseville, CA El Dorado, CA Placer, CA Sacramento, CA Yolo, CA	1.4547
39140	Prescott, AZ Yavapai, AZ	1.2664	39900	Reno-Sparks, NV Storey, NV Washoe, NV	1.0785	40980	Saginaw-Saginaw Township North, MI Saginaw, MI	0.9035
			40060	Richmond, VA Amelia, VA Caroline, VA Charles City, VA Chesterfield, VA Cumberland, VA Dinwiddie, VA Goochland, VA Hanover, VA Henrico, VA King and Queen, VA King William, VA Louisa, VA New Kent, VA Powhatan, VA Prince George, VA Sussex, VA Colonial Heights City, VA	1.0001	41060	St. Cloud, MN Benton, MN Stearns, MN	1.1430
						41100	St. George, UT Washington, UT	0.9454
						41140	St. Joseph, MO-KS	1.0664

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	Doniphan, KS			Erie, OH			Rio Grande, PR	
	Andrew, MO		41884	San Francisco-San Mateo-Redwood City, CA	1.6286		San Juan, PR	
	Buchanan, MO			Marin, CA			San Lorenzo, PR	
	De Kalb, MO			San Francisco, CA			Toa Alta, PR	
41180	St. Louis, MO-IL	0.9410		San Mateo, CA			Toa Baja, PR	
	Bond, IL		41900	San German-Cabo Rojo, PR	0.5244		Trujillo Alto, PR	
	Calhoun, IL			Cabo Rojo, PR		42020	San Luis Obispo-Paso Robles, CA	1.3369
	Clinton, IL			Lajas, PR			San Luis Obispo, CA	
	Jersey, IL			Sabana Grande, PR		42044	Santa Ana-Anaheim-Irvine, CA	1.2590
	Macoupin, IL		41940	San Jose-Sunnyvale-Santa Clara, CA	1.7290		Orange CA	
	Madison, IL			San Benito, CA		42060	Santa Barbara-Santa Maria-Goleta, CA	1.2328
	Monroe, IL			Santa Clara, CA			Santa Barbara, CA	
	St. Clair, IL		41980	San Juan-Caguas-Guaynabo, PR	0.4940	42100	Santa Cruz-Watsonville, CA	1.7329
	Crawford, MO			Aguas Buenas, PR			Santa Cruz, CA	
	Franklin, MO			Aibonito, PR		42140	Santa Fe, NM	1.1228
	Jefferson, MO			Arecibo, PR			Santa Fe, NM	
	Lincoln, MO			Barceloneta, PR		42220	Santa Rosa-Petaluma, CA	1.6711
	St. Charles, MO			Barranquitas, PR			Sonoma, CA	
	St. Louis, MO			Bayamon, PR		42340	Savannah, GA	0.9220
	Warren, MO			Caguas, PR			Bryan, GA	
	Washington, MO			Camuy, PR			Chatham, GA	
	St. Louis City, MO			Canovanas, PR			Effingham, GA	
41420	Salem, OR	1.1524		Carolina, PR		42540	Scranton--Wilkes-Barre, PA	0.8528
	Marion, OR			Catano, PR			Lackawanna, PA	
	Polk, OR			Cayey, PR			Luzerne, PA	
41500	Salinas, CA	1.6237		Ciales, PR			Wyoming, PA	
	Monterey, CA			Cidra, PR		42644	Seattle-Bellevue-Everett, WA	1.1962
41540	Salisbury, MD	0.9322		Comerio, PR			King, WA	
	Somerset, MD			Corozal, PR			Snohomish, WA	
	Wicomico, MD			Dorado, PR		42680	Sebastian-Vero Beach, FL	0.9417
41620	Salt Lake City, UT	0.9592		Florida, PR			Indian River, FL	
	Salt Lake, UT			Guaynabo, PR		43100	Sheboygan, WI	0.9558
	Summit, UT			Gurabo, PR			Sheboygan, WI	
	Tooele, UT			Hatillo, PR		43300	Sherman-Denison, TX	0.8570
41660	San Angelo, TX	0.8595		Humacao, PR			Grayson, TX	
	Irion, TX			Juncos, PR		43340	Shreveport-Bossier City, LA	0.8836
	Tom Green, TX			Las Piedras, PR			LA	
41700	San Antonio-New Braunfels, TX	0.9314		Loiza, PR			Bossier, LA	
	Atascosa, TX			Manati, PR			Caddo, LA	
	Bandera, TX			Maunabo, PR			De Soto, LA	
	Bexar, TX			Morovis, PR				
	Comal, TX			Naguabo, PR				
	Guadalupe, TX			Naranjito, PR				
	Kendall, TX			Orocovis, PR				
	Medina, TX			Quebradillas, PR				
	Wilson, TX							
41740	San Diego-Carlsbad-San Marcos, CA	1.2400						
	San Diego, CA							
41780	Sandusky, OH	0.8991						

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43580	Sioux City, IA-NE-SD Woodbury, IA Dakota, NE Dixon, NE Union, SD	0.9411		Gadsden, FL Jefferson, FL Leon, FL Wakulla, FL		46660	Valdosta, GA Brooks, GA Echols, GA Lanier, GA Lowndes, GA	0.8220
43620	Sioux Falls, SD Lincoln, SD McCook, SD Minnehaha, SD Turner, SD	0.9626	45300	Tampa-St. Petersburg-Clearwater, FL Hernando, FL Hillsborough, FL Pasco, FL Pinellas, FL	0.9372	46700	Vallejo-Fairfield, CA Solano, CA	1.5456
43780	South Bend-Mishawaka, IN-MI St. Joseph, IN Cass, MI	1.0298	45460	Terre Haute, IN Clay, IN Sullivan, IN Vermillion, IN Vigo, IN	0.9529	47020	Victoria, TX Calhoun, TX Goliad, TX Victoria, TX	0.8508
43900	Spartanburg, SC Spartanburg, SC	0.9713	45500	Texarkana, TX- Texarkana, AR Miller, AR Bowie, TX	0.8020	47220	Vineland-Millville-Bridgeton, NJ Cumberland, NJ	1.0904
44060	Spokane, WA Spokane, WA	1.0943				47260	Virginia Beach-Norfolk-Newport News, VA-NC Currituck, NC Gloucester, VA Isle of Wight, VA	0.9276
44100	Springfield, IL Menard, IL Sangamon, IL	0.9451	45780	Toledo, OH Fulton, OH Lucas, OH Ottawa, OH Wood, OH	0.9764		James City, VA Mathews, VA Surry, VA York, VA Chesapeake City, VA	
44140	Springfield, MA Franklin, MA Hampden, MA Hampshire, MA	1.0611	45820	Topeka, KS Jackson, KS Jefferson, KS Osage, KS Shawnee, KS Wabaunsee, KS	0.9267		Hampton City, VA Newport News City, VA Norfolk City, VA Poquoson City, VA Portsmouth City, VA Suffolk City, VA	
44180	Springfield, MO Christian, MO Dallas, MO Greene, MO Polk, MO Webster, MO	0.8665	45940	Trenton-Ewing, NJ Mercer, NJ	1.0507		Virginia Beach City, VA Williamsburg City, VA	
44220	Springfield, OH Clark, OH	0.9559	46060	Tucson, AZ Pima, AZ	0.9813	47300	Visalia-Porterville, CA Tulare, CA	1.1116
44300	State College, PA Centre, PA	0.9088	46140	Tulsa, OK Creek, OK Okmulgee, OK Osage, OK Pawnee, OK Rogers, OK Tulsa, OK Wagoner, OK	0.9102	47380	Waco, TX McLennan, TX	0.8698
44600	Steubenville-Weirton, OH-WV Jefferson, OH Brooke, WV Hancock, WV	0.8000				47580	Warner Robins, GA Houston, GA	0.8310
44700	Stockton, CA San Joaquin, CA	1.3089	46220	Tuscaloosa, AL Greene, AL Hale, AL Tuscaloosa, AL	0.9154	47644	Warren-Troy-Farmington Hills, MI Lapeer, MI Livingston, MI Macomb, MI Oakland, MI St. Clair, MI	0.9987
44940	Sumter, SC Sumter, SC	0.8136				47894	Washington-Arlington-Alexandria, DC-VA-MD-WV	1.1100
45060	Syracuse, NY Madison, NY Onondaga, NY Oswego, NY	1.0253	46340	Tyler, TX Smith, TX	0.8349		District of Columbia, DC	
45104	Tacoma, WA Pierce, WA	1.1742	46540	Utica-Rome, NY Herkimer, NY	0.8769		Calvert, MD Charles, MD	
45220	Tallahassee, FL	0.9116		Oneida, NY				

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Hospice Rate Information - Hospice Wage Indexes For Urban Areas - FY 2012

CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²	CBSA CODE	URBAN AREA (CONSTITUENT COUNTIES OR COUNTY EQUIVALENTS) ¹	WAGE INDEX ²
	Prince George's, MD			Brunswick, NC	
	Arlington, VA			New Hanover, NC	
	Clarke, VA			Pender, NC	
	Fairfax, VA		49020	Winchester, VA-WV	1.0354
	Fauquier, VA			Frederick, VA	
	Loudoun, VA			Winchester City, VA	
	Prince William, VA			Hampshire, WV	
	Spotsylvania, VA		49180	Winston-Salem, NC	0.9253
	Stafford, VA			Davie, NC	
	Warren, VA			Forsyth, NC	
	Alexandria City, VA			Stokes, NC	
	Fairfax City, VA			Yadkin, SC	
	Falls Church City, VA		49340	Worcester, MA	1.1399
	Fredericksburg City, VA			Worcester, MA	
	Manassas City, VA		49420	Yakima, WA	1.0421
	Manassas Park City, VA			Yakima, WA	
	Jefferson, WV		49500	Yauco, PR	0.4066
47940	Waterloo-Cedar Falls, IA	0.8759		Guanica, PR	
	Black Hawk, IA			Guayanilla, PR	
	Bremer, IA			Penuelas, PR	
	Grundy, IA			Yauco, PR	
48140	Wausau, WI	0.9899	49620	York-Hanover, PA	1.0334
	Marathon, WI			York, PA	
48300	Wenatchee-East	0.9953	49660	Youngstown-Warren-	0.8928
	Wenatchee, WA			Boardman, OH-PA	
	Chelan, WA			Mahoning, OH	
	Douglas, WA			Trumbull, OH	
48424	West Palm Beach-Boca	1.0283		Mercer, PA	
	Raton-Boynton Beach,		49700	Yuba City, CA	1.1431
	FL			Sutter, CA	
	Palm Beach, FL			Yuba, CA	
48540	Wheeling, WV-OH	0.7676	49740	Yuma, AZ	0.9609
	Belmont, OH			Yuma, AZ	
	Marshall, WV				
	Ohio, WV				
48620	Wichita, KS	0.9211		- END -	
	Butler, KS				
	Harvey, KS				
	Sedgwick, KS				
	Sumner, KS				
48660	Wichita Falls, TX	0.9902			
	Archer, TX				
	Clay, TX				
	Wichita, TX				
48700	Williamsport, PA	0.8000			
	Lycoming, PA				
48864	Wilmington, DE-MD-NJ	1.0952			
	New Castle, DE				
	Cecil, MD				
	Salem, NJ				
48900	Wilmington, NC	0.9526			

Chapter 11

Addendum C (FY 2012)

Hospice Rate Information - Hospice Wage Indexes For Rural Areas - FY 2012

The following Hospice Indexes for Rural Areas are for care and services provided on or after October 1, 2011.

1. There are no rural areas in this state or district.
2. There are no hospitals in the rural areas of Massachusetts, so the wage index value used is the average wage index value for the contiguous counties.
3. Wage index values are obtained using the methodology described in the the Centers for Medicare and Medicaid Services Final Rule published in the August 4, 2011 Federal Register.

CBSA CODE	NONURBAN AREA	WAGE INDEX	CBSA CODE	NONURBAN AREA	WAGE INDEX
1	Alabama	0.8000	32	New Mexico	0.9224
2	Alaska	1.3070	33	New York	0.8473
3	Arizona	0.9415	34	North Carolina	0.8653
4	Arkansas	0.8000	35	North Dakota	0.7856
5	California	1.2480	36	Ohio	0.8862
6	Colorado	1.0282	37	Oklahoma	0.8136
7	Connecticut	1.1519	38	Oregon	1.0382
8	Delaware	1.0100	39	Pennsylvania	0.8778
9	District of Columbia ¹	-----	40	Puerto Rico ³	0.4654
10	Florida	0.8705	41	Rhode Island ¹	-----
11	Georgia	0.8000	42	South Carolina	0.8709
12	Hawaii	1.1582	43	South Dakota	0.8836
13	Idaho	0.8000	44	Tennessee	0.8163
14	Illinois	0.8636	45	Texas	0.8080
15	Indiana	0.8686	46	Utah	0.8953
16	Iowa	0.8845	47	Vermont	0.9928
17	Kansas	0.8262	48	Virgin Islands	0.8274
18	Kentucky	0.8105	49	Virginia	0.8117
19	Louisiana	0.8000	50	Washington	1.0542
20	Maine	0.8890	51	West Virginia	0.8000
21	Maryland	0.9498	52	Wisconsin	0.9509
22	Massachusetts ²	1.2183	53	Wyoming	0.9863
23	Michigan	0.8856	65	Guam	0.9949
24	Minnesota	0.9356			
25	Mississippi	0.8000			
26	Missouri	0.8000			
27	Montana	0.8816			
28	Nebraska	0.9224			
29	Nevada	0.9679			
30	New Hampshire	1.0566			
31	New Jersey ¹	-----			

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