

Average Hospital Charges by standard diagnosis groupings (MSDRG) relevant to the CMS guidelines.

Hospital Charges (Chargemaster Rates) provided below include hospital services, pharmaceuticals and supply items necessary to treat patients. Drug prices may vary based on dosage, supplier's availability and cost to hospital. Supply prices may vary based on manufacturer's cost to hospital. Hospital charges provided below can help patients understand potential costs for certain health care services, however the average of total charges provided do not provide a full picture of what patients will pay as described on marshallmedical.org.

The patient's financial liability will depend on the full course of treatment and on the patient's insurance coverage. Patients and consumers are encouraged to speak to their health insurance plan or their provider to receive an estimate of costs. For our patients, we offer financial counseling for those experiencing hardship during any point throughout their care.

MS DRG CODE AND DESCRIPTION	Number of Claims	Average of Total Charges
3 - ECMO OR TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITH MAJOR O.R. PROCEDURES	1	\$3,219,741.51
4 - TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITHOUT MAJOR O.R. PROCEDURES	1	\$293,504.06
13 - TRACHEOSTOMY FOR FACE, MOUTH AND NECK DIAGNOSES OR LARYNGECTOMY WITHOUT CC/MCC	1	\$122,447.90
29 - SPINAL PROCEDURES WITH CC OR SPINAL NEUROSTIMULATORS	1	\$206,767.89
30 - SPINAL PROCEDURES WITHOUT CC/MCC	2	\$209,189.89
38 - EXTRACRANIAL PROCEDURES WITH CC	1	\$106,294.45
39 - EXTRACRANIAL PROCEDURES WITHOUT CC/MCC	1	\$85,335.71
40 - PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITH MCC	1	\$458,324.67
41 - PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITH CC OR PERIPHERAL NEUROSTIMULATOR	2	\$79,052.40
56 - DEGENERATIVE NERVOUS SYSTEM DISORDERS WITH MCC	3	\$107,889.71
57 - DEGENERATIVE NERVOUS SYSTEM DISORDERS WITHOUT MCC	2	\$59,500.26
59 - MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA WITH CC	1	\$105,231.45
61 - ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITH MCC	5	\$159,324.36
62 - ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITH CC	7	\$121,604.71
63 - ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITHOUT CC/MCC	2	\$133,308.43
64 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH MCC	34	\$99,099.46
65 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	58	\$89,296.42
66 - INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITHOUT CC/MCC	13	\$49,871.84
67 - NONSPECIFIC CVA AND PRECEREBRAL OCCLUSION WITHOUT INFARCTION WITH MCC	1	\$112,181.51
69 - TRANSIENT ISCHEMIA WITHOUT THROMBOLYTIC	17	\$55,642.26
70 - NONSPECIFIC CEREBROVASCULAR DISORDERS WITH MCC	3	\$126,170.81
71 - NONSPECIFIC CEREBROVASCULAR DISORDERS WITH CC	9	\$76,939.80
72 - NONSPECIFIC CEREBROVASCULAR DISORDERS WITHOUT CC/MCC	4	\$43,388.86
74 - CRANIAL AND PERIPHERAL NERVE DISORDERS WITHOUT MCC	8	\$51,100.15
75 - VIRAL MENINGITIS WITH CC/MCC	1	\$104,472.62
76 - VIRAL MENINGITIS WITHOUT CC/MCC	1	\$63,873.83
77 - HYPERTENSIVE ENCEPHALOPATHY WITH MCC	1	\$57,784.34
82 - TRAUMATIC STUPOR AND COMA >1 HOUR WITH MCC	1	\$86,484.68

83 - TRAUMATIC STUPOR AND COMA >1 HOUR WITH CC	1	\$42,163.71
86 - TRAUMATIC STUPOR AND COMA <1 HOUR WITH CC	2	\$28,591.09
89 - CONCUSSION WITH CC	2	\$68,497.07
91 - OTHER DISORDERS OF NERVOUS SYSTEM WITH MCC	3	\$176,056.11
92 - OTHER DISORDERS OF NERVOUS SYSTEM WITH CC	11	\$64,848.38
93 - OTHER DISORDERS OF NERVOUS SYSTEM WITHOUT CC/MCC	2	\$69,170.57
95 - BACTERIAL AND TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM WITH CC	2	\$141,434.03
100 - SEIZURES WITH MCC	9	\$94,871.31
101 - SEIZURES WITHOUT MCC	23	\$69,605.97
102 - HEADACHES WITH MCC	1	\$138,612.68
103 - HEADACHES WITHOUT MCC	5	\$54,991.94
148 - EAR, NOSE, MOUTH AND THROAT MALIGNANCY WITHOUT CC/MCC	1	\$92,351.22
149 - DYSEQUILIBRIUM	3	\$65,025.06
150 - EPISTAXIS WITH MCC	2	\$40,152.70
151 - EPISTAXIS WITHOUT MCC	3	\$39,891.93
153 - OTITIS MEDIA AND URI WITHOUT MCC	2	\$74,127.61
154 - OTHER EAR, NOSE, MOUTH AND THROAT DIAGNOSES WITH MCC	2	\$133,617.69
155 - OTHER EAR, NOSE, MOUTH AND THROAT DIAGNOSES WITH CC	2	\$69,119.27
157 - DENTAL AND ORAL DISEASES WITH MCC	1	\$59,864.92
158 - DENTAL AND ORAL DISEASES WITH CC	2	\$80,213.69
159 - DENTAL AND ORAL DISEASES WITHOUT CC/MCC	1	\$31,503.98
163 - MAJOR CHEST PROCEDURES WITH MCC	3	\$1,158,923.44
164 - MAJOR CHEST PROCEDURES WITH CC	1	\$190,497.29
165 - MAJOR CHEST PROCEDURES WITHOUT CC/MCC	1	\$239,507.70
166 - OTHER RESPIRATORY SYSTEM O.R. PROCEDURES WITH MCC	6	\$326,796.80
167 - OTHER RESPIRATORY SYSTEM O.R. PROCEDURES WITH CC	2	\$87,202.94
175 - PULMONARY EMBOLISM WITH MCC OR ACUTE COR PULMONALE	26	\$91,399.16
176 - PULMONARY EMBOLISM WITHOUT MCC	32	\$73,066.30
177 - RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	351	\$141,127.72
178 - RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH CC	25	\$89,378.36
179 - RESPIRATORY INFECTIONS AND INFLAMMATIONS WITHOUT CC/MCC	5	\$58,719.24
180 - RESPIRATORY NEOPLASMS WITH MCC	7	\$101,216.47
181 - RESPIRATORY NEOPLASMS WITH CC	1	\$35,729.51
183 - MAJOR CHEST TRAUMA WITH MCC	6	\$103,263.59
184 - MAJOR CHEST TRAUMA WITH CC	5	\$61,249.10
185 - MAJOR CHEST TRAUMA WITHOUT CC/MCC	7	\$52,678.24
186 - PLEURAL EFFUSION WITH MCC	2	\$62,990.83
187 - PLEURAL EFFUSION WITH CC	1	\$38,482.01
189 - PULMONARY EDEMA AND RESPIRATORY FAILURE	14	\$71,656.05
190 - CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH MCC	58	\$70,805.71
191 - CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH CC	9	\$65,578.14
192 - CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITHOUT CC/MCC	3	\$37,543.61
193 - SIMPLE PNEUMONIA AND PLEURISY WITH MCC	47	\$84,157.98
194 - SIMPLE PNEUMONIA AND PLEURISY WITH CC	20	\$69,330.45
195 - SIMPLE PNEUMONIA AND PLEURISY WITHOUT CC/MCC	4	\$43,731.21
196 - INTERSTITIAL LUNG DISEASE WITH MCC	5	\$145,222.85
197 - INTERSTITIAL LUNG DISEASE WITH CC	1	\$98,156.55
199 - PNEUMOTHORAX WITH MCC	13	\$159,282.33
200 - PNEUMOTHORAX WITH CC	11	\$74,970.85
202 - BRONCHITIS AND ASTHMA WITH CC/MCC	6	\$76,775.74
205 - OTHER RESPIRATORY SYSTEM DIAGNOSES WITH MCC	5	\$70,897.86
206 - OTHER RESPIRATORY SYSTEM DIAGNOSES WITHOUT MCC	3	\$58,913.01
207 - RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT >96 HOURS	10	\$721,176.96
208 - RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <=96 HOURS	18	\$212,769.74

227 - CARDIAC DEFIBRILLATOR IMPLANT WITHOUT CARDIAC CATHETERIZATION WITHOUT MCC	2	\$372,816.15
228 - OTHER CARDIOTHORACIC PROCEDURES WITH MCC	1	\$175,108.60
242 - PERMANENT CARDIAC PACEMAKER IMPLANT WITH MCC	11	\$251,736.01
243 - PERMANENT CARDIAC PACEMAKER IMPLANT WITH CC	8	\$187,414.91
244 - PERMANENT CARDIAC PACEMAKER IMPLANT WITHOUT CC/MCC	12	\$161,241.22
252 - OTHER VASCULAR PROCEDURES WITH MCC	1	\$509,529.03
256 - UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS WITH CC	1	\$302,689.95
257 - UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS WITHOUT CC/MCC	1	\$55,613.02
260 - CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITH MCC	2	\$201,636.22
261 - CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITH CC	1	\$91,934.76
262 - CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITHOUT CC/MCC	2	\$48,488.14
264 - OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	1	\$141,316.16
280 - ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH MCC	25	\$91,854.59
281 - ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH CC	24	\$72,997.95
282 - ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITHOUT CC/MCC	18	\$50,916.29
283 - ACUTE MYOCARDIAL INFARCTION, EXPIRED WITH MCC	2	\$124,107.45
286 - CIRCULATORY DISORDERS EXCEPT AMI, WITH CARDIAC CATHETERIZATION WITH MCC	12	\$131,246.07
287 - CIRCULATORY DISORDERS EXCEPT AMI, WITH CARDIAC CATHETERIZATION WITHOUT MCC	17	\$88,591.94
291 - HEART FAILURE AND SHOCK WITH MCC	177	\$85,253.09
292 - HEART FAILURE AND SHOCK WITH CC	47	\$59,892.39
293 - HEART FAILURE AND SHOCK WITHOUT CC/MCC	7	\$48,776.33
296 - CARDIAC ARREST, UNEXPLAINED WITH MCC	2	\$289,796.83
299 - PERIPHERAL VASCULAR DISORDERS WITH MCC	6	\$93,513.70
300 - PERIPHERAL VASCULAR DISORDERS WITH CC	4	\$79,782.93
301 - PERIPHERAL VASCULAR DISORDERS WITHOUT CC/MCC	1	\$34,701.37
302 - ATHEROSCLEROSIS WITH MCC	2	\$40,777.77
303 - ATHEROSCLEROSIS WITHOUT MCC	5	\$32,396.17
304 - HYPERTENSION WITH MCC	9	\$80,073.06
305 - HYPERTENSION WITHOUT MCC	12	\$61,501.42
307 - CARDIAC CONGENITAL AND VALVULAR DISORDERS WITHOUT MCC	3	\$47,052.89
308 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH MCC	29	\$85,908.87
309 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH CC	46	\$63,286.94
310 - CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITHOUT CC/MCC	12	\$42,326.42
311 - ANGINA PECTORIS	1	\$59,859.10
312 - SYNCOPE AND COLLAPSE	24	\$56,246.95
313 - CHEST PAIN	12	\$52,524.99
314 - OTHER CIRCULATORY SYSTEM DIAGNOSES WITH MCC	17	\$106,653.28
315 - OTHER CIRCULATORY SYSTEM DIAGNOSES WITH CC	7	\$54,053.24
326 - STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITH MCC	3	\$297,086.94
327 - STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITH CC	2	\$114,385.68
328 - STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITHOUT CC/MCC	2	\$67,293.28
329 - MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH MCC	15	\$350,827.78
330 - MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	19	\$220,808.96
331 - MAJOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC	4	\$222,664.36
333 - RECTAL RESECTION WITH CC	1	\$244,704.80
335 - PERITONEAL ADHESIOLYSIS WITH MCC	2	\$329,806.05
336 - PERITONEAL ADHESIOLYSIS WITH CC	3	\$264,450.53
337 - PERITONEAL ADHESIOLYSIS WITHOUT CC/MCC	3	\$101,574.64
338 - APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITH MCC	2	\$176,282.01
339 - APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITH CC	2	\$170,472.62
340 - APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	3	\$104,738.91
341 - APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITH MCC	1	\$89,566.45
342 - APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITH CC	12	\$85,292.96
343 - APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	17	\$68,861.04

345 - MINOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	1	\$213,334.36
348 - ANAL AND STOMAL PROCEDURES WITH CC	1	\$148,769.96
349 - ANAL AND STOMAL PROCEDURES WITHOUT CC/MCC	2	\$121,022.11
351 - INGUINAL AND FEMORAL HERNIA PROCEDURES WITH CC	2	\$130,166.33
353 - HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITH MCC	2	\$196,628.76
354 - HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITH CC	3	\$122,982.08
355 - HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITHOUT CC/MCC	1	\$112,761.13
356 - OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITH MCC	1	\$334,221.50
357 - OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITH CC	2	\$127,197.48
358 - OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITHOUT CC/MCC	1	\$90,610.85
368 - MAJOR ESOPHAGEAL DISORDERS WITH MCC	4	\$129,921.50
369 - MAJOR ESOPHAGEAL DISORDERS WITH CC	6	\$117,723.42
371 - MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITH MCC	15	\$95,400.11
372 - MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITH CC	20	\$84,614.09
373 - MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITHOUT CC/MCC	1	\$36,181.51
374 - DIGESTIVE MALIGNANCY WITH MCC	4	\$117,963.70
375 - DIGESTIVE MALIGNANCY WITH CC	12	\$125,287.94
376 - DIGESTIVE MALIGNANCY WITHOUT CC/MCC	1	\$84,237.34
377 - GASTROINTESTINAL HEMORRHAGE WITH MCC	36	\$145,662.26
378 - GASTROINTESTINAL HEMORRHAGE WITH CC	63	\$90,603.10
379 - GASTROINTESTINAL HEMORRHAGE WITHOUT CC/MCC	4	\$47,566.71
380 - COMPLICATED PEPTIC ULCER WITH MCC	11	\$134,071.52
381 - COMPLICATED PEPTIC ULCER WITH CC	9	\$119,211.28
382 - COMPLICATED PEPTIC ULCER WITHOUT CC/MCC	3	\$60,719.78
384 - UNCOMPLICATED PEPTIC ULCER WITHOUT MCC	3	\$66,443.28
385 - INFLAMMATORY BOWEL DISEASE WITH MCC	5	\$95,523.44
386 - INFLAMMATORY BOWEL DISEASE WITH CC	11	\$66,834.90
387 - INFLAMMATORY BOWEL DISEASE WITHOUT CC/MCC	1	\$49,911.88
388 - GASTROINTESTINAL OBSTRUCTION WITH MCC	14	\$90,492.11
389 - GASTROINTESTINAL OBSTRUCTION WITH CC	41	\$69,087.25
390 - GASTROINTESTINAL OBSTRUCTION WITHOUT CC/MCC	15	\$53,904.46
391 - ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITH MCC	20	\$99,994.91
392 - ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	111	\$65,762.92
393 - OTHER DIGESTIVE SYSTEM DIAGNOSES WITH MCC	13	\$128,760.77
394 - OTHER DIGESTIVE SYSTEM DIAGNOSES WITH CC	27	\$65,397.25
395 - OTHER DIGESTIVE SYSTEM DIAGNOSES WITHOUT CC/MCC	3	\$75,026.20
407 - PANCREAS, LIVER AND SHUNT PROCEDURES WITHOUT CC/MCC	1	\$166,189.44
412 - CHOLECYSTECTOMY WITH C.D.E. WITH CC	2	\$228,255.07
415 - CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE WITHOUT C.D.E. WITH CC	1	\$96,054.15
417 - LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH MCC	6	\$178,971.99
418 - LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH CC	22	\$155,014.03
419 - LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITHOUT CC/MCC	27	\$114,015.93
420 - HEPATOBILIARY DIAGNOSTIC PROCEDURES WITH MCC	2	\$278,427.17
421 - HEPATOBILIARY DIAGNOSTIC PROCEDURES WITH CC	2	\$108,766.34
424 - OTHER HEPATOBILIARY OR PANCREAS O.R. PROCEDURES WITH CC	1	\$116,938.04
432 - CIRRHOSIS AND ALCOHOLIC HEPATITIS WITH MCC	16	\$149,608.03
433 - CIRRHOSIS AND ALCOHOLIC HEPATITIS WITH CC	13	\$69,971.71
435 - MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH MCC	3	\$132,181.63
436 - MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH CC	1	\$19,175.50
437 - MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITHOUT CC/MCC	1	\$132,303.92
438 - DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH MCC	16	\$130,866.38
439 - DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH CC	51	\$79,729.05
440 - DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITHOUT CC/MCC	11	\$60,847.28
441 - DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH MCC	10	\$156,322.43

442 - DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH CC	11	\$105,805.97
443 - DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITHOUT CC/MCC	3	\$46,669.49
444 - DISORDERS OF THE BILIARY TRACT WITH MCC	7	\$98,896.36
445 - DISORDERS OF THE BILIARY TRACT WITH CC	7	\$142,564.27
454 - COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH CC	1	\$394,213.15
455 - COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITHOUT CC/MCC	3	\$338,507.07
460 - SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC	9	\$333,172.99
462 - BILATERAL OR MULTIPLE MAJOR JOINT PROCEDURES OF LOWER EXTREMITY WITHOUT MCC	2	\$296,765.18
464 - WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS WITH CC	1	\$153,972.56
465 - WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS WITHOUT CC/MCC	3	\$132,251.80
466 - REVISION OF HIP OR KNEE REPLACEMENT WITH MCC	2	\$385,743.07
467 - REVISION OF HIP OR KNEE REPLACEMENT WITH CC	5	\$393,009.11
468 - REVISION OF HIP OR KNEE REPLACEMENT WITHOUT CC/MCC	1	\$205,339.81
469 - MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITH MCC OR TOTAL ANKLE REPLACEMENT	5	\$205,273.75
470 - MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	112	\$179,430.43
475 - AMPUTATION FOR MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DISORDERS WITH CC	3	\$115,338.45
478 - BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC	2	\$238,689.53
480 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH MCC	8	\$213,356.05
481 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	46	\$151,338.79
482 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITHOUT CC/MCC	15	\$103,169.44
483 - MAJOR JOINT OR LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITIES	13	\$202,993.66
486 - KNEE PROCEDURES WITH PRINCIPAL DIAGNOSIS OF INFECTION WITH CC	1	\$64,541.01
489 - KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITHOUT CC/MCC	1	\$56,655.06
492 - LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH MCC	2	\$164,256.34
493 - LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH CC	22	\$131,226.86
494 - LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITHOUT CC/MCC	23	\$124,867.08
500 - SOFT TISSUE PROCEDURES WITH MCC	1	\$369,778.94
501 - SOFT TISSUE PROCEDURES WITH CC	4	\$189,938.43
502 - SOFT TISSUE PROCEDURES WITHOUT CC/MCC	5	\$97,959.11
504 - FOOT PROCEDURES WITH CC	2	\$112,264.62
505 - FOOT PROCEDURES WITHOUT CC/MCC	2	\$254,958.35
511 - SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITH CC	4	\$149,703.50
512 - SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITHOUT CC/MCC	3	\$120,960.24
513 - HAND OR WRIST PROCEDURES, EXCEPT MAJOR THUMB OR JOINT PROCEDURES WITH CC/MCC	6	\$88,359.25
514 - HAND OR WRIST PROCEDURES, EXCEPT MAJOR THUMB OR JOINT PROCEDURES WITHOUT CC/MCC	1	\$61,603.29
515 - OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITH MCC	2	\$226,942.19
516 - OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITH CC	4	\$160,790.99
517 - OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITHOUT CC/MCC	3	\$109,546.56
518 - BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITH MCC OR DISC DEVICE OR NEUROSTIMULATOR	1	\$237,819.30
520 - BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITHOUT CC/MCC	2	\$64,163.56
521 - HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITH MCC	9	\$253,080.42
522 - HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITHOUT MCC	25	\$175,212.94
534 - FRACTURES OF FEMUR WITHOUT MCC	1	\$60,972.27
535 - FRACTURES OF HIP AND PELVIS WITH MCC	1	\$229,717.20
536 - FRACTURES OF HIP AND PELVIS WITHOUT MCC	3	\$72,958.33
539 - OSTEOMYELITIS WITH MCC	3	\$146,511.99
540 - OSTEOMYELITIS WITH CC	2	\$72,913.24
541 - OSTEOMYELITIS WITHOUT CC/MCC	1	\$50,673.39
542 - PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITH MCC	13	\$105,589.54

543 - PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITH CC	19	\$65,923.12
544 - PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITHOUT CC/MCC	3	\$61,517.43
549 - SEPTIC ARTHRITIS WITH CC	2	\$86,156.33
552 - MEDICAL BACK PROBLEMS WITHOUT MCC	16	\$59,330.24
553 - BONE DISEASES AND ARTHROPATHIES WITH MCC	2	\$46,857.06
554 - BONE DISEASES AND ARTHROPATHIES WITHOUT MCC	3	\$37,273.29
556 - SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT MCC	1	\$72,927.37
558 - TENDONITIS, MYOSITIS AND BURSITIS WITHOUT MCC	2	\$52,310.05
559 - AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	1	\$188,400.27
560 - AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC	1	\$47,552.00
562 - FRACTURE, SPRAIN, STRAIN AND DISLOCATION EXCEPT FEMUR, HIP, PELVIS AND THIGH WITH MCC	2	\$167,803.89
563 - FRACTURE, SPRAIN, STRAIN AND DISLOCATION EXCEPT FEMUR, HIP, PELVIS AND THIGH WITHOUT MCC	7	\$66,770.35
564 - OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITH MCC	1	\$41,753.53
565 - OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITH CC	6	\$69,674.52
566 - OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITHOUT CC/MCC	1	\$69,986.99
570 - SKIN DEBRIDEMENT WITH MCC	4	\$301,262.64
571 - SKIN DEBRIDEMENT WITH CC	3	\$101,448.02
572 - SKIN DEBRIDEMENT WITHOUT CC/MCC	2	\$92,074.64
577 - SKIN GRAFT EXCEPT FOR SKIN ULCER OR CELLULITIS WITH CC	1	\$233,811.76
579 - OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH MCC	3	\$129,646.41
580 - OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH CC	14	\$98,733.52
581 - OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITHOUT CC/MCC	4	\$62,794.22
582 - MASTECTOMY FOR MALIGNANCY WITH CC/MCC	1	\$69,243.13
583 - MASTECTOMY FOR MALIGNANCY WITHOUT CC/MCC	1	\$55,631.57
584 - BREAST BIOPSY, LOCAL EXCISION AND OTHER BREAST PROCEDURES WITH CC/MCC	1	\$102,422.27
592 - SKIN ULCERS WITH MCC	2	\$71,962.69
593 - SKIN ULCERS WITH CC	5	\$71,182.39
595 - MAJOR SKIN DISORDERS WITH MCC	1	\$39,986.30
596 - MAJOR SKIN DISORDERS WITHOUT MCC	1	\$92,335.85
597 - MALIGNANT BREAST DISORDERS WITH MCC	2	\$140,367.52
598 - MALIGNANT BREAST DISORDERS WITH CC	1	\$142,989.17
602 - CELLULITIS WITH MCC	18	\$120,649.57
603 - CELLULITIS WITHOUT MCC	60	\$68,737.56
604 - TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST WITH MCC	2	\$55,701.45
605 - TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST WITHOUT MCC	8	\$54,846.83
606 - MINOR SKIN DISORDERS WITH MCC	1	\$55,639.80
607 - MINOR SKIN DISORDERS WITHOUT MCC	3	\$67,741.12
617 - AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	5	\$106,155.75
619 - O.R. PROCEDURES FOR OBESITY WITH MCC	1	\$224,662.81
620 - O.R. PROCEDURES FOR OBESITY WITH CC	4	\$137,314.21
621 - O.R. PROCEDURES FOR OBESITY WITHOUT CC/MCC	9	\$138,068.75
623 - SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	6	\$156,594.61
629 - OTHER ENDOCRINE, NUTRITIONAL AND METABOLIC O.R. PROCEDURES WITH CC	1	\$79,224.42
637 - DIABETES WITH MCC	30	\$86,579.15
638 - DIABETES WITH CC	73	\$69,958.43
639 - DIABETES WITHOUT CC/MCC	5	\$53,913.93
640 - MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITH MCC	17	\$91,282.44
641 - MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITHOUT MCC	24	\$63,439.14
643 - ENDOCRINE DISORDERS WITH MCC	6	\$97,025.06
644 - ENDOCRINE DISORDERS WITH CC	6	\$70,309.66
645 - ENDOCRINE DISORDERS WITHOUT CC/MCC	1	\$52,003.27
653 - MAJOR BLADDER PROCEDURES WITH MCC	1	\$294,318.88

654 - MAJOR BLADDER PROCEDURES WITH CC	1	\$90,559.51
658 - KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITHOUT CC/MCC	6	\$124,591.50
660 - KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH CC	14	\$80,926.47
661 - KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC	6	\$61,442.90
663 - MINOR BLADDER PROCEDURES WITH CC	1	\$76,688.35
669 - TRANSURETHRAL PROCEDURES WITH CC	6	\$86,324.76
673 - OTHER KIDNEY AND URINARY TRACT PROCEDURES WITH MCC	2	\$257,863.50
674 - OTHER KIDNEY AND URINARY TRACT PROCEDURES WITH CC	2	\$191,074.46
682 - RENAL FAILURE WITH MCC	22	\$115,957.44
683 - RENAL FAILURE WITH CC	29	\$59,471.80
684 - RENAL FAILURE WITHOUT CC/MCC	3	\$30,165.15
689 - KIDNEY AND URINARY TRACT INFECTIONS WITH MCC	53	\$68,539.28
690 - KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	54	\$60,326.63
693 - URINARY STONES WITH MCC	2	\$82,855.43
694 - URINARY STONES WITHOUT MCC	3	\$52,826.23
696 - KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS WITHOUT MCC	3	\$58,370.15
698 - OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH MCC	43	\$95,102.15
699 - OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH CC	18	\$72,149.42
700 - OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITHOUT CC/MCC	1	\$7,257.59
708 - MAJOR MALE PELVIC PROCEDURES WITHOUT CC/MCC	4	\$139,774.57
712 - TESTES PROCEDURES WITHOUT CC/MCC	1	\$70,889.54
714 - TRANSURETHRAL PROSTATECTOMY WITHOUT CC/MCC	1	\$29,469.69
722 - MALIGNANCY, MALE REPRODUCTIVE SYSTEM WITH MCC	1	\$65,077.05
723 - MALIGNANCY, MALE REPRODUCTIVE SYSTEM WITH CC	1	\$101,109.57
726 - BENIGN PROSTATIC HYPERTROPHY WITHOUT MCC	2	\$43,012.06
728 - INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM WITHOUT MCC	2	\$51,528.04
743 - UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITHOUT CC/MCC	2	\$81,490.66
744 - D&C, CONIZATION, LAPAROSCOPY AND TUBAL INTERRUPTION WITH CC/MCC	1	\$55,559.02
754 - MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITH MCC	2	\$109,869.46
759 - INFECTIONS, FEMALE REPRODUCTIVE SYSTEM WITHOUT CC/MCC	2	\$125,157.31
761 - MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS WITHOUT CC/MCC	1	\$36,020.37
768 - VAGINAL DELIVERY WITH O.R. PROCEDURES EXCEPT STERILIZATION AND/OR D&C	6	\$64,124.44
776 - POSTPARTUM AND POST ABORTION DIAGNOSES WITHOUT O.R. PROCEDURES	12	\$46,047.96
779 - ABORTION WITHOUT D&C	1	\$19,518.27
783 - CESAREAN SECTION WITH STERILIZATION WITH MCC	1	\$60,864.47
784 - CESAREAN SECTION WITH STERILIZATION WITH CC	4	\$90,681.61
785 - CESAREAN SECTION WITH STERILIZATION WITHOUT CC/MCC	7	\$79,725.05
786 - CESAREAN SECTION WITHOUT STERILIZATION WITH MCC	15	\$91,763.83
787 - CESAREAN SECTION WITHOUT STERILIZATION WITH CC	16	\$104,641.15
788 - CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC/MCC	60	\$80,186.30
789 - NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY	26	\$16,222.19
790 - EXTREME IMMATURETY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	1	\$40,099.07
791 - PREMATURITY WITH MAJOR PROBLEMS	2	\$46,946.21
792 - PREMATURITY WITHOUT MAJOR PROBLEMS	7	\$17,184.74
793 - FULL TERM NEONATE WITH MAJOR PROBLEMS	13	\$25,684.15
794 - NEONATE WITH OTHER SIGNIFICANT PROBLEMS	164	\$11,781.67
795 - NORMAL NEWBORN	188	\$7,699.86
798 - VAGINAL DELIVERY WITH STERILIZATION AND/OR D&C WITHOUT CC/MCC	2	\$45,098.21
805 - VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH MCC	25	\$48,169.26
806 - VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH CC	39	\$43,721.62
807 - VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC/MCC	206	\$38,888.25
809 - MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISIS AND COAGULATION DISORDERS WITH CC	2	\$52,072.66
810 - MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISIS AND COAGULATION DISORDERS WITHOUT CC/MCC	1	\$156,073.86

811 - RED BLOOD CELL DISORDERS WITH MCC	6	\$99,713.44
812 - RED BLOOD CELL DISORDERS WITHOUT MCC	9	\$62,330.15
813 - COAGULATION DISORDERS	8	\$174,789.28
814 - RETICULOENDOTHELIAL AND IMMUNITY DISORDERS WITH MCC	1	\$97,966.61
816 - RETICULOENDOTHELIAL AND IMMUNITY DISORDERS WITHOUT CC/MCC	1	\$32,600.33
817 - OTHER ANTEPARTUM DIAGNOSES WITH O.R. PROCEDURES WITH MCC	1	\$96,644.56
818 - OTHER ANTEPARTUM DIAGNOSES WITH O.R. PROCEDURES WITH CC	1	\$27,737.03
819 - OTHER ANTEPARTUM DIAGNOSES WITH O.R. PROCEDURES WITHOUT CC/MCC	1	\$54,416.40
826 - MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH MAJOR O.R. PROCEDURES WITH MCC	1	\$264,530.60
829 - MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH OTHER PROCEDURES WITH CC/MCC	1	\$472,081.84
831 - OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITH MCC	6	\$28,484.77
832 - OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITH CC	6	\$28,872.38
833 - OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITHOUT CC/MCC	11	\$27,273.40
835 - ACUTE LEUKEMIA WITHOUT MAJOR O.R. PROCEDURES WITH CC	1	\$58,977.98
840 - LYMPHOMA AND NON-ACUTE LEUKEMIA WITH MCC	2	\$103,286.53
841 - LYMPHOMA AND NON-ACUTE LEUKEMIA WITH CC	3	\$56,741.42
843 - OTHER MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASTIC DIAGNOSES WITH MCC	1	\$159,226.84
844 - OTHER MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASTIC DIAGNOSES WITH CC	1	\$71,482.87
853 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH MCC	49	\$444,834.99
854 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH CC	27	\$196,486.05
855 - INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITHOUT CC/MCC	3	\$110,191.73
856 - POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITH MCC	2	\$119,872.04
857 - POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITH CC	8	\$117,392.47
858 - POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITHOUT CC/MCC	1	\$58,286.63
862 - POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITH MCC	5	\$189,553.64
863 - POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITHOUT MCC	9	\$73,385.65
864 - FEVER AND INFLAMMATORY CONDITIONS	5	\$87,913.22
866 - VIRAL ILLNESS WITHOUT MCC	3	\$62,517.36
867 - OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES WITH MCC	2	\$146,921.56
870 - SEPTICEMIA OR SEVERE SEPSIS WITH MV >96 HOURS	14	\$789,894.49
871 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	338	\$165,492.92
872 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	82	\$78,475.54
876 - O.R. PROCEDURES WITH PRINCIPAL DIAGNOSIS OF MENTAL ILLNESS	1	\$131,507.96
884 - ORGANIC DISTURBANCES AND INTELLECTUAL DISABILITY	4	\$34,886.27
885 - PSYCHOSES	3	\$228,175.79
894 - ALCOHOL, DRUG ABUSE OR DEPENDENCE, LEFT AMA	16	\$85,854.32
895 - ALCOHOL, DRUG ABUSE OR DEPENDENCE WITH REHABILITATION THERAPY	5	\$54,196.71
896 - ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITH MCC	44	\$186,159.89
897 - ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	102	\$67,652.02
907 - OTHER O.R. PROCEDURES FOR INJURIES WITH MCC	5	\$430,661.12
908 - OTHER O.R. PROCEDURES FOR INJURIES WITH CC	4	\$122,200.52
909 - OTHER O.R. PROCEDURES FOR INJURIES WITHOUT CC/MCC	1	\$118,861.73
913 - TRAUMATIC INJURY WITH MCC	2	\$114,155.15
914 - TRAUMATIC INJURY WITHOUT MCC	1	\$20,781.19
915 - ALLERGIC REACTIONS WITH MCC	1	\$122,240.75
916 - ALLERGIC REACTIONS WITHOUT MCC	3	\$24,552.81
917 - POISONING AND TOXIC EFFECTS OF DRUGS WITH MCC	35	\$137,885.70
918 - POISONING AND TOXIC EFFECTS OF DRUGS WITHOUT MCC	11	\$86,036.20
919 - COMPLICATIONS OF TREATMENT WITH MCC	10	\$97,215.46
920 - COMPLICATIONS OF TREATMENT WITH CC	4	\$103,076.12
921 - COMPLICATIONS OF TREATMENT WITHOUT CC/MCC	1	\$28,103.78

922 - OTHER INJURY, POISONING AND TOXIC EFFECT DIAGNOSES WITH MCC	1	\$70,739.87
934 - FULL THICKNESS BURN WITHOUT SKIN GRAFT OR INHALATION INJURY	1	\$73,636.64
939 - O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITH MCC	1	\$180,489.82
940 - O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITH CC	2	\$289,242.77
941 - O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITHOUT CC/MCC	1	\$182,924.35
948 - SIGNS AND SYMPTOMS WITHOUT MCC	6	\$58,304.70
949 - AFTERCARE WITH CC/MCC	3	\$88,563.74
957 - OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITH MCC	1	\$444,141.02
958 - OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITH CC	2	\$203,785.55
964 - OTHER MULTIPLE SIGNIFICANT TRAUMA WITH CC	1	\$78,000.25
965 - OTHER MULTIPLE SIGNIFICANT TRAUMA WITHOUT CC/MCC	1	\$62,927.90
976 - HIV WITH MAJOR RELATED CONDITION WITHOUT CC/MCC	1	\$99,543.52
981 - EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH MCC	6	\$365,506.65
982 - EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH CC	4	\$142,544.79
983 - EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITHOUT CC/MCC	2	\$60,511.71
987 - NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH MCC	2	\$445,760.12
988 - NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH CC	6	\$132,013.62
998 - PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS	4	\$26,760.74
Grand Total	5074	\$106,526.02