

VAIL HEALTH HOSPITAL
Discharge Fiscal year = FY 2024
Patient Type = Inpatient

MS DRG - DESCRIPTION	SELF-PAY RATE
807 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DANDC WITHOUT CC-MCC	\$ 13,741
795 - NORMAL NEWBORN	\$ 4,249
794 - NEONATE WITH OTHER SIGNIFICANT PROBLEMS	\$ 6,234
455 - COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITHOUT CC-MCC	\$ 150,272
788 - CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC-MCC	\$ 26,434
871 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV GREATER THAN 96 HOURS WITH MCC	\$ 38,087
793 - FULL TERM NEONATE WITH MAJOR PROBLEMS	\$ 22,944
489 - KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITHOUT CC-MCC	\$ 69,336
482 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITHOUT CC-MCC	\$ 60,234
806 - VAGINAL DELIVERY WITHOUT STERILIZATION OR DANDC WITH CC	\$ 17,614
897 - ALCOHOL DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	\$ 34,787
872 - SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV GREATER THAN 96 HOURS WITHOUT MCC	\$ 22,906
494 - LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP FOOT AND FEMUR WITHOUT CC-MCC	\$ 70,405
322 - PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH INTRALUMINAL DEVICE WITHOUT MCC	\$ 59,377
468 - REVISION OF HIP OR KNEE REPLACEMENT WITHOUT CC-MCC	\$ 66,861
193 - SIMPLE PNEUMONIA AND PLEURISY WITH MCC	\$ 30,026
454 - COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH CC	\$ 162,874
483 - MAJOR JOINT OR LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITIES	\$ 67,139
460 - SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC	\$ 103,495
481 - HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	\$ 66,362
857 - POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITH CC	\$ 58,229
392 - ESOPHAGITIS GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	\$ 21,877
177 - RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	\$ 32,613
291 - HEART FAILURE AND SHOCK WITH MCC	\$ 37,484
768 - VAGINAL DELIVERY WITH O.R. PROCEDURES EXCEPT STERILIZATION AND-OR DANDC	\$ 21,555
200 - PNEUMOTHORAX WITH CC	\$ 26,756
787 - CESAREAN SECTION WITHOUT STERILIZATION WITH CC	\$ 32,697
488 - KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITH CC-MCC	\$ 95,312
791 - PREMATUREITY WITH MAJOR PROBLEMS	\$ 56,130
522 - HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITHOUT MCC	\$ 61,515
189 - PULMONARY EDEMA AND RESPIRATORY FAILURE	\$ 21,201
603 - CELLULITIS WITHOUT MCC	\$ 21,820
493 - LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP FOOT AND FEMUR WITH CC	\$ 90,391