Health Funding Principles and Guidelines

2017-18 financial year

Version 1.0

Queensland Government

Contributors

Special thanks go to all who contributed to the development of this document and in particular to all members of the Hospital and Health Service (HHS) Funding Committee with representatives from the Department of Health (the Department) and HHSs.

Document overview

This document is presented in seven parts:

- Part 1 provides an overview of health service funding
- Part 2 outlines sources of health funding
- Part 3 outlines the approach to how healthcare services are funded in Queensland and includes key inputs into the final budget allocations for each HHS
- Part 4 provides the operational guidelines for activity based funding (ABF) in Queensland, including technical information and funding tables
- Part 5 contains detailed information on facilities and services not funded through ABF
- Part 6 and Part 7 refer to the data sources, quality controls, governance and the performance reporting framework for HHSs.

Note: all references to sequential years are financial years unless stated otherwise.

Health Funding Principles and Guidelines 2017-18 financial year

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For more information contact:
Healthcare Purchasing and Funding Branch, Healthcare Purchasing and System Performance Division, Department of Health, GPO Box 48, Brisbane QLD 4001, email QABFM@health.qld.gov.au Phone: 07 3708 5901

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For ease of reading, please refer to Acronyms on page 113 at rear of document.

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1. Overview of public health services funding

The Department funding model for the Queensland public hospitals aims to provide sufficient resources for the delivery of high quality, sustainable and safe health services[1]. This is to be achieved via a transparent process that allocates funding to where resources are most required.

The funding model is guided by the following principles:

- increase the level of hospital activity for a given level of inputs through technical efficiency
- ensure hospital resources are allocated to those activities which maximise health outcomes through allocative efficiency
- provide incentives for technological and clinical innovations that lead to better health outcomes through dynamic efficiency
- ensure that hospitals are funded on a comparable basis for the activity they provide, and that unavoidable differences in costs between hospitals are taken into account through equitable funds distribution
- provide incentives to support continuous improvement in patient safety and quality.

2. Queensland Health budget and funding sources

The Queensland Health operating budget is published annually in the Service Delivery Statements (Budget Paper 5). The Queensland Health budget consists of the Department of Health (the Department), Queensland Ambulance Service (QAS) and 16 Hospital and Health Services (HHSs).

The majority of the annual budget is allocated to HHSs and other organisations such as the Mater Health Service through Service Agreements to deliver frontline hospital and health services, with the remaining balance supporting improved patient outcomes through centralised state-wide services. Queensland Health's funding is provided from the following sources:

- Commonwealth Government
- State Government
- Grants and Contributions
- Own Source Revenue

[1] Refer the Department's Policy QH-POL-336:2015 and Guideline QH-GDL-336-1:2015 for the Scope of publicly funded services

2.1 National Health Reform Funding (State and Commonwealth)

In line with the August 2011 *National Health Reform Agreement* (NHRA), a single National Health Funding Pool (NHFP) was established, comprising a Reserve Bank of Australia account for each state and territory that is operated by the National Health Funding Administrator (the Administrator), an independent statutory office holder.

National Health Reform Funding comprises Activity Based Funding (ABF), Block Funding, Teaching, Training and Research Funding (TTR) and Public Health Funding (PHF). All Commonwealth Funding for NHR is deposited into the State Pool Account along with the State's contribution to activity-based public hospital funding.

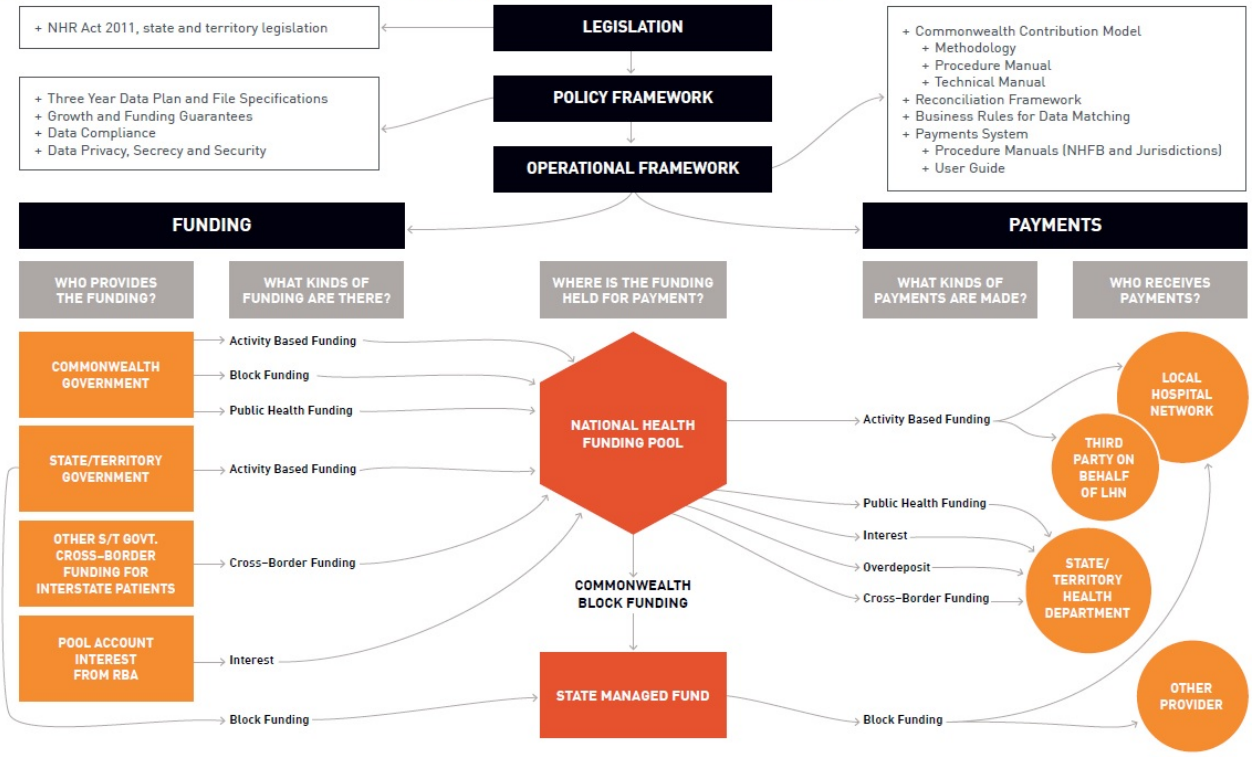
National Health Reform Funding is paid to HHSs in accordance with their Service Agreement, which is a formal agreement between the Department and each HHS for the provision of public health services.

The Administrator has responsibility for calculating the Commonwealth public health funding contributions to states and territories and ensuring deposits into the NHFP are in line with the NHRA and that Block and TTR Funding for public hospitals and other public sector health services, flow through a separate and discrete account called the State Managed Fund (SMF).

To increase transparency in the funding of health services and as required under the NHRA and *Hospital and Health Boards Act 2011*, separate bank accounts have been established as follows (refer also figure 1 below):

- Commonwealth ABF is deposited into the NHFP then distributed directly to HHS bank accounts. State ABF is transferred from the Department's operating account to the NHFP and then distributed to the HHSs.
- Commonwealth Block Funding is deposited into the NHFP then transferred to the SMF and distributed to HHSs. Similarly, State Block Funding is transferred from the Department's operating account to the SMF then distributed to HHSs.
- Commonwealth TTR Funding is deposited to the NHFP, then transferred to the SMF then distributed to HHSs. Similarly, State TTR funding is transferred from the Department's operating account to the SMF then distributed to HHSs.
- Commonwealth Public Health Funding is deposited to the NHFP then transferred to the Department's operating account.
- Other system manager funds are paid directly to HHSs from the Department's operating account and do not form part of the National Health Reform Funding arrangements.

Figure 1 Australian Public Hospital System Funding and Payment Framework



Source: Administrator, National Health Funding Pool – National Health Reform funding flows
http://www.publichospitalfunding.gov.au/national-health-reform/funding-flows

At the 1 April 2016 Council of Australian Governments' (COAG)meeting, the Council agreed to the Heads of Agreement between the Commonwealth and the States and Territories on Public Hospital Funding. This agreement will continue the Commonwealth funding forty-five per cent of the efficient growth of public hospital services for the three years spanning 2017-18 to 2019-20, although growth in Commonwealth public hospital funding will be capped so that it does not exceed six and a half per cent per year.

The Prime Minister and Premiers of all States and Territories signed an addendum to the NHRA in June 2017, which came into effect on 1 July 2017. It includes:

- the introduction of a data conditional payment to encourage the prompt provision of required data
- a six and a half per cent cap on the growth of Commonwealth National Health Reform funding
- the incorporation of safety and quality into hospital pricing and funding (for sentinel events, hospital acquired complications and re-admissions)
- reforms to primary care to reduce potentially avoidable hospital admissions
- better coordinated care for patients with chronic and complex disease.

2.2 State Appropriation

State appropriation is provided by the Queensland Government and received via Queensland Treasury. State appropriation funds the State's contribution towards National

Health Reform Funding (ABF, Block and TTR), in addition to other specific State funded programs to deliver public hospital and health services.

2.2.1 Depreciation

HHSs are fully funded for their depreciation expense via a non-cash equity injection.

2.3 Commonwealth Appropriation

Commonwealth appropriation is provided by the Commonwealth Government and received via Queensland Treasury. Commonwealth appropriation is provided for a small number of specific programs and excludes the Commonwealth's contribution to National Health Reform Funding (ABF, Block, TTR and Public Health Funding).

2.4 Grants and Contributions

In some instances, arrangements may be made whereby the Department either provides funding to a third party or receives funding from another Government Agency (including the Commonwealth Government) or Non-Government organisation (NGO) in exchange for the provision of services. There are often conditions attached to these funds specifying the required outputs and benefits to be delivered. This is commonly referred to as a grant or contribution.

2.5 Own source revenue

Own source revenue (OSR) is revenue that is generated by the Department and HHS through the sale of goods and services. There are two main recognised forms of OSR: user charges and other revenue.

2.5.1 User charges

Section G3 of the NHRA states that private patients, compensable patients and ineligible patients can be charged for public hospital services. Funding obtained via this method is referred to as OSR. The types of patients and flow of revenue is outlined in the following list.

Locally receipted OSR

Private practice, other patient and non-patient revenue are generated, managed and retained by HHSs and commercial business units:

- admitted patient (also known as inpatient), non-admitted patient and non-patient OSR

  Note regarding the National Disability Insurance Scheme (NDIS), HHSs may choose to seek funding from the NDIS by registering to become an NDIS service provider and delivering NDIS supports on a fee-for-service basis. This revenue may offset funding that has been identified to be quarantined by HHSs as part of their contribution to the State's NDIS commitment, which is withdrawn at the start of the financial year.
  Contact gh-ndis@health.qld.gov.au for more information on funding impacts.
- private admitted patients
- private non-admitted patients
- Medicare ineligible patients

- overseas visitors (not covered by a reciprocal health care agreement), asylum seekers
- workers' compensation (including WorkCover Queensland)
- motor vehicle accident outside the Queensland compulsory third party scheme
- personal injury insurers
- Department of Defence
- Department of Veterans' Affairs (DVA) (admitted and non-admitted) - right of private consultations and imaging)
- Other patient related (pharmaceutical recoveries, prosthetic recoveries).

Centrally receipted OSR (Category C)

Revenue centrally negotiated by the Department is allocated to HHSs. These include:

- Queensland compulsory third party scheme—Motor Accident Insurance Commission (MAIC)
- National Injury Insurance Scheme (NIIS)
- DVA, hospital admitted patient service and non-admitted public service fees, which uses National Weighted Activity Unit (NWAU) based funding model
- Interstate (cross border residents), which uses the NWAU-based funding model.

2.5.2 Other Revenue

Revenue that is not directly related to the provision of services to patients. Non-patient revenue can include retail proceeds, NGOs research grants, salary recoveries, or the provision of services for commercial arrangements.

3. Queensland healthcare purchasing and HHS funding

Public health services funding in Queensland are based on the Department's purchasing model, funding model and the service agreement negotiation process.

> *The level of purchasing is informed by identified priorities for investment and known/expected service developments in negotiation with the HHSs.*
>
> *The funding model determines the price at which the Department purchases services from HHSs under ABF. The purchasing model determines the volume of services that the Department agrees to purchase from each HHS and any efficiency adjustments applied to the ABF determination. The service agreement outlines the actual funding which is allocated to the HHS and purchased activity volumes.*

3.1 The process for determining health service purchasing and HHS funding

Funding for each successive financial year is determined in advance to allow sufficient time for HHS planning. HHS funding will consist of:

- the previous year's allocations for ABF services as well as non-ABF services, then funding is then built via allocations and deductions based on the following:
    - wage increases as a result of enterprise bargaining
    - non-labour escalation
    - additional purchased activity for services
        - Commonwealth and State directions
        - population projections
        - burden of disease
        - estimated future activity
        - current system constraints.

A number of other factors may also influence budget determination, such as election commitments, national partnership agreements, up-front adjustments for purchasing initiatives, efficiency dividends and savings requirements, such as employee related savings, specified saving targets for contractors, consultants, travel and advertising.

3.2 Healthcare purchasing framework and purchasing intentions

As well as defining activity targets, the 2017-18 purchasing framework comprises a range of 'purchasing intentions' which apply financial levers to drive the delivery of efficient and effective care.

Purchasing intentions are targeted in the following main areas:

- improving patient safety and quality, e.g. reducing adverse events and quality improvement payments (QIP)
- improving preventative health measures, e.g. QIP for staff immunisation and smoking cessation

- more care closer to home, e.g. telehealth.

Purchasing initiatives include:

- volume adjustments—purchase more or less of certain activity from HHS, e.g. additional activity in targeted areas (e.g. increased telehealth activity)
- price adjustments
- incentive payments, such as QIPs
- financial disincentives, such as nil payment for 'never events'.

Table 1 summarises the purchasing initiatives applicable for 2017-18. Note that this is a brief summary only.

Table 1 Summary of healthcare purchasing initiatives 2017-18

Initiative	Description	Application
QIP – Cardiac Rehabilitation (CR)	Payment if occurrence of both the timely provision of a cardiac rehabilitation referral for an admitted patient and timely attendance at the referred CR program appointment.	Service agreement amendment
QIP - Smoking cessation	Payment for reaching target for public admitted patients, dental clients and community mental health patients clinically supported onto the Smoking Cessation Clinical Pathway.	
QIP - Staff immunisation	Payments for reaching targets on staff immunisation.	
QIP - Advance Care plan	Payment for initiating communication with patient on advance care planning.	
Telehealth	Payment for additional telehealth non-admitted activity, or provision of telehealth consultancy for admitted patients, emergency patients and Store and Forward image assessments.	
High cost home support	Payment for approved patients requiring 24-hour ventilation home support.	
Adverse events - pressure injury	Disincentives to minimise avoidable hospital acquired deep pressure injuries.	
Adverse events - blood stream infections (BSI)	Disincentives to minimise avoidable hospital acquired BSIs.	
Never events	Zero payment for episode where a Queensland never event or national sentinel event occurred.	
Fractured neck of femur (#NoF) timely surgical access	Diagnosis Related Group (DRG) payment discounted by twenty per cent if surgical treatment of #NoF is not delivered within two days.	ABF model localisation
Pre-operative elective bed days	Reduction in long day stay payment where there are pre-operative days within an elective surgical episode and the length of stay is greater than the high trim point.	
Emergency department Did not wait (DNW)	No payment for DNWs.	
Out-of-scope activity	No payment for activity identified as out-of-scope i.e. vasectomies, reversal of vasectomies and laser refraction.	

Initiative	Description	Application
Hospital in the home (HITH)	HITH price of eighty-five per cent and applied to three specific minor complexity DRGs (pulmonary embolism, venous thrombosis and cellulitis).	
Stroke care	Ten per cent DRG inlier weight loading if patient receives stroke unit care.	

Further information regarding the Purchasing and non-Activity Based Funding Specifications is available on QHEPS.

3.3 Queensland public hospital funding models

The funding models underpinning purchasing decisions are focussed on reducing inequities in health outcomes and increasing access to services in Queensland. Funding strategies are developed to ensure purchasing decisions maximise value under the HHS Service Agreements, including using incentive-based approaches the delivery of efficient and effective care in Queensland.

There are 16 HHSs in Queensland and the public health services provided by the Mater Health Services, South Brisbane. There are thirty-six public hospitals, predominately the larger hospitals, funded through the Queensland ABF model. The model incorporates set prices for services to be delivered. The Queensland ABF model is based largely on the National ABF model but includes a number of modifications to reflect Queensland priorities and pricing models that are more suitable. Note: Queensland public hospitals' funded activity includes activity contracted to private hospitals.

There are 120 facilities funded through block funding arrangements and include:

- eighty-three predominantly small regional and rural hospitals, which would not be financially viable in an ABF model given their high fixed costs
- four specialist public psychiatric hospitals
- twelve Residential Mental Health Community Care Units
- twenty-one Residential Aged Care and Residential Care Service facilities.

Other public health services, which are outside the scope of the funding models above, are funded via population-based, specified funding arrangements or price per unit of output. Oral health and breast screening are funded based on a price per unit of output.

3.4 HHS funding via service agreements

The Hospital and Health Boards Act 2011 stipulates that a service agreement must be in place between the Department and each HHS for the provision of public health services.

The service agreement defines the health services, teaching, research and other services that are to be provided by the HHS[2] and the funding to be provided to the HHS for the

[2] Within HHS service agreements, Schedule 1,—Hospital and Health Service Accountabilities, indicates all public sector health facilities must ensure that:

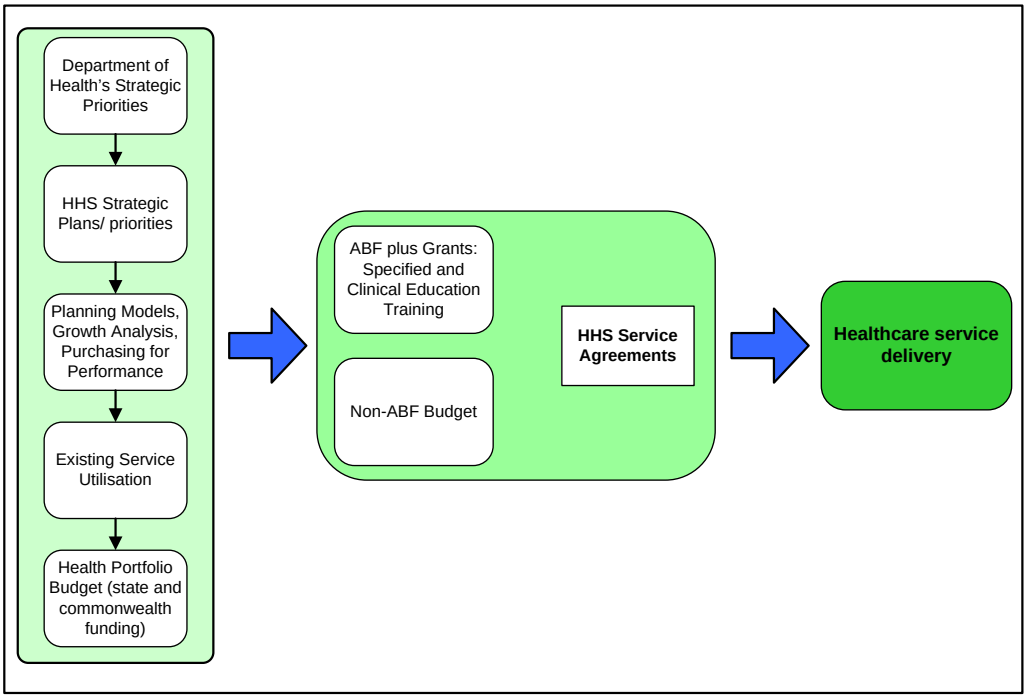
- All facilities have undertaken a baseline self-assessment against the Clinical services capability framework (CSCF) version.
- The Department of Health is notified when a change to the CSCF baseline self-assessment occurs through the established public hospital CSCF notification process.

delivery of these services (both ABF and non-ABF services). It also defines the outcomes that are to be met by the HHS and how its performance will be measured.

The current service agreement covers the period 2016-17 to 2018-19. However, funding and purchased activity is re-negotiated annually, with further in-year variations being made through the service agreement amendment process. Further information on HHS service agreements is available on www.health.qld.gov.au

Figure 2 below summarises the processes behind the development of service agreements with the HHSs.

Figure 2 Development of service agreements with the HHSs



3.5 HHS funding allocation

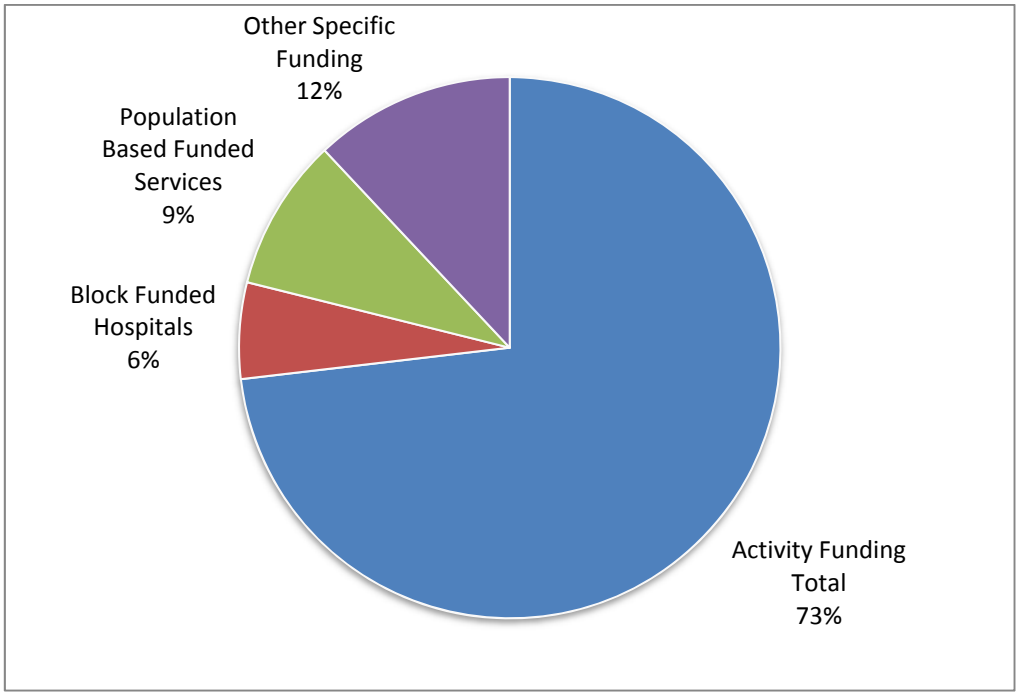
HHS funding is provided from the State purchasing pool that holds funding for the following purposes:

- ABF for HHSs via the funding pool
- block funding via the state managed fund
- locally receipted grants
- locally receipted OSR
- Department grants.

Figure 3 shows the distribution of funding by the funding model methodology.

- In the event that a CSCF module is updated or a new module is introduced, a self-assessment is undertaken against the relevant module and submitted to the Department of Health.

Figure 3 2017-18 Funding Model Distributions



Source: Table 6 HHS Finance and Activity Schedule 2017-18 – Summary (v10 June 2017)

4. Activity based funding (ABF)

4.1 Overview of ABF

ABF is a method of funding hospitals, whereby they are funded based on the mix and volume of patients treated.

ABF is based on three key elements:

- classification of patient activity (the classification system used)
- counting the activity (the counting unit)
- costing the activity (determining a cost per counting unit) which informs the price set for the services.

The different types of activity funded by ABF are identified and counted in a standardised manner. Used effectively, these elements result in pricing and funding transparency of the public hospital system.

Table 2 shows the activity type classification systems used and the counting units for the Queensland funding model.

Table 2 ABF counting units and classifications for 2017-18

Activity type	Counting unit	Classification 2017-18	Information needed to classify episode
Acute admitted patients	Patient episode and per diem for short or long stay outliers	Australian refined diagnosis related groups (AR-DRGs) classification version 8.0 (V8.0)	International Classification of Diseases 10th Revision Australian Modification (ICD-10-AM), Australian Classification of Health Interventions (ACHI) and Australian Coding Standards (ACS) for diagnosis and procedures codes
Intensive care admitted patients	Patient episode and time spent in an intensive care unit (ICU)	AR-DRGs classification V8.0	Hours in eligible ICU
Sub and non-acute admitted patients	If episode is classified into AN-SNAP V4.0 class* then counting unit is patient episode and per diem for short and long stay outliers. Remaining episodes are care type per diem (including same day) *Paediatric palliative care remains as care type per diem.	Australian National Subacute and Non-Acute Patient (AN-SNAP) classification version 4.0 (V4.0)	Care type, impairment type (rehabilitation), age, phase (for palliative care), activity of daily living (ADL) assessment score, i.e. Resource Utilisation Groups (RUG), Functional Improvement Measure (FIM), Health of the National Outcome Scales (HoNOS)
Mental Health Admitted patients	Per diem for any episode (the applied per diem rate varies depending whether in a mental	Queensland Mental Health per diem (Appendix 3)	Care Type 12 Days in an eligible mental health standard unit or Days in 'PY' standard unit reported (regardless of care type)

Activity type	Counting unit	Classification 2017-18	Information needed to classify episode
	health standard unit or other)		Average Mental Health per diem is applied when no 'PY' standard unit reported
ED (Level 3b and above)	Presentation	Urgency related groups (URG) version 1.4 (V1.4)	Principal diagnosis, triage category, episode end status and visit type
Emergency services (ES) - small or rural EDs – (Level 1 to 3a)	Presentation	Urgency disposition groups (UDG) version 1.3 (V1.3)	Triage category and episode end status
Non-admitted patients	Service event	Tier 2 Non-Admitted Services Classification version 4.1 (V4.1) and modality	Clinic type (specialty and provider), clinic mode (new or review), delivery modality (e.g. face-to-face, telehealth, telephone)

Note: the national classification of mental health services in 2017-18 is detailed in Australian Mental Health Care Classification (AMHCC), which includes phase of care details.

The overall funding for a service is determined using a combination of a 'standard' or 'base price' and a unit of activity that is weighted according to resource requirements, called a 'weighted activity unit' or WAU.

The basis of the ABF payment model being:

Price x Weighted Activity Unit = ABF ($)

The principle behind applying a weighting to each of the service activities is to reflect the more resource intensive a procedure or treatment is, then the greater the weight.

It should be noted however that the actual funding received by HHSs is negotiated through the annual service agreement process. This funding is provided at the beginning of the financial year and subject to HHS budget allocation principles for internal dissemination.

4.2 National ABF model

The Independent Hospital Pricing Authority (IHPA) is required to determine on an annual basis the public hospital services that are to be funded by the Commonwealth under the NHRA and any adjustments to the NEP to reflect legitimate and unavoidable variations in the cost of delivering health care services. The scope of public Hospital Services eligible for Commonwealth funding under the NHRA 2011 (the 'in-scope services'), as determined by IHPA in the Pricing Framework for Public Hospital Services, are:

- All admitted programs, including hospital in the home programs. Forensic mental health admitted patient services are included;
- All emergency department services; and
- Non-admitted services as defined.

The NHRA states that ABF should be used wherever practicable. If ABF is not possible, IHPA has developed criteria[3] to determine which public hospital services are better funded through block grants. The main criteria are:

- The technical requirements for applying ABF are not able to be satisfied; or
- There is an absence of economies of scale that means that some services would not be financially viable under ABF.

The intent is, where technical requirements can be met, to move to ABF funding over time. However, other services may need to be funded using only block grants or a combination of block grants and ABF on an ongoing basis. Refer Section 5 of this document for more further information on block funded services and facilities and other funding models.

Educational and training resources on the topic of ABF are available on IHPA's website.

4.2.1 National Efficient Price and National Efficient Cost

The in-scope services for ABF are modelled and reported on both the National and Queensland price and WAUs.

The NEP, which is a single National price based on costing information from all states and territories, is developed by IHPA and intended to provide a consistent and transparent method to determine Commonwealth growth funding to states and territories for health services provided by ABF facilities. This average price is applied to admitted services, emergency and non-admitted services. All price weights are expressed as a single unit of measure being the NWAU and guides the Commonwealth contribution for ABF services.

2017-18 NEP (NEP17) per NWAU

NEP17 $4,910 = 1 NWAU17

The National Efficient Cost (NEC) determines the Commonwealth contribution to block fund those hospitals and services, which do not meet the criteria for ABF. Refer to Section 5 for more information on block-funded services.

The IHPA releases annually the Pricing Framework for Australian Public Hospital Services along with NEP and NEC determinations. Further information on how the NEP is calculated is available on the IHPA website.

4.3 Queensland ABF model

The Queensland ABF model uses a Queensland Efficient Price (QEP) for ABF services in Queensland. The QEP, based on the average cost to deliver a Queensland weighted activity unit (QWAU) using 2015-16 costs indexed for two years, is used to reflect the differences between the Queensland funding model and the national cost base. Examples of these differences include the application of the clinical education and training (CET) grant in the Queensland model and application of the mental health per diem rates instead of DRGs in the localised model. This is considered a fairer way to fund HHSs, as it is a reflection of the investment in services.

2017-18 QEP per Queensland WAU

QEP19B $4,795 = 1 QWAU19B

[3] National Efficient Cost Determination 2017-18

4.3.1 Derivation of the QEP

The QEP is determined by:

Step 1 Base - the National Hospital Cost Data Collection (NHCDC) reported costs excluding depreciation, patient transport and other excluded accounts (e.g. bad debts, inventory write-off) to deliver activity in 2015-16

Step 2 Deductions - costs that are paid to HHSs as specified grants and CET

Step 3 Financial Adjustments to the ABF pool – escalation inputs based on the enterprise bargaining and non-labour allocations

4.3.2 NWAUs versus QWAUs

While Queensland is a signatory to the COAG agreement regarding National ABF, there is no requirement for the Department to fund HHSs according to the National model. The in-principle decision was taken to follow the National model where appropriate to local priorities, with Queensland-specific differences in the way that health services are managed and OSR is treated. These are outlined in Table 3 below.

The unit of measure for the 2017-18 Queensland ABF model is the QWAU. For example, the QWAU includes the weight equivalent for Pharmaceutical Benefits Scheme (PBS) costs that are excluded from the NWAU. Where localisations have occurred, there will be variations between NWAUs and QWAUs.

Table 3 2017-18 NWAU versus QWAU

Component	Calculation of National (NWAUs)	Calculation of Queensland (QWAUs)
Base price weights	• NEP1718	• NEP1617
Acute Admitted patients	• AR-DRG V8.0 • Private patients discounted to account for the alternative funding source • PBS excluded	• AR-DRG V8.0 • Localisations as per Table 1 and 4 • Private patients calculated equally to public patients to take into account the OSR contribution • PBS included
Mental Health admitted patients	• AR-DRG V8.0 • Adjustments to trim points in acute DRG model • Private patients discounted to account for the alternative funding source • PBS excluded	• Per diem funding based on mental health standard unit days for Care Type 12 • Mental health standard unit code is required else average per diem applied • Private patients calculated equally to public patients to take into account the OSR contribution • PBS included
Subacute Admitted patients	• SNAP V4.0 • If unable to assign to an AN-SNAP V4.0 class, the episode is funded under the DRG assignment • Private patients discounted to account for the alternative funding source • PBS excluded	• SNAP V4.0 • If unable to assign to an AN-SNAP V4.0 class, the episode is funded on care type per diem • Private patients calculated equally to public patients to take into account the OSR contribution • PBS included

Component	Calculation of National (NWAUs)	Calculation of Queensland (QWAUs)
EDs	• URGs	• URGs • No QWAU for DNW discharge status
ESs	• UDGs	• UDGs • No QWAU for DNW discharge status
Non-admitted patients	• Tier 2 Classes • Same payment for new/review non-admitted episodes and telephone consults • Receiving Telehealth to specific telehealth clinics • Multi-disciplinary clinics – Loading fifty-five per cent • Private patients - no payment • PBS excluded	• Tier 2 Classes • Differential prices for new/review non-admitted episodes based on NHCDC data, and a fixed rate for telephone consults • Receiving Telehealth funded by clinical specialty • Multi-disciplinary clinics - no loading/adjustment • Private patients calculated equally to public patients to take into account the OSR contribution • PBS included

Note: additional Purchasing Initiatives and localisations also apply to the Queensland model (see Table 1).

4.3.3 Localisations from the National ABF model to the Queensland model

Localisations include purchasing initiatives (PI) to incentivise the delivery of efficient and effective care and localisations (LCZ) from the National ABF model so that adverse impacts to Queensland can be managed and offset where possible. A localisation is applied each time the context criteria is met, with the exception of those episodes where more there are more than one applicable localisation then the highest localisation will apply, i.e. refer LCZ (1) to LCZ (4).

- Non-admitted patients
- Out of Scope[4]
- Pre-Operative Elective Bed Days
- Stroke
- Mental Health (Care Type 12)
- Bilateral Cochlear implants
- Hyperbaric
- Neonatal Intensive Care Unit
- Kidney and Liver Transplant
- Spinal
- Transplant Support
- Neurosurgery
- Trauma

[4] Refer Policy QH-POL-336:2015 Scope of Publicly Funded Services and QH-GDL-336-1:2015 Guideline Publicly Funded Services

- Cystic Fibrosis.

For more detailed information about localisations and purchasing initiatives, refer Appendix 10 2017-18 ABF Model adjustments and localisations.

4.3.4 Efficient Growth Funding

In 2017-18, Commonwealth efficient growth funding will be allocated to HHSs by measuring activity in NWAUs. Application of the national unit will help ensure consistency with how efficient funding is received by the State.

Efficient growth funding applies to public hospitals funded through the ABF model and contracted private hospitals funded by ABF HHSs. The scope of efficient growth funding includes:

- publically funded admitted patients
- publically funded emergency department and non-admitted patients and
- private health insurance admitted patients.
- Both private non-admitted patients and compensable patients are out of scope.

In calculating funding amendments, the Department will compare HHS year-to-date actual in-scope NWAUs to their NWAU target at the overall HHS level.

- Where a HHS meets the QWAU target and HHSs actual activity exceeds its NWAU target as stated in the SA, it will receive an additional forty-five per cent of the QEP per additional NWAU.
- Where a HHSs actual activity is below its NWAU target, funding will be reduced by forty-five per cent of the QEP for each NWAU below target.

In 2017-18, the Commonwealth Government will fund forty-five per cent of ‘efficient growth’ of activity-based services, up to a cap of six and a half per cent growth from the 2016-17 funding base. For further information, please refer to the ‘Commonwealth growth funding specification sheet available on Purchasing and non-activity based funding specifications QHEPS).

4.4 Hospitals in scope for ABF model 2017-18

Refer to Appendix 18 2017-18 HHS hospitals and facilities by funding model. Private hospitals under contract to deliver health services for public patients are also in-scope but have not been listed.

4.5 In-scope services: Admitted Acute

4.5.1 Classification and counting unit

Acute episodes of care are grouped into clinically similar and resource homogenous groups based on the principal reason for admission using the AR-DRG classification system, which includes the standards: ICD-10-AM, ACHI and ACS. AR-DRG V8.0 is the current version of the classification and used for pricing from 1 July 2016 to 30 June 2018.

The counting unit is an admitted patient episode.

4.5.2 Data collection and reporting

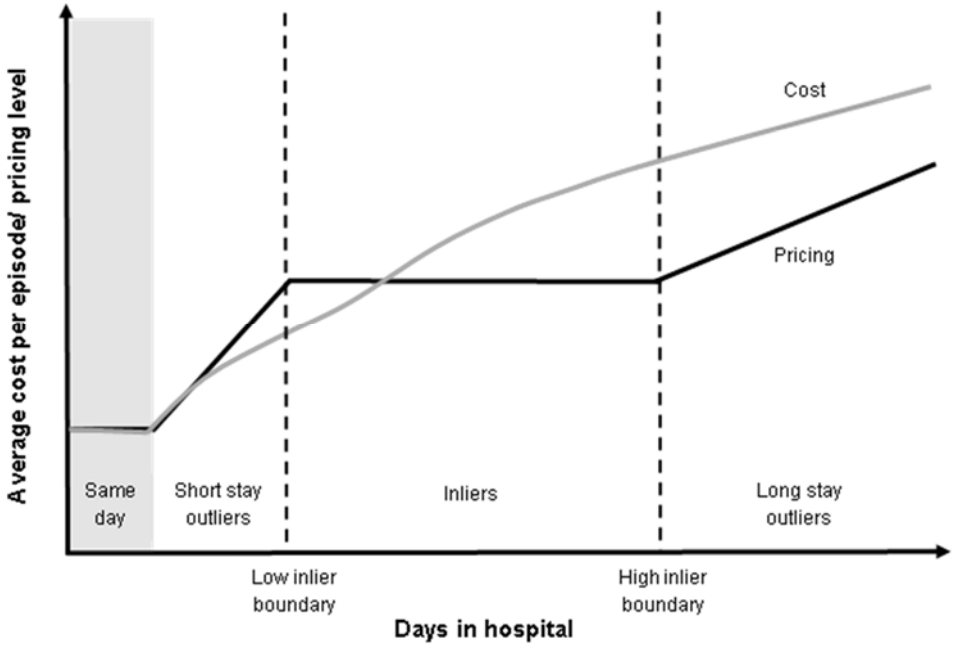
All acute admitted patient information is collected as part of the Queensland Health Admitted Patient Data Collection (QHAPDC) which is also used for reporting of the Admitted patient care National Minimum Data Set (NMDS) 2017-18 to the Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) and the ABF data request specifications to IHPA.

4.5.3 Payment based on inlier and outlier modelling

Funding for acute admitted patients is based on payment for each episode of care, which is a phase of treatment that ends when the clinical intent of care changes or the patient is formally discharged from hospital.

To establish an appropriate funding level, episodes within an AR-DRG are partitioned into four categories as shown in Figure 4, i.e. same day, short stay outliers, inliers and long stay outliers, and costs are analysed to determine the relevant parameters. The resulting funding model is reflected by the pricing line.

Figure 4 Inlier / Outlier model



Where:

- the low trim point is a third of the national mean length of stay for each AR-DRG (L3)
- the high trim point is three times the average length of stay for each AR-DRG (H3).

This (1/3, 3) boundary setting aims to balance financial incentives to drive admitted patient throughput, but also incorporates financial disincentives to keep patients in hospital.

Alternative trim points - where the standard trim points are modified i.e. L3 becomes L1.5 and H3 becomes H1.5 - are used for Mental Health DRGs and some high cost/low volume DRGs. This element has no application for admitted Mental Health patients, as the Queensland model uses a per diem methodology not DRGs.

4.5.4 Payment methodology for acute admitted patients

The payment model for acute admitted care is based on episodic payments plus per diem payments for outlier days, and includes adjustments for ICU, paediatric, indigenous, remote areas, radiotherapy treatment and dialysis. See section 4.15 for further information on adjustments available for acute admitted patients.

In the AR- DRG V8.0 classification, a number of AR-DRGs are set as same day based on the patient being admitted and discharged on the same day, i.e. the upper and lower trim points are set at one day and the word 'Same day' is part of the DRG name. There has been a significant reduction in the number of same day DRGs from 71 in V7.0 to 13 in V8.0.

In the AR-DRG price weights, there is an additional indication of those AR-DRGs that are funded on a 'same day' basis.

As has been the case in previous years, payment for acute admitted patients is based on:

- same day price weight for episodes that are day only, or
- short stay base price weight + short stay per diem price weight for episodes that are overnight but less than the lower boundary, or
- inlier price weight (for episodes within the lower and upper boundaries) + long stay per diem price weight (for episodes exceeding the upper boundary).

It should be noted that all per diem calculations are based on the fractional length of stay of the patient.

AR-DRGs designated for a separate same day payment are identified in the acute admitted patients AR-DRG V8.0 schedule with a '1' in the column 'same-day payment list', refer Appendix 1 Admitted Acute Care Price Weights Queensland 2017-18 (Q19B) - AR-DRG v8.0.

4.5.5 Critical care delivered via ICUs

Critical care is an area that requires significant resources to the treatment of patients, which an AR-DRG alone does not reflect. Therefore, additional funding (in form of an adjustment) over and above the acute admitted patient payment is made where a patient is admitted to an eligible ICU, Neonatal Intensive Care Unit (NICU) or Paediatric Intensive Care Unit (PICU).

For NEP17, IHPA has determined which specified ICUs are eligible to receive the ICU adjustment, refer Appendix 11 for the Specified ICUs in Queensland.

For ICU and NICU adjustments, refer Appendix 10 2017-18 ABF Model adjustments and localisations. For each hour in an eligible ICU, a QWAU of 0.0427 will apply. The ICU QWAU is in addition to the inlier episodic WAU and a long stay per diem WAU. For each hour in a recognised NICU, a 0.0055 QWAU loading will be applied.

PICU adjustments are incorporated into the paediatric adjustment applicable for all paediatric patients admitted to Specialised Children's' Hospitals. Refer column headed 'Paediatric Adjustment' in Appendix 1 Admitted Acute Care Price Weights Queensland 2017-18 (Q19B) - AR-DRG v8.0 for the adjustment for each AR-DRG.

4.5.6 Adjustment for Renal Dialysis patients

An adjustment is available for an admitted patient with a specified ICD-10-AM 10th Edition renal dialysis code who is not assigned to the AR-DRG L61Z Haemodialysis or AR-DRG L68Z Peritoneal Dialysis. See section 4.15 for adjustments available.

4.6 In-scope services: Admitted subacute and non-acute patients

Subacute care is defined by the AIHW as specialised multidisciplinary care in which the primary need for care is optimisation of the patient's functioning and quality of life.

A person's functioning may relate to their:

- whole body or a body part
- the whole person, or the whole person in a social context
- impairment of a body function or structure, activity limitation and/or participation restriction.

Non-acute care refers to care that provides support for patients with a severe level of impairment, activity limitation or participation restriction due to a health condition. Following assessment or treatment, the patient does not require further complex assessment or stabilisation.

4.6.1 Classification and counting unit

Subacute and non-acute patients (SNAP) differ from patients under an acute care type in that they are classified according to their functional status, rather than their principal medical diagnosis. The AR-DRG is not a good indicator of the resource requirements for these patients. As such, the Australian National Sub and Non-acute Patient (AN-SNAP) classification version 4 (V4.0) is used to categorise patients into similar groupings based on their functional needs. The AN-SNAP classification consists of the following care types:

- rehabilitation care (includes overnight and same day classes)
- palliative care (overnight and same day classes)
- geriatric evaluation and management (GEM) (overnight and same day classes)
- psychogeriatric care (overnight and same day classes)
- maintenance care also known as non-acute care.

It is important to note that a patient cannot be in an acute, mental health or subacute care type at the same time, i.e. a change in care type is a change in episode. These are mutually exclusive classification systems.

Assignment to an AN-SNAP class relies on information such as care type, impairment type (for rehabilitation), age, phase (for palliative care)[5] and a functional assessment score using the relevant activity of daily living (ADL) tool.

Table 6 lists the ADL tools for assessment under each care type.

Table 4 ADL score determinants

Care type	ADL assessment tool
Rehabilitation **OR** GEM	Functional Independence Measure (FIM) - using scores for motor and cognitive subscales
Psychogeriatric care	HoNOS (Health of the Nation Outcome Scales)
Palliative care **OR** Maintenance care	Resource Utilisation Group (RUG)

[5] Palliative care episode can be made up of multiple phases. Consequently, each phase is assigned to the relevant AN-SNAP palliative class.

The counting unit for admitted sub and non-acute care is a combination of patient episode and number of days in care. This will vary with the AN-SNAP class assigned.

For 2017-18, overnight episodes without an ADL score will be included in the QHAPDC and the activity will attract WAUs. The episode, however, cannot be assigned to an AN-SNAP class and is therefore termed 'ungroupable' (or unscored). In this case, the default counting unit is a care type per diem. The per diem payment for these episodes is listed in Appendix 8: Unscored SNAP episodes.

Same day episodes do not require an ADL score and will be allocated to the relevant same day AN-SNAP class for their care type.

4.6.2 Data collection and reporting

All sub and non-acute admitted patient information is collected as part of the QHAPDC which is also used for reporting of the Admitted patient care NMDS 2017-18 to AIHW and the ABF data request specifications to IHPA.

Definitions for each of the care types are available in the QHAPDC Manual. The Sub and Non-Acute Care Data Entry Guidelines for Admitted Patients 2017-18 are also available on QHEPS.

4.6.3 Weighted activity unit

Episodes classified into an AN-SNAP class are allocated a QWAU, including episodic with inlier and outlier per diem WAU. Specific loading adjustments are also applicable for indigenous and remote patients receiving sub and non-acute care.

Price weights vary across classes depending on factors such as care type, age, type of impairment and functional capacity of the patient (refer to Appendix 4).

4.6.4 Paediatric sub and non-acute care

Children under three years of age do not require an ADL assessment. The RUG tool is used for paediatric palliative and maintenance care patients aged three and over. The Wee FIM is used for paediatric rehabilitation patients aged three and over6. Price weights, according to the AN-SNAP V4.0 classification, for paediatric rehabilitation and maintenance care patients have been introduced. However, the default for paediatric palliative patients remains as a per diem rate (refer to Appendix 5).

4.7 In-scope services: Admitted mental health

Queensland Health is a major provider of mental health services in Queensland and offers specialised clinical care in a variety of settings to a broad range of age groups.

4.7.1 Classification and counting unit

The Australian Mental Health Care Classification Version 1.0 (AMHCC V1.0) was finalised by IHPA but data collection is best endeavours for 2017-18. IHPA intends to implement the

[6] GEM and Psychogeriatric care types are not applicable to paediatric patients.

AMHCC for pricing once comprehensive phase-level cost and activity data is available from states and territories.

The counting unit for patients with a Mental Health care type 12 is the number of fractional days in care (per diem)[7].

4.7.2 Data collection and reporting

Mental health admitted patient activity (admission, transfer and discharge) is collected via the Hospital Based Corporate Information System (HBCIS) (for the QHAPDC). Subsets of the data are used to inform the annual Admitted Patient Care NMDS and ABF Mental health care National Best Endeavours Data Set (NBEDS) 2017-18 to AIHW and the ABF data request specifications to IHPA.

The Mental Health Activity Data Collection (MHADC) is a key statewide resource for specialised mental health services activity data to inform local and state decision-making, support the development and reporting of National and State performance indicator frameworks, ABF models and classifications. Subsets of the data, collected via Consumer Integrated Mental Health application (CIMHA), are used to inform the ABF Mental Health Care NBEDS, the annual Community Mental Health Care National Minimum Data Set (CMHC NMDS); and the annual National Outcomes and Casemix Collection (NOCC) which is also used for reporting of the ABF Mental health care NBEDS 2017-18 to AIHW and to IHPA.

4.7.3 Weighted activity unit

The QWAU is based on the following criteria:

- ***Mental health care delivered in mental health standard units***, i.e. standard units beginning with 'PY**' within ABF hospitals, receive a per diem price weight which varies depending on the type of unit (as per Appendix 3). For example, a patient in an extended unit with code PYET, the per diem rate is $803..
- ***Mental health care delivered outside a mental health standard unit,*** where the episode is a Care Type 12, is assigned an 'average' per diem Mental Health QWAU (0.2422 QWAU). Episodes receiving mental health outside of a mental health standard unit and not under Care Type 12 will be assigned an AR-DRG.
- Admitted mental health care delivered in the following public psychiatric facilities is block funded:
    - Baillie Henderson Hospital
    - Charters Towers Rehabilitation Unit
    - Kirwan Rehabilitation Unit
    - The Park – Centre for Mental Health
    - and twelve Residential Mental Health Community Care Units.

All non-admitted mental health services will continue to be block funded in 2017-18. Refer to the table below for a summary of Mental Health funding according to acuity and/or setting.

Table 5 Summary of mental health funding for 2017-18

[7] Patients may also be classified under the AR-DRG classification if a care type 12 is not assigned. In this case, the counting unit is an admitted patient episode.

Care Type	Funding model according to patient acuity
Admitted patient - outside of a mental health standard unit (ABF hospital)	With Care Type 12: the 'average' Mental Health per diem rate will be applied (0.2422 QWAU) Without Care Type 12: AR-DRG assigned for the episode of care and funded as per other acute admitted patients (see Appendix 1)
Admitted patient - Mental health standard unit (ABF hospital) *	With/without Care Type 12: Per diem payment depending on type of mental health standard unit (see Appendix 3)
Admitted patient - Designated mental health facility (public psychiatric hospital or community care unit)	Block funded – Facility (see Section 5.1)
Specialised community/ambulatory mental health	Block funded – Specified Funding (see Section 5.2.1)

* Localisation from the 2017-18 National ABF model.

4.7.4 Psychiatric age adjustments

See section 4.15 - age adjustments for psychiatric patients in the National model are not applicable under the Queensland Model as these are managed through the application of different per diem rates.

4.8 In-scope services: Emergency care

Emergency care services are delineated into seven levels depending on a range of factors, including availability of support services, staffing, physical design and location.

Levels 1, 2 and 3A are referred to as **emergency services (ES)**, and levels 3B, 4, 5 and 6 are referred to as **emergency departments (ED)**.

4.8.1 Classification and counting unit

Two classification systems are used to classify emergency care for the purposes of ABF of these services: Urgency Disposition Groups and Urgency Related Groups.

Urgency Disposition Groups

This classification system defines seventeen patient categories. Using the Urgency Disposition Groups (UDG) classification system, patients are classified by the discharge status (or disposition) recorded at the end of the patient's ED episode, i.e. admitted, non-admitted, DNW or dead on arrival, and triage type according to the Australasian triage scale. 2017-18 UDG version 1.3 (V1.3) applies to small and medium size facilities with 1 to 3A emergency services[8]. In terms of Queensland ABF facilities, this only includes Kingaroy, Warwick, Dalby and Emerald.

[8] Nationally, emergency care services provided by public hospitals are divided into seven different levels (1, 2, 3A, 3B, 4, 5 and 6) depending on a range of factors including support services, staffing, physical design and location. Levels 1, 2 and 3A are referred to as "emergency services" while levels 3B, 4, 5 and 6 are referred to as "emergency departments".

Urgency Related Groups

This classification system segments the UDG classification system further by using Major Diagnostic Blocks (MDB), which are derived from the diagnosis assigned to the ED presentation. 2017-18 Urgency Related Groups (URG) version 1.4 (V1.4) applies to large size facilities with levels 3B to 6 emergency care services[8]. This includes all Queensland ABF facilities with EDs except for Kingaroy, Warwick, Dalby and Emerald.

The counting unit for emergency care is an 'emergency department stay'.

4.8.2 Data collection and reporting

All hospitals providing emergency care services ranging from level 1 – 6, collect and report patient level information to the Healthcare Improvement Unit (HIU) in accordance with the data set specifications of the Queensland Health Emergency Data Collection (EDC) in the service agreements. Emergency departments using iSoft's Emergency Department Information System (EDIS) have a direct feed to EDC. For those emergency departments not using EDIS, they submit a file to EDC.

The minimum data requirements for reporting to the EDC are outlined on the HIU website. The EDC is used to report the Non-admitted Patient Emergency Department Care NMDS 2017-18 to AIHW and the ABF data request specifications to IHPA.

4.8.3 Weighted activity unit

Refer to Appendix 8 Queensland emergency services - URG V1.4 and Appendix 9 Queensland emergency department - UDG V1.3 for the full list of price weights.

4.9 In-scope services: Non-admitted care

4.9.1 Classification and counting unit

Non-admitted patients are those that do not undergo a hospital's formal admission process. The Tier 2 Non-admitted Services Classification (Tier 2) categorises a hospital's non-admitted services into classes which are generally based on the nature of the service provided and the type of clinician providing the service.[9] IHPA has three reference documents to assist the consistent allocation of non-admitted services to a Tier 2 class. Further information on the Tier 2 non-admitted services classification version 4.1 is available on IHPA's website.

The Queensland Monthly Activity Collection (MAC) Clinic types specified in the Clinic Form, Diagnostic and Procedures Form, Telehealth Form and Group Forms are aligned to the Tier 2 classes to allow Queensland to meet IHPA and AIHW reporting requirements. The calculation of the QWAU is applied to the MAC collection counts. The MAC manual provides a mapping of the MAC clinic types, Tier 2 classes and the Queensland's corporate clinic codes (CCC). The Tier 2 mappings shown in the MAC manual are based on the Tier 2 definitions as prescribed in the NMDS for statistical reporting purposes and used for AIHW reporting. The alternate mappings are managed by Healthcare Purchasing and Funding (HPF) Branch and are used for IHPA reporting, ABF purposes and Decision Support System (DSS) reporting. These mappings differ due to the application of the NMDS; HPF

[9] Tier 2 Non-admitted Care Services Classification, Independent Hospital pricing Authority.

Branch mappings have been derived from consultation with HHSs performing the services and historical mappings, to ensure continuity of reporting and funding.

The counting unit for non-admitted care is referred to as a 'non-admitted patient service event' and is conceptually an algorithm applied to the counting unit for an Occasion of Service (OoS).

A 'service event' is an interaction between one or more healthcare provider(s) with one non-admitted patient, which must contain therapeutic/clinical content and result in a dated entry in the patient's medical record. The interaction may be for assessment, examination, consultation, treatment and/or education. It is independent of the service setting, thus services provided outside of the hospital setting are included.

Group sessions (where two or more non-admitted patients receive services at the same time from one or more facility staff) require that for each participant in the group session a service event be recorded.

Detailed information on counting rules for service event is also available in the MAC Manual on www.health.qld.gov.au

The Queensland Health Non-Admitted Patient Data Collection (QHNAPDC) was established to collect the non-admitted (or outpatient) activity at the patient-level as specified for State and Commonwealth Government reporting requirements, in particular, those of the IHPA's Non-admitted Patient National Best Endeavours Data Set Specification (NBEDS).

4.9.2 Data collection and reporting

All non-admitted aggregate data is collected via the MAC to report the Non-Admitted Patient Hospital Care Aggregate 2017-18 and Non-admitted patient Local Hospital Network care aggregate NBEDS 2017-18 (METeOR ID: 649576).

All non-admitted patient level data is collected via the QHNAPDC, which is also used for reporting for IHPA's Non-admitted Patient NBEDS 2017-18. Both these National and State requirements are prescribed together in the QHNAPDC Manual.

4.9.3 Weighted activity unit

The price weight varies depending on the clinic. See Appendix 7: Non-admitted Tier 2 clinic services.

Block funding has been retained in 2017-18 for clinic 40.34 Specialist Mental Health.

4.10 Home delivered services

Home services are priced via a patient census count per calendar month as described in the IHPA Tier 2 Non-Admitted Service Definitions Manual, available on IHPA's website.

4.10.1 Home enteral and total parenteral nutrition

Nutrition can be provided either through a feeding tube (enteral nutrition class 10.18) or, when the digestive tract cannot be used, through an intravenous tube called a catheter that is inserted directly into the veins (parenteral nutrition class 10.17). Home enteral and

parenteral nutrition must by performed by the patient (or the patient's carer) in their home without a health care provider present to be eligible for reporting under this category.

4.10.2 Home ventilation

Home ventilation is a service provided to patients who are dependent on ventilation at overnight and who without ventilator support would be at risk for imminent hospitalisation. Non-admitted home delivered ventilation class 10.19 is self-administered by the patient (or the patient's carer) and procedures may include:

- Bi-level positive airway pressure (BiPAP)
- Continuous positive airway pressure (CPAP)
- diaphragm pacing
- negative pressure ventilation (iron lung)
- ventilation via tracheostomy.

This service was priced by IHPA for 2017-18, and while counting will continue and a QWAU and NWAU assigned, the funding will be based on a block-funded amount up to $15.2 million in 2017-18.

4.10.3 Home renal dialysis

Renal dialysis forms part of a long-term treatment provision to patients and is offered in a flexible manner where patients can move between treatment settings as their condition changes. Dialysis patients can be treated in a hospital setting, via walk-in centres or receive treatment at home. In-centre renal dialysis, undertaken as an admitted patient episode, will be classified and funded under the admitted acute model. Home renal dialysis, undertaken as a non-admitted service event, will be classified either as:

- home haemodialysis
- self-care dialysis
- extended hours home dialysis
- continuous ambulatory peritoneal dialysis (CAPD)
- automated peritoneal dialysis (APD).

Weighted activity unit

Home delivered services QWAU is based on the relevant Tier 2 code (e.g. 10.15, 10.16 etc.) price weight.

4.11 BreastScreen Queensland (BSQ)

The 2017-18 HHS prices per screen for breast screening services are the same as those applied in 2016-17. The Sunshine Coast HHS is the one exception to this approach as this HHS is transitioning to the metro group target price over three years (2017-18 is year two), hence its 2017-18 price per screen is reducing from $131 in 2016-17 to $129 per screen in 2017-18 (see Table 8).

The $15 per screen loading for all out of hours screens introduced in 2016-17 has been increased to $20 per screen for 2017-18.

A new $45 per screen loading has been introduced to fund increased first and second screens in the target age group 50-74, with volume targets set by the Preventive Health Branch (PHB) based on a projected twenty per cent increase on 2015-16 BSQ service specific baseline activity. Further information is available on the 2017-18 Purchasing specifications on QHEPS regarding BreastScreen Services specifications.

For 2017-18, HHS allocations for BSQ services continue to be nominally converted to WAUs in the service agreements in order to align all output-based models to a common currency. The Tier 2 class (70.07) was introduced from 2016-17 as a Queensland variation for the collection of BSQ funded activity – refer Appendix 7.

The 2017-18 price per screen for HHS BSQ services is provided in Table 8.

Table 8 BSQ funding model price per screen 2017-18

BSQ model group	Hospital and Health Service	$ price per screen
Metro	Gold Coast	$127
	Metro North	$127
	Metro South	$127
	Sunshine Coast	$129
Regional	Cairns and Hinterland	$164
	Central Queensland	$164
	Darling Downs	$164
	Mackay	$164
	Townsville	$164
	West Moreton	$164
	Wide Bay	$164

4.12 Oral Health

The 2017-18 Oral Health Services (OHS) funding model is based on an update of the 2016-17 model, with the metro/regional HHS group target price to remain at $58 per Weighted Occasion of Service (WOOS).

Baseline (Queensland Government-funded) service activity targets for all HHSs have been set at the 2016-17 purchased levels. As in previous years, the four remote HHSs (Central West, North West, South West, and Torres and Cape) are out-of-scope for the model. This is primarily due to the variability of expenditure data and possible issues around the allocation of overheads for oral health services in remote areas. For these HHSs, their baseline budgets and WOOS targets are set equal to those of 2016-17.

Table 9 displays the grouping of HHS under the OHS funding model.

From 2016-17, HHS budget allocations for oral health are nominally converted to WAUs in the service agreements in order to align all output-based models to a common currency. The Tier 2 class (70.04) was introduced from 2016-17 as a Queensland variation for the collection of OHS funded activity – refer Appendix 7.

In addition, HHSs will be provided with Commonwealth OHS funding under the new National Partnership Agreement for Adult Public Dental Services. This funding will be allocated to HHSs on an oral health needs basis, principally determined by HHS OHS eligible populations with consideration to disease levels and demand for care.

Table 9 Oral health funding model price per WOOS 2017-18

OHS model group	Hospital and Health Service	$ price per WOOS
Metro/Regional	Cairns and Hinterland	
	Central Queensland	
	Darling Downs	
	Gold Coast	
	Mackay	
	Metro North	
	Metro South	
	Sunshine Coast	$58
	Townsville	
	West Moreton	
	Wide Bay	
Remote	Central West	
	North West	
	South West	
	Torres and Cape	

4.13 Private patients

The WAU for private admitted patients under the National model is discounted in accordance with clause A41 of the NHRA. Under the National model, the NEP for private admitted patients is reduced to offset funding received from other Commonwealth programs (e.g. MBS and PBS) and patient charges (including prostheses and accommodation/nursing related components equivalent to the Queensland private health insurance default bed day rate or equivalent).

The Queensland ABF model varies to the National ABF model for acute admitted patients, as there are no QWAU private patient adjustments due to the recognition of the contribution of HHS OSR in the funding and purchasing model (refer section 2.2).

4.14 Ineligible patients

Under the national ABF model there is no WAU allocated to episodes of care for ineligible patients.

Ineligible patients are those patients who are:

- ineligible for a Medicare card or
- overseas visitors, asylum seekers not covered by a Reciprocal Health Care Agreement (RHCA).

Under the Queensland ABF model, QWAUs are calculated in full regardless if the episode is Self-Funded or Not-Self Funded.

4.15 ABF model adjustments

There are eleven adjustments (or loadings) in the National model. Refer below the order of application (the precedence):

1. paediatric adjustment - admitted acute where patient < 17 years and is admitted to a Specialised Children's Hospital
2. specialist psychiatric age adjustment (not being applied in Queensland QWAU)
3. patient remoteness area adjustment - admitted acute or admitted subacute patient - whose residential address is within an area that is classified as being Outer Regional, Remote or Very Remote
4. Indigenous adjustment - admitted acute, admitted subacute, emergency or non-admitted patient who identifies as being of Aboriginal and/or Torres Strait Islander origin
5. radiotherapy adjustment - admitted acute patient with a specified ICD-10-AM 10th edition radiotherapy procedure code recorded in their medical record
6. dialysis adjustment - admitted acute patient with a specified ICD-10-AM 10th edition renal dialysis code who is not assigned to the AR-DRG L61Z Haemodialysis or AR-DRG L68Z Peritoneal Dialysis
7. ICU adjustment – (a) Is not represented by a newborn/neonate AR-DRG identified as 'Bundled ICU' in the tables of NEP17 Price Weights; but (b) Is in respect of a person who has spent time within a Specified ICU"
8. private patient service adjustment (not applied in QWAU as all revenue sources are in the price weight)
9. private patient accommodation adjustment (not applied in QWAU as all revenue sources are in the price weight)
10. multidisciplinary clinic adjustment non-admitted patient (not applied in Q19 QWAU as introductory phase)
11. emergency care age adjustment - ED or ES patient who is aged sixty-five to seventy-nine years or over seventy-nine years.

Queensland applies only seven of the National ABF model adjustments, refer appendix 10 2017-18 ABF model adjustments and localisations.

4.15.1 Paediatric adjustment

An admitted acute paediatric adjustment applies to patients aged up to and including 17 years and is admitted to a Specialised Children's Hospital. The Queensland Specialised Children's Hospitals in 2017-18 are Lady Cilento Children's Hospital and The Townsville Hospital.

The level of loading varies according to the AR-DRG. Refer to the column headed paediatric adjustment in Appendix 1: Queensland Acute admitted price weights.

4.15.2 Patient remoteness area adjustments: Outer Regional, Remote and Very Remote

For all admitted patients, an adjustment applies to acute and subacute patients whose residential address is within an area that is classified as outer regional (8 per cent), remote (20 per cent) or very remote (25 per cent).

4.15.3 Indigenous adjustment

The Indigeneous adjustment of 4 per cent applies to patients identifying as being of Aboriginal and/or Torres Strait Islander origin and is applied to admitted acute, subacute, emergency or non-admitted patient.

4.15.4 Radiotherapy adjustment

The radiotherapy adjustment of 27 per cent applies to an admitted acute patients with a specified ICD-10-AM 10th edition radiotherapy procedure recorded in their medical record. The relevant radiotherapy ICD-10-AM codes are identified in Appendix 14.

4.15.5 Dialysis admitted patient adjustment

The dialysis adjustment of 25 per cent applies to admitted acute patients with a specified ICD-10-AM 10th edition renal dialysis code who is not assigned to the AR-DRG L61Z Haemodialysis or AR-DRG L68Z Peritoneal Dialysis. The relevant dialysis ICD-10-AM codes are identified in Appendix 15.

4.15.6 ICU adjustment

An ICU adjustment is applied where the ABF activity is not represented by a newborn/neonate AR-DRG, but is in respect of a person who has spent time within a specified ICU listed in Appendix 13. The price weight to be applied is 0.0427 QWAU per hour spent by that person within an eligible ICU.

4.15.7 Emergency care age adjustment

For an ED or ES patient, with the rate of adjustment is dependent on the person's age:

- those aged sixty-five to seventy-nine years the adjustment is 14 per cent and
- those aged over seventy-nine years the adjustment is 21 per cent.

4.16 Grants for ABF facilities

These grants are funded from the ABF pool (and the deductions referenced in section 4.3.1 Derivation of the QEP).

4.16.1 Specified grants

Grants are provided to HHSs for costs incurred by ABF facilities for services, which could not be appropriately funded through the ABF model and are funded through a portion of the total ABF pool available for Queensland, thus reducing the calculated QEP.

In general, these grants are provided where:

- There was classification failure in the ABF model such that an ABF hospital, when operating efficiently, could not fund the activity through ABF funding. This includes statewide and/or highly complex services, such as the Queensland Spinal Injuries Service; or
- The service was critical to the delivery of public hospital services, but did not give rise to activity that attracted funding under the ABF model such as clinical advisory and patient management services.

For 2017-18, the Specified Grants for 2015-16 have been indexed two and a half per cent.

Specified Grants have been provided for those services without activity, e.g. Paediatric Retrieval. For other ABF services, where a funding gap of $50,000 is exceeded, a high cost outlier grant has been estimated and provided prospectively to the HHS based on activity identified in the 2013-14 financial year. Additional payments for unforeseen variations high cost individual patients are available as a PI (refer Table 1) and provided through the service agreement amendments.

Refer to Appendix 14 for the list of Specified Grants by HHS.

4.16.2 Clinical education and training

It is recognised that the public hospital system has a significant role in educating and training the clinical workforce. Clinical education and training (CET) funding is allocated for the mix and level of staffing employed and the number of under-graduate and post-graduate student clinical placements in the HHS.

For the purposes of the funding model, CET is defined as an activity where the primary aim is to transfer clinical knowledge for ongoing professional development via a teacher or mentor to a student or candidate in a recognised program/course resulting in:

- either qualifications that may meet registration requirements
- or other admission to a specialised discipline where the right to practice in that discipline requires completion of the program or course.

Due to difficulties in separating the resource time for education activity that is incurred during direct patient treatment, a notional value is determined based on methodologies applied to each of the following components of clinical education:

- salaried employees in clinical training positions
- under-graduate and post-graduate student scholarships and clinical placements
- jointly appointed clinical academics.

The funding provides incentives for ABF facilities and staff to build the capacities for future health workforce and influence student decisions when choosing their future employer. Jointly appointed clinical academic positions in Queensland public facilities provide the nexus between the university sector, professional colleges and the health industry. A notional estimate of the statewide cost of this activity is allocated on a pro-rata basis according to the distribution of positions in-scope for the salaried employee component.

As with specified grants, block grants for CET are funded from a portion of the total ABF pool available for Queensland that is redirected to grants. Hence, the CET grants are applicable to ABF facilities only.

Refer to Appendix 17 for the 2017-18 facility CET grants. These grants were calculated on the best available data at the time of model development.

5. Block funding (Non-ABF) and other funding models

5.1 Block funding - small hospitals and public psychiatric facilities

IHPA provides the following block funding criteria to COAG and is typically applied for small public hospitals where:

- the technical requirements for applying ABF are not able to be satisfied
- there is an absence of economies of scale that mean some services would not be financially viable under ABF.

IHPA has also determined 'low volume' thresholds that form part of the Block Funding Criteria for use in 2017-18. For more information about the National block funding criteria, refer to the National Efficient Cost Determination 2017-18 on IHPA's website. Note the NEC is based on the 2014-15 National Public Hospital Establishment Database (NPHED).

Hospitals and facilities in scope for block funding include small rural hospitals[10], standalone hospitals providing specialist mental health services[11] (e.g. Psychiatric Hospitals) and standalone major city hospitals providing specialist services[11] (e.g. mothercraft, dental and dialysis). For 2017-18, there are 120 block funded hospitals in Queensland: 83 small rural hospitals and include four standalone hospitals providing specialist mental health services: Baillie Henderson Hospital, The Park – Centre for Mental Health, Kirwan Rehabilitation Unit and Charters Towers Rehabilitation Unit[12], and two standalone major city hospitals providing specialist service: Ellen Barron Family Centre and Wynnum Hospital .

There are also 12 Residential Mental Health Community Care Units and 21 Residential Aged Care and Residential Care Service facilities, which are block-funded. Refer Appendix 18 2017-18 HHS hospital and facilities by funding model.

The 2017-18 Queensland block funding model is an update of the 2016-17 approach; with the allocation of funding to these hospitals being based on the 2015-16 expenditure reported to the NPHED, net of depreciation and other patient revenue and DVA revenue sources, indexed by two and a half per cent per annum for two years.

Whilst *Section 19(2) Health Insurance Act 1973* prohibits the payment of Medicare benefits where other government funding is provided for that service, COAG introduced the Section 19(2) Exemptions Initiative (the s19(2) Initiative) - Improving Access to Primary Care in Rural and Remote Areas Initiative in conjunction of the Better Health for All Australians Action Plan under the 2006-2007 Federal Budget process. The Initiative provides for exemptions under s19(2) of the Act to allow exempted eligible sites to claim against the MBS for non-admitted, non-referred professional services (including nursing, midwifery, allied and dental services) provided in EDs and outpatient clinic settings. The Initiative recognises that many patients in small rural and remote towns have limited access to primary health care services and that in response to a lack of private practices, many rural

[11] IHPA determines the efficient cost of these hospitals in consultation with the relevant state or territory, with reference to their total inscope reported expenditure in the NPHED in 2014-15.
[12] Although Charters Towers Rehabilitation Unit is not recognised as specialist mental health facility in the IHPA model, Queensland identifies it as such.

and remote public hospitals have employed medical officers to make traditional general practitioner (GP) services available.

The Queensland Government has a Memorandum of Understanding (MOU) with the Commonwealth that allows Queensland to bill public non-admitted primary care services because the Commonwealth who is responsible for primary care services (through Medicare), acknowledges that in some rural and remote sites that have a doctor workforce shortage, the State is treating a lot of these cases through their public outpatient clinics and EDs. Clause A7.a of the NHRA allows the payment of Commonwealth funding for services that attract an MBS payment under a 19(2) Directive.

The total 2017-18 allocation is calculated by adding the 2015-16 amount of other revenue back onto the State and Commonwealth allocation. This amount reflects the OSR component of the funding allocation.

This methodology is applied to all block funded hospitals. However, there are exceptions for the three HHSs: Central West, South West and Torres and Cape, specific allocations have been added to the total block hospital funding to reflect the ABF QWAU allocation of oral health funding from block funded services.

Further information regarding block funded hospitals in 2017-18; refer the Purchasing and non-Activity Based Funding Specifications page on QHEPS.

5.1.1 Block funded services

In 2017-18, IHPA determined that the following services in ABF hospitals were eligible for block funding as the technical requirements for applying ABF are not able to be satisfied: TTR, Non-admitted Mental Health Services; and A17 List services not otherwise priced. The efficient cost of these services was determined for 2017-18 on the advice of states and territories.

For Queensland, TTR is partially funded under the CET grant (refer section 4.16.2).

For the Non-admitted Mental Health Services, Queensland block funds twelve Mental Health Community Care Units and twenty-one Residential Aged Care and Residential Care Service facilities. Refer to Appendix 18 2017-18 HHS hospitals and facilities by funding model.

5.2 Population based funding

In addition to hospital services, HHSs also provide a wide range of primary and community health and other services that are outside the scope of the National funding model and as such are state-funded services. These services have traditionally been funded through recurrent allocations based on historical amounts and indexed to account for enterprise bargaining and non-labour cost escalation.

In 2016-17, a simplified population based funding model was developed. The resident population of each HHS, adjusted for Age, Gender, Socio-Economic Indexes for Areas (SEIFA) and remoteness was applied. Table 11 shows the population weighted percentage applied to each HHS for 2017-18.

Table 6 Population Based Allocation Methodology

Hospital and Health Service	Age-sex Weighted Pop + SEIFA + Remoteness %
Cairns and Hinterland	6.7%
Central Queensland	6.0%
Central West	n/a
Children's Health Queensland	n/a
Darling Downs	7.8%
Gold Coast	11.4%
Mackay	4.7%
Mater Health Services	n/a
Metro North	16.1%
Metro South	19.2%
North West	n/a
South West	n/a
Sunshine Coast	9.0%
Torres and Cape	n/a
Townsville	6.0%
West Moreton	6.9%
Wide Bay	6.2%
Total	**100.0%**

Source: Strategic Policy and Planning Division, System Planning Branch

The available statewide pool for these services is determined following allocations for ABF and block funded hospitals, and other non-ABF services, such as third party and other specific funding.

5.2.1 Primary and community services

Each HHS receives a pool of funding to meet local primary and community healthcare needs across a range of core services.

Funding in this pool must be used to meet local health needs in these service areas and HHSs have the discretion to allocate funding across these community health services according to local priorities.

The following services are funded under the pooled approach for core primary and community care models:

- Alcohol and Other Drugs
- Care Co-ordination
- Child and Youth
- Chronic Disease
- Communicable Diseases
- Community Care Program

- Community Mental Health
- Community Palliative Care
- Community Rehabilitation
- Maternal Health
- Preventative Services
- Primary Health Care
- Sexual Health
- Women's and Men's Health.

The *National Health Reform Agreement (2011)* makes clear that Primary Health Care is the policy and funding responsibility of the Commonwealth. However, the Department recognises that there are unique service needs for primary health care in rural and remote locations and outreach services offered by Metropolitan HHSs.

In many cases, these services are ineligible for Commonwealth subsidies available through the MBS. For this reason, the Department will continue to invest in primary healthcare in 2017-18.

5.3 Other specific funding

The services identified in Table 7 are funded through specific funding arrangements

Table 7 Services funded under specified funding methodologies

Service receiving specified funding	Details
• Consumer Information Services • Disability Residential Care Services • Environmental Health • Home and Community Medical Aids and Appliances • Offender Health Services • Third party funded health services	Specified funding allocations to relevant HHSs. For regional and metropolitan HHSs, the funding for 2017-18 has been based on indexed 2014-15 expenditure. For remote HHSs, the 2017-18 funding has been based on 2015-16 SAs.

5.3.1 Community state-wide services – limited HHS delivery

A number of community services are offered statewide by a small number of representative HHSs. For example:

- Consumer Information services including the Kids Help Line and Alcohol and Drug Information Service are offered by Children's Health Queensland HHS and Metro North HHS.
- Disability Residential Care Services are offered in following HHSs: Metro North and Metro South. Services at Birribi, Rockhampton, is funded under the NDIS.
- Environmental Health services are provided by public health units in twelve HHSs.[13]

[13] Cairns and Hinterland HHS, Central Queensland HHS, Darling Downs HHS, Gold Coast HHS, Mackay HHS, Metro North HHS, Metro South HHS, North West HHS, Sunshine Coast HHS, Torres and Cape York HHS, Townsville HHS and Wide Bay HHS.

- The Home and Community Medical Aids and Appliances service is primarily facilitated through Metro South HHS and funded under the Queensland Medical Aids Subsidy Scheme.

5.3.2 Offender health services

Offender health services refer to the delivery of general health services (defined as the delivery of multi-disciplinary primary health and other ambulatory care) to prisoners in public correctional centres. Funding for prisoner mental health services is provided separately through block funded Mental Health programs, while prisoner dental services are funded via the offender health services funding model.

A new funding methodology for offender health services was applied from 2015-16 to enable more fair and equitable funding allocations that take account of increased service demand arising from prisoner population growth.

Prisoner populations continue as the basis of HHS Offender Health Services funding, with the total available funding distributed by each HHS's proportion of the State 2017-18 prisoner forecast.

Forecast prisoner populations were derived from the prisoner projections provided by Queensland Correctional Services (medium growth scenario for adult prisoners) and Department of Justice and Attorney General (business as usual projection for youth detention centre occupants, incorporating the impact of moving seventeen year olds from adult prisoners to youth detention).

Table 13 details the resulting 2017-18 HHS prisoner population forecasts.

An additional $2.0 million recurrent growth in addition to the 2016-17 budget has been available for offender health services in 2017-18.

In 2015-16 and 2016-17, the West Moreton HHS received an additional allocation for hosting the statewide management of Queensland prisoner medical records, which was deducted from the statewide offender health budget. With West Moreton HHS now being provided additional funding outside this budget to implement a statewide electronic medical record system, this deduction has been has been ceased from 2017-18.

Table 8 HHS prisoner forecasts 2017-18

Hospital and Health Service	2017-18 prisoner forecasts
Cairns and Hinterland	948
Central Queensland	655
Gold Coast	126
Metro North	1,199
Metro South	191
Townsville	1,138
West Moreton	2,050
Wide Bay	646
Queensland	**6,953**

5.3.3 Third party funded health services

The Department has historically subsidised HHSs for the delivery of a range of 'third party funded services' that are the responsibility of the Commonwealth or other agencies[14]. These services include:

- Aged Care Assessment Program (ACAP)
- Home and Community Care (HACC)
- Home Care Packages
- Multi-purpose Health Services (MPHS)
- Residential Aged Care
- Transition Care program.

The following principles will apply to the funding of these services:

- No State subsidy will be provided for services/programs that are the responsibility of another jurisdiction or state government agency (except for MPHS, Transitional Care and Residential Aged Care). HHSs retain the capacity to deliver these services beyond the third party funding levels but will not receive a specific funding allocation for these services from the Department.
- Exemptions may apply for HHSs deemed to be the provider of last resort for a particular service that is not the responsibility of Queensland Health.
- Funding that is provided from a third party agency to the Department to distribute to HHSs will be specified in SAs and based on historical revenue from the previous year. This will be reconciled upon receipt of funding from third party agency.
- Funding under existing joint agreements will continue, e.g. Transition Care funding whereby the Department will fund twenty-five per cent of the total cost of the Transition Care program).
- Funding for Residential Aged Care and MPHS incorporates both Commonwealth funding and State contributions for Residential Aged Care and MPHS.

Please refer to Appendix 16 for a comprehensive list of services not funded via ABF.

[14] See National Health Reform Agreement (2011) Schedule F

6. Reporting Evidence

6.1 Data collection systems

The following table summarises the information systems used across HHSs to capture activity for various ABF services. Refer to the service agreement for details and funding.

Table 9 Information system/processes used across HHSs

Activity type	Administration system/collection process	Data collection
Acute admitted patients including Intensive care patients Subacute admitted patients Mental health admitted patients	HBCIS Also via CIMHA	QHAPDC Also for MHADC
ED	EDIS Cerner FirstNet, or manual file submission	EDC
ES (small or rural EDs)	HBCIS, or EDIS or MAC online form	EDC
Non-admitted aggregate	MAC online form	MAC
Non-admitted patient		QHNAPDC
TTR	Manual HHS survey	

For further information, including the data specifications collected via these systems, refer to the QHAPDC Manual and the MAC Manual under Statistical Services Branch on www.health.qld.gov.au and the EDC Manual on QHEPS.

6.2 Data integration process

Activity data collected from these various systems is integrated with financial and other resource utilisation systems within the costing system to enable clinical activity to be costed.

6.2.1 Clinical costing system

The clinical costing systems are designed to:

- record financial and patient information from feeder systems, e.g. DSS, Financial and Materials Management Information System (FAMMIS), Payroll, HBCIS
- organise financial information and patient utilisation into departments
- cost products at a department level
- assign products and costs to patients.

Functional Levels

The clinical costing systems store data in three functional levels that intersect with each other and can provide summary or detailed information. These levels are:

- patient demographics, utilisation, medical record data
- departmental products, volumes and activity
- financial, general ledger and payroll data (not all systems include payroll data).

Feeder systems

The clinical costing system obtains data from feeder systems to provide both a consolidated corporate view and an individual site view. These feeder systems include:

- FAMMIS: general ledger and payroll
- HBCIS: patient demographics, admission and discharge details, ICD-10-AM diagnosis and procedure codes, elective admissions and appointment scheduling
- ESM: appointment scheduling
- EDIS: ED presentation details and triage category
- FirstNet: ED presentation details and triage category
- CIMHA: consumer demographics, ICD-10 codes, clinical interventions and duration for specialised community mental health
- Operating Room Information Management System (ORMIS): theatre details
- Surginet: theatre details
- Inventory: prosthetic information
- AUSLAB: pathology tests ordered
- STOCCA: pharmacy dispensing
- IMAGING: diagnostic imaging examinations
- RADNet: diagnostic imaging examinations
- TRENDCARE: patient-nurse dependency
- AHIIS: Allied health.

Please note that not all feeder systems are available in all HHS facilities.

6.2.2 Determination of WAUs

Activity data is translated into standard units of activity: WAUs using Gen-WAU (Generated Weighted Activity Units) are used for the reporting of activity and are a keystone to the setting and monitoring of performance and financial targets of HHSs.

6.3 Activity reporting

Patient clinical activity is reported in:

- SPR – System Performance Reporting system:
  - Activity Dashboard: Data is updated in line with the performance reports by the 21st of the month with data taken from DSS the Monday prior to the 21st of the month.
  - Admitted patient Analytics: Data is sourced from the Statistical Output Reporting Team via Gen-WAU (the system used by the Healthcare Purchasing and System

Performance (HPSP) Division for funding and costing) and refreshed once a month in line with performance reporting.

- DSS – Decision Support System – DSS Panorama Necto under the Activity Based Funding cube and the GEN_WAU cube. Data is updated in DSS each weekend providing users with refreshed data each Monday sourced from the Statistical Output Reporting Team via Gen-WAU.

6.4 Data audit and compliance

6.4.1 Audit and clinical coding

A statewide clinical coding audit program was adopted in 2013. A three-year coding audit cycle is conducted by suitably qualified and appointed Queensland Department of Health clinical coders. The audit program is overseen by the Statewide Health Information Management Clinical Coding Network that reports to HPFB and the HHS Funding Committee.

6.4.2 Counting, coding and costing compliance

Compliance with relevant counting, coding and costing requirements is mandatory.

The references/standards for each element are as follows:

- Coding: ICD-10-AM Australian Coding Standards
- **Costing:** Costing Standards
  - Australian Hospital Patient Costing Standards
  - Queensland Clinical Costing Guidelines
- **Counting:** data definitions outlined in
  - Queensland Hospital Admitted Patient Data Collection (QHAPDC) Manual
  - Monthly Activity Collection (MAC) Manual
  - Queensland Perinatal Data Collection
  - EDIS Terminology and Reference Document available on QHEPS
  - IHPA Tier 2 Non-Admitted Services Compendium
  - Queensland Health Non-admitted Patient Data Collection (QHNAPDC).

6.4.3 Data quality

The Department oversees the following:

- Data quality central repository - tools and resources to assist business areas within HHS and the Department to assess and improve data quality as well as assist with consistency and standardisation, organisation wide information sharing and reduced duplication of effort
- State-wide Data Quality Network - the purpose of this network is to support business areas within HHSs and the Department to identify data quality issues and opportunities for improvement and to develop, implement and share solutions
- *Queensland Health data quality framework* - the framework was developed to support the capture, use and ongoing improvement of the quality of data within HHS and the Department, commencing with clinical data.

Data quality and validation checks are also undertaken at a number of levels and at varying time-points (weekly/monthly/annually) throughout the year:

- Counting validation:
  - Gen-WAU input data for QHAPDC and QHNAPDC by Statistical Services Branch, Strategy, Policy and Planning Division
  - SATr by HIU, Health Innovation and Research Branch, Clinical Excellence Division
  - IHPA validations by HHSFC Unit, HPF Branch, HPSP Division
- Costing validation and quality audit:
  - NHCDC by HPF Branch and Independent Financial Review (coordinated by IHPA)
  - DSS ABF/Non-ABF Cost centre splits by HPF Branch
  - MAC checks by Statistical Services Branch and the HPF Branch who agree on advice to HHSs for the mapping of CCC codes to the MAC
  - Financial and Residential Activity Collection (FRAC), the annual Queensland collection on public hospital establishments including expenditure, revenue , staffing (FTE) levels and other related hospital data, is coordinated by Statistical Services Branch with input by HPF Branch
- Coding audit:
  - Classification: Clinical coding audits coordinated by the HPF Branch .

7. Governance

A sound governance framework supported by clear standards and definitions, and backed up with an auditing process supported by end users is pivotal to ensuring funding is transparent, reflects need and based on reliable data sources.

7.1 Department of Health

The levels within the Department with roles in governance of healthcare funding include:

- Department Leadership Team
- Healthcare Purchasing and Performance Executive Committee
- HHS Funding Committee
- HHS Costing and Funding Network.

7.1.1 HHS Funding Committee

The HHS Funding Committee (the Committee) reports to the Health Purchasing and Performance Executive Committee, which advises the Deputy Director General HPSP Division on purchasing strategy, market management and development, and performance enablement and delivery. The purpose of the Committee is to provide guidance and make recommendations to the Senior Director, HPF Branch, in relation to all aspects of HHS funding, including providing technical oversight and detailed input into the:

- way in which estimated future health service activity is employed within the purchasing framework
- derivation of the technical details supporting the annual purchasing framework and its associated purchasing initiatives
- derivation of the QEP
- responses which the Department makes to proposals from the IHPA, the Administrator of the NHFP and any associated working group
- technical implementation of the National ABF and any agreed Queensland localisations within the ABF model, purchasing model and DSS reporting
- derivation of any new funding models
- application and further development of the rural hospitals funding model
- management of the Specified Grant process and ABF and non-ABF costing
- identification of funding strategies to maximise OSR within Queensland
- oversight of the NHCDC and input into the annual collection for NPHED (In Queensland, this is sourced from the Financial and Residential Activity Collection (FRAC))
- derivation and application of the annual purchasing model to ensure accuracy, transparency and equity of application
- oversight of the clinical costing solution and the business requirements for the potential system replacement
- maintenance of Information Technology (IT) systems for HHS funding models.

Membership of the Committee includes representatives from:

- Metro, regional and rural HHS Chief Finance Officers

- Contracting and Performance Management Branch
- Finance Branch
- HIU
- HPF Branch
- Statistical Services Branch
- System Performance Branch
- System Planning Branch
- Statewide Health Information Management Clinical Coder Network
- Queensland representatives on IHPA's committees and working groups.

7.1.2 HHS Costing and Funding Network

The purpose of the network is to provide a forum for stakeholders to discuss operational or technical HHS costing and funding issues, resolutions and to provide advice to influence the development of future national models and classifications.

The network governance is through the Committee.

7.2 System Performance

The overall management of the public sector health system is the responsibility of the Department, through the Director General (Chief Executive in the system manager role). In performing this role, the Director General is responsible for monitoring Service performance as per section 8 of the Hospital and Health Boards Act 2011.

7.2.1 Performance management

On behalf of the Department, the Contract and Performance Management Branch, HPSP Division, monitors, assesses and manages the health service performance of HHSs in Queensland, and the public health services provided by the Mater Health Services, South Brisbane. The framework setting out performance requirements is *Delivering a high-performing health system for Queenslanders: Performance framework* – refer *Service agreements and deeds of amendments and Performance Framework* on www.health.qld.gov.au.

The Performance Framework provides an integrated process for performance review and assessment, within the overarching objectives of driving sustained improvement, keeping people healthy and improving access to timely, quality and patient-focused health care. It includes a range of processes including:

- assessing and monitoring performance
- reporting on performance
- providing support and specific interventions to allow performance issues to be addressed quickly and effectively when they arise.

The Performance Framework uses key performance indicators (KPIs) to capture information regarding key measures of health service and system performance and to monitor the extent to which the high-level objectives set out in the service agreement are being developed. The KPIs cover key aspects of performance across six areas (domains) of health service delivery: safe, equitable, effective, patient-centred, timely and efficient.

Details are specified within the HHS service agreements, refer *Service agreements and deeds of amendments and Performance Framework* on www.health.qld.gov.au.

7.2.2 Performance reporting

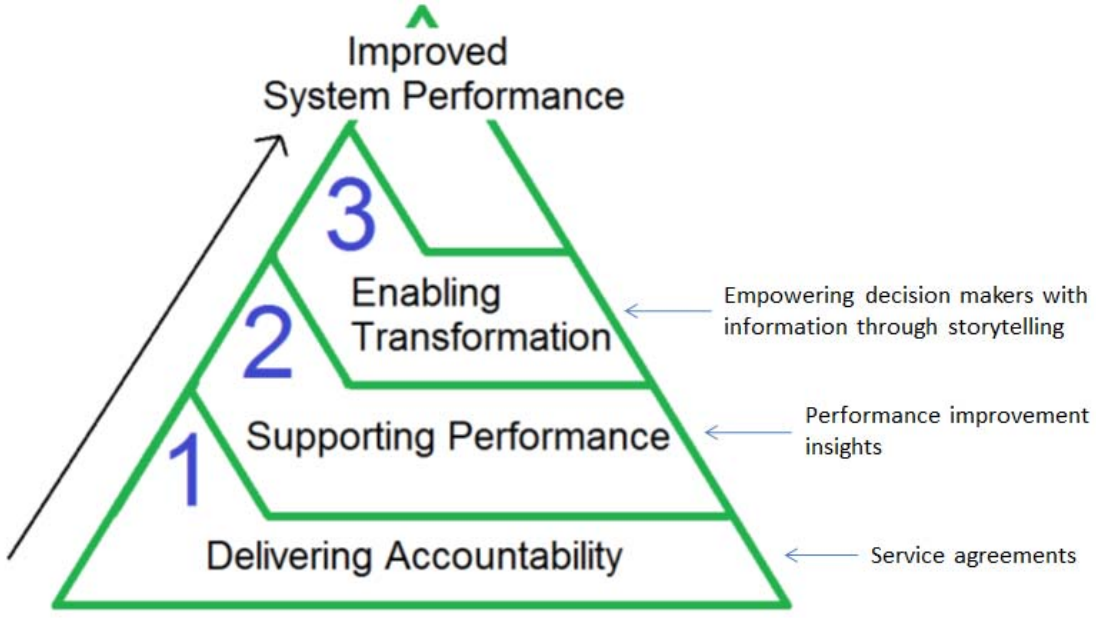
The System Performance Branch, HPSP Division, produces the performance reports on the Queensland public health system. The reports are produced for the Minister; the Director General; HHS Executives, HHS Boards and Queensland Government central agencies, and include the KPIs and:

- Weekly Director General report
- Monthly System and HHS performance reports
- Central Agencies report
- Various insights documents identifying performance improvement opportunities.

The state-wide performance reporting platform, SPR, was developed for the Department and HHSs with the aim to increase transparency and empower decision makers with actionable information to improve system performance using the latest Qlik Sense technology and data visualisation tools. It reports timely, validated, whole-of-system performance information on health services in Queensland.

SPR supports improved performance by bringing various system performance insights and relative performance to the attention of SPR users across the State (refer Figure 5).

Figure 5 Improved system performance



Source: Inspired by CPA Australia – Lifting Financial Management from stewardship to one of enabling transformation

Appendices

Appendix 1 2017-18 Queensland Admitted Acute Price Weights (Q19B)

- AR-DRG v8.0

2017-18 Queensland Admitted Acute Price Weights (Q19B) AR-DRG V8.0

								QUEENSLAND WEIGHTS						QUEENSLAND PRICE					
DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
801A	OR Procedures Unrelated to Principal Diagnosis, Major Complexity	0	0	25.5	8	77	158%	0.0000	0.7525	1.0217	8.8803	0.2588	0.0453	$ -	$ 3,608	$ 4,899	$ 42,581	$ 1,241	$ 217
801B	OR Procedures Unrelated to Principal Diagnosis, Intermediate Complexity	0	0	9.3	3	28	85%	0.0000	0.5813	1.1881	4.1262	0.2643	0.0194	$ -	$ 2,787	$ 5,697	$ 19,785	$ 1,267	$ 93
801C	OR Procedures Unrelated to Principal Diagnosis, Minor Complexity	0	0	2.5	1	7	80%	0.0000	0.0000	0.0000	1.2440	0.3334	0.0102	$ -	$ -	$ -	$ 5,965	$ 1,599	$ 49
A01Z	Liver Transplant	0	0	23.4	16	37	111%	0.0000	3.9946	1.3638	24.9824	0.4661	0.8322	$ -	$ 19,154	$ 6,539	$ 119,791	$ 2,235	$ 3,990
A03Z	Lung or Heart-Lung Transplant	0	0	21.6	10	98	100%	0.0000	3.0432	1.7315	20.2309	0.4545	0.1265	$ -	$ 14,592	$ 8,303	$ 97,007	$ 2,179	$ 607
A05Z	Heart Transplant	0	0	24.6	13	121	100%	0.0000	4.8147	1.8268	28.5155	0.4880	0.0476	$ -	$ 23,086	$ 8,760	$ 136,732	$ 2,340	$ 228
A06A	Tracheostomy and/or Ventilation >=96hours, Major Complexity	0	0	35.2	23	53	119%	0.0000	2.8442	1.1899	29.9951	0.3514	0.2173	$ -	$ 13,638	$ 5,706	$ 143,827	$ 1,685	$ 1,042
A06B	Tracheostomy and/or Ventilation >=96hours, Intermediate Complexity	0	0	20.3	13	31	100%	0.0000	1.6322	1.2599	17.8782	0.3720	0.1324	$ -	$ 7,826	$ 6,041	$ 85,726	$ 1,784	$ 635
A06C	Tracheostomy and/or Ventilation >=96hours, Minor Complexity	0	0	11.0	7	16	100%	0.0000	0.7189	1.3176	9.8399	0.3847	0.1024	$ -	$ 3,447	$ 6,318	$ 47,182	$ 1,845	$ 491
A07A	Allogeneic Bone Marrow Transplant, Age <=16 Years or Major Complexity	0	0	42.3	14	127	200%	0.0000	0.1858	1.4936	20.8579	0.4958	0.2382	$ -	$ 891	$ 7,162	$ 100,014	$ 2,377	$ 1,142
A07B	Allogeneic Bone Marrow Transplant, Age >=17 Years and Minor Complexity	0	0	20.4	6	61	100%	0.0000	0.0052	2.0007	11.7834	0.4362	0.2265	$ -	$ 25	$ 9,593	$ 56,501	$ 2,092	$ 1,086
A08A	Autologous Bone Marrow Transplant, Major Complexity	0	0	21.3	7	64	171%	0.0000	0.0132	1.1030	7.3963	0.3581	0.3387	$ -	$ 63	$ 5,289	$ 35,465	$ 1,717	$ 1,624
A08B	Autologous Bone Marrow Transplant, Minor Complexity	0	0	6.8	2	20	100%	0.0000	0.0232	1.4117	2.6906	0.2329	0.1559	$ -	$ 111	$ 6,769	$ 12,901	$ 1,117	$ 748
A09A	Kidney Transplant, Age <=16 Years or Major Complexity	0	0	13.0	4	39	108%	0.0000	1.6310	2.3406	10.5116	0.5356	0.4820	$ -	$ 7,821	$ 11,223	$ 50,403	$ 2,568	$ 2,311
A09B	Kidney Transplant, Age >=17 Years and Minor Complexity	0	0	8.0	2	24	100%	0.0000	1.5915	3.2524	7.7235	0.4070	0.3728	$ -	$ 7,631	$ 15,595	$ 37,034	$ 1,952	$ 1,788
A10Z	Insertion of Ventricular Assist Device	0	0	42.0	25	58	100%	0.0000	25.4637	1.5280	63.5960	0.6953	0.0681	$ -	$ 122,098	$ 7,327	$ 304,943	$ 3,334	$ 327
A11A	Insertion of Implantable Spinal Infusion Device, Major Complexity	0	0	16.1	5	48	100%	0.0000	2.8053	1.4038	9.7993	0.4834	0.0248	$ -	$ 13,451	$ 6,731	$ 46,988	$ 2,318	$ 119
A11B	Insertion of Implantable Spinal Infusion Device, Minor Complexity	0	0	2.8	1	8	100%	0.0000	0.0000	0.0000	3.5975	0.5292	0.0422	$ -	$ -	$ -	$ 17,250	$ 2,538	$ 202
A12Z	Insertion of Neurostimulator Device	0	0	2.8	1	8	100%	0.0000	0.0000	0.0000	5.0980	0.8796	0.0050	$ -	$ -	$ -	$ 24,445	$ 4,218	$ 24
A40A	ECMO, Major Complexity	0	0	16.0	5	48	126%	0.0000	3.3293	6.2655	34.6287	0.5747	0.0284	$ -	$ 15,964	$ 30,043	$ 166,045	$ 2,756	$ 136
A40B	ECMO, Minor Complexity	0	0	8.7	2	26	100%	0.0000	1.5131	5.6927	12.8918	0.6836	0.0066	$ -	$ 7,255	$ 27,296	$ 61,816	$ 3,278	$ 32
B01A	Ventricular Shunt Revision, Major Complexity	0	0	10.3	3	31	83%	0.0000	1.1371	1.3170	5.0824	0.3213	0.0060	$ -	$ 5,452	$ 6,315	$ 24,370	$ 1,541	$ 29
B01B	Ventricular Shunt Revision, Minor Complexity	0	0	4.9	1	15	90%	0.0000	0.0000	0.0000	2.7165	0.2912	0.0046	$ -	$ -	$ -	$ 13,026	$ 1,396	$ 22
B02A	Cranial Procedures, Major Complexity	0	0	19.5	6	59	116%	0.0000	1.6876	1.4850	10.5248	0.2987	0.0731	$ -	$ 8,092	$ 7,121	$ 50,466	$ 1,432	$ 351
B02B	Cranial Procedures, Intermediate Complexity	0	0	9.9	3	30	107%	0.0000	1.5231	1.4245	5.7152	0.2792	0.0814	$ -	$ 7,303	$ 6,830	$ 27,404	$ 1,339	$ 390
B02C	Cranial Procedures, Minor Complexity	0	0	6.5	2	19	93%	0.0000	1.1896	1.4120	3.9365	0.2622	0.0771	$ -	$ 5,704	$ 6,771	$ 18,876	$ 1,257	$ 370
B03A	Spinal Procedures, Major Complexity	0	0	15.2	5	45	111%	0.0000	2.0634	0.9187	6.4828	0.2430	0.1739	$ -	$ 9,894	$ 4,405	$ 31,085	$ 1,165	$ 834
B03B	Spinal Procedures, Intermediate Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	3.4741	0.2623	0.0551	$ -	$ -	$ -	$ 16,658	$ 1,258	$ 264
B03C	Spinal Procedures, Minor Complexity	0	0	3.0	1	9	100%	0.0000	0.0000	0.0000	2.5017	0.2890	0.0122	$ -	$ -	$ -	$ 11,996	$ 1,386	$ 59
B04A	Extracranial Vascular Procedures, Major Complexity	0	0	13.2	4	40	100%	0.0000	1.2878	1.1608	5.9097	0.2737	0.0211	$ -	$ 6,175	$ 5,566	$ 28,337	$ 1,312	$ 101
B04B	Extracranial Vascular Procedures, Intermediate Complexity	0	0	5.6	1	17	100%	0.0000	0.0000	0.0000	3.2651	0.2473	0.0312	$ -	$ -	$ -	$ 15,656	$ 1,186	$ 150
B04C	Extracranial Vascular Procedures, Minor Complexity	0	0	2.5	1	8	100%	0.0000	0.0000	0.0000	2.1764	0.2997	0.0259	$ -	$ -	$ -	$ 10,436	$ 1,437	$ 124
B05Z	Carpal Tunnel Release	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.4455	0.1353	0.0051	$ -	$ -	$ -	$ 2,136	$ 649	$ 24
B06A	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Major Comp	0	0	15.0	4	45	80%	0.0000	1.2042	1.3131	6.4286	0.2376	0.0345	$ -	$ 5,774	$ 6,296	$ 30,825	$ 1,139	$ 165
B06B	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Interm Comp	0	0	6.2	2	19	86%	0.0000	0.6507	1.2774	3.1685	0.2147	0.0372	$ -	$ 3,120	$ 6,125	$ 15,193	$ 1,029	$ 178
B06C	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Minor Comp	1	0	2.6	1	8	171%	0.6415	0.0000	0.0000	1.4090	0.2716	0.0090	$ 3,076	$ -	$ -	$ 6,756	$ 1,302	$ 43
B07A	Cranial or Peripheral Nerve and Other Nervous System Procedures, Major Comp	0	0	11.0	3	33	100%	0.0000	0.8128	1.1103	3.9660	0.2104	0.1777	$ -	$ 3,897	$ 5,324	$ 19,017	$ 1,009	$ 852
B07B	Cranial or Peripheral Nerve and Other Nervous System Procedures, Minor Comp	1	0	2.1	1	6	110%	0.6507	0.0000	0.0000	1.3503	0.3493	0.0159	$ 3,120	$ -	$ -	$ 6,475	$ 1,675	$ 76
B40Z	Plasmapheresis W Neurological Disease, Sameday	0	0	1.0	1	1	155%	0.0000	0.0000	0.0000	0.1679	0.0000	0.0001	$ -	$ -	$ -	$ 805	$ -	$ 1
B41Z	Telemetric EEG Monitoring	0	0	4.2	1	14	84%	0.0000	0.0000	0.0000	1.4776	0.3100	0.0356	$ -	$ -	$ -	$ 7,085	$ 1,486	$ 171
B42A	Nervous System Disorders W Ventilator Support, Major Complexity	0	0	12.8	4	39	135%	0.0000	0.0620	1.4582	5.8733	0.2958	0.0219	$ -	$ 297	$ 6,992	$ 28,162	$ 1,418	$ 105
B42B	Nervous System Disorders W Ventilator Support, Minor Complexity	0	0	3.5	1	10	160%	0.0000	0.0000	0.0000	1.7935	0.3203	0.0089	$ -	$ -	$ -	$ 8,600	$ 1,536	$ 43
B60A	Acute Paraplegia and Quadriplegia W or W/O OR Procedures, Major Complexity	0	0	45.7	15	137	100%	0.0000	0.3430	1.0807	16.5361	0.3063	0.0170	$ -	$ 1,645	$ 5,182	$ 79,291	$ 1,469	$ 82
B60B	Acute Paraplegia and Quadriplegia W or W/O OR Procedures, Minor Complexity	0	0	10.9	3	33	100%	0.0000	0.0000	1.2618	3.8459	0.2655	0.0000	$ -	$ -	$ 6,050	$ 18,441	$ 1,273	$ -
B61A	Spinal Cord Conditions W or W/O OR Procedures, Major Complexity	0	0	20.8	13	31	100%	0.0000	0.9802	0.5399	7.9680	0.2873	0.0270	$ -	$ 4,700	$ 2,589	$ 38,207	$ 1,378	$ 129
B61B	Spinal Cord Conditions W or W/O OR Procedures, Minor Complexity	0	0	6.9	2	21	100%	0.0000	0.1748	1.2947	2.7642	0.2772	0.0090	$ -	$ 838	$ 6,208	$ 13,254	$ 1,329	$ 43
B62Z	Apheresis	0	0	1.0	1	3	105%	0.0000	0.0000	0.0000	0.2433	0.2246	0.0413	$ -	$ -	$ -	$ 1,167	$ 1,077	$ 198
B63A	Dementia and Other Chronic Disturbances of Cerebral Function, Major Complexity	0	0	21.4	7	64	100%	0.0000	0.0000	0.6782	4.7192	0.1888	0.0240	$ -	$ -	$ 3,252	$ 22,629	$ 905	$ 115
B63B	Dementia and Other Chronic Disturbances of Cerebral Function, Minor Complexity	0	0	9.8	3	29	100%	0.0000	0.0000	0.7480	2.2202	0.1672	0.0237	$ -	$ -	$ 3,587	$ 10,646	$ 802	$ 114
B64A	Delirium, Major Complexity	0	0	10.2	3	31	100%	0.0000	0.0000	0.8031	2.3911	0.2043	0.0183	$ -	$ -	$ 3,851	$ 11,465	$ 980	$ 88
B64B	Delirium, Minor Complexity	1	0	3.7	1	11	100%	0.0954	0.0000	0.0000	0.8127	0.2188	0.0336	$ 457	$ -	$ -	$ 3,897	$ 1,049	$ 161
B65A	Cerebral Palsy, Major Complexity	1	0	9.2	3	27	80%	0.4439	0.0000	1.2361	3.6705	0.2941	0.0252	$ 2,129	$ -	$ 5,927	$ 17,600	$ 1,410	$ 121
B65B	Cerebral Palsy, Minor Complexity	0	0	1.1	1	3	122%	0.0000	0.0000	0.0000	0.2671	0.1858	0.0094	$ -	$ -	$ -	$ 1,281	$ 891	$ 45
B66A	Nervous System Neoplasms, Major Complexity	0	0	10.4	3	31	90%	0.0000	0.0000	1.0001	2.9503	0.2333	0.0501	$ -	$ -	$ 4,795	$ 14,147	$ 1,119	$ 240
B66B	Nervous System Neoplasms, Minor Complexity	1	0	4.9	1	15	119%	0.3076	0.0000	0.0000	1.2921	0.2297	0.0322	$ 1,475	$ -	$ -	$ 6,196	$ 1,101	$ 154
B67A	Degenerative Nervous System Disorders, Major Complexity	0	0	11.8	3	36	130%	0.0000	0.0000	0.9625	2.7986	0.2161	0.0890	$ -	$ -	$ 4,615	$ 13,419	$ 1,036	$ 427
B67B	Degenerative Nervous System Disorders, Intermediate Complexity	1	0	5.0	1	15	140%	0.1626	0.0000	0.0000	1.0737	0.2327	0.0548	$ 780	$ -	$ -	$ 5,148	$ 1,116	$ 263
B67C	Degenerative Nervous System Disorders, Minor Complexity	0	0	1.1	1	3	192%	0.0000	0.0000	0.0000	0.1489	0.1048	0.0024	$ -	$ -	$ -	$ 714	$ 503	$ 12
B68A	Multiple Sclerosis and Cerebellar Ataxia, Major Complexity	1	0	8.2	2	24	134%	0.2742	0.0000	1.0417	2.0405	0.2346	0.0426	$ 1,315	$ -	$ 4,995	$ 9,784	$ 1,125	$ 204
B68B	Multiple Sclerosis and Cerebellar Ataxia, Minor Complexity	0	0	1.1	1	3	200%	0.0000	0.0000	0.0000	0.3333	0.3213	0.0703	$ -	$ -	$ -	$ 1,598	$ 1,541	$ 337
B69A	TIA and Precerebral Occlusion, Major Complexity	0	0	4.5	1	14	100%	0.0000	0.0000	0.0000	1.0784	0.2230	0.0044	$ -	$ -	$ -	$ 5,171	$ 1,069	$ 21
B69B	TIA and Precerebral Occlusion, Minor Complexity	0	0	2.0	1	6	100%	0.0000	0.0000	0.0000	0.4719	0.2324	0.0024	$ -	$ -	$ -	$ 2,263	$ 1,114	$ 12
B70A	Stroke and Other Cerebrovascular Disorders, Major Complexity	0	0	21.2	7	64	100%	0.0000	0.0000	0.7946	5.4964	0.2323	0.0565	$ -	$ -	$ 3,810	$ 26,355	$ 1,114	$ 271
B70B	Stroke and Other Cerebrovascular Disorders, Intermediate Complexity	0	0	8.3	2	25	100%	0.0000	0.0000	1.0853	2.1505	0.2326	0.0202	$ -	$ -	$ 5,204	$ 10,312	$ 1,115	$ 97
B70C	Stroke and Other Cerebrovascular Disorders, Minor Complexity	1	0	4.6	1	14	153%	0.2096	0.0000	0.0000	1.1870	0.2479	0.0059	$ 1,005	$ -	$ -	$ 5,692	$ 1,189	$ 28
B70D	Stroke and Other Cerebrovascular Disorders, Transferred <5 Days	1	0	2.3	1	4	100%	0.1723	0.0000	0.0000	0.7215	0.0000	0.0043	$ 826	$ -	$ -	$ 3,460	$ -	$ 21
B71A	Cranial and Peripheral Nerve Disorders, Major Complexity	1	0	6.5	2	19	138%	0.1832	0.0000	0.8728	1.7456	0.2350	0.0254	$ 878	$ -	$ 4,185	$ 8,370	$ 1,127	$ 122
B71B	Cranial and Peripheral Nerve Disorders, Minor Complexity	0	0	1.2	1	4	200%	0.0000	0.0000	0.0000	0.1701	0.1146	0.0038	$ -	$ -	$ -	$ 816	$ 550	$ 18
B72A	Nervous System Infection Except Viral Meningitis, Major Complexity	0	0	13.1	4	39	106%	0.0000	0.0000	1.0219	4.0201	0.2421	0.0676	$ -	$ -	$ 4,900	$ 19,276	$ 1,161	$ 324
B72B	Nervous System Infection Except Viral Meningitis, Minor Complexity	0	0	4.4	1	13	171%	0.0000	0.0000	0.0000	0.9813	0.2265	0.0068	$ -	$ -	$ -	$ 4,705	$ 1,086	$ 33
B73Z	Viral Meningitis	0	0	2.9	1	10	126%	0.0000	0.0000	0.0000	0.7362	0.2264	0.0036	$ -	$ -	$ -	$ 3,530	$ 1,086	$ 17
B74A	Nontraumatic Stupor and Coma, Major Complexity	0	0	5.9	1	18	100%	0.0000	0.0000	0.0000	1.4790	0.2934	0.0694	$ -	$ -	$ -	$ 7,092	$ 1,407	$ 333

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
B74B	Nontraumatic Stupor and Coma, Minor Complexity	0	0	1.8	1	5	100%	0.0000	0.0000	0.0000	0.3590	0.2466	0.0083	$ -	$ -	$ -	$ 1,721	$ 1,182	$ 40
B75Z	Febrile Convulsions	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	0.3411	0.2497	0.0007	$ -	$ -	$ -	$ 1,636	$ 1,197	$ 3
B76A	Seizures, Major Complexity	1	0	5.1	1	15	126%	0.1665	0.0000	0.0000	1.3011	0.2598	0.0093	$ 798	$ -	$ -	$ 6,239	$ 1,246	$ 45
B76B	Seizures, Minor Complexity	1	0	1.9	1	6	168%	0.1312	0.0000	0.0000	0.4884	0.2478	0.0044	$ 629	$ -	$ -	$ 2,342	$ 1,188	$ 21
B77A	Headaches, Major Complexity	1	0	3.3	1	10	127%	0.1265	0.0000	0.0000	0.8020	0.2338	0.0041	$ 607	$ -	$ -	$ 3,846	$ 1,121	$ 19
B77B	Headaches, Minor Complexity	0	0	1.3	1	4	167%	0.0000	0.0000	0.0000	0.2087	0.1398	0.0009	$ -	$ -	$ -	$ 1,001	$ 670	$ 5
B78A	Intracranial Injuries, Major Complexity	0	0	12.5	4	38	100%	0.0000	0.0000	0.8343	3.3015	0.2456	0.0265	$ -	$ -	$ 4,000	$ 15,831	$ 1,178	$ 127
B78B	Intracranial Injuries, Minor Complexity	0	0	3.7	1	11	131%	0.0000	0.0000	0.0000	0.9071	0.2475	0.0061	$ -	$ -	$ -	$ 4,350	$ 1,187	$ 29
B78C	Intracranial Injuries, Transferred <5 Days	0	0	1.6	1	4	100%	0.0000	0.0000	0.0000	0.4316	0.0000	0.0033	$ -	$ -	$ -	$ 2,070	$ -	$ 16
B79A	Skull Fractures, Major Complexity	0	0	4.2	1	13	113%	0.0000	0.0000	0.0000	1.0530	0.2467	0.0022	$ -	$ -	$ -	$ 5,049	$ 1,183	$ 11
B79B	Skull Fractures, Minor Complexity	0	0	1.5	1	5	153%	0.0000	0.0000	0.0000	0.3641	0.2398	0.0004	$ -	$ -	$ -	$ 1,746	$ 1,150	$ 2
B80A	Other Head Injuries, Major Complexity	1	0	4.0	1	12	86%	0.1161	0.0000	0.0000	0.8309	0.2093	0.0023	$ 557	$ -	$ -	$ 3,984	$ 1,004	$ 11
B80B	Other Head Injuries, Minor Complexity	0	0	1.1	1	3	80%	0.0000	0.0000	0.0000	0.1678	0.1264	0.0006	$ -	$ -	$ -	$ 805	$ 606	$ 3
B81A	Other Disorders of the Nervous System, Major Complexity	0	0	9.4	3	28	128%	0.0000	0.0000	0.8271	2.4680	0.2110	0.0132	$ -	$ -	$ 3,966	$ 11,834	$ 1,012	$ 63
B81B	Other Disorders of the Nervous System, Minor Complexity	1	0	3.8	1	11	128%	0.2994	0.0000	0.0000	0.8608	0.2077	0.0059	$ 1,436	$ -	$ -	$ 4,128	$ 996	$ 28
B82A	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Major Complexity	0	0	36.9	12	111	100%	0.0000	0.2734	0.9585	11.7143	0.2567	0.0625	$ -	$ 1,311	$ 4,596	$ 56,170	$ 1,231	$ 300
B82B	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Intermediate Complexity	0	0	9.1	6	14	186%	0.0000	0.1172	0.4784	2.9639	0.2388	0.0233	$ -	$ 562	$ 2,294	$ 14,212	$ 1,145	$ 112
B82C	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Minor Complexity	0	0	4.4	1	13	94%	0.0000	0.0000	0.0000	0.9452	0.2856	0.0000	$ -	$ -	$ -	$ 4,532	$ 1,369	$ -
C01A	Procedures for Penetrating Eye Injury, Major Complexity	0	0	4.5	1	13	100%	0.0000	0.0000	0.0000	2.5882	0.3896	0.0058	$ -	$ -	$ -	$ 12,410	$ 1,868	$ 28
C01B	Procedures for Penetrating Eye Injury, Minor Complexity	0	0	2.1	1	6	171%	0.0000	0.0000	0.0000	1.2575	0.4024	0.0032	$ -	$ -	$ -	$ 6,030	$ 1,930	$ 15
C02Z	Enucleations and Orbital Procedures	1	0	4.1	1	12	129%	0.6777	0.0000	0.0000	2.0840	0.3209	0.0081	$ 3,250	$ -	$ -	$ 9,993	$ 1,539	$ 39
C03A	Retinal Procedures, Major Complexity	0	0	1.4	1	4	123%	0.0000	0.0000	0.0000	0.8915	0.3153	0.0132	$ -	$ -	$ -	$ 4,275	$ 1,512	$ 64
C03B	Retinal Procedures, Minor Complexity	0	0	1.0	1	3	200%	0.0000	0.0000	0.0000	0.3497	0.1506	0.0059	$ -	$ -	$ -	$ 1,677	$ 722	$ 28
C04A	Major Corneal, Scleral and Conjunctival Procedures, Major Complexity	0	0	4.5	1	14	100%	0.0000	0.0000	0.0000	2.0614	0.3391	0.0036	$ -	$ -	$ -	$ 9,884	$ 1,626	$ 17
C04B	Major Corneal, Scleral and Conjunctival Procedures, Minor Complexity	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	1.2506	0.3548	0.0026	$ -	$ -	$ -	$ 5,997	$ 1,701	$ 13
C05Z	Dacryocystorhinostomy	0	0	1.1	1	3	90%	0.0000	0.0000	0.0000	0.9789	0.3380	0.0056	$ -	$ -	$ -	$ 4,694	$ 1,621	$ 27
C10Z	Strabismus Procedures	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.8012	0.2445	0.0016	$ -	$ -	$ -	$ 3,842	$ 1,172	$ 8
C11Z	Eyelid Procedures	1	0	2.0	1	6	100%	0.6124	0.0000	0.0000	1.0960	0.3571	0.0029	$ 2,936	$ -	$ -	$ 5,255	$ 1,712	$ 14
C12Z	Other Corneal, Scleral and Conjunctival Procedures	0	0	1.5	1	4	108%	0.0000	0.0000	0.0000	0.7101	0.2521	0.0032	$ -	$ -	$ -	$ 3,405	$ 1,209	$ 15
C13Z	Lacrimal Procedures	0	0	1.3	1	3	80%	0.0000	0.0000	0.0000	0.4942	0.1673	0.0005	$ -	$ -	$ -	$ 2,370	$ 802	$ 2
C14A	Other Eye Procedures, Major Complexity	0	0	3.8	1	11	80%	0.0000	0.0000	0.0000	1.2194	0.2818	0.0104	$ -	$ -	$ -	$ 5,847	$ 1,351	$ 50
C14B	Other Eye Procedures, Minor Complexity	0	0	1.0	1	3	111%	0.0000	0.0000	0.0000	0.4117	0.1675	0.0035	$ -	$ -	$ -	$ 1,974	$ 803	$ 17
C15Z	Glaucoma and Complex Cataract Procedures	0	0	1.4	1	4	142%	0.0000	0.0000	0.0000	0.7743	0.2467	0.0057	$ -	$ -	$ -	$ 3,713	$ 1,183	$ 27
C16Z	Lens Procedures	0	0	1.0	1	4	155%	0.0000	0.0000	0.0000	0.5573	0.2210	0.0048	$ -	$ -	$ -	$ 2,672	$ 1,060	$ 23
C60A	Acute and Major Eye Infections, Major Complexity	0	0	8.3	2	25	100%	0.0000	0.0000	1.1743	2.3246	0.2700	0.0238	$ -	$ -	$ 5,631	$ 11,146	$ 1,295	$ 114
C60B	Acute and Major Eye Infections, Minor Complexity	0	0	3.7	1	11	125%	0.0000	0.0000	0.0000	1.0642	0.3047	0.0133	$ -	$ -	$ -	$ 5,103	$ 1,461	$ 64
C61A	Neurological and Vascular Disorders of the Eye, Major Complexity	1	0	4.8	1	14	139%	0.2424	0.0000	0.0000	1.1983	0.2520	0.0262	$ 1,162	$ -	$ -	$ 5,746	$ 1,208	$ 126
C61B	Neurological and Vascular Disorders of the Eye, Minor Complexity	1	0	2.7	1	8	173%	0.1538	0.0000	0.0000	0.7031	0.2236	0.0056	$ 737	$ -	$ -	$ 3,371	$ 1,072	$ 27
C62A	Hyphaema and Medically Managed Trauma to the Eye, Major Complexity	1	0	3.8	1	11	200%	0.1208	0.0000	0.0000	0.8393	0.2121	0.0069	$ 579	$ -	$ -	$ 4,024	$ 1,017	$ 33
C62B	Hyphaema and Medically Managed Trauma to the Eye, Minor Complexity	0	0	1.2	1	4	167%	0.0000	0.0000	0.0000	0.2041	0.1463	0.0020	$ -	$ -	$ -	$ 979	$ 702	$ 10
C63A	Other Disorders of the Eye, Major Complexity	1	0	4.8	1	15	100%	0.2225	0.0000	0.0000	1.3093	0.2556	0.0128	$ 1,067	$ -	$ -	$ 6,278	$ 1,226	$ 61
C63B	Other Disorders of the Eye, Intermediate Complexity	1	0	2.5	1	8	175%	0.2296	0.0000	0.0000	0.6706	0.2575	0.0122	$ 1,101	$ -	$ -	$ 3,216	$ 1,235	$ 58
C63C	Other Disorders of the Eye, Minor Complexity	1	0	2.2	1	6	200%	0.1348	0.0000	0.0000	0.5352	0.2306	0.0109	$ 646	$ -	$ -	$ 2,566	$ 1,106	$ 52
D01Z	Cochlear Implant	0	0	1.2	1	3	128%	0.0000	0.0000	0.0000	6.0382	0.8308	0.0056	$ -	$ -	$ -	$ 28,953	$ 3,984	$ 27
D02A	Head and Neck Procedures, Major Complexity	0	0	11.6	3	35	100%	0.0000	1.2580	1.8377	6.6946	0.3782	0.0766	$ -	$ 6,032	$ 8,812	$ 32,101	$ 1,813	$ 367
D02B	Head and Neck Procedures, Intermediate Complexity	0	0	4.8	1	14	100%	0.0000	0.0000	0.0000	3.2490	0.4453	0.0235	$ -	$ -	$ -	$ 15,579	$ 2,135	$ 113
D02C	Head and Neck Procedures, Minor Complexity	0	0	2.3	1	7	90%	0.0000	0.0000	0.0000	1.8589	0.4690	0.0058	$ -	$ -	$ -	$ 8,913	$ 2,249	$ 28
D03Z	Surgical Repair for Cleft Lip and Palate Disorders	0	0	2.2	1	7	115%	0.0000	0.0000	0.0000	1.6172	0.4173	0.0016	$ -	$ -	$ -	$ 7,754	$ 2,001	$ 8
D04A	Maxillo Surgery, Major Complexity	0	0	2.6	1	8	100%	0.0000	0.0000	0.0000	2.1763	0.3293	0.0045	$ -	$ -	$ -	$ 10,435	$ 1,579	$ 22
D04B	Maxillo Surgery, Minor Complexity	0	0	1.6	1	5	113%	0.0000	0.0000	0.0000	1.4493	0.4017	0.0032	$ -	$ -	$ -	$ 6,949	$ 1,926	$ 15
D05Z	Parotid Gland Procedures	0	0	2.4	1	7	100%	0.0000	0.0000	0.0000	2.2386	0.3779	0.0040	$ -	$ -	$ -	$ 10,734	$ 1,812	$ 19
D06Z	Sinus and Complex Middle Ear Procedures	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	1.2258	0.4437	0.0432	$ -	$ -	$ -	$ 5,878	$ 2,128	$ 207
D10Z	Nasal Procedures	0	0	1.1	1	3	89%	0.0000	0.0000	0.0000	0.9772	0.3735	0.0124	$ -	$ -	$ -	$ 4,686	$ 1,791	$ 59
D11Z	Tonsillectomy and Adenoidectomy	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.7131	0.3520	0.0018	$ -	$ -	$ -	$ 3,419	$ 1,688	$ 9
D12A	Other Ear, Nose, Mouth and Throat Procedures, Major Complexity	1	0	5.4	1	16	125%	0.6281	0.0000	0.0000	2.0595	0.2831	0.0591	$ 3,012	$ -	$ -	$ 9,875	$ 1,357	$ 284
D12B	Other Ear, Nose, Mouth and Throat Procedures, Minor Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.7450	0.3338	0.0362	$ -	$ -	$ -	$ 3,572	$ 1,601	$ 174
D13Z	Myringotomy W Tube Insertion	0	0	1.1	1	3	89%	0.0000	0.0000	0.0000	0.4162	0.1424	0.0067	$ -	$ -	$ -	$ 1,996	$ 683	$ 32
D14A	Mouth and Salivary Gland Procedures, Major Complexity	0	0	1.9	1	6	105%	0.0000	0.0000	0.0000	1.0415	0.3327	0.0209	$ -	$ -	$ -	$ 4,994	$ 1,595	$ 100
D14B	Mouth and Salivary Gland Procedures, Minor Complexity	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.5493	0.1880	0.0099	$ -	$ -	$ -	$ 2,634	$ 901	$ 48
D15Z	Mastoid Procedures	0	0	1.9	1	6	100%	0.0000	0.0000	0.0000	1.9192	0.5293	0.0290	$ -	$ -	$ -	$ 9,203	$ 2,538	$ 139
D40Z	Dental Extractions and Restorations	0	0	1.1	1	3	109%	0.0000	0.0000	0.0000	0.5628	0.1619	0.0222	$ -	$ -	$ -	$ 2,699	$ 776	$ 106
D60A	Ear, Nose, Mouth and Throat Malignancy, Major Complexity	0	0	9.5	3	29	122%	0.0000	0.1679	1.0409	3.2607	0.2563	0.0298	$ -	$ 805	$ 4,991	$ 15,635	$ 1,229	$ 143
D60B	Ear, Nose, Mouth and Throat Malignancy, Minor Complexity	1	0	2.8	1	8	130%	0.3437	0.0000	0.0000	0.9452	0.2244	0.0264	$ 1,648	$ -	$ -	$ 4,532	$ 1,076	$ 126
D61A	Dysequilibrium, Major Complexity	1	0	3.8	1	11	100%	0.1030	0.0000	0.0000	0.8429	0.2082	0.0038	$ 494	$ -	$ -	$ 4,042	$ 998	$ 18
D61B	Dysequilibrium, Minor Complexity	0	0	1.5	1	4	159%	0.0000	0.0000	0.0000	0.2538	0.1865	0.0041	$ -	$ -	$ -	$ 1,217	$ 894	$ 20
D62A	Epistaxis, Major Complexity	0	0	3.8	1	12	100%	0.0000	0.0000	0.0000	0.9592	0.2450	0.0263	$ -	$ -	$ -	$ 4,599	$ 1,175	$ 126
D62B	Epistaxis, Minor Complexity	0	0	1.5	1	4	126%	0.0000	0.0000	0.0000	0.2875	0.1828	0.0064	$ -	$ -	$ -	$ 1,379	$ 877	$ 31
D63A	Otitis Media and Upper Respiratory Infections, Major Complexity	1	0	3.1	1	9	111%	0.1681	0.0000	0.0000	0.8133	0.2554	0.0226	$ 806	$ -	$ -	$ 3,900	$ 1,225	$ 108
D63B	Otitis Media and Upper Respiratory Infections, Minor Complexity	0	0	1.4	1	4	108%	0.0000	0.0000	0.0000	0.2917	0.2153	0.0062	$ -	$ -	$ -	$ 1,399	$ 1,032	$ 30
D64A	Laryngotracheitis and Epiglottitis, Major Complexity	0	0	1.8	1	5	100%	0.0000	0.0000	0.0000	0.5992	0.3074	0.0029	$ -	$ -	$ -	$ 2,873	$ 1,474	$ 14
D64B	Laryngotracheitis and Epiglottitis, Minor Complexity	0	0	1.1	1	3	80%	0.0000	0.0000	0.0000	0.2317	0.1803	0.0007	$ -	$ -	$ -	$ 1,111	$ 865	$ 3
D65A	Nasal Trauma and Deformity, Major Complexity	0	0	2.7	1	8	100%	0.0000	0.0000	0.0000	0.5488	0.2217	0.0013	$ -	$ -	$ -	$ 2,631	$ 1,063	$ 6
D65B	Nasal Trauma and Deformity, Minor Complexity	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.2887	0.1246	0.0006	$ -	$ -	$ -	$ 1,384	$ 597	$ 3
D66A	Other Ear, Nose, Mouth and Throat Disorders, Major Complexity	1	0	3.7	1	11	100%	0.3018	0.0000	0.0000	0.9770	0.2412	0.0180	$ 1,447	$ -	$ -	$ 4,685	$ 1,157	$ 86

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
D66B	Other Ear, Nose, Mouth and Throat Disorders, Minor Complexity	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	0.3006	0.2396	0.0068	$ -	$ -	$ -	$ 1,441	$ 1,149	$ 33
D67A	Oral and Dental Disorders, Major Complexity	1	0	4.1	1	12	129%	0.1997	0.0000	0.0000	0.9962	0.2528	0.0319	$ 958	$ -	$ -	$ 4,777	$ 1,212	$ 153
D67B	Oral and Dental Disorders, Minor Complexity	0	0	1.3	1	4	125%	0.0000	0.0000	0.0000	0.2766	0.1526	0.0237	$ -	$ -	$ -	$ 1,326	$ 732	$ 114
E01A	Major Chest Procedures, Major Complexity	0	0	19.1	6	57	86%	0.0000	1.1245	1.1856	8.1040	0.2683	0.1340	$ -	$ 5,392	$ 5,685	$ 38,859	$ 1,286	$ 642
E01B	Major Chest Procedures, Intermediate Complexity	0	0	10.8	3	32	100%	0.0000	0.7127	1.3639	4.7428	0.2563	0.0618	$ -	$ 3,417	$ 6,540	$ 22,742	$ 1,229	$ 296
E01C	Major Chest Procedures, Minor Complexity	0	0	6.3	2	19	116%	0.0000	0.3463	1.4654	3.2476	0.2812	0.0295	$ -	$ 1,661	$ 7,027	$ 15,572	$ 1,348	$ 141
E02A	Other Respiratory System OR Procedures, Major Complexity	0	0	12.8	4	39	132%	0.0000	0.5729	1.0124	4.5797	0.2498	0.0429	$ -	$ 2,747	$ 4,854	$ 21,960	$ 1,198	$ 206
E02B	Other Respiratory System OR Procedures, Intermediate Complexity	1	0	3.5	1	11	80%	0.5537	0.0000	0.0000	1.8695	0.2977	0.0130	$ 2,655	$ -	$ -	$ 8,964	$ 1,427	$ 62
E02C	Other Respiratory System OR Procedures, Minor Complexity	0	0	1.1	1	3	95%	0.0000	0.0000	0.0000	0.7909	0.3103	0.0038	$ -	$ -	$ -	$ 3,792	$ 1,488	$ 18
E40A	Respiratory System Disorders W Ventilator Support, Major Complexity	0	0	10.3	3	31	92%	0.0000	0.0392	1.8174	5.2677	0.2969	0.2235	$ -	$ 188	$ 8,714	$ 25,259	$ 1,424	$ 1,072
E40B	Respiratory System Disorders W Ventilator Support, Minor Complexity	0	0	5.1	1	15	80%	0.0000	0.0000	0.0000	2.6918	0.3490	0.1257	$ -	$ -	$ -	$ 12,907	$ 1,673	$ 603
E41A	Respiratory System Disorders W Non-Invasive Ventilation, Major Complexity	0	0	11.4	3	34	84%	0.0000	0.0000	1.5550	4.6114	0.3065	0.0538	$ -	$ -	$ 7,456	$ 22,112	$ 1,470	$ 258
E41B	Respiratory System Disorders W Non-Invasive Ventilation, Minor Complexity	0	0	6.9	2	21	80%	0.0000	0.0335	1.3244	2.6664	0.2819	0.0158	$ -	$ 161	$ 6,350	$ 12,785	$ 1,352	$ 76
E42A	Bronchoscopy, Major Complexity	0	0	8.8	5	13	133%	0.0000	0.2270	0.5951	3.0438	0.2675	0.1589	$ -	$ 1,088	$ 2,854	$ 14,595	$ 1,283	$ 762
E42B	Bronchoscopy, Minor Complexity	1	0	3.8	1	11	106%	0.3965	0.0000	0.0000	1.3762	0.2252	0.0751	$ 1,901	$ -	$ -	$ 6,599	$ 1,080	$ 360
E60A	Cystic Fibrosis, Major Complexity	0	0	11.9	3	36	126%	0.0000	0.0000	1.4765	3.8551	0.2856	0.5743	$ -	$ -	$ 7,080	$ 18,485	$ 1,369	$ 2,754
E60B	Cystic Fibrosis, Minor Complexity	0	0	8.3	2	25	121%	0.0000	0.0000	1.5422	2.5869	0.2256	0.4975	$ -	$ -	$ 7,395	$ 12,404	$ 1,082	$ 2,386
E61A	Pulmonary Embolism, Major Complexity	0	0	7.7	2	23	100%	0.0000	0.0000	0.9829	1.9334	0.2125	0.0323	$ -	$ -	$ 4,713	$ 9,271	$ 1,019	$ 155
E61B	Pulmonary Embolism, Minor Complexity	1	0	4.3	1	13	100%	0.1752	0.0000	0.0000	0.9223	0.1533	0.0151	$ 840	$ -	$ -	$ 4,422	$ 735	$ 72
E62A	Respiratory Infections and Inflammations, Major Complexity	0	0	7.0	2	21	91%	0.0000	0.0000	0.9176	1.8125	0.2319	0.0228	$ -	$ -	$ 4,400	$ 8,691	$ 1,112	$ 109
E62B	Respiratory Infections and Inflammations, Minor Complexity	1	0	3.3	1	10	81%	0.1021	0.0000	0.0000	0.8098	0.2193	0.0076	$ 490	$ -	$ -	$ 3,883	$ 1,052	$ 37
E63A	Sleep Apnoea, Major Complexity	0	0	3.0	1	9	118%	0.0000	0.0000	0.0000	0.6370	0.2248	0.0278	$ -	$ -	$ -	$ 3,054	$ 1,078	$ 133
E63B	Sleep Apnoea, Minor Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.2633	0.1720	0.0167	$ -	$ -	$ -	$ 1,263	$ 825	$ 80
E64A	Pulmonary Oedema and Respiratory Failure, Major Complexity	0	0	6.6	2	20	100%	0.0000	0.0000	0.9711	1.9166	0.2190	0.0256	$ -	$ -	$ 4,656	$ 9,190	$ 1,050	$ 123
E64B	Pulmonary Oedema and Respiratory Failure, Minor Complexity	0	0	3.0	1	9	100%	0.0000	0.0000	0.0000	0.8104	0.2537	0.0196	$ -	$ -	$ -	$ 3,886	$ 1,216	$ 94
E65A	Chronic Obstructive Airways Disease, Major Complexity	0	0	7.1	2	21	200%	0.0000	0.0000	0.8619	1.7089	0.2187	0.0148	$ -	$ -	$ 4,133	$ 8,194	$ 1,049	$ 71
E65B	Chronic Obstructive Airways Disease, Minor Complexity	0	0	3.4	1	10	186%	0.0000	0.0000	0.0000	0.7447	0.2159	0.0075	$ -	$ -	$ -	$ 3,571	$ 1,035	$ 36
E66A	Major Chest Trauma, Major Complexity	0	0	7.4	2	22	100%	0.0000	0.0000	0.9385	1.8674	0.2088	0.0096	$ -	$ -	$ 4,500	$ 8,954	$ 1,001	$ 46
E66B	Major Chest Trauma, Minor Complexity	0	0	2.3	1	7	100%	0.0000	0.0000	0.0000	0.5318	0.2397	0.0011	$ -	$ -	$ -	$ 2,550	$ 1,149	$ 5
E67A	Respiratory Signs and Symptoms, Major Complexity	1	0	3.8	1	11	86%	0.2097	0.0000	0.0000	0.9304	0.2320	0.0321	$ 1,006	$ -	$ -	$ 4,461	$ 1,112	$ 154
E67B	Respiratory Signs and Symptoms, Minor Complexity	0	0	1.3	1	4	80%	0.0000	0.0000	0.0000	0.2774	0.2194	0.0115	$ -	$ -	$ -	$ 1,330	$ 1,052	$ 55
E68A	Pneumothorax, Major Complexity	0	0	5.8	1	17	100%	0.0000	0.0000	0.0000	1.5703	0.2560	0.0050	$ -	$ -	$ -	$ 7,530	$ 1,228	$ 24
E68B	Pneumothorax, Minor Complexity	0	0	2.6	1	8	109%	0.0000	0.0000	0.0000	0.6859	0.2647	0.0018	$ -	$ -	$ -	$ 3,289	$ 1,269	$ 8
E69A	Bronchitis and Asthma, Major Complexity	0	0	3.5	1	10	87%	0.0000	0.0000	0.0000	0.8813	0.2368	0.0179	$ -	$ -	$ -	$ 4,226	$ 1,135	$ 86
E69B	Bronchitis and Asthma, Minor Complexity	0	0	1.5	1	5	80%	0.0000	0.0000	0.0000	0.3640	0.2614	0.0028	$ -	$ -	$ -	$ 1,745	$ 1,253	$ 13
E70A	Whooping Cough and Acute Bronchiolitis, Major Complexity	0	0	3.3	1	10	100%	0.0000	0.0000	0.0000	1.1117	0.3398	0.0015	$ -	$ -	$ -	$ 5,331	$ 1,629	$ 7
E70B	Whooping Cough and Acute Bronchiolitis, Minor Complexity	0	0	1.8	1	6	83%	0.0000	0.0000	0.0000	0.6283	0.3634	0.0008	$ -	$ -	$ -	$ 3,013	$ 1,743	$ 4
E71A	Respiratory Neoplasms, Major Complexity	0	0	9.7	3	29	100%	0.0000	0.0000	0.9110	2.6958	0.2290	0.0372	$ -	$ -	$ 4,368	$ 12,926	$ 1,098	$ 178
E71B	Respiratory Neoplasms, Minor Complexity	1	0	4.5	1	14	154%	0.2855	0.0000	0.0000	1.1252	0.2269	0.0251	$ 1,369	$ -	$ -	$ 5,395	$ 1,088	$ 120
E72Z	Respiratory Problems Arising from Neonatal Period	0	0	2.9	1	11	89%	0.0000	0.0000	0.0000	0.7314	0.3050	0.0009	$ -	$ -	$ -	$ 3,507	$ 1,462	$ 4
E73A	Pleural Effusion, Major Complexity	0	0	10.2	3	31	100%	0.0000	0.0000	0.9118	2.6905	0.2355	0.0451	$ -	$ -	$ 4,372	$ 12,901	$ 1,129	$ 216
E73B	Pleural Effusion, Intermediate Complexity	0	0	5.0	1	15	100%	0.0000	0.0000	0.0000	1.2113	0.2271	0.0577	$ -	$ -	$ -	$ 5,808	$ 1,089	$ 277
E73C	Pleural Effusion, Minor Complexity	1	0	3.2	1	10	100%	0.1840	0.0000	0.0000	0.8135	0.2233	0.0262	$ 882	$ -	$ -	$ 3,901	$ 1,071	$ 126
E74A	Interstitial Lung Disease, Major Complexity	0	0	7.0	2	21	100%	0.0000	0.0000	0.8957	1.7848	0.2105	0.0064	$ -	$ -	$ 4,295	$ 8,558	$ 1,009	$ 31
E74B	Interstitial Lung Disease, Minor Complexity	1	0	3.8	1	11	83%	0.2565	0.0000	0.0000	0.9536	0.2410	0.0058	$ 1,230	$ -	$ -	$ 4,573	$ 1,156	$ 28
E75A	Other Respiratory System Disorders, Major Complexity	0	0	4.7	1	14	113%	0.0000	0.0000	0.0000	1.1153	0.2341	0.0177	$ -	$ -	$ -	$ 5,348	$ 1,123	$ 85
E75B	Other Respiratory System Disorders, Minor Complexity	1	0	2.1	1	6	100%	0.1082	0.0000	0.0000	0.5490	0.2346	0.0088	$ 519	$ -	$ -	$ 2,632	$ 1,125	$ 42
E76A	Respiratory Tuberculosis, Major Complexity	0	0	19.9	6	60	100%	0.0000	0.0000	0.8084	4.8188	0.2095	0.0320	$ -	$ -	$ 3,876	$ 23,106	$ 1,005	$ 154
E76B	Respiratory Tuberculosis, Minor Complexity	0	0	6.5	2	20	100%	0.0000	0.0000	0.8191	1.6344	0.1665	0.0037	$ -	$ -	$ 3,928	$ 7,837	$ 798	$ 18
F01A	Implantation and Replacement of AICD, Total System, Major Complexity	0	0	12.1	4	36	100%	0.0000	5.3026	1.1101	9.6970	0.2843	0.0461	$ -	$ 25,426	$ 5,323	$ 46,497	$ 1,363	$ 221
F01B	Implantation and Replacement of AICD, Total System, Minor Complexity	1	0	2.9	1	9	100%	3.2664	0.0000	0.0000	5.0883	0.2640	0.1030	$ 15,662	$ -	$ -	$ 24,398	$ 1,266	$ 494
F02Z	Other AICD Procedures	0	0	3.6	1	12	100%	0.0000	0.0000	0.0000	2.6324	0.3124	0.0050	$ -	$ -	$ -	$ 12,622	$ 1,498	$ 24
F03A	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation, Major Cc	0	0	21.0	6	63	100%	0.0000	4.7552	1.4058	13.1403	0.2732	0.0491	$ -	$ 22,801	$ 6,741	$ 63,008	$ 1,310	$ 235
F03B	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation, Minor Cc	0	0	10.3	3	31	100%	0.0000	4.5219	1.4057	8.7061	0.2243	0.0330	$ -	$ 21,683	$ 6,740	$ 41,746	$ 1,076	$ 158
F04A	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Major Comp	0	0	19.8	6	59	109%	0.0000	4.4348	1.4781	13.2727	0.2836	0.0302	$ -	$ 21,265	$ 7,087	$ 63,643	$ 1,360	$ 145
F04B	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Interm Comp	0	0	9.3	3	28	100%	0.0000	4.5882	1.1907	8.1419	0.3156	0.0186	$ -	$ 22,000	$ 5,709	$ 39,040	$ 1,513	$ 89
F04C	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Minor Comp	0	0	7.0	2	21	110%	0.0000	4.8936	0.7450	6.3704	0.2906	0.0132	$ -	$ 23,465	$ 3,572	$ 30,546	$ 1,393	$ 63
F05A	Coronary Bypass W Invasive Cardiac Investigation, Major Complexity	0	0	18.0	6	54	100%	0.0000	3.0241	1.1941	10.1537	0.3216	0.0350	$ -	$ 14,501	$ 5,726	$ 48,687	$ 1,542	$ 168
F05B	Coronary Bypass W Invasive Cardiac Investigation, Minor Complexity	0	0	12.1	4	36	100%	0.0000	2.5957	1.2173	7.4457	0.3071	0.0196	$ -	$ 12,446	$ 5,837	$ 35,702	$ 1,473	$ 94
F06A	Coronary Bypass W/O Invasive Cardiac Investigation, Major Complexity	0	0	12.3	4	37	100%	0.0000	2.9319	1.2286	7.8185	0.3156	0.0278	$ -	$ 14,058	$ 5,891	$ 37,490	$ 1,513	$ 133
F06B	Coronary Bypass W/O Invasive Cardiac Investigation, Minor Complexity	0	0	7.0	2	21	100%	0.0000	2.3239	1.4691	5.2430	0.3150	0.0194	$ -	$ 11,143	$ 7,044	$ 25,140	$ 1,510	$ 93
F07A	Other Cardiothoracic/Vascular Procedures W CPB Pump, Major Complexity	0	0	13.3	4	40	100%	0.0000	3.4036	2.1515	11.9452	0.4145	0.0645	$ -	$ 16,320	$ 10,316	$ 57,277	$ 1,988	$ 309
F07B	Other Cardiothoracic/Vascular Procedures W CPB Pump, Intermediate Complexity	0	0	7.6	2	23	100%	0.0000	2.3419	2.5877	7.4805	0.4776	0.0371	$ -	$ 11,229	$ 12,408	$ 35,869	$ 2,290	$ 178
F07C	Other Cardiothoracic/Vascular Procedures W CPB Pump, Minor Complexity	0	0	6.6	2	20	109%	0.0000	1.9822	1.8865	5.7317	0.3220	0.0232	$ -	$ 9,505	$ 9,046	$ 27,484	$ 1,544	$ 111
F08A	Major Reconstructive Vascular Procedures W/O CPB Pump, Major Complexity	0	0	18.3	6	55	100%	0.0000	3.3504	1.0731	9.6676	0.2848	0.1213	$ -	$ 16,065	$ 5,146	$ 46,356	$ 1,366	$ 582
F08B	Major Reconstructive Vascular Procedures W/O CPB Pump, Intermediate Complexit	0	0	8.8	2	26	100%	0.0000	2.6829	1.5174	5.6601	0.2597	0.0576	$ -	$ 12,865	$ 7,276	$ 27,140	$ 1,245	$ 276
F08C	Major Reconstructive Vascular Procedures W/O CPB Pump, Minor Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	3.8307	0.3236	0.0197	$ -	$ -	$ -	$ 18,368	$ 1,552	$ 94
F09A	Other Cardiothoracic Procedures W/O CPB Pump, Major Complexity	0	0	11.1	3	33	100%	0.0000	1.4938	1.8376	6.9750	0.3292	0.0317	$ -	$ 7,163	$ 8,811	$ 33,445	$ 1,579	$ 152
F09B	Other Cardiothoracic Procedures W/O CPB Pump, Intermediate Complexity	0	0	7.5	2	23	100%	0.0000	0.9252	1.7804	4.4686	0.3272	0.0173	$ -	$ 4,436	$ 8,537	$ 21,427	$ 1,569	$ 83
F09C	Other Cardiothoracic Procedures W/O CPB Pump, Minor Complexity	0	0	2.7	1	8	100%	0.0000	0.0000	0.0000	2.1068	0.3373	0.0084	$ -	$ -	$ -	$ 10,102	$ 1,617	$ 40
F10A	Interventional Coronary Procedures, Admitted for AMI, Major Complexity	0	0	7.2	2	21	100%	0.0000	0.9528	1.2894	3.5147	0.2738	0.0170	$ -	$ 4,569	$ 6,183	$ 16,853	$ 1,313	$ 82
F10B	Interventional Coronary Procedures, Admitted for AMI, Minor Complexity	0	0	3.2	1	9	100%	0.0000	0.0000	0.0000	2.0892	0.3046	0.0114	$ -	$ -	$ -	$ 10,018	$ 1,461	$ 55
F11A	Amputation, Except Upper Limb and Toe, for Circulatory Disorders, Major Comp	0	0	35.8	11	107	100%	0.0000	0.8344	1.0866	12.7234	0.2882	0.0632	$ -	$ 4,001	$ 5,210	$ 61,009	$ 1,382	$ 303
F11B	Amputation, Except Upper Limb and Toe, for Circulatory Disorders, Minor Comp	0	0	18.0	5	54	100%	0.0000	0.7805	1.2015	6.7714	0.3215	0.0202	$ -	$ 3,742	$ 5,761	$ 32,469	$ 1,542	$ 97

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
F12A	Implantation and Replacement of Pacemaker, Total System, Major Complexity	0	0	7.6	2	23	100%	0.0000	1.4236	1.3186	4.0503	0.2752	0.0106	$ -	$ 6,826	$ 6,323	$ 19,421	$ 1,320	$ 51
F12B	Implantation and Replacement of Pacemaker, Total System, Minor Complexity	1	0	2.7	1	8	100%	1.3273	0.0000	0.0000	2.2839	0.2797	0.0091	$ 6,364	$ -	$ -	$ 10,951	$ 1,341	$ 44
F13A	Amputation, Upper Limb and Toe, for Circulatory Disorders, Major Complexity	0	0	17.9	5	54	100%	0.0000	0.4957	1.1734	6.2839	0.2905	0.0785	$ -	$ 2,377	$ 5,626	$ 30,131	$ 1,393	$ 376
F13B	Amputation, Upper Limb and Toe, for Circulatory Disorders, Minor Complexity	0	0	7.4	2	22	100%	0.0000	0.3637	1.2586	2.8556	0.2911	0.0252	$ -	$ 1,744	$ 6,035	$ 13,693	$ 1,396	$ 121
F14A	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Major Comple	0	0	12.9	4	39	119%	0.0000	1.0930	1.1579	5.5246	0.2764	0.1996	$ -	$ 5,241	$ 5,552	$ 26,490	$ 1,325	$ 957
F14B	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Interm Comp	0	0	4.5	1	14	116%	0.0000	0.0000	0.0000	2.3913	0.2927	0.0722	$ -	$ -	$ -	$ 11,466	$ 1,403	$ 346
F14C	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Minor Comple	1	0	2.0	1	6	127%	0.8537	0.0000	0.0000	1.5246	0.2962	0.0352	$ 4,093	$ -	$ -	$ 7,310	$ 1,420	$ 169
F15A	Interventional Coronary Procs, Not Adm for AMI, W Stent Implant, Major Comp	0	0	5.4	1	16	100%	0.0000	0.0000	0.0000	2.8057	0.2799	0.0201	$ -	$ -	$ -	$ 13,453	$ 1,342	$ 96
F15B	Interventional Coronary Procs, Not Adm for AMI, W Stent Implant, Minor Comp	0	0	1.7	1	5	100%	0.0000	0.0000	0.0000	1.6567	0.2758	0.0116	$ -	$ -	$ -	$ 7,944	$ 1,322	$ 56
F16A	Interventional Coronary Procs, Not Adm for AMI, W/O Stent Implant, Major Comp	0	0	6.8	2	20	100%	0.0000	0.6398	1.1837	3.0000	0.2451	0.0073	$ -	$ 3,068	$ 5,676	$ 14,385	$ 1,175	$ 35
F16B	Interventional Coronary Procs, Not Adm for AMI, W/O Stent Implant, Minor Comp	0	0	1.9	1	6	100%	0.0000	0.0000	0.0000	1.4399	0.2026	0.0077	$ -	$ -	$ -	$ 6,904	$ 971	$ 37
F17A	Insertion and Replacement of Pacemaker Generator, Major Complexity	0	0	4.9	1	15	100%	0.0000	0.0000	0.0000	2.6965	0.2763	0.0036	$ -	$ -	$ -	$ 12,930	$ 1,325	$ 17
F17B	Insertion and Replacement of Pacemaker Generator, Minor Complexity	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	1.3479	0.2225	0.0026	$ -	$ -	$ -	$ 6,463	$ 1,067	$ 12
F18A	Other Pacemaker Procedures, Major Complexity	0	0	8.2	2	25	100%	0.0000	0.4252	1.5322	3.4855	0.2912	0.0041	$ -	$ 2,039	$ 7,347	$ 16,713	$ 1,396	$ 20
F18B	Other Pacemaker Procedures, Minor Complexity	0	0	2.3	1	7	100%	0.0000	0.0000	0.0000	1.4600	0.3001	0.0026	$ -	$ -	$ -	$ 7,001	$ 1,439	$ 12
F19A	Trans-Vascular Percutaneous Cardiac Intervention, Major Complexity	0	0	6.4	2	19	87%	0.0000	1.3657	1.7505	4.8586	0.2836	0.0081	$ -	$ 6,549	$ 8,394	$ 23,297	$ 1,360	$ 39
F19B	Trans-Vascular Percutaneous Cardiac Intervention, Minor Complexity	0	0	1.6	1	5	135%	0.0000	0.0000	0.0000	2.1855	0.2011	0.0032	$ -	$ -	$ -	$ 10,479	$ 964	$ 15
F20Z	Vein Ligation and Stripping	0	0	1.2	1	4	86%	0.0000	0.0000	0.0000	1.0036	0.3345	0.0037	$ -	$ -	$ -	$ 4,812	$ 1,604	$ 18
F21A	Other Circulatory System OR Procedures, Major Complexity	0	0	19.5	6	59	100%	0.0000	0.4304	0.9406	6.0388	0.2572	0.0347	$ -	$ 2,064	$ 4,510	$ 28,956	$ 1,233	$ 167
F21B	Other Circulatory System OR Procedures, Intermediate Complexity	1	0	6.7	2	20	100%	0.6395	0.7669	0.9007	2.5343	0.1962	0.0340	$ 3,066	$ 3,677	$ 4,319	$ 12,152	$ 941	$ 163
F21C	Other Circulatory System OR Procedures, Minor Complexity	1	0	2.2	1	6	100%	0.8147	0.0000	0.0000	1.5231	0.1756	0.0144	$ 3,906	$ -	$ -	$ 7,303	$ 842	$ 69
F40A	Circulatory Disorders W Ventilator Support, Major Complexity	0	0	9.7	6	15	100%	0.0000	0.0891	0.8897	5.4206	0.3172	0.0071	$ -	$ 427	$ 4,266	$ 25,992	$ 1,521	$ 34
F40B	Circulatory Disorders W Ventilator Support, Minor Complexity	0	0	2.8	1	8	100%	0.0000	0.0000	0.0000	1.9441	0.3495	0.0030	$ -	$ -	$ -	$ 9,322	$ 1,676	$ 15
F41A	Circulatory Disorders, Adm for AMI W Invasive Cardiac Inves Proc, Major Comp	0	0	6.9	2	21	100%	0.0000	0.3049	1.2280	2.7465	0.2843	0.0142	$ -	$ 1,462	$ 5,888	$ 13,169	$ 1,363	$ 68
F41B	Circulatory Disorders, Adm for AMI W Invasive Cardiac Inves Proc, Minor Comp	1	0	3.7	1	11	100%	0.6420	0.0000	0.0000	1.6250	0.3010	0.0000	$ 3,078	$ -	$ -	$ 7,792	$ 1,443	$ -
F42A	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves Proc, Major Comp	1	0	5.9	1	18	139%	0.7368	0.0000	0.0000	2.2415	0.2479	0.0160	$ 3,533	$ -	$ -	$ 10,748	$ 1,189	$ 77
F42B	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves Proc, Minor Comp	1	0	2.5	1	8	197%	0.6089	0.0000	0.0000	1.2564	0.2087	0.0065	$ 2,920	$ -	$ -	$ 6,024	$ 1,001	$ 31
F43A	Circulatory Disorders W Non-Invasive Ventilation, Major Complexity	0	0	14.1	4	42	100%	0.0000	0.0320	1.3233	5.3066	0.2427	0.0182	$ -	$ 153	$ 6,345	$ 25,445	$ 1,164	$ 87
F43B	Circulatory Disorders W Non-Invasive Ventilation, Minor Complexity	0	0	8.2	2	25	100%	0.0000	0.0468	1.5496	3.1364	0.2708	0.0096	$ -	$ 224	$ 7,430	$ 15,039	$ 1,298	$ 46
F60A	Circulatory Dsrd, Adm for AMI W/O Invas Card Inves Proc	0	0	5.4	1	16	100%	0.0000	0.0000	0.0000	1.3770	0.2345	0.0082	$ -	$ -	$ -	$ 6,603	$ 1,124	$ 39
F60B	Circulatory Dsrd, Adm for AMI W/O Invas Card Inves Proc, Transf <5 Days	0	0	1.6	1	4	100%	0.0000	0.0000	0.0000	0.5401	0.0000	0.0333	$ -	$ -	$ -	$ 2,590	$ -	$ 160
F61A	Infective Endocarditis, Major Complexity	0	0	21.0	7	63	100%	0.0000	0.0000	0.9555	6.6686	0.2151	0.0195	$ -	$ -	$ 4,582	$ 31,976	$ 1,031	$ 94
F61B	Infective Endocarditis, Minor Complexity	0	0	11.0	3	33	100%	0.0000	0.0000	0.9757	2.9112	0.1464	0.0159	$ -	$ -	$ 4,678	$ 13,959	$ 702	$ 76
F62A	Heart Failure and Shock, Major Complexity	0	0	9.1	3	27	100%	0.0000	0.0000	0.7867	2.3377	0.2263	0.0224	$ -	$ -	$ 3,772	$ 11,209	$ 1,085	$ 107
F62B	Heart Failure and Shock, Minor Complexity	0	0	4.0	1	12	100%	0.0000	0.0000	0.0000	0.9567	0.2255	0.0053	$ -	$ -	$ -	$ 4,587	$ 1,081	$ 25
F62C	Heart Failure and Shock, Transferred <5 Days	0	0	1.5	1	4	100%	0.0000	0.0000	0.0000	0.3724	0.0000	0.0318	$ -	$ -	$ -	$ 1,786	$ -	$ 153
F63A	Venous Thrombosis, Major Complexity	0	0	6.3	2	19	100%	0.0000	0.0000	0.7373	1.4367	0.1799	0.0376	$ -	$ -	$ 3,535	$ 6,889	$ 863	$ 181
F63B	Venous Thrombosis, Minor Complexity	1	0	5.1	1	15	100%	0.1158	0.0000	0.0000	0.7460	0.1006	0.0157	$ 555	$ -	$ -	$ 3,577	$ 482	$ 75
F64A	Skin Ulcers in Circulatory Disorders, Major Complexity	0	0	12.7	4	38	100%	0.0000	0.0000	0.7692	3.0364	0.2286	0.0405	$ -	$ -	$ 3,688	$ 14,560	$ 1,096	$ 194
F64B	Skin Ulcers in Circulatory Disorders, Intermediate Complexity	1	0	6.7	2	20	100%	0.1579	0.0000	0.8063	1.6005	0.2013	0.0122	$ 757	$ -	$ 3,866	$ 7,674	$ 965	$ 58
F64C	Skin Ulcers in Circulatory Disorders, Minor Complexity	1	0	4.8	1	14	100%	0.2019	0.0000	0.0000	0.9985	0.1728	0.0021	$ 968	$ -	$ -	$ 4,788	$ 829	$ 10
F65A	Peripheral Vascular Disorders, Major Complexity	0	0	6.9	2	21	100%	0.0000	0.0000	0.9599	1.9076	0.2092	0.0122	$ -	$ -	$ 4,603	$ 9,147	$ 1,003	$ 58
F65B	Peripheral Vascular Disorders, Minor Complexity	1	0	3.1	1	9	123%	0.2921	0.0000	0.0000	0.8405	0.2089	0.0020	$ 1,401	$ -	$ -	$ 4,030	$ 1,002	$ 10
F66A	Coronary Atherosclerosis, Major Complexity	1	0	4.1	1	12	100%	0.1547	0.0000	0.0000	1.0311	0.2278	0.0081	$ 742	$ -	$ -	$ 4,944	$ 1,092	$ 39
F66B	Coronary Atherosclerosis, Minor Complexity	0	0	1.5	1	4	100%	0.0000	0.0000	0.0000	0.3217	0.2437	0.0016	$ -	$ -	$ -	$ 1,543	$ 1,169	$ 8
F67A	Hypertension, Major Complexity	0	0	4.5	1	13	100%	0.0000	0.0000	0.0000	1.1000	0.2472	0.0061	$ -	$ -	$ -	$ 5,275	$ 1,185	$ 29
F67B	Hypertension, Minor Complexity	1	0	2.0	1	6	80%	0.0916	0.0000	0.0000	0.4642	0.2313	0.0021	$ 439	$ -	$ -	$ 2,226	$ 1,109	$ 10
F68A	Congenital Heart Disease, Major Complexity	0	0	3.4	1	10	132%	0.0000	0.0000	0.0000	1.1150	0.3392	0.0068	$ -	$ -	$ -	$ 5,346	$ 1,626	$ 33
F68B	Congenital Heart Disease, Minor Complexity	0	0	1.1	1	3	134%	0.0000	0.0000	0.0000	0.3612	0.2411	0.0000	$ -	$ -	$ -	$ 1,732	$ 1,156	$ -
F69A	Valvular Disorders, Major Complexity	1	0	6.6	2	20	100%	0.2485	0.0000	0.9303	1.8350	0.2358	0.0256	$ 1,192	$ -	$ 4,461	$ 8,799	$ 1,131	$ 123
F69B	Valvular Disorders, Minor Complexity	0	0	1.4	1	4	162%	0.0000	0.0000	0.0000	0.2557	0.1961	0.0142	$ -	$ -	$ -	$ 1,226	$ 940	$ 68
F72A	Unstable Angina, Major Complexity	1	0	3.9	1	12	100%	0.1448	0.0000	0.0000	1.0189	0.2314	0.0049	$ 694	$ -	$ -	$ 4,886	$ 1,110	$ 24
F72B	Unstable Angina, Minor Complexity	1	0	2.0	1	6	100%	0.1068	0.0000	0.0000	0.5318	0.2308	0.0026	$ 512	$ -	$ -	$ 2,550	$ 1,107	$ 13
F73A	Syncope and Collapse, Major Complexity	0	0	5.2	1	15	100%	0.0000	0.0000	0.0000	1.1463	0.2231	0.0071	$ -	$ -	$ -	$ 5,497	$ 1,070	$ 34
F73B	Syncope and Collapse, Minor Complexity	1	0	1.9	1	6	137%	0.1152	0.0000	0.0000	0.4561	0.2228	0.0037	$ 552	$ -	$ -	$ 2,187	$ 1,068	$ 18
F74A	Chest Pain, Major Complexity	0	0	2.0	1	6	123%	0.0000	0.0000	0.0000	0.4585	0.2319	0.0034	$ -	$ -	$ -	$ 2,199	$ 1,112	$ 16
F74B	Chest Pain, Minor Complexity	0	0	1.1	1	3	170%	0.0000	0.0000	0.0000	0.1777	0.1316	0.0015	$ -	$ -	$ -	$ 852	$ 631	$ 7
F75A	Other Circulatory Disorders, Major Complexity	0	0	9.8	3	29	164%	0.0000	0.0000	1.0589	3.1202	0.2527	0.0564	$ -	$ -	$ 5,077	$ 14,961	$ 1,212	$ 270
F75B	Other Circulatory Disorders, Intermediate Complexity	0	0	4.7	1	14	145%	0.0000	0.0000	0.0000	1.3078	0.2589	0.0216	$ -	$ -	$ -	$ 6,271	$ 1,241	$ 104
F75C	Other Circulatory Disorders, Minor Complexity	1	0	2.8	1	8	185%	0.2264	0.0000	0.0000	0.7536	0.2370	0.0097	$ 1,086	$ -	$ -	$ 3,614	$ 1,136	$ 46
F76A	Arrhythmia, Cardiac Arrest and Conduction Disorders, Major Complexity	0	0	4.6	1	14	100%	0.0000	0.0000	0.0000	1.1611	0.2270	0.0080	$ -	$ -	$ -	$ 5,567	$ 1,088	$ 38
F76B	Arrhythmia, Cardiac Arrest and Conduction Disorders, Minor Complexity	1	0	2.1	1	6	184%	0.1694	0.0000	0.0000	0.5253	0.2068	0.0042	$ 812	$ -	$ -	$ 2,519	$ 992	$ 20
G01A	Rectal Resection, Major Complexity	0	0	27.3	9	82	100%	0.0000	2.2565	1.0280	11.4672	0.2610	0.0408	$ -	$ 10,820	$ 4,929	$ 54,985	$ 1,251	$ 196
G01B	Rectal Resection, Intermediate Complexity	0	0	14.0	4	42	100%	0.0000	1.8575	1.2021	6.6343	0.2709	0.0318	$ -	$ 8,907	$ 5,764	$ 31,811	$ 1,299	$ 153
G01C	Rectal Resection, Minor Complexity	0	0	8.5	2	25	100%	0.0000	1.3326	1.6329	4.5517	0.2725	0.0468	$ -	$ 6,390	$ 7,830	$ 21,825	$ 1,307	$ 224
G02A	Major Small and Large Bowel Procedures, Major Complexity	0	0	25.8	8	77	100%	0.0000	1.6594	1.0990	10.4004	0.3028	0.0504	$ -	$ 7,957	$ 5,270	$ 49,870	$ 1,452	$ 242
G02B	Major Small and Large Bowel Procedures, Intermediate Complexity	0	0	11.2	3	34	114%	0.0000	1.1631	1.2914	4.9988	0.2777	0.0386	$ -	$ 5,577	$ 6,192	$ 23,969	$ 1,332	$ 185
G02C	Major Small and Large Bowel Procedures, Minor Complexity	0	0	6.0	2	18	94%	0.0000	0.6836	1.2220	3.0818	0.2877	0.0458	$ -	$ 3,278	$ 5,859	$ 14,777	$ 1,380	$ 220
G03A	Stomach, Oesophageal and Duodenal Procedures, Major Complexity	0	0	18.4	6	55	100%	0.0000	2.0394	1.2133	9.2083	0.3273	0.1112	$ -	$ 9,779	$ 5,818	$ 44,154	$ 1,569	$ 533
G03B	Stomach, Oesophageal and Duodenal Procedures, Intermediate Complexity	0	0	8.8	2	27	108%	0.0000	1.0864	1.6957	4.4154	0.3106	0.0624	$ -	$ 5,209	$ 8,131	$ 21,172	$ 1,489	$ 299
G03C	Stomach, Oesophageal and Duodenal Procedures, Minor Complexity	0	0	3.8	1	11	113%	0.0000	0.0000	0.0000	2.2562	0.3237	0.0280	$ -	$ -	$ -	$ 10,818	$ 1,552	$ 134
G04A	Peritoneal Adhesiolysis, Major Complexity	0	0	15.1	5	45	100%	0.0000	1.0975	0.9661	5.8467	0.2995	0.0817	$ -	$ 5,263	$ 4,632	$ 28,035	$ 1,436	$ 392
G04B	Peritoneal Adhesiolysis, Intermediate Complexity	0	0	6.9	2	21	120%	0.0000	0.7959	1.1155	2.9591	0.2776	0.0681	$ -	$ 3,816	$ 5,349	$ 14,189	$ 1,331	$ 326
G04C	Peritoneal Adhesiolysis, Minor Complexity	0	0	2.9	1	9	118%	0.0000	0.0000	0.0000	1.6432	0.3265	0.0190	$ -	$ -	$ -	$ 7,879	$ 1,566	$ 91

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
G05A	Minor Small and Large Bowel Procedures, Major Complexity	0	0	10.5	3	32	100%	0.0000	0.7676	1.0567	3.9003	0.3002	0.0375	$ -	$ 3,681	$ 5,067	$ 18,702	$ 1,439	$ 180
G05B	Minor Small and Large Bowel Procedures, Minor Complexity	0	0	3.7	1	11	80%	0.0000	0.0000	0.0000	1.8236	0.3482	0.0231	$ -	$ -	$ -	$ 8,744	$ 1,670	$ 111
G06Z	Pyloromyotomy	0	0	3.8	1	11	100%	0.0000	0.0000	0.0000	1.7684	0.3443	0.0018	$ -	$ -	$ -	$ 8,479	$ 1,651	$ 9
G07A	Appendicectomy, Major Complexity	0	0	4.5	1	13	139%	0.0000	0.0000	0.0000	1.8274	0.3149	0.1157	$ -	$ -	$ -	$ 8,762	$ 1,510	$ 555
G07B	Appendicectomy, Minor Complexity	0	0	2.2	1	7	118%	0.0000	0.0000	0.0000	1.1862	0.2751	0.0314	$ -	$ -	$ -	$ 5,688	$ 1,319	$ 151
G10A	Hernia Procedures, Major Complexity	0	0	4.1	1	12	80%	0.0000	0.0000	0.0000	1.8992	0.2616	0.0484	$ -	$ -	$ -	$ 9,107	$ 1,254	$ 232
G10B	Hernia Procedures, Minor Complexity	0	0	1.3	1	4	80%	0.0000	0.0000	0.0000	0.9902	0.2998	0.0267	$ -	$ -	$ -	$ 4,748	$ 1,438	$ 128
G11A	Anal and Stomal Procedures, Major Complexity	1	0	4.2	1	13	173%	0.5055	0.0000	0.0000	1.3790	0.2328	0.0436	$ 2,424	$ -	$ -	$ 6,612	$ 1,116	$ 209
G11B	Anal and Stomal Procedures, Minor Complexity	0	0	1.5	1	4	100%	0.0000	0.0000	0.0000	0.6640	0.2371	0.0185	$ -	$ -	$ -	$ 3,184	$ 1,137	$ 89
G12A	Other Digestive System OR Procedures, Major Complexity	0	0	16.6	5	50	100%	0.0000	0.4913	1.0425	5.6768	0.2453	0.0270	$ -	$ 2,356	$ 4,999	$ 27,220	$ 1,176	$ 129
G12B	Other Digestive System OR Procedures, Intermediate Complexity	0	0	7.2	2	22	128%	0.0000	0.4667	1.0498	2.5129	0.2286	0.0535	$ -	$ 2,238	$ 5,034	$ 12,049	$ 1,096	$ 257
G12C	Other Digestive System OR Procedures, Minor Complexity	1	0	3.3	1	10	119%	0.6675	0.0000	0.0000	1.4840	0.2642	0.0308	$ 3,201	$ -	$ -	$ 7,116	$ 1,267	$ 148
G46A	Complex Endoscopy, Major Complexity	1	0	7.1	2	21	160%	0.3846	0.2887	0.9775	2.2096	0.2644	0.0342	$ 1,844	$ 1,384	$ 4,687	$ 10,595	$ 1,268	$ 164
G46B	Complex Endoscopy, Minor Complexity	0	0	1.1	1	3	169%	0.0000	0.0000	0.0000	0.3721	0.2888	0.0312	$ -	$ -	$ -	$ 1,784	$ 1,385	$ 150
G47A	Gastroscopy, Major Complexity	0	0	6.2	2	19	175%	0.0000	0.2167	0.8253	1.8526	0.2378	0.0148	$ -	$ 1,039	$ 3,957	$ 8,883	$ 1,140	$ 71
G47B	Gastroscopy, Intermediate Complexity	1	0	2.5	1	7	116%	0.3204	0.0000	0.0000	0.7966	0.2061	0.0086	$ 1,536	$ -	$ -	$ 3,820	$ 988	$ 41
G47C	Gastroscopy, Minor Complexity	0	0	1.1	1	3	127%	0.0000	0.0000	0.0000	0.2931	0.2412	0.0183	$ -	$ -	$ -	$ 1,405	$ 1,157	$ 88
G48A	Colonoscopy, Major Complexity	1	0	6.1	2	18	192%	0.3241	0.2294	0.8373	1.8487	0.2259	0.0553	$ 1,554	$ 1,100	$ 4,015	$ 8,865	$ 1,083	$ 265
G48B	Colonoscopy, Minor Complexity	0	0	1.1	1	3	193%	0.0000	0.0000	0.0000	0.3284	0.2625	0.0278	$ -	$ -	$ -	$ 1,575	$ 1,259	$ 133
G60A	Digestive Malignancy, Major Complexity	0	0	8.6	2	26	100%	0.0000	0.0000	1.1261	2.2064	0.2210	0.0458	$ -	$ -	$ 5,400	$ 10,580	$ 1,060	$ 220
G60B	Digestive Malignancy, Minor Complexity	1	0	3.7	1	11	100%	0.2612	0.0000	0.0000	0.7608	0.1942	0.0475	$ 1,252	$ -	$ -	$ 3,648	$ 931	$ 228
G61A	Gastrointestinal Haemorrhage, Major Complexity	0	0	4.4	1	13	100%	0.0000	0.0000	0.0000	0.9812	0.2286	0.0073	$ -	$ -	$ -	$ 4,705	$ 1,096	$ 35
G61B	Gastrointestinal Haemorrhage, Minor Complexity	1	0	2.1	1	6	134%	0.1097	0.0000	0.0000	0.4762	0.2025	0.0026	$ 526	$ -	$ -	$ 2,283	$ 971	$ 12
G64A	Inflammatory Bowel Disease, Major Complexity	1	0	5.6	1	17	194%	0.3356	0.0000	0.0000	1.2626	0.2444	0.1169	$ 1,609	$ -	$ -	$ 6,054	$ 1,172	$ 560
G64B	Inflammatory Bowel Disease, Minor Complexity	1	0	2.9	1	9	94%	0.5231	0.0000	0.0000	0.7487	0.2549	0.0894	$ 2,508	$ -	$ -	$ 3,590	$ 1,222	$ 429
G65A	Gastrointestinal Obstruction, Major Complexity	0	0	6.3	2	19	91%	0.0000	0.0000	0.8079	1.6014	0.2332	0.0144	$ -	$ -	$ 3,874	$ 7,679	$ 1,118	$ 69
G65B	Gastrointestinal Obstruction, Minor Complexity	0	0	2.7	1	8	86%	0.0000	0.0000	0.0000	0.6299	0.2251	0.0053	$ -	$ -	$ -	$ 3,020	$ 1,079	$ 25
G66A	Abdominal Pain and Mesenteric Adenitis, Major Complexity	1	0	2.8	1	8	110%	0.1111	0.0000	0.0000	0.6272	0.2184	0.0176	$ 533	$ -	$ -	$ 3,007	$ 1,047	$ 84
G66B	Abdominal Pain and Mesenteric Adenitis, Minor Complexity	0	0	1.3	1	4	127%	0.0000	0.0000	0.0000	0.2284	0.1716	0.0057	$ -	$ -	$ -	$ 1,095	$ 823	$ 27
G67A	Oesophagitis and Gastroenteritis, Major Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	0.9838	0.2414	0.0138	$ -	$ -	$ -	$ 4,717	$ 1,158	$ 66
G67B	Oesophagitis and Gastroenteritis, Minor Complexity	0	0	1.4	1	4	105%	0.0000	0.0000	0.0000	0.2590	0.1987	0.0066	$ -	$ -	$ -	$ 1,242	$ 953	$ 32
G70A	Other Digestive System Disorders, Major Complexity	1	0	4.5	1	13	163%	0.1694	0.0000	0.0000	0.9758	0.2346	0.0228	$ 812	$ -	$ -	$ 4,679	$ 1,125	$ 109
G70B	Other Digestive System Disorders, Minor Complexity	0	0	1.4	1	4	143%	0.0000	0.0000	0.0000	0.2578	0.1968	0.0087	$ -	$ -	$ -	$ 1,236	$ 944	$ 42
H01A	Pancreas, Liver and Shunt Procedures, Major Complexity	0	0	24.1	8	72	100%	0.0000	2.8978	1.0737	11.1948	0.2812	0.2923	$ -	$ 13,895	$ 5,148	$ 53,679	$ 1,348	$ 1,402
H01B	Pancreas, Liver and Shunt Procedures, Intermediate Complexity	0	0	9.2	3	27	100%	0.0000	0.7852	1.5246	5.2108	0.3088	0.1484	$ -	$ 3,765	$ 7,310	$ 24,986	$ 1,481	$ 712
H01C	Pancreas, Liver and Shunt Procedures, Minor Complexity	0	0	3.3	1	10	100%	0.0000	0.0000	0.0000	2.0710	0.4783	0.0590	$ -	$ -	$ -	$ 9,930	$ 2,293	$ 283
H02A	Major Biliary Tract Procedures, Major Complexity	0	0	14.6	4	44	100%	0.0000	0.9904	1.2088	5.8403	0.2813	0.0000	$ -	$ 4,749	$ 5,796	$ 28,004	$ 1,349	$ -
H02B	Major Biliary Tract Procedures, Minor Complexity	0	0	5.4	1	16	100%	0.0000	0.0000	0.0000	2.3398	0.2899	0.0443	$ -	$ -	$ -	$ 11,219	$ 1,390	$ 212
H05A	Hepatobiliary Diagnostic Procedures, Major Complexity	0	0	8.9	2	27	100%	0.0000	0.5794	1.6785	3.9161	0.2717	0.0202	$ -	$ 2,778	$ 8,048	$ 18,778	$ 1,303	$ 97
H05B	Hepatobiliary Diagnostic Procedures, Minor Complexity	0	0	2.1	1	6	100%	0.0000	0.0000	0.0000	0.8427	0.3114	0.0019	$ -	$ -	$ -	$ 4,041	$ 1,493	$ 9
H06A	Other Hepatobiliary and Pancreas OR Procedures, Major Complexity	0	0	20.2	6	61	100%	0.0000	0.4098	1.0345	6.5162	0.2370	0.1007	$ -	$ 1,965	$ 4,960	$ 31,245	$ 1,136	$ 483
H06B	Other Hepatobiliary and Pancreas OR Procedures, Intermediate Complexity	0	0	6.8	2	20	100%	0.0000	0.2097	1.2546	2.5885	0.2229	0.1304	$ -	$ 1,006	$ 6,016	$ 12,412	$ 1,069	$ 625
H06C	Other Hepatobiliary and Pancreas OR Procedures, Minor Complexity	0	0	1.5	1	5	100%	0.0000	0.0000	0.0000	1.0919	0.2644	0.1064	$ -	$ -	$ -	$ 5,236	$ 1,268	$ 510
H07A	Open Cholecystectomy, Major Complexity	0	0	14.2	4	42	100%	0.0000	1.0830	1.1612	5.7165	0.2519	0.0116	$ -	$ 5,193	$ 5,568	$ 27,411	$ 1,208	$ 56
H07B	Open Cholecystectomy, Intermediate Complexity	0	0	8.3	2	25	100%	0.0000	1.0074	1.3273	3.6529	0.2453	0.0092	$ -	$ 4,830	$ 6,364	$ 17,516	$ 1,176	$ 44
H07C	Open Cholecystectomy, Minor Complexity	0	0	4.9	1	15	100%	0.0000	0.0000	0.0000	2.5443	0.2693	0.0036	$ -	$ -	$ -	$ 12,200	$ 1,291	$ 17
H08A	Laparoscopic Cholecystectomy, Major Complexity	0	0	5.9	1	18	100%	0.0000	0.0000	0.0000	2.6093	0.2777	0.0271	$ -	$ -	$ -	$ 12,512	$ 1,332	$ 130
H08B	Laparoscopic Cholecystectomy, Minor Complexity	0	0	1.9	1	6	116%	0.0000	0.0000	0.0000	1.4330	0.2630	0.0230	$ -	$ -	$ -	$ 6,871	$ 1,261	$ 110
H40A	Endoscopic Procedures for Bleeding Oesophageal Varices, Major Complexity	0	0	9.9	3	30	100%	0.0000	0.4294	1.1482	3.8594	0.3087	0.0147	$ -	$ 2,059	$ 5,506	$ 18,506	$ 1,480	$ 70
H40B	Endoscopic Procedures for Bleeding Oesophageal Varices, Intermediate Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	1.6831	0.2894	0.0118	$ -	$ -	$ -	$ 8,070	$ 1,388	$ 57
H40C	Endoscopic Procedures for Bleeding Oesophageal Varices, Minor Complexity	0	0	2.5	1	8	100%	0.0000	0.0000	0.0000	1.0278	0.3388	0.0079	$ -	$ -	$ -	$ 4,928	$ 1,625	$ 38
H43A	ERCP Procedures, Major Complexity	0	0	10.6	3	32	100%	0.0000	0.2990	1.0500	3.4151	0.2708	0.0340	$ -	$ 1,434	$ 5,035	$ 16,375	$ 1,298	$ 163
H43B	ERCP Procedures, Intermediate Complexity	1	0	6.1	2	18	100%	0.4894	0.2918	0.8454	1.9589	0.2332	0.0237	$ 2,347	$ 1,399	$ 4,054	$ 9,393	$ 1,118	$ 114
H43C	ERCP Procedures, Minor Complexity	1	0	3.6	1	11	100%	0.4452	0.0000	0.0000	1.1991	0.2289	0.0168	$ 2,135	$ -	$ -	$ 5,750	$ 1,098	$ 81
H60A	Cirrhosis and Alcoholic Hepatitis, Major Complexity	0	0	10.4	3	31	100%	0.0000	0.0000	0.9673	2.8883	0.2474	0.0133	$ -	$ -	$ 4,638	$ 13,849	$ 1,186	$ 64
H60B	Cirrhosis and Alcoholic Hepatitis, Intermediate Complexity	1	0	4.4	1	13	100%	0.2265	0.0000	0.0000	1.0756	0.2221	0.0135	$ 1,086	$ -	$ -	$ 5,158	$ 1,065	$ 65
H60C	Cirrhosis and Alcoholic Hepatitis, Minor Complexity	1	0	3.2	1	9	100%	0.2405	0.0000	0.0000	0.8660	0.1963	0.0252	$ 1,153	$ -	$ -	$ 4,152	$ 941	$ 121
H61A	Malignancy of Hepatobiliary System and Pancreas, Major Complexity	0	0	9.1	3	27	100%	0.0000	0.0000	0.8724	2.5366	0.2371	0.0806	$ -	$ -	$ 4,183	$ 12,163	$ 1,137	$ 386
H61B	Malignancy of Hepatobiliary System and Pancreas, Minor Complexity	1	0	4.1	1	12	124%	0.3000	0.0000	0.0000	1.0190	0.2159	0.0392	$ 1,439	$ -	$ -	$ 4,886	$ 1,035	$ 188
H62A	Disorders of Pancreas, Except Malignancy, Major Complexity	0	0	6.8	2	20	100%	0.0000	0.0000	0.9541	1.8847	0.2556	0.0235	$ -	$ -	$ 4,575	$ 9,037	$ 1,226	$ 113
H62B	Disorders of Pancreas, Except Malignancy, Minor Complexity	1	0	3.1	1	9	154%	0.1852	0.0000	0.0000	0.7628	0.2309	0.0049	$ 888	$ -	$ -	$ 3,658	$ 1,107	$ 23
H63A	Other Disorders of Liver, Major Complexity	0	0	7.2	2	21	131%	0.0000	0.0000	1.0231	1.9969	0.2455	0.0495	$ -	$ -	$ 4,906	$ 9,575	$ 1,177	$ 237
H63B	Other Disorders of Liver, Intermediate Complexity	1	0	3.7	1	11	119%	0.2781	0.0000	0.0000	0.9221	0.2075	0.0316	$ 1,333	$ -	$ -	$ 4,421	$ 995	$ 151
H63C	Other Disorders of Liver, Minor Complexity	1	0	2.4	1	7	128%	0.2553	0.0000	0.0000	0.7182	0.1923	0.0205	$ 1,224	$ -	$ -	$ 3,444	$ 922	$ 98
H64A	Disorders of the Biliary Tract, Major Complexity	1	0	4.9	1	15	190%	0.1533	0.0000	0.0000	1.2342	0.2414	0.0080	$ 735	$ -	$ -	$ 5,918	$ 1,158	$ 38
H64B	Disorders of the Biliary Tract, Minor Complexity	1	0	2.4	1	7	200%	0.1127	0.0000	0.0000	0.5722	0.2156	0.0019	$ 540	$ -	$ -	$ 2,744	$ 1,034	$ 9
I01A	Bilateral and Multiple Major Joint Procedures of Lower Limb, Major Complexity	0	0	19.0	12	29	100%	0.0000	3.5979	0.5741	10.4487	0.2756	0.0391	$ -	$ 17,252	$ 2,753	$ 50,102	$ 1,322	$ 187
I01B	Bilateral and Multiple Major Joint Procedures of Lower Limb, Minor Complexity	0	0	6.4	2	19	100%	0.0000	3.3874	1.3228	6.0245	0.3310	0.0083	$ -	$ 16,243	$ 6,343	$ 28,887	$ 1,587	$ 40
I02A	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Major Complexity	0	0	39.7	13	119	100%	0.0000	3.2920	0.9556	15.6799	0.2819	0.0360	$ -	$ 15,785	$ 4,582	$ 75,185	$ 1,352	$ 173
I02B	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Intermediate Comp	0	0	17.9	5	54	100%	0.0000	0.9036	1.4452	8.1076	0.3018	0.0222	$ -	$ 4,333	$ 6,930	$ 38,876	$ 1,447	$ 106
I02C	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Minor Complexity	0	0	5.7	1	17	80%	0.0000	0.0000	0.0000	2.7607	0.3827	0.0082	$ -	$ -	$ -	$ 13,238	$ 1,835	$ 39
I03A	Hip Replacement, Major Complexity	0	0	12.5	4	38	100%	0.0000	2.2710	0.8906	5.7991	0.2428	0.0343	$ -	$ 10,889	$ 4,270	$ 27,807	$ 1,164	$ 165
I03B	Hip Replacement, Minor Complexity	0	0	6.4	2	19	100%	0.0000	2.2754	0.9202	4.0965	0.2043	0.0194	$ -	$ 10,911	$ 4,412	$ 19,643	$ 980	$ 93
I04A	Knee Replacement, Major Complexity	0	0	9.2	3	27	100%	0.0000	2.5114	0.8528	5.0497	0.2470	0.0198	$ -	$ 12,042	$ 4,089	$ 24,213	$ 1,184	$ 95

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
I04B	Knee Replacement, Minor Complexity	0	0	5.2	1	16	100%	0.0000	0.0000	0.0000	3.9479	0.2518	0.0090	$ -	$ -	$ -	$ 18,930	$ 1,207	$ 43
I05A	Other Joint Replacement, Major Complexity	0	0	9.6	3	29	100%	0.0000	2.5756	1.0969	5.8558	0.2479	0.0104	$ -	$ 12,350	$ 5,260	$ 28,079	$ 1,189	$ 50
I05B	Other Joint Replacement, Minor Complexity	0	0	3.5	1	10	100%	0.0000	0.0000	0.0000	3.7483	0.2863	0.0079	$ -	$ -	$ -	$ 17,973	$ 1,373	$ 38
I06Z	Spinal Fusion for Deformity	0	0	8.4	2	26	100%	0.0000	0.7667	4.8380	10.4270	0.5705	0.0158	$ -	$ 3,676	$ 23,198	$ 49,997	$ 2,736	$ 76
I07Z	Amputation	0	0	25.7	8	73	100%	0.0000	0.8630	0.9806	8.6892	0.2747	0.0192	$ -	$ 4,138	$ 4,702	$ 41,665	$ 1,317	$ 92
I08A	Other Hip and Femur Procedures, Major Complexity	0	0	15.6	5	47	88%	0.0000	1.2113	0.9061	5.7265	0.2489	0.0156	$ -	$ 5,808	$ 4,345	$ 27,459	$ 1,193	$ 75
I08B	Other Hip and Femur Procedures, Minor Complexity	0	0	7.5	2	23	87%	0.0000	0.8818	1.1367	3.1461	0.2353	0.0090	$ -	$ 4,228	$ 5,450	$ 15,086	$ 1,128	$ 43
I09A	Spinal Fusion, Major Complexity	0	0	22.1	7	66	100%	0.0000	4.4773	1.1843	12.7423	0.3272	0.0249	$ -	$ 21,469	$ 5,679	$ 61,099	$ 1,569	$ 119
I09B	Spinal Fusion, Intermediate Complexity	0	0	8.6	2	26	100%	0.0000	3.2254	1.8864	6.9674	0.2936	0.0307	$ -	$ 15,466	$ 9,045	$ 33,409	$ 1,408	$ 147
I09C	Spinal Fusion, Minor Complexity	0	0	4.5	1	14	100%	0.0000	0.0000	0.0000	4.9754	0.3726	0.0310	$ -	$ -	$ -	$ 23,857	$ 1,787	$ 149
I10A	Other Back and Neck Procedures, Major Complexity	0	0	8.5	2	26	100%	0.0000	1.0552	1.4476	3.9126	0.2808	0.0377	$ -	$ 5,060	$ 6,941	$ 18,761	$ 1,346	$ 181
I10B	Other Back and Neck Procedures, Minor Complexity	0	0	3.0	1	9	100%	0.0000	0.0000	0.0000	2.0464	0.2680	0.0411	$ -	$ -	$ -	$ 9,812	$ 1,285	$ 197
I11Z	Limb Lengthening Procedures	0	0	4.6	1	14	152%	0.0000	0.0000	0.0000	3.8806	0.3825	0.0000	$ -	$ -	$ -	$ 18,607	$ 1,834	$ -
I12A	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Major Complexity	0	0	24.6	16	37	112%	0.0000	0.6965	0.4415	7.7101	0.2059	0.0513	$ -	$ 3,340	$ 2,117	$ 36,970	$ 987	$ 246
I12B	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Intermediate Comp	0	0	11.8	3	36	80%	0.0000	0.5256	1.0494	3.6520	0.1791	0.0217	$ -	$ 2,520	$ 5,032	$ 17,511	$ 859	$ 104
I12C	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Minor Complexity	0	0	4.2	1	13	132%	0.0000	0.0000	0.0000	1.4329	0.2040	0.0095	$ -	$ -	$ -	$ 6,871	$ 978	$ 45
I13A	Humerus, Tibia, Fibula and Ankle Procedures, Major Complexity	0	0	9.6	3	29	83%	0.0000	1.0135	1.0410	4.0981	0.2508	0.0385	$ -	$ 4,860	$ 4,992	$ 19,650	$ 1,203	$ 185
I13B	Humerus, Tibia, Fibula and Ankle Procedures, Minor Complexity	0	0	2.9	1	9	80%	0.0000	0.0000	0.0000	1.8032	0.2979	0.0104	$ -	$ -	$ -	$ 8,646	$ 1,428	$ 50
I15A	Cranio-Facial Surgery, Major Complexity	0	0	6.3	2	19	111%	0.0000	1.2293	1.6202	4.4608	0.2484	0.0090	$ -	$ 5,894	$ 7,769	$ 21,390	$ 1,191	$ 43
I15B	Cranio-Facial Surgery, Minor Complexity	0	0	3.7	1	11	100%	0.0000	0.0000	0.0000	2.6251	0.2811	0.0089	$ -	$ -	$ -	$ 12,587	$ 1,348	$ 43
I16Z	Other Shoulder Procedures	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	1.4782	0.4479	0.0050	$ -	$ -	$ -	$ 7,088	$ 2,148	$ 24
I17A	Maxillo-Facial Surgery, Major Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	3.0076	0.3774	0.0115	$ -	$ -	$ -	$ 14,421	$ 1,810	$ 55
I17B	Maxillo-Facial Surgery, Minor Complexity	0	0	1.6	1	5	100%	0.0000	0.0000	0.0000	1.5486	0.4457	0.0026	$ -	$ -	$ -	$ 7,426	$ 2,137	$ 13
I18A	Other Knee Procedures, Major Complexity	1	0	3.7	1	11	100%	0.6634	0.0000	0.0000	1.5849	0.2324	0.0275	$ 3,181	$ -	$ -	$ 7,600	$ 1,114	$ 132
I18B	Other Knee Procedures, Minor Complexity	0	0	1.0	1	3	156%	0.0000	0.0000	0.0000	0.6817	0.2416	0.0116	$ -	$ -	$ -	$ 3,269	$ 1,158	$ 56
I19A	Other Elbow and Forearm Procedures, Major Complexity	0	0	6.1	2	18	100%	0.0000	1.0486	0.9459	2.9075	0.2412	0.0330	$ -	$ 5,028	$ 4,536	$ 13,941	$ 1,157	$ 158
I19B	Other Elbow and Forearm Procedures, Minor Complexity	0	0	1.7	1	5	88%	0.0000	0.0000	0.0000	1.4881	0.2698	0.0418	$ -	$ -	$ -	$ 7,135	$ 1,294	$ 200
I20A	Other Foot Procedures, Major Complexity	0	0	6.6	2	20	100%	0.0000	0.9439	1.0122	2.8967	0.2208	0.0715	$ -	$ 4,526	$ 4,853	$ 13,890	$ 1,059	$ 343
I20B	Other Foot Procedures, Minor Complexity	0	0	1.6	1	5	89%	0.0000	0.0000	0.0000	1.1966	0.2807	0.0304	$ -	$ -	$ -	$ 5,738	$ 1,346	$ 146
I21Z	Local Excision and Removal of Internal Fixation Devices of Hip and Femur	0	0	2.1	1	7	88%	0.0000	0.0000	0.0000	1.0803	0.3356	0.0608	$ -	$ -	$ -	$ 5,180	$ 1,609	$ 292
I23A	Local Excision & Removal of Internal Fixation Device, Except Hip & Fmr, Maj Comp	1	0	2.9	1	9	105%	0.6258	0.0000	0.0000	1.5312	0.2470	0.0398	$ 3,001	$ -	$ -	$ 7,342	$ 1,184	$ 191
I23B	Local Excision & Removal of Internal Fixation Device, Except Hip & Fmr, Min Comp	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.5373	0.1570	0.0115	$ -	$ -	$ -	$ 2,576	$ 753	$ 55
I24A	Arthroscopy, Major Complexity	0	0	3.5	1	10	100%	0.0000	0.0000	0.0000	1.3534	0.2403	0.0404	$ -	$ -	$ -	$ 6,490	$ 1,152	$ 194
I24B	Arthroscopy, Minor Complexity	0	0	1.1	1	3	153%	0.0000	0.0000	0.0000	0.6447	0.2179	0.0208	$ -	$ -	$ -	$ 3,091	$ 1,045	$ 100
I25A	Bone and Joint Diagnostic Procedures Including Biopsy, Major Complexity	0	0	12.6	4	38	112%	0.0000	0.3126	1.1588	4.9110	0.2522	0.0370	$ -	$ 1,499	$ 5,556	$ 23,548	$ 1,209	$ 178
I25B	Bone and Joint Diagnostic Procedures Including Biopsy, Minor Complexity	1	0	4.2	1	13	107%	0.5476	0.0000	0.0000	1.5832	0.2299	0.0308	$ 2,626	$ -	$ -	$ 7,591	$ 1,102	$ 148
I27A	Soft Tissue Procedures, Major Complexity	0	0	11.2	3	34	87%	0.0000	0.5815	1.2544	4.3103	0.2460	0.0342	$ -	$ 2,788	$ 6,015	$ 20,668	$ 1,180	$ 164
I27B	Soft Tissue Procedures, Minor Complexity	1	0	2.2	1	7	112%	0.5835	0.0000	0.0000	1.2223	0.2675	0.0057	$ 2,798	$ -	$ -	$ 5,861	$ 1,283	$ 27
I28A	Other Musculoskeletal Procedures, Major Complexity	0	0	12.3	4	37	100%	0.0000	0.8825	0.8945	4.1804	0.2254	0.2803	$ -	$ 4,232	$ 4,289	$ 20,045	$ 1,081	$ 1,344
I28B	Other Musculoskeletal Procedures, Intermediate Complexity	1	0	2.6	1	8	138%	0.8118	0.0000	0.0000	1.6081	0.1976	0.0529	$ 3,893	$ -	$ -	$ 7,711	$ 947	$ 253
I28C	Other Musculoskeletal Procedures, Minor Complexity	1	0	1.9	1	6	100%	0.5545	0.0000	0.0000	1.0254	0.2469	0.0338	$ 2,659	$ -	$ -	$ 4,917	$ 1,184	$ 162
I29Z	Knee Reconstructions, and Revisions of Reconstructions	0	0	1.4	1	4	106%	0.0000	0.0000	0.0000	1.5920	0.4589	0.0167	$ -	$ -	$ -	$ 7,634	$ 2,200	$ 80
I30Z	Hand Procedures	0	0	1.3	1	4	93%	0.0000	0.0000	0.0000	0.8432	0.2549	0.0079	$ -	$ -	$ -	$ 4,043	$ 1,222	$ 38
I31A	Revision of Hip Replacement, Major Complexity	0	0	25.5	8	76	100%	0.0000	3.3934	0.8943	10.4390	0.2115	0.1092	$ -	$ 16,271	$ 4,288	$ 50,055	$ 1,014	$ 524
I31B	Revision of Hip Replacement, Intermediate Complexity	0	0	12.1	4	36	100%	0.0000	2.8100	0.9338	6.4971	0.2240	0.0482	$ -	$ 13,474	$ 4,478	$ 31,154	$ 1,074	$ 231
I31C	Revision of Hip Replacement, Minor Complexity	0	0	7.0	2	21	100%	0.0000	2.9660	0.8885	4.7300	0.1986	0.0130	$ -	$ 14,222	$ 4,260	$ 22,680	$ 952	$ 63
I32A	Revision of Knee Replacement, Major Complexity	0	0	18.8	6	56	100%	0.0000	3.2609	0.8707	8.4692	0.2196	0.0157	$ -	$ 15,636	$ 4,175	$ 40,610	$ 1,053	$ 75
I32B	Revision of Knee Replacement, Minor Complexity	0	0	7.0	2	21	100%	0.0000	2.6984	1.1010	4.8918	0.1930	0.0087	$ -	$ 12,939	$ 5,279	$ 23,456	$ 925	$ 42
I40Z	Infusions for Musculoskeletal Disorders, Sameday	0	0	1.0	1	1	88%	0.0000	0.0000	0.0000	0.2846	0.0000	0.1129	$ -	$ -	$ -	$ 1,365	$ -	$ 541
I60Z	Femoral Shaft Fractures	0	0	11.2	3	34	100%	0.0000	0.1943	1.0892	3.4579	0.2371	0.0041	$ -	$ 932	$ 5,223	$ 16,581	$ 1,137	$ 19
I61A	Distal Femoral Fractures, Major Complexity	0	0	21.8	7	65	100%	0.0000	0.0000	0.7588	5.3035	0.1905	0.0072	$ -	$ -	$ 3,638	$ 25,430	$ 913	$ 35
I61B	Distal Femoral Fractures, Minor Complexity	0	0	7.4	2	22	114%	0.0000	0.0000	0.8696	1.7391	0.1804	0.0023	$ -	$ -	$ 4,170	$ 8,339	$ 865	$ 11
I63A	Sprains, Strains and Dislocations of Hip, Pelvis and Thigh, Major Complexity	0	0	6.6	2	20	100%	0.0000	0.0000	0.8025	1.6050	0.1951	0.0025	$ -	$ -	$ 3,848	$ 7,696	$ 936	$ 12
I63B	Sprains, Strains and Dislocations of Hip, Pelvis and Thigh, Minor Complexity	0	0	2.0	1	6	100%	0.0000	0.0000	0.0000	0.4948	0.2298	0.0011	$ -	$ -	$ -	$ 2,373	$ 1,102	$ 5
I64A	Osteomyelitis, Major Complexity	0	0	18.3	6	55	100%	0.0000	0.0000	0.7338	4.3749	0.1674	0.0277	$ -	$ -	$ 3,519	$ 20,978	$ 803	$ 133
I64B	Osteomyelitis, Minor Complexity	0	0	10.6	3	32	100%	0.0000	0.0000	0.7634	2.2803	0.1129	0.0099	$ -	$ -	$ 3,661	$ 10,934	$ 541	$ 47
I65A	Musculoskeletal Malignant Neoplasms, Major Complexity	0	0	12.1	4	36	118%	0.0000	0.0000	0.8799	3.4206	0.2368	0.0741	$ -	$ -	$ 4,219	$ 16,402	$ 1,135	$ 355
I65B	Musculoskeletal Malignant Neoplasms, Minor Complexity	0	0	5.1	1	15	123%	0.0000	0.0000	0.0000	1.5143	0.2207	0.0372	$ -	$ -	$ -	$ 7,261	$ 1,058	$ 178
I66A	Inflammatory Musculoskeletal Disorders, Major Complexity	0	0	13.4	4	40	100%	0.0000	0.0000	1.0576	4.1153	0.2426	0.1154	$ -	$ -	$ 5,071	$ 19,733	$ 1,163	$ 553
I66B	Inflammatory Musculoskeletal Disorders, Intermediate Complexity	0	0	6.4	2	19	83%	0.0000	0.0000	1.0373	2.0145	0.2470	0.0601	$ -	$ -	$ 4,974	$ 9,660	$ 1,184	$ 288
I66C	Inflammatory Musculoskeletal Disorders, Minor Complexity	0	0	4.0	1	12	110%	0.0000	0.0000	0.0000	1.0847	0.2352	0.0350	$ -	$ -	$ -	$ 5,201	$ 1,128	$ 168
I67A	Septic Arthritis, Major Complexity	0	0	14.7	4	44	100%	0.0000	0.0000	0.9515	3.7979	0.1716	0.0079	$ -	$ -	$ 4,562	$ 18,211	$ 823	$ 38
I67B	Septic Arthritis, Minor Complexity	0	0	7.4	2	22	100%	0.0000	0.0000	0.7152	1.4255	0.1096	0.0048	$ -	$ -	$ 3,429	$ 6,835	$ 526	$ 23
I68A	Non-surgical Spinal Disorders, Major Complexity	0	0	8.7	2	26	113%	0.0000	0.0000	1.0540	2.0961	0.2120	0.0119	$ -	$ -	$ 5,054	$ 10,051	$ 1,017	$ 57
I68B	Non-surgical Spinal Disorders, Minor Complexity	0	0	2.8	1	8	125%	0.0000	0.0000	0.0000	0.6326	0.2303	0.0045	$ -	$ -	$ -	$ 3,033	$ 1,104	$ 22
I69A	Bone Diseases and Arthropathies, Major Complexity	0	0	7.9	2	24	82%	0.0000	0.0000	0.9050	1.7866	0.2059	0.0235	$ -	$ -	$ 4,339	$ 8,567	$ 987	$ 113
I69B	Bone Diseases and Arthropathies, Minor Complexity	0	0	3.5	1	10	146%	0.0000	0.0000	0.0000	0.7388	0.2127	0.0135	$ -	$ -	$ -	$ 3,543	$ 1,020	$ 65
I71A	Other Musculotendinous Disorders, Major Complexity	0	0	6.2	2	18	100%	0.0000	0.0000	0.8094	1.6189	0.2128	0.0065	$ -	$ -	$ 3,881	$ 7,763	$ 1,020	$ 31
I71B	Other Musculotendinous Disorders, Minor Complexity	0	0	2.3	1	7	129%	0.0000	0.0000	0.0000	0.5203	0.2240	0.0032	$ -	$ -	$ -	$ 2,495	$ 1,074	$ 15
I72A	Specific Musculotendinous Disorders, Major Complexity	0	0	9.0	2	27	106%	0.0000	0.0000	1.0742	2.1309	0.2165	0.0175	$ -	$ -	$ 5,151	$ 10,218	$ 1,038	$ 84
I72B	Specific Musculotendinous Disorders, Minor Complexity	0	0	2.9	1	9	89%	0.0000	0.0000	0.0000	0.6545	0.1965	0.0066	$ -	$ -	$ -	$ 3,138	$ 942	$ 32
I73A	Aftercare of Musculoskeletal Implants or Prostheses, Major Complexity	0	0	15.3	5	46	100%	0.0000	0.0000	0.6458	3.2190	0.1501	0.0083	$ -	$ -	$ 3,097	$ 15,435	$ 720	$ 40
I73B	Aftercare of Musculoskeletal Implants or Prostheses, Minor Complexity	0	0	6.3	2	19	100%	0.0000	0.0000	0.6367	1.2735	0.1149	0.0050	$ -	$ -	$ 3,053	$ 6,106	$ 551	$ 24
I74A	Injuries to Forearm, Wrist, Hand and Foot, Major Complexity	0	0	7.1	2	21	110%	0.0000	0.0000	0.8118	1.6133	0.1843	0.0102	$ -	$ -	$ 3,893	$ 7,736	$ 884	$ 49

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
I74B	Injuries to Forearm, Wrist, Hand and Foot, Minor Complexity	0	0	1.4	1	4	118%	0.0000	0.0000	0.0000	0.4949	0.1940	0.0014	$ -	$ -	$ -	$ 2,373	$ 930	$ 7
I75A	Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle, Major Complexity	0	0	11.7	3	35	100%	0.0000	0.0000	0.8598	2.5697	0.1885	0.0094	$ -	$ -	$ 4,123	$ 12,322	$ 904	$ 45
I75B	Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle, Minor Complexity	0	0	2.7	1	8	117%	0.0000	0.0000	0.0000	0.5961	0.2104	0.0033	$ -	$ -	$ -	$ 2,858	$ 1,009	$ 16
I76A	Other Musculoskeletal Disorders, Major Complexity	0	0	13.7	4	41	126%	0.0000	0.0000	0.8353	3.3318	0.1823	0.0098	$ -	$ -	$ 4,005	$ 15,976	$ 874	$ 47
I76B	Other Musculoskeletal Disorders, Intermediate Complexity	0	0	5.7	1	17	95%	0.0000	0.0000	0.0000	1.2972	0.1970	0.0044	$ -	$ -	$ -	$ 6,220	$ 945	$ 21
I76C	Other Musculoskeletal Disorders, Minor Complexity	0	0	2.2	1	7	134%	0.0000	0.0000	0.0000	0.5200	0.2208	0.0017	$ -	$ -	$ -	$ 2,493	$ 1,059	$ 8
I77A	Fractures of Pelvis, Major Complexity	0	0	13.0	4	39	100%	0.0000	0.0000	0.7834	3.1226	0.2043	0.0107	$ -	$ -	$ 3,756	$ 14,973	$ 980	$ 51
I77B	Fractures of Pelvis, Minor Complexity	0	0	5.2	1	16	100%	0.0000	0.0000	0.0000	1.1107	0.2150	0.0043	$ -	$ -	$ -	$ 5,326	$ 1,031	$ 20
I78A	Fractures of Neck of Femur, Major Complexity	0	0	16.8	5	50	100%	0.0000	0.0000	0.7121	3.5481	0.1771	0.0101	$ -	$ -	$ 3,415	$ 17,013	$ 849	$ 49
I78B	Fractures of Neck of Femur, Minor Complexity	0	0	7.1	2	21	100%	0.0000	0.0000	0.7821	1.5642	0.2043	0.0035	$ -	$ -	$ 3,750	$ 7,500	$ 980	$ 17
I79A	Pathological Fractures, Major Complexity	0	0	14.3	4	43	100%	0.0000	0.0000	0.9392	3.7310	0.2424	0.0258	$ -	$ -	$ 4,503	$ 17,890	$ 1,162	$ 124
I79B	Pathological Fractures, Minor Complexity	0	0	6.5	2	19	100%	0.0000	0.0000	0.8440	1.6676	0.2098	0.0203	$ -	$ -	$ 4,047	$ 7,996	$ 1,006	$ 98
I80Z	Femoral Fractures, Transferred to Acute Facility <2 Days	0	0	1.0	1	1	100%	0.0000	0.0000	0.0000	0.1980	0.0000	0.0156	$ -	$ -	$ -	$ 949	$ -	$ 75
I81Z	Musculoskeletal Injuries, Sameday	0	0	1.0	1	1	178%	0.0000	0.0000	0.0000	0.1351	0.0000	0.0028	$ -	$ -	$ -	$ 648	$ -	$ 13
I82Z	Other Sameday Treatment for Musculoskeletal Disorders	0	0	1.0	1	1	200%	0.0000	0.0000	0.0000	0.1423	0.0000	0.0052	$ -	$ -	$ -	$ 682	$ -	$ 25
J01A	Microvas Tiss Transf for Skin, Subcut Tiss & Breast Dsrds, Major Complexity	0	0	20.9	6	63	100%	0.0000	3.9807	1.3002	11.7418	0.2847	0.0399	$ -	$ 19,087	$ 6,234	$ 56,302	$ 1,365	$ 191
J01B	Microvas Tiss Transf for Skin, Subcut Tiss & Breast Dsrds, Minor Complexity	0	0	8.4	2	25	100%	0.0000	2.3297	2.2171	6.6690	0.3535	0.0950	$ -	$ 11,171	$ 10,631	$ 31,978	$ 1,695	$ 455
J06A	Major Procedures for Breast Disorders, Major Complexity	0	0	5.7	1	17	100%	0.0000	0.0000	0.0000	2.2816	0.2137	0.3384	$ -	$ -	$ -	$ 10,940	$ 1,025	$ 1,623
J06B	Major Procedures for Breast Disorders, Minor Complexity	0	0	2.5	1	8	100%	0.0000	0.0000	0.0000	1.5043	0.2003	0.1727	$ -	$ -	$ -	$ 7,213	$ 960	$ 828
J07A	Minor Procedures for Breast Disorders, Major Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.7964	0.3304	0.0324	$ -	$ -	$ -	$ 3,819	$ 1,584	$ 155
J07B	Minor Procedures for Breast Disorders, Minor Complexity	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.6179	0.2366	0.0327	$ -	$ -	$ -	$ 2,963	$ 1,134	$ 157
J08A	Other Skin Grafts and Debridement Procedures, Major Complexity	0	0	11.0	3	33	94%	0.0000	0.4026	1.0284	3.4585	0.2417	0.0294	$ -	$ 1,930	$ 4,931	$ 16,584	$ 1,159	$ 141
J08B	Other Skin Grafts and Debridement Procedures, Intermediate Complexity	1	0	4.0	1	12	108%	0.6268	0.0000	0.0000	1.4925	0.2137	0.0175	$ 3,006	$ -	$ -	$ 7,157	$ 1,025	$ 84
J08C	Other Skin Grafts and Debridement Procedures, Minor Complexity	1	0	2.5	1	7	123%	0.5976	0.0000	0.0000	1.3160	0.2283	0.0226	$ 2,865	$ -	$ -	$ 6,310	$ 1,095	$ 109
J09Z	Perianal and Pilonidal Procedures	0	0	2.2	1	7	113%	0.0000	0.0000	0.0000	0.7827	0.1213	0.0396	$ -	$ -	$ -	$ 3,753	$ 582	$ 190
J10A	Plastic OR Procs for Skin, Subcutaneous Tissue and Breast Disorders, Major Comp	1	0	3.6	1	11	100%	0.6322	0.0000	0.0000	1.7894	0.2733	0.0392	$ 3,031	$ -	$ -	$ 8,580	$ 1,310	$ 188
J10B	Plastic OR Procs for Skin, Subcutaneous Tissue and Breast Disorders, Minor Comp	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.6383	0.2087	0.0143	$ -	$ -	$ -	$ 3,061	$ 1,001	$ 68
J11A	Other Skin, Subcutaneous Tissue and Breast Procedures, Major Complexity	1	0	4.4	1	13	93%	0.4707	0.0000	0.0000	1.3245	0.2173	0.0402	$ 2,257	$ -	$ -	$ 6,351	$ 1,042	$ 193
J11B	Other Skin, Subcutaneous Tissue and Breast Procedures, Minor Complexity	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.4151	0.1466	0.0145	$ -	$ -	$ -	$ 1,990	$ 703	$ 70
J12A	Lower Limb Procedures W Ulcer or Cellulitis, Major Complexity	0	0	20.7	6	62	100%	0.0000	0.3481	0.9760	6.1559	0.2453	0.0480	$ -	$ 1,669	$ 4,680	$ 29,518	$ 1,176	$ 230
J12B	Lower Limb Procedures W Ulcer or Cellulitis, Minor Complexity	0	0	7.9	2	24	100%	0.0000	0.2751	1.0259	2.2855	0.2031	0.0413	$ -	$ 1,319	$ 4,919	$ 10,959	$ 974	$ 198
J13A	Lower Limb Procedures W/O Ulcer or Cellulitis, Major Complexity	0	0	8.1	2	24	100%	0.0000	0.5320	1.1543	2.7491	0.2450	0.0915	$ -	$ 2,551	$ 5,535	$ 13,182	$ 1,175	$ 439
J13B	Lower Limb Procedures W/O Ulcer or Cellulitis, Minor Complexity	1	0	4.1	1	12	100%	0.5414	0.0000	0.0000	1.5510	0.2205	0.0228	$ 2,596	$ -	$ -	$ 7,437	$ 1,057	$ 109
J14Z	Major Breast Reconstructions	0	0	7.4	2	23	100%	0.0000	1.0760	1.8939	4.7058	0.3164	0.1582	$ -	$ 5,159	$ 9,081	$ 22,564	$ 1,517	$ 759
J60A	Skin Ulcers, Major Complexity	0	0	12.7	8	19	100%	0.0000	0.0000	0.3727	2.9658	0.1868	0.0160	$ -	$ -	$ 1,787	$ 14,221	$ 896	$ 77
J60B	Skin Ulcers, Intermediate Complexity	1	0	6.2	2	18	100%	0.1537	0.0000	0.6303	1.2523	0.1574	0.0085	$ 737	$ -	$ 3,022	$ 6,005	$ 755	$ 41
J60C	Skin Ulcers, Minor Complexity	1	0	4.9	1	15	100%	0.1654	0.0000	0.0000	0.7412	0.1300	0.0073	$ 793	$ -	$ -	$ 3,554	$ 623	$ 35
J62A	Malignant Breast Disorders, Major Complexity	0	0	10.6	3	32	100%	0.0000	0.0000	0.9281	2.6902	0.1987	0.0944	$ -	$ -	$ 4,450	$ 12,900	$ 953	$ 453
J62B	Malignant Breast Disorders, Minor Complexity	1	0	5.4	1	16	100%	0.2505	0.0000	0.0000	1.0859	0.1860	0.0525	$ 1,201	$ -	$ -	$ 5,207	$ 892	$ 252
J63A	Non-Malignant Breast Disorders, Major Complexity	1	0	3.1	1	9	95%	0.2153	0.0000	0.0000	0.7572	0.1804	0.0064	$ 1,032	$ -	$ -	$ 3,631	$ 865	$ 30
J63B	Non-Malignant Breast Disorders, Minor Complexity	1	0	2.1	1	6	100%	0.3282	0.0000	0.0000	0.6000	0.1309	0.0087	$ 1,574	$ -	$ -	$ 2,877	$ 628	$ 42
J64A	Cellulitis, Major Complexity	0	0	6.2	2	18	100%	0.0000	0.0000	0.7658	1.5074	0.2054	0.0244	$ -	$ -	$ 3,672	$ 7,228	$ 985	$ 117
J64B	Cellulitis, Minor Complexity	1	0	3.0	1	9	118%	0.1513	0.0000	0.0000	0.6905	0.1568	0.0055	$ 725	$ -	$ -	$ 3,311	$ 752	$ 26
J65A	Trauma to Skin, Subcutaneous Tissue and Breast, Major Complexity	1	0	5.9	1	18	80%	0.1135	0.0000	0.0000	1.2561	0.2149	0.0068	$ 544	$ -	$ -	$ 6,023	$ 1,030	$ 33
J65B	Trauma to Skin, Subcutaneous Tissue and Breast, Minor Complexity	0	0	1.3	1	4	120%	0.0000	0.0000	0.0000	0.2303	0.1684	0.0007	$ -	$ -	$ -	$ 1,104	$ 807	$ 3
J67A	Minor Skin Disorders, Major Complexity	1	0	4.2	1	13	108%	0.2137	0.0000	0.0000	1.0295	0.2236	0.0123	$ 1,025	$ -	$ -	$ 4,936	$ 1,072	$ 59
J67B	Minor Skin Disorders, Minor Complexity	0	0	1.2	1	4	95%	0.0000	0.0000	0.0000	0.2847	0.2225	0.0047	$ -	$ -	$ -	$ 1,365	$ 1,067	$ 23
J68A	Major Skin Disorders, Major Complexity	1	0	5.0	1	15	100%	0.2391	0.0000	0.0000	1.2857	0.2497	0.0139	$ 1,146	$ -	$ -	$ 6,165	$ 1,197	$ 66
J68B	Major Skin Disorders, Minor Complexity	1	0	3.3	1	10	110%	0.2305	0.0000	0.0000	0.8226	0.2352	0.0223	$ 1,105	$ -	$ -	$ 3,944	$ 1,128	$ 107
J69A	Skin Malignancy, Major Complexity	0	0	10.2	3	31	100%	0.0000	0.0000	1.0151	2.9967	0.2432	0.0485	$ -	$ -	$ 4,867	$ 14,369	$ 1,166	$ 232
J69B	Skin Malignancy, Intermediate Complexity	1	0	5.7	1	17	100%	0.2120	0.0000	0.0000	1.2445	0.1993	0.0220	$ 1,017	$ -	$ -	$ 5,967	$ 956	$ 106
J69C	Skin Malignancy, Minor Complexity	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	0.2376	0.1696	0.0039	$ -	$ -	$ -	$ 1,139	$ 813	$ 19
K01A	OR Procedures for Diabetic Complications, Major Complexity	0	0	35.7	11	107	100%	0.0000	0.8357	0.9872	11.6676	0.2574	0.0295	$ -	$ 4,007	$ 4,734	$ 55,946	$ 1,234	$ 141
K01B	OR Procedures for Diabetic Complications, Intermediate Complexity	0	0	20.2	6	61	100%	0.0000	0.3260	0.9928	6.2642	0.2312	0.0181	$ -	$ 1,563	$ 4,760	$ 30,037	$ 1,109	$ 87
K01C	OR Procedures for Diabetic Complications, Minor Complexity	0	0	10.4	3	31	100%	0.0000	0.3090	0.9711	3.2079	0.2298	0.0142	$ -	$ 1,482	$ 4,656	$ 15,382	$ 1,102	$ 68
K02A	Pituitary Procedures, Major Complexity	0	0	13.7	4	41	100%	0.0000	1.9180	1.3588	7.1873	0.3483	0.1661	$ -	$ 9,197	$ 6,515	$ 34,463	$ 1,670	$ 797
K02B	Pituitary Procedures, Minor Complexity	0	0	5.8	1	17	100%	0.0000	0.0000	0.0000	3.4664	0.3491	0.1498	$ -	$ -	$ -	$ 16,621	$ 1,674	$ 718
K03Z	Adrenal Procedures	0	0	4.8	2	20	100%	0.0000	1.0697	1.1760	3.3758	0.3911	0.0459	$ -	$ 5,129	$ 5,639	$ 16,187	$ 1,875	$ 220
K05A	Parathyroid Procedures, Major Complexity	0	0	4.6	1	14	100%	0.0000	0.0000	0.0000	2.4154	0.2889	0.1444	$ -	$ -	$ -	$ 11,582	$ 1,385	$ 692
K05B	Parathyroid Procedures, Minor Complexity	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	1.3029	0.3215	0.0298	$ -	$ -	$ -	$ 6,247	$ 1,542	$ 143
K06A	Thyroid Procedures, Major Complexity	0	0	3.9	1	12	100%	0.0000	0.0000	0.0000	2.6598	0.3506	0.1095	$ -	$ -	$ -	$ 12,754	$ 1,681	$ 525
K06B	Thyroid Procedures, Minor Complexity	0	0	1.6	1	5	100%	0.0000	0.0000	0.0000	1.6736	0.4262	0.0106	$ -	$ -	$ -	$ 8,025	$ 2,044	$ 51
K08Z	Thyroglossal Procedures	0	0	1.3	1	4	83%	0.0000	0.0000	0.0000	1.2418	0.4008	0.0013	$ -	$ -	$ -	$ 5,954	$ 1,922	$ 6
K09A	Other Endocrine, Nutritional and Metabolic OR Procedures, Major Complexity	0	0	17.0	5	51	100%	0.0000	0.8112	1.0770	6.1702	0.2631	0.0259	$ -	$ 3,890	$ 5,164	$ 29,586	$ 1,262	$ 124
K09B	Other Endocrine, Nutritional and Metabolic OR Procedures, Minor Complexity	0	0	4.7	1	14	100%	0.0000	0.0000	0.0000	1.9702	0.2758	0.0057	$ -	$ -	$ -	$ 9,447	$ 1,322	$ 27
K10A	Revisional and Open Bariatric Procedures, Major Complexity	0	0	10.2	3	31	100%	0.0000	1.5555	0.9212	4.3148	0.2672	0.0043	$ -	$ 7,459	$ 4,417	$ 20,689	$ 1,281	$ 20
K10B	Revisional and Open Bariatric Procedures, Minor Complexity	0	0	2.4	1	7	100%	0.0000	0.0000	0.0000	2.7135	0.5609	0.0033	$ -	$ -	$ -	$ 13,011	$ 2,690	$ 16
K11A	Major Laparoscopic Bariatric Procedures, Major Complexity	0	0	3.6	1	11	100%	0.0000	0.0000	0.0000	2.4882	0.3899	0.0121	$ -	$ -	$ -	$ 11,931	$ 1,870	$ 58
K11B	Major Laparoscopic Bariatric Procedures, Minor Complexity	0	0	2.5	1	7	100%	0.0000	0.0000	0.0000	1.8271	0.4153	0.0064	$ -	$ -	$ -	$ 8,761	$ 1,991	$ 31
K12A	Other Bariatric Procedures, Major Complexity	0	0	2.0	1	6	100%	0.0000	0.0000	0.0000	1.7266	0.4514	0.1420	$ -	$ -	$ -	$ 8,279	$ 2,164	$ 681
K12B	Other Bariatric Procedures, Minor Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	1.5590	0.4327	0.1330	$ -	$ -	$ -	$ 7,475	$ 2,075	$ 638
K13Z	Plastic OR Procedures for Endocrine, Nutritional and Metabolic Disorders	0	0	4.2	1	12	100%	0.0000	0.0000	0.0000	2.0917	0.3869	0.0018	$ -	$ -	$ -	$ 10,030	$ 1,855	$ 8
K40A	Endoscopic and Investigative Procedures for Metabolic Disorders, Major Comp	0	0	11.4	3	34	106%	0.0000	0.2172	1.1616	3.6919	0.2427	0.0099	$ -	$ 1,041	$ 5,570	$ 17,703	$ 1,164	$ 47
K40B	Endoscopic and Investigative Procedures for Metabolic Disorders, Minor Comp	0	0	1.1	1	3	200%	0.0000	0.0000	0.0000	0.2965	0.2615	0.0501	$ -	$ -	$ -	$ 1,422	$ 1,254	$ 240

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
K60A	Diabetes, Major Complexity	0	0	5.9	1	18	116%	0.0000	0.0000	0.0000	1.5500	0.2343	0.0297	$ -	$ -	$ -	$ 7,432	$ 1,123	$ 143
K60B	Diabetes, Minor Complexity	1	0	3.4	1	10	172%	0.1661	0.0000	0.0000	0.8485	0.2079	0.0130	$ 796	$ -	$ -	$ 4,069	$ 997	$ 62
K61A	Severe Nutritional Disturbance, Major Complexity	0	0	12.4	4	37	100%	0.0000	0.0000	0.0000	0.9265	3.6929	0.2564	0.0132	$ -	$ -	$ 4,443	$ 17,707	$ 1,229	$ 63
K61B	Severe Nutritional Disturbance, Minor Complexity	0	0	6.3	2	19	100%	0.0000	0.0000	0.0000	0.9418	1.8813	0.2666	0.0026	$ -	$ -	$ 4,516	$ 9,021	$ 1,278	$ 12
K62A	Miscellaneous Metabolic Disorders, Major Complexity	0	0	7.8	2	23	135%	0.0000	0.0000	0.0000	1.0410	2.0424	0.2224	0.0397	$ -	$ -	$ 4,992	$ 9,793	$ 1,066	$ 190
K62B	Miscellaneous Metabolic Disorders, Intermediate Complexity	1	0	3.6	1	11	133%	0.1316	0.0000	0.0000	0.9010	0.2390	0.0163	$ 631	$ -	$ -	$ 4,320	$ 1,146	$ 78
K62C	Miscellaneous Metabolic Disorders, Minor Complexity	1	0	2.4	1	7	162%	0.1222	0.0000	0.0000	0.5898	0.2463	0.0099	$ 586	$ -	$ -	$ 2,828	$ 1,181	$ 47
K63A	Inborn Errors of Metabolism, Major Complexity	0	0	3.0	1	9	149%	0.0000	0.0000	0.0000	0.6610	0.3067	0.0006	$ -	$ -	$ -	$ 3,169	$ 1,471	$ 3
K63B	Inborn Errors of Metabolism, Minor Complexity	0	0	1.1	1	3	110%	0.0000	0.0000	0.0000	0.1925	0.1426	0.0026	$ -	$ -	$ -	$ 923	$ 684	$ 12
K64A	Endocrine Disorders, Major Complexity	1	0	4.6	1	14	174%	0.2788	0.0000	0.0000	1.2657	0.2482	0.0678	$ 1,337	$ -	$ -	$ 6,069	$ 1,190	$ 325
K64B	Endocrine Disorders, Minor Complexity	1	0	2.3	1	7	191%	0.1752	0.0000	0.0000	0.6615	0.1733	0.0358	$ 840	$ -	$ -	$ 3,172	$ 831	$ 171
L02A	Operative Insertion of Peritoneal Catheter for Dialysis, Major Complexity	0	0	9.1	3	27	100%	0.0000	0.5449	1.1601	3.9271	0.3026	0.0980	$ -	$ 2,613	$ 5,563	$ 18,830	$ 1,451	$ 470
L02B	Operative Insertion of Peritoneal Catheter for Dialysis, Minor Complexity	0	0	1.6	1	5	100%	0.0000	0.0000	0.0000	1.0343	0.3267	0.0552	$ -	$ -	$ -	$ 4,959	$ 1,567	$ 265
L03A	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Major Complexity	0	0	16.4	5	49	100%	0.0000	1.8275	1.2771	8.1127	0.3313	0.1003	$ -	$ 8,763	$ 6,124	$ 38,900	$ 1,589	$ 481
L03B	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Intermediate Comp	0	0	6.4	2	19	100%	0.0000	0.7697	1.7296	4.1532	0.3792	0.0754	$ -	$ 3,691	$ 8,293	$ 19,915	$ 1,818	$ 361
L03C	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Minor Complexity	0	0	3.6	1	11	100%	0.0000	0.0000	0.0000	2.7382	0.4929	0.0329	$ -	$ -	$ -	$ 13,130	$ 2,363	$ 158
L04A	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Major Complexity	0	0	12.8	4	38	81%	0.0000	1.0067	1.1305	5.4158	0.3024	0.1127	$ -	$ 4,827	$ 5,421	$ 25,969	$ 1,450	$ 540
L04B	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Intermediate Com	1	0	4.5	1	13	93%	0.8035	0.0000	0.0000	2.2745	0.2760	0.1175	$ 3,853	$ -	$ -	$ 10,906	$ 1,323	$ 563
L04C	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Minor Complexity	1	0	2.0	1	6	131%	0.7381	0.0000	0.0000	1.4141	0.3540	0.0818	$ 3,539	$ -	$ -	$ 6,781	$ 1,697	$ 392
L05A	Transurethral Prostatectomy for Urinary Disorder, Major Complexity	0	0	9.2	3	28	100%	0.0000	0.5144	0.8862	3.1601	0.2259	0.0128	$ -	$ 2,467	$ 4,249	$ 15,153	$ 1,083	$ 61
L05B	Transurethral Prostatectomy for Urinary Disorder, Minor Complexity	0	0	2.5	1	7	100%	0.0000	0.0000	0.0000	1.2973	0.2354	0.0062	$ -	$ -	$ -	$ 6,221	$ 1,129	$ 30
L06A	Minor Bladder Procedures, Major Complexity	0	0	11.7	3	35	100%	0.0000	0.6727	1.2515	4.4144	0.2851	0.0127	$ -	$ 3,226	$ 6,001	$ 21,167	$ 1,367	$ 61
L06B	Minor Bladder Procedures, Intermediate Complexity	0	0	3.9	1	12	100%	0.0000	0.0000	0.0000	1.6977	0.2500	0.0048	$ -	$ -	$ -	$ 8,140	$ 1,199	$ 23
L06C	Minor Bladder Procedures, Minor Complexity	1	0	2.2	1	6	100%	0.5194	0.0000	0.0000	1.0967	0.2065	0.0036	$ 2,491	$ -	$ -	$ 5,259	$ 990	$ 17
L07A	Other Transurethral Procedures, Major Complexity	0	0	5.3	1	16	100%	0.0000	0.0000	0.0000	1.8901	0.2332	0.0065	$ -	$ -	$ -	$ 9,063	$ 1,118	$ 31
L07B	Other Transurethral Procedures, Minor Complexity	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	0.7503	0.2666	0.0039	$ -	$ -	$ -	$ 3,598	$ 1,278	$ 19
L08A	Urethral Procedures, Major Complexity	1	0	4.0	1	12	100%	0.5598	0.0000	0.0000	1.7001	0.2866	0.0254	$ 2,684	$ -	$ -	$ 8,152	$ 1,374	$ 122
L08B	Urethral Procedures, Minor Complexity	0	0	1.3	1	4	87%	0.0000	0.0000	0.0000	0.7802	0.2848	0.0449	$ -	$ -	$ -	$ 3,741	$ 1,366	$ 215
L09A	Other Procedures for Kidney and Urinary Tract Disorders, Major Complexity	0	0	19.1	6	57	100%	0.0000	0.4553	1.0994	6.9094	0.2940	0.1423	$ -	$ 2,183	$ 5,272	$ 33,131	$ 1,410	$ 682
L09B	Other Procedures for Kidney and Urinary Tract Disorders, Intermediate Complexity	0	0	6.0	2	18	100%	0.0000	0.6424	1.0700	2.6820	0.2833	0.1003	$ -	$ 3,080	$ 5,131	$ 12,860	$ 1,358	$ 481
L09C	Other Procedures for Kidney and Urinary Tract Disorders, Minor Complexity	0	0	1.3	1	4	80%	0.0000	0.0000	0.0000	1.0377	0.3414	0.0749	$ -	$ -	$ -	$ 4,976	$ 1,637	$ 359
L40Z	Ureteroscopy	0	0	1.4	1	6	100%	0.0000	0.0000	0.0000	0.7008	0.2693	0.1058	$ -	$ -	$ -	$ 3,360	$ 1,291	$ 507
L41Z	Cystourethroscopy for Urinary Disorder, Sameday	0	0	1.0	1	1	200%	0.0000	0.0000	0.0000	0.2173	0.0000	0.0171	$ -	$ -	$ -	$ 1,042	$ -	$ 82
L42Z	ESW Lithotripsy	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.7397	0.1599	0.0012	$ -	$ -	$ -	$ 3,547	$ 767	$ 6
L60A	Kidney Failure, Major Complexity	0	0	11.2	3	34	100%	0.0000	0.0000	1.0912	3.1669	0.2606	0.1068	$ -	$ -	$ 5,232	$ 15,185	$ 1,250	$ 512
L60B	Kidney Failure, Intermediate Complexity	1	0	4.8	1	15	163%	0.1961	0.0000	0.0000	1.1946	0.2436	0.0548	$ 940	$ -	$ -	$ 5,728	$ 1,168	$ 263
L60C	Kidney Failure, Minor Complexity	1	0	2.9	1	9	133%	0.2103	0.0000	0.0000	0.8173	0.2620	0.0490	$ 1,008	$ -	$ -	$ 3,919	$ 1,256	$ 235
L61Z	Haemodialysis	0	0	1.0	1	3	163%	0.0000	0.0000	0.0000	0.1062	0.0892	0.0054	$ -	$ -	$ -	$ 509	$ 428	$ 26
L62A	Kidney and Urinary Tract Neoplasms, Major Complexity	0	0	9.3	3	28	115%	0.0000	0.0000	0.8706	2.5688	0.2091	0.0429	$ -	$ -	$ 4,175	$ 12,317	$ 1,003	$ 206
L62B	Kidney and Urinary Tract Neoplasms, Minor Complexity	0	0	2.4	1	7	119%	0.0000	0.0000	0.0000	0.5976	0.2137	0.0187	$ -	$ -	$ -	$ 2,865	$ 1,025	$ 90
L63A	Kidney and Urinary Tract Infections, Major Complexity	0	0	6.0	1	18	89%	0.0000	0.0000	0.0000	1.3799	0.2252	0.0148	$ -	$ -	$ -	$ 6,617	$ 1,080	$ 71
L63B	Kidney and Urinary Tract Infections, Minor Complexity	1	0	2.6	1	8	113%	0.0955	0.0000	0.0000	0.6270	0.2084	0.0059	$ 458	$ -	$ -	$ 3,006	$ 999	$ 29
L64A	Urinary Stones and Obstruction, Major Complexity	1	0	2.6	1	8	184%	0.1262	0.0000	0.0000	0.8251	0.2493	0.0139	$ 605	$ -	$ -	$ 3,956	$ 1,195	$ 67
L64B	Urinary Stones and Obstruction, Minor Complexity	0	0	1.2	1	4	200%	0.0000	0.0000	0.0000	0.2602	0.1727	0.0043	$ -	$ -	$ -	$ 1,248	$ 828	$ 20
L65A	Kidney and Urinary Tract Signs and Symptoms, Major Complexity	1	0	5.6	1	17	134%	0.1556	0.0000	0.0000	1.3770	0.2307	0.0167	$ 746	$ -	$ -	$ 6,603	$ 1,106	$ 80
L65B	Kidney and Urinary Tract Signs and Symptoms, Minor Complexity	1	0	2.3	1	7	152%	0.1218	0.0000	0.0000	0.5247	0.1901	0.0140	$ 584	$ -	$ -	$ 2,516	$ 912	$ 67
L66Z	Urethral Stricture	0	0	1.6	1	5	80%	0.0000	0.0000	0.0000	0.5959	0.2521	0.0015	$ -	$ -	$ -	$ 2,857	$ 1,209	$ 7
L67A	Other Kidney and Urinary Tract Disorders, Major Complexity	1	0	5.5	1	16	130%	0.2356	0.0000	0.0000	1.4142	0.2509	0.0491	$ 1,130	$ -	$ -	$ 6,781	$ 1,203	$ 235
L67B	Other Kidney and Urinary Tract Disorders, Intermediate Complexity	1	0	2.3	1	7	154%	0.1877	0.0000	0.0000	0.6517	0.2398	0.0287	$ 900	$ -	$ -	$ 3,125	$ 1,150	$ 137
L67C	Other Kidney and Urinary Tract Disorders, Minor Complexity	0	0	1.1	1	3	200%	0.0000	0.0000	0.0000	0.1526	0.1315	0.0211	$ -	$ -	$ -	$ 732	$ 631	$ 101
L68Z	Peritoneal Dialysis	0	0	1.0	1	3	200%	0.0000	0.0000	0.0000	0.1660	0.1434	0.0136	$ -	$ -	$ -	$ 796	$ 688	$ 65
M01A	Major Male Pelvic Procedures, Major Complexity	0	0	6.8	2	20	100%	0.0000	2.3368	1.0645	4.4581	0.3204	0.0079	$ -	$ 11,205	$ 5,104	$ 21,377	$ 1,536	$ 38
M01B	Major Male Pelvic Procedures, Minor Complexity	0	0	3.5	1	10	100%	0.0000	0.0000	0.0000	3.3459	0.1559	0.0082	$ -	$ -	$ -	$ 16,044	$ 748	$ 39
M02A	Transurethral Prostatectomy for Reproductive System Disorder, Major Complexity	0	0	6.0	2	18	100%	0.0000	0.5728	0.8846	2.2817	0.2486	0.0602	$ -	$ 2,747	$ 4,242	$ 10,941	$ 1,192	$ 289
M02B	Transurethral Prostatectomy for Reproductive System Disorder, Minor Complexity	0	0	2.5	1	7	100%	0.0000	0.0000	0.0000	1.3042	0.2217	0.0301	$ -	$ -	$ -	$ 6,254	$ 1,063	$ 144
M03A	Penis Procedures, Major Complexity	0	0	3.1	1	9	80%	0.0000	0.0000	0.0000	1.6942	0.3801	0.0045	$ -	$ -	$ -	$ 8,124	$ 1,823	$ 22
M03B	Penis Procedures, Minor Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.8453	0.2517	0.0020	$ -	$ -	$ -	$ 4,053	$ 1,207	$ 9
M04Z	Testes Procedures	0	0	1.2	1	4	81%	0.0000	0.0000	0.0000	0.7357	0.2701	0.0758	$ -	$ -	$ -	$ 3,528	$ 1,295	$ 364
M05Z	Circumcision	0	0	1.1	1	3	81%	0.0000	0.0000	0.0000	0.6173	0.1958	0.0009	$ -	$ -	$ -	$ 2,960	$ 939	$ 4
M06A	Other Male Reproductive System OR Procedures, Major Complexity	1	0	5.8	1	17	100%	0.8611	0.0000	0.0000	2.2452	0.2387	0.0635	$ 4,129	$ -	$ -	$ 10,766	$ 1,145	$ 304
M06B	Other Male Reproductive System OR Procedures, Minor Complexity	0	0	1.3	1	4	100%	0.0000	0.0000	0.0000	0.9805	0.2683	0.0608	$ -	$ -	$ -	$ 4,701	$ 1,286	$ 292
M40Z	Cystourethroscopy for Male Reproductive System Disorder, Sameday	0	0	1.0	1	1	100%	0.0000	0.0000	0.0000	0.2176	0.0000	0.0157	$ -	$ -	$ -	$ 1,043	$ -	$ 75
M60A	Male Reproductive System Malignancy, Major Complexity	0	0	8.1	2	24	80%	0.0000	0.0000	1.1392	2.1705	0.2130	0.1077	$ -	$ -	$ 5,462	$ 10,408	$ 1,021	$ 517
M60B	Male Reproductive System Malignancy, Minor Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.3405	0.2418	0.0251	$ -	$ -	$ -	$ 1,633	$ 1,159	$ 120
M61A	Benign Prostatic Hypertrophy, Major Complexity	0	0	3.5	1	11	100%	0.0000	0.0000	0.0000	0.8184	0.2051	0.0039	$ -	$ -	$ -	$ 3,924	$ 983	$ 18
M61B	Benign Prostatic Hypertrophy, Minor Complexity	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.3584	0.1659	0.0011	$ -	$ -	$ -	$ 1,719	$ 795	$ 5
M62A	Male Reproductive System Inflammation, Major Complexity	0	0	5.1	1	15	100%	0.0000	0.0000	0.0000	1.1298	0.2251	0.0071	$ -	$ -	$ -	$ 5,417	$ 1,079	$ 34
M62B	Male Reproductive System Inflammation, Minor Complexity	1	0	2.4	1	7	130%	0.1435	0.0000	0.0000	0.5762	0.1929	0.0029	$ 688	$ -	$ -	$ 2,763	$ 925	$ 14
M63Z	Male Sterilisation Procedures	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.4101	0.1621	0.0550	$ -	$ -	$ -	$ 1,966	$ 777	$ 264
M64A	Other Male Reproductive System Disorders, Major Complexity	0	0	2.2	1	7	100%	0.0000	0.0000	0.0000	0.5855	0.2409	0.0008	$ -	$ -	$ -	$ 2,807	$ 1,155	$ 4
M64B	Other Male Reproductive System Disorders, Minor Complexity	0	0	1.2	1	3	113%	0.0000	0.0000	0.0000	0.2633	0.1512	0.0013	$ -	$ -	$ -	$ 1,263	$ 725	$ 6
N01A	Pelvic Evisceration and Radical Vulvectomy, Major Complexity	0	0	14.5	4	43	100%	0.0000	1.4138	1.2507	6.4049	0.3031	0.0115	$ -	$ 6,779	$ 5,997	$ 30,711	$ 1,453	$ 55
N01B	Pelvic Evisceration and Radical Vulvectomy, Minor Complexity	0	0	4.4	1	13	100%	0.0000	0.0000	0.0000	3.1372	0.2652	0.0091	$ -	$ -	$ -	$ 15,043	$ 1,272	$ 44
N04A	Hysterectomy for Non-Malignancy, Major Complexity	0	0	4.5	1	13	100%	0.0000	0.0000	0.0000	2.7307	0.3396	0.0687	$ -	$ -	$ -	$ 13,094	$ 1,628	$ 329

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
N04B	Hysterectomy for Non-Malignancy, Minor Complexity	0	0	2.7	1	8	100%	0.0000	0.0000	0.0000	1.9708	0.2545	0.0404	$ -	$ -	$ -	$ 9,450	$ 1,220	$ 194
N05A	Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy, Maj C	0	0	4.5	1	14	100%	0.0000	0.0000	0.0000	2.6076	0.3251	0.0453	$ -	$ -	$ -	$ 12,503	$ 1,559	$ 217
N05B	Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy, Min C	0	0	1.7	1	5	100%	0.0000	0.0000	0.0000	1.4659	0.3416	0.0265	$ -	$ -	$ -	$ 7,029	$ 1,638	$ 127
N06A	Female Reproductive System Reconstructive Procedures, Major Complexity	0	0	3.8	1	11	100%	0.0000	0.0000	0.0000	2.2186	0.3080	0.0156	$ -	$ -	$ -	$ 10,638	$ 1,477	$ 75
N06B	Female Reproductive System Reconstructive Procedures, Minor Complexity	0	0	1.9	1	6	100%	0.0000	0.0000	0.0000	1.3731	0.3505	0.0099	$ -	$ -	$ -	$ 6,584	$ 1,681	$ 48
N07A	Other Uterus and Adnexa Procedures for Non-Malignancy, Major Complexity	1	0	2.0	1	6	108%	0.7810	0.0000	0.0000	1.4875	0.2742	0.0204	$ 3,745	$ -	$ -	$ 7,133	$ 1,315	$ 98
N07B	Other Uterus and Adnexa Procedures for Non-Malignancy, Minor Complexity	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.5270	0.1929	0.0098	$ -	$ -	$ -	$ 2,527	$ 925	$ 47
N08Z	Endoscopic and Laparoscopic Procedures, Female Reproductive System	1	0	2.0	1	6	112%	0.7193	0.0000	0.0000	1.2913	0.2529	0.0169	$ 3,449	$ -	$ -	$ 6,192	$ 1,213	$ 81
N09Z	Other Vagina, Cervix and Vulva Procedures	0	0	1.2	1	3	134%	0.0000	0.0000	0.0000	0.5333	0.1852	0.0088	$ -	$ -	$ -	$ 2,557	$ 888	$ 42
N10Z	Diagnostic Curettage and Diagnostic Hysteroscopy	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.4806	0.1548	0.0088	$ -	$ -	$ -	$ 2,304	$ 742	$ 42
N11A	Other Female Reproductive System OR Procedures, Major Complexity	0	0	7.7	2	23	100%	0.0000	0.3891	1.3262	2.9932	0.2697	0.0485	$ -	$ 1,866	$ 6,359	$ 14,352	$ 1,293	$ 233
N11B	Other Female Reproductive System OR Procedures, Minor Complexity	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.3466	0.2786	0.0020	$ -	$ -	$ -	$ 1,662	$ 1,336	$ 10
N12A	Uterus and Adnexa Procedures for Malignancy, Major Complexity	0	0	10.4	3	31	100%	0.0000	1.3451	1.3617	5.4065	0.3076	0.0239	$ -	$ 6,450	$ 6,529	$ 25,924	$ 1,475	$ 114
N12B	Uterus and Adnexa Procedures for Malignancy, Intermediate Complexity	0	0	4.8	1	14	100%	0.0000	0.0000	0.0000	3.1788	0.3464	0.0232	$ -	$ -	$ -	$ 15,242	$ 1,661	$ 111
N12C	Uterus and Adnexa Procedures for Malignancy, Minor Complexity	0	0	2.7	1	8	100%	0.0000	0.0000	0.0000	2.2076	0.3664	0.0214	$ -	$ -	$ -	$ 10,585	$ 1,757	$ 103
N60A	Female Reproductive System Malignancy, Major Complexity	0	0	10.5	3	31	100%	0.0000	0.0000	1.0244	3.0385	0.2318	0.0347	$ -	$ -	$ 4,912	$ 14,570	$ 1,111	$ 166
N60B	Female Reproductive System Malignancy, Minor Complexity	0	0	3.2	1	10	157%	0.0000	0.0000	0.0000	0.8120	0.2213	0.0259	$ -	$ -	$ -	$ 3,894	$ 1,061	$ 124
N61A	Female Reproductive System Infections, Major Complexity	0	0	3.5	1	11	100%	0.0000	0.0000	0.0000	0.8626	0.2415	0.0107	$ -	$ -	$ -	$ 4,136	$ 1,158	$ 51
N61B	Female Reproductive System Infections, Minor Complexity	0	0	1.7	1	5	178%	0.0000	0.0000	0.0000	0.3800	0.2531	0.0046	$ -	$ -	$ -	$ 1,822	$ 1,214	$ 22
N62A	Menstrual and Other Female Reproductive System Disorders, Major Complexity	0	0	2.1	1	6	112%	0.0000	0.0000	0.0000	0.4758	0.2351	0.0166	$ -	$ -	$ -	$ 2,281	$ 1,127	$ 80
N62B	Menstrual and Other Female Reproductive System Disorders, Minor Complexity	0	0	1.2	1	4	135%	0.0000	0.0000	0.0000	0.2468	0.1611	0.0092	$ -	$ -	$ -	$ 1,183	$ 772	$ 44
O01A	Caesarean Delivery, Major Complexity	0	0	7.5	2	23	100%	0.0000	0.9577	1.1457	3.2273	0.2480	0.0219	$ -	$ 4,592	$ 5,494	$ 15,475	$ 1,189	$ 105
O01B	Caesarean Delivery, Intermediate Complexity	0	0	4.3	1	13	100%	0.0000	0.0000	0.0000	2.2395	0.2436	0.0202	$ -	$ -	$ -	$ 10,738	$ 1,168	$ 97
O01C	Caesarean Delivery, Minor Complexity	0	0	3.2	1	10	100%	0.0000	0.0000	0.0000	1.8692	0.2653	0.0160	$ -	$ -	$ -	$ 8,963	$ 1,272	$ 77
O02A	Vaginal Delivery W OR Procedures, Major Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	2.2820	0.3375	0.0709	$ -	$ -	$ -	$ 10,942	$ 1,618	$ 340
O02B	Vaginal Delivery W OR Procedures, Minor Complexity	0	0	2.9	1	9	100%	0.0000	0.0000	0.0000	1.5944	0.3253	0.0333	$ -	$ -	$ -	$ 7,645	$ 1,560	$ 160
O03A	Ectopic Pregnancy, Major Complexity	0	0	2.1	1	6	100%	0.0000	0.0000	0.0000	1.3578	0.2773	0.0039	$ -	$ -	$ -	$ 6,511	$ 1,330	$ 19
O03B	Ectopic Pregnancy, Minor Complexity	0	0	1.5	1	5	100%	0.0000	0.0000	0.0000	0.8918	0.2982	0.0033	$ -	$ -	$ -	$ 4,276	$ 1,430	$ 16
O04A	Postpartum and Post Abortion W OR Procedures, Major Complexity	0	0	5.1	1	15	100%	0.0000	0.0000	0.0000	2.3813	0.2683	0.0025	$ -	$ -	$ -	$ 11,418	$ 1,286	$ 12
O04B	Postpartum and Post Abortion W OR Procedures, Minor Complexity	1	0	2.2	1	7	100%	0.5030	0.0000	0.0000	1.0596	0.2617	0.0011	$ 2,412	$ -	$ -	$ 5,081	$ 1,255	$ 5
O05Z	Abortion W OR Procedures	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.4551	0.1852	0.0114	$ -	$ -	$ -	$ 2,182	$ 888	$ 55
O60A	Vaginal Delivery, Major Complexity	0	0	3.9	1	12	100%	0.0000	0.0000	0.0000	1.6848	0.2779	0.0145	$ -	$ -	$ -	$ 8,079	$ 1,333	$ 70
O60B	Vaginal Delivery, Intermediate Complexity	0	0	2.5	1	8	113%	0.0000	0.0000	0.0000	1.1480	0.3084	0.0161	$ -	$ -	$ -	$ 5,505	$ 1,479	$ 77
O60C	Vaginal Delivery, Minor Complexity	0	0	1.8	1	5	100%	0.0000	0.0000	0.0000	0.8127	0.3281	0.0142	$ -	$ -	$ -	$ 3,897	$ 1,573	$ 68
O61A	Postpartum and Post Abortion W/O OR Procedures, Major Complexity	0	0	4.1	1	12	100%	0.0000	0.0000	0.0000	1.0754	0.2534	0.0036	$ -	$ -	$ -	$ 5,157	$ 1,215	$ 17
O61B	Postpartum and Post Abortion W/O OR Procedures, Minor Complexity	1	0	2.3	1	7	100%	0.1164	0.0000	0.0000	0.5923	0.2000	0.0017	$ 558	$ -	$ -	$ 2,840	$ 959	$ 8
O63A	Abortion W/O OR Procedures, Major Complexity	0	0	1.5	1	4	100%	0.0000	0.0000	0.0000	0.5728	0.3592	0.0111	$ -	$ -	$ -	$ 2,747	$ 1,722	$ 53
O63B	Abortion W/O OR Procedures, Minor Complexity	0	0	1.1	1	3	100%	0.0000	0.0000	0.0000	0.1929	0.1518	0.0041	$ -	$ -	$ -	$ 925	$ 728	$ 20
O66A	Antenatal and Other Obstetric Admissions, Major Complexity	1	0	2.9	1	9	100%	0.1386	0.0000	0.0000	0.7299	0.2098	0.0057	$ 665	$ -	$ -	$ 3,500	$ 1,006	$ 27
O66B	Antenatal and Other Obstetric Admissions, Minor Complexity	0	0	1.2	1	4	143%	0.0000	0.0000	0.0000	0.1947	0.1379	0.0022	$ -	$ -	$ -	$ 934	$ 661	$ 11
P01Z	Neonate W Sig OR Proc/Vent>=96hrs, Died or Transfer to Acute Facility <5Days	0	1	1.5	1	4	100%	0.0000	0.0000	0.0000	1.2283	0.3849	0.0014	$ -	$ -	$ -	$ 5,890	$ 1,846	$ 7
P02Z	Cardiothoracic and Vascular Procedures for Neonates	0	1	28.8	21	48	100%	0.0000	2.5823	1.1248	26.1801	0.6418	0.0239	$ -	$ 12,382	$ 5,393	$ 125,534	$ 3,077	$ 114
P03A	Neonate, AdmWt 1000-1499g W Significant OR Proc/Vent>=96hrs, Major Complexit	0	1	64.7	21	194	100%	0.0000	0.1276	1.2490	26.3295	0.3980	0.0279	$ -	$ 612	$ 5,989	$ 126,250	$ 1,908	$ 134
P03B	Neonate, AdmWt 1000-1499g W Significant OR Proc/Vent>=96hrs, Minor Complexit	0	1	36.6	12	110	100%	0.0000	0.1135	1.2618	15.2386	0.3547	0.0161	$ -	$ 544	$ 6,050	$ 73,069	$ 1,701	$ 77
P04A	Neonate, AdmWt 1500-1999g W Significant OR Proc/Vent>=96hrs, Major Complexit	0	1	50.9	33	76	100%	0.0000	0.3665	0.6383	21.4095	0.3494	0.0221	$ -	$ 1,757	$ 3,061	$ 102,659	$ 1,675	$ 106
P04B	Neonate, AdmWt 1500-1999g W Significant OR Proc/Vent>=96hrs, Minor Complexit	0	1	25.1	8	75	100%	0.0000	0.1054	1.1414	9.2269	0.3162	0.0099	$ -	$ 505	$ 5,473	$ 44,243	$ 1,516	$ 48
P05A	Neonate, AdmWt 2000-2499g W Significant OR Proc/Vent>=96hrs, Major Complexit	0	1	48.2	32	72	100%	0.0000	0.4351	0.6959	22.6804	0.3472	0.0240	$ -	$ 2,086	$ 3,337	$ 108,753	$ 1,665	$ 115
P05B	Neonate, AdmWt 2000-2499g W Significant OR Proc/Vent>=96hrs, Minor Complexit	0	1	20.7	6	62	100%	0.0000	0.2010	1.4181	8.7009	0.3557	0.0089	$ -	$ 964	$ 6,800	$ 41,721	$ 1,706	$ 42
P06A	Neonate, AdmWt >=2500g W Significant OR Proc/Vent>=96hrs, Major Complexity	0	1	35.6	23	53	100%	0.0000	0.5939	0.7980	18.9168	0.4145	0.0298	$ -	$ 2,848	$ 3,826	$ 90,706	$ 1,988	$ 143
P06B	Neonate, AdmWt >=2500g W Significant OR Proc/Vent>=96hrs, Minor Complexity	0	1	12.1	8	18	100%	0.0000	0.3417	0.6801	5.7751	0.3582	0.0075	$ -	$ 1,638	$ 3,261	$ 27,692	$ 1,718	$ 36
P07Z	Neonate, AdmWt <750g W Significant OR Procedures	0	1	119.6	39	358	100%	0.0000	0.4811	1.6815	65.9916	0.5087	0.0690	$ -	$ 2,307	$ 8,063	$ 316,430	$ 2,439	$ 331
P08Z	Neonate, AdmWt 750-999g W Significant OR Procedures	0	1	89.3	32	297	100%	0.0000	0.3751	1.4531	46.8242	0.4175	0.0494	$ -	$ 1,799	$ 6,968	$ 224,522	$ 2,002	$ 237
P60A	Neonate W/O Sig OR/Vent>=96hrs, Died/Transfer Acute Facility <5 Days, MajC	0	1	2.5	1	4	100%	0.0000	0.0000	0.0000	1.0414	0.0000	0.0010	$ -	$ -	$ -	$ 4,994	$ -	$ 5
P60B	Neonate W/O Sig OR/Vent>=96hrs, Died/Transfer Acute Facility <5 Days, MinC	1	1	1.9	1	4	100%	0.2782	0.0000	0.0000	0.7788	0.0000	0.0008	$ 1,334	$ -	$ -	$ 3,734	$ -	$ 4
P61Z	Neonate, AdmWt <750g W/O Significant OR procedure	0	1	77.6	53	121	100%	0.0000	0.0000	0.8760	46.3748	0.4027	0.0497	$ -	$ -	$ 4,200	$ 222,367	$ 1,931	$ 238
P62A	Neonate, AdmWt 750-999g W/O Significant OR Procedures, Major Complexity	0	1	79.3	26	238	100%	0.0000	0.0000	1.4911	38.7269	0.4234	0.0422	$ -	$ -	$ 7,150	$ 185,695	$ 2,030	$ 202
P62B	Neonate, AdmWt 750-999g W/O Significant OR Procedures, Minor Complexity	0	1	45.9	15	138	100%	0.0000	0.0000	1.4776	22.1417	0.3550	0.0238	$ -	$ -	$ 7,085	$ 106,169	$ 1,702	$ 114
P63A	Neonate, AdmWt 1000-1249g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	36.6	12	110	100%	0.0000	0.0000	1.0340	12.3947	0.2891	0.0133	$ -	$ -	$ 4,958	$ 59,433	$ 1,386	$ 64
P63B	Neonate, AdmWt 1000-1249g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	10.6	3	32	100%	0.0000	0.0000	1.6401	4.9149	0.2526	0.0053	$ -	$ -	$ 7,864	$ 23,567	$ 1,211	$ 25
P64A	Neonate, AdmWt 1250-1499g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	33.3	11	100	100%	0.0000	0.0000	0.9408	10.3384	0.2562	0.0104	$ -	$ -	$ 4,511	$ 49,573	$ 1,228	$ 50
P64B	Neonate, AdmWt 1250-1499g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	22.2	7	67	100%	0.0000	0.0000	0.9862	6.8966	0.2502	0.0070	$ -	$ -	$ 4,729	$ 33,069	$ 1,200	$ 34
P65A	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Extreme Com	0	1	28.6	9	86	100%	0.0000	0.0000	0.9340	8.3970	0.2685	0.0084	$ -	$ -	$ 4,479	$ 40,264	$ 1,287	$ 40
P65B	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	21.1	7	63	100%	0.0000	0.0000	0.8845	6.1853	0.2624	0.0063	$ -	$ -	$ 4,241	$ 29,659	$ 1,258	$ 30
P65C	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Intermediate (	0	1	16.7	5	50	100%	0.0000	0.0000	0.9615	4.8030	0.2524	0.0048	$ -	$ -	$ 4,610	$ 23,030	$ 1,210	$ 23
P65D	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	13.0	4	39	100%	0.0000	0.0000	0.9937	3.9708	0.2628	0.0040	$ -	$ -	$ 4,765	$ 19,040	$ 1,260	$ 19
P66A	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Extreme Com	0	1	17.8	5	53	100%	0.0000	0.0000	1.0200	5.0951	0.2693	0.0049	$ -	$ -	$ 4,891	$ 24,431	$ 1,291	$ 24
P66B	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	12.8	4	38	100%	0.0000	0.0000	0.9276	3.7062	0.2428	0.0037	$ -	$ -	$ 4,448	$ 17,771	$ 1,164	$ 18
P66C	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Intermediate (	0	1	8.8	2	26	100%	0.0000	0.0000	1.2524	2.5023	0.2514	0.0025	$ -	$ -	$ 6,005	$ 11,999	$ 1,205	$ 12
P66D	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	4.2	1	13	100%	0.0000	0.0000	0.0000	1.2220	0.2523	0.0012	$ -	$ -	$ -	$ 5,859	$ 1,210	$ 6
P67A	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, E>	0	1	13.9	4	42	100%	0.0000	0.0000	1.0767	4.3024	0.2778	0.0042	$ -	$ -	$ 5,163	$ 20,630	$ 1,332	$ 20
P67B	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, M	0	1	9.1	3	27	100%	0.0000	0.0000	0.9130	2.7364	0.2648	0.0028	$ -	$ -	$ 4,378	$ 13,121	$ 1,270	$ 13
P67C	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, In	0	1	7.0	2	21	100%	0.0000	0.0000	1.0572	2.1122	0.2565	0.0022	$ -	$ -	$ 5,069	$ 10,128	$ 1,230	$ 10
P67D	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, M	0	1	4.9	1	15	100%	0.0000	0.0000	0.0000	1.4263	0.2428	0.0016	$ -	$ -	$ -	$ 6,839	$ 1,164	$ 8
P68A	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, E	0	1	9.2	3	28	100%	0.0000	0.0000	1.0336	3.0883	0.2941	0.0126	$ -	$ -	$ 4,956	$ 14,808	$ 1,410	$ 60

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
P68B	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, I	0	1	4.6	1	14	100%	0.0000	0.0000	0.0000	1.4124	0.2985	0.0142	$ -	$ -	$ -	$ 6,772	$ 1,431	$ 68
P68C	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, I	0	1	3.3	1	10	100%	0.0000	0.0000	0.0000	1.0298	0.2611	0.0197	$ -	$ -	$ -	$ 4,938	$ 1,252	$ 95
P68D	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, I	0	1	2.2	1	7	100%	0.0000	0.0000	0.0000	0.6941	0.2407	0.0304	$ -	$ -	$ -	$ 3,328	$ 1,154	$ 146
Q01A	Splenectomy, Major Complexity	0	0	15.4	5	46	100%	0.0000	1.1098	0.9994	6.0984	0.2592	0.0081	$ -	$ 5,321	$ 4,792	$ 29,242	$ 1,243	$ 39
Q01B	Splenectomy, Minor Complexity	0	0	5.6	1	17	100%	0.0000	0.0000	0.0000	3.0611	0.2979	0.0068	$ -	$ -	$ -	$ 14,678	$ 1,428	$ 33
Q02A	Blood and Immune System Disorders W Other OR Procedures, Major Complexity	0	0	12.4	4	37	123%	0.0000	0.5375	1.1281	4.9375	0.2627	0.1124	$ -	$ 2,577	$ 5,409	$ 23,675	$ 1,260	$ 539
Q02B	Blood and Immune System Disorders W Other OR Procedures, Minor Complexity	1	0	3.6	1	11	100%	0.5540	0.0000	0.0000	1.6089	0.2427	0.1001	$ 2,656	$ -	$ -	$ 7,715	$ 1,164	$ 480
Q60A	Reticuloendothelial and Immunity Disorders, Major Complexity	1	0	5.7	1	17	143%	0.1966	0.0000	0.0000	1.5350	0.3123	0.1084	$ 943	$ -	$ -	$ 7,360	$ 1,497	$ 520
Q60B	Reticuloendothelial and Immunity Disorders, Minor Complexity	0	0	1.1	1	3	170%	0.0000	0.0000	0.0000	0.1517	0.1274	0.0235	$ -	$ -	$ -	$ 727	$ 611	$ 113
Q61A	Red Blood Cell Disorders, Major Complexity	1	0	4.7	1	14	142%	0.2382	0.0000	0.0000	1.1434	0.2339	0.0313	$ 1,142	$ -	$ -	$ 5,483	$ 1,122	$ 150
Q61B	Red Blood Cell Disorders, Intermediate Complexity	1	0	1.9	1	6	144%	0.2099	0.0000	0.0000	0.4886	0.2297	0.0213	$ 1,006	$ -	$ -	$ 2,343	$ 1,101	$ 102
Q61C	Red Blood Cell Disorders, Minor Complexity	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.0480	0.0466	0.0103	$ -	$ -	$ -	$ 230	$ 223	$ 49
Q62A	Coagulation Disorders, Major Complexity	1	0	5.6	1	17	100%	0.1684	0.0000	0.0000	1.3205	0.2436	0.0232	$ 807	$ -	$ -	$ 6,332	$ 1,168	$ 111
Q62B	Coagulation Disorders, Minor Complexity	1	0	2.4	1	7	112%	0.1712	0.0000	0.0000	0.6254	0.2533	0.0128	$ 821	$ -	$ -	$ 2,999	$ 1,215	$ 61
R01A	Lymphoma and Leukaemia W Major OR Procedures, Major Complexity	0	0	23.3	15	35	100%	0.0000	1.1510	0.6509	10.3782	0.3281	0.5356	$ -	$ 5,519	$ 3,121	$ 49,763	$ 1,573	$ 2,568
R01B	Lymphoma and Leukaemia W Major OR Procedures, Minor Complexity	0	0	4.0	1	12	100%	0.0000	0.0000	0.0000	1.9868	0.4053	0.1750	$ -	$ -	$ -	$ 9,527	$ 1,943	$ 839
R02A	Other Neoplastic Disorders W Major OR Procedures, Major Complexity	0	0	15.5	10	23	100%	0.0000	1.9236	0.5246	6.9264	0.2311	0.2426	$ -	$ 9,224	$ 2,515	$ 33,212	$ 1,108	$ 1,163
R02B	Other Neoplastic Disorders W Major OR Procedures, Intermediate Complexity	0	0	7.0	2	21	100%	0.0000	0.7500	1.4857	3.6281	0.2199	0.0930	$ -	$ 3,596	$ 7,124	$ 17,397	$ 1,054	$ 446
R02C	Other Neoplastic Disorders W Major OR Procedures, Minor Complexity	0	0	4.2	1	13	100%	0.0000	0.0000	0.0000	2.0698	0.2104	0.0746	$ -	$ -	$ -	$ 9,925	$ 1,009	$ 358
R03A	Lymphoma and Leukaemia W Other OR Procedures, Major Complexity	0	0	27.4	9	82	100%	0.0000	0.3352	1.1744	10.5244	0.3499	0.3810	$ -	$ 1,607	$ 5,631	$ 50,464	$ 1,678	$ 1,827
R03B	Lymphoma and Leukaemia W Other OR Procedures, Intermediate Complexity	0	0	8.4	2	25	100%	0.0000	0.5069	1.6820	3.6644	0.3147	0.2064	$ -	$ 2,431	$ 8,065	$ 17,571	$ 1,509	$ 990
R03C	Lymphoma and Leukaemia W Other OR Procedures, Minor Complexity	1	0	3.3	1	10	136%	0.6219	0.0000	0.0000	1.5709	0.2749	0.1318	$ 2,982	$ -	$ -	$ 7,532	$ 1,318	$ 632
R04A	Other Neoplastic Disorders W Other OR Procedures, Major Complexity	0	0	8.3	2	25	100%	0.0000	0.5800	1.5138	3.5058	0.2188	0.1020	$ -	$ 2,781	$ 7,259	$ 16,810	$ 1,049	$ 489
R04B	Other Neoplastic Disorders W Other OR Procedures, Minor Complexity	1	0	3.0	1	9	100%	0.8168	0.0000	0.0000	1.6220	0.2760	0.0273	$ 3,917	$ -	$ -	$ 7,777	$ 1,323	$ 131
R60A	Acute Leukaemia, Major Complexity	0	0	16.0	10	24	118%	0.0000	0.0000	0.7116	6.9627	0.3328	0.1526	$ -	$ -	$ 3,412	$ 33,386	$ 1,596	$ 732
R60B	Acute Leukaemia, Minor Complexity	1	0	4.3	1	13	141%	0.2782	0.0000	0.0000	1.4586	0.2738	0.0828	$ 1,334	$ -	$ -	$ 6,994	$ 1,313	$ 397
R61A	Lymphoma and Non-Acute Leukaemia, Major Complexity	0	0	8.5	2	26	147%	0.0000	0.0000	1.4842	2.7850	0.2892	0.1834	$ -	$ -	$ 7,117	$ 13,354	$ 1,387	$ 879
R61B	Lymphoma and Non-Acute Leukaemia, Minor Complexity	1	0	3.4	1	10	173%	0.2301	0.0000	0.0000	1.1797	0.2782	0.1003	$ 1,103	$ -	$ -	$ 5,657	$ 1,334	$ 481
R62A	Other Neoplastic Disorders, Major Complexity	0	0	7.4	2	22	84%	0.0000	0.0966	1.2124	2.4863	0.2355	0.0352	$ -	$ 463	$ 5,813	$ 11,922	$ 1,129	$ 169
R62B	Other Neoplastic Disorders, Intermediate Complexity	1	0	3.7	1	11	82%	0.8127	0.0000	0.0000	1.0168	0.2320	0.0228	$ 3,897	$ -	$ -	$ 4,876	$ 1,112	$ 109
R62C	Other Neoplastic Disorders, Minor Complexity	1	0	2.8	1	9	106%	0.6110	0.0000	0.0000	0.8061	0.2035	0.0324	$ 2,930	$ -	$ -	$ 3,865	$ 976	$ 156
R63Z	Chemotherapy	0	0	1.0	1	3	100%	0.0000	0.0000	0.0000	0.2223	0.1895	0.0712	$ -	$ -	$ -	$ 1,066	$ 909	$ 341
S65A	Human Immunodeficiency Virus, Major Complexity	0	0	18.9	6	57	100%	0.0000	0.0000	1.2866	6.8855	0.3066	0.8338	$ -	$ -	$ 6,169	$ 33,016	$ 1,470	$ 3,998
S65B	Human Immunodeficiency Virus, Intermediate Complexity	1	0	6.0	2	18	100%	0.5630	0.0000	1.2796	2.0866	0.3160	0.4727	$ 2,700	$ -	$ 6,136	$ 10,005	$ 1,515	$ 2,267
S65C	Human Immunodeficiency Virus, Minor Complexity	1	0	4.3	1	13	100%	0.3215	0.0000	0.0000	1.2646	0.3898	0.4269	$ 1,542	$ -	$ -	$ 6,064	$ 1,869	$ 2,047
T01A	Infectious and Parasitic Diseases W OR Procedures, Major Complexity	0	0	25.4	8	76	119%	0.0000	0.7334	1.0521	9.1195	0.2825	0.0304	$ -	$ 3,517	$ 5,045	$ 43,728	$ 1,355	$ 146
T01B	Infectious and Parasitic Diseases W OR Procedures, Intermediate Complexity	0	0	11.6	3	35	108%	0.0000	0.4082	1.1329	3.7787	0.2199	0.0281	$ -	$ 1,957	$ 5,432	$ 18,119	$ 1,054	$ 135
T01C	Infectious and Parasitic Diseases W OR Procedures, Minor Complexity	0	0	6.4	2	19	110%	0.0000	0.3475	0.9788	2.2884	0.2260	0.0166	$ -	$ 1,666	$ 4,693	$ 10,973	$ 1,084	$ 80
T40Z	Infectious and Parasitic Diseases W Ventilator Support	0	0	8.2	2	24	100%	0.0000	0.0435	2.2967	4.4890	0.2932	0.1477	$ -	$ 209	$ 11,013	$ 21,525	$ 1,406	$ 708
T60A	Septicaemia, Major Complexity	0	0	14.1	4	42	108%	0.0000	0.0000	1.0958	4.3252	0.2525	0.0578	$ -	$ -	$ 5,254	$ 20,739	$ 1,211	$ 277
T60B	Septicaemia, Intermediate Complexity	0	0	7.6	2	23	100%	0.0000	0.0000	1.0722	2.1112	0.2236	0.0331	$ -	$ -	$ 5,141	$ 10,123	$ 1,072	$ 159
T60C	Septicaemia, Minor Complexity	0	0	4.5	1	14	106%	0.0000	0.0000	0.0000	1.1223	0.2309	0.0198	$ -	$ -	$ -	$ 5,381	$ 1,107	$ 95
T61A	Postoperative and Post-Traumatic Infections, Major Complexity	0	0	7.6	2	23	131%	0.0000	0.0000	0.8747	1.6903	0.1862	0.0593	$ -	$ -	$ 4,194	$ 8,105	$ 893	$ 284
T61B	Postoperative and Post-Traumatic Infections, Minor Complexity	0	0	3.5	1	10	145%	0.0000	0.0000	0.0000	0.6792	0.1825	0.0087	$ -	$ -	$ -	$ 3,257	$ 875	$ 42
T62A	Fever of Unknown Origin, Major Complexity	0	0	5.6	1	17	100%	0.0000	0.0000	0.0000	1.4563	0.2593	0.0201	$ -	$ -	$ -	$ 6,983	$ 1,243	$ 97
T62B	Fever of Unknown Origin, Minor Complexity	0	0	2.2	1	7	100%	0.0000	0.0000	0.0000	0.5416	0.2680	0.0045	$ -	$ -	$ -	$ 2,597	$ 1,285	$ 21
T63A	Viral Illnesses, Major Complexity	1	0	4.4	1	13	115%	0.1336	0.0000	0.0000	1.1012	0.2584	0.0319	$ 641	$ -	$ -	$ 5,280	$ 1,239	$ 153
T63B	Viral Illnesses, Minor Complexity	0	0	1.5	1	5	100%	0.0000	0.0000	0.0000	0.3527	0.2731	0.0096	$ -	$ -	$ -	$ 1,691	$ 1,310	$ 46
T64A	Other Infectious and Parasitic Diseases, Major Complexity	0	0	17.9	5	54	100%	0.0000	0.0000	1.1800	5.8515	0.2600	0.0579	$ -	$ -	$ 5,658	$ 28,058	$ 1,247	$ 278
T64B	Other Infectious and Parasitic Diseases, Intermediate Complexity	0	0	8.0	2	24	100%	0.0000	0.0000	1.0652	2.0989	0.2029	0.0316	$ -	$ -	$ 5,108	$ 10,064	$ 973	$ 152
T64C	Other Infectious and Parasitic Diseases, Minor Complexity	1	0	4.9	1	15	117%	0.2571	0.0000	0.0000	1.0553	0.1771	0.0252	$ 1,233	$ -	$ -	$ 5,060	$ 849	$ 121
U40Z	Mental Health Treatment W ECT, Sameday	0	0	1.0	1	1	100%	0.0000	0.0000	0.0000	0.1622	0.0000	0.0009	$ -	$ -	$ -	$ 778	$ -	$ 4
U60A	Mental Health Treatment W/O ECT, Sameday, Major Complexity	0	0	1.0	1	1	182%	0.0000	0.0000	0.0000	0.0938	0.0000	0.0097	$ -	$ -	$ -	$ 450	$ -	$ 47
U60B	Mental Health Treatment W/O ECT, Sameday, Minor Complexity	0	0	1.0	1	1	200%	0.0000	0.0000	0.0000	0.0725	0.0000	0.0038	$ -	$ -	$ -	$ 348	$ -	$ 18
U61A	Schizophrenia Disorders, Major Complexity	0	0	45.3	30	68	100%	0.0000	0.0000	0.3335	9.9143	0.1864	0.0714	$ -	$ -	$ 1,599	$ 47,539	$ 894	$ 342
U61B	Schizophrenia Disorders, Minor Complexity	0	0	20.4	13	31	158%	0.0000	0.0000	0.3702	4.7497	0.1923	0.0531	$ -	$ -	$ 1,775	$ 22,775	$ 922	$ 255
U62A	Paranoia and Acute Psychotic Disorders, Major Complexity	0	0	25.1	16	38	100%	0.0000	0.0000	0.4094	6.5265	0.2033	0.0247	$ -	$ -	$ 1,963	$ 31,295	$ 975	$ 118
U62B	Paranoia and Acute Psychotic Disorders, Minor Complexity	0	0	12.4	8	19	161%	0.0000	0.0000	0.4088	3.2258	0.2034	0.0442	$ -	$ -	$ 1,960	$ 15,468	$ 975	$ 212
U63A	Major Affective Disorders, Major Complexity	0	0	29.4	19	44	193%	0.0000	0.0000	0.3962	7.4948	0.2108	0.0321	$ -	$ -	$ 1,900	$ 35,938	$ 1,011	$ 154
U63B	Major Affective Disorders, Minor Complexity	0	0	13.7	9	20	164%	0.0000	0.0000	0.4100	3.6379	0.2093	0.0463	$ -	$ -	$ 1,966	$ 17,444	$ 1,004	$ 222
U64A	Other Affective and Somatoform Disorders, Major Complexity	0	0	15.6	10	23	148%	0.0000	0.0000	0.4072	4.0078	0.2014	0.0640	$ -	$ -	$ 1,953	$ 19,217	$ 966	$ 307
U64B	Other Affective and Somatoform Disorders, Minor Complexity	0	0	6.4	4	10	155%	0.0000	0.0000	0.4276	1.6884	0.2069	0.0220	$ -	$ -	$ 2,050	$ 8,096	$ 992	$ 106
U65A	Anxiety Disorders, Major Complexity	0	0	8.1	5	12	139%	0.0000	0.0000	0.4520	2.2392	0.2276	0.0208	$ -	$ -	$ 2,167	$ 10,737	$ 1,091	$ 100
U65B	Anxiety Disorders, Minor Complexity	0	0	4.0	2	6	179%	0.0000	0.0000	0.4866	0.9562	0.2091	0.0169	$ -	$ -	$ 2,333	$ 4,585	$ 1,003	$ 81
U66A	Eating and Obsessive-Compulsive Disorders, Major Complexity	0	0	27.9	18	42	109%	0.0000	0.0000	0.4588	8.2256	0.2178	0.0320	$ -	$ -	$ 2,200	$ 39,442	$ 1,044	$ 153
U66B	Eating and Obsessive-Compulsive Disorders, Minor Complexity	0	0	15.2	10	23	121%	0.0000	0.0000	0.4867	4.8547	0.2471	0.0113	$ -	$ -	$ 2,334	$ 23,278	$ 1,185	$ 54
U67A	Personality Disorders and Acute Reactions, Major Complexity	0	0	11.4	7	17	190%	0.0000	0.0000	0.4396	3.0594	0.2203	0.0171	$ -	$ -	$ 2,108	$ 14,670	$ 1,056	$ 82
U67B	Personality Disorders and Acute Reactions, Minor Complexity	0	0	4.7	3	7	170%	0.0000	0.0000	0.4378	1.3213	0.2220	0.0000	$ -	$ -	$ 2,099	$ 6,336	$ 1,064	$ -
U68A	Childhood Mental Disorders, Major Complexity	0	0	11.0	7	16	130%	0.0000	0.0000	0.5636	3.9338	0.2461	0.0108	$ -	$ -	$ 2,702	$ 18,863	$ 1,180	$ 52
U68B	Childhood Mental Disorders, Minor Complexity	0	0	7.1	4	11	149%	0.0000	0.0000	0.5719	2.2799	0.2633	0.0075	$ -	$ -	$ 2,742	$ 10,932	$ 1,263	$ 36
V60A	Alcohol Intoxication and Withdrawal, Major Complexity	0	0	5.1	3	8	100%	0.0000	0.0000	0.4347	1.2939	0.2152	0.0102	$ -	$ -	$ 2,084	$ 6,204	$ 1,032	$ 49
V60B	Alcohol Intoxication and Withdrawal, Minor Complexity	0	0	2.0	1	3	80%	0.0000	0.0000	0.0000	0.3252	0.2207	0.0026	$ -	$ -	$ -	$ 1,559	$ 1,058	$ 12
V61A	Drug Intoxication and Withdrawal, Major Complexity	0	0	11.2	7	17	100%	0.0000	0.0000	0.4467	3.1119	0.2106	0.0143	$ -	$ -	$ 2,142	$ 14,922	$ 1,010	$ 69
V61B	Drug Intoxication and Withdrawal, Minor Complexity	0	0	6.2	4	9	200%	0.0000	0.0000	0.4197	1.6698	0.2155	0.0090	$ -	$ -	$ 2,012	$ 8,007	$ 1,033	$ 43

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $	PBS $
V62A	Alcohol Use and Dependence, Major Complexity	0	0	10.3	6	15	100%	0.0000	0.0000	0.4064	2.4214	0.2032	0.0170	$ -	$ -	$ 1,949	$ 11,611	$ 974	$ 81
V62B	Alcohol Use and Dependence, Minor Complexity	0	0	6.0	4	9	100%	0.0000	0.0000	0.3749	1.4871	0.2034	0.0093	$ -	$ -	$ 1,798	$ 7,131	$ 975	$ 45
V63Z	Opioid Use and Dependence	0	0	5.8	3	8	100%	0.0000	0.0000	0.3647	1.0854	0.1790	0.0087	$ -	$ -	$ 1,749	$ 5,204	$ 858	$ 42
V64Z	Other Drug Use and Dependence	0	0	5.5	3	8	100%	0.0000	0.0000	0.3700	1.1039	0.1660	0.0060	$ -	$ -	$ 1,774	$ 5,293	$ 796	$ 29
V65Z	Treatment for Alcohol Disorders, Sameday	0	0	1.0	1	1	123%	0.0000	0.0000	0.0000	0.1017	0.0000	0.0010	$ -	$ -	$ -	$ 488	$ -	$ 5
V66Z	Treatment for Drug Disorders, Sameday	0	0	1.0	1	1	100%	0.0000	0.0000	0.0000	0.0923	0.0000	0.0004	$ -	$ -	$ -	$ 443	$ -	$ 2
W01A	Vent, Trac & Cran Procs for Mult Sig Trauma, Major Complexity	0	0	37.0	12	111	100%	0.0000	3.6849	1.9449	26.9944	0.3783	0.0282	$ -	$ 17,669	$ 9,326	$ 129,438	$ 1,814	$ 135
W01B	Vent, Trac & Cran Procs for Mult Sig Trauma, Intermediate Complexity	0	0	21.0	6	63	100%	0.0000	2.3557	2.3397	16.3740	0.3628	0.0220	$ -	$ 11,296	$ 11,219	$ 78,513	$ 1,740	$ 106
W01C	Vent, Trac & Cran Procs for Mult Sig Trauma, Minor Complexity	0	0	13.2	4	40	100%	0.0000	2.1428	1.9333	9.8628	0.3219	0.0133	$ -	$ 10,275	$ 9,270	$ 47,292	$ 1,544	$ 64
W02A	Hip, Femur and Lower Limb Procedures for Multiple Sig Trauma, Major Complexity	0	0	20.3	6	61	100%	0.0000	1.7557	1.4460	10.4155	0.2996	0.0164	$ -	$ 8,419	$ 6,934	$ 49,942	$ 1,437	$ 78
W02B	Hip, Femur and Lower Limb Procedures for Multiple Sig Trauma, Minor Complexity	0	0	12.4	4	37	100%	0.0000	1.3670	0.9732	5.2520	0.2566	0.0082	$ -	$ 6,555	$ 4,666	$ 25,183	$ 1,230	$ 39
W03Z	Abdominal Procedures for Multiple Significant Trauma	0	0	10.3	3	35	100%	0.0000	0.9721	1.4214	5.2288	0.3266	0.0075	$ -	$ 4,661	$ 6,816	$ 25,072	$ 1,566	$ 36
W04A	Multiple Significant Trauma W Other OR Procedures, Major Complexity	0	0	22.0	7	66	100%	0.0000	2.4008	1.1914	10.7002	0.2886	0.0405	$ -	$ 11,512	$ 5,713	$ 51,307	$ 1,384	$ 194
W04B	Multiple Significant Trauma W Other OR Procedures, Minor Complexity	0	0	9.4	3	28	100%	0.0000	1.1124	1.3323	5.1019	0.3506	0.0072	$ -	$ 5,334	$ 6,388	$ 24,464	$ 1,681	$ 35
W60A	Multiple Sig Trauma, Died or Transferred to Acute Facility <5 Days, Major Comp	0	0	1.7	1	4	100%	0.0000	0.0000	0.0000	1.8792	0.0000	0.0057	$ -	$ -	$ -	$ 9,011	$ -	$ 27
W60B	Multiple Sig Trauma, Died or Transferred to Acute Facility <5 Days, Minor Comp	0	0	1.5	1	4	100%	0.0000	0.0000	0.0000	1.0604	0.0000	0.0032	$ -	$ -	$ -	$ 5,085	$ -	$ 15
W61A	Multiple Significant Trauma W/O OR Procedures, Major Complexity	0	0	16.9	5	51	100%	0.0000	0.0000	0.9144	4.5588	0.2233	0.0104	$ -	$ -	$ 4,385	$ 21,859	$ 1,071	$ 50
W61B	Multiple Significant Trauma W/O OR Procedures, Minor Complexity	0	0	7.2	2	22	114%	0.0000	0.0000	1.0120	2.0240	0.2302	0.0080	$ -	$ -	$ 4,853	$ 9,705	$ 1,104	$ 38
X02A	Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand, Major Comp	0	0	6.6	2	20	100%	0.0000	0.4333	1.7513	3.9299	0.3646	0.0062	$ -	$ 2,078	$ 8,397	$ 18,844	$ 1,748	$ 30
X02B	Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand, Minor Comp	0	0	1.7	1	5	126%	0.0000	0.0000	0.0000	0.9529	0.4529	0.0013	$ -	$ -	$ -	$ 4,569	$ 2,172	$ 6
X04A	Other Procedures for Injuries to Lower Limb, Major Complexity	0	0	11.3	3	34	100%	0.0000	0.5707	1.1921	4.0891	0.2572	0.0580	$ -	$ 2,737	$ 5,716	$ 19,607	$ 1,233	$ 278
X04B	Other Procedures for Injuries to Lower Limb, Minor Complexity	1	0	2.4	1	7	106%	0.4642	0.0000	0.0000	1.0482	0.2761	0.0038	$ 2,226	$ -	$ -	$ 5,026	$ 1,324	$ 18
X05A	Other Procedures for Injuries to Hand, Major Complexity	0	0	2.6	1	8	110%	0.0000	0.0000	0.0000	1.1348	0.2943	0.0065	$ -	$ -	$ -	$ 5,441	$ 1,411	$ 31
X05B	Other Procedures for Injuries to Hand, Minor Complexity	0	0	1.2	1	4	95%	0.0000	0.0000	0.0000	0.5675	0.2076	0.0019	$ -	$ -	$ -	$ 2,721	$ 995	$ 9
X06A	Other Procedures for Other Injuries, Major Complexity	0	0	12.8	4	38	130%	0.0000	0.7036	0.9785	4.5752	0.2237	0.0423	$ -	$ 3,374	$ 4,692	$ 21,938	$ 1,073	$ 203
X06B	Other Procedures for Other Injuries, Intermediate Complexity	0	0	4.6	1	14	112%	0.0000	0.0000	0.0000	1.6327	0.2203	0.0218	$ -	$ -	$ -	$ 7,829	$ 1,056	$ 105
X06C	Other Procedures for Other Injuries, Minor Complexity	0	0	1.9	1	6	94%	0.0000	0.0000	0.0000	0.8368	0.2838	0.0110	$ -	$ -	$ -	$ 4,012	$ 1,361	$ 53
X07A	Skin Grafts for Injuries Excluding Hand, Major Complexity	0	0	22.8	7	68	100%	0.0000	0.5408	1.0631	7.8679	0.2756	0.1148	$ -	$ 2,593	$ 5,098	$ 37,727	$ 1,322	$ 551
X07B	Skin Grafts for Injuries Excluding Hand, Intermediate Complexity	0	0	10.7	3	32	100%	0.0000	0.4586	1.0898	3.6860	0.2569	0.0419	$ -	$ 2,199	$ 5,226	$ 17,674	$ 1,232	$ 201
X07C	Skin Grafts for Injuries Excluding Hand, Minor Complexity	0	0	4.8	1	14	110%	0.0000	0.0000	0.0000	1.6982	0.2304	0.0099	$ -	$ -	$ -	$ 8,143	$ 1,105	$ 48
X40A	Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support, Major Comp	0	0	8.3	2	25	100%	0.0000	0.0531	1.7596	3.5468	0.2523	0.0254	$ -	$ 255	$ 8,437	$ 17,007	$ 1,210	$ 122
X40B	Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support, Minor Comp	0	0	3.4	1	10	100%	0.0000	0.0000	0.0000	1.7301	0.2710	0.0116	$ -	$ -	$ -	$ 8,296	$ 1,299	$ 56
X60A	Injuries, Major Complexity	1	0	5.8	1	17	100%	0.1152	0.0000	0.0000	1.1344	0.2085	0.0087	$ 552	$ -	$ -	$ 5,439	$ 1,000	$ 42
X60B	Injuries, Minor Complexity	0	0	1.4	1	4	137%	0.0000	0.0000	0.0000	0.2477	0.1871	0.0009	$ -	$ -	$ -	$ 1,188	$ 897	$ 4
X61A	Allergic Reactions, Major Complexity	0	0	1.8	1	5	135%	0.0000	0.0000	0.0000	0.4158	0.2834	0.0267	$ -	$ -	$ -	$ 1,994	$ 1,359	$ 128
X61B	Allergic Reactions, Minor Complexity	0	0	1.0	1	3	111%	0.0000	0.0000	0.0000	0.1358	0.1032	0.0075	$ -	$ -	$ -	$ 651	$ 495	$ 36
X62A	Poisoning/Toxic Effects of Drugs and Other Substances, Major Complexity	1	0	5.8	1	17	132%	0.1603	0.0000	0.0000	1.2427	0.2218	0.0269	$ 769	$ -	$ -	$ 5,959	$ 1,064	$ 129
X62B	Poisoning/Toxic Effects of Drugs and Other Substances, Minor Complexity	1	0	2.0	1	6	117%	0.0944	0.0000	0.0000	0.4217	0.2185	0.0041	$ 453	$ -	$ -	$ 2,022	$ 1,048	$ 19
X63A	Sequelae of Treatment, Major Complexity	1	0	5.8	1	17	135%	0.1975	0.0000	0.0000	1.3018	0.2189	0.0520	$ 947	$ -	$ -	$ 6,242	$ 1,050	$ 249
X63B	Sequelae of Treatment, Minor Complexity	1	0	2.4	1	7	100%	0.1623	0.0000	0.0000	0.5369	0.1881	0.0199	$ 778	$ -	$ -	$ 2,574	$ 902	$ 95
X64A	Other Injuries, Poisonings and Toxic Effects, Major Complexity	0	0	6.5	2	19	146%	0.0000	0.0000	0.8060	1.6081	0.1992	0.0037	$ -	$ -	$ 3,865	$ 7,711	$ 955	$ 18
X64B	Other Injuries, Poisonings and Toxic Effects, Minor Complexity	0	0	1.3	1	4	125%	0.0000	0.0000	0.0000	0.2353	0.1721	0.0005	$ -	$ -	$ -	$ 1,128	$ 825	$ 2
Y01Z	Vent >=96hrs or Trach for Burns or OR Procs for Severe Full Thickness Burns	0	0	33.7	18	164	100%	0.0000	2.3404	1.9669	37.7053	0.6521	0.0382	$ -	$ 11,222	$ 9,431	$ 180,797	$ 3,127	$ 183
Y02A	Skin Grafts for Other Burns, Major Complexity	0	0	16.8	5	50	100%	0.0000	0.6191	1.5975	8.5942	0.4661	0.0130	$ -	$ 2,969	$ 7,660	$ 41,209	$ 2,235	$ 62
Y02B	Skin Grafts for Other Burns, Intermediate Complexity	0	0	6.1	2	18	100%	0.0000	0.3727	1.4455	3.2564	0.3235	0.0074	$ -	$ 1,787	$ 6,931	$ 15,614	$ 1,551	$ 35
Y02C	Skin Grafts for Other Burns, Minor Complexity	0	0	2.4	1	7	92%	0.0000	0.0000	0.0000	1.1407	0.4928	0.0039	$ -	$ -	$ -	$ 5,470	$ 2,363	$ 19
Y03A	Other OR Procedures for Other Burns, Major Complexity	0	0	4.6	1	14	116%	0.0000	0.0000	0.0000	1.7060	0.3312	0.0040	$ -	$ -	$ -	$ 8,180	$ 1,588	$ 19
Y03B	Other OR Procedures for Other Burns, Minor Complexity	0	0	2.7	1	8	100%	0.0000	0.0000	0.0000	1.0155	0.3563	0.0043	$ -	$ -	$ -	$ 4,869	$ 1,708	$ 20
Y60Z	Burns, Transferred to Acute Facility <5 Days	0	0	1.2	1	4	100%	0.0000	0.0000	0.0000	0.4056	0.0000	0.0016	$ -	$ -	$ -	$ 1,945	$ -	$ 8
Y61Z	Severe Burns	0	0	3.7	1	10	115%	0.0000	0.0000	0.0000	0.9100	0.3134	0.0013	$ -	$ -	$ -	$ 4,363	$ 1,503	$ 6
Y62A	Other Burns, Major Complexity	1	0	4.6	1	14	123%	0.1198	0.0000	0.0000	1.2406	0.2713	0.0061	$ 574	$ -	$ -	$ 5,949	$ 1,301	$ 29
Y62B	Other Burns, Minor Complexity	1	0	2.0	1	6	127%	0.1360	0.0000	0.0000	0.5359	0.3130	0.0008	$ 652	$ -	$ -	$ 2,570	$ 1,501	$ 4
Z01A	Other Contacts W Health Services W OR Procedures, Major Complexity	0	0	24.6	8	74	80%	0.0000	0.7183	0.9230	7.9812	0.2302	0.1216	$ -	$ 3,444	$ 4,426	$ 38,270	$ 1,104	$ 583
Z01B	Other Contacts W Health Services W OR Procedures, Minor Complexity	1	0	3.0	1	9	93%	0.4771	0.0000	0.0000	1.1647	0.3634	0.0463	$ 2,288	$ -	$ -	$ 5,585	$ 1,743	$ 222
Z40Z	Other Contacts W Health Services W Endoscopy, Sameday	0	0	1.0	1	1	136%	0.0000	0.0000	0.0000	0.2290	0.0000	0.0195	$ -	$ -	$ -	$ 1,098	$ -	$ 93
Z60A	Rehabilitation, Major Complexity	0	0	0.0	0	0	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -	$ -
Z60B	Rehabilitation, Minor Complexity	0	0	0.0	0	0	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -	$ -
Z61A	Signs and Symptoms, Major Complexity	0	0	6.5	2	20	135%	0.0000	0.0000	0.8053	1.5993	0.2023	0.0115	$ -	$ -	$ 3,861	$ 7,669	$ 970	$ 55
Z61B	Signs and Symptoms, Intermediate Complexity	1	0	3.1	1	9	136%	0.1737	0.0000	0.0000	0.6812	0.2087	0.0036	$ 833	$ -	$ -	$ 3,266	$ 1,001	$ 17
Z61C	Signs and Symptoms, Minor Complexity	1	0	2.6	1	8	93%	0.2056	0.0000	0.0000	0.5116	0.2237	0.0051	$ 986	$ -	$ -	$ 2,453	$ 1,073	$ 24
Z63A	Other Follow Up After Surgery or Medical Care, Major Complexity	0	0	11.1	3	33	157%	0.0000	0.0000	0.8131	2.4227	0.1870	0.0167	$ -	$ -	$ 3,899	$ 11,617	$ 897	$ 80
Z63B	Other Follow Up After Surgery or Medical Care, Minor Complexity	0	0	3.4	1	10	80%	0.0000	0.0000	0.0000	0.6591	0.1718	0.0078	$ -	$ -	$ -	$ 3,160	$ 824	$ 37
Z64A	Other Factors Influencing Health Status, Major Complexity	1	0	10.3	3	31	113%	0.2537	0.0000	0.8850	2.6204	0.1767	0.0345	$ 1,216	$ -	$ 4,244	$ 12,565	$ 847	$ 166
Z64B	Other Factors Influencing Health Status, Minor Complexity	1	0	4.4	1	13	107%	0.2457	0.0000	0.0000	0.7229	0.1803	0.0301	$ 1,178	$ -	$ -	$ 3,466	$ 865	$ 144
Z65Z	Congenital Anomalies and Problems Arising from Neonatal Period	0	0	2.9	1	12	100%	0.0000	0.0000	0.0000	0.7144	0.3227	0.0054	$ -	$ -	$ -	$ 3,426	$ 1,547	$ 26
Z66Z	Sleep Disorders	0	0	2.7	1	8	116%	0.0000	0.0000	0.0000	0.4999	0.2377	0.0000	$ -	$ -	$ -	$ 2,397	$ 1,140	$ -

Appendix 2 2017-18 National Admitted Acute Price Weights (N1718) - AR-DRG v8.0

2017-18 National Admitted Acute Price Weights (N1718) AR-DRG V8.0

									NATIONAL WEIGHTS						NATIONAL PRICE				
DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
801A	OR Procedures Unrelated to Principal Diagnosis, Major Complexity	0	0	24.1	8	77	13%	142%	0.0000	0.8560	1.0026	8.8764	0.2579	0.0000	$ -	$ 4,203	$ 4,923	$ 43,583	$ 1,266
801B	OR Procedures Unrelated to Principal Diagnosis, Intermediate Complexity	0	0	9.1	3	28	18%	92%	0.0000	0.5639	1.1173	3.9160	0.2603	0.0000	$ -	$ 2,769	$ 5,486	$ 19,228	$ 1,278
801C	OR Procedures Unrelated to Principal Diagnosis, Minor Complexity	0	0	2.5	1	7	18%	84%	0.0000	0.0000	0.0000	1.2302	0.3340	0.0000	$ -	$ -	$ -	$ 6,040	$ 1,640
960Z	Ungroupable	0	0	0.0	0	0	0%	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
961Z	Unacceptable Principal Dx	0	0	0.0	0	0	0%	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
963Z	Neonatal Dx not consnt age/wgt	0	0	0.0	0	0	0%	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
A01Z	Liver Transplant	0	0	23.8	16	37	12%	106%	0.0000	5.9156	1.5040	29.9789	0.6362	0.0000	$ -	$ 29,046	$ 7,385	$ 147,196	$ 3,124
A03Z	Lung or Heart-Lung Transplant	0	0	20.8	10	98	12%	100%	0.0000	2.9755	1.8973	21.9486	0.5850	0.0000	$ -	$ 14,610	$ 9,316	$ 107,768	$ 2,872
A05Z	Heart Transplant	0	0	25.0	13	121	12%	100%	0.0000	4.0562	1.8767	28.4533	0.5515	0.0000	$ -	$ 19,916	$ 9,215	$ 139,706	$ 2,708
A06A	Tracheostomy and/or Ventilation >=96hours, Major Complexity	0	0	36.9	23	53	12%	116%	0.0000	3.4016	1.2051	31.1178	0.3356	0.0000	$ -	$ 16,702	$ 5,917	$ 152,788	$ 1,648
A06B	Tracheostomy and/or Ventilation >=96hours, Intermediate Complexity	0	0	21.0	13	31	12%	107%	0.0000	1.5947	1.2320	17.6108	0.3617	0.0000	$ -	$ 7,830	$ 6,049	$ 86,469	$ 1,776
A06C	Tracheostomy and/or Ventilation >=96hours, Minor Complexity	0	0	11.4	7	17	15%	105%	0.0000	0.6995	1.3532	10.1723	0.4112	0.0000	$ -	$ 3,435	$ 6,644	$ 49,946	$ 2,019
A07A	Allogeneic Bone Marrow Transplant, Age <=16 Years or Major Complexity	0	0	47.3	14	127	6%	198%	0.0000	0.0603	1.5628	21.9397	0.4865	0.0000	$ -	$ 296	$ 7,673	$ 107,724	$ 2,389
A07B	Allogeneic Bone Marrow Transplant, Age >=17 Years and Minor Complexity	0	0	20.4	6	61	5%	100%	0.0000	0.0341	2.0075	12.0792	0.4336	0.0000	$ -	$ 167	$ 9,857	$ 59,309	$ 2,129
A08A	Autologous Bone Marrow Transplant, Major Complexity	0	0	20.9	7	64	9%	187%	0.0000	0.0107	1.0573	7.4118	0.3522	0.0000	$ -	$ 53	$ 5,191	$ 36,392	$ 1,729
A08B	Autologous Bone Marrow Transplant, Minor Complexity	0	0	4.9	1	15	8%	100%	0.0000	0.0000	0.0000	1.4768	0.3297	0.0000	$ -	$ -	$ -	$ 7,251	$ 1,619
A09A	Kidney Transplant, Age <=16 Years or Major Complexity	0	0	13.2	4	39	9%	108%	0.0000	1.6769	2.2784	10.7905	0.4120	0.0000	$ -	$ 8,234	$ 11,187	$ 52,981	$ 2,023
A09B	Kidney Transplant, Age >=17 Years and Minor Complexity	0	0	8.1	2	24	8%	100%	0.0000	1.7103	3.0189	7.7480	0.1833	0.0000	$ -	$ 8,398	$ 14,823	$ 38,043	$ 900
A10Z	Insertion of Ventricular Assist Device	0	0	37.5	25	58	12%	100%	0.0000	28.4443	1.4701	65.1977	0.6995	0.0000	$ -	$ 139,662	$ 7,218	$ 320,121	$ 3,435
A11A	Insertion of Implantable Spinal Infusion Device, Major Complexity	0	0	23.0	5	48	12%	100%	0.0000	3.1725	1.7173	11.7592	0.4875	0.0000	$ -	$ 15,577	$ 8,432	$ 57,738	$ 2,394
A11B	Insertion of Implantable Spinal Infusion Device, Minor Complexity	0	0	6.7	1	8	12%	100%	0.0000	0.0000	0.0000	3.8161	0.4846	0.0000	$ -	$ -	$ -	$ 18,737	$ 2,379
A12Z	Insertion of Neurostimulator Device	0	0	3.0	1	8	59%	100%	0.0000	0.0000	0.0000	4.8407	0.7975	0.0000	$ -	$ -	$ -	$ 23,768	$ 3,916
A40A	ECMO, Major Complexity	0	0	21.3	5	48	17%	138%	0.0000	3.8705	5.2226	29.9837	0.5076	0.0000	$ -	$ 19,004	$ 25,643	$ 147,220	$ 2,492
A40B	ECMO, Minor Complexity	0	0	7.0	2	26	17%	137%	0.0000	1.9317	4.1936	10.3189	0.4845	0.0000	$ -	$ 9,485	$ 20,591	$ 50,666	$ 2,379
B01A	Ventricular Shunt Revision, Major Complexity	0	0	11.0	3	31	22%	80%	0.0000	1.0743	1.2165	4.7238	0.3008	0.0000	$ -	$ 5,275	$ 5,973	$ 23,194	$ 1,477
B01B	Ventricular Shunt Revision, Minor Complexity	0	0	4.3	1	15	22%	92%	0.0000	0.0000	0.0000	2.6439	0.3057	0.0000	$ -	$ -	$ -	$ 12,982	$ 1,501
B02A	Cranial Procedures, Major Complexity	0	0	20.2	6	59	20%	122%	0.0000	2.0596	1.4192	10.5748	0.2754	0.0000	$ -	$ 10,113	$ 6,968	$ 51,922	$ 1,352
B02B	Cranial Procedures, Intermediate Complexity	0	0	10.1	3	30	24%	109%	0.0000	1.4128	1.4660	5.8108	0.2760	0.0000	$ -	$ 6,937	$ 7,198	$ 28,531	$ 1,355
B02C	Cranial Procedures, Minor Complexity	0	0	6.1	2	19	27%	93%	0.0000	1.1558	1.3406	3.8370	0.2654	0.0000	$ -	$ 5,675	$ 6,582	$ 18,840	$ 1,303
B03A	Spinal Procedures, Major Complexity	0	0	15.0	5	45	25%	111%	0.0000	1.9601	0.9887	6.9036	0.2566	0.0000	$ -	$ 9,624	$ 4,855	$ 33,897	$ 1,260
B03B	Spinal Procedures, Intermediate Complexity	0	0	4.0	1	13	23%	100%	0.0000	0.0000	0.0000	3.2365	0.2588	0.0000	$ -	$ -	$ -	$ 15,891	$ 1,271
B03C	Spinal Procedures, Minor Complexity	0	0	2.8	1	9	28%	100%	0.0000	0.0000	0.0000	2.2722	0.2961	0.0000	$ -	$ -	$ -	$ 11,157	$ 1,454
B04A	Extracranial Vascular Procedures, Major Complexity	0	0	15.3	4	40	13%	100%	0.0000	1.4888	1.2666	6.5551	0.2983	0.0000	$ -	$ 7,310	$ 6,219	$ 32,186	$ 1,465
B04B	Extracranial Vascular Procedures, Intermediate Complexity	0	0	5.8	1	17	23%	100%	0.0000	0.0000	0.0000	3.3688	0.2597	0.0000	$ -	$ -	$ -	$ 16,541	$ 1,275
B04C	Extracranial Vascular Procedures, Minor Complexity	0	0	2.9	1	8	21%	100%	0.0000	0.0000	0.0000	2.3082	0.2632	0.0000	$ -	$ -	$ -	$ 11,333	$ 1,292
B05Z	Carpal Tunnel Release	0	0	1.0	1	3	26%	100%	0.0000	0.0000	0.0000	0.4206	0.1191	0.0000	$ -	$ -	$ -	$ 2,065	$ 585
B06A	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Major Comp	0	0	15.1	4	45	15%	80%	0.0000	1.0835	1.3397	6.4424	0.2332	0.0000	$ -	$ 5,320	$ 6,578	$ 31,632	$ 1,145
B06B	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Interm Comp	0	0	5.8	2	19	17%	88%	0.0000	0.6365	1.2976	3.2318	0.2347	0.0000	$ -	$ 3,125	$ 6,371	$ 15,868	$ 1,152
B06C	Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy, Minor Comp	1	0	2.4	1	8	21%	170%	0.6264	0.0000	0.0000	1.4682	0.2695	0.0000	$ 3,076	$ -	$ -	$ 7,209	$ 1,323
B07A	Cranial or Peripheral Nerve and Other Nervous System Procedures, Major Comp	0	0	11.9	3	33	13%	106%	0.0000	0.7513	1.1627	4.2392	0.2185	0.0000	$ -	$ 3,689	$ 5,709	$ 20,814	$ 1,073
B07B	Cranial or Peripheral Nerve and Other Nervous System Procedures, Minor Comp	1	0	2.2	1	6	17%	112%	0.6037	0.0000	0.0000	1.3969	0.3131	0.0000	$ 2,964	$ -	$ -	$ 6,859	$ 1,537
B40Z	Plasmapheresis W Neurological Disease, Sameday	0	0	1.0	1	1	12%	100%	0.0000	0.0000	0.0000	0.1851	0.0000	0.0000	$ -	$ -	$ -	$ 909	$ -
B41Z	Telemetric EEG Monitoring	0	0	4.1	1	14	16%	80%	0.0000	0.0000	0.0000	1.6355	0.3158	0.0000	$ -	$ -	$ -	$ 8,030	$ 1,551
B42A	Nervous System Disorders W Ventilator Support, Major Complexity	0	0	11.7	4	39	8%	131%	0.0000	0.0325	1.4962	6.0171	0.2949	0.0000	$ -	$ 160	$ 7,346	$ 29,544	$ 1,448
B42B	Nervous System Disorders W Ventilator Support, Minor Complexity	0	0	3.5	1	10	11%	160%	0.0000	0.0000	0.0000	2.1248	0.3200	0.0000	$ -	$ -	$ -	$ 10,433	$ 1,571
B60A	Acute Paraplegia and Quadriplegia W or W/O OR Procedures, Major Complexity	0	0	49.6	15	137	14%	100%	0.0000	0.5230	1.1047	17.0932	0.2788	0.0000	$ -	$ 2,568	$ 5,424	$ 83,928	$ 1,369
B60B	Acute Paraplegia and Quadriplegia W or W/O OR Procedures, Minor Complexity	0	0	11.9	3	33	14%	100%	0.0000	0.0000	1.3745	4.1234	0.2535	0.0000	$ -	$ -	$ 6,749	$ 20,246	$ 1,245
B61A	Spinal Cord Conditions W or W/O OR Procedures, Major Complexity	0	0	20.7	13	31	20%	100%	0.0000	0.7626	0.5538	7.9616	0.2834	0.0000	$ -	$ 3,744	$ 2,719	$ 39,091	$ 1,391
B61B	Spinal Cord Conditions W or W/O OR Procedures, Minor Complexity	0	0	5.8	2	18	15%	91%	0.0000	0.1531	1.2370	2.6270	0.3007	0.0000	$ -	$ 752	$ 6,074	$ 12,899	$ 1,476
B62Z	Apheresis	0	0	1.0	1	3	2%	120%	0.0000	0.0000	0.0000	0.2441	0.1953	0.0000	$ -	$ -	$ -	$ 1,199	$ 959
B63A	Dementia and Other Chronic Disturbances of Cerebral Function, Major Complexity	0	0	19.6	7	64	5%	100%	0.0000	0.0000	0.6828	4.7796	0.1935	0.0000	$ -	$ -	$ -	$ 3,353	$ 23,468	$ 950
B63B	Dementia and Other Chronic Disturbances of Cerebral Function, Minor Complexity	0	0	9.2	3	29	5%	100%	0.0000	0.0000	0.7579	2.2737	0.1759	0.0000	$ -	$ -	$ -	$ 3,721	$ 11,164	$ 864
B64A	Delirium, Major Complexity	0	0	9.7	3	31	9%	100%	0.0000	0.0000	0.7994	2.3982	0.2117	0.0000	$ -	$ -	$ -	$ 3,925	$ 11,775	$ 1,039
B64B	Delirium, Minor Complexity	1	0	3.6	1	11	11%	100%	0.1007	0.0000	0.0000	0.8113	0.2121	0.0000	$ 494	$ -	$ -	$ 3,983	$ 1,041
B65A	Cerebral Palsy, Major Complexity	1	0	8.5	3	27	9%	100%	0.3780	0.0000	1.0009	3.0026	0.2593	0.0000	$ 1,856	$ -	$ 4,914	$ 14,743	$ 1,273
B65B	Cerebral Palsy, Minor Complexity	0	0	1.0	1	3	18%	133%	0.0000	0.0000	0.0000	0.2666	0.1522	0.0000	$ -	$ -	$ -	$ 1,309	$ 747
B66A	Nervous System Neoplasms, Major Complexity	0	0	11.4	3	31	7%	95%	0.0000	0.0000	1.0069	3.0208	0.2136	0.0000	$ -	$ -	$ 4,944	$ 14,832	$ 1,049
B66B	Nervous System Neoplasms, Minor Complexity	1	0	4.9	1	15	14%	107%	0.3180	0.0000	0.0000	1.3032	0.2343	0.0000	$ 1,561	$ -	$ -	$ 6,399	$ 1,150
B67A	Degenerative Nervous System Disorders, Major Complexity	0	0	12.2	3	36	7%	139%	0.0000	0.0000	0.9486	2.8457	0.2160	0.0000	$ -	$ -	$ 4,658	$ 13,972	$ 1,061
B67B	Degenerative Nervous System Disorders, Intermediate Complexity	1	0	5.0	1	15	10%	140%	0.1754	0.0000	0.0000	1.1011	0.2110	0.0000	$ 861	$ -	$ -	$ 5,406	$ 1,036
B67C	Degenerative Nervous System Disorders, Minor Complexity	0	0	1.1	1	3	10%	200%	0.0000	0.0000	0.0000	0.1405	0.0997	0.0000	$ -	$ -	$ -	$ 690	$ 490
B68A	Multiple Sclerosis and Cerebellar Ataxia, Major Complexity	1	0	8.4	2	24	9%	145%	0.2232	0.0000	1.0135	2.0270	0.2549	0.0000	$ 1,096	$ -	$ 4,976	$ 9,953	$ 1,252
B68B	Multiple Sclerosis and Cerebellar Ataxia, Minor Complexity	0	0	1.1	1	3	4%	170%	0.0000	0.0000	0.0000	0.2937	0.2295	0.0000	$ -	$ -	$ -	$ 1,442	$ 1,127
B69A	TIA and Precerebral Occlusion, Major Complexity	0	0	5.0	1	14	17%	100%	0.0000	0.0000	0.0000	1.1445	0.2275	0.0000	$ -	$ -	$ -	$ 5,619	$ 1,117
B69B	TIA and Precerebral Occlusion, Minor Complexity	0	0	1.9	1	6	23%	100%	0.0000	0.0000	0.0000	0.4583	0.2485	0.0000	$ -	$ -	$ -	$ 2,250	$ 1,220
B70A	Stroke and Other Cerebrovascular Disorders, Major Complexity	0	0	20.7	7	64	8%	100%	0.0000	0.0000	0.7960	5.5718	0.2305	0.0000	$ -	$ -	$ 3,908	$ 27,358	$ 1,132
B70B	Stroke and Other Cerebrovascular Disorders, Intermediate Complexity	0	0	8.2	2	25	11%	100%	0.0000	0.0000	1.0796	2.1592	0.2338	0.0000	$ -	$ -	$ 5,301	$ 10,602	$ 1,148
B70C	Stroke and Other Cerebrovascular Disorders, Minor Complexity	1	0	4.5	1	14	15%	196%	0.2091	0.0000	0.0000	1.1747	0.2449	0.0000	$ 1,027	$ -	$ -	$ 5,768	$ 1,202
B70D	Stroke and Other Cerebrovascular Disorders, Transferred <5 Days	1	0	2.3	1	4	17%	100%	0.1666	0.0000	0.0000	0.7087	0.0000	0.0000	$ 818	$ -	$ -	$ 3,480	$ -
B71A	Cranial and Peripheral Nerve Disorders, Major Complexity	1	0	6.0	2	19	11%	150%	0.1616	0.0000	0.8468	1.6936	0.2285	0.0000	$ 793	$ -	$ 4,158	$ 8,316	$ 1,122
B71B	Cranial and Peripheral Nerve Disorders, Minor Complexity	0	0	1.2	1	4	12%	200%	0.0000	0.0000	0.0000	0.1604	0.1060	0.0000	$ -	$ -	$ -	$ 788	$ 520
B72A	Nervous System Infection Except Viral Meningitis, Major Complexity	0	0	12.6	4	39	10%	118%	0.0000	0.0000	0.9770	3.9079	0.2432	0.0000	$ -	$ -	$ 4,797	$ 19,188	$ 1,194

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
B72B	Nervous System Infection Except Viral Meningitis, Minor Complexity	0	0	3.9	1	13	11%	186%	0.0000	0.0000	0.0000	0.8331	0.2350	0.0000	$ -	$ -	$ -	$ 4,091	$ 1,154
B73Z	Viral Meningitis	0	0	3.0	1	10	12%	125%	0.0000	0.0000	0.0000	0.6762	0.2092	0.0000	$ -	$ -	$ -	$ 3,320	$ 1,027
B74A	Nontraumatic Stupor and Coma, Major Complexity	0	0	5.3	1	18	10%	100%	0.0000	0.0000	0.0000	1.3390	0.2444	0.0000	$ -	$ -	$ -	$ 6,574	$ 1,200
B74B	Nontraumatic Stupor and Coma, Minor Complexity	0	0	1.7	1	5	13%	100%	0.0000	0.0000	0.0000	0.3339	0.2437	0.0000	$ -	$ -	$ -	$ 1,639	$ 1,197
B75Z	Febrile Convulsions	0	0	1.3	1	4	11%	89%	0.0000	0.0000	0.0000	0.3398	0.2601	0.0000	$ -	$ -	$ -	$ 1,668	$ 1,277
B76A	Seizures, Major Complexity	1	0	5.1	1	15	9%	132%	0.1678	0.0000	0.0000	1.2873	0.2511	0.0000	$ 824	$ -	$ -	$ 6,321	$ 1,233
B76B	Seizures, Minor Complexity	1	0	1.9	1	6	13%	176%	0.1277	0.0000	0.0000	0.4955	0.2591	0.0000	$ 627	$ -	$ -	$ 2,433	$ 1,272
B77A	Headaches, Major Complexity	1	0	3.2	1	10	12%	136%	0.1174	0.0000	0.0000	0.8035	0.2475	0.0000	$ 576	$ -	$ -	$ 3,945	$ 1,215
B77B	Headaches, Minor Complexity	0	0	1.2	1	4	18%	200%	0.0000	0.0000	0.0000	0.1923	0.1264	0.0000	$ -	$ -	$ -	$ 944	$ 621
B78A	Intracranial Injuries, Major Complexity	0	0	11.1	3	33	9%	100%	0.0000	0.0000	1.0041	3.0123	0.2401	0.0000	$ -	$ -	$ 4,930	$ 14,790	$ 1,179
B78B	Intracranial Injuries, Minor Complexity	0	0	3.5	1	11	11%	120%	0.0000	0.0000	0.0000	0.9087	0.2548	0.0000	$ -	$ -	$ -	$ 4,462	$ 1,251
B78C	Intracranial Injuries, Transferred <5 Days	0	0	1.6	1	4	19%	100%	0.0000	0.0000	0.0000	0.4364	0.0000	0.0000	$ -	$ -	$ -	$ 2,143	$ -
B79A	Skull Fractures, Major Complexity	0	0	4.8	1	13	9%	105%	0.0000	0.0000	0.0000	1.1386	0.2335	0.0000	$ -	$ -	$ -	$ 5,591	$ 1,146
B79B	Skull Fractures, Minor Complexity	0	0	1.5	1	5	9%	155%	0.0000	0.0000	0.0000	0.3753	0.2210	0.0000	$ -	$ -	$ -	$ 1,843	$ 1,085
B80A	Other Head Injuries, Major Complexity	1	0	4.0	1	12	16%	88%	0.1148	0.0000	0.0000	0.8579	0.2129	0.0000	$ 564	$ -	$ -	$ 4,212	$ 1,045
B80B	Other Head Injuries, Minor Complexity	0	0	1.1	1	3	20%	90%	0.0000	0.0000	0.0000	0.1567	0.1180	0.0000	$ -	$ -	$ -	$ 769	$ 579
B81A	Other Disorders of the Nervous System, Major Complexity	0	0	9.4	3	28	10%	129%	0.0000	0.0000	0.8124	2.4372	0.2073	0.0000	$ -	$ -	$ 3,989	$ 11,967	$ 1,018
B81B	Other Disorders of the Nervous System, Minor Complexity	1	0	4.0	1	11	16%	139%	0.2607	0.0000	0.0000	0.8454	0.2195	0.0000	$ 1,280	$ -	$ -	$ 4,151	$ 1,078
B82A	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Major Complexity	0	0	35.8	12	111	8%	100%	0.0000	0.4105	0.9073	11.2979	0.2504	0.0000	$ -	$ 2,016	$ 4,455	$ 55,473	$ 1,229
B82B	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Intermediate Complexity	0	0	9.4	6	14	9%	154%	0.0000	0.1228	0.4670	2.9247	0.2393	0.0000	$ -	$ 603	$ 2,293	$ 14,360	$ 1,175
B82C	Chronic & Unspec Para/Quadriplegia W or W/O OR Proc, Minor Complexity	0	0	3.6	1	11	10%	93%	0.0000	0.0000	0.0000	0.9511	0.2493	0.0000	$ -	$ -	$ -	$ 4,670	$ 1,224
C01A	Procedures for Penetrating Eye Injury, Major Complexity	0	0	4.2	1	13	8%	100%	0.0000	0.0000	0.0000	2.4091	0.3762	0.0000	$ -	$ -	$ -	$ 11,829	$ 1,847
C01B	Procedures for Penetrating Eye Injury, Minor Complexity	0	0	2.0	1	6	10%	100%	0.0000	0.0000	0.0000	1.2440	0.4185	0.0000	$ -	$ -	$ -	$ 6,108	$ 2,055
C02Z	Enucleations and Orbital Procedures	1	0	4.3	1	12	20%	135%	0.6286	0.0000	0.0000	2.2449	0.3654	0.0000	$ 3,086	$ -	$ -	$ 11,022	$ 1,794
C03A	Retinal Procedures, Major Complexity	0	0	1.5	1	4	77%	135%	0.0000	0.0000	0.0000	0.8825	0.2928	0.0000	$ -	$ -	$ -	$ 4,333	$ 1,438
C03B	Retinal Procedures, Minor Complexity	0	0	1.0	1	3	69%	200%	0.0000	0.0000	0.0000	0.4033	0.1935	0.0000	$ -	$ -	$ -	$ 1,980	$ 950
C04A	Major Corneal, Scleral and Conjunctival Procedures, Major Complexity	0	0	4.4	1	14	45%	100%	0.0000	0.0000	0.0000	2.0900	0.3255	0.0000	$ -	$ -	$ -	$ 10,262	$ 1,598
C04B	Major Corneal, Scleral and Conjunctival Procedures, Minor Complexity	0	0	1.4	1	4	45%	100%	0.0000	0.0000	0.0000	1.2469	0.3366	0.0000	$ -	$ -	$ -	$ 6,122	$ 1,653
C05Z	Dacryocystorhinostomy	0	0	1.1	1	3	43%	100%	0.0000	0.0000	0.0000	0.9248	0.3509	0.0000	$ -	$ -	$ -	$ 4,541	$ 1,723
C10Z	Strabismus Procedures	0	0	1.0	1	3	22%	112%	0.0000	0.0000	0.0000	0.7727	0.2627	0.0000	$ -	$ -	$ -	$ 3,794	$ 1,290
C11Z	Eyelid Procedures	1	0	2.1	1	6	30%	107%	0.5735	0.0000	0.0000	1.0638	0.2560	0.0000	$ 2,816	$ -	$ -	$ 5,223	$ 1,257
C12Z	Other Corneal, Scleral and Conjunctival Procedures	0	0	1.4	1	4	29%	115%	0.0000	0.0000	0.0000	0.6887	0.2560	0.0000	$ -	$ -	$ -	$ 3,382	$ 1,257
C13Z	Lacrimal Procedures	0	0	1.1	1	3	31%	92%	0.0000	0.0000	0.0000	0.4579	0.1701	0.0000	$ -	$ -	$ -	$ 2,248	$ 835
C14A	Other Eye Procedures, Major Complexity	0	0	3.6	1	11	7%	84%	0.0000	0.0000	0.0000	1.0677	0.2374	0.0000	$ -	$ -	$ -	$ 5,242	$ 1,166
C14B	Other Eye Procedures, Minor Complexity	0	0	1.0	1	3	38%	119%	0.0000	0.0000	0.0000	0.4364	0.1790	0.0000	$ -	$ -	$ -	$ 2,143	$ 879
C15Z	Glaucoma and Complex Cataract Procedures	0	0	1.3	1	4	37%	150%	0.0000	0.0000	0.0000	0.7712	0.2620	0.0000	$ -	$ -	$ -	$ 3,787	$ 1,286
C16Z	Lens Procedures	0	0	1.0	1	4	86%	177%	0.0000	0.0000	0.0000	0.5459	0.2312	0.0000	$ -	$ -	$ -	$ 2,680	$ 1,135
C60A	Acute and Major Eye Infections, Major Complexity	0	0	7.3	2	25	4%	100%	0.0000	0.0000	1.1055	2.2109	0.2886	0.0000	$ -	$ -	$ 5,428	$ 10,856	$ 1,417
C60B	Acute and Major Eye Infections, Minor Complexity	0	0	3.4	1	11	4%	122%	0.0000	0.0000	0.0000	0.9950	0.3072	0.0000	$ -	$ -	$ -	$ 4,885	$ 1,508
C61A	Neurological and Vascular Disorders of the Eye, Major Complexity	1	0	4.2	1	14	16%	135%	0.2360	0.0000	0.0000	1.1330	0.2415	0.0000	$ 1,159	$ -	$ -	$ 5,563	$ 1,186
C61B	Neurological and Vascular Disorders of the Eye, Minor Complexity	1	0	2.8	1	8	14%	180%	0.1676	0.0000	0.0000	0.7539	0.2379	0.0000	$ 823	$ -	$ -	$ 3,702	$ 1,168
C62A	Hyphaema and Medically Managed Trauma to the Eye, Major Complexity	1	0	4.2	1	11	10%	180%	0.1235	0.0000	0.0000	0.8682	0.2184	0.0000	$ 606	$ -	$ -	$ 4,263	$ 1,072
C62B	Hyphaema and Medically Managed Trauma to the Eye, Minor Complexity	0	0	1.2	1	4	17%	197%	0.0000	0.0000	0.0000	0.2027	0.1410	0.0000	$ -	$ -	$ -	$ 995	$ 692
C63A	Other Disorders of the Eye, Major Complexity	1	0	4.5	1	15	7%	107%	0.2410	0.0000	0.0000	1.2736	0.2611	0.0000	$ 1,183	$ -	$ -	$ 6,253	$ 1,282
C63B	Other Disorders of the Eye, Intermediate Complexity	1	0	2.5	1	8	14%	185%	0.2054	0.0000	0.0000	0.6667	0.2607	0.0000	$ 1,009	$ -	$ -	$ 3,273	$ 1,280
C63C	Other Disorders of the Eye, Minor Complexity	1	0	2.2	1	6	20%	200%	0.1538	0.0000	0.0000	0.4792	0.2712	0.0000	$ 755	$ -	$ -	$ 2,353	$ 1,332
D01Z	Cochlear Implant	0	0	1.2	1	3	77%	128%	0.0000	0.0000	0.0000	6.4732	0.9117	0.0000	$ -	$ -	$ -	$ 31,783	$ 4,476
D02A	Head and Neck Procedures, Major Complexity	0	0	11.4	3	35	18%	100%	0.0000	1.2946	1.7286	6.4804	0.3554	0.0000	$ -	$ 6,356	$ 8,487	$ 31,819	$ 1,745
D02B	Head and Neck Procedures, Intermediate Complexity	0	0	4.2	1	14	16%	100%	0.0000	0.0000	0.0000	3.1599	0.4477	0.0000	$ -	$ -	$ -	$ 15,515	$ 2,198
D02C	Head and Neck Procedures, Minor Complexity	0	0	2.1	1	7	16%	100%	0.0000	0.0000	0.0000	1.6311	0.4786	0.0000	$ -	$ -	$ -	$ 8,009	$ 2,350
D03Z	Surgical Repair for Cleft Lip and Palate Disorders	0	0	2.3	1	7	11%	113%	0.0000	0.0000	0.0000	1.6629	0.3751	0.0000	$ -	$ -	$ -	$ 8,165	$ 1,842
D04A	Maxillo Surgery, Major Complexity	0	0	2.5	1	8	15%	100%	0.0000	0.0000	0.0000	2.2364	0.4091	0.0000	$ -	$ -	$ -	$ 10,981	$ 2,009
D04B	Maxillo Surgery, Minor Complexity	0	0	1.6	1	5	16%	122%	0.0000	0.0000	0.0000	1.4127	0.4489	0.0000	$ -	$ -	$ -	$ 6,936	$ 2,204
D05Z	Parotid Gland Procedures	0	0	2.4	1	7	20%	100%	0.0000	0.0000	0.0000	2.3005	0.4347	0.0000	$ -	$ -	$ -	$ 11,295	$ 2,134
D06Z	Sinus and Complex Middle Ear Procedures	0	0	1.2	1	4	34%	100%	0.0000	0.0000	0.0000	1.1903	0.3947	0.0000	$ -	$ -	$ -	$ 5,844	$ 1,938
D10Z	Nasal Procedures	0	0	1.1	1	3	25%	88%	0.0000	0.0000	0.0000	0.9421	0.3747	0.0000	$ -	$ -	$ -	$ 4,626	$ 1,840
D11Z	Tonsillectomy and Adenoidectomy	0	0	1.1	1	3	20%	100%	0.0000	0.0000	0.0000	0.7080	0.3601	0.0000	$ -	$ -	$ -	$ 3,476	$ 1,768
D12A	Other Ear, Nose, Mouth and Throat Procedures, Major Complexity	1	0	5.4	1	16	17%	123%	0.5994	0.0000	0.0000	2.1283	0.2684	0.0000	$ 2,943	$ -	$ -	$ 10,450	$ 1,318
D12B	Other Ear, Nose, Mouth and Throat Procedures, Minor Complexity	0	0	1.3	1	4	23%	110%	0.0000	0.0000	0.0000	0.7457	0.2407	0.0000	$ -	$ -	$ -	$ 3,661	$ 1,182
D13Z	Myringotomy W Tube Insertion	0	0	1.1	1	3	27%	100%	0.0000	0.0000	0.0000	0.4120	0.1414	0.0000	$ -	$ -	$ -	$ 2,023	$ 694
D14A	Mouth and Salivary Gland Procedures, Major Complexity	0	0	2.0	1	6	12%	112%	0.0000	0.0000	0.0000	0.9719	0.3074	0.0000	$ -	$ -	$ -	$ 4,772	$ 1,509
D14B	Mouth and Salivary Gland Procedures, Minor Complexity	0	0	1.1	1	3	18%	111%	0.0000	0.0000	0.0000	0.5477	0.1984	0.0000	$ -	$ -	$ -	$ 2,689	$ 974
D15Z	Mastoid Procedures	0	0	2.0	1	6	21%	94%	0.0000	0.0000	0.0000	1.9722	0.5686	0.0000	$ -	$ -	$ -	$ 9,684	$ 2,792
D40Z	Dental Extractions and Restorations	0	0	1.1	1	3	16%	122%	0.0000	0.0000	0.0000	0.5851	0.1648	0.0000	$ -	$ -	$ -	$ 2,873	$ 809
D60A	Ear, Nose, Mouth and Throat Malignancy, Major Complexity	0	0	9.3	3	29	8%	100%	0.0000	0.1473	1.0464	3.2865	0.2485	0.0000	$ -	$ 723	$ 5,138	$ 16,137	$ 1,220
D60B	Ear, Nose, Mouth and Throat Malignancy, Minor Complexity	1	0	2.5	1	8	10%	136%	0.3428	0.0000	0.0000	0.8969	0.1931	0.0000	$ 1,683	$ -	$ -	$ 4,404	$ 948
D61A	Dysequilibrium, Major Complexity	1	0	3.8	1	11	14%	100%	0.0956	0.0000	0.0000	0.8271	0.2090	0.0000	$ 469	$ -	$ -	$ 4,061	$ 1,026
D61B	Dysequilibrium, Minor Complexity	0	0	1.4	1	4	17%	152%	0.0000	0.0000	0.0000	0.2429	0.1744	0.0000	$ -	$ -	$ -	$ 1,193	$ 856
D62A	Epistaxis, Major Complexity	0	0	3.9	1	12	10%	100%	0.0000	0.0000	0.0000	0.9139	0.2309	0.0000	$ -	$ -	$ -	$ 4,487	$ 1,134
D62B	Epistaxis, Minor Complexity	0	0	1.4	1	4	10%	125%	0.0000	0.0000	0.0000	0.2748	0.1758	0.0000	$ -	$ -	$ -	$ 1,349	$ 863
D63A	Otitis Media and Upper Respiratory Infections, Major Complexity	1	0	3.4	1	9	10%	123%	0.1341	0.0000	0.0000	0.7798	0.2160	0.0000	$ 658	$ -	$ -	$ 3,829	$ 1,061
D63B	Otitis Media and Upper Respiratory Infections, Minor Complexity	0	0	1.3	1	4	9%	120%	0.0000	0.0000	0.0000	0.2599	0.2032	0.0000	$ -	$ -	$ -	$ 1,276	$ 998
D64A	Laryngotracheitis and Epiglottitis, Major Complexity	0	0	1.8	1	5	9%	100%	0.0000	0.0000	0.0000	0.6090	0.3696	0.0000	$ -	$ -	$ -	$ 2,990	$ 1,815
D64B	Laryngotracheitis and Epiglottitis, Minor Complexity	0	0	1.1	1	3	9%	80%	0.0000	0.0000	0.0000	0.2252	0.1719	0.0000	$ -	$ -	$ -	$ 1,106	$ 844
D65A	Nasal Trauma and Deformity, Major Complexity	0	0	2.9	1	8	16%	100%	0.0000	0.0000	0.0000	0.5543	0.1953	0.0000	$ -	$ -	$ -	$ 2,722	$ 959

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
D65B	Nasal Trauma and Deformity, Minor Complexity	0	0	1.1	1	3	20%	115%	0.0000	0.0000	0.0000	0.2911	0.1321	0.0000	$ -	$ -	$ -	$ 1,429	$ 649
D66A	Other Ear, Nose, Mouth and Throat Disorders, Major Complexity	1	0	4.0	1	11	11%	108%	0.2740	0.0000	0.0000	0.9816	0.2456	0.0000	$ 1,345	$ -	$ -	$ 4,820	$ 1,206
D66B	Other Ear, Nose, Mouth and Throat Disorders, Minor Complexity	0	0	1.2	1	4	17%	118%	0.0000	0.0000	0.0000	0.2848	0.2190	0.0000	$ -	$ -	$ -	$ 1,398	$ 1,075
D67A	Oral and Dental Disorders, Major Complexity	1	0	4.0	1	12	9%	141%	0.1868	0.0000	0.0000	0.9959	0.2304	0.0000	$ 917	$ -	$ -	$ 4,890	$ 1,131
D67B	Oral and Dental Disorders, Minor Complexity	0	0	1.2	1	4	15%	136%	0.0000	0.0000	0.0000	0.2961	0.1555	0.0000	$ -	$ -	$ -	$ 1,454	$ 764
E01A	Major Chest Procedures, Major Complexity	0	0	18.8	6	57	15%	89%	0.0000	1.3407	1.1026	7.9564	0.2874	0.0000	$ -	$ 6,583	$ 5,414	$ 39,066	$ 1,411
E01B	Major Chest Procedures, Intermediate Complexity	0	0	10.1	3	32	19%	100%	0.0000	0.9234	1.2595	4.7019	0.2619	0.0000	$ -	$ 4,534	$ 6,184	$ 23,086	$ 1,286
E01C	Major Chest Procedures, Minor Complexity	0	0	5.7	2	19	24%	115%	0.0000	0.4148	1.3893	3.1935	0.2708	0.0000	$ -	$ 2,037	$ 6,821	$ 15,680	$ 1,330
E02A	Other Respiratory System OR Procedures, Major Complexity	0	0	12.3	4	39	13%	132%	0.0000	0.5624	1.0174	4.6319	0.2618	0.0000	$ -	$ 2,761	$ 4,995	$ 22,743	$ 1,285
E02B	Other Respiratory System OR Procedures, Intermediate Complexity	1	0	3.3	1	11	18%	80%	0.5658	0.0000	0.0000	1.8189	0.3149	0.0000	$ 2,778	$ -	$ -	$ 8,931	$ 1,546
E02C	Other Respiratory System OR Procedures, Minor Complexity	0	0	1.1	1	3	21%	100%	0.0000	0.0000	0.0000	0.7747	0.3096	0.0000	$ -	$ -	$ -	$ 3,804	$ 1,520
E40A	Respiratory System Disorders W Ventilator Support, Major Complexity	0	0	11.2	3	31	10%	95%	0.0000	0.0596	1.7738	5.3809	0.2847	0.0000	$ -	$ 293	$ 8,709	$ 26,420	$ 1,398
E40B	Respiratory System Disorders W Ventilator Support, Minor Complexity	0	0	4.8	1	15	11%	80%	0.0000	0.0000	0.0000	2.9517	0.4107	0.0000	$ -	$ -	$ -	$ 14,493	$ 2,017
E41A	Respiratory System Disorders W Non-Invasive Ventilation, Major Complexity	0	0	11.0	3	34	9%	85%	0.0000	0.0234	1.4327	4.3216	0.2864	0.0000	$ -	$ 115	$ 7,035	$ 21,219	$ 1,406
E41B	Respiratory System Disorders W Non-Invasive Ventilation, Minor Complexity	0	0	6.3	2	21	9%	80%	0.0000	0.0359	1.1869	2.4096	0.2800	0.0000	$ -	$ 176	$ 5,828	$ 11,831	$ 1,375
E42A	Bronchoscopy, Major Complexity	0	0	8.5	5	13	13%	135%	0.0000	0.2383	0.5436	2.9564	0.2494	0.0000	$ -	$ 1,170	$ 2,669	$ 14,516	$ 1,225
E42B	Bronchoscopy, Minor Complexity	1	0	3.7	1	11	25%	114%	0.3939	0.0000	0.0000	1.3980	0.2373	0.0000	$ 1,934	$ -	$ -	$ 6,864	$ 1,165
E60A	Cystic Fibrosis, Major Complexity	0	0	12.0	3	36	4%	131%	0.0000	0.0000	1.3322	3.9967	0.2641	0.0000	$ -	$ -	$ 6,541	$ 19,624	$ 1,297
E60B	Cystic Fibrosis, Minor Complexity	0	0	8.5	2	25	3%	128%	0.0000	0.0000	1.4383	2.8766	0.2177	0.0000	$ -	$ -	$ 7,062	$ 14,124	$ 1,069
E61A	Pulmonary Embolism, Major Complexity	0	0	6.9	2	23	15%	100%	0.0000	0.0000	0.9080	1.8160	0.2097	0.0000	$ -	$ -	$ 4,458	$ 8,917	$ 1,030
E61B	Pulmonary Embolism, Minor Complexity	1	0	3.7	1	11	18%	100%	0.1583	0.0000	0.0000	0.8610	0.1615	0.0000	$ 777	$ -	$ -	$ 4,228	$ 793
E62A	Respiratory Infections and Inflammations, Major Complexity	0	0	6.7	2	21	10%	93%	0.0000	0.0000	0.8602	1.7204	0.2271	0.0000	$ -	$ -	$ 4,224	$ 8,447	$ 1,115
E62B	Respiratory Infections and Inflammations, Minor Complexity	1	0	3.1	1	10	11%	82%	0.1046	0.0000	0.0000	0.7653	0.2182	0.0000	$ 514	$ -	$ -	$ 3,758	$ 1,071
E63A	Sleep Apnoea, Major Complexity	0	0	2.3	1	7	11%	123%	0.0000	0.0000	0.0000	0.5980	0.2085	0.0000	$ -	$ -	$ -	$ 2,936	$ 1,024
E63B	Sleep Apnoea, Minor Complexity	0	0	1.2	1	4	33%	107%	0.0000	0.0000	0.0000	0.2463	0.1530	0.0000	$ -	$ -	$ -	$ 1,209	$ 751
E64A	Pulmonary Oedema and Respiratory Failure, Major Complexity	0	0	6.6	2	20	9%	100%	0.0000	0.0000	0.9574	1.9147	0.2316	0.0000	$ -	$ -	$ 4,701	$ 9,401	$ 1,137
E64B	Pulmonary Oedema and Respiratory Failure, Minor Complexity	0	0	3.1	1	9	10%	100%	0.0000	0.0000	0.0000	0.7920	0.2319	0.0000	$ -	$ -	$ -	$ 3,889	$ 1,139
E65A	Chronic Obstructive Airways Disease, Major Complexity	0	0	6.7	2	21	9%	200%	0.0000	0.0000	0.8145	1.6289	0.2140	0.0000	$ -	$ -	$ 3,999	$ 7,998	$ 1,051
E65B	Chronic Obstructive Airways Disease, Minor Complexity	0	0	3.2	1	10	10%	200%	0.0000	0.0000	0.0000	0.7083	0.2118	0.0000	$ -	$ -	$ -	$ 3,478	$ 1,040
E66A	Major Chest Trauma, Major Complexity	0	0	7.0	2	22	11%	100%	0.0000	0.0000	0.9101	1.8202	0.2198	0.0000	$ -	$ -	$ 4,469	$ 8,937	$ 1,079
E66B	Major Chest Trauma, Minor Complexity	0	0	2.3	1	7	13%	100%	0.0000	0.0000	0.0000	0.5077	0.2387	0.0000	$ -	$ -	$ -	$ 2,493	$ 1,172
E67A	Respiratory Signs and Symptoms, Major Complexity	1	0	3.7	1	11	14%	89%	0.2071	0.0000	0.0000	0.9037	0.2353	0.0000	$ 1,017	$ -	$ -	$ 4,437	$ 1,155
E67B	Respiratory Signs and Symptoms, Minor Complexity	0	0	1.2	1	4	15%	80%	0.0000	0.0000	0.0000	0.2696	0.2078	0.0000	$ -	$ -	$ -	$ 1,324	$ 1,020
E68A	Pneumothorax, Major Complexity	0	0	5.9	1	17	12%	100%	0.0000	0.0000	0.0000	1.5885	0.2594	0.0000	$ -	$ -	$ -	$ 7,800	$ 1,274
E68B	Pneumothorax, Minor Complexity	0	0	2.5	1	8	11%	114%	0.0000	0.0000	0.0000	0.6626	0.2690	0.0000	$ -	$ -	$ -	$ 3,253	$ 1,321
E69A	Bronchitis and Asthma, Major Complexity	0	0	3.6	1	10	10%	90%	0.0000	0.0000	0.0000	0.8747	0.2277	0.0000	$ -	$ -	$ -	$ 4,295	$ 1,118
E69B	Bronchitis and Asthma, Minor Complexity	0	0	1.5	1	4	8%	80%	0.0000	0.0000	0.0000	0.3388	0.2541	0.0000	$ -	$ -	$ -	$ 1,664	$ 1,248
E70A	Whooping Cough and Acute Bronchiolitis, Major Complexity	0	0	3.0	1	10	5%	100%	0.0000	0.0000	0.0000	1.0543	0.3481	0.0000	$ -	$ -	$ -	$ 5,177	$ 1,709
E70B	Whooping Cough and Acute Bronchiolitis, Minor Complexity	0	0	1.7	1	6	5%	81%	0.0000	0.0000	0.0000	0.6092	0.3742	0.0000	$ -	$ -	$ -	$ 2,991	$ 1,837
E71A	Respiratory Neoplasms, Major Complexity	0	0	9.6	3	29	9%	100%	0.0000	0.0000	0.8644	2.5932	0.2084	0.0000	$ -	$ -	$ 4,244	$ 12,733	$ 1,023
E71B	Respiratory Neoplasms, Minor Complexity	1	0	4.7	1	14	13%	143%	0.2812	0.0000	0.0000	1.0985	0.2135	0.0000	$ 1,381	$ -	$ -	$ 5,394	$ 1,048
E72Z	Respiratory Problems Arising from Neonatal Period	0	0	2.8	1	11	10%	80%	0.0000	0.0000	0.0000	0.7866	0.3554	0.0000	$ -	$ -	$ -	$ 3,862	$ 1,745
E73A	Pleural Effusion, Major Complexity	0	0	9.4	3	31	13%	100%	0.0000	0.0000	0.8308	2.4923	0.2311	0.0000	$ -	$ -	$ 4,079	$ 12,237	$ 1,135
E73B	Pleural Effusion, Intermediate Complexity	0	0	4.4	1	13	18%	100%	0.0000	0.0000	0.0000	1.0211	0.2172	0.0000	$ -	$ -	$ -	$ 5,014	$ 1,066
E73C	Pleural Effusion, Minor Complexity	1	0	2.9	1	10	18%	100%	0.1593	0.0000	0.0000	0.6992	0.1988	0.0000	$ 782	$ -	$ -	$ 3,433	$ 976
E74A	Interstitial Lung Disease, Major Complexity	0	0	6.9	2	21	10%	100%	0.0000	0.0000	0.8373	1.6745	0.2108	0.0000	$ -	$ -	$ 4,111	$ 8,222	$ 1,035
E74B	Interstitial Lung Disease, Minor Complexity	1	0	3.7	1	11	10%	84%	0.2355	0.0000	0.0000	0.8562	0.2003	0.0000	$ 1,156	$ -	$ -	$ 4,204	$ 983
E75A	Other Respiratory System Disorders, Major Complexity	0	0	4.6	1	14	10%	127%	0.0000	0.0000	0.0000	1.0674	0.2329	0.0000	$ -	$ -	$ -	$ 5,241	$ 1,144
E75B	Other Respiratory System Disorders, Minor Complexity	1	0	2.0	1	6	12%	100%	0.1034	0.0000	0.0000	0.4963	0.2271	0.0000	$ 508	$ -	$ -	$ 2,437	$ 1,115
E76A	Respiratory Tuberculosis, Major Complexity	0	0	19.1	6	60	10%	100%	0.0000	0.0000	0.7607	4.5641	0.2140	0.0000	$ -	$ -	$ 3,735	$ 22,410	$ 1,051
E76B	Respiratory Tuberculosis, Minor Complexity	0	0	6.4	2	20	10%	100%	0.0000	0.0000	0.9519	1.9037	0.2112	0.0000	$ -	$ -	$ 4,674	$ 9,347	$ 1,037
F01A	Implantation and Replacement of AICD, Total System, Major Complexity	0	0	11.7	4	36	71%	100%	0.0000	4.4151	1.1939	9.1909	0.3138	0.0000	$ -	$ 21,678	$ 5,862	$ 45,127	$ 1,541
F01B	Implantation and Replacement of AICD, Total System, Minor Complexity	1	0	2.7	1	9	94%	100%	3.1212	0.0000	0.0000	5.3423	0.3348	0.0000	$ 15,325	$ -	$ -	$ 26,231	$ 1,644
F02Z	Other AICD Procedures	0	0	4.1	1	12	37%	100%	0.0000	0.0000	0.0000	2.3801	0.3206	0.0000	$ -	$ -	$ -	$ 11,686	$ 1,574
F03A	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation, Major Cc	0	0	21.7	6	63	20%	100%	0.0000	4.5894	1.3856	12.9030	0.3142	0.0000	$ -	$ 22,534	$ 6,803	$ 63,354	$ 1,543
F03B	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation, Minor Cc	0	0	10.4	3	31	20%	100%	0.0000	5.6758	1.2715	9.4903	0.1741	0.0000	$ -	$ 27,868	$ 6,243	$ 46,597	$ 855
F04A	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Major Comp	0	0	20.3	6	59	16%	119%	0.0000	4.7387	1.3946	13.1065	0.2799	0.0000	$ -	$ 23,267	$ 6,847	$ 64,353	$ 1,374
F04B	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Interm Comp	0	0	9.1	3	28	24%	100%	0.0000	4.0731	1.3019	7.9788	0.2780	0.0000	$ -	$ 19,999	$ 6,392	$ 39,176	$ 1,365
F04C	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Invest, Minor Comp	0	0	6.8	2	21	21%	110%	0.0000	4.5478	0.9112	6.3702	0.2766	0.0000	$ -	$ 22,330	$ 4,474	$ 31,278	$ 1,358
F05A	Coronary Bypass W Invasive Cardiac Investigation, Major Complexity	0	0	17.4	6	54	20%	100%	0.0000	2.7956	1.2179	10.1028	0.3053	0.0000	$ -	$ 13,726	$ 5,980	$ 49,605	$ 1,499
F05B	Coronary Bypass W Invasive Cardiac Investigation, Minor Complexity	0	0	12.0	4	36	19%	100%	0.0000	2.3854	1.2548	7.4045	0.3321	0.0000	$ -	$ 11,712	$ 6,161	$ 36,356	$ 1,631
F06A	Coronary Bypass W/O Invasive Cardiac Investigation, Major Complexity	0	0	12.2	4	37	17%	100%	0.0000	2.4423	1.3378	7.7935	0.3231	0.0000	$ -	$ 11,992	$ 6,569	$ 38,266	$ 1,586
F06B	Coronary Bypass W/O Invasive Cardiac Investigation, Minor Complexity	0	0	7.0	2	21	23%	100%	0.0000	2.2596	1.5219	5.3034	0.3076	0.0000	$ -	$ 11,095	$ 7,473	$ 26,040	$ 1,510
F07A	Other Cardiothoracic/Vascular Procedures W CPB Pump, Major Complexity	0	0	15.8	4	40	26%	105%	0.0000	3.2965	2.2092	12.1332	0.3382	0.0000	$ -	$ 16,186	$ 10,847	$ 59,574	$ 1,661
F07B	Other Cardiothoracic/Vascular Procedures W CPB Pump, Intermediate Complexity	0	0	7.7	2	23	26%	100%	0.0000	2.0341	2.7701	7.5742	0.4588	0.0000	$ -	$ 9,987	$ 13,601	$ 37,189	$ 2,253
F07C	Other Cardiothoracic/Vascular Procedures W CPB Pump, Minor Complexity	0	0	6.4	2	20	26%	100%	0.0000	1.9583	1.8327	5.6237	0.3196	0.0000	$ -	$ 9,615	$ 8,999	$ 27,612	$ 1,569
F08A	Major Reconstructive Vascular Procedures W/O CPB Pump, Major Complexity	0	0	18.5	6	55	28%	100%	0.0000	3.3216	1.1109	9.9870	0.2687	0.0000	$ -	$ 16,309	$ 5,455	$ 49,036	$ 1,319
F08B	Major Reconstructive Vascular Procedures W/O CPB Pump, Intermediate Complexit	0	0	9.2	2	26	25%	100%	0.0000	2.3931	1.7266	5.8463	0.2700	0.0000	$ -	$ 11,750	$ 8,478	$ 28,705	$ 1,326
F08C	Major Reconstructive Vascular Procedures W/O CPB Pump, Minor Complexity	0	0	4.3	1	13	32%	100%	0.0000	0.0000	0.0000	3.6319	0.2829	0.0000	$ -	$ -	$ -	$ 17,833	$ 1,389
F09A	Other Cardiothoracic Procedures W/O CPB Pump, Major Complexity	0	0	11.2	3	33	17%	90%	0.0000	1.1862	1.8163	6.6351	0.2761	0.0000	$ -	$ 5,824	$ 8,918	$ 32,578	$ 1,356
F09B	Other Cardiothoracic Procedures W/O CPB Pump, Intermediate Complexity	0	0	5.4	2	23	23%	112%	0.0000	1.1968	1.4313	4.0593	0.2942	0.0000	$ -	$ 5,876	$ 7,028	$ 19,931	$ 1,445
F09C	Other Cardiothoracic Procedures W/O CPB Pump, Minor Complexity	0	0	2.7	1	8	16%	100%	0.0000	0.0000	0.0000	2.2092	0.3383	0.0000	$ -	$ -	$ -	$ 10,847	$ 1,661
F10A	Interventional Coronary Procedures, Admitted for AMI, Major Complexity	0	0	6.9	2	21	28%	100%	0.0000	0.9120	1.3722	3.6563	0.3112	0.0000	$ -	$ 4,478	$ 6,738	$ 17,952	$ 1,528
F10B	Interventional Coronary Procedures, Admitted for AMI, Minor Complexity	0	0	3.2	1	9	40%	100%	0.0000	0.0000	0.0000	2.1077	0.3017	0.0000	$ -	$ -	$ -	$ 10,349	$ 1,481
F11A	Amputation, Except Upper Limb and Toe, for Circulatory Disorders, Major Comp	0	0	35.1	11	107	12%	100%	0.0000	1.3294	1.0151	12.4959	0.2946	0.0000	$ -	$ 6,527	$ 4,984	$ 61,355	$ 1,446

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
F11B	Amputation, Except Upper Limb and Toe, for Circulatory Disorders, Minor Comp	0	0	16.7	5	54	12%	100%	0.0000	0.7803	1.1760	6.6604	0.3200	0.0000	$ -	$ 3,831	$ 5,774	$ 32,703	$ 1,571
F12A	Implantation and Replacement of Pacemaker, Total System, Major Complexity	0	0	7.8	2	23	44%	100%	0.0000	1.3880	1.3428	4.0736	0.2666	0.0000	$ -	$ 6,815	$ 6,593	$ 20,001	$ 1,309
F12B	Implantation and Replacement of Pacemaker, Total System, Minor Complexity	1	0	2.7	1	8	63%	100%	1.0357	0.0000	0.0000	2.3170	0.2495	0.0000	$ 5,085	$ -	$ -	$ 11,376	$ 1,225
F13A	Amputation, Upper Limb and Toe, for Circulatory Disorders, Major Complexity	0	0	18.1	5	54	12%	100%	0.0000	0.4370	1.2418	6.6461	0.2874	0.0000	$ -	$ 2,146	$ 6,097	$ 32,632	$ 1,411
F13B	Amputation, Upper Limb and Toe, for Circulatory Disorders, Minor Complexity	0	0	7.9	2	22	12%	100%	0.0000	0.4136	1.2849	2.9833	0.2561	0.0000	$ -	$ 2,031	$ 6,309	$ 14,648	$ 1,257
F14A	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Major Comple	0	0	13.6	4	39	17%	120%	0.0000	0.9980	1.2461	5.9826	0.2719	0.0000	$ -	$ 4,900	$ 6,118	$ 29,375	$ 1,335
F14B	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Interm Comp	0	0	4.6	1	14	29%	112%	0.0000	0.0000	0.0000	2.4598	0.2774	0.0000	$ -	$ -	$ -	$ 12,078	$ 1,362
F14C	Vascular Procedures, Except Major Reconstruction, W/O CPB Pump, Minor Comple	1	0	2.0	1	6	39%	135%	0.8217	0.0000	0.0000	1.5559	0.2956	0.0000	$ 4,035	$ -	$ -	$ 7,639	$ 1,451
F15A	Interventional Coronary Procs, Not Adm for AMI, W Stent Implant, Major Comp	0	0	5.4	1	16	37%	100%	0.0000	0.0000	0.0000	2.8763	0.2730	0.0000	$ -	$ -	$ -	$ 14,123	$ 1,340
F15B	Interventional Coronary Procs, Not Adm for AMI, W Stent Implant, Minor Comp	0	0	1.7	1	5	53%	100%	0.0000	0.0000	0.0000	1.6103	0.2811	0.0000	$ -	$ -	$ -	$ 7,907	$ 1,380
F16A	Interventional Coronary Procs, Not Adm for AMI, W/O Stent Implant, Major Comp	0	0	6.0	2	20	29%	100%	0.0000	0.3944	1.1735	2.7413	0.2612	0.0000	$ -	$ 1,937	$ 5,762	$ 13,460	$ 1,282
F16B	Interventional Coronary Procs, Not Adm for AMI, W/O Stent Implant, Minor Comp	0	0	2.0	1	6	37%	100%	0.0000	0.0000	0.0000	1.3500	0.2704	0.0000	$ -	$ -	$ -	$ 6,629	$ 1,328
F17A	Insertion and Replacement of Pacemaker Generator, Major Complexity	0	0	4.8	1	15	74%	100%	0.0000	0.0000	0.0000	2.5821	0.2761	0.0000	$ -	$ -	$ -	$ 12,678	$ 1,356
F17B	Insertion and Replacement of Pacemaker Generator, Minor Complexity	0	0	1.1	1	3	78%	100%	0.0000	0.0000	0.0000	1.3731	0.1897	0.0000	$ -	$ -	$ -	$ 6,742	$ 931
F18A	Other Pacemaker Procedures, Major Complexity	0	0	9.7	2	25	25%	100%	0.0000	0.5936	1.6698	3.9331	0.2899	0.0000	$ -	$ 2,915	$ 8,199	$ 19,312	$ 1,423
F18B	Other Pacemaker Procedures, Minor Complexity	0	0	2.0	1	7	25%	100%	0.0000	0.0000	0.0000	1.1680	0.2732	0.0000	$ -	$ -	$ -	$ 5,735	$ 1,341
F19A	Trans-Vascular Percutaneous Cardiac Intervention, Major Complexity	0	0	6.1	2	19	16%	85%	0.0000	1.1872	1.7418	4.6707	0.2719	0.0000	$ -	$ 5,829	$ 8,552	$ 22,933	$ 1,335
F19B	Trans-Vascular Percutaneous Cardiac Intervention, Minor Complexity	0	0	1.6	1	5	45%	132%	0.0000	0.0000	0.0000	1.9574	0.1406	0.0000	$ -	$ -	$ -	$ 9,611	$ 690
F20Z	Vein Ligation and Stripping	0	0	1.1	1	4	24%	100%	0.0000	0.0000	0.0000	0.9158	0.2908	0.0000	$ -	$ -	$ -	$ 4,497	$ 1,428
F21A	Other Circulatory System OR Procedures, Major Complexity	0	0	18.4	6	59	8%	100%	0.0000	0.3365	0.8866	5.6559	0.2506	0.0000	$ -	$ 1,652	$ 4,353	$ 27,770	$ 1,230
F21B	Other Circulatory System OR Procedures, Intermediate Complexity	1	0	7.3	2	20	12%	100%	0.6992	0.7704	0.9288	2.6281	0.2138	0.0000	$ 3,433	$ 3,783	$ 4,560	$ 12,904	$ 1,050
F21C	Other Circulatory System OR Procedures, Minor Complexity	1	0	2.6	1	8	26%	100%	0.6575	0.0000	0.0000	1.2655	0.1669	0.0000	$ 3,228	$ -	$ -	$ 6,214	$ 819
F40A	Circulatory Disorders W Ventilator Support, Major Complexity	0	0	10.1	6	15	11%	100%	0.0000	0.0872	0.9170	5.5891	0.3408	0.0000	$ -	$ 428	$ 4,502	$ 27,442	$ 1,673
F40B	Circulatory Disorders W Ventilator Support, Minor Complexity	0	0	3.5	1	10	24%	100%	0.0000	0.0000	0.0000	2.1936	0.3804	0.0000	$ -	$ -	$ -	$ 10,771	$ 1,868
F41A	Circulatory Disorders, Adm for AMI W Invasive Cardiac Inves Proc, Major Comp	0	0	6.7	2	21	15%	100%	0.0000	0.2814	1.2055	2.6924	0.2787	0.0000	$ -	$ 1,382	$ 5,919	$ 13,220	$ 1,368
F41B	Circulatory Disorders, Adm for AMI W Invasive Cardiac Inves Proc, Minor Comp	1	0	3.5	1	11	21%	100%	0.5132	0.0000	0.0000	1.5867	0.2806	0.0000	$ 2,520	$ -	$ -	$ 7,791	$ 1,378
F42A	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves Proc, Major Comp	1	0	5.8	1	18	19%	138%	0.6710	0.0000	0.0000	2.2425	0.2545	0.0000	$ 3,295	$ -	$ -	$ 11,011	$ 1,250
F42B	Circulatory Dsrds, Not Adm for AMI W Invasive Cardiac Inves Proc, Minor Comp	1	0	2.5	1	8	32%	197%	0.5771	0.0000	0.0000	1.2685	0.1906	0.0000	$ 2,834	$ -	$ -	$ 6,228	$ 936
F43A	Circulatory Disorders W Non-Invasive Ventilation, Major Complexity	0	0	14.4	4	42	12%	100%	0.0000	0.0182	1.1982	4.8108	0.2543	0.0000	$ -	$ 89	$ 5,883	$ 23,621	$ 1,249
F43B	Circulatory Disorders W Non-Invasive Ventilation, Minor Complexity	0	0	8.1	2	25	11%	100%	0.0000	0.0738	1.4436	2.9610	0.2926	0.0000	$ -	$ 362	$ 7,088	$ 14,539	$ 1,437
F60A	Circulatory Dsrd, Adm for AMI W/O Invas Card Inves Proc	0	0	5.2	1	16	12%	100%	0.0000	0.0000	0.0000	1.3515	0.2411	0.0000	$ -	$ -	$ -	$ 6,636	$ 1,184
F60B	Circulatory Dsrd, Adm for AMI W/O Invas Card Inves Proc, Transf <5 Days	0	0	1.6	1	4	21%	100%	0.0000	0.0000	0.0000	0.5566	0.0000	0.0000	$ -	$ -	$ -	$ 2,733	$ -
F61A	Infective Endocarditis, Major Complexity	0	0	22.4	7	63	10%	100%	0.0000	0.0000	0.0000	0.9326	6.5284	0.2084	0.0000	$ -	$ -	$ 4,579	$ 32,054	$ 1,023
F61B	Infective Endocarditis, Minor Complexity	0	0	9.8	3	33	15%	100%	0.0000	0.0000	0.0000	0.9017	2.7050	0.1327	0.0000	$ -	$ -	$ 4,427	$ 13,282	$ 652
F62A	Heart Failure and Shock, Major Complexity	0	0	8.9	3	27	10%	100%	0.0000	0.0000	0.0000	0.7727	2.3182	0.2249	0.0000	$ -	$ -	$ 3,794	$ 11,382	$ 1,104
F62B	Heart Failure and Shock, Minor Complexity	0	0	3.8	1	12	11%	100%	0.0000	0.0000	0.0000	0.9202	0.2257	0.0000	$ -	$ -	$ -	$ 4,518	$ 1,108
F62C	Heart Failure and Shock, Transferred <5 Days	0	0	1.6	1	4	16%	100%	0.0000	0.0000	0.0000	0.4138	0.0000	0.0000	$ -	$ -	$ -	$ 2,032	$ -
F63A	Venous Thrombosis, Major Complexity	0	0	6.3	2	19	13%	100%	0.0000	0.0000	0.0000	0.7538	1.5075	0.1841	0.0000	$ -	$ -	$ 3,701	$ 7,402	$ 904
F63B	Venous Thrombosis, Minor Complexity	1	0	4.4	1	15	17%	100%	0.1078	0.0000	0.0000	0.6975	0.1095	0.0000	$ 529	$ -	$ -	$ 3,425	$ 538
F64A	Skin Ulcers in Circulatory Disorders, Major Complexity	0	0	11.9	4	38	10%	100%	0.0000	0.0000	0.0000	0.7273	2.9094	0.2059	0.0000	$ -	$ -	$ 3,571	$ 14,285	$ 1,011
F64B	Skin Ulcers in Circulatory Disorders, Intermediate Complexity	1	0	6.4	2	20	11%	100%	0.1177	0.0000	0.0000	0.7798	1.5596	0.2185	0.0000	$ 578	$ -	$ 3,829	$ 7,658	$ 1,073
F64C	Skin Ulcers in Circulatory Disorders, Minor Complexity	1	0	3.4	1	14	16%	100%	0.1760	0.0000	0.0000	0.9943	0.1969	0.0000	$ 864	$ -	$ -	$ 4,882	$ 967
F65A	Peripheral Vascular Disorders, Major Complexity	0	0	6.9	2	21	11%	100%	0.0000	0.0000	0.0000	0.9420	1.8840	0.2168	0.0000	$ -	$ -	$ 4,625	$ 9,250	$ 1,064
F65B	Peripheral Vascular Disorders, Minor Complexity	1	0	2.9	1	9	22%	131%	0.2520	0.0000	0.0000	0.8056	0.1829	0.0000	$ 1,237	$ -	$ -	$ 3,955	$ 898
F66A	Coronary Atherosclerosis, Major Complexity	1	0	4.5	1	14	12%	100%	0.1736	0.0000	0.0000	1.1047	0.2246	0.0000	$ 852	$ -	$ -	$ 5,424	$ 1,103
F66B	Coronary Atherosclerosis, Minor Complexity	0	0	1.4	1	4	21%	100%	0.0000	0.0000	0.0000	0.2987	0.2232	0.0000	$ -	$ -	$ -	$ 1,467	$ 1,096
F67A	Hypertension, Major Complexity	0	0	4.1	1	13	14%	152%	0.0000	0.0000	0.0000	0.9692	0.2354	0.0000	$ -	$ -	$ -	$ 4,759	$ 1,156
F67B	Hypertension, Minor Complexity	1	0	2.0	1	6	16%	100%	0.0810	0.0000	0.0000	0.4296	0.2325	0.0000	$ 398	$ -	$ -	$ 2,109	$ 1,142
F68A	Congenital Heart Disease, Major Complexity	0	0	2.7	1	10	14%	133%	0.0000	0.0000	0.0000	0.8921	0.2739	0.0000	$ -	$ -	$ -	$ 4,380	$ 1,345
F68B	Congenital Heart Disease, Minor Complexity	0	0	1.1	1	3	17%	155%	0.0000	0.0000	0.0000	0.3317	0.1695	0.0000	$ -	$ -	$ -	$ 1,629	$ 832
F69A	Valvular Disorders, Major Complexity	1	0	6.2	2	20	11%	100%	0.2310	0.0000	0.8620	1.7240	0.2415	0.0000	$ 1,134	$ -	$ -	$ 8,465	$ 1,186
F69B	Valvular Disorders, Minor Complexity	0	0	1.4	1	4	19%	172%	0.0000	0.0000	0.0000	0.2613	0.1912	0.0000	$ -	$ -	$ -	$ 1,283	$ 939
F72A	Unstable Angina, Major Complexity	1	0	4.1	1	12	15%	100%	0.1567	0.0000	0.0000	1.0491	0.2242	0.0000	$ 769	$ -	$ -	$ 5,151	$ 1,101
F72B	Unstable Angina, Minor Complexity	1	0	1.9	1	6	21%	100%	0.1097	0.0000	0.0000	0.5353	0.2413	0.0000	$ 539	$ -	$ -	$ 2,628	$ 1,185
F73A	Syncope and Collapse, Major Complexity	0	0	5.0	1	15	12%	100%	0.0000	0.0000	0.0000	1.1177	0.2271	0.0000	$ -	$ -	$ -	$ 5,488	$ 1,115
F73B	Syncope and Collapse, Minor Complexity	1	0	1.9	1	6	20%	139%	0.1130	0.0000	0.0000	0.4423	0.2281	0.0000	$ 555	$ -	$ -	$ 2,172	$ 1,120
F74A	Chest Pain, Major Complexity	0	0	2.0	1	6	19%	161%	0.0000	0.0000	0.0000	0.4283	0.2326	0.0000	$ -	$ -	$ -	$ 2,103	$ 1,142
F74B	Chest Pain, Minor Complexity	0	0	1.1	1	3	25%	162%	0.0000	0.0000	0.0000	0.1559	0.1127	0.0000	$ -	$ -	$ -	$ 765	$ 553
F75A	Other Circulatory Disorders, Major Complexity	0	0	10.1	3	29	11%	149%	0.0000	0.0000	1.0281	3.0842	0.2525	0.0000	$ -	$ -	$ 5,048	$ 15,143	$ 1,240
F75B	Other Circulatory Disorders, Intermediate Complexity	0	0	4.9	1	14	12%	165%	0.0000	0.0000	0.0000	1.3002	0.2440	0.0000	$ -	$ -	$ -	$ 6,384	$ 1,198
F75C	Other Circulatory Disorders, Minor Complexity	1	0	2.7	1	8	15%	200%	0.2044	0.0000	0.0000	0.7265	0.2362	0.0000	$ 1,004	$ -	$ -	$ 3,567	$ 1,160
F76A	Arrhythmia, Cardiac Arrest and Conduction Disorders, Major Complexity	0	0	4.6	1	14	14%	100%	0.0000	0.0000	0.0000	1.1456	0.2353	0.0000	$ -	$ -	$ -	$ 5,625	$ 1,155
F76B	Arrhythmia, Cardiac Arrest and Conduction Disorders, Minor Complexity	1	0	2.0	1	6	19%	193%	0.1621	0.0000	0.0000	0.4987	0.2111	0.0000	$ 796	$ -	$ -	$ 2,449	$ 1,037
G01A	Rectal Resection, Major Complexity	0	0	26.4	9	82	18%	100%	0.0000	2.0409	1.0760	11.7252	0.2981	0.0000	$ -	$ 10,021	$ 5,283	$ 57,571	$ 1,464
G01B	Rectal Resection, Intermediate Complexity	0	0	14.1	4	42	17%	100%	0.0000	2.2974	1.1149	6.7570	0.2922	0.0000	$ -	$ 11,280	$ 5,474	$ 33,177	$ 1,435
G01C	Rectal Resection, Minor Complexity	0	0	8.1	2	25	19%	100%	0.0000	1.4768	1.5285	4.5339	0.2977	0.0000	$ -	$ 7,251	$ 7,505	$ 22,261	$ 1,462
G02A	Major Small and Large Bowel Procedures, Major Complexity	0	0	25.5	8	77	14%	115%	0.0000	1.7734	1.0773	10.3920	0.2992	0.0000	$ -	$ 8,707	$ 5,290	$ 51,025	$ 1,469
G02B	Major Small and Large Bowel Procedures, Intermediate Complexity	0	0	10.6	3	34	16%	114%	0.0000	1.2533	1.2336	4.9541	0.2934	0.0000	$ -	$ 6,154	$ 6,057	$ 24,325	$ 1,441
G02C	Major Small and Large Bowel Procedures, Minor Complexity	0	0	5.9	2	18	18%	100%	0.0000	0.6507	1.2325	3.1157	0.3044	0.0000	$ -	$ 3,195	$ 6,052	$ 15,298	$ 1,495
G03A	Stomach, Oesophageal and Duodenal Procedures, Major Complexity	0	0	18.1	6	55	16%	100%	0.0000	1.6965	1.2743	9.3424	0.3079	0.0000	$ -	$ 8,330	$ 6,257	$ 45,871	$ 1,512
G03B	Stomach, Oesophageal and Duodenal Procedures, Intermediate Complexity	0	0	8.8	2	27	14%	108%	0.0000	0.9434	1.8460	4.6353	0.3608	0.0000	$ -	$ 4,632	$ 9,064	$ 22,759	$ 1,772
G03C	Stomach, Oesophageal and Duodenal Procedures, Minor Complexity	0	0	3.5	1	11	15%	119%	0.0000	0.0000	0.0000	2.1532	0.3363	0.0000	$ -	$ -	$ -	$ 10,572	$ 1,651
G04A	Peritoneal Adhesiolysis, Major Complexity	0	0	14.9	5	45	13%	100%	0.0000	1.0157	1.0004	6.0179	0.3068	0.0000	$ -	$ 4,987	$ 4,912	$ 29,548	$ 1,506
G04B	Peritoneal Adhesiolysis, Intermediate Complexity	0	0	6.7	2	21	15%	117%	0.0000	0.7763	1.1355	3.0472	0.2922	0.0000	$ -	$ 3,812	$ 5,575	$ 14,962	$ 1,435
G04C	Peritoneal Adhesiolysis, Minor Complexity	0	0	2.8	1	9	16%	121%	0.0000	0.0000	0.0000	1.6308	0.3308	0.0000	$ -	$ -	$ -	$ 8,007	$ 1,624

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
G05A	Minor Small and Large Bowel Procedures, Major Complexity	0	0	10.8	3	32	14%	100%	0.0000	1.0170	0.9881	3.9812	0.2803	0.0000	$ -	$ 4,993	$ 4,852	$ 19,548	$ 1,376
G05B	Minor Small and Large Bowel Procedures, Minor Complexity	0	0	3.7	1	11	14%	80%	0.0000	0.0000	0.0000	1.8562	0.3401	0.0000	$ -	$ -	$ -	$ 9,114	$ 1,670
G06Z	Pyloromyotomy	0	0	3.2	1	11	16%	100%	0.0000	0.0000	0.0000	1.7910	0.2720	0.0000	$ -	$ -	$ -	$ 8,794	$ 1,336
G07A	Appendicectomy, Major Complexity	0	0	4.5	1	13	12%	134%	0.0000	0.0000	0.0000	2.0266	0.3232	0.0000	$ -	$ -	$ -	$ 9,951	$ 1,587
G07B	Appendicectomy, Minor Complexity	0	0	2.2	1	7	14%	126%	0.0000	0.0000	0.0000	1.2313	0.2884	0.0000	$ -	$ -	$ -	$ 6,046	$ 1,416
G10A	Hernia Procedures, Major Complexity	0	0	3.9	1	12	17%	84%	0.0000	0.0000	0.0000	1.9119	0.2772	0.0000	$ -	$ -	$ -	$ 9,387	$ 1,361
G10B	Hernia Procedures, Minor Complexity	0	0	1.2	1	4	24%	80%	0.0000	0.0000	0.0000	0.9664	0.3094	0.0000	$ -	$ -	$ -	$ 4,745	$ 1,519
G11A	Anal and Stomal Procedures, Major Complexity	1	0	4.3	1	13	14%	170%	0.5392	0.0000	0.0000	1.4006	0.2466	0.0000	$ 2,647	$ -	$ -	$ 6,877	$ 1,211
G11B	Anal and Stomal Procedures, Minor Complexity	0	0	1.4	1	4	17%	108%	0.0000	0.0000	0.0000	0.6559	0.2451	0.0000	$ -	$ -	$ -	$ 3,220	$ 1,203
G12A	Other Digestive System OR Procedures, Major Complexity	0	0	16.9	5	50	16%	100%	0.0000	0.6323	0.9755	5.5098	0.2252	0.0000	$ -	$ 3,105	$ 4,790	$ 27,053	$ 1,106
G12B	Other Digestive System OR Procedures, Intermediate Complexity	0	0	7.2	2	22	16%	131%	0.0000	0.4998	1.0417	2.5832	0.2286	0.0000	$ -	$ 2,454	$ 5,115	$ 12,684	$ 1,122
G12C	Other Digestive System OR Procedures, Minor Complexity	1	0	3.2	1	10	19%	132%	0.6294	0.0000	0.0000	1.4837	0.2792	0.0000	$ 3,090	$ -	$ -	$ 7,285	$ 1,371
G46A	Complex Endoscopy, Major Complexity	1	0	6.9	2	21	15%	165%	0.4030	0.2866	0.9845	2.2556	0.2640	0.0000	$ 1,979	$ 1,407	$ 4,834	$ 11,075	$ 1,296
G46B	Complex Endoscopy, Minor Complexity	0	0	1.1	1	3	36%	187%	0.0000	0.0000	0.0000	0.4078	0.2900	0.0000	$ -	$ -	$ -	$ 2,002	$ 1,424
G47A	Gastroscopy, Major Complexity	0	0	5.9	2	19	14%	173%	0.0000	0.1981	0.8452	1.8885	0.2533	0.0000	$ -	$ 973	$ 4,150	$ 9,273	$ 1,244
G47B	Gastroscopy, Intermediate Complexity	1	0	2.5	1	7	19%	128%	0.3328	0.0000	0.0000	0.8241	0.2049	0.0000	$ 1,634	$ -	$ -	$ 4,046	$ 1,006
G47C	Gastroscopy, Minor Complexity	0	0	1.1	1	3	32%	150%	0.0000	0.0000	0.0000	0.3097	0.2415	0.0000	$ -	$ -	$ -	$ 1,521	$ 1,186
G48A	Colonoscopy, Major Complexity	1	0	6.0	2	18	13%	187%	0.3448	0.2062	0.8352	1.8765	0.2345	0.0000	$ 1,693	$ 1,012	$ 4,101	$ 9,214	$ 1,151
G48B	Colonoscopy, Minor Complexity	0	0	1.1	1	3	41%	200%	0.0000	0.0000	0.0000	0.3415	0.1068	0.0000	$ -	$ -	$ -	$ 1,677	$ 524
G60A	Digestive Malignancy, Major Complexity	0	0	8.8	2	26	9%	100%	0.0000	0.0000	1.0765	2.1531	0.1895	0.0000	$ -	$ -	$ 5,286	$ 10,572	$ 930
G60B	Digestive Malignancy, Minor Complexity	1	0	3.8	1	11	9%	100%	0.2798	0.0000	0.0000	0.7483	0.1825	0.0000	$ 1,374	$ -	$ -	$ 3,674	$ 896
G61A	Gastrointestinal Haemorrhage, Major Complexity	0	0	4.4	1	13	12%	100%	0.0000	0.0000	0.0000	0.9843	0.2249	0.0000	$ -	$ -	$ -	$ 4,833	$ 1,104
G61B	Gastrointestinal Haemorrhage, Minor Complexity	1	0	2.1	1	6	14%	137%	0.1128	0.0000	0.0000	0.4622	0.2029	0.0000	$ 554	$ -	$ -	$ 2,269	$ 996
G64A	Inflammatory Bowel Disease, Major Complexity	1	0	5.0	1	17	9%	171%	0.3189	0.0000	0.0000	1.1960	0.2489	0.0000	$ 1,566	$ -	$ -	$ 5,872	$ 1,222
G64B	Inflammatory Bowel Disease, Minor Complexity	1	0	2.7	1	9	6%	85%	0.3455	0.0000	0.0000	0.6959	0.2251	0.0000	$ 1,696	$ -	$ -	$ 3,417	$ 1,105
G65A	Gastrointestinal Obstruction, Major Complexity	0	0	6.1	2	19	12%	100%	0.0000	0.0000	0.7526	1.5051	0.2269	0.0000	$ -	$ -	$ 3,695	$ 7,390	$ 1,114
G65B	Gastrointestinal Obstruction, Minor Complexity	0	0	2.7	1	8	16%	91%	0.0000	0.0000	0.0000	0.5994	0.2144	0.0000	$ -	$ -	$ -	$ 2,943	$ 1,053
G66A	Abdominal Pain and Mesenteric Adenitis, Major Complexity	1	0	2.7	1	8	14%	129%	0.1119	0.0000	0.0000	0.6081	0.2178	0.0000	$ 549	$ -	$ -	$ 2,986	$ 1,069
G66B	Abdominal Pain and Mesenteric Adenitis, Minor Complexity	0	0	1.2	1	4	18%	147%	0.0000	0.0000	0.0000	0.2076	0.1579	0.0000	$ -	$ -	$ -	$ 1,019	$ 775
G67A	Oesophagitis and Gastroenteritis, Major Complexity	0	0	4.0	1	13	11%	107%	0.0000	0.0000	0.0000	0.8974	0.2284	0.0000	$ -	$ -	$ -	$ 4,406	$ 1,121
G67B	Oesophagitis and Gastroenteritis, Minor Complexity	0	0	1.4	1	4	14%	123%	0.0000	0.0000	0.0000	0.2491	0.1871	0.0000	$ -	$ -	$ -	$ 1,223	$ 919
G70A	Other Digestive System Disorders, Major Complexity	1	0	4.3	1	13	12%	175%	0.1503	0.0000	0.0000	0.9655	0.2372	0.0000	$ 738	$ -	$ -	$ 4,741	$ 1,165
G70B	Other Digestive System Disorders, Minor Complexity	0	0	1.4	1	4	15%	158%	0.0000	0.0000	0.0000	0.2542	0.1872	0.0000	$ -	$ -	$ -	$ 1,248	$ 919
H01A	Pancreas, Liver and Shunt Procedures, Major Complexity	0	0	24.5	8	72	14%	100%	0.0000	2.4325	1.1365	11.5249	0.2693	0.0000	$ -	$ 11,944	$ 5,580	$ 56,587	$ 1,322
H01B	Pancreas, Liver and Shunt Procedures, Intermediate Complexity	0	0	8.9	3	27	18%	100%	0.0000	0.6627	1.5394	5.2810	0.3149	0.0000	$ -	$ 3,254	$ 7,558	$ 25,930	$ 1,546
H01C	Pancreas, Liver and Shunt Procedures, Minor Complexity	0	0	3.2	1	10	19%	100%	0.0000	0.0000	0.0000	1.9517	0.4760	0.0000	$ -	$ -	$ -	$ 9,583	$ 2,337
H02A	Major Biliary Tract Procedures, Major Complexity	0	0	14.9	4	44	15%	100%	0.0000	1.0028	1.2799	6.1224	0.2980	0.0000	$ -	$ 4,924	$ 6,284	$ 30,061	$ 1,463
H02B	Major Biliary Tract Procedures, Minor Complexity	0	0	6.1	1	18	18%	100%	0.0000	0.0000	0.0000	2.5511	0.3044	0.0000	$ -	$ -	$ -	$ 12,526	$ 1,495
H05A	Hepatobiliary Diagnostic Procedures, Major Complexity	0	0	8.3	2	27	17%	100%	0.0000	0.4893	1.6615	3.8123	0.2879	0.0000	$ -	$ 2,402	$ 8,158	$ 18,718	$ 1,414
H05B	Hepatobiliary Diagnostic Procedures, Minor Complexity	0	0	1.8	1	6	29%	100%	0.0000	0.0000	0.0000	0.8468	0.3417	0.0000	$ -	$ -	$ -	$ 4,158	$ 1,678
H06A	Other Hepatobiliary and Pancreas OR Procedures, Major Complexity	0	0	18.3	6	61	16%	100%	0.0000	0.3912	0.9678	6.1978	0.2395	0.0000	$ -	$ 1,921	$ 4,752	$ 30,431	$ 1,176
H06B	Other Hepatobiliary and Pancreas OR Procedures, Intermediate Complexity	0	0	5.5	2	18	24%	100%	0.0000	0.2675	1.1604	2.5884	0.2309	0.0000	$ -	$ 1,313	$ 5,698	$ 12,709	$ 1,134
H06C	Other Hepatobiliary and Pancreas OR Procedures, Minor Complexity	0	0	1.4	1	5	46%	100%	0.0000	0.0000	0.0000	1.1941	0.2745	0.0000	$ -	$ -	$ -	$ 5,863	$ 1,348
H07A	Open Cholecystectomy, Major Complexity	0	0	13.8	4	42	13%	100%	0.0000	1.5360	1.1094	5.9737	0.2520	0.0000	$ -	$ 7,542	$ 5,447	$ 29,331	$ 1,237
H07B	Open Cholecystectomy, Intermediate Complexity	0	0	7.7	2	25	15%	100%	0.0000	1.1554	1.2691	3.6937	0.2573	0.0000	$ -	$ 5,673	$ 6,231	$ 18,136	$ 1,263
H07C	Open Cholecystectomy, Minor Complexity	0	0	4.9	1	15	16%	100%	0.0000	0.0000	0.0000	2.5698	0.2712	0.0000	$ -	$ -	$ -	$ 12,618	$ 1,332
H08A	Laparoscopic Cholecystectomy, Major Complexity	0	0	5.7	1	18	17%	100%	0.0000	0.0000	0.0000	2.5783	0.2729	0.0000	$ -	$ -	$ -	$ 12,659	$ 1,340
H08B	Laparoscopic Cholecystectomy, Minor Complexity	0	0	1.9	1	6	20%	123%	0.0000	0.0000	0.0000	1.4158	0.2748	0.0000	$ -	$ -	$ -	$ 6,952	$ 1,349
H40A	Endoscopic Procedures for Bleeding Oesophageal Varices, Major Complexity	0	0	9.3	3	30	14%	100%	0.0000	0.4870	0.8835	3.1374	0.2505	0.0000	$ -	$ 2,391	$ 4,338	$ 15,405	$ 1,230
H40B	Endoscopic Procedures for Bleeding Oesophageal Varices, Intermediate Complexity	0	0	4.2	1	13	13%	100%	0.0000	0.0000	0.0000	1.8033	0.2729	0.0000	$ -	$ -	$ -	$ 8,854	$ 1,340
H40C	Endoscopic Procedures for Bleeding Oesophageal Varices, Minor Complexity	0	0	2.6	1	8	13%	100%	0.0000	0.0000	0.0000	1.0816	0.3589	0.0000	$ -	$ -	$ -	$ 5,311	$ 1,762
H43A	ERCP Procedures, Major Complexity	0	0	10.6	3	32	18%	100%	0.0000	0.3572	1.0462	3.4957	0.2680	0.0000	$ -	$ 1,754	$ 5,137	$ 17,164	$ 1,316
H43B	ERCP Procedures, Intermediate Complexity	1	0	5.9	2	18	23%	100%	0.5022	0.3356	0.8323	2.0003	0.2402	0.0000	$ 2,466	$ 1,648	$ 4,087	$ 9,821	$ 1,179
H43C	ERCP Procedures, Minor Complexity	1	0	3.4	1	11	31%	100%	0.4828	0.0000	0.0000	1.2607	0.2451	0.0000	$ 2,371	$ -	$ -	$ 6,190	$ 1,203
H60A	Cirrhosis and Alcoholic Hepatitis, Major Complexity	0	0	10.1	3	31	10%	100%	0.0000	0.0000	0.9877	2.9632	0.2617	0.0000	$ -	$ -	$ 4,850	$ 14,549	$ 1,285
H60B	Cirrhosis and Alcoholic Hepatitis, Intermediate Complexity	1	0	4.3	1	13	10%	100%	0.2528	0.0000	0.0000	1.0906	0.2310	0.0000	$ 1,241	$ -	$ -	$ 5,355	$ 1,134
H60C	Cirrhosis and Alcoholic Hepatitis, Minor Complexity	1	0	3.1	1	9	19%	100%	0.2788	0.0000	0.0000	0.9412	0.2179	0.0000	$ 1,369	$ -	$ -	$ 4,621	$ 1,070
H61A	Malignancy of Hepatobiliary System and Pancreas, Major Complexity	0	0	9.2	3	27	8%	137%	0.0000	0.0000	0.8158	2.4475	0.2063	0.0000	$ -	$ -	$ 4,006	$ 12,017	$ 1,013
H61B	Malignancy of Hepatobiliary System and Pancreas, Minor Complexity	1	0	4.3	1	12	13%	134%	0.3190	0.0000	0.0000	1.0050	0.2010	0.0000	$ 1,566	$ -	$ -	$ 4,935	$ 987
H62A	Disorders of Pancreas, Except Malignancy, Major Complexity	0	0	6.5	2	20	13%	140%	0.0000	0.0000	0.9159	1.8318	0.2607	0.0000	$ -	$ -	$ 4,497	$ 8,994	$ 1,280
H62B	Disorders of Pancreas, Except Malignancy, Minor Complexity	1	0	3.0	1	9	15%	165%	0.2016	0.0000	0.0000	0.7338	0.2303	0.0000	$ 990	$ -	$ -	$ 3,603	$ 1,131
H63A	Other Disorders of Liver, Major Complexity	0	0	7.0	2	21	12%	129%	0.0000	0.0000	1.0164	2.0327	0.2447	0.0000	$ -	$ -	$ 4,991	$ 9,981	$ 1,201
H63B	Other Disorders of Liver, Intermediate Complexity	1	0	3.7	1	11	17%	127%	0.2744	0.0000	0.0000	0.9464	0.2108	0.0000	$ 1,347	$ -	$ -	$ 4,647	$ 1,035
H63C	Other Disorders of Liver, Minor Complexity	1	0	2.2	1	7	25%	156%	0.2260	0.0000	0.0000	0.6129	0.1582	0.0000	$ 1,110	$ -	$ -	$ 3,009	$ 777
H64A	Disorders of the Biliary Tract, Major Complexity	1	0	4.9	1	15	15%	195%	0.1569	0.0000	0.0000	1.1935	0.2329	0.0000	$ 770	$ -	$ -	$ 5,860	$ 1,144
H64B	Disorders of the Biliary Tract, Minor Complexity	1	0	2.3	1	7	20%	200%	0.0932	0.0000	0.0000	0.4882	0.1929	0.0000	$ 458	$ -	$ -	$ 2,397	$ 947
I01A	Bilateral and Multiple Major Joint Procedures of Lower Limb, Major Complexity	0	0	18.5	12	29	25%	100%	0.0000	3.8789	0.5659	10.6698	0.2758	0.0000	$ -	$ 19,045	$ 2,779	$ 52,389	$ 1,354
I01B	Bilateral and Multiple Major Joint Procedures of Lower Limb, Minor Complexity	0	0	5.9	2	19	25%	100%	0.0000	3.7027	1.3587	6.4202	0.3299	0.0000	$ -	$ 18,180	$ 6,671	$ 31,523	$ 1,620
I02A	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Major Complexity	0	0	41.4	13	119	20%	100%	0.0000	3.0592	0.9878	15.9007	0.2727	0.0000	$ -	$ 15,021	$ 4,850	$ 78,072	$ 1,339
I02B	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Intermediate Comp	0	0	17.2	5	54	21%	100%	0.0000	0.8525	1.4718	8.2116	0.3080	0.0000	$ -	$ 4,186	$ 7,227	$ 40,319	$ 1,512
I02C	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand, Minor Complexity	0	0	4.6	1	14	24%	80%	0.0000	0.0000	0.0000	2.5301	0.4077	0.0000	$ -	$ -	$ -	$ 12,423	$ 2,002
I03A	Hip Replacement, Major Complexity	0	0	13.6	4	41	29%	100%	0.0000	2.3933	0.9005	5.9951	0.2266	0.0000	$ -	$ 11,751	$ 4,421	$ 29,436	$ 1,113
I03B	Hip Replacement, Minor Complexity	0	0	6.4	2	19	34%	100%	0.0000	2.3504	0.8963	4.1429	0.2008	0.0000	$ -	$ 11,540	$ 4,401	$ 20,342	$ 986
I04A	Knee Replacement, Major Complexity	0	0	9.7	3	27	29%	100%	0.0000	2.2831	0.9769	5.2137	0.2456	0.0000	$ -	$ 11,210	$ 4,797	$ 25,599	$ 1,206
I04B	Knee Replacement, Minor Complexity	0	0	5.1	1	16	47%	100%	0.0000	0.0000	0.0000	3.9568	0.2392	0.0000	$ -	$ -	$ -	$ 19,428	$ 1,174

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
I05A	Other Joint Replacement, Major Complexity	0	0	9.8	3	29	38%	100%	0.0000	2.9902	1.0169	6.0408	0.2462	0.0000	$ -	$ 14,682	$ 4,993	$ 29,660	$ 1,209
I05B	Other Joint Replacement, Minor Complexity	0	0	3.3	1	10	46%	100%	0.0000	0.0000	0.0000	3.9792	0.2855	0.0000	$ -	$ -	$ -	$ 19,538	$ 1,402
I06Z	Spinal Fusion for Deformity	0	0	8.2	2	26	37%	115%	0.0000	2.4506	3.6067	9.6640	0.5733	0.0000	$ -	$ 12,032	$ 17,709	$ 47,450	$ 2,815
I07Z	Amputation	0	0	23.0	8	73	25%	100%	0.0000	0.8676	0.9629	8.5712	0.2782	0.0000	$ -	$ 4,260	$ 4,728	$ 42,085	$ 1,366
I08A	Other Hip and Femur Procedures, Major Complexity	0	0	16.1	5	47	19%	93%	0.0000	1.2645	0.9277	5.9029	0.2341	0.0000	$ -	$ 6,209	$ 4,555	$ 28,983	$ 1,149
I08B	Other Hip and Femur Procedures, Minor Complexity	0	0	7.6	2	23	23%	93%	0.0000	0.8115	1.1662	3.1439	0.2322	0.0000	$ -	$ 3,984	$ 5,726	$ 15,437	$ 1,140
I09A	Spinal Fusion, Major Complexity	0	0	21.0	7	66	37%	100%	0.0000	4.0020	1.1019	11.7155	0.2680	0.0000	$ -	$ 19,650	$ 5,410	$ 57,523	$ 1,316
I09B	Spinal Fusion, Intermediate Complexity	0	0	8.3	2	26	35%	100%	0.0000	3.2049	1.9497	7.1042	0.3294	0.0000	$ -	$ 15,736	$ 9,573	$ 34,882	$ 1,617
I09C	Spinal Fusion, Minor Complexity	0	0	4.5	1	14	43%	100%	0.0000	0.0000	0.0000	4.9800	0.3685	0.0000	$ -	$ -	$ -	$ 24,452	$ 1,809
I10A	Other Back and Neck Procedures, Major Complexity	0	0	9.1	2	26	19%	100%	0.0000	1.0656	1.5617	4.1891	0.2666	0.0000	$ -	$ 5,232	$ 7,668	$ 20,568	$ 1,309
I10B	Other Back and Neck Procedures, Minor Complexity	0	0	2.9	1	9	30%	100%	0.0000	0.0000	0.0000	1.9886	0.2809	0.0000	$ -	$ -	$ -	$ 9,764	$ 1,379
I11Z	Limb Lengthening Procedures	0	0	3.9	1	14	25%	163%	0.0000	0.0000	0.0000	3.1045	0.5640	0.0000	$ -	$ -	$ -	$ 15,243	$ 2,769
I12A	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Major Complexity	0	0	23.5	16	37	12%	115%	0.0000	0.7036	0.4422	7.7793	0.2222	0.0000	$ -	$ 3,455	$ 2,171	$ 38,196	$ 1,091
I12B	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Intermediate Comp	0	0	11.5	3	36	11%	93%	0.0000	0.5885	1.0174	3.6408	0.1895	0.0000	$ -	$ 2,890	$ 4,995	$ 17,876	$ 930
I12C	Misc Musculoskeletal Procs for Infect/Inflam of Bone/Joint, Minor Complexity	0	0	4.2	1	13	13%	125%	0.0000	0.0000	0.0000	1.4305	0.2070	0.0000	$ -	$ -	$ -	$ 7,024	$ 1,016
I13A	Humerus, Tibia, Fibula and Ankle Procedures, Major Complexity	0	0	9.4	3	29	20%	88%	0.0000	1.0456	1.0474	4.1878	0.2573	0.0000	$ -	$ 5,134	$ 5,143	$ 20,562	$ 1,263
I13B	Humerus, Tibia, Fibula and Ankle Procedures, Minor Complexity	0	0	2.8	1	9	25%	80%	0.0000	0.0000	0.0000	1.8596	0.3080	0.0000	$ -	$ -	$ -	$ 9,131	$ 1,512
I15A	Cranio-Facial Surgery, Major Complexity	0	0	7.0	2	19	25%	114%	0.0000	1.2130	1.7286	4.6703	0.2376	0.0000	$ -	$ 5,956	$ 8,487	$ 22,931	$ 1,167
I15B	Cranio-Facial Surgery, Minor Complexity	0	0	3.2	1	11	25%	100%	0.0000	0.0000	0.0000	2.5366	0.3115	0.0000	$ -	$ -	$ -	$ 12,455	$ 1,529
I16Z	Other Shoulder Procedures	0	0	1.3	1	4	29%	100%	0.0000	0.0000	0.0000	1.5059	0.4580	0.0000	$ -	$ -	$ -	$ 7,394	$ 2,249
I17A	Maxillo-Facial Surgery, Major Complexity	0	0	4.9	1	13	16%	100%	0.0000	0.0000	0.0000	3.0060	0.3135	0.0000	$ -	$ -	$ -	$ 14,759	$ 1,539
I17B	Maxillo-Facial Surgery, Minor Complexity	0	0	1.5	1	5	19%	100%	0.0000	0.0000	0.0000	1.4931	0.4047	0.0000	$ -	$ -	$ -	$ 7,331	$ 1,987
I18A	Other Knee Procedures, Major Complexity	1	0	4.0	1	11	18%	108%	0.6508	0.0000	0.0000	1.6565	0.2272	0.0000	$ 3,195	$ -	$ -	$ 8,133	$ 1,116
I18B	Other Knee Procedures, Minor Complexity	0	0	1.0	1	3	37%	154%	0.0000	0.0000	0.0000	0.6881	0.2344	0.0000	$ -	$ -	$ -	$ 3,379	$ 1,151
I19A	Other Elbow and Forearm Procedures, Major Complexity	0	0	5.9	2	18	25%	91%	0.0000	1.0980	0.9534	3.0048	0.2528	0.0000	$ -	$ 5,391	$ 4,681	$ 14,754	$ 1,241
I19B	Other Elbow and Forearm Procedures, Minor Complexity	0	0	1.7	1	5	34%	90%	0.0000	0.0000	0.0000	1.5560	0.2863	0.0000	$ -	$ -	$ -	$ 7,640	$ 1,406
I20A	Other Foot Procedures, Major Complexity	0	0	6.2	2	20	20%	100%	0.0000	0.7974	1.0640	2.9253	0.2543	0.0000	$ -	$ 3,915	$ 5,224	$ 14,363	$ 1,249
I20B	Other Foot Procedures, Minor Complexity	0	0	1.6	1	5	22%	100%	0.0000	0.0000	0.0000	1.2272	0.2992	0.0000	$ -	$ -	$ -	$ 6,026	$ 1,469
I21Z	Local Excision and Removal of Internal Fixation Devices of Hip and Femur	0	0	2.1	1	7	14%	93%	0.0000	0.0000	0.0000	1.0952	0.3503	0.0000	$ -	$ -	$ -	$ 5,377	$ 1,720
I23A	Local Excision & Removal of Internal Fixation Device, Except Hip & Fmr, Maj Comp	1	0	3.5	1	9	16%	107%	0.6242	0.0000	0.0000	1.5516	0.2375	0.0000	$ 3,065	$ -	$ -	$ 7,618	$ 1,166
I23B	Local Excision & Removal of Internal Fixation Device, Except Hip & Fmr, Min Comp	0	0	1.0	1	3	16%	111%	0.0000	0.0000	0.0000	0.5229	0.1370	0.0000	$ -	$ -	$ -	$ 2,567	$ 673
I24A	Arthroscopy, Major Complexity	0	0	3.3	1	10	18%	100%	0.0000	0.0000	0.0000	1.4310	0.2440	0.0000	$ -	$ -	$ -	$ 7,026	$ 1,198
I24B	Arthroscopy, Minor Complexity	0	0	1.1	1	3	18%	100%	0.0000	0.0000	0.0000	0.6703	0.2694	0.0000	$ -	$ -	$ -	$ 3,291	$ 1,323
I25A	Bone and Joint Diagnostic Procedures Including Biopsy, Major Complexity	0	0	10.3	3	31	15%	100%	0.0000	0.2993	1.2030	3.9082	0.2332	0.0000	$ -	$ 1,470	$ 5,907	$ 19,189	$ 1,145
I25B	Bone and Joint Diagnostic Procedures Including Biopsy, Minor Complexity	1	0	5.4	1	13	28%	100%	0.5129	0.0000	0.0000	1.8998	0.2545	0.0000	$ 2,518	$ -	$ -	$ 9,328	$ 1,250
I27A	Soft Tissue Procedures, Major Complexity	0	0	10.8	3	34	14%	84%	0.0000	0.5956	1.1881	4.1598	0.2482	0.0000	$ -	$ 2,924	$ 5,834	$ 20,425	$ 1,219
I27B	Soft Tissue Procedures, Minor Complexity	1	0	2.3	1	7	16%	114%	0.5510	0.0000	0.0000	1.2343	0.2631	0.0000	$ 2,705	$ -	$ -	$ 6,060	$ 1,292
I28A	Other Musculoskeletal Procedures, Major Complexity	0	0	11.8	4	37	17%	100%	0.0000	0.7818	0.8904	4.3434	0.2194	0.0000	$ -	$ 3,839	$ 4,372	$ 21,326	$ 1,077
I28B	Other Musculoskeletal Procedures, Intermediate Complexity	1	0	2.7	1	8	25%	121%	0.8928	0.0000	0.0000	1.7162	0.2242	0.0000	$ 4,384	$ -	$ -	$ 8,427	$ 1,101
I28C	Other Musculoskeletal Procedures, Minor Complexity	1	0	1.9	1	6	13%	115%	0.5698	0.0000	0.0000	1.0507	0.2388	0.0000	$ 2,798	$ -	$ -	$ 5,159	$ 1,173
I29Z	Knee Reconstructions, and Revisions of Reconstructions	0	0	1.3	1	4	33%	114%	0.0000	0.0000	0.0000	1.6496	0.4641	0.0000	$ -	$ -	$ -	$ 8,100	$ 2,279
I30Z	Hand Procedures	0	0	1.3	1	4	21%	100%	0.0000	0.0000	0.0000	0.8222	0.2366	0.0000	$ -	$ -	$ -	$ 4,037	$ 1,162
I31A	Revision of Hip Replacement, Major Complexity	0	0	27.1	8	76	18%	100%	0.0000	3.1113	0.9704	10.8742	0.2052	0.0000	$ -	$ 15,276	$ 4,765	$ 53,392	$ 1,008
I31B	Revision of Hip Replacement, Intermediate Complexity	0	0	12.8	4	36	29%	100%	0.0000	3.0131	0.9769	6.9207	0.2019	0.0000	$ -	$ 14,794	$ 4,797	$ 33,981	$ 991
I31C	Revision of Hip Replacement, Minor Complexity	0	0	7.5	2	21	36%	100%	0.0000	2.4687	1.1558	4.7803	0.2267	0.0000	$ -	$ 12,121	$ 5,675	$ 23,471	$ 1,113
I32A	Revision of Knee Replacement, Major Complexity	0	0	20.0	6	56	37%	100%	0.0000	3.9998	0.7966	8.7792	0.2186	0.0000	$ -	$ 19,639	$ 3,911	$ 43,106	$ 1,073
I32B	Revision of Knee Replacement, Minor Complexity	0	0	8.2	2	21	37%	100%	0.0000	2.6205	1.3595	5.3395	0.1771	0.0000	$ -	$ 12,867	$ 6,675	$ 26,217	$ 870
I40Z	Infusions for Musculoskeletal Disorders, Sameday	0	0	1.0	1	1	8%	100%	0.0000	0.0000	0.0000	0.2437	0.0000	0.0000	$ -	$ -	$ -	$ 1,197	$ -
I60Z	Femoral Shaft Fractures	0	0	10.2	3	34	5%	100%	0.0000	0.2365	1.0154	3.2828	0.2302	0.0000	$ -	$ 1,161	$ 4,986	$ 16,119	$ 1,130
I61A	Distal Femoral Fractures, Major Complexity	0	0	19.6	7	65	8%	100%	0.0000	0.0000	0.6281	4.3970	0.1980	0.0000	$ -	$ -	$ 3,084	$ 21,589	$ 972
I61B	Distal Femoral Fractures, Minor Complexity	0	0	6.7	2	22	8%	108%	0.0000	0.0000	0.7811	1.5623	0.2082	0.0000	$ -	$ -	$ 3,835	$ 7,671	$ 1,022
I63A	Sprains, Strains and Dislocations of Hip, Pelvis and Thigh, Major Complexity	0	0	6.6	2	20	8%	100%	0.0000	0.0000	0.8132	1.6264	0.2047	0.0000	$ -	$ -	$ 3,993	$ 7,986	$ 1,005
I63B	Sprains, Strains and Dislocations of Hip, Pelvis and Thigh, Minor Complexity	0	0	1.9	1	6	15%	100%	0.0000	0.0000	0.0000	0.4706	0.2390	0.0000	$ -	$ -	$ -	$ 2,311	$ 1,173
I64A	Osteomyelitis, Major Complexity	0	0	17.0	6	55	9%	111%	0.0000	0.0000	0.7195	4.3167	0.1763	0.0000	$ -	$ -	$ 3,533	$ 21,195	$ 866
I64B	Osteomyelitis, Minor Complexity	0	0	10.3	3	32	9%	100%	0.0000	0.0000	0.7797	2.3392	0.1293	0.0000	$ -	$ -	$ 3,828	$ 11,485	$ 635
I65A	Musculoskeletal Malignant Neoplasms, Major Complexity	0	0	11.7	4	36	7%	107%	0.0000	0.0000	0.8318	3.3271	0.2137	0.0000	$ -	$ -	$ 4,084	$ 16,336	$ 1,049
I65B	Musculoskeletal Malignant Neoplasms, Minor Complexity	0	0	5.1	1	15	8%	100%	0.0000	0.0000	0.0000	1.5214	0.2259	0.0000	$ -	$ -	$ -	$ 7,470	$ 1,109
I66A	Inflammatory Musculoskeletal Disorders, Major Complexity	0	0	13.1	4	40	12%	119%	0.0000	0.0000	1.0624	4.2497	0.2870	0.0000	$ -	$ -	$ 5,216	$ 20,866	$ 1,409
I66B	Inflammatory Musculoskeletal Disorders, Intermediate Complexity	0	0	6.2	2	19	9%	88%	0.0000	0.0000	0.9921	1.9841	0.2428	0.0000	$ -	$ -	$ 4,871	$ 9,742	$ 1,192
I66C	Inflammatory Musculoskeletal Disorders, Minor Complexity	0	0	3.5	1	12	13%	115%	0.0000	0.0000	0.0000	0.9494	0.2173	0.0000	$ -	$ -	$ -	$ 4,662	$ 1,067
I67A	Septic Arthritis, Major Complexity	0	0	14.1	4	44	13%	100%	0.0000	0.0000	0.9579	3.8317	0.1950	0.0000	$ -	$ -	$ 4,703	$ 18,814	$ 957
I67B	Septic Arthritis, Minor Complexity	0	0	6.8	2	22	13%	109%	0.0000	0.0000	0.7606	1.5211	0.1380	0.0000	$ -	$ -	$ 3,735	$ 7,469	$ 678
I68A	Non-surgical Spinal Disorders, Major Complexity	0	0	8.1	2	26	10%	119%	0.0000	0.0000	1.0067	2.0133	0.2095	0.0000	$ -	$ -	$ 4,943	$ 9,885	$ 1,029
I68B	Non-surgical Spinal Disorders, Minor Complexity	0	0	2.6	1	8	11%	126%	0.0000	0.0000	0.0000	0.5999	0.2314	0.0000	$ -	$ -	$ -	$ 2,946	$ 1,136
I69A	Bone Diseases and Arthropathies, Major Complexity	0	0	7.4	2	24	10%	94%	0.0000	0.0000	0.8950	1.7900	0.2198	0.0000	$ -	$ -	$ 4,394	$ 8,789	$ 1,079
I69B	Bone Diseases and Arthropathies, Minor Complexity	0	0	3.3	1	10	11%	148%	0.0000	0.0000	0.0000	0.7008	0.2111	0.0000	$ -	$ -	$ -	$ 3,441	$ 1,037
I71A	Other Musculotendinous Disorders, Major Complexity	0	0	5.8	2	18	11%	100%	0.0000	0.0000	0.7424	1.4848	0.2008	0.0000	$ -	$ -	$ 3,645	$ 7,290	$ 986
I71B	Other Musculotendinous Disorders, Minor Complexity	0	0	2.2	1	7	14%	147%	0.0000	0.0000	0.0000	0.4678	0.2078	0.0000	$ -	$ -	$ -	$ 2,297	$ 1,020
I72A	Specific Musculotendinous Disorders, Major Complexity	0	0	8.4	2	27	11%	110%	0.0000	0.0000	1.0256	2.0511	0.2094	0.0000	$ -	$ -	$ 5,036	$ 10,071	$ 1,028
I72B	Specific Musculotendinous Disorders, Minor Complexity	0	0	2.9	1	9	9%	91%	0.0000	0.0000	0.0000	0.6231	0.1991	0.0000	$ -	$ -	$ -	$ 3,059	$ 978
I73A	Aftercare of Musculoskeletal Implants or Prostheses, Major Complexity	0	0	13.9	4	42	8%	100%	0.0000	0.0000	0.7866	3.1463	0.1695	0.0000	$ -	$ -	$ 3,862	$ 15,448	$ 832
I73B	Aftercare of Musculoskeletal Implants or Prostheses, Minor Complexity	0	0	6.7	2	19	10%	100%	0.0000	0.0000	0.6879	1.3759	0.1251	0.0000	$ -	$ -	$ 3,378	$ 6,756	$ 614
I74A	Injuries to Forearm, Wrist, Hand and Foot, Major Complexity	0	0	6.9	2	21	10%	100%	0.0000	0.0000	0.7664	1.5327	0.1833	0.0000	$ -	$ -	$ 3,763	$ 7,526	$ 900
I74B	Injuries to Forearm, Wrist, Hand and Foot, Minor Complexity	0	0	1.4	1	4	22%	130%	0.0000	0.0000	0.0000	0.4875	0.1879	0.0000	$ -	$ -	$ -	$ 2,394	$ 923
I75A	Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle, Major Complexity	0	0	10.6	3	32	9%	100%	0.0000	0.0000	0.8159	2.4477	0.2015	0.0000	$ -	$ -	$ 4,006	$ 12,018	$ 989

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
I75B	Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle, Minor Complexity	0	0	2.6	1	8	14%	127%	0.0000	0.0000	0.0000	0.5954	0.2122	0.0000	$ -	$ -	$ -	$ 2,923	$ 1,042
I76A	Other Musculoskeletal Disorders, Major Complexity	0	0	12.8	4	41	9%	107%	0.0000	0.0000	0.8158	3.2634	0.2084	0.0000	$ -	$ -	$ 4,006	$ 16,023	$ 1,023
I76B	Other Musculoskeletal Disorders, Intermediate Complexity	0	0	5.5	1	17	11%	100%	0.0000	0.0000	0.0000	1.2561	0.2010	0.0000	$ -	$ -	$ -	$ 6,167	$ 987
I76C	Other Musculoskeletal Disorders, Minor Complexity	0	0	2.2	1	7	16%	130%	0.0000	0.0000	0.0000	0.5453	0.2169	0.0000	$ -	$ -	$ -	$ 2,677	$ 1,065
I77A	Fractures of Pelvis, Major Complexity	0	0	12.6	4	39	8%	100%	0.0000	0.0000	0.7623	3.0491	0.2040	0.0000	$ -	$ -	$ 3,743	$ 14,971	$ 1,002
I77B	Fractures of Pelvis, Minor Complexity	0	0	5.1	1	16	10%	100%	0.0000	0.0000	0.0000	1.0683	0.2073	0.0000	$ -	$ -	$ -	$ 5,245	$ 1,018
I78A	Fractures of Neck of Femur, Major Complexity	0	0	15.5	5	46	7%	100%	0.0000	0.0000	0.7248	3.6241	0.1921	0.0000	$ -	$ -	$ 3,559	$ 17,794	$ 943
I78B	Fractures of Neck of Femur, Minor Complexity	0	0	6.7	2	21	9%	100%	0.0000	0.0000	0.7321	1.4641	0.2122	0.0000	$ -	$ -	$ 3,595	$ 7,189	$ 1,042
I79A	Pathological Fractures, Major Complexity	0	0	13.5	4	43	10%	100%	0.0000	0.0000	0.8119	3.2478	0.2149	0.0000	$ -	$ -	$ 3,986	$ 15,947	$ 1,055
I79B	Pathological Fractures, Minor Complexity	0	0	6.1	2	19	10%	100%	0.0000	0.0000	0.8170	1.6339	0.2215	0.0000	$ -	$ -	$ 4,011	$ 8,022	$ 1,088
I80Z	Femoral Fractures, Transferred to Acute Facility <2 Days	0	0	1.0	1	1	55%	100%	0.0000	0.0000	0.0000	0.2086	0.0000	0.0000	$ -	$ -	$ -	$ 1,024	$ -
I81Z	Musculoskeletal Injuries, Sameday	0	0	1.0	1	1	39%	200%	0.0000	0.0000	0.0000	0.1220	0.0000	0.0000	$ -	$ -	$ -	$ 599	$ -
I82Z	Other Sameday Treatment for Musculoskeletal Disorders	0	0	1.0	1	1	23%	200%	0.0000	0.0000	0.0000	0.1248	0.0000	0.0000	$ -	$ -	$ -	$ 613	$ -
J01A	Microvas Tiss Transf for Skin, Subcut Tiss & Breast Dsrds, Major Complexity	0	0	21.6	6	63	26%	100%	0.0000	3.9270	1.3246	11.8748	0.2709	0.0000	$ -	$ 19,282	$ 6,504	$ 58,305	$ 1,330
J01B	Microvas Tiss Transf for Skin, Subcut Tiss & Breast Dsrds, Minor Complexity	0	0	8.6	2	25	31%	100%	0.0000	2.1513	2.1155	6.3824	0.3702	0.0000	$ -	$ 10,563	$ 10,387	$ 31,338	$ 1,818
J06A	Major Procedures for Breast Disorders, Major Complexity	0	0	5.9	1	17	24%	100%	0.0000	0.0000	0.0000	2.4913	0.2095	0.0000	$ -	$ -	$ -	$ 12,232	$ 1,029
J06B	Major Procedures for Breast Disorders, Minor Complexity	0	0	2.5	1	8	31%	100%	0.0000	0.0000	0.0000	1.4954	0.1982	0.0000	$ -	$ -	$ -	$ 7,342	$ 973
J07A	Minor Procedures for Breast Disorders, Major Complexity	0	0	1.2	1	4	30%	100%	0.0000	0.0000	0.0000	0.7751	0.2840	0.0000	$ -	$ -	$ -	$ 3,806	$ 1,394
J07B	Minor Procedures for Breast Disorders, Minor Complexity	0	0	1.0	1	3	24%	100%	0.0000	0.0000	0.0000	0.6282	0.2030	0.0000	$ -	$ -	$ -	$ 3,084	$ 997
J08A	Other Skin Grafts and Debridement Procedures, Major Complexity	0	0	11.1	3	33	9%	100%	0.0000	0.3659	1.0461	3.5041	0.2415	0.0000	$ -	$ 1,797	$ 5,136	$ 17,205	$ 1,186
J08B	Other Skin Grafts and Debridement Procedures, Intermediate Complexity	1	0	3.8	1	12	15%	112%	0.6061	0.0000	0.0000	1.4203	0.2311	0.0000	$ 2,976	$ -	$ -	$ 6,974	$ 1,135
J08C	Other Skin Grafts and Debridement Procedures, Minor Complexity	1	0	2.3	1	7	26%	126%	0.5662	0.0000	0.0000	1.3064	0.2476	0.0000	$ 2,780	$ -	$ -	$ 6,414	$ 1,216
J09Z	Perianal and Pilonidal Procedures	0	0	2.0	1	7	14%	109%	0.0000	0.0000	0.0000	0.7494	0.2626	0.0000	$ -	$ -	$ -	$ 3,680	$ 1,289
J10A	Plastic OR Procs for Skin, Subcutaneous Tissue and Breast Disorders, Major Comp	1	0	3.9	1	11	19%	100%	0.5896	0.0000	0.0000	1.7234	0.2201	0.0000	$ 2,895	$ -	$ -	$ 8,462	$ 1,081
J10B	Plastic OR Procs for Skin, Subcutaneous Tissue and Breast Disorders, Minor Comp	0	0	1.1	1	3	30%	108%	0.0000	0.0000	0.0000	0.6038	0.1839	0.0000	$ -	$ -	$ -	$ 2,965	$ 903
J11A	Other Skin, Subcutaneous Tissue and Breast Procedures, Major Complexity	1	0	4.2	1	13	16%	100%	0.4484	0.0000	0.0000	1.3192	0.1996	0.0000	$ 2,202	$ -	$ -	$ 6,477	$ 980
J11B	Other Skin, Subcutaneous Tissue and Breast Procedures, Minor Complexity	0	0	1.0	1	3	23%	126%	0.0000	0.0000	0.0000	0.4087	0.1359	0.0000	$ -	$ -	$ -	$ 2,007	$ 667
J12A	Lower Limb Procedures W Ulcer or Cellulitis, Major Complexity	0	0	18.5	6	62	7%	100%	0.0000	0.3470	0.9415	5.9960	0.2683	0.0000	$ -	$ 1,704	$ 4,623	$ 29,440	$ 1,317
J12B	Lower Limb Procedures W Ulcer or Cellulitis, Minor Complexity	0	0	7.3	2	22	9%	100%	0.0000	0.2685	1.0113	2.2911	0.2364	0.0000	$ -	$ 1,318	$ 4,965	$ 11,249	$ 1,161
J13A	Lower Limb Procedures W/O Ulcer or Cellulitis, Major Complexity	0	0	8.4	2	24	9%	100%	0.0000	0.4857	1.2660	3.0177	0.2373	0.0000	$ -	$ 2,385	$ 6,216	$ 14,817	$ 1,165
J13B	Lower Limb Procedures W/O Ulcer or Cellulitis, Minor Complexity	1	0	4.1	1	12	19%	100%	0.5358	0.0000	0.0000	1.5141	0.2202	0.0000	$ 2,631	$ -	$ -	$ 7,434	$ 1,081
J14Z	Major Breast Reconstructions	0	0	7.3	2	23	20%	100%	0.0000	0.8467	2.0344	4.9155	0.2882	0.0000	$ -	$ 4,157	$ 9,989	$ 24,135	$ 1,415
J60A	Skin Ulcers, Major Complexity	0	0	12.2	8	19	9%	100%	0.0000	0.0000	0.3848	3.0784	0.2007	0.0000	$ -	$ -	$ 1,889	$ 15,115	$ 985
J60B	Skin Ulcers, Intermediate Complexity	1	0	6.2	2	18	7%	100%	0.1102	0.0000	0.5928	1.1856	0.1343	0.0000	$ 541	$ -	$ 2,911	$ 5,821	$ 659
J60C	Skin Ulcers, Minor Complexity	1	0	5.2	1	15	19%	100%	0.1486	0.0000	0.0000	0.7734	0.1098	0.0000	$ 730	$ -	$ -	$ 3,797	$ 539
J62A	Malignant Breast Disorders, Major Complexity	0	0	12.9	3	36	5%	100%	0.0000	0.0000	0.9856	2.9568	0.2001	0.0000	$ -	$ -	$ 4,839	$ 14,518	$ 982
J62B	Malignant Breast Disorders, Minor Complexity	1	0	5.7	1	16	8%	100%	0.2397	0.0000	0.0000	1.2133	0.1827	0.0000	$ 1,177	$ -	$ -	$ 5,957	$ 897
J63A	Non-Malignant Breast Disorders, Major Complexity	1	0	3.2	1	9	13%	100%	0.1944	0.0000	0.0000	0.7456	0.1704	0.0000	$ 955	$ -	$ -	$ 3,661	$ 837
J63B	Non-Malignant Breast Disorders, Minor Complexity	1	0	2.0	1	6	13%	100%	0.3583	0.0000	0.0000	0.5995	0.2210	0.0000	$ 1,759	$ -	$ -	$ 2,944	$ 1,085
J64A	Cellulitis, Major Complexity	0	0	6.1	2	18	10%	100%	0.0000	0.0000	0.7454	1.4908	0.2021	0.0000	$ -	$ -	$ 3,660	$ 7,320	$ 992
J64B	Cellulitis, Minor Complexity	1	0	2.9	1	9	9%	130%	0.1517	0.0000	0.0000	0.6729	0.1479	0.0000	$ 745	$ -	$ -	$ 3,304	$ 726
J65A	Trauma to Skin, Subcutaneous Tissue and Breast, Major Complexity	1	0	5.7	1	18	11%	80%	0.1184	0.0000	0.0000	1.2323	0.2142	0.0000	$ 581	$ -	$ -	$ 6,051	$ 1,052
J65B	Trauma to Skin, Subcutaneous Tissue and Breast, Minor Complexity	0	0	1.3	1	4	19%	130%	0.0000	0.0000	0.0000	0.2223	0.1642	0.0000	$ -	$ -	$ -	$ 1,091	$ 806
J67A	Minor Skin Disorders, Major Complexity	1	0	4.3	1	13	9%	112%	0.2237	0.0000	0.0000	1.0867	0.2489	0.0000	$ 1,098	$ -	$ -	$ 5,336	$ 1,222
J67B	Minor Skin Disorders, Minor Complexity	0	0	1.2	1	4	12%	100%	0.0000	0.0000	0.0000	0.2825	0.2183	0.0000	$ -	$ -	$ -	$ 1,387	$ 1,072
J68A	Major Skin Disorders, Major Complexity	1	0	5.1	1	15	7%	100%	0.2166	0.0000	0.0000	1.2976	0.2543	0.0000	$ 1,064	$ -	$ -	$ 6,371	$ 1,249
J68B	Major Skin Disorders, Minor Complexity	1	0	3.2	1	10	4%	106%	0.1878	0.0000	0.0000	0.8300	0.2714	0.0000	$ 922	$ -	$ -	$ 4,075	$ 1,333
J69A	Skin Malignancy, Major Complexity	0	0	11.5	3	31	6%	100%	0.0000	0.0000	0.9778	2.9333	0.2029	0.0000	$ -	$ -	$ 4,801	$ 14,403	$ 996
J69B	Skin Malignancy, Intermediate Complexity	1	0	5.6	1	17	8%	100%	0.1700	0.0000	0.0000	1.2159	0.2192	0.0000	$ 835	$ -	$ -	$ 5,970	$ 1,076
J69C	Skin Malignancy, Minor Complexity	0	0	1.3	1	4	6%	100%	0.0000	0.0000	0.0000	0.2246	0.1611	0.0000	$ -	$ -	$ -	$ 1,103	$ 791
K01A	OR Procedures for Diabetic Complications, Major Complexity	0	0	35.9	11	107	8%	100%	0.0000	0.7115	1.0560	12.3270	0.2743	0.0000	$ -	$ 3,493	$ 5,185	$ 60,526	$ 1,347
K01B	OR Procedures for Diabetic Complications, Intermediate Complexity	0	0	18.8	6	61	6%	100%	0.0000	0.3889	0.9237	5.9312	0.2671	0.0000	$ -	$ 1,909	$ 4,535	$ 29,122	$ 1,311
K01C	OR Procedures for Diabetic Complications, Minor Complexity	0	0	9.9	3	31	8%	100%	0.0000	0.2775	0.9270	3.0585	0.2239	0.0000	$ -	$ 1,363	$ 4,552	$ 15,017	$ 1,099
K02A	Pituitary Procedures, Major Complexity	0	0	12.3	4	41	31%	100%	0.0000	1.8267	1.2394	6.7842	0.3835	0.0000	$ -	$ 8,969	$ 6,085	$ 33,310	$ 1,883
K02B	Pituitary Procedures, Minor Complexity	0	0	5.8	1	17	35%	100%	0.0000	0.0000	0.0000	3.6217	0.2953	0.0000	$ -	$ -	$ -	$ 17,783	$ 1,450
K03Z	Adrenal Procedures	0	0	4.9	2	20	17%	100%	0.0000	0.9805	1.2452	3.4709	0.3545	0.0000	$ -	$ 4,814	$ 6,114	$ 17,042	$ 1,741
K05A	Parathyroid Procedures, Major Complexity	0	0	3.9	1	14	28%	100%	0.0000	0.0000	0.0000	2.2930	0.3319	0.0000	$ -	$ -	$ -	$ 11,259	$ 1,630
K05B	Parathyroid Procedures, Minor Complexity	0	0	1.3	1	4	29%	100%	0.0000	0.0000	0.0000	1.2647	0.3545	0.0000	$ -	$ -	$ -	$ 6,210	$ 1,741
K06A	Thyroid Procedures, Major Complexity	0	0	4.2	1	12	20%	100%	0.0000	0.0000	0.0000	2.8481	0.3537	0.0000	$ -	$ -	$ -	$ 13,984	$ 1,737
K06B	Thyroid Procedures, Minor Complexity	0	0	1.6	1	5	22%	100%	0.0000	0.0000	0.0000	1.6493	0.4018	0.0000	$ -	$ -	$ -	$ 8,098	$ 1,973
K08Z	Thyroglossal Procedures	0	0	1.4	1	4	17%	88%	0.0000	0.0000	0.0000	1.3062	0.4287	0.0000	$ -	$ -	$ -	$ 6,413	$ 2,105
K09A	Other Endocrine, Nutritional and Metabolic OR Procedures, Major Complexity	0	0	14.8	5	51	17%	100%	0.0000	0.7186	1.1192	6.3145	0.2784	0.0000	$ -	$ 3,528	$ 5,495	$ 31,004	$ 1,367
K09B	Other Endocrine, Nutritional and Metabolic OR Procedures, Minor Complexity	0	0	4.7	1	14	25%	92%	0.0000	0.0000	0.0000	2.0465	0.2830	0.0000	$ -	$ -	$ -	$ 10,048	$ 1,390
K10A	Revisional and Open Bariatric Procedures, Major Complexity	0	0	7.4	3	31	17%	100%	0.0000	1.5117	0.9526	4.3697	0.2931	0.0000	$ -	$ 7,422	$ 4,677	$ 21,455	$ 1,439
K10B	Revisional and Open Bariatric Procedures, Minor Complexity	0	0	2.9	1	7	17%	100%	0.0000	0.0000	0.0000	2.4876	0.4837	0.0000	$ -	$ -	$ -	$ 12,214	$ 2,375
K11A	Major Laparoscopic Bariatric Procedures, Major Complexity	0	0	3.3	1	11	47%	100%	0.0000	0.0000	0.0000	2.5757	0.4384	0.0000	$ -	$ -	$ -	$ 12,647	$ 2,153
K11B	Major Laparoscopic Bariatric Procedures, Minor Complexity	0	0	2.3	1	7	47%	100%	0.0000	0.0000	0.0000	1.8354	0.4717	0.0000	$ -	$ -	$ -	$ 9,012	$ 2,316
K12A	Other Bariatric Procedures, Major Complexity	0	0	2.1	1	6	17%	100%	0.0000	0.0000	0.0000	1.5344	0.4674	0.0000	$ -	$ -	$ -	$ 7,534	$ 2,295
K12B	Other Bariatric Procedures, Minor Complexity	0	0	1.2	1	4	17%	100%	0.0000	0.0000	0.0000	1.3514	0.4642	0.0000	$ -	$ -	$ -	$ 6,635	$ 2,279
K13Z	Plastic OR Procedures for Endocrine, Nutritional and Metabolic Disorders	0	0	4.5	1	12	17%	100%	0.0000	0.0000	0.0000	2.0697	0.2436	0.0000	$ -	$ -	$ -	$ 10,162	$ 1,196
K40A	Endoscopic and Investigative Procedures for Metabolic Disorders, Major Comp	0	0	10.2	3	34	12%	100%	0.0000	0.2138	1.2252	3.8894	0.2694	0.0000	$ -	$ 1,050	$ 6,016	$ 19,097	$ 1,323
K40B	Endoscopic and Investigative Procedures for Metabolic Disorders, Minor Comp	0	0	1.1	1	3	36%	200%	0.0000	0.0000	0.0000	0.3800	0.2970	0.0000	$ -	$ -	$ -	$ 1,866	$ 1,458
K60A	Diabetes, Major Complexity	0	0	5.8	1	18	9%	128%	0.0000	0.0000	0.0000	1.5647	0.2436	0.0000	$ -	$ -	$ -	$ 7,683	$ 1,196
K60B	Diabetes, Minor Complexity	1	0	3.4	1	10	30%	191%	0.1465	0.0000	0.0000	0.8272	0.2133	0.0000	$ 719	$ -	$ -	$ 4,062	$ 1,047
K61A	Severe Nutritional Disturbance, Major Complexity	0	0	12.5	4	37	5%	100%	0.0000	0.0000	0.9541	3.8163	0.2612	0.0000	$ -	$ -	$ 4,685	$ 18,738	$ 1,282

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
K61B	Severe Nutritional Disturbance, Minor Complexity	0	0	5.7	2	19	5%	100%	0.0000	0.0000	0.9153	1.8307	0.2609	0.0000	$ -	$ -	$ 4,494	$ 8,989	$ 1,281
K62A	Miscellaneous Metabolic Disorders, Major Complexity	0	0	7.6	2	23	10%	141%	0.0000	0.0000	1.0470	2.0941	0.2348	0.0000	$ -	$ -	$ 5,141	$ 10,282	$ 1,153
K62B	Miscellaneous Metabolic Disorders, Intermediate Complexity	1	0	3.6	1	11	10%	141%	0.1316	0.0000	0.0000	0.9213	0.2453	0.0000	$ 646	$ -	$ -	$ 4,524	$ 1,204
K62C	Miscellaneous Metabolic Disorders, Minor Complexity	1	0	2.4	1	7	10%	173%	0.1043	0.0000	0.0000	0.5445	0.2490	0.0000	$ 512	$ -	$ -	$ 2,673	$ 1,223
K63A	Inborn Errors of Metabolism, Major Complexity	0	0	3.1	1	9	9%	155%	0.0000	0.0000	0.0000	0.7473	0.3221	0.0000	$ -	$ -	$ -	$ 3,669	$ 1,582
K63B	Inborn Errors of Metabolism, Minor Complexity	0	0	1.1	1	3	4%	177%	0.0000	0.0000	0.0000	0.2038	0.1369	0.0000	$ -	$ -	$ -	$ 1,001	$ 672
K64A	Endocrine Disorders, Major Complexity	1	0	4.6	1	14	11%	159%	0.2626	0.0000	0.0000	1.2808	0.2393	0.0000	$ 1,289	$ -	$ -	$ 6,289	$ 1,175
K64B	Endocrine Disorders, Minor Complexity	1	0	2.3	1	7	16%	179%	0.1742	0.0000	0.0000	0.6275	0.2373	0.0000	$ 855	$ -	$ -	$ 3,081	$ 1,165
L02A	Operative Insertion of Peritoneal Catheter for Dialysis, Major Complexity	0	0	8.2	3	27	6%	100%	0.0000	0.5804	1.1888	4.1469	0.2876	0.0000	$ -	$ 2,850	$ 5,837	$ 20,361	$ 1,412
L02B	Operative Insertion of Peritoneal Catheter for Dialysis, Minor Complexity	0	0	1.4	1	5	10%	100%	0.0000	0.0000	0.0000	0.9668	0.3208	0.0000	$ -	$ -	$ -	$ 4,747	$ 1,575
L03A	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Major Complexity	0	0	14.1	5	45	21%	100%	0.0000	2.0241	1.1709	7.8787	0.3403	0.0000	$ -	$ 9,938	$ 5,749	$ 38,684	$ 1,671
L03B	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Intermediate Comp	0	0	6.2	2	19	20%	100%	0.0000	0.5672	1.8555	4.2783	0.4309	0.0000	$ -	$ 2,785	$ 9,111	$ 21,006	$ 2,116
L03C	Kidney, Ureter and Major Bladder Procedures for Neoplasm, Minor Complexity	0	0	3.5	1	11	18%	100%	0.0000	0.0000	0.0000	2.7158	0.5342	0.0000	$ -	$ -	$ -	$ 13,335	$ 2,623
L04A	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Major Complexity	0	0	11.4	4	36	17%	100%	0.0000	0.9130	1.0099	4.9528	0.2833	0.0000	$ -	$ 4,483	$ 4,959	$ 24,318	$ 1,391
L04B	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Intermediate Com	1	0	4.5	1	13	17%	92%	0.7122	0.0000	0.0000	2.2650	0.2612	0.0000	$ 3,497	$ -	$ -	$ 11,121	$ 1,282
L04C	Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm, Minor Complexity	1	0	1.9	1	6	25%	129%	0.7070	0.0000	0.0000	1.4848	0.3741	0.0000	$ 3,471	$ -	$ -	$ 7,290	$ 1,837
L05A	Transurethral Prostatectomy for Urinary Disorder, Major Complexity	0	0	8.3	3	28	19%	100%	0.0000	0.5186	0.8129	2.9572	0.2229	0.0000	$ -	$ 2,546	$ 3,991	$ 14,520	$ 1,094
L05B	Transurethral Prostatectomy for Urinary Disorder, Minor Complexity	0	0	2.5	1	7	19%	100%	0.0000	0.0000	0.0000	1.3142	0.2475	0.0000	$ -	$ -	$ -	$ 6,453	$ 1,215
L06A	Minor Bladder Procedures, Major Complexity	0	0	11.8	3	35	14%	100%	0.0000	0.5429	1.3467	4.5831	0.3115	0.0000	$ -	$ 2,666	$ 6,612	$ 22,503	$ 1,529
L06B	Minor Bladder Procedures, Intermediate Complexity	0	0	4.2	1	12	13%	100%	0.0000	0.0000	0.0000	1.7988	0.3025	0.0000	$ -	$ -	$ -	$ 8,832	$ 1,485
L06C	Minor Bladder Procedures, Minor Complexity	1	0	2.0	1	6	13%	100%	0.4994	0.0000	0.0000	1.0771	0.2330	0.0000	$ 2,452	$ -	$ -	$ 5,289	$ 1,144
L07A	Other Transurethral Procedures, Major Complexity	0	0	5.1	1	16	16%	100%	0.0000	0.0000	0.0000	1.8106	0.2411	0.0000	$ -	$ -	$ -	$ 8,890	$ 1,184
L07B	Other Transurethral Procedures, Minor Complexity	0	0	1.3	1	4	29%	117%	0.0000	0.0000	0.0000	0.7124	0.2753	0.0000	$ -	$ -	$ -	$ 3,498	$ 1,352
L08A	Urethral Procedures, Major Complexity	1	0	3.3	1	12	22%	100%	0.5106	0.0000	0.0000	1.5249	0.2589	0.0000	$ 2,507	$ -	$ -	$ 7,487	$ 1,271
L08B	Urethral Procedures, Minor Complexity	0	0	1.3	1	4	20%	82%	0.0000	0.0000	0.0000	0.8359	0.2884	0.0000	$ -	$ -	$ -	$ 4,104	$ 1,416
L09A	Other Procedures for Kidney and Urinary Tract Disorders, Major Complexity	0	0	18.7	6	57	12%	100%	0.0000	0.6482	1.0201	6.7688	0.2770	0.0000	$ -	$ 3,183	$ 5,009	$ 33,235	$ 1,360
L09B	Other Procedures for Kidney and Urinary Tract Disorders, Intermediate Complexity	0	0	6.0	2	18	13%	100%	0.0000	0.6555	0.9998	2.6551	0.2426	0.0000	$ -	$ 3,219	$ 4,909	$ 13,037	$ 1,191
L09C	Other Procedures for Kidney and Urinary Tract Disorders, Minor Complexity	0	0	1.3	1	4	21%	80%	0.0000	0.0000	0.0000	1.0003	0.3125	0.0000	$ -	$ -	$ -	$ 4,911	$ 1,534
L40Z	Ureteroscopy	0	0	1.6	1	6	28%	100%	0.0000	0.0000	0.0000	0.8098	0.2778	0.0000	$ -	$ -	$ -	$ 3,976	$ 1,364
L41Z	Cystourethroscopy for Urinary Disorder, Sameday	0	0	1.0	1	1	27%	200%	0.0000	0.0000	0.0000	0.2317	0.0000	0.0000	$ -	$ -	$ -	$ 1,138	$ -
L42Z	ESW Lithotripsy	0	0	1.1	1	3	33%	100%	0.0000	0.0000	0.0000	0.7458	0.1983	0.0000	$ -	$ -	$ -	$ 3,662	$ 974
L60A	Kidney Failure, Major Complexity	0	0	11.0	3	34	12%	100%	0.0000	0.0000	1.0703	3.2108	0.2546	0.0000	$ -	$ -	$ 5,255	$ 15,765	$ 1,250
L60B	Kidney Failure, Intermediate Complexity	1	0	4.6	1	15	12%	175%	0.1944	0.0000	0.0000	1.1593	0.2310	0.0000	$ 955	$ -	$ -	$ 5,692	$ 1,134
L60C	Kidney Failure, Minor Complexity	1	0	2.6	1	9	15%	140%	0.2459	0.0000	0.0000	0.6509	0.2178	0.0000	$ 1,207	$ -	$ -	$ 3,196	$ 1,069
L61Z	Haemodialysis	0	0	1.0	1	3	10%	200%	0.0000	0.0000	0.0000	0.0993	0.0794	0.0000	$ -	$ -	$ -	$ 488	$ 390
L62A	Kidney and Urinary Tract Neoplasms, Major Complexity	0	0	10.0	3	28	7%	154%	0.0000	0.1139	0.9035	2.8244	0.2119	0.0000	$ -	$ 559	$ 4,436	$ 13,868	$ 1,040
L62B	Kidney and Urinary Tract Neoplasms, Minor Complexity	0	0	2.5	1	7	9%	125%	0.0000	0.0000	0.0000	0.6205	0.2323	0.0000	$ -	$ -	$ -	$ 3,047	$ 1,141
L63A	Kidney and Urinary Tract Infections, Major Complexity	0	0	6.0	1	18	10%	94%	0.0000	0.0000	0.0000	1.3577	0.2249	0.0000	$ -	$ -	$ -	$ 6,666	$ 1,104
L63B	Kidney and Urinary Tract Infections, Minor Complexity	1	0	2.6	1	8	11%	119%	0.0950	0.0000	0.0000	0.6098	0.2104	0.0000	$ 466	$ -	$ -	$ 2,994	$ 1,033
L64A	Urinary Stones and Obstruction, Major Complexity	1	0	2.7	1	8	21%	181%	0.1199	0.0000	0.0000	0.8665	0.2694	0.0000	$ 589	$ -	$ -	$ 4,255	$ 1,323
L64B	Urinary Stones and Obstruction, Minor Complexity	0	0	1.2	1	4	29%	200%	0.0000	0.0000	0.0000	0.2536	0.1675	0.0000	$ -	$ -	$ -	$ 1,245	$ 822
L65A	Kidney and Urinary Tract Signs and Symptoms, Major Complexity	1	0	5.4	1	17	10%	125%	0.1681	0.0000	0.0000	1.3371	0.2369	0.0000	$ 825	$ -	$ -	$ 6,565	$ 1,163
L65B	Kidney and Urinary Tract Signs and Symptoms, Minor Complexity	1	0	2.1	1	7	13%	171%	0.1057	0.0000	0.0000	0.5081	0.2043	0.0000	$ 519	$ -	$ -	$ 2,495	$ 1,003
L66Z	Urethral Stricture	0	0	1.8	1	5	11%	80%	0.0000	0.0000	0.0000	0.5767	0.2412	0.0000	$ -	$ -	$ -	$ 2,832	$ 1,184
L67A	Other Kidney and Urinary Tract Disorders, Major Complexity	1	0	5.5	1	16	11%	133%	0.2255	0.0000	0.0000	1.4006	0.2495	0.0000	$ 1,107	$ -	$ -	$ 6,877	$ 1,225
L67B	Other Kidney and Urinary Tract Disorders, Intermediate Complexity	1	0	2.3	1	7	16%	200%	0.1740	0.0000	0.0000	0.6195	0.2293	0.0000	$ 854	$ -	$ -	$ 3,042	$ 1,126
L67C	Other Kidney and Urinary Tract Disorders, Minor Complexity	0	0	1.1	1	3	12%	200%	0.0000	0.0000	0.0000	0.1632	0.1241	0.0000	$ -	$ -	$ -	$ 801	$ 609
L68Z	Peritoneal Dialysis	0	0	1.0	1	3	4%	200%	0.0000	0.0000	0.0000	0.2105	0.1042	0.0000	$ -	$ -	$ -	$ 1,034	$ 512
M01A	Major Male Pelvic Procedures, Major Complexity	0	0	6.3	2	20	22%	100%	0.0000	2.4350	0.9687	4.3724	0.3183	0.0000	$ -	$ 11,956	$ 4,756	$ 21,468	$ 1,563
M01B	Major Male Pelvic Procedures, Minor Complexity	0	0	3.3	1	10	23%	100%	0.0000	0.0000	0.0000	3.2407	0.1522	0.0000	$ -	$ -	$ -	$ 15,912	$ 747
M02A	Transurethral Prostatectomy for Reproductive System Disorder, Major Complexity	0	0	5.9	2	18	25%	100%	0.0000	0.5422	0.9174	2.3771	0.2552	0.0000	$ -	$ 2,662	$ 4,504	$ 11,672	$ 1,253
M02B	Transurethral Prostatectomy for Reproductive System Disorder, Minor Complexity	0	0	2.4	1	7	29%	100%	0.0000	0.0000	0.0000	1.3304	0.2397	0.0000	$ -	$ -	$ -	$ 6,532	$ 1,177
M03A	Penis Procedures, Major Complexity	0	0	3.3	1	9	21%	80%	0.0000	0.0000	0.0000	1.7023	0.3357	0.0000	$ -	$ -	$ -	$ 8,358	$ 1,648
M03B	Penis Procedures, Minor Complexity	0	0	1.2	1	4	22%	105%	0.0000	0.0000	0.0000	0.8737	0.2726	0.0000	$ -	$ -	$ -	$ 4,290	$ 1,338
M04Z	Testes Procedures	0	0	1.3	1	4	20%	89%	0.0000	0.0000	0.0000	0.7857	0.2591	0.0000	$ -	$ -	$ -	$ 3,858	$ 1,272
M05Z	Circumcision	0	0	1.0	1	3	19%	100%	0.0000	0.0000	0.0000	0.5739	0.1787	0.0000	$ -	$ -	$ -	$ 2,818	$ 877
M06A	Other Male Reproductive System OR Procedures, Major Complexity	1	0	8.4	2	25	22%	100%	0.6484	0.4348	1.3629	3.1605	0.2397	0.0000	$ 3,184	$ 2,135	$ 6,692	$ 15,518	$ 1,177
M06B	Other Male Reproductive System OR Procedures, Minor Complexity	0	0	1.3	1	4	40%	100%	0.0000	0.0000	0.0000	0.9391	0.2791	0.0000	$ -	$ -	$ -	$ 4,611	$ 1,370
M40Z	Cystourethroscopy for Male Reproductive System Disorder, Sameday	0	0	1.0	1	1	41%	100%	0.0000	0.0000	0.0000	0.2197	0.0000	0.0000	$ -	$ -	$ -	$ 1,079	$ -
M60A	Male Reproductive System Malignancy, Major Complexity	0	0	8.6	2	24	6%	100%	0.0000	0.0000	1.0624	2.1249	0.2094	0.0000	$ -	$ -	$ 5,216	$ 10,433	$ 1,028
M60B	Male Reproductive System Malignancy, Minor Complexity	0	0	1.3	1	4	20%	100%	0.0000	0.0000	0.0000	0.3737	0.2273	0.0000	$ -	$ -	$ -	$ 1,835	$ 1,116
M61A	Benign Prostatic Hypertrophy, Major Complexity	0	0	4.4	1	11	13%	100%	0.0000	0.0000	0.0000	0.9821	0.2303	0.0000	$ -	$ -	$ -	$ 4,822	$ 1,131
M61B	Benign Prostatic Hypertrophy, Minor Complexity	0	0	1.2	1	4	13%	100%	0.0000	0.0000	0.0000	0.3402	0.2345	0.0000	$ -	$ -	$ -	$ 1,670	$ 1,151
M62A	Male Reproductive System Inflammation, Major Complexity	0	0	4.6	1	15	11%	100%	0.0000	0.0000	0.0000	1.0151	0.2067	0.0000	$ -	$ -	$ -	$ 4,984	$ 1,015
M62B	Male Reproductive System Inflammation, Minor Complexity	1	0	2.4	1	7	11%	128%	0.1225	0.0000	0.0000	0.5802	0.2005	0.0000	$ 601	$ -	$ -	$ 2,849	$ 984
M63Z	Male Sterilisation Procedures	0	0	1.0	1	3	24%	100%	0.0000	0.0000	0.0000	0.4335	0.1285	0.0000	$ -	$ -	$ -	$ 2,128	$ 631
M64A	Other Male Reproductive System Disorders, Major Complexity	0	0	2.4	1	7	14%	100%	0.0000	0.0000	0.0000	0.6024	0.2263	0.0000	$ -	$ -	$ -	$ 2,958	$ 1,111
M64B	Other Male Reproductive System Disorders, Minor Complexity	0	0	1.1	1	3	15%	131%	0.0000	0.0000	0.0000	0.2593	0.1495	0.0000	$ -	$ -	$ -	$ 1,273	$ 734
N01A	Pelvic Evisceration and Radical Vulvectomy, Major Complexity	0	0	13.5	4	43	18%	100%	0.0000	1.5378	1.2253	6.4392	0.2860	0.0000	$ -	$ 7,551	$ 6,016	$ 31,616	$ 1,404
N01B	Pelvic Evisceration and Radical Vulvectomy, Minor Complexity	0	0	4.8	1	13	18%	100%	0.0000	0.0000	0.0000	3.0076	0.2748	0.0000	$ -	$ -	$ -	$ 14,767	$ 1,349
N04A	Hysterectomy for Non-Malignancy, Major Complexity	0	0	4.4	1	13	15%	100%	0.0000	0.0000	0.0000	2.9148	0.3569	0.0000	$ -	$ -	$ -	$ 14,312	$ 1,752
N04B	Hysterectomy for Non-Malignancy, Minor Complexity	0	0	2.7	1	8	16%	100%	0.0000	0.0000	0.0000	2.0254	0.3462	0.0000	$ -	$ -	$ -	$ 9,945	$ 1,700
N05A	Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy, Maj C	0	0	4.1	1	12	12%	100%	0.0000	0.0000	0.0000	2.5307	0.3334	0.0000	$ -	$ -	$ -	$ 12,426	$ 1,637
N05B	Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy, Min C	0	0	1.6	1	5	16%	100%	0.0000	0.0000	0.0000	1.4770	0.3572	0.0000	$ -	$ -	$ -	$ 7,252	$ 1,754
N06A	Female Reproductive System Reconstructive Procedures, Major Complexity	0	0	3.6	1	11	22%	100%	0.0000	0.0000	0.0000	2.2688	0.3448	0.0000	$ -	$ -	$ -	$ 11,140	$ 1,693

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
N06B	Female Reproductive System Reconstructive Procedures, Minor Complexity	0	0	1.9	1	6	21%	100%	0.0000	0.0000	0.0000	1.3465	0.3765	0.0000	$ -	$ -	$ -	$ 6,611	$ 1,849
N07A	Other Uterus and Adnexa Procedures for Non-Malignancy, Major Complexity	1	0	2.0	1	6	17%	106%	0.7747	0.0000	0.0000	1.5061	0.2881	0.0000	$ 3,804	$ -	$ -	$ 7,395	$ 1,415
N07B	Other Uterus and Adnexa Procedures for Non-Malignancy, Minor Complexity	0	0	1.0	1	3	35%	100%	0.0000	0.0000	0.0000	0.5517	0.1853	0.0000	$ -	$ -	$ -	$ 2,709	$ 910
N08Z	Endoscopic and Laparoscopic Procedures, Female Reproductive System	1	0	2.0	1	6	16%	114%	0.7235	0.0000	0.0000	1.3002	0.2606	0.0000	$ 3,552	$ -	$ -	$ 6,384	$ 1,280
N09Z	Other Vagina, Cervix and Vulva Procedures	0	0	1.2	1	3	16%	146%	0.0000	0.0000	0.0000	0.5502	0.1882	0.0000	$ -	$ -	$ -	$ 2,701	$ 924
N10Z	Diagnostic Curettage and Diagnostic Hysteroscopy	0	0	1.1	1	3	21%	100%	0.0000	0.0000	0.0000	0.4840	0.1480	0.0000	$ -	$ -	$ -	$ 2,376	$ 727
N11A	Other Female Reproductive System OR Procedures, Major Complexity	0	0	6.2	2	23	13%	100%	0.0000	0.3354	1.2777	2.8908	0.3107	0.0000	$ -	$ 1,647	$ 6,274	$ 14,194	$ 1,526
N11B	Other Female Reproductive System OR Procedures, Minor Complexity	0	0	1.0	1	3	17%	100%	0.0000	0.0000	0.0000	0.3899	0.3115	0.0000	$ -	$ -	$ -	$ 1,914	$ 1,529
N12A	Uterus and Adnexa Procedures for Malignancy, Major Complexity	0	0	9.5	3	31	17%	100%	0.0000	1.2097	1.3993	5.4076	0.3661	0.0000	$ -	$ 5,940	$ 6,871	$ 26,551	$ 1,798
N12B	Uterus and Adnexa Procedures for Malignancy, Intermediate Complexity	0	0	4.4	1	14	18%	100%	0.0000	0.0000	0.0000	3.0211	0.3512	0.0000	$ -	$ -	$ -	$ 14,834	$ 1,724
N12C	Uterus and Adnexa Procedures for Malignancy, Minor Complexity	0	0	2.6	1	8	21%	100%	0.0000	0.0000	0.0000	2.0612	0.3839	0.0000	$ -	$ -	$ -	$ 10,120	$ 1,885
N60A	Female Reproductive System Malignancy, Major Complexity	0	0	9.6	3	31	6%	100%	0.0000	0.0000	0.8927	2.6781	0.2111	0.0000	$ -	$ -	$ 4,383	$ 13,149	$ 1,037
N60B	Female Reproductive System Malignancy, Minor Complexity	0	0	3.5	1	10	6%	142%	0.0000	0.0000	0.0000	0.8044	0.2047	0.0000	$ -	$ -	$ -	$ 3,950	$ 1,005
N61A	Female Reproductive System Infections, Major Complexity	0	0	3.5	1	11	11%	100%	0.0000	0.0000	0.0000	0.8552	0.2483	0.0000	$ -	$ -	$ -	$ 4,199	$ 1,219
N61B	Female Reproductive System Infections, Minor Complexity	0	0	1.6	1	5	11%	188%	0.0000	0.0000	0.0000	0.3750	0.2585	0.0000	$ -	$ -	$ -	$ 1,841	$ 1,269
N62A	Menstrual and Other Female Reproductive System Disorders, Major Complexity	0	0	2.0	1	6	10%	120%	0.0000	0.0000	0.0000	0.4965	0.2757	0.0000	$ -	$ -	$ -	$ 2,438	$ 1,354
N62B	Menstrual and Other Female Reproductive System Disorders, Minor Complexity	0	0	1.2	1	4	14%	153%	0.0000	0.0000	0.0000	0.2387	0.1502	0.0000	$ -	$ -	$ -	$ 1,172	$ 737
O01A	Caesarean Delivery, Major Complexity	0	0	7.4	2	23	12%	100%	0.0000	0.6984	1.2613	3.2210	0.2466	0.0000	$ -	$ 3,429	$ 6,193	$ 15,815	$ 1,211
O01B	Caesarean Delivery, Intermediate Complexity	0	0	4.2	1	13	14%	100%	0.0000	0.0000	0.0000	2.2569	0.2473	0.0000	$ -	$ -	$ -	$ 11,081	$ 1,214
O01C	Caesarean Delivery, Minor Complexity	0	0	3.2	1	10	17%	100%	0.0000	0.0000	0.0000	1.8688	0.2690	0.0000	$ -	$ -	$ -	$ 9,176	$ 1,321
O02A	Vaginal Delivery W OR Procedures, Major Complexity	0	0	4.2	1	13	8%	100%	0.0000	0.0000	0.0000	2.3582	0.3281	0.0000	$ -	$ -	$ -	$ 11,579	$ 1,611
O02B	Vaginal Delivery W OR Procedures, Minor Complexity	0	0	2.9	1	9	12%	100%	0.0000	0.0000	0.0000	1.6372	0.3297	0.0000	$ -	$ -	$ -	$ 8,039	$ 1,619
O03A	Ectopic Pregnancy, Major Complexity	0	0	2.0	1	6	10%	100%	0.0000	0.0000	0.0000	1.3860	0.3397	0.0000	$ -	$ -	$ -	$ 6,805	$ 1,668
O03B	Ectopic Pregnancy, Minor Complexity	0	0	1.5	1	5	14%	100%	0.0000	0.0000	0.0000	0.9268	0.2949	0.0000	$ -	$ -	$ -	$ 4,551	$ 1,448
O04A	Postpartum and Post Abortion W OR Procedures, Major Complexity	0	0	4.8	1	15	13%	100%	0.0000	0.0000	0.0000	2.0051	0.3134	0.0000	$ -	$ -	$ -	$ 9,845	$ 1,539
O04B	Postpartum and Post Abortion W OR Procedures, Minor Complexity	1	0	2.1	1	7	13%	100%	0.4944	0.0000	0.0000	1.0486	0.3261	0.0000	$ 2,428	$ -	$ -	$ 5,149	$ 1,601
O05Z	Abortion W OR Procedures	0	0	1.1	1	3	21%	100%	0.0000	0.0000	0.0000	0.4745	0.1905	0.0000	$ -	$ -	$ -	$ 2,330	$ 935
O60A	Vaginal Delivery, Major Complexity	0	0	3.8	1	12	14%	100%	0.0000	0.0000	0.0000	1.6388	0.2644	0.0000	$ -	$ -	$ -	$ 8,047	$ 1,298
O60B	Vaginal Delivery, Intermediate Complexity	0	0	2.5	1	8	16%	109%	0.0000	0.0000	0.0000	1.1399	0.3022	0.0000	$ -	$ -	$ -	$ 5,597	$ 1,484
O60C	Vaginal Delivery, Minor Complexity	0	0	1.8	1	5	16%	106%	0.0000	0.0000	0.0000	0.8297	0.3158	0.0000	$ -	$ -	$ -	$ 4,074	$ 1,551
O61A	Postpartum and Post Abortion W/O OR Procedures, Major Complexity	0	0	4.4	1	12	8%	100%	0.0000	0.0000	0.0000	1.0554	0.2273	0.0000	$ -	$ -	$ -	$ 5,182	$ 1,116
O61B	Postpartum and Post Abortion W/O OR Procedures, Minor Complexity	1	0	2.3	1	7	9%	100%	0.1312	0.0000	0.0000	0.5890	0.1806	0.0000	$ 644	$ -	$ -	$ 2,892	$ 887
O63A	Abortion W/O OR Procedures, Major Complexity	0	0	1.6	1	4	15%	100%	0.0000	0.0000	0.0000	0.5449	0.3550	0.0000	$ -	$ -	$ -	$ 2,675	$ 1,743
O63B	Abortion W/O OR Procedures, Minor Complexity	0	0	1.1	1	3	21%	100%	0.0000	0.0000	0.0000	0.2031	0.1492	0.0000	$ -	$ -	$ -	$ 997	$ 733
O66A	Antenatal and Other Obstetric Admissions, Major Complexity	1	0	2.9	1	9	7%	100%	0.1397	0.0000	0.0000	0.7308	0.2074	0.0000	$ 686	$ -	$ -	$ 3,588	$ 1,018
O66B	Antenatal and Other Obstetric Admissions, Minor Complexity	0	0	1.2	1	4	9%	154%	0.0000	0.0000	0.0000	0.1883	0.1410	0.0000	$ -	$ -	$ -	$ 925	$ 692
P01Z	Neonate W Sig OR Proc/Vent>=96hrs, Died or Transfer to Acute Facility <5Days	0	1	1.5	1	4	13%	100%	0.0000	0.0000	0.0000	1.4484	0.5504	0.0000	$ -	$ -	$ -	$ 7,112	$ 2,702
P02Z	Cardiothoracic and Vascular Procedures for Neonates	0	1	31.5	21	48	18%	100%	0.0000	2.4378	1.1565	26.7235	0.5926	0.0000	$ -	$ 11,970	$ 5,678	$ 131,212	$ 2,910
P03A	Neonate, AdmWt 1000-1499g W Significant OR Proc/Vent>=96hrs, Major Complexit	0	1	62.7	21	194	11%	100%	0.0000	0.0662	1.2117	25.5123	0.3881	0.0000	$ -	$ 325	$ 5,949	$ 125,265	$ 1,906
P03B	Neonate, AdmWt 1000-1499g W Significant OR Proc/Vent>=96hrs, Minor Complexit	0	1	38.2	12	110	11%	100%	0.0000	0.1289	1.2479	15.1037	0.3253	0.0000	$ -	$ 633	$ 6,127	$ 74,159	$ 1,597
P04A	Neonate, AdmWt 1500-1999g W Significant OR Proc/Vent>=96hrs, Major Complexit	0	1	55.2	33	76	12%	100%	0.0000	0.3053	0.6570	21.9847	0.3512	0.0000	$ -	$ 1,499	$ 3,226	$ 107,945	$ 1,724
P04B	Neonate, AdmWt 1500-1999g W Significant OR Proc/Vent>=96hrs, Minor Complexit	0	1	27.9	8	75	11%	100%	0.0000	0.0286	1.2799	10.2675	0.3129	0.0000	$ -	$ 140	$ 6,284	$ 50,413	$ 1,536
P05A	Neonate, AdmWt 2000-2499g W Significant OR Proc/Vent>=96hrs, Major Complexit	0	1	60.8	32	72	14%	100%	0.0000	0.5644	0.7361	24.1195	0.4166	0.0000	$ -	$ 2,771	$ 3,614	$ 118,427	$ 2,046
P05B	Neonate, AdmWt 2000-2499g W Significant OR Proc/Vent>=96hrs, Minor Complexit	0	1	19.1	6	62	14%	100%	0.0000	0.2044	1.4077	8.6509	0.3570	0.0000	$ -	$ 1,004	$ 6,912	$ 42,476	$ 1,753
P06A	Neonate, AdmWt >=2500g W Significant OR Proc/Vent>=96hrs, Major Complexity	0	1	34.7	23	53	15%	100%	0.0000	0.6560	0.8358	19.8799	0.4746	0.0000	$ -	$ 3,221	$ 4,104	$ 97,610	$ 2,330
P06B	Neonate, AdmWt >=2500g W Significant OR Proc/Vent>=96hrs, Minor Complexity	0	1	12.3	8	18	15%	100%	0.0000	0.3117	0.7674	6.4507	0.4196	0.0000	$ -	$ 1,530	$ 3,768	$ 31,673	$ 2,060
P07Z	Neonate, AdmWt <750g W Significant OR Procedures	0	1	117.0	39	358	13%	100%	0.0000	0.3438	1.6697	65.4611	0.4563	0.0000	$ -	$ 1,688	$ 8,198	$ 321,414	$ 2,240
P08Z	Neonate, AdmWt 750-999g W Significant OR Procedures	0	1	99.4	32	297	13%	100%	0.0000	0.4913	1.4387	46.5294	0.3863	0.0000	$ -	$ 2,412	$ 7,064	$ 228,459	$ 1,897
P60A	Neonate W/O Sig OR/Vent>=96hrs, Died/Transfer Acute Facility <5 Days, MajC	0	1	2.3	1	4	15%	100%	0.0000	0.0000	0.0000	1.0425	0.0000	0.0000	$ -	$ -	$ -	$ 5,119	$ -
P60B	Neonate W/O Sig OR/Vent>=96hrs, Died/Transfer Acute Facility <5 Days, MinC	1	1	2.0	1	4	15%	100%	0.2152	0.0000	0.0000	0.8398	0.0000	0.0000	$ 1,057	$ -	$ -	$ 4,123	$ -
P61Z	Neonate, AdmWt <750g W/O Significant OR procedure	0	1	82.1	53	121	9%	100%	0.0000	0.0000	0.8332	44.1611	0.3772	0.0000	$ -	$ -	$ -	$ 4,091	$ 216,831	$ 1,852
P62A	Neonate, AdmWt 750-999g W/O Significant OR Procedures, Major Complexity	0	1	76.9	26	238	10%	100%	0.0000	0.0000	1.3344	34.6947	0.3797	0.0000	$ -	$ -	$ -	$ 6,552	$ 170,351	$ 1,864
P62B	Neonate, AdmWt 750-999g W/O Significant OR Procedures, Minor Complexity	0	1	45.8	15	138	10%	100%	0.0000	0.0000	1.3626	20.4390	0.3548	0.0000	$ -	$ -	$ -	$ 6,690	$ 100,355	$ 1,742
P63A	Neonate, AdmWt 1000-1249g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	35.4	12	110	5%	100%	0.0000	0.0000	0.9762	11.7146	0.2783	0.0000	$ -	$ -	$ -	$ 4,793	$ 57,519	$ 1,366
P63B	Neonate, AdmWt 1000-1249g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	14.9	3	36	5%	100%	0.0000	0.0000	1.8414	5.5241	0.2412	0.0000	$ -	$ -	$ -	$ 9,041	$ 27,123	$ 1,184
P64A	Neonate, AdmWt 1250-1499g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	33.4	11	100	6%	100%	0.0000	0.0000	0.9264	10.1908	0.2842	0.0000	$ -	$ -	$ -	$ 4,549	$ 50,037	$ 1,395
P64B	Neonate, AdmWt 1250-1499g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	22.4	7	67	8%	100%	0.0000	0.0000	1.0238	7.1667	0.2695	0.0000	$ -	$ -	$ -	$ 5,027	$ 35,188	$ 1,323
P65A	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Extreme Com	0	1	28.4	9	86	6%	100%	0.0000	0.0000	0.9396	8.4560	0.2777	0.0000	$ -	$ -	$ -	$ 4,613	$ 41,519	$ 1,364
P65B	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	20.8	7	63	9%	100%	0.0000	0.0000	0.9105	6.3734	0.2613	0.0000	$ -	$ -	$ -	$ 4,471	$ 31,293	$ 1,283
P65C	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Intermediate (	0	1	16.8	5	50	7%	100%	0.0000	0.0000	0.9994	4.9969	0.2723	0.0000	$ -	$ -	$ -	$ 4,907	$ 24,535	$ 1,337
P65D	Neonate, AdmWt 1500-1999g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	12.8	4	39	7%	100%	0.0000	0.0000	1.0133	4.0534	0.2710	0.0000	$ -	$ -	$ -	$ 4,975	$ 19,902	$ 1,331
P66A	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Extreme Com	0	1	17.4	5	53	8%	100%	0.0000	0.0000	1.0773	5.3867	0.2751	0.0000	$ -	$ -	$ -	$ 5,290	$ 26,449	$ 1,351
P66B	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Major Comple	0	1	12.8	4	38	10%	100%	0.0000	0.0000	0.9811	3.9245	0.2588	0.0000	$ -	$ -	$ -	$ 4,817	$ 19,269	$ 1,271
P66C	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Intermediate (	0	1	8.6	2	26	8%	100%	0.0000	0.0000	1.3158	2.6316	0.2707	0.0000	$ -	$ -	$ -	$ 6,461	$ 12,921	$ 1,329
P66D	Neonate, AdmWt 2000-2499g W/O Significant OR Proc/Vent>=96hrs, Minor Comple	0	1	4.2	1	13	11%	100%	0.0000	0.0000	0.0000	1.2749	0.2638	0.0000	$ -	$ -	$ -	$ 6,260	$ 1,295
P67A	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, Ex	0	1	14.7	4	42	6%	100%	0.0000	0.0000	1.1412	4.5647	0.2641	0.0000	$ -	$ -	$ -	$ 5,603	$ 22,413	$ 1,297
P67B	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, M	0	1	9.0	3	27	10%	100%	0.0000	0.0000	0.9701	2.9102	0.2781	0.0000	$ -	$ -	$ -	$ 4,763	$ 14,289	$ 1,365
P67C	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, In	0	1	6.9	2	21	6%	100%	0.0000	0.0000	1.1376	2.2751	0.2736	0.0000	$ -	$ -	$ -	$ 5,586	$ 11,171	$ 1,343
P67D	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, <37 Comp Wks Gest, M	0	1	4.8	1	15	6%	100%	0.0000	0.0000	0.0000	1.5523	0.2777	0.0000	$ -	$ -	$ -	$ -	$ 7,622	$ 1,364
P68A	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, E	0	1	8.6	3	28	13%	100%	0.0000	0.0000	1.0734	3.2201	0.3180	0.0000	$ -	$ -	$ -	$ 5,270	$ 15,811	$ 1,561
P68B	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, N	0	1	4.3	1	14	9%	100%	0.0000	0.0000	0.0000	1.4228	0.3225	0.0000	$ -	$ -	$ -	$ -	$ 6,986	$ 1,583
P68C	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, I	0	1	3.2	1	10	10%	100%	0.0000	0.0000	0.0000	1.0739	0.2805	0.0000	$ -	$ -	$ -	$ -	$ 5,273	$ 1,377
P68D	Neonate, AdmWt >=2500g W/O Sig OR Proc/Vent>=96hrs, >=37 Comp Wks Gest, N	0	1	2.2	1	7	9%	100%	0.0000	0.0000	0.0000	0.7521	0.2531	0.0000	$ -	$ -	$ -	$ -	$ 3,693	$ 1,243
Q01A	Splenectomy, Major Complexity	0	0	16.4	5	46	13%	100%	0.0000	1.4341	1.0863	6.8654	0.3059	0.0000	$ -	$ 7,041	$ 5,334	$ 33,709	$ 1,502
Q01B	Splenectomy, Minor Complexity	0	0	5.2	1	17	13%	100%	0.0000	0.0000	0.0000	3.0222	0.3133	0.0000	$ -	$ -	$ -	$ 14,839	$ 1,538

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
Q02A	Blood and Immune System Disorders W Other OR Procedures, Major Complexity	0	0	13.1	4	37	11%	139%	0.0000	0.3906	1.1810	5.1146	0.3206	0.0000	$ -	$ 1,918	$ 5,799	$ 25,113	$ 1,574
Q02B	Blood and Immune System Disorders W Other OR Procedures, Minor Complexity	1	0	3.5	1	11	21%	109%	0.5344	0.0000	0.0000	1.5921	0.2582	0.0000	$ 2,624	$ -	$ -	$ 7,817	$ 1,268
Q60A	Reticuloendothelial and Immunity Disorders, Major Complexity	1	0	5.8	1	17	10%	144%	0.2157	0.0000	0.0000	1.6079	0.3122	0.0000	$ 1,059	$ -	$ -	$ 7,895	$ 1,533
Q60B	Reticuloendothelial and Immunity Disorders, Minor Complexity	0	0	1.1	1	3	14%	196%	0.0000	0.0000	0.0000	0.1562	0.1110	0.0000	$ -	$ -	$ -	$ 767	$ 545
Q61A	Red Blood Cell Disorders, Major Complexity	1	0	4.5	1	14	14%	150%	0.2583	0.0000	0.0000	1.1053	0.2262	0.0000	$ 1,268	$ -	$ -	$ 5,427	$ 1,111
Q61B	Red Blood Cell Disorders, Intermediate Complexity	1	0	1.8	1	6	18%	182%	0.1956	0.0000	0.0000	0.4557	0.2382	0.0000	$ 960	$ -	$ -	$ 2,237	$ 1,170
Q61C	Red Blood Cell Disorders, Minor Complexity	0	0	1.0	1	3	24%	100%	0.0000	0.0000	0.0000	0.0669	0.0534	0.0000	$ -	$ -	$ -	$ 328	$ 262
Q62A	Coagulation Disorders, Major Complexity	1	0	5.7	1	17	13%	100%	0.1761	0.0000	0.0000	1.3634	0.2557	0.0000	$ 865	$ -	$ -	$ 6,694	$ 1,255
Q62B	Coagulation Disorders, Minor Complexity	1	0	2.4	1	7	13%	133%	0.1652	0.0000	0.0000	0.5728	0.2279	0.0000	$ 811	$ -	$ -	$ 2,812	$ 1,119
R01A	Lymphoma and Leukaemia W Major OR Procedures, Major Complexity	0	0	21.0	15	35	15%	100%	0.0000	1.2380	0.6071	10.3451	0.3270	0.0000	$ -	$ 6,079	$ 2,981	$ 50,794	$ 1,606
R01B	Lymphoma and Leukaemia W Major OR Procedures, Minor Complexity	0	0	3.9	1	12	20%	100%	0.0000	0.0000	0.0000	1.8320	0.3310	0.0000	$ -	$ -	$ -	$ 8,995	$ 1,625
R02A	Other Neoplastic Disorders W Major OR Procedures, Major Complexity	0	0	14.5	10	23	15%	100%	0.0000	1.9832	0.5722	7.7049	0.2511	0.0000	$ -	$ 9,738	$ 2,810	$ 37,831	$ 1,233
R02B	Other Neoplastic Disorders W Major OR Procedures, Intermediate Complexity	0	0	7.8	2	21	19%	100%	0.0000	0.8276	1.4353	3.6982	0.1508	0.0000	$ -	$ 4,064	$ 7,047	$ 18,158	$ 740
R02C	Other Neoplastic Disorders W Major OR Procedures, Minor Complexity	0	0	4.2	1	13	19%	100%	0.0000	0.0000	0.0000	2.0283	0.2394	0.0000	$ -	$ -	$ -	$ 9,959	$ 1,175
R03A	Lymphoma and Leukaemia W Other OR Procedures, Major Complexity	0	0	25.8	9	82	12%	100%	0.0000	0.5079	1.0818	10.2441	0.3449	0.0000	$ -	$ 2,494	$ 5,312	$ 50,299	$ 1,693
R03B	Lymphoma and Leukaemia W Other OR Procedures, Intermediate Complexity	0	0	8.5	2	25	17%	100%	0.0000	0.3788	1.5650	3.5087	0.2785	0.0000	$ -	$ 1,860	$ 7,684	$ 17,228	$ 1,367
R03C	Lymphoma and Leukaemia W Other OR Procedures, Minor Complexity	1	0	3.0	1	10	25%	143%	0.6429	0.0000	0.0000	1.6426	0.2770	0.0000	$ 3,157	$ -	$ -	$ 8,065	$ 1,360
R04A	Other Neoplastic Disorders W Other OR Procedures, Major Complexity	0	0	7.4	2	25	22%	100%	0.0000	0.4752	1.5625	3.6002	0.2675	0.0000	$ -	$ 2,333	$ 7,672	$ 17,677	$ 1,313
R04B	Other Neoplastic Disorders W Other OR Procedures, Minor Complexity	1	0	3.3	1	9	21%	94%	0.7054	0.0000	0.0000	1.5970	0.1948	0.0000	$ 3,464	$ -	$ -	$ 7,841	$ 956
R60A	Acute Leukaemia, Major Complexity	0	0	15.3	10	24	10%	120%	0.0000	0.0000	0.6824	6.8244	0.3175	0.0000	$ -	$ -	$ 3,351	$ 33,508	$ 1,559
R60B	Acute Leukaemia, Minor Complexity	1	0	4.3	1	13	11%	119%	0.2853	0.0000	0.0000	1.5569	0.2664	0.0000	$ 1,401	$ -	$ -	$ 7,644	$ 1,308
R61A	Lymphoma and Non-Acute Leukaemia, Major Complexity	0	0	8.4	2	26	11%	143%	0.0000	0.0000	1.4245	2.8490	0.2784	0.0000	$ -	$ -	$ 6,994	$ 13,989	$ 1,367
R61B	Lymphoma and Non-Acute Leukaemia, Minor Complexity	1	0	3.4	1	10	13%	167%	0.2120	0.0000	0.0000	1.1962	0.2683	0.0000	$ 1,041	$ -	$ -	$ 5,873	$ 1,317
R62A	Other Neoplastic Disorders, Major Complexity	0	0	7.9	2	22	9%	100%	0.0000	0.0000	1.1975	2.3950	0.2039	0.0000	$ -	$ -	$ 5,880	$ 11,759	$ 1,001
R62B	Other Neoplastic Disorders, Intermediate Complexity	1	0	4.0	1	11	10%	100%	0.5892	0.0000	0.0000	1.0657	0.2252	0.0000	$ 2,893	$ -	$ -	$ 5,233	$ 1,106
R62C	Other Neoplastic Disorders, Minor Complexity	1	0	2.9	1	9	11%	152%	0.4092	0.0000	0.0000	0.6448	0.1922	0.0000	$ 2,009	$ -	$ -	$ 3,166	$ 944
R63Z	Chemotherapy	0	0	1.0	1	3	8%	122%	0.0000	0.0000	0.0000	0.2652	0.1819	0.0000	$ -	$ -	$ -	$ 1,302	$ 893
S65A	Human Immunodeficiency Virus, Major Complexity	0	0	18.0	6	57	10%	100%	0.0000	0.0000	1.3149	7.8893	0.3672	0.0000	$ -	$ -	$ 6,456	$ 38,736	$ 1,803
S65B	Human Immunodeficiency Virus, Intermediate Complexity	1	0	6.0	2	18	10%	100%	0.2948	0.0000	0.9592	1.9185	0.2950	0.0000	$ 1,447	$ -	$ 4,710	$ 9,420	$ 1,448
S65C	Human Immunodeficiency Virus, Minor Complexity	1	0	3.8	1	13	13%	100%	0.2036	0.0000	0.0000	1.0794	0.2258	0.0000	$ 1,000	$ -	$ -	$ 5,300	$ 1,109
T01A	Infectious and Parasitic Diseases W OR Procedures, Major Complexity	0	0	25.7	8	76	12%	127%	0.0000	0.5887	1.0707	9.1540	0.2766	0.0000	$ -	$ 2,891	$ 5,257	$ 44,946	$ 1,358
T01B	Infectious and Parasitic Diseases W OR Procedures, Intermediate Complexity	0	0	11.7	3	35	11%	106%	0.0000	0.4368	1.1840	3.9888	0.2363	0.0000	$ -	$ 2,145	$ 5,813	$ 19,585	$ 1,160
T01C	Infectious and Parasitic Diseases W OR Procedures, Minor Complexity	0	0	6.2	2	19	11%	100%	0.0000	0.3330	0.9281	2.1892	0.2338	0.0000	$ -	$ 1,635	$ 4,557	$ 10,749	$ 1,148
T40Z	Infectious and Parasitic Diseases W Ventilator Support	0	0	10.0	2	24	13%	100%	0.0000	0.0675	2.5330	5.1334	0.3687	0.0000	$ -	$ 331	$ 12,437	$ 25,205	$ 1,810
T60A	Septicaemia, Major Complexity	0	0	14.1	4	42	13%	110%	0.0000	0.0000	1.0674	4.2696	0.2275	0.0000	$ -	$ -	$ 5,241	$ 20,964	$ 1,117
T60B	Septicaemia, Intermediate Complexity	0	0	7.5	2	23	13%	100%	0.0000	0.0000	1.0380	2.0760	0.2192	0.0000	$ -	$ -	$ 5,097	$ 10,193	$ 1,076
T60C	Septicaemia, Minor Complexity	0	0	4.4	1	14	12%	118%	0.0000	0.0000	0.0000	1.1088	0.2316	0.0000	$ -	$ -	$ -	$ 5,444	$ 1,137
T61A	Postoperative and Post-Traumatic Infections, Major Complexity	0	0	7.0	2	23	9%	120%	0.0000	0.0000	0.8310	1.6619	0.1900	0.0000	$ -	$ -	$ 4,080	$ 8,160	$ 933
T61B	Postoperative and Post-Traumatic Infections, Minor Complexity	0	0	3.2	1	10	10%	148%	0.0000	0.0000	0.0000	0.6466	0.1745	0.0000	$ -	$ -	$ -	$ 3,175	$ 857
T62A	Fever of Unknown Origin, Major Complexity	0	0	5.3	1	17	11%	115%	0.0000	0.0000	0.0000	1.4519	0.2707	0.0000	$ -	$ -	$ -	$ 7,129	$ 1,329
T62B	Fever of Unknown Origin, Minor Complexity	0	0	2.2	1	7	13%	100%	0.0000	0.0000	0.0000	0.5143	0.2678	0.0000	$ -	$ -	$ -	$ 2,525	$ 1,315
T63A	Viral Illnesses, Major Complexity	1	0	4.5	1	13	11%	120%	0.1259	0.0000	0.0000	1.0766	0.2420	0.0000	$ 618	$ -	$ -	$ 5,286	$ 1,188
T63B	Viral Illnesses, Minor Complexity	0	0	1.4	1	5	10%	108%	0.0000	0.0000	0.0000	0.3295	0.2307	0.0000	$ -	$ -	$ -	$ 1,618	$ 1,133
T64A	Other Infectious and Parasitic Diseases, Major Complexity	0	0	17.4	5	54	9%	100%	0.0000	0.0000	1.1477	5.7384	0.2682	0.0000	$ -	$ -	$ 5,635	$ 28,176	$ 1,317
T64B	Other Infectious and Parasitic Diseases, Intermediate Complexity	0	0	8.5	2	24	10%	100%	0.0000	0.0000	1.0890	2.1781	0.1921	0.0000	$ -	$ -	$ 5,347	$ 10,694	$ 943
T64C	Other Infectious and Parasitic Diseases, Minor Complexity	1	0	4.7	1	15	9%	109%	0.2157	0.0000	0.0000	1.1256	0.1833	0.0000	$ 1,059	$ -	$ -	$ 5,527	$ 900
U40Z	Mental Health Treatment W ECT, Sameday	0	0	1.0	1	1	12%	100%	0.0000	0.0000	0.0000	0.1762	0.0000	0.0000	$ -	$ -	$ -	$ 865	$ -
U60A	Mental Health Treatment W/O ECT, Sameday, Major Complexity	0	0	1.0	1	1	15%	180%	0.0000	0.0000	0.0000	0.1027	0.0000	0.0000	$ -	$ -	$ -	$ 504	$ -
U60B	Mental Health Treatment W/O ECT, Sameday, Minor Complexity	0	0	1.0	1	1	15%	198%	0.0000	0.0000	0.0000	0.0897	0.0000	0.0000	$ -	$ -	$ -	$ 440	$ -
U61A	Schizophrenia Disorders, Major Complexity	0	0	49.1	30	68	2%	100%	0.0000	0.0000	0.3380	10.1407	0.1932	0.0000	$ -	$ -	$ 1,660	$ 49,791	$ 949
U61B	Schizophrenia Disorders, Minor Complexity	0	0	19.9	13	31	1%	100%	0.0000	0.0000	0.3767	4.8971	0.1936	0.0000	$ -	$ -	$ 1,850	$ 24,045	$ 951
U62A	Paranoia and Acute Psychotic Disorders, Major Complexity	0	0	23.5	16	38	2%	100%	0.0000	0.0000	0.4210	6.7361	0.2228	0.0000	$ -	$ -	$ 2,067	$ 33,074	$ 1,094
U62B	Paranoia and Acute Psychotic Disorders, Minor Complexity	0	0	12.2	8	19	2%	164%	0.0000	0.0000	0.4164	3.3316	0.2038	0.0000	$ -	$ -	$ 2,045	$ 16,358	$ 1,001
U63A	Major Affective Disorders, Major Complexity	0	0	28.3	19	44	2%	200%	0.0000	0.0000	0.4001	7.6015	0.2101	0.0000	$ -	$ -	$ 1,964	$ 37,323	$ 1,032
U63B	Major Affective Disorders, Minor Complexity	0	0	13.4	9	20	2%	155%	0.0000	0.0000	0.4177	3.7593	0.2127	0.0000	$ -	$ -	$ 2,051	$ 18,458	$ 1,044
U64A	Other Affective and Somatoform Disorders, Major Complexity	0	0	13.0	8	20	3%	157%	0.0000	0.0000	0.4245	3.3963	0.1993	0.0000	$ -	$ -	$ 2,084	$ 16,676	$ 979
U64B	Other Affective and Somatoform Disorders, Minor Complexity	0	0	6.0	4	9	2%	154%	0.0000	0.0000	0.4178	1.6711	0.2049	0.0000	$ -	$ -	$ 2,051	$ 8,205	$ 1,006
U65A	Anxiety Disorders, Major Complexity	0	0	9.3	5	14	5%	144%	0.0000	0.0000	0.5238	2.6188	0.2271	0.0000	$ -	$ -	$ 2,572	$ 12,858	$ 1,115
U65B	Anxiety Disorders, Minor Complexity	0	0	3.7	2	6	6%	178%	0.0000	0.0000	0.5035	1.0070	0.2263	0.0000	$ -	$ -	$ 2,472	$ 4,944	$ 1,111
U66A	Eating and Obsessive-Compulsive Disorders, Major Complexity	0	0	26.4	18	42	3%	111%	0.0000	0.0000	0.4737	8.5261	0.2404	0.0000	$ -	$ -	$ 2,326	$ 41,863	$ 1,180
U66B	Eating and Obsessive-Compulsive Disorders, Minor Complexity	0	0	13.5	9	20	3%	117%	0.0000	0.0000	0.5168	4.6509	0.2546	0.0000	$ -	$ -	$ 2,537	$ 22,836	$ 1,250
U67A	Personality Disorders and Acute Reactions, Major Complexity	0	0	10.9	7	17	2%	177%	0.0000	0.0000	0.4462	3.1236	0.2228	0.0000	$ -	$ -	$ 2,191	$ 15,337	$ 1,094
U67B	Personality Disorders and Acute Reactions, Minor Complexity	0	0	4.7	3	7	2%	162%	0.0000	0.0000	0.4608	1.3824	0.2316	0.0000	$ -	$ -	$ 2,263	$ 6,788	$ 1,137
U68A	Childhood Mental Disorders, Major Complexity	0	0	19.3	7	16	1%	131%	0.0000	0.0000	0.6229	4.3606	0.2940	0.0000	$ -	$ -	$ 3,058	$ 21,411	$ 1,444
U68B	Childhood Mental Disorders, Minor Complexity	0	0	5.4	4	8	1%	129%	0.0000	0.0000	0.5837	2.3350	0.2859	0.0000	$ -	$ -	$ 2,866	$ 11,465	$ 1,404
V60A	Alcohol Intoxication and Withdrawal, Major Complexity	0	0	4.7	3	7	10%	100%	0.0000	0.0000	0.3896	1.1687	0.1993	0.0000	$ -	$ -	$ 1,913	$ 5,738	$ 979
V60B	Alcohol Intoxication and Withdrawal, Minor Complexity	0	0	2.0	1	3	9%	100%	0.0000	0.0000	0.0000	0.3255	0.2110	0.0000	$ -	$ -	$ -	$ 1,598	$ 1,036
V61A	Drug Intoxication and Withdrawal, Major Complexity	0	0	12.4	7	17	2%	100%	0.0000	0.0000	0.4473	3.1313	0.2265	0.0000	$ -	$ -	$ 2,196	$ 15,375	$ 1,112
V61B	Drug Intoxication and Withdrawal, Minor Complexity	0	0	6.3	4	9	2%	169%	0.0000	0.0000	0.4210	1.6838	0.2157	0.0000	$ -	$ -	$ 2,067	$ 8,267	$ 1,059
V62A	Alcohol Use and Dependence, Major Complexity	0	0	9.7	6	15	5%	100%	0.0000	0.0000	0.3964	2.3783	0.2263	0.0000	$ -	$ -	$ 1,946	$ 11,677	$ 1,111
V62B	Alcohol Use and Dependence, Minor Complexity	0	0	5.6	4	9	2%	100%	0.0000	0.0000	0.3694	1.4776	0.2232	0.0000	$ -	$ -	$ 1,814	$ 7,255	$ 1,096
V63Z	Opioid Use and Dependence	0	0	6.0	3	8	1%	100%	0.0000	0.0000	0.3906	1.1718	0.1660	0.0000	$ -	$ -	$ 1,918	$ 5,754	$ 815
V64Z	Other Drug Use and Dependence	0	0	5.3	3	8	3%	100%	0.0000	0.0000	0.3822	1.1466	0.1734	0.0000	$ -	$ -	$ 1,877	$ 5,630	$ 851
V65Z	Treatment for Alcohol Disorders, Sameday	0	0	1.0	1	1	7%	123%	0.0000	0.0000	0.0000	0.1080	0.0000	0.0000	$ -	$ -	$ -	$ 530	$ -
V66Z	Treatment for Drug Disorders, Sameday	0	0	1.0	1	1	4%	100%	0.0000	0.0000	0.0000	0.1017	0.0000	0.0000	$ -	$ -	$ -	$ 499	$ -

DRG CODE	Description	Same Day Payment List	Bundled ICU	IHPA ALOS	Lower Bound	Upper Bound	Private Patient Service Adjustment	Paediatric Adjustment	Same Day	Short-Stay Outlier Base	Short-Stay Outlier Per Diem	Inlier	Long-Stay Outlier Per Diem	PBS	Same Day $	Short-Stay Outlier Base $	Short-Stay Outlier Per Diem $	Inlier $	Long-Stay Outlier Per Diem $
W01A	Vent, Trac & Cran Procs for Mult Sig Trauma, Major Complexity	0	0	40.2	12	111	14%	100%	0.0000	5.5785	1.8946	28.3142	0.3208	0.0000	$ -	$ 27,390	$ 9,302	$ 139,023	$ 1,575
W01B	Vent, Trac & Cran Procs for Mult Sig Trauma, Intermediate Complexity	0	0	19.0	6	63	14%	100%	0.0000	2.6129	2.0584	14.9634	0.3242	0.0000	$ -	$ 12,829	$ 10,107	$ 73,470	$ 1,592
W01C	Vent, Trac & Cran Procs for Mult Sig Trauma, Minor Complexity	0	0	12.0	4	40	14%	100%	0.0000	1.5364	2.0409	9.6999	0.3524	0.0000	$ -	$ 7,544	$ 10,021	$ 47,627	$ 1,730
W02A	Hip, Femur and Lower Limb Procedures for Multiple Sig Trauma, Major Complexity	0	0	23.6	6	61	19%	100%	0.0000	2.2479	1.5737	11.6898	0.2936	0.0000	$ -	$ 11,037	$ 7,727	$ 57,397	$ 1,442
W02B	Hip, Femur and Lower Limb Procedures for Multiple Sig Trauma, Minor Complexity	0	0	13.9	4	37	18%	100%	0.0000	1.4057	1.0045	5.4239	0.2820	0.0000	$ -	$ 6,902	$ 4,932	$ 26,631	$ 1,385
W03Z	Abdominal Procedures for Multiple Significant Trauma	0	0	12.7	3	35	14%	100%	0.0000	1.1636	1.5359	5.7714	0.3819	0.0000	$ -	$ 5,713	$ 7,541	$ 28,338	$ 1,875
W04A	Multiple Significant Trauma W Other OR Procedures, Major Complexity	0	0	23.1	7	66	17%	100%	0.0000	1.9456	1.2855	10.9440	0.2793	0.0000	$ -	$ 9,553	$ 6,312	$ 53,735	$ 1,371
W04B	Multiple Significant Trauma W Other OR Procedures, Minor Complexity	0	0	9.4	3	28	17%	100%	0.0000	1.1765	1.4425	5.5041	0.3891	0.0000	$ -	$ 5,777	$ 7,083	$ 27,025	$ 1,910
W60A	Multiple Sig Trauma, Died or Transferred to Acute Facility <5 Days, Major Comp	0	0	1.6	1	4	21%	100%	0.0000	0.0000	0.0000	1.9292	0.0000	0.0000	$ -	$ -	$ -	$ 9,472	$ -
W60B	Multiple Sig Trauma, Died or Transferred to Acute Facility <5 Days, Minor Comp	0	0	1.5	1	4	21%	100%	0.0000	0.0000	0.0000	1.0646	0.0000	0.0000	$ -	$ -	$ -	$ 5,227	$ -
W61A	Multiple Significant Trauma W/O OR Procedures, Major Complexity	0	0	18.4	5	51	8%	100%	0.0000	0.0000	0.9491	4.7454	0.2508	0.0000	$ -	$ -	$ 4,660	$ 23,300	$ 1,231
W61B	Multiple Significant Trauma W/O OR Procedures, Minor Complexity	0	0	6.1	2	18	9%	114%	0.0000	0.0000	0.9821	1.9642	0.2681	0.0000	$ -	$ -	$ 4,822	$ 9,644	$ 1,316
X02A	Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand, Major Comp	0	0	6.9	2	20	17%	100%	0.0000	0.4628	1.7138	3.8904	0.3583	0.0000	$ -	$ 2,272	$ 8,415	$ 19,102	$ 1,759
X02B	Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand, Minor Comp	0	0	1.6	1	5	30%	125%	0.0000	0.0000	0.0000	0.9636	0.4595	0.0000	$ -	$ -	$ -	$ 4,731	$ 2,256
X04A	Other Procedures for Injuries to Lower Limb, Major Complexity	0	0	12.0	3	34	12%	100%	0.0000	0.6832	1.2015	4.2876	0.2847	0.0000	$ -	$ 3,355	$ 5,899	$ 21,052	$ 1,398
X04B	Other Procedures for Injuries to Lower Limb, Minor Complexity	1	0	2.5	1	7	14%	105%	0.4809	0.0000	0.0000	1.0577	0.2684	0.0000	$ 2,361	$ -	$ -	$ 5,193	$ 1,318
X05A	Other Procedures for Injuries to Hand, Major Complexity	0	0	2.5	1	8	14%	114%	0.0000	0.0000	0.0000	1.1553	0.3191	0.0000	$ -	$ -	$ -	$ 5,673	$ 1,567
X05B	Other Procedures for Injuries to Hand, Minor Complexity	0	0	1.2	1	4	20%	100%	0.0000	0.0000	0.0000	0.5715	0.2117	0.0000	$ -	$ -	$ -	$ 2,806	$ 1,039
X06A	Other Procedures for Other Injuries, Major Complexity	0	0	13.0	4	38	13%	130%	0.0000	0.5965	1.0080	4.6283	0.2374	0.0000	$ -	$ 2,929	$ 4,949	$ 22,725	$ 1,166
X06B	Other Procedures for Other Injuries, Intermediate Complexity	0	0	4.7	1	14	13%	108%	0.0000	0.0000	0.0000	1.6219	0.2254	0.0000	$ -	$ -	$ -	$ 7,964	$ 1,107
X06C	Other Procedures for Other Injuries, Minor Complexity	0	0	1.8	1	6	14%	100%	0.0000	0.0000	0.0000	0.8316	0.2700	0.0000	$ -	$ -	$ -	$ 4,083	$ 1,326
X07A	Skin Grafts for Injuries Excluding Hand, Major Complexity	0	0	23.7	7	68	8%	100%	0.0000	0.6967	1.0948	8.3606	0.2946	0.0000	$ -	$ 3,421	$ 5,375	$ 41,051	$ 1,446
X07B	Skin Grafts for Injuries Excluding Hand, Intermediate Complexity	0	0	9.3	3	32	8%	100%	0.0000	0.5712	0.9375	3.3838	0.2595	0.0000	$ -	$ 2,805	$ 4,603	$ 16,614	$ 1,274
X07C	Skin Grafts for Injuries Excluding Hand, Minor Complexity	0	0	4.6	1	14	14%	100%	0.0000	0.0000	0.0000	1.7399	0.2703	0.0000	$ -	$ -	$ -	$ 8,543	$ 1,327
X40A	Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support, Major Comp	0	0	8.0	2	25	10%	100%	0.0000	0.0839	1.7480	3.5799	0.2551	0.0000	$ -	$ 412	$ 8,583	$ 17,577	$ 1,253
X40B	Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support, Minor Comp	0	0	3.9	1	10	10%	100%	0.0000	0.0000	0.0000	2.0761	0.3094	0.0000	$ -	$ -	$ -	$ 10,194	$ 1,519
X60A	Injuries, Major Complexity	1	0	5.3	1	17	12%	100%	0.1228	0.0000	0.0000	1.1066	0.2120	0.0000	$ 603	$ -	$ -	$ 5,433	$ 1,041
X60B	Injuries, Minor Complexity	0	0	1.3	1	4	17%	174%	0.0000	0.0000	0.0000	0.2372	0.1771	0.0000	$ -	$ -	$ -	$ 1,165	$ 870
X61A	Allergic Reactions, Major Complexity	0	0	1.7	1	5	9%	131%	0.0000	0.0000	0.0000	0.3651	0.2083	0.0000	$ -	$ -	$ -	$ 1,793	$ 1,023
X61B	Allergic Reactions, Minor Complexity	0	0	1.0	1	3	13%	120%	0.0000	0.0000	0.0000	0.1228	0.0867	0.0000	$ -	$ -	$ -	$ 603	$ 426
X62A	Poisoning/Toxic Effects of Drugs and Other Substances, Major Complexity	1	0	5.7	1	17	7%	147%	0.1371	0.0000	0.0000	1.3232	0.2288	0.0000	$ 673	$ -	$ -	$ 6,497	$ 1,123
X62B	Poisoning/Toxic Effects of Drugs and Other Substances, Minor Complexity	1	0	1.9	1	6	9%	119%	0.0963	0.0000	0.0000	0.4361	0.2337	0.0000	$ 473	$ -	$ -	$ 2,141	$ 1,147
X63A	Sequelae of Treatment, Major Complexity	1	0	5.8	1	17	13%	144%	0.1862	0.0000	0.0000	1.3672	0.2175	0.0000	$ 914	$ -	$ -	$ 6,713	$ 1,068
X63B	Sequelae of Treatment, Minor Complexity	1	0	2.4	1	7	12%	105%	0.1684	0.0000	0.0000	0.5273	0.1618	0.0000	$ 827	$ -	$ -	$ 2,589	$ 794
X64A	Other Injuries, Poisonings and Toxic Effects, Major Complexity	0	0	6.8	2	19	11%	140%	0.0000	0.0000	0.8320	1.6640	0.1901	0.0000	$ -	$ -	$ 4,085	$ 8,170	$ 933
X64B	Other Injuries, Poisonings and Toxic Effects, Minor Complexity	0	0	1.3	1	4	12%	123%	0.0000	0.0000	0.0000	0.2431	0.1651	0.0000	$ -	$ -	$ -	$ 1,194	$ 811
Y01Z	Vent >=96hrs or Trach for Burns or OR Procs for Severe Full Thickness Burns	0	0	31.8	18	164	7%	100%	0.0000	2.5037	2.0894	40.1138	0.6665	0.0000	$ -	$ 12,293	$ 10,259	$ 196,959	$ 3,273
Y02A	Skin Grafts for Other Burns, Major Complexity	0	0	16.8	5	50	6%	100%	0.0000	0.4432	1.6845	8.8657	0.4812	0.0000	$ -	$ 2,176	$ 8,271	$ 43,531	$ 2,363
Y02B	Skin Grafts for Other Burns, Intermediate Complexity	0	0	6.2	2	18	6%	100%	0.0000	0.3224	1.5742	3.4709	0.3509	0.0000	$ -	$ 1,583	$ 7,729	$ 17,042	$ 1,723
Y02C	Skin Grafts for Other Burns, Minor Complexity	0	0	2.3	1	7	7%	100%	0.0000	0.0000	0.0000	0.9614	0.4970	0.0000	$ -	$ -	$ -	$ 4,720	$ 2,440
Y03A	Other OR Procedures for Other Burns, Major Complexity	0	0	4.3	1	14	7%	110%	0.0000	0.0000	0.0000	1.7997	0.3736	0.0000	$ -	$ -	$ -	$ 8,837	$ 1,834
Y03B	Other OR Procedures for Other Burns, Minor Complexity	0	0	2.4	1	8	8%	106%	0.0000	0.0000	0.0000	0.9891	0.3749	0.0000	$ -	$ -	$ -	$ 4,856	$ 1,841
Y60Z	Burns, Transferred to Acute Facility <5 Days	0	0	1.3	1	4	4%	100%	0.0000	0.0000	0.0000	0.4049	0.0000	0.0000	$ -	$ -	$ -	$ 1,988	$ -
Y61Z	Severe Burns	0	0	3.9	1	10	4%	129%	0.0000	0.0000	0.0000	0.9167	0.2910	0.0000	$ -	$ -	$ -	$ 4,501	$ 1,429
Y62A	Other Burns, Major Complexity	1	0	4.8	1	14	2%	126%	0.1181	0.0000	0.0000	1.2827	0.2619	0.0000	$ 580	$ -	$ -	$ 6,298	$ 1,286
Y62B	Other Burns, Minor Complexity	1	0	2.3	1	6	5%	149%	0.1301	0.0000	0.0000	0.4745	0.2143	0.0000	$ 639	$ -	$ -	$ 2,330	$ 1,052
Z01A	Other Contacts W Health Services W OR Procedures, Major Complexity	0	0	11.9	3	36	22%	80%	0.0000	0.4325	1.2404	4.1538	0.2084	0.0000	$ -	$ 2,124	$ 6,090	$ 20,395	$ 1,023
Z01B	Other Contacts W Health Services W OR Procedures, Minor Complexity	1	0	1.6	1	9	38%	100%	0.4619	0.0000	0.0000	1.1117	0.2525	0.0000	$ 2,268	$ -	$ -	$ 5,458	$ 1,240
Z40Z	Other Contacts W Health Services W Endoscopy, Sameday	0	0	1.0	1	1	45%	159%	0.0000	0.0000	0.0000	0.2234	0.0000	0.0000	$ -	$ -	$ -	$ 1,097	$ -
Z60A	Rehabilitation, Major Complexity	0	0	0.0	0	0	0%	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
Z60B	Rehabilitation, Minor Complexity	0	0	0.0	0	0	0%	0%	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
Z61A	Signs and Symptoms, Major Complexity	0	0	6.6	2	20	9%	126%	0.0000	0.0000	0.0000	0.8081	0.1662	0.0000	$ -	$ -	$ 3,968	$ 7,936	$ 1,015
Z61B	Signs and Symptoms, Intermediate Complexity	1	0	3.1	1	9	13%	140%	0.1757	0.0000	0.0000	0.6514	0.1987	0.0000	$ 863	$ -	$ -	$ 3,198	$ 976
Z61C	Signs and Symptoms, Minor Complexity	1	0	2.4	1	8	18%	100%	0.1917	0.0000	0.0000	0.5044	0.2144	0.0000	$ 941	$ -	$ -	$ 2,477	$ 1,053
Z63A	Other Follow Up After Surgery or Medical Care, Major Complexity	0	0	10.4	3	33	10%	189%	0.0000	0.0000	0.7914	2.3742	0.1828	0.0000	$ -	$ -	$ 3,886	$ 11,657	$ 898
Z63B	Other Follow Up After Surgery or Medical Care, Minor Complexity	0	0	3.6	1	10	16%	84%	0.0000	0.0000	0.0000	0.6446	0.1661	0.0000	$ -	$ -	$ -	$ 3,165	$ 816
Z64A	Other Factors Influencing Health Status, Major Complexity	1	0	9.7	3	31	18%	109%	0.2283	0.0000	0.8464	2.5391	0.1877	0.0000	$ 1,121	$ -	$ 4,156	$ 12,467	$ 922
Z64B	Other Factors Influencing Health Status, Minor Complexity	1	0	4.0	1	13	56%	112%	0.2130	0.0000	0.0000	0.6795	0.1655	0.0000	$ 1,046	$ -	$ -	$ 3,336	$ 813
Z65Z	Congenital Anomalies and Problems Arising from Neonatal Period	0	0	2.1	1	12	9%	100%	0.0000	0.0000	0.0000	0.7813	0.3523	0.0000	$ -	$ -	$ -	$ 3,836	$ 1,730
Z66Z	Sleep Disorders	0	0	2.5	1	8	24%	100%	0.0000	0.0000	0.0000	0.4209	0.2156	0.0000	$ -	$ -	$ -	$ 2,067	$ 1,059

Appendix 3 2017-18 Mental Health Admitted (QH Standard Units) - Q19B Only

2017-18 Mental Health Admitted (QH Standard Units) - Q19B Only

Std Unit	Unit Description	DU_TYPE	DESIGNATED_WARD	QWAU per Diem	Qld Base Price
PYAA	Psychiatric Adult Acute Unit	AACUTE	Adult Acute	0.3412	$ 1,636
PYAQ	Psychiatric Adult Extended ABI	AABI	Acquired Brain Injury	0.2142	$ 1,027
PYAW	Psychiatric Adult Special Care Suite	AACUTE	Adult Acute	0.3412	$ 1,636
PYCA	Psychiatric Child Acute Unit	CACUTE	Child Acute Inpatient	0.4882	$ 2,341
PYCW	Psychiatric Child Acute Unit in Paediatric Ward	CACUTE	Child Acute Inpatient	0.4882	$ 2,341
PYDD	Psychiatric Adult Extended Dual Diagnosis	DMHIDB	Dual Diagnosis (MH and Intellectual Disability)	0.1585	$ 760
PYET	Psychiatric Adult Extended Treament Rehab Unit	AETREH	Extended Treatment and Rehabilitation	0.1675	$ 803
PYFA	Psychiatric Forensic Acute	SECINP	High Security Inpatient Service	0.2883	$ 1,382
PYGE	Psychiatric Older Persons Acute	PSYGER	Older Persons Acute	0.2032	$ 974
PYOA	Psychiatric Young Persons (Youth) Acute Unit	AACUTE	Adult Acute	0.3412	$ 1,636
PYPG	Psychiatric Adult Extended Older Persons	GETREH	Older Persons Extended Treatment	0.2352	$ 1,128
PYRA	Psychiatric Adult Residential	COMMCU	Community Care Unit	0.1675	$ 803
PYSH	Psychiatric Adult Extended High Security	SECINP	High Security Inpatient Service	0.2883	$ 1,382
PYSM	Psychiatric Adult Extended Secure Unit	SECREH	Secure Mental Health Rehabilitation	0.3636	$ 1,743
PYYA	Psychiatric Adolescent Acute Unit	YACUTE	Adolescent Acute Inpatient	0.5476	$ 2,626
PYYW	Psychiatric Adolescent Acute Unit in Adult Ward	YACUTE	Adolescent Acute Inpatient	0.5476	$ 2,626

Appendix 4 2017-18 Queensland Subacute and Non-acute Admitted (Q19B) - AN-SNAP V4.0

2017-18 Queensland Subacute and Non-acute (SNAP) Admitted (Q19B) - AN-SNAP V4.0

													Qld Base Price			
AN-SNAP v 4.0	SAME_DAY FLAG	Qld Care Type code	National care type code	SNAP Episode type	Description	IHPA_ALOS	Lower Bound	Upper Bound	Same Day	Short Stay Outlier Per Diem	Inlier Episodic	Long Stay Outlier Per Diem	Same Day $	Short Stay Outlier Per Diem $	Episode $	Long Stay Outlier Per Diem $
4A21	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, all other (including replacements), weighted FIM motor 68-91	11.3	7	17	-	0.2955	2.0682	0.1652	$ 1,417	$ 9,917	$ 792	
4A22	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, all other (including replacements), weighted FIM motor 50-67	13.8	9	21	-	0.2888	2.5994	0.1683	$ 1,385	$ 12,464	$ 807	
4A23	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, all other (including replacements), weighted FIM motor 19-49	20.3	13	31	-	0.2935	3.8151	0.1683	$ 1,407	$ 18,293	$ 807	
4A31	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 72-91	10.5	7	16	-	0.2933	2.0529	0.1109	$ 1,406	$ 9,844	$ 532	
4A32	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 55-71	14.1	9	22	-	0.3053	2.7474	0.1585	$ 1,464	$ 13,174	$ 760	
4A33	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 34-54	18.8	12	29	-	0.3088	3.7052	0.1702	$ 1,481	$ 17,766	$ 816	
4A34	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 19-33	22.5	14	34	-	0.3323	4.6523	0.1843	$ 1,593	$ 22,308	$ 884	
4A91	FALSE	20	2	Admitted Adult Rehabilitation	All other impairments, weighted FIM motor 55-91	15.5	10	24	-	0.3050	3.0504	0.1776	$ 1,462	$ 14,627	$ 852	
4A92	FALSE	20	2	Admitted Adult Rehabilitation	All other impairments, weighted FIM motor 33-54	20.8	13	32	-	0.3086	4.0116	0.1712	$ 1,480	$ 19,236	$ 821	
4A93	FALSE	20	2	Admitted Adult Rehabilitation	All other impairments, weighted FIM motor 19-32	24.9	16	38	-	0.3369	5.3907	0.1809	$ 1,615	$ 25,848	$ 867	
4AA1	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 51-91, FIM cognition 29-35	15.2	10	23	-	0.3125	3.1252	0.1699	$ 1,498	$ 14,985	$ 815	
4AA2	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 51-91, FIM cognition 19-28	18.5	12	28	-	0.3235	3.8815	0.1860	$ 1,551	$ 18,612	$ 892	
4AA3	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 51-91, FIM cognition 5-18	23.9	15	36	-	0.3254	4.8805	0.1793	$ 1,560	$ 23,402	$ 860	
4AA4	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 36-50, Age >= 68	26.9	17	41	-	0.3151	5.3573	0.1777	$ 1,511	$ 25,688	$ 852	
4AA5	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 36-50, Age <= 67	35.0	23	53	-	0.3107	7.1468	0.1867	$ 1,490	$ 34,269	$ 895	
4AA6	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 19-35, Age >= 68	37.7	25	57	-	0.3045	7.6122	0.1724	$ 1,460	$ 36,500	$ 827	
4AA7	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 19-35, Age <= 67	47.3	31	68	-	0.3191	9.8906	0.2011	$ 1,530	$ 47,425	$ 964	
4AB1	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 71-91, FIM cognition 26-35	13.3	8	20	-	0.4021	3.2170	0.2379	$ 1,928	$ 15,426	$ 1,141	
4AB2	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 71-91, FIM cognition 5-25	20.6	13	31	-	0.4037	5.2478	0.2561	$ 1,936	$ 25,163	$ 1,228	
4AB3	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 41-70, FIM cognition 26-35	19.5	13	30	-	0.3098	4.0271	0.1849	$ 1,485	$ 19,310	$ 887	
4AB4	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 41-70, FIM cognition 17-25	24.8	16	38	-	0.3552	5.6830	0.1722	$ 1,703	$ 27,250	$ 826	
4AB5	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 41-70, FIM cognition 5-16	32.9	21	50	-	0.3449	7.2422	0.2297	$ 1,654	$ 34,726	$ 1,101	
4AB6	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 29-40	31.8	21	48	-	0.3144	6.6019	0.1969	$ 1,508	$ 31,656	$ 944	
4AB7	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 19-28	39.7	26	60	-	0.3534	9.1886	0.2570	$ 1,695	$ 44,059	$ 1,232	
4AC1	FALSE	20	2	Admitted Adult Rehabilitation	Neurological conditions, weighted FIM motor 62-91	15.4	10	24	-	0.3186	3.1865	0.1884	$ 1,528	$ 15,279	$ 903	
4AC2	FALSE	20	2	Admitted Adult Rehabilitation	Neurological conditions, weighted FIM motor 43-61	20.2	13	31	-	0.3046	3.9594	0.1864	$ 1,461	$ 18,985	$ 894	
4AC3	FALSE	20	2	Admitted Adult Rehabilitation	Neurological conditions, weighted FIM motor 19-42	32.9	21	50	-	0.2981	6.2602	0.1638	$ 1,429	$ 30,018	$ 785	
4AD1	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age >= 50, weighted FIM motor 42-91	25.2	16	38	-	0.3560	5.6959	0.2551	$ 1,707	$ 27,312	$ 1,223	
4AD2	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age >= 50, weighted FIM motor 19-41	48.2	32	69	-	0.3299	10.5578	0.2108	$ 1,582	$ 50,625	$ 1,011	
4AD3	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age <= 49, weighted FIM motor 34-91	31.5	21	48	-	0.4125	8.6635	0.2754	$ 1,978	$ 41,541	$ 1,321	
4AD4	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age <= 49, weighted FIM motor 19-33	76.0	50	97	-	0.4118	20.5900	0.2876	$ 1,975	$ 98,729	$ 1,379	
4AE1	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age >= 54, weighted FIM motor 68-91	23.2	15	35	-	0.3379	5.0692	0.2008	$ 1,620	$ 24,307	$ 963	
4AE2	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age >= 54, weighted FIM motor 31-67	27.2	18	41	-	0.3219	5.7939	0.1853	$ 1,544	$ 27,782	$ 889	
4AE3	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age >= 54, weighted FIM motor 19-30	30.6	20	46	-	0.3246	6.4921	0.1645	$ 1,556	$ 31,130	$ 789	
4AE4	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age <= 53, weighted FIM motor 19-91	21.6	14	33	-	0.3519	4.9267	0.2131	$ 1,687	$ 23,624	$ 1,022	
4AH1	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 49-91, FIM cognition 33-35	16.2	10	25	-	0.3068	3.0676	0.1702	$ 1,471	$ 14,709	$ 816	
4AH2	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 49-91, FIM cognition 5-32	19.7	13	30	-	0.2838	3.6898	0.1615	$ 1,361	$ 17,693	$ 774	
4AH3	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 38-48	22.9	15	35	-	0.2856	4.2840	0.1667	$ 1,369	$ 20,542	$ 799	
4AH4	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 19-37	27.6	18	42	-	0.2867	5.1598	0.1666	$ 1,375	$ 24,741	$ 799	
4AP1	FALSE	20	2	Admitted Adult Rehabilitation	Major Multiple Trauma, weighted FIM motor 19-91	25.0	16	38	-	0.3603	5.7649	0.2446	$ 1,728	$ 27,643	$ 1,173	
4AR1	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 67-91	13.1	8	20	-	0.3192	2.5532	0.1731	$ 1,531	$ 12,243	$ 830	
4AR2	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 50-66, FIM cognition 26-35	16.7	11	25	-	0.2985	3.2840	0.1743	$ 1,431	$ 15,747	$ 836	
4AR3	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 50-66, FIM cognition 5-25	17.9	11	27	-	0.3197	3.5169	0.1742	$ 1,533	$ 16,864	$ 835	
4AR4	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 34-49, FIM cognition 31-35	21.2	14	32	-	0.3061	4.2860	0.1738	$ 1,468	$ 20,551	$ 833	
4AR5	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 34-49, FIM cognition 5-30	20.5	13	31	-	0.3197	4.1562	0.1796	$ 1,533	$ 19,929	$ 861	
4AR6	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 19-33	24.4	16	37	-	0.3226	5.1608	0.1819	$ 1,547	$ 24,746	$ 872	
4AZ1	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, Brain, Spine, MMT, Age >= 49	63.8	42	84	-	0.3478	14.6076	0.2629	$ 1,668	$ 70,043	$ 1,261	
4AZ2	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, Brain, Spine, MMT, Age <= 48	87.7	58	108	-	0.4002	23.2096	0.2792	$ 1,919	$ 111,290	$ 1,339	
4AZ3	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, All other impairments, Age >= 65	30.0	19	45	-	0.3223	6.1233	0.1901	$ 1,545	$ 29,361	$ 912	
4AZ4	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, All other impairments, Age <= 64	45.5	30	66	-	0.3094	9.2821	0.1802	$ 1,484	$ 44,508	$ 864	
4BD1	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 4-14	6.2	4	10	-	0.3563	1.4251	0.1467	$ 1,708	$ 6,833	$ 703	
4BD2	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 15-18, Age >= 75	4.1	2	7	-	0.4150	0.8300	0.1801	$ 1,990	$ 3,980	$ 864	
4BD3	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 15-18, Age 55-74	4.2	2	7	-	0.4567	0.9134	0.1894	$ 2,190	$ 4,380	$ 908	
4BD4	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 15-18, Age <= 54	5.8	3	9	-	0.3953	1.1860	0.1847	$ 1,895	$ 5,687	$ 886	
4BS1	FALSE	30	3	Admitted Adult Palliative Care	Stable phase, RUG-ADL 4-5	7.6	5	12	-	0.3146	1.5731	0.1580	$ 1,509	$ 7,543	$ 758	
4BS2	FALSE	30	3	Admitted Adult Palliative Care	Stable phase, RUG-ADL 6-16	8.2	5	13	-	0.3512	1.7562	0.1644	$ 1,684	$ 8,421	$ 788	
4BS3	FALSE	30	3	Admitted Adult Palliative Care	Stable phase, RUG-ADL 17-18	8.2	5	13	-	0.3354	1.6771	0.1669	$ 1,608	$ 8,042	$ 800	
4BT1	FALSE	30	3	Admitted Adult Palliative Care	Terminal phase	2.0	1	4	-	0.0000	0.6202	0.2245	$ -	$ 2,974	$ 1,076	
4BU1	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, First Phase in Episode, RUG-ADL 4-13	2.6	1	4	-	0.0000	0.3429	0.2019	$ -	$ 1,644	$ 968	
4BU2	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, First Phase in Episode, RUG-ADL 14-18	2.7	1	5	-	0.0000	0.3672	0.2077	$ -	$ 1,761	$ 996	
4BU3	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, Not first Phase in Episode, RUG-ADL 4-5	2.3	1	4	-	0.0000	0.7525	0.1585	$ -	$ 3,608	$ 760	
4BU4	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, Not first Phase in Episode, RUG-ADL 6-18	2.3	1	4	-	0.0000	0.7307	0.2419	$ -	$ 3,504	$ 1,160	
4CH1	FALSE	09	4	Admitted GEM	FIM motor 57-91 with Delirium or Dementia	21.6	14	33	-	0.2700	3.7804	0.1660	$ 1,295	$ 18,127	$ 796	
4CH2	FALSE	09	4	Admitted GEM	FIM motor 57-91 without Delirium or Dementia	14.2	9	22	-	0.2854	2.5689	0.1479	$ 1,368	$ 12,318	$ 709	
4CL1	FALSE	09	4	Admitted GEM	FIM motor 13-17 with Delirium or Dementia	28.2	18	43	-	0.2683	4.8298	0.1584	$ 1,286	$ 23,159	$ 760	
4CL2	FALSE	09	4	Admitted GEM	FIM motor 13-17 without Delirium or Dementia	24.7	16	38	-	0.2836	4.5380	0.1600	$ 1,360	$ 21,760	$ 767	
4CM1	FALSE	09	4	Admitted GEM	FIM motor 18-56 with Delirium or Dementia	25.6	17	39	-	0.2608	4.4333	0.1524	$ 1,251	$ 21,258	$ 731	
4CM2	FALSE	09	4	Admitted GEM	FIM motor 18-56 without Delirium or Dementia	21.3	14	32	-	0.2650	3.7107	0.1597	$ 1,271	$ 17,793	$ 766	
4DL1	FALSE	10	5	Admitted Psychogeriatric	Long term care	142.0	94	162	-	0.2921	27.4540	0.1055	$ 1,401	$ 131,642	$ 506	
4DS1	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 3-4, LOS <= 91	30.4	20	46	-	0.3987	7.9737	0.2287	$ 1,912	$ 38,234	$ 1,097	

AN-SNAP v 4.0	SAME_DAY FLAG	Qld Care Type code	National care type code	SNAP Episode type	Description	IHPA_ALOS	Lower Bound	Upper Bound	Same Day	Short Stay Outlier Per Diem	Inlier Episodic	Long Stay Outlier Per Diem	Same Day $	Short Stay Outlier Per Diem $	Episode $	Long Stay Outlier Per Diem $
4DS2	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 1-2, HoNOS 65+ ADL 4, LOS <= 91	33.6	22	51	-	0.4022	8.8480	0.2285		$ 1,929	$ 42,426	$ 1,096
4DS3	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 1-2, HoNOS 65+ ADL 0-3, LOS <= 91	29.2	19	44	-	0.4264	8.1022	0.2596		$ 2,045	$ 38,850	$ 1,245
4DS4	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 0, HoNOS 65+ total 18-48, LOS <= 91	36.2	24	55	-	0.3178	7.6269	0.1738		$ 1,524	$ 36,571	$ 833
4DS5	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 0, HoNOS 65+ total 0-17, LOS <= 91	26.6	17	40	-	0.4372	7.4332	0.2232		$ 2,096	$ 35,642	$ 1,070
4EL1	FALSE	11	6	Admitted Non-Acute	Long term care	246.6	164	267	-	0.2274	37.2887	0.1807		$ 1,090	$ 178,799	$ 866
4ES1	FALSE	11	6	Admitted Non-Acute	Age >= 60, RUG-ADL 4-11, LOS <= 91	14.9	9	23	-	0.3261	2.9347	0.1765		$ 1,564	$ 14,072	$ 846
4ES2	FALSE	11	6	Admitted Non-Acute	Age >= 60, RUG-ADL 12-15, LOS <= 91	15.3	10	23	-	0.2868	2.8684	0.1618		$ 1,375	$ 13,754	$ 776
4ES3	FALSE	11	6	Admitted Non-Acute	Age >= 60, RUG-ADL 16-18, LOS <= 91	15.0	10	23	-	0.2930	2.9299	0.1728		$ 1,405	$ 14,049	$ 829
4ES4	FALSE	11	6	Admitted Non-Acute	Age 18-59, LOS <= 91	15.4	10	24	-	0.3655	3.6554	0.2097		$ 1,753	$ 17,528	$ 1,006
4J01	TRUE	20	2	Admitted Adult Rehabilitation	Adult Same-Day Rehabilitation	1.0	0	0	0	0.0000	0.0000	0.0000	$ 482	$ -	$ -	$ -
4K01	TRUE	30	3	Admitted Adult Palliative Care	Adult Same-Day Palliative Care	1.0	0	0	0	0.0000	0.0000	0.0000	$ 405	$ -	$ -	$ -
4L01	TRUE	09	4	Admitted GEM	Same-Day GEM	1.0	0	0	0	0.0000	0.0000	0.0000	$ 647	$ -	$ -	$ -
4M01	TRUE	10	5	Admitted Psychogeriatric	Same-Day Psychogeriatric Care	1.0	0	0	0	0.0000	0.0000	0.0000	$ 514	$ -	$ -	$ -

GEM = Geriatric Evaluation & Management

Appendix 5 2017-18 National Subacute and Non-acute Admitted (N1718) - AN-SNAP V4.0

2017-18 National Subacute and Non-acute (SNAP) Admitted (N1718) - AN-SNAP V4.0

												National Base Price			
AN-SNAP v 4.0	SAME_DAY FLAG	Qld Care Type code	National care type code	SNAP Episode type	Description	IHPA_ALOS	Lower Bound	Upper Bound	Same Day	Short Stay Outlier Per Diem	Inlier Episodic	Long Stay Outlier Per Diem	Same Day $	Short Stay Outlier Per Diem $	Episode $	Long Stay Outlier Per Diem $
4A21	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, all other (including replacements), weighted FIM motor 68-91	10.9	7	17	0	0.2976	2.0832	0.1628	$ -	$ 1,461	$ 10,229	$ 799
4A22	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, all other (including replacements), weighted FIM motor 50-67	14.1	9	21	0	0.2900	2.6097	0.1717	$ -	$ 1,424	$ 12,814	$ 843
4A23	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, all other (including replacements), weighted FIM motor 19-49	21.8	13	33	0	0.3179	4.1330	0.1800	$ -	$ 1,561	$ 20,293	$ 884
4A31	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 72-91	10.6	7	16	0	0.3207	2.2448	0.1706	$ -	$ 1,575	$ 11,022	$ 838
4A32	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 55-71	13.8	9	22	0	0.3119	2.8074	0.1636	$ -	$ 1,531	$ 13,784	$ 803
4A33	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 34-54	17.9	12	29	0	0.3016	3.6188	0.1661	$ -	$ 1,481	$ 17,768	$ 816
4A34	FALSE	20	2	Admitted Adult Rehabilitation	Cardiac, Pain syndromes, Pulmonary, weighted FIM motor 19-33	20.7	14	34	0	0.3113	4.3578	0.1676	$ -	$ 1,528	$ 21,397	$ 823
4A91	FALSE	20	2	Admitted Adult Rehabilitation	All other impairments, weighted FIM motor 55-91	15.8	10	24	0	0.3111	3.1110	0.1824	$ -	$ 1,528	$ 15,275	$ 896
4A92	FALSE	20	2	Admitted Adult Rehabilitation	All other impairments, weighted FIM motor 33-54	22.0	13	32	0	0.3065	3.9850	0.1903	$ -	$ 1,505	$ 19,566	$ 934
4A93	FALSE	20	2	Admitted Adult Rehabilitation	All other impairments, weighted FIM motor 19-32	28.2	16	38	0	0.3089	4.9421	0.1769	$ -	$ 1,517	$ 24,266	$ 869
4AA1	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 51-91, FIM cognition 29-35	15.3	10	23	0	0.3021	3.0211	0.1742	$ -	$ 1,483	$ 14,834	$ 855
4AA2	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 51-91, FIM cognition 19-28	19.6	12	30	0	0.3192	3.8300	0.1685	$ -	$ 1,567	$ 18,805	$ 827
4AA3	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 51-91, FIM cognition 5-18	25.2	15	36	0	0.3133	4.6995	0.1696	$ -	$ 1,538	$ 23,075	$ 833
4AA4	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 36-50, Age >= 68	26.0	17	41	0	0.3110	5.2871	0.1724	$ -	$ 1,527	$ 25,960	$ 846
4AA5	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 36-50, Age <= 67	32.0	23	48	0	0.2837	6.5251	0.1870	$ -	$ 1,393	$ 32,038	$ 918
4AA6	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 19-35, Age >= 68	36.7	25	57	0	0.2955	7.3875	0.1865	$ -	$ 1,451	$ 36,273	$ 916
4AA7	FALSE	20	2	Admitted Adult Rehabilitation	Stroke, weighted FIM motor 19-35, Age <= 67	50.1	31	68	0	0.3117	9.6621	0.1804	$ -	$ 1,530	$ 47,441	$ 886
4AB1	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 71-91, FIM cognition 26-35	13.4	8	20	0	0.3726	2.9810	0.1672	$ -	$ 1,829	$ 14,637	$ 821
4AB2	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 71-91, FIM cognition 5-25	21.6	13	31	0	0.3709	4.8222	0.2516	$ -	$ 1,821	$ 23,677	$ 1,235
4AB3	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 41-70, FIM cognition 26-35	18.9	13	30	0	0.2980	3.8741	0.1869	$ -	$ 1,463	$ 19,022	$ 918
4AB4	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 41-70, FIM cognition 17-25	23.2	16	38	0	0.3127	5.0027	0.1854	$ -	$ 1,535	$ 24,563	$ 910
4AB5	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 41-70, FIM cognition 5-16	33.3	21	50	0	0.3204	6.7277	0.2189	$ -	$ 1,573	$ 33,033	$ 1,075
4AB6	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 29-40	36.7	21	48	0	0.3376	7.0901	0.2325	$ -	$ 1,658	$ 34,812	$ 1,142
4AB7	FALSE	20	2	Admitted Adult Rehabilitation	Brain dysfunction, weighted FIM motor 19-28	41.3	26	60	0	0.3767	9.7938	0.2429	$ -	$ 1,850	$ 48,088	$ 1,193
4AC1	FALSE	20	2	Admitted Adult Rehabilitation	Neurological conditions, weighted FIM motor 62-91	15.2	10	24	0	0.3094	3.0943	0.1702	$ -	$ 1,519	$ 15,193	$ 836
4AC2	FALSE	20	2	Admitted Adult Rehabilitation	Neurological conditions, weighted FIM motor 43-61	19.9	13	31	0	0.2989	3.8856	0.1756	$ -	$ 1,468	$ 19,078	$ 862
4AC3	FALSE	20	2	Admitted Adult Rehabilitation	Neurological conditions, weighted FIM motor 19-42	29.8	21	45	0	0.2888	6.0658	0.1862	$ -	$ 1,418	$ 29,783	$ 914
4AD1	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age >= 50, weighted FIM motor 42-91	23.7	16	38	0	0.3313	5.3014	0.2280	$ -	$ 1,627	$ 26,030	$ 1,119
4AD2	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age >= 50, weighted FIM motor 19-41	45.9	32	69	0	0.3156	10.0991	0.2159	$ -	$ 1,550	$ 49,587	$ 1,060
4AD3	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age <= 49, weighted FIM motor 34-91	30.1	21	48	0	0.3317	6.9662	0.2392	$ -	$ 1,629	$ 34,204	$ 1,174
4AD4	FALSE	20	2	Admitted Adult Rehabilitation	Spinal cord dysfunction, Age <= 49, weighted FIM motor 19-33	61.7	50	97	0	0.3294	16.4720	0.2669	$ -	$ 1,617	$ 80,878	$ 1,310
4AE1	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age >= 54, weighted FIM motor 68-91	21.5	15	35	0	0.3199	4.7984	0.2025	$ -	$ 1,571	$ 23,560	$ 994
4AE2	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age >= 54, weighted FIM motor 31-67	27.5	18	41	0	0.2891	5.2042	0.1683	$ -	$ 1,419	$ 25,553	$ 826
4AE3	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age >= 54, weighted FIM motor 19-30	40.3	26	61	0	0.2794	7.2637	0.1872	$ -	$ 1,372	$ 35,665	$ 919
4AE4	FALSE	20	2	Admitted Adult Rehabilitation	Amputation of limb, Age <= 53, weighted FIM motor 19-91	29.5	19	45	0	0.2993	5.6865	0.2054	$ -	$ 1,470	$ 27,921	$ 1,009
4AH1	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 49-91, FIM cognition 33-35	16.3	10	25	0	0.3153	3.1527	0.1713	$ -	$ 1,548	$ 15,480	$ 841
4AH2	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 49-91, FIM cognition 5-32	18.9	13	30	0	0.2755	3.5818	0.1604	$ -	$ 1,353	$ 17,587	$ 788
4AH3	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 38-48	23.6	15	35	0	0.2888	4.3327	0.1640	$ -	$ 1,418	$ 21,274	$ 805
4AH4	FALSE	20	2	Admitted Adult Rehabilitation	Orthopaedic conditions, fractures, weighted FIM motor 19-37	26.3	18	40	0	0.2793	5.0271	0.1612	$ -	$ 1,371	$ 24,683	$ 791
4AP1	FALSE	20	2	Admitted Adult Rehabilitation	Major Multiple Trauma, weighted FIM motor 19-91	27.0	16	38	0	0.3238	5.1805	0.2248	$ -	$ 1,590	$ 25,436	$ 1,104
4AR1	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 67-91	13.3	8	20	0	0.3394	2.7154	0.1823	$ -	$ 1,666	$ 13,333	$ 895
4AR2	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 50-66, FIM cognition 26-35	16.2	11	25	0	0.3043	3.3472	0.1729	$ -	$ 1,494	$ 16,435	$ 849
4AR3	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 50-66, FIM cognition 5-25	17.1	11	27	0	0.3161	3.4767	0.1702	$ -	$ 1,552	$ 17,071	$ 836
4AR4	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 34-49, FIM cognition 31-35	20.9	14	32	0	0.3154	4.4160	0.1715	$ -	$ 1,549	$ 21,683	$ 842
4AR5	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 34-49, FIM cognition 5-30	20.1	13	31	0	0.3279	4.2628	0.1742	$ -	$ 1,610	$ 20,930	$ 855
4AR6	FALSE	20	2	Admitted Adult Rehabilitation	Reconditioning, weighted FIM motor 19-33	24.3	16	37	0	0.3190	5.1045	0.1713	$ -	$ 1,566	$ 25,063	$ 841
4AZ1	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, Brain, Spine, MMT, Age >= 49	61.1	42	84	0	0.3366	14.1380	0.2442	$ -	$ 1,653	$ 69,418	$ 1,199
4AZ2	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, Brain, Spine, MMT, Age <= 48	83.2	58	108	0	0.3529	20.4659	0.2326	$ -	$ 1,733	$ 100,488	$ 1,142
4AZ3	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, All other impairments, Age >= 65	30.8	19	45	0	0.3256	6.1858	0.1927	$ -	$ 1,599	$ 30,372	$ 946
4AZ4	FALSE	20	2	Admitted Adult Rehabilitation	Weighted FIM motor score 13-18, All other impairments, Age <= 64	45.3	30	66	0	0.3082	9.2471	0.1872	$ -	$ 1,513	$ 45,403	$ 919
4BD1	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 4-14	5.6	3	9	0	0.4060	1.2181	0.2197	$ -	$ 1,993	$ 5,981	$ 1,079
4BD2	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 15-18, Age >= 75	4.8	2	7	0	0.4340	0.8679	0.2347	$ -	$ 2,131	$ 4,261	$ 1,152
4BD3	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 15-18, Age 55-74	5.0	2	7	0	0.4540	0.9081	0.2431	$ -	$ 2,229	$ 4,459	$ 1,194
4BD4	FALSE	30	3	Admitted Adult Palliative Care	Deteriorating phase, RUG-ADL 15-18, Age <= 54	5.9	3	9	0	0.4227	1.2680	0.2375	$ -	$ 2,075	$ 6,226	$ 1,166
4BS1	FALSE	30	3	Admitted Adult Palliative Care	Stable phase, RUG-ADL 4-5	8.1	5	12	0	0.3403	1.7016	0.1739	$ -	$ 1,671	$ 8,355	$ 854
4BS2	FALSE	30	3	Admitted Adult Palliative Care	Stable phase, RUG-ADL 6-16	8.6	5	13	0	0.3645	1.8225	0.1984	$ -	$ 1,790	$ 8,948	$ 974
4BS3	FALSE	30	3	Admitted Adult Palliative Care	Stable phase, RUG-ADL 17-18	7.8	5	13	0	0.3416	1.7078	0.2035	$ -	$ 1,677	$ 8,385	$ 999
4BT1	FALSE	30	3	Admitted Adult Palliative Care	Terminal phase	2.5	1	4	0	0.0000	0.6192	0.2446	$ -	$ -	$ 3,040	$ 1,201
4BU1	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, First Phase in Episode, RUG-ADL 4-13	2.9	1	5	0	0.0000	0.4375	0.2796	$ -	$ -	$ 2,148	$ 1,373
4BU2	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, First Phase in Episode, RUG-ADL 14-18	2.5	1	5	0	0.0000	0.3877	0.2441	$ -	$ -	$ 1,904	$ 1,199
4BU3	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, Not first Phase in Episode, RUG-ADL 4-5	2.5	1	4	0	0.0000	0.6020	0.2998	$ -	$ -	$ 2,956	$ 1,472
4BU4	FALSE	30	3	Admitted Adult Palliative Care	Unstable phase, Not first Phase in Episode, RUG-ADL 6-18	2.1	1	4	0	0.0000	0.4449	0.2570	$ -	$ -	$ 2,184	$ 1,262
4CH1	FALSE	09	4	Admitted GEM	FIM motor 57-91 with Delirium or Dementia	23.1	14	33	0	0.2636	3.6901	0.1504	$ -	$ 1,294	$ 18,118	$ 738
4CH2	FALSE	09	4	Admitted GEM	FIM motor 57-91 without Delirium or Dementia	15.5	10	24	0	0.2692	2.6917	0.1460	$ -	$ 1,322	$ 13,216	$ 717
4CL1	FALSE	09	4	Admitted GEM	FIM motor 13-17 with Delirium or Dementia	25.8	18	39	0	0.2591	4.6630	0.1599	$ -	$ 1,272	$ 22,895	$ 785
4CL2	FALSE	09	4	Admitted GEM	FIM motor 13-17 without Delirium or Dementia	26.5	16	38	0	0.2780	4.4482	0.1685	$ -	$ 1,365	$ 21,841	$ 827
4CM1	FALSE	09	4	Admitted GEM	FIM motor 18-56 with Delirium or Dementia	25.0	17	39	0	0.2632	4.4746	0.1591	$ -	$ 1,292	$ 21,970	$ 781
4CM2	FALSE	09	4	Admitted GEM	FIM motor 18-56 without Delirium or Dementia	21.8	14	33	0	0.2692	3.7683	0.1593	$ -	$ 1,322	$ 18,502	$ 782
4DL1	FALSE	10	5	Admitted Psychogeriatric	Long term care	179.5	119	200	0	0.3078	36.6301	0.2062	$ -	$ 1,511	$ 179,854	$ 1,012
4DS1	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 3-4, LOS <= 91	23.9	15	36	0	0.4793	7.1893	0.2950	$ -	$ 2,353	$ 35,299	$ 1,448

AN-SNAP v 4.0	SAME_DAY FLAG	Qld Care Type code	National care type code	SNAP Episode type	Description	IHPA_ALOS	Lower Bound	Upper Bound	Same Day	Short Stay Outlier Per Diem	Inlier Episodic	Long Stay Outlier Per Diem	Same Day $	Short Stay Outlier Per Diem $	Episode $	Long Stay Outlier Per Diem $
4DS2	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 1-2, HoNOS 65+ ADL 4, LOS <= 91	34.4	22	51	0	0.4472	9.8381	0.2123	$ -	$ 2,196	$ 48,305	$ 1,042
4DS3	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 1-2, HoNOS 65+ ADL 0-3, LOS <= 91	26.5	19	44	0	0.4635	8.8066	0.2684	$ -	$ 2,276	$ 43,240	$ 1,318
4DS4	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 0, HoNOS 65+ total 18-48, LOS <= 91	34.3	24	55	0	0.3813	9.1523	0.1830	$ -	$ 1,872	$ 44,938	$ 899
4DS5	FALSE	10	5	Admitted Psychogeriatric	HoNOS 65+ Overactive behaviour 0, HoNOS 65+ total 0-17, LOS <= 91	27.4	17	40	0	0.5247	8.9198	0.2634	$ -	$ 2,576	$ 43,796	$ 1,293
4EL1	FALSE	11	6	Admitted Non-Acute	Long term care	253.8	164	267	0	0.2054	33.6848	0.1518	$ -	$ 1,009	$ 165,392	$ 745
4ES1	FALSE	11	6	Admitted Non-Acute	Age >= 60, RUG-ADL 4-11, LOS <= 91	12.7	8	20	0	0.2860	2.2877	0.1564	$ -	$ 1,404	$ 11,233	$ 768
4ES2	FALSE	11	6	Admitted Non-Acute	Age >= 60, RUG-ADL 12-15, LOS <= 91	13.3	8	20	0	0.2841	2.2731	0.1625	$ -	$ 1,395	$ 11,161	$ 798
4ES3	FALSE	11	6	Admitted Non-Acute	Age >= 60, RUG-ADL 16-18, LOS <= 91	14.8	10	23	0	0.2649	2.6491	0.1613	$ -	$ 1,301	$ 13,007	$ 792
4ES4	FALSE	11	6	Admitted Non-Acute	Age 18-59, LOS <= 91	16.6	10	24	0	0.3803	3.8029	0.2182	$ -	$ 1,867	$ 18,672	$ 1,071
4ES5	FALSE	11	6	Admitted Non-Acute	Age <= 17, LOS <= 91	10.3	6	16	0	0.5895	3.5370	0.2643	$ -	$ 2,894	$ 17,367	$ 1,298
4F01	FALSE	20	2	Admitted Paediatric Rehabilitation	Rehabilitation, Age <= 3	21.6	14	33	0	0.6125	8.5754	0.4458	$ -	$ 3,007	$ 42,105	$ 2,189
4F02	FALSE	20	2	Admitted Paediatric Rehabilitation	Rehabilitation, Age >= 4, Spinal cord dysfunction	43.8	29	64	0	0.4422	12.8227	0.3146	$ -	$ 2,171	$ 62,959	$ 1,545
4F03	FALSE	20	2	Admitted Paediatric Rehabilitation	Rehabilitation, Age >= 4, Brain dysfunction	29.0	19	44	0	0.4823	9.1631	0.3745	$ -	$ 2,368	$ 44,991	$ 1,839
4F04	FALSE	20	2	Admitted Paediatric Rehabilitation	Rehabilitation, Age >= 4, Neurological conditions	15.4	10	24	0	0.5948	5.9482	0.4134	$ -	$ 2,920	$ 29,206	$ 2,030
4F05	FALSE	20	2	Admitted Paediatric Rehabilitation	Rehabilitation, Age >= 4, All other impairments	18.0	11	27	0	0.5068	5.5743	0.3127	$ -	$ 2,488	$ 27,370	$ 1,535
4J01	TRUE	20	2	Admitted Adult Rehabilitation	Adult Same-Day Rehabilitation	1.0	0	0	0	0.0000	0.0000	0.0000	$ 481	$ -	$ -	$ -
4K01	TRUE	30	3	Admitted Adult Palliative Care	Adult Same-Day Palliative Care	1.0	0	0	0	0.0000	0.0000	0.0000	$ 978	$ -	$ -	$ -
4L01	TRUE	09	4	Admitted GEM	Same-Day GEM	1.0	0	0	0	0.0000	0.0000	0.0000	$ 530	$ -	$ -	$ -
4M01	TRUE	10	5	Admitted Psychogeriatric	Same-Day Psychogeriatric Care	1.0	0	0	0	0.0000	0.0000	0.0000	$ 425	$ -	$ -	$ -
4O01	TRUE	20	2	Admitted Paediatric Rehabilitation	Paediatric Same-Day Rehabilitation	1.0	0	0	0	0.0000	0.0000	0.0000	$ 1,397	$ -	$ -	$ -

GEM = Geriatric Evaluation & Management

Appendix 6 2017-18 Queensland Paediatric SNAP Price Weights (Q19B)

2017-18 Queensland Paediatric SNAP Price Weights (Q19B)

					Qld Base Price	
Qld Care Type code	National care type code	Care Type	Same Day Per Diem	Overnight Per Diem	Same Day $	Overnight $
11	6	Maintenance care	0.0956	0.3325	$458	$1,594
20	2	Rehabilitation care	0.3158	0.3475	$1,514	$1,666
30	3	Palliative care	0.4978	0.4978	$2,387	$2,387

Appendix 7 2017-18 National Paediatric SNAP Price Weights (N1718)

2017-18 National Paediatric SNAP Price Weights (N1718)

Qld Care Type code	National care type code	Care Type	Same Day Per Diem	Overnight Per Diem	National Base Price Same Day $	National Base Price Overnight $
30	3	Palliative Care	0.5012	0.5012	$ 2,461	$ 2,461

Appendix 8 2017-18 Queensland Unscored SNAP weights - Q19B Only

2017-18 Queensland Unscored SNAP weights - Q19B Only

Qld Care Type code	National care type code	Care Type	Same Day Per Diem	Overnight Per Diem	Qld Base Price Same Day $	Qld Base Price Overnight $
9	4	Geriatric evaluation and management (GEM)	0.0885	0.1473	$ 424	$ 706
10	5	Psychogeriatric care	0.0742	0.1901	$ 356	$ 911
11	6	Maintenance care	0.0649	0.1314	$ 311	$ 630
20	2	Rehabilitation care	0.1003	0.1646	$ 481	$ 789
30	3	Palliative Care	0.2006	0.2006	$ 962	$ 962

Appendix 9 2017-18 Non-Admitted price weights (N1718 and Q19B)

- Tier 2 non-admitted services classification V4.1

2017-18 Non-Admitted price weights (N1718 and Q19B) - Tier 2 non-admitted services classification V4.1

Tier 2 Clinic	Description	QWAU New	QWAU Review	QWAU Telephone	PBS	NWAU	Qld Base Price New $	Qld Base Price Review $	Qld Base Price Telephone $	Qld Base Price PBS $	National Price Base Price $
10.01	Hyperbaric Medicine	0.1614	0.1614	0.0000	0.0033	0.1291	$ 774	$ 774	$ -	$ 16	$ 634
10.02	Interventional Imaging	0.3694	0.3694	0.0000	0.0004	0.3843	$ 1,771	$ 1,771	$ -	$ 2	$ 1,887
10.03	Minor Surgical	0.0478	0.0478	0.0000	0.0030	0.0425	$ 229	$ 229	$ -	$ 14	$ 209
10.04	Dental	0.0488	0.0488	0.0000	0.0010	0.0553	$ 234	$ 234	$ -	$ 5	$ 272
10.05	Angioplasty/Angiography	0.2450	0.2450	0.0000	0.0049	0.2648	$ 1,175	$ 1,175	$ -	$ 23	$ 1,300
10.06	Endoscopy – gastrointestinal	0.3332	0.3332	0.0000	0.0005	0.3633	$ 1,598	$ 1,598	$ -	$ 2	$ 1,784
10.07	Endoscopy – urological/gynaecological	0.0369	0.0369	0.0000	0.0054	0.0443	$ 177	$ 177	$ -	$ 26	$ 218
10.08	Endoscopy – orthopaedic	0.0534	0.0534	0.0000	0.0000	0.0427	$ 256	$ 256	$ -	$ -	$ 210
10.09	Endoscopy – respiratory/ear, nose and throat (ENT)	0.0506	0.0506	0.0000	0.0012	0.0450	$ 243	$ 243	$ -	$ 6	$ 221
10.10	Renal dialysis – hospital delivered	0.0627	0.0627	0.0000	0.0082	0.0558	$ 301	$ 301	$ -	$ 39	$ 274
10.11	Chemotherapy - Treatment	0.0459	0.0459	0.0000	0.0180	0.0408	$ 220	$ 220	$ -	$ 86	$ 200
10.12	Radiation Therapy – Treatment	0.0550	0.0550	0.0000	0.0001	0.0660	$ 264	$ 264	$ -	$ 0	$ 324
10.13	Minor Medical Procedures	0.1080	0.1080	0.0000	0.0032	0.0961	$ 518	$ 518	$ -	$ 15	$ 472
10.14	Pain management interventions	0.0733	0.0733	0.0000	0.0000	0.0705	$ 351	$ 351	$ -	$ -	$ 346
10.15	Renal dialysis – haemodialysis – home delivered	1.1241	1.1241	0.0000	0.0227	1.0003	$ 5,390	$ 5,390	$ -	$ 109	$ 4,911
10.16	Renal dialysis – peritoneal dialysis – home delivered	1.1560	1.1560	0.0000	0.0233	1.0286	$ 5,543	$ 5,543	$ -	$ 112	$ 5,050
10.17	Total parenteral nutrition – home delivered	2.8869	2.8869	0.0000	0.0583	2.5689	$ 13,843	$ 13,843	$ -	$ 280	$ 12,613
10.18	Enteral nutrition – home delivered	0.2082	0.2082	0.0000	0.0042	0.1853	$ 998	$ 998	$ -	$ 20	$ 910
10.19	Ventilation – home delivered	4.5037	4.5037	0.0000	0.0910	4.0077	$ 21,595	$ 21,595	$ -	$ 436	$ 19,678
10.20	Radiation therapy – simulation and planning	0.1831	0.1831	0.0000	0.0003	0.1667	$ 878	$ 878	$ -	$ 1	$ 818
20.01	Transplants	0.0397	0.1005	0.0246	0.0140	0.0871	$ 190	$ 482	$ 118	$ 67	$ 428
20.02	Anaesthetics	0.0410	0.0507	0.0246	0.0037	0.0499	$ 197	$ 243	$ 118	$ 18	$ 245
20.03	Pain Management	0.0749	0.0669	0.0246	0.0033	0.0836	$ 359	$ 321	$ 118	$ 16	$ 410
20.04	Developmental Disabilities	0.0902	0.0597	0.0246	0.0009	0.0798	$ 433	$ 286	$ 118	$ 4	$ 392
20.05	General Medicine	0.0387	0.0336	0.0246	0.0013	0.0427	$ 185	$ 161	$ 118	$ 6	$ 210
20.06	General Practice and Primary Care	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
20.07	General Surgery	0.0592	0.0487	0.0246	0.0038	0.0509	$ 284	$ 234	$ 118	$ 18	$ 250
20.08	Genetics	0.1496	0.4197	0.0246	0.0044	0.1388	$ 717	$ 2,012	$ 118	$ 21	$ 682
20.09	Geriatric Medicine	0.0646	0.0453	0.0246	0.0032	0.0600	$ 310	$ 217	$ 118	$ 15	$ 295
20.10	Haematology	0.0759	0.0527	0.0246	0.0250	0.0490	$ 364	$ 253	$ 118	$ 120	$ 241
20.11	Paediatric Medicine	0.0584	0.0393	0.0246	0.0025	0.0536	$ 280	$ 188	$ 118	$ 12	$ 263
20.12	Paediatric Surgery	0.0600	0.0449	0.0246	0.0013	0.0608	$ 288	$ 215	$ 118	$ 6	$ 299
20.13	Palliative Care	0.0995	0.0527	0.0246	0.0049	0.0757	$ 477	$ 253	$ 118	$ 23	$ 372
20.14	Epilepsy	0.0647	0.0369	0.0246	0.0011	0.0516	$ 310	$ 177	$ 118	$ 5	$ 253
20.15	Neurology	0.0761	0.0590	0.0246	0.0047	0.0630	$ 365	$ 283	$ 118	$ 23	$ 309
20.16	Neurosurgery	0.0481	0.0581	0.0246	0.0045	0.0493	$ 231	$ 279	$ 118	$ 22	$ 242
20.17	Ophthalmology	0.0474	0.0512	0.0246	0.0037	0.0401	$ 227	$ 246	$ 118	$ 18	$ 197
20.18	Ear, Nose and Throat (ENT)	0.0424	0.0387	0.0246	0.0019	0.0480	$ 203	$ 186	$ 118	$ 9	$ 236
20.19	Respiratory	0.0747	0.0551	0.0246	0.0075	0.0600	$ 358	$ 264	$ 118	$ 36	$ 295
20.20	Respiratory – Cystic Fibrosis	0.1749	0.1749	0.0246	0.0150	0.1556	$ 839	$ 839	$ 118	$ 72	$ 764
20.21	Anti-coagulant Screening and Management	0.0651	0.0651	0.0246	0.0000	0.0521	$ 312	$ 312	$ 118	$ -	$ 256
20.22	Cardiology	0.0615	0.0468	0.0246	0.0063	0.0520	$ 295	$ 224	$ 118	$ 30	$ 255
20.23	Cardiothoracic	0.0839	0.0783	0.0246	0.0045	0.0750	$ 402	$ 375	$ 118	$ 22	$ 368
20.24	Vascular Surgery	0.0876	0.0844	0.0246	0.0053	0.0682	$ 420	$ 405	$ 118	$ 25	$ 335

Tier 2 Clinic	Description	QWAU New	QWAU Review	QWAU Telephone	PBS	NWAU	New $	Review $	Telephone $	PBS $	Base Price $
20.25	Gastroenterology	0.0598	0.0624	0.0246	0.0217	0.0689	$ 287	$ 299	$ 118	$ 104	$ 338
20.26	Hepatobiliary	0.0932	0.0953	0.0246	0.0045	0.0894	$ 447	$ 457	$ 118	$ 22	$ 439
20.27	Craniofacial	0.0410	0.0379	0.0246	0.0014	0.0467	$ 197	$ 182	$ 118	$ 7	$ 229
20.28	Metabolic Bone	0.0725	0.1023	0.0246	0.0027	0.0766	$ 348	$ 490	$ 118	$ 13	$ 376
20.29	Orthopaedics	0.0524	0.0426	0.0246	0.0042	0.0414	$ 251	$ 204	$ 118	$ 20	$ 203
20.30	Rheumatology	0.0823	0.0325	0.0246	0.0190	0.0526	$ 395	$ 156	$ 118	$ 91	$ 258
20.31	Spinal	0.1310	0.0822	0.0246	0.0019	0.0706	$ 628	$ 394	$ 118	$ 9	$ 347
20.32	Breast	0.0617	0.0746	0.0246	0.0137	0.0635	$ 296	$ 358	$ 118	$ 66	$ 312
20.33	Dermatology	0.0313	0.0483	0.0246	0.0075	0.0450	$ 150	$ 231	$ 118	$ 36	$ 221
20.34	Endocrinology	0.0635	0.0495	0.0246	0.0033	0.0552	$ 305	$ 237	$ 118	$ 16	$ 271
20.35	Nephrology	0.0658	0.0899	0.0246	0.0217	0.0804	$ 315	$ 431	$ 118	$ 104	$ 395
20.36	Urology	0.0459	0.0407	0.0246	0.0033	0.0506	$ 220	$ 195	$ 118	$ 16	$ 248
20.37	Assisted Reproductive Technology	0.0674	0.0674	0.0246	0.0000	0.0809	$ 323	$ 323	$ 118	$ -	$ 397
20.38	Gynaecology	0.0512	0.0346	0.0246	0.0058	0.0497	$ 246	$ 166	$ 118	$ 28	$ 244
20.39	Gynaecological Oncology	0.0886	0.0632	0.0246	0.0026	0.0623	$ 425	$ 303	$ 118	$ 12	$ 306
20.40	Obstetrics – management of pregnancy without complications	0.0585	0.0453	0.0246	0.0010	0.0428	$ 280	$ 217	$ 118	$ 5	$ 210
20.41	Immunology	0.0370	0.0808	0.0246	0.0163	0.0560	$ 177	$ 387	$ 118	$ 78	$ 275
20.42	Medical oncology – Consultation	0.0751	0.1069	0.0246	0.0175	0.0835	$ 360	$ 512	$ 118	$ 84	$ 410
20.43	Radiation therapy – Consultation	0.0577	0.0276	0.0246	0.0034	0.0385	$ 276	$ 132	$ 118	$ 16	$ 189
20.44	Infectious Diseases	0.0478	0.0478	0.0246	0.0184	0.0426	$ 229	$ 229	$ 118	$ 88	$ 209
20.45	Psychiatry	0.0521	0.0428	0.0246	0.0020	0.0392	$ 250	$ 205	$ 118	$ 10	$ 192
20.46	Plastic and Reconstructive Surgery	0.0396	0.0484	0.0246	0.0035	0.0392	$ 190	$ 232	$ 118	$ 17	$ 192
20.47	Rehabilitation	0.0514	0.0500	0.0246	0.0030	0.0448	$ 247	$ 240	$ 118	$ 14	$ 220
20.48	Multidisciplinary Burns Clinic	0.0721	0.0721	0.0246	0.0014	0.0641	$ 346	$ 346	$ 118	$ 7	$ 315
20.49	Geriatric Evaluation and Management (GEM)	0.0644	0.0644	0.0246	0.0001	0.0773	$ 309	$ 309	$ 118	$ 0	$ 380
20.50	Psychogeriatric	0.0754	0.0754	0.0246	0.0001	0.0603	$ 362	$ 362	$ 118	$ 0	$ 296
20.51	Sleep Disorders	0.0768	0.0164	0.0246	0.0029	0.0438	$ 368	$ 79	$ 118	$ 14	$ 215
20.52	Addiction Medicine	0.0356	0.0356	0.0246	0.0013	0.0427	$ 171	$ 171	$ 118	$ 6	$ 210
20.53	Obstetrics – Management of Complex Pregnancy	0.0803	0.0803	0.0246	0.0016	0.0715	$ 385	$ 385	$ 118	$ 8	$ 351
20.54	Maternal Fetal Medicine	0.0803	0.0803	0.0246	0.0016	0.0715	$ 385	$ 385	$ 118	$ 8	$ 351
20.55	Telehealth – Patient Location	Qld - As per provider Tier 2				0.0195	$ -	$ -	$ -	$ -	$ 96
30.01	General Imaging	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.02	Magnetic Resonance Imaging (MRI)	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.03	Computerised Tomography (CT)	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.04	Nuclear Medicine	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.05	Pathology (Microbiology, Haematology, Biochemistry)	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.06	Positron Emission Tomography (PET)	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.07	Mammography Screening	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
30.08	Clinical Measurement	0.0368	0.0368	0.0000	0.0000	0.0000	$ 176	$ 176	$ -	$ -	$ -
40.02	Aged Care Assessment	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
40.03	Aids and Appliances	0.0547	0.0451	0.0116	0.0015	0.0387	$ 262	$ 216	$ 56	$ 7	$ 190
40.04	Clinical Pharmacy	0.1729	0.1261	0.0116	0.0031	0.1198	$ 829	$ 605	$ 56	$ 15	$ 588
40.05	Hydrotherapy	0.0497	0.0406	0.0116	0.0009	0.0371	$ 238	$ 195	$ 56	$ 4	$ 182
40.06	Occupational Therapy	0.0388	0.0343	0.0116	0.0017	0.0376	$ 186	$ 165	$ 56	$ 8	$ 185
40.07	Pre-Admission and Pre-Anaesthesia	0.0718	0.1036	0.0116	0.0045	0.0690	$ 344	$ 497	$ 56	$ 22	$ 339
40.08	Primary Health Care	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -

Tier 2 Clinic	Description	QWAU New	QWAU Review	QWAU Telephone	PBS	NWAU	New $	Review $	Telephone $	PBS $	Base Price $
40.09	Physiotherapy	0.0358	0.0312	0.0116	0.0015	0.0285	$ 172	$ 150	$ 56	$ 7	$ 140
40.10	Sexual Health	0.0242	0.0408	0.0116	0.0008	0.0303	$ 116	$ 195	$ 56	$ 4	$ 149
40.11	Social Work	0.0407	0.0445	0.0116	0.0021	0.0479	$ 195	$ 214	$ 56	$ 10	$ 235
40.12	Rehabilitation	0.0287	0.0415	0.0116	0.0010	0.0437	$ 138	$ 199	$ 56	$ 5	$ 215
40.13	Wound Management	0.0459	0.0464	0.0116	0.0041	0.0370	$ 220	$ 222	$ 56	$ 20	$ 182
40.14	Neuropsychology	0.1213	0.1029	0.0116	0.0047	0.1114	$ 582	$ 493	$ 56	$ 23	$ 547
40.15	Optometry	0.0103	0.0091	0.0116	0.0002	0.0085	$ 49	$ 44	$ 56	$ 1	$ 42
40.16	Orthoptics	0.0261	0.0163	0.0116	0.0004	0.0233	$ 125	$ 78	$ 56	$ 2	$ 114
40.17	Audiology	0.0459	0.0351	0.0116	0.0022	0.0457	$ 220	$ 168	$ 56	$ 11	$ 224
40.18	Speech Pathology	0.0518	0.0405	0.0116	0.0014	0.0399	$ 248	$ 194	$ 56	$ 7	$ 196
40.21	Cardiac Rehabilitation	0.0674	0.0679	0.0116	0.0027	0.0542	$ 323	$ 325	$ 56	$ 13	$ 266
40.22	Stomal Therapy	0.0746	0.0760	0.0116	0.0028	0.0673	$ 358	$ 364	$ 56	$ 13	$ 330
40.23	Nutrition/Dietetics	0.0458	0.0417	0.0116	0.0019	0.0360	$ 220	$ 200	$ 56	$ 9	$ 177
40.24	Orthotics	0.0361	0.0404	0.0116	0.0039	0.0460	$ 173	$ 194	$ 56	$ 19	$ 226
40.25	Podiatry	0.0491	0.0409	0.0116	0.0019	0.0335	$ 235	$ 196	$ 56	$ 9	$ 164
40.27	Family Planning	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
40.28	Midwifery and Maternity	0.0481	0.0394	0.0116	0.0011	0.0360	$ 231	$ 189	$ 56	$ 5	$ 177
40.29	Psychology	0.0319	0.0257	0.0116	0.0009	0.0239	$ 153	$ 123	$ 56	$ 4	$ 117
40.30	Alcohol and Other Drugs	0.0107	0.0326	0.0116	0.0006	0.0335	$ 51	$ 156	$ 56	$ 3	$ 164
40.31	Burns	0.0510	0.0297	0.0116	0.0011	0.0378	$ 245	$ 142	$ 56	$ 5	$ 186
40.32	Continence	0.0365	0.0214	0.0116	0.0025	0.0229	$ 175	$ 103	$ 56	$ 12	$ 112
40.33	General Counselling	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
40.34	Specialist Mental Health	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
40.35	Palliative Care	0.2085	0.0492	0.0116	0.0012	0.0531	$ 1,000	$ 236	$ 56	$ 6	$ 261
40.36	Geriatric Evaluation and Management (GEM)	0.0556	0.0556	0.0116	0.0011	0.0495	$ 267	$ 267	$ 56	$ 5	$ 243
40.37	Psychogeriatric	0.0201	0.0201	0.0116	0.0004	0.0179	$ 96	$ 96	$ 56	$ 2	$ 88
40.38	Infectious Diseases	0.0774	0.0873	0.0116	0.0000	0.0738	$ 371	$ 419	$ 56	$ -	$ 362
40.39	Neurology	0.0330	0.0444	0.0116	0.0030	0.0480	$ 158	$ 213	$ 56	$ 14	$ 236
40.40	Respiratory	0.0222	0.0296	0.0116	0.0009	0.0336	$ 106	$ 142	$ 56	$ 4	$ 165
40.41	Gastroenterology	0.0492	0.0469	0.0116	0.0014	0.0428	$ 236	$ 225	$ 56	$ 7	$ 210
40.42	Circulatory	0.0801	0.0657	0.0116	0.0014	0.0605	$ 384	$ 315	$ 56	$ 7	$ 297
40.43	Hepatobiliary	0.0612	0.0637	0.0116	0.0000	0.0757	$ 293	$ 305	$ 56	$ -	$ 372
40.44	Orthopaedics	0.0580	0.0429	0.0116	0.0009	0.0371	$ 278	$ 206	$ 56	$ 4	$ 182
40.45	Dermatology	0.0358	0.0517	0.0116	0.0025	0.0379	$ 172	$ 248	$ 56	$ 12	$ 186
40.46	Endocrinology	0.0390	0.0414	0.0116	0.0009	0.0438	$ 187	$ 199	$ 56	$ 4	$ 215
40.47	Nephrology	0.0260	0.0460	0.0116	0.0009	0.0403	$ 125	$ 221	$ 56	$ 4	$ 198
40.48	Haematology and Immunology	0.0216	0.0433	0.0116	0.0009	0.0505	$ 103	$ 208	$ 56	$ 4	$ 248
40.49	Gynaecology	0.0610	0.0504	0.0116	0.0011	0.0492	$ 292	$ 241	$ 56	$ 5	$ 242
40.50	Urology	0.0585	0.0399	0.0116	0.0010	0.0507	$ 280	$ 191	$ 56	$ 5	$ 249
40.51	Breast	0.1116	0.0612	0.0116	0.0013	0.0565	$ 535	$ 293	$ 56	$ 6	$ 277
40.52	Oncology	0.0481	0.0289	0.0116	0.0006	0.0268	$ 231	$ 139	$ 56	$ 3	$ 132
40.53	General Medicine	0.0265	0.0578	0.0116	0.0010	0.0406	$ 127	$ 277	$ 56	$ 5	$ 199
40.54	General Surgery	0.0250	0.0439	0.0116	0.0008	0.0352	$ 120	$ 211	$ 56	$ 4	$ 173
40.55	Paediatrics	0.0527	0.0412	0.0116	0.0009	0.0366	$ 253	$ 197	$ 56	$ 4	$ 180
40.56	Falls Prevention	0.0167	0.0118	0.0116	0.0002	0.0130	$ 80	$ 57	$ 56	$ 1	$ 64
40.57	Cognition and Memory	0.0396	0.0396	0.0116	0.0000	0.0475	$ 190	$ 190	$ 56	$ -	$ 233

Tier 2 Clinic	Description	QWAU New	QWAU Review	QWAU Telephone	PBS	NWAU	New $	Review $	Telephone $	PBS $	Base Price $
40.58	Hospital Avoidance Programs	0.0195	0.0721	0.0116	0.0010	0.0438	$ 94	$ 346	$ 56	$ 5	$ 215
40.59	Post-Acute Care	0.0491	0.0641	0.0116	0.0000	0.0511	$ 236	$ 308	$ 56	$ -	$ 251
40.60	Pulmonary Rehabilitation	0.0678	0.0678	0.0116	0.0027	0.0542	$ 325	$ 325	$ 56	$ 13	$ 266
40.61	Telehealth – Patient Location	Qld - As per provider Tier 2				0.0093	$ -	$ -	$ -	$ -	$ 46
70.04	Oral Health	0.0122	0.0122	0.0000	0.0000	0.0000	$ 58	$ 58	$ -	$ -	$ -
70.07	Breastsceen	0.0344	0.0344	0.0000	0.0000	0.0000	$ 165	$ 165	$ -	$ -	$ -
70.50	Statewide Urology Outreach	0.0663	0.0663	0.0663	0.0000	0.0000	$ 318	$ 318	$ 318	$ -	$ -
72.06	Offender Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.07	Women's and Men's Health	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.08	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.09	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.10	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.11	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.12	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.13	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.14	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.15	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.16	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.17	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.18	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.19	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.21	Maternal Health	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
72.23	Community Health Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -
76.35	Other Outreach Services	0.0000	0.0000	0.0000	0.0000	0.0000	$ -	$ -	$ -	$ -	$ -

Appendix 10 2017-18 Emergency Department price weights (N1718 and Q19B) - URG V1.4

2017-18 Emergency Department price weights (N1718 and Q19B) - URG V1.4

URG	Description	Qld Price Weight	National Price Weight	Qld Price	National Price
URG003	Adm_T1_Injury	0.4392	0.4359	$ 2,106	$ 2,140
URG004	Adm_T1_Poisoning/Toxic effects of drugs	0.3443	0.3494	$ 1,651	$ 1,716
URG005	Adm_T1_Respiratory system illness	0.3533	0.3538	$ 1,694	$ 1,737
URG006	Adm_T1_Circulatory system and Endocrine, nutritional and metabolic illness	0.3224	0.3060	$ 1,546	$ 1,502
URG007	Adm_T1_All other MDB groups	0.3650	0.3541	$ 1,750	$ 1,739
URG009	Adm_T2_Poisoning	0.2222	0.2319	$ 1,065	$ 1,139
URG010	Adm_T2_Injury	0.2774	0.2736	$ 1,330	$ 1,343
URG011	Adm_T2_Gastrointestinal system and Digestive system illness	0.2590	0.2584	$ 1,242	$ 1,269
URG012	Adm_T2_Respiratory system illness	0.2412	0.2479	$ 1,157	$ 1,217
URG014	Adm_T2_Neurological illness	0.2821	0.2867	$ 1,353	$ 1,408
URG015	Adm_T2_Toxic effects of drugs	0.2223	0.2460	$ 1,066	$ 1,208
URG016	Adm_T2_Circulatory system and Endocrine, nutritional and metabolic illness	0.2125	0.2152	$ 1,019	$ 1,057
URG017	Adm_T2_All other MDB groups	0.1990	0.2032	$ 954	$ 998
URG019	Adm_T3_Blood/Immune system illness & system infection/parasites	0.2117	0.2119	$ 1,015	$ 1,040
URG020	Adm_T3_Injury	0.1984	0.1952	$ 951	$ 958
URG021	Adm_T3_Neurological illness	0.2175	0.2121	$ 1,043	$ 1,041
URG022	Adm_T3_Obstetric/Gynaecological illness	0.1128	0.1191	$ 541	$ 585
URG023	Adm_T3_Digestive system illness	0.2064	0.2011	$ 990	$ 987
URG024	Adm_T3_Circulatory system illness and endocrine, nutritional and metabolic illness	0.1961	0.1934	$ 940	$ 950
URG025	Adm_T3_Poisoning/Toxic effects of drugs	0.1794	0.1821	$ 860	$ 894
URG026	Adm_T3_Urological illness	0.1966	0.1923	$ 943	$ 944
URG027	Adm_T3_Respiratory system illness	0.2024	0.1997	$ 971	$ 981
URG029	Adm_T3_All other MDB groups	0.1825	0.1787	$ 875	$ 877
URG030	Adm_T4_Poisoning/Toxic effects of drugs	0.1320	0.1378	$ 633	$ 677
URG031	Adm_T4_Respiratory system illness	0.1670	0.1671	$ 801	$ 820
URG032	Adm_T4_Gastrointestinal system and Digestive system illness	0.1696	0.1644	$ 813	$ 807
URG033	Adm_T4_All other MDB groups	0.1538	0.1516	$ 737	$ 744
URG034	Adm_T4_Injury	0.1465	0.1427	$ 702	$ 701
URG035	Adm_T4_Social problem/Other presentation	0.1465	0.1429	$ 702	$ 702
URG037	Adm_T5_All other MDB groups 1	0.1025	0.0932	$ 491	$ 458
URG038	Dead on Arrival w any Triage w any MDB	0.0501	0.0401	$ 240	$ 197
URG039	N-A_T1_All MDB groups	0.3001	0.2780	$ 1,439	$ 1,365
URG040	N-A_T2_Toxic effects of drugs	0.2002	0.2157	$ 960	$ 1,059

URG	Description	Qld Price Weight	National Price Weight	Qld Price	National Price
URG043	N-A_T2_Circulatory system / Endocrine, nutritional and metabolic diseases	0.1668	0.1639	$ 800	$ 805
URG044	N-A_T2_Injury	0.1572	0.1603	$ 754	$ 787
URG045	N-A_T2_Poisoning	0.1769	0.1926	$ 848	$ 946
URG046	N-A_T2_All other MDB groups	0.1387	0.1383	$ 665	$ 679
URG048	N-A_T3_Circulatory system and Endocrine, nutritional and metabolic illness	0.1273	0.1247	$ 610	$ 612
URG050	N-A_T3_Injury	0.1127	0.1119	$ 540	$ 549
URG051	N-A_T3_Genitourinary illness	0.1292	0.1272	$ 620	$ 625
URG052	N-A_T3_Gastrointestinal system and Digestive system illness	0.1241	0.1235	$ 595	$ 606
URG053	N-A_T3_Neurological illness	0.1306	0.1295	$ 626	$ 636
URG055	N-A_T3_Respiratory system illness	0.1069	0.1075	$ 513	$ 528
URG056	N-A_T3_Musculoskeletal/connective tissue illness	0.1141	0.1145	$ 547	$ 562
URG057	N-A_T3_All other MDB groups	0.0992	0.0952	$ 476	$ 467
URG058	N-A_T4_Injury	0.0739	0.0729	$ 354	$ 358
URG060	N-A_T4_Urological system illness	0.0881	0.0872	$ 422	$ 428
URG061	N-A_T4_Circulatory system / Endocrine, nutritional and metabolic illness	0.0895	0.0891	$ 429	$ 437
URG062	N-A_T4_Gastrointestinal system and Digestive system illness	0.0869	0.0864	$ 417	$ 424
URG063	N-A_T4_Musculoskeletal/connective tissue illness	0.0791	0.0877	$ 379	$ 431
URG065	N-A_T4_Illness of the ENT	0.0628	0.0638	$ 301	$ 313
URG066	N-A_T4_Illness of the Eyes	0.0572	0.0589	$ 274	$ 289
URG067	N-A_T4_Other presentation block	0.0702	0.0686	$ 337	$ 337
URG068	N-A_T4_All other MDB groups	0.0772	0.0771	$ 370	$ 379
URG069	N-A_T5_Poisoning/Toxic effects of drugs	0.0536	0.0500	$ 257	$ 246
URG070	N-A_T5_Injury	0.0511	0.0499	$ 245	$ 245
URG071	N-A_T5_Other presentation block	0.0449	0.0435	$ 215	$ 214
URG072	N-A_T5_All other MDB groups	0.0538	0.0522	$ 258	$ 256
URG073	Did Not Wait	0.0000	0.0360	$ -	$ 177
URG074	Transfer presentation_1, 2	0.2362	0.2835	$ 1,133	$ 1,392
URG075	Died in emergency department_triage 1	0.2624	0.3024	$ 1,258	$ 1,485
URG076	Adm_Return visit, planned w any Triage	0.1181	0.0988	$ 566	$ 485
URG077	N-A Return visit, planned – Triage 1, 2	0.1289	0.1133	$ 618	$ 556
URG078	N-A Return visit, planned – Triage 3-5	0.0616	0.0512	$ 295	$ 251
URG079	Adm_T1_Psychiatric illness	0.3887	0.4011	$ 1,864	$ 1,969
URG080	Adm_T2_System infection/parasites	0.2670	0.2744	$ 1,280	$ 1,347
URG081	Adm_T2_Urological system illness	0.2378	0.2404	$ 1,140	$ 1,180
URG082	Adm_T2_Psychiatric illness	0.2476	0.2595	$ 1,187	$ 1,274
URG083	Adm_T3_Illness of eyes, ear, nose, throat	0.1519	0.1549	$ 728	$ 761

URG	Description	Qld Price Weight	National Price Weight	Qld Price	National Price
URG084	Adm_T3_Hepatobiliary system illness	0.2204	0.2154	$ 1,057	$ 1,058
URG085	Adm_T3_Psychiatric illness	0.1910	0.1932	$ 916	$ 949
URG086	Adm_T4_Circulatory system illness and Endocrine, nutritional and metabolic illness	0.1654	0.1644	$ 793	$ 807
URG087	Adm_T4_Illness of eyes, ear nose and throat	0.1240	0.1233	$ 595	$ 605
URG088	Adm_T4_Blood/immune system illness/system infection/parasites	0.1685	0.1665	$ 808	$ 818
URG089	Adm_T4_Gynaecological and Male reproductive system illness	0.1363	0.1347	$ 654	$ 661
URG090	Adm_T4_Psychiatric illness	0.1511	0.1538	$ 725	$ 755
URG091	Adm_T5_All other MDB groups 2	0.1261	0.1259	$ 605	$ 618
URG092	Adm_T5_Injury	0.1076	0.1055	$ 516	$ 518
URG093	Adm_T5_Gastrointestinal system and Digestive system illness	0.1361	0.1314	$ 653	$ 645
URG094	Adm_T5_Psychiatric illness	0.1245	0.1262	$ 597	$ 620
URG095	N-A_T2_Respiratory system illness	0.1502	0.1551	$ 720	$ 762
URG096	N-A_T2_Urological system illness	0.1759	0.1742	$ 843	$ 855
URG097	N-A_T2_Gastrointestinal system and Digestive system illness	0.1575	0.1621	$ 755	$ 796
URG098	N-A_T2_Neurological illness	0.1751	0.1777	$ 840	$ 873
URG099	N-A_T2_Blood/immune system illness/system infection/parasites	0.1457	0.1522	$ 699	$ 747
URG100	N-A_T2_Psychiatric illness	0.1599	0.1712	$ 767	$ 841
URG101	N-A_T3_Poisoning	0.1198	0.1209	$ 574	$ 594
URG102	N-A_T3_Toxic effects of drugs	0.1342	0.1400	$ 643	$ 687
URG103	N-A_T3_Illness of eyes	0.0791	0.0826	$ 379	$ 406
URG104	N-A_T3_Blood/immune system illness/system infection/parasites	0.0995	0.1018	$ 477	$ 500
URG105	N-A_T3_Psychiatric illness	0.1169	0.1288	$ 561	$ 632
URG106	N-A_T4_Poisoning	0.0698	0.0672	$ 335	$ 330
URG107	N-A_T4_Toxic effects of drugs	0.0879	0.0926	$ 421	$ 455
URG108	N-A_T4_Respiratory system illness	0.0741	0.0740	$ 355	$ 363
URG109	N-A_T4_Blood/Immune system illness/System infection/parasites	0.0709	0.0705	$ 340	$ 346
URG110	N-A_T4_Obstetric and Newborn/Neonate	0.0773	0.0797	$ 371	$ 391
URG111	N-A_T4_Gynecological/Male reproductive system illness	0.0833	0.0856	$ 399	$ 420
URG112	N-A_T4_Psychiatric illness	0.0818	0.0881	$ 392	$ 433
URG113	N-A_T5_Circulatory system illness/Endocrine, nutritional and metabolic diseases	0.0584	0.0573	$ 280	$ 281
URG114	N-A_T5_Gastrointestinal system and Digestive system illness	0.0561	0.0567	$ 269	$ 278
URG115	N-A_T5_Illness of the eyes, ear, nose and throat	0.0412	0.0415	$ 198	$ 204
URG116	N-A_T5_Illness of the skin, subcutaneous tissue, breast/Musculoskeletal/Connective tissu	0.0508	0.0521	$ 244	$ 256
URG117	N-A_T5_Blood/immune system illness/system infection/parasites	0.0468	0.0481	$ 224	$ 236
URG118	N-A_T5_Obstetric illness/Newborn/Neonate	0.0423	0.0439	$ 203	$ 216
URG119	N-A_T5_Genitourinary system illness	0.0520	0.0545	$ 249	$ 268

URG	Description	Qld Price Weight	National Price Weight	Qld Price	National Price
URG120	N-A_T5_Psychiatric illness	0.0531	0.0570	$ 255	$ 280
URG121	Transfer presentation_3	0.2159	0.2262	$ 1,035	$ 1,111
URG122	Transfer presentation_4	0.1588	0.1808	$ 761	$ 888
URG123	Transfer presentation_5	0.1004	0.1108	$ 481	$ 544
URG124	Died in emergency department_triage 2-5	0.2715	0.2687	$ 1,302	$ 1,319
URG125	Left at own risk_1, 2	0.1551	0.1588	$ 744	$ 780
URG126	Left at own risk_3	0.0975	0.1000	$ 468	$ 491
URG127	Left at own risk_4	0.0650	0.0652	$ 312	$ 320
URG128	Left at own risk_5	0.0466	0.0454	$ 223	$ 223

Appendix 11 2017-18 Emergency Service price weights (N1718 and Q19B) - UDG V1.3

2017-18 Emergency Service price weights (N1718 and Q19B) - UDG V1.3

UDG	Description	Qld Price Weights	National Price Weights	Qld Price	National Price
UDG01	Adm_T1	0.3694	0.3608	$ 1,771	$ 1,772
UDG02	Adm_T2	0.2351	0.2388	$ 1,127	$ 1,173
UDG03	Adm_T3	0.1978	0.1948	$ 948	$ 956
UDG04	Adm_T4	0.1563	0.1536	$ 749	$ 754
UDG05	Adm_T5	0.1181	0.1155	$ 566	$ 567
UDG06	N-A_T1	0.2988	0.2770	$ 1,433	$ 1,360
UDG07	N-A_T2	0.1586	0.1602	$ 760	$ 787
UDG08	N-A_T3	0.1141	0.1133	$ 547	$ 556
UDG09	N-A_T4	0.0756	0.0760	$ 363	$ 373
UDG10	N-A_T5	0.0492	0.0489	$ 236	$ 240
UDG11	Did Not Wait	0.0000	0.0360	$ -	$ 177
UDG12	Dead on Arrival w any Triage w any MDB	0.0501	0.0401	$ 240	$ 197
UDG13	Transfer presentation	0.2122	0.2319	$ 1,017	$ 1,139
UDG14	Died in emergency department	0.2656	0.2893	$ 1,274	$ 1,420
UDG15	Adm_Return visit, planned w any Triage	0.1181	0.0988	$ 566	$ 485
UDG16	N-A Return visit, planned – Triage 1, 2, 3	0.1087	0.0944	$ 521	$ 464
UDG17	N-A Return visit, planned – Triage 4,5	0.0590	0.0499	$ 283	$ 245

Appendix 12 2017-18 ABF model adjustments and localisations

2017-18 ABF Model adjustments and localisations

Order of application	Adjustment Type	Name	Criteria	Adjustment or Loading
1	National - Independent Hospital Pricing Authority (IHPA)	**Paediatric Adjustment**	Admitted Acute where patient ≤ 17 years and is admitted to a Specialised Children's Hospital	Refer to column headed 'Paediatric Adjustment' in 2017-18 Acute Admitted Price Weights (N1718 and Q19B) AR-DRG V8.0
2a	National - Independent Hospital Pricing Authority (IHPA)	**Specialist Psychiatric Age Adjustment (≤ 17 years, in MDC 19 or 20)**	Is in respect of a person who is aged 17 years or less at the time of admission, with a mental health-related principal diagnosis (Major Diagnostic Category [MDC] 19 or 20) and has one or more Total Psychiatric Care Days recorded.	Admitted Acute Patient 28% loading (except patient admitted to a Specialised Children's Hospital, who will receive 10%), however not applied for Queensland QWAU as Queensland operates a per diem funding model for mental health services which has designated unit types for paediatric services, thus already incorporating the additional cost associated with treating paediatric patients.
2b	National - Independent Hospital Pricing Authority (IHPA)	**Specialist Psychiatric Age Adjustment (≤ 17 years, not in MDC 19 or 20)**	Is in respect of a person who is aged 17 years or less at the time of admission, with a principal diagnosis which is not mental health-related (not in MDC 19 or 20) and has one or more Total Psychiatric Care Days recorded.	Admitted Acute Patient: 46% (except patients admitted to a Specialised Children's Hospital, who will receive 44%), however not applied for Queensland QWAU as Queensland operates a per diem funding model for mental health services which has designated unit types for paediatric services, thus already incorporating the additional cost associated with treating paediatric patients.
2c	National - Independent Hospital Pricing Authority (IHPA)	**Specialist Psychiatric Age Adjustment (> 17 years, not in MDC 19 or 20)**	Is in respect of a person who is aged over 17 at the time of admission, with a principal diagnosis which is not mental health-related (not in MDC 19 or 20) and has one or more Total Psychiatric Care Days recorded.	Admitted Acute Patient: 32%, however not applied for Queensland QWAU as Queensland operates a per diem funding model for mental health services which has designated unit types for paediatric services, thus already incorporating the additional cost associated with treating paediatric patients.
3a	National - Independent Hospital Pricing Authority (IHPA)	**Patient Remoteness Area Adjustment - Outer Regional**	Admitted Acute or Admitted Subacute Patient - whose residential address is within an area that is classified as being Outer Regional.	8% loading
3b	National - Independent Hospital Pricing Authority (IHPA)	**Patient Remoteness Area Adjustment - Remote Area**	Admitted Acute or Admitted Subacute Patient - whose residential address is within an area that is classified as being Remote.	20% loading
3c	National - Independent Hospital Pricing Authority (IHPA)	**Patient Remoteness Area Adjustment - Very Remote Area**	Admitted Acute or Admitted Subacute Patient - whose residential address is within an area that is classified as being Very Remote.	25% loading
4	National - Independent Hospital Pricing Authority (IHPA)	**Indigenous Adjustment**	Admitted Acute, Admitted Subacute, Emergency or Non-admitted Patient who identifies as being of Aboriginal and/or Torres Strait Islander origin.	4% loading
5	National - Independent Hospital Pricing Authority (IHPA)	**Radiotherapy Adjustment**	Admitted Acute Patient with a specified ICD-10-AM 10th edition radiotherapy procedure code recorded in their medical record.	27% loading
6	National - Independent Hospital Pricing Authority (IHPA)	**Dialysis Adjustment**	Admitted Acute Patient with a specified ICD-10-AM 10th edition renal dialysis code who is not assigned to the AR-DRG L61Z Haemodialysis or AR-DRG L68Z Peritoneal Dialysis.	25% loading
7	National - Independent Hospital Pricing Authority (IHPA)	**Intensive Care Unit (ICU) Adjustment**	(a) Is not represented by a newborn/neonate AR-DRG identified as 'Bundled ICU' in the tables of Admitted Acute Price Weights; but (b) Is in respect of a person who has spent time within a Specified ICU.	0.0427 NWAU(17)/hour spent by that person within the Specified ICU
8a	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Service Adjustment (Admitted Acute)**	Is in respect of an Eligible Admitted Private Patient: Admitted Acute.	Refer to column headed 'Private Patient Service' in 2017-18 National Acute Admitted Price Weights (N1718) AR-DRG V8.0. Not being applied in Queensland QWAU as all revenue sources are in the price weight.
8b	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Service Adjustment (Admitted Subacute - Palliative Care)**	Is in respect of an Eligible Admitted Private Patient: Admitted Subacute - whose care type is Palliative Care.	3.8% adjustment, not applied for Queensland QWAU as all revenue sources are in the price weight.
8c	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Service Adjustment (Admitted Subacute - Rehabilitation)**	Is in respect of an Eligible Admitted Private Patient: Admitted Subacute - whose care type is Rehabilitation.	4.1% adjustment, not applied for Queensland QWAU as all revenue sources are in the price weight.
8d	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Service Adjustment (Admitted Subacute - Psychogeriatric)**	Is in respect of an Eligible Admitted Private Patient: Admitted Subacute - whose care type is Psychogeriatric Care.	3.9% adjustment, not applied for Queensland QWAU as all revenue sources are in the price weight.

Order of application	Adjustment Type	Name	Criteria	Adjustment or Loading
8e	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Service Adjustment (Admitted Subacute - GEM)**	Is in respect of an Eligible Admitted Private Patient: Admitted Subacute - whose care type is GEM.	3.6% adjustment, not applied for Queensland QWAU as all revenue sources are in the price weight.
8f	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Service Adjustment (Admitted Subacute - Maintenance)**	Is in respect of an Eligible Admitted Private Patient: Admitted Subacute - whose care type is Maintenance.	2.3% adjustment, not applied for Queensland QWAU as all revenue sources are in the price weight.
9a	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Accommodation Adjustment (Same Day)**	Is in respect of an Eligible Admitted Private Patient: Admitted Acute or Admitted Subacute - whose stay type is Same Day.	0.0526 NWAU adjustment per diem, not applied for Queensland QWAU as all revenue sources are in the price weight.
9b	National - Independent Hospital Pricing Authority (IHPA)	**Private Patient Accommodation Adjustment (Overnight)**	Is in respect of an Eligible Admitted Private Patient: Admitted Acute or Admitted Subacute - whose stay type is Overnight.	0.0726 NWAU adjustment per diem, not applied for Queensland QWAU as all revenue sources are in the price weight.
10	National - Independent Hospital Pricing Authority (IHPA)	**Multidisciplinary Clinic Adjustment**	Non-admitted Patient in respect of a non-admitted service event where three or more health care providers (each of a different specialty) are present, as identified using the non-admitted 'multiple health care provider indicator'	55% loading, however not applied for Q19 QWAU as introductory phase.
11a	National - Independent Hospital Pricing Authority (IHPA)	**Emergency Care Age Adjustment (65 to 79 years)**	Emergency Department or Emergency Service patient, with the rate of adjustment dependent on the person's age - 65 to 79 years.	14% loading
11b	National - Independent Hospital Pricing Authority (IHPA)	**Emergency Care Age Adjustment (Over 79 years)**	Emergency Department or Emergency Service patient, with the rate of adjustment dependent on the person's age - Over 79 years.	21% loading
PI	Queensland localisation	**Out of Scope services**	Admitted Acute and Mental Health Inpatient episodes with the following out-of-scope services: Vasectomy, Reversal of Vasectomy and Laser Refraction. (Refer Policy QH-POL-336:2015 Scope of Publicly Funded Services and QH-GDL-336-1:2015 Guideline Publicly Funded Services).	Zero "0" QWAU
PI	Queensland localisation	**Emergency Department Did Not Wait**	Emergency department patient: Did Not Wait (DNW) episodes.	Zero "0" QWAU
PI	Queensland localisation	**Non-admitted (New & Review)**	Non-admitted Patient: New and Review episodes and telephone.	Refer to in the "Non-admitted Tier 2 Price Weights" and columns headed 'New', 'Review' and 'Telephone'.
PI	Queensland localisation	**Hospital in the Home (HITH) - DRG specific**	Admitted Acute Inpatient episodes with DRGs: - E61B (Pulmonary Embolism, Minor Complexity) - J64B (Cellulitis, Minor Complexity); and - F63B (Venous Thrombosis, Minor Complexity).	85% of DRG price weight
PI	Queensland localisation	**Hospital in the Home (HITH) - LOS exceeds inlier**	Admitted Acute Inpatient episodes with other DRGs that involve a HITH component and have a length of stay (LOS) that exceeds the inlier period. Excludes HITH episodes with LOS within inlier period (ie paid 100% DRG price weight)	85% of long stay per diem price weight plus 100% of inlier price weight.
PI	Queensland localisation	**Pre-Operative Elective Bed Days**	Admitted Acute and Mental Health Inpatients: For elective episodes with surgical DRGs that have both pre-operative days and long stay days (above high trim point).	Reduce number of long stay days by the number of pre-operative bed days, up to a maximum of three (3) days.
PI	Queensland localisation	**Fractured Neck of Femur**	Patients' episodes with specific attributes, who do not receive surgery within two (2) days of admission.	Reduce DRG price weight by 20%
PI	Queensland localisation	**Stroke**	Admitted Acute Inpatient episodes with a stroke principal diagnosis and patient aged ≥ 18 years admitted to a stroke unit (standard ward code STKU) for a minimum of four (4) hours within their admitted acute episode. (Some exclusions apply - see Stroke care specification sheet).	10% loading to DRG inlier rate
LCZ (always)	Queensland localisation	**Mental Health (Care type 12) or episodes in a 'PY**' Standard Unit**	Admitted inpatient episodes with whole or partial days in a 'PY**' Standard Unit will be funded based on the per diem rate payment for the number of days in the standard unit.	Days outside a 'PY**' Standard Unit at an average Mental Health day rate (0.2422 QWAU) plus a per diem rate for 'PY**' Standard Unit.
LCZ (always)	Queensland localisation	**Bilateral Cochlear implants**	Admitted Acute and Mental Health inpatients with procedure code 41617-00 (Implantation of cochlear prosthetic device, block 329) x2 (performed twice).	4.3637 QWAU per bilateral episode (2nd ICD code)

Order of application	Adjustment Type	Name	Criteria	Adjustment or Loading
LCZ (always)	Queensland localisation	**Hyperbaric**	Admitted Acute and Mental Health inpatient episodes with any of the following Australian Classification of Health Intervention (ACHI) procedure codes: - 9619100 (Hyperbaric oxygen therapy, =< 90 minutes, block 1888); - 1302000 (Hyperbaric oxygen therapy, >90 minutes and =< 3 hours, block 1888) ; or - 1302500 (Hyperbaric oxygen therapy, >3 hours, block 1888).	Additional 0.2050 QWAU per ICD code to total episodic QWAUs.
LCZ (always)	Queensland localisation	**Neonatal Intensive Care Unit (NICU)**	Qualified Newborn (Care type 05) episodes admitted to a Neonatal Intensive Care Unit (standard ward code NSV6) in the following facilities: - 00003 Mater Mother's Hospital - 00200 The Townsville Hospital - 00201 Royal Brisbane & Women's Hospital - 00936 Gold Coast University Hospital.	0.0055 QWAU/hour spent by that patient within the Specified NICU.
LCZ (always)	Queensland localisation	**Kidney & Liver transplant**	Admitted Acute and Mental Health Inpatient episodes with: - Transplant DRGs A01Z (liver), A09A (kidney), A09B (kidney), A11A (Insertion of Spinal Infusion Device - Major) or A11B (Insertion of Spinal Infusion Device) or - ICD codes Z94.0 (kidney) or Z 94.4 (Liver) admitted to facility 00011 Princess Alexandra Hospital	65% loading to DRG inlier rate
LCZ (always)	Queensland localisation	**Spinal - Acute**	Admitted Acute and Mental Health inpatient episodes with spinal DRGs (B03A, B03B, B61A and B61B) admitted to facility 00011 Princess Alexandra Hospital	50% loading to DRG inlier rate
LCZ (always)	Queensland localisation	**Spinal - SNAP**	SNAP inpatient episodes to SIU ward at facility 00011 Princess Alexandra Hospital	16% to AN-SNAP inlier rate
LCZ (1)	Queensland localisation	**Transplant Support**	Admitted Acute and Mental Health Inpatient episodes - with transplant ICD code Z94.1 (heart), Z94.2 (lung) or Z94.3 (heart and lung) - and not in DRG A01Z,A03Z, A05Z, A07A, A07B, A08A, A08B, A09A or A09B)	180% loading to DRG inlier rate
LCZ (2)	Queensland localisation	**Neurosurgery**	Admitted Acute and Mental Health Inpatient episodes with any of the following ACHI procedure codes: - 35412-00 (Endovascular occlusion of cerebral aneurysm or arteriovenous malformation) , or - 40801-00 (Functional intracranial stereotactic procedure), or - 40803-00 (Intracranial stereotactic localisation) AND the AR-DRG code starting with 'B'.	68% loading to DRG inlier rate
LCZ (3)	Queensland localisation	**Trauma**	Admitted Acute and Mental Health Inpatient episodes with SRG 51 Non Subspecialty Surgery and either ESRG 5105 Injuries Non-surgical or ESRG 5106 Other Non-specialty surgery with an Elective Status as Emergency and admitted to the following facilities: - 00011 Princess Alexandra Hospital - 00200 The Townsville Hospital - 00201 Royal Brisbane & Women's Hospital - 00936 Gold Coast University Hospital.	27% loading to DRG inlier rate
LCZ (4)	Queensland localisation	**Cystic Fibrosis**	Admitted Acute and Mental Health Inpatient episodes with ICD-10-AM diagnosis code E84, E84.0, E84.1, E84.8, E84.9 and not in a cystic fibrosis DRG E60A or E60B	8% loading to DRG inlier rate

LCZ (always) - *Localisations*

LCZ (1) - LCZ (4) - *Localisations assigned based on the highest qualification of patient criteria*

PI - *Purchasing Initiatives (refer Healthcare Purchasing Specifications for more information)*

Appendix 13 Specified Intensive Care Units

HHS	Facility Name 2017-18 Specified Intensive Care Units
Cairns and Hinterland	Cairns Base Hospital
Central Queensland	Rockhampton Base Hospital
Children's Health Queensland	Lady Cilento Children's Hospital
Darling Downs	Toowoomba Hospital
Gold Coast	Gold Coast University Hospital
Gold Coast	Robina Hospital
Mackay	Mackay Base Hospital
Mater*	Mater Adult Hospital
Metro North	Redcliffe Hospital
Metro North	Royal Brisbane & Women's Hospital
Metro North	The Prince Charles Hospital
Metro South	Logan Hospital
Metro South	Princess Alexandra Hospital
Sunshine Coast	Sunshine Coast University Hospital
Townsville	The Townsville Hospital
West Moreton	Ipswich Hospital
Wide Bay	Bundaberg Base Hospital
Wide Bay	Hervey Bay Hospital

For a full description of the type and level of public health service provided by each hospital, refer to the relevant HHS in Clinical Services Capability Framework HHS self-assessment summary sheets
(* excludes Mater Health Services).

Appendix 14 Radiotherapy procedures codes eligible for adjustment

Source: - Radiotherapy ICD-10-AM 10th edition codes

Procedure Codes	Description
15000-00	Radiation treatment, superficial, 1 field
15003-00	Radiation treatment, superficial, >= 2 fields
15100-00	Radiation treatment, orthovoltage, 1 field
15103-00	Radiation treatment, orthovoltage, >= 2 fields
15224-00	Radiation treatment, megavoltage, 1 field, single modality linear accelerator
15239-00	Radiation treatment, megavoltage, >= 2 fields, single modality linear accelerator
15254-00	Radiation treatment, megavoltage, 1 field, dual modality linear accelerator
15269-00	Radiation treatment, megavoltage, >= 2 fields, dual modality linear accelerator
15600-00	Stereotactic radiation treatment, single dose
15600-01	Stereotactic radiation treatment, fractionated
15600-02	Hemi body irradiation
15600-03	Total body irradiation
15600-04	Total skin irradiation
15303-00	Brachytherapy, intrauterine, low dose rate
15304-00	Brachytherapy, intrauterine, high dose rate
15311-00	Brachytherapy, intravaginal, low dose rate
15312-00	Brachytherapy, intravaginal, high dose rate
15319-00	Brachytherapy, combined intrauterine and intravaginal, low dose rate
15320-00	Brachytherapy, combined intrauterine and intravaginal, high dose rate
90764-00	Brachytherapy, intracavitary, low dose rate
90764-01	Brachytherapy, intracavitary, high dose rate
15327-00	Brachytherapy with implantation of removable single plane, low dose rate
15327-01	Brachytherapy with implantation of removable single plane, pulsed dose rate
15327-02	Brachytherapy with implantation of removable multiple planes or volume implant, low dose rate
15327-03	Brachytherapy with implantation of removable multiple planes or volume implant, pulsed dose rate
15327-04	Brachytherapy with implantation of permanent implant, < 10 sources
15327-05	Brachytherapy with implantation of permanent implant, >= 10 sources
15327-06	Brachytherapy with implantation of removable single plane, high dose rate
15327-07	Brachytherapy with implantation of removable multiple planes or volume implant, high dose rate
15338-00	Brachytherapy, prostate
15360-00	Brachytherapy, intravascular
15339-00	Removal of sealed radioactive source
15012-00	Brachytherapy, eye
90766-00	Brachytherapy using surface applicators, other sites

Procedure Codes	Description
16003-00	Administration of a therapeutic dose of Yttrium 90
16009-00	Administration of a therapeutic dose of Iodine 131
16012-00	Administration of a therapeutic dose of Phosphorous 32
16015-00	Administration of a therapeutic dose of Strontium 89
16018-00	Administration of a therapeutic dose of 153 SM-Lexidronan
90960-00	Administration of a therapeutic dose of other unsealed radioisotope
15342-00	Construction and application of radioactive surface mould
15351-00	Construction and application of eye applicator
90765-00	Construction and fitting of immobilisation device, simple
90765-01	Construction and fitting of immobilisation device, intermediate
90765-02	Construction and fitting of immobilisation device, complex
90765-03	Construction and fitting of customised blocks
90765-04	Construction and fitting of treatment accessories
15500-00	Radiation field setting using simulator, simple
15503-00	Radiation field setting using simulator, intermediate
15506-00	Radiation field setting using simulator, complex
15506-01	Radiation field setting using dedicated CT scanner
15506-02	Radiation field setting for intensity modulated radiation therapy [IMRT]
15509-00	Radiation field setting using diagnostic x-ray unit
15550-00	Radiation field setting for three dimensional conformal radiation therapy [3DCRT]
15518-00	Dosimetry by CT interfacing computer, simple
15521-00	Dosimetry by CT interfacing computer, intermediate
15524-00	Dosimetry by CT interfacing computer, complex
15524-01	Dosimetry by CT interfacing computer for intensity modulated radiation therapy [IMRT]
15527-00	Dosimetry by non-CT interfacing computer, simple
15530-00	Dosimetry by non-CT interfacing computer, intermediate
15533-00	Dosimetry by non-CT interfacing computer, complex
15536-00	Brachytherapy planning, simple
15536-01	Brachytherapy planning, intermediate
15536-02	Brachytherapy planning, complex
15539-00	Brachytherapy planning, prostate
15541-00	Brachytherapy planning, intravascular
15556-00	Dosimetry by CT interfacing computer for three dimensional conformal radiation therapy [3DCRT]
15556-01	Dosimetry by non-CT interfacing computer for three dimensional conformal radiation therapy [3DCRT]
37217-01	Implantation of fiducial markers

Appendix 15 Dialysis codes eligible for adjustment

Source: - Dialysis ICD-10-AM 10th edition codes

Procedure Codes	Description
13100-00	Haemodialysis
13100-01	Intermittent Haemofiltration
13100-02	Continuous Haemofiltration
13100-03	Intermittent Haemodiafiltration
13100-04	Continuous Haemodiafiltration
13100-05	Haemopurfusion
13100-06	Peritoneal dialysis, short term
13100-07	Intermittent peritoneal dialysis, long term
13100-08	Continuous peritoneal dialysis, long term

Appendix 16 Specified Grants

HHS	Specified Grants	2017-18
Cairns and Hinterland	High Cost Outliers	$1,810,417
Cairns and Hinterland	Limited Indication Medication Scheme	$382,978
Cairns and Hinterland	Positron Emission Tomography (PET) Service	$1,787,604
Central Queensland	High Cost Outliers	$568,057
Children's Health Queensland	Blood Clotting factors	$5,621,223
Children's Health Queensland	Cerebral Palsy Service	$3,681,133
Children's Health Queensland	Haemophilia Centre	$593,168
Children's Health Queensland	High Cost Outliers	$6,917,512
Children's Health Queensland	Paediatric Retrieval Service	$2,963,885
Children's Health Queensland	Statewide Children Services	$4,002,802
Children's Health Queensland	Statewide Epilepsy Service	$533,759
Darling Downs	High Cost Outliers	$374,082
Gold Coast	High Cost Outliers	$3,680,103
Gold Coast	Limited Indication Medication Scheme	$450,943
Gold Coast	PET Service	$1,787,604
Mackay	High Cost Outliers	$832,335
Mater Health Services	Breast Reconstruction	$838,667
Mater Health Services	Comprehensive Epilepsy Service	$800,000
Mater Health Services	Consultation Liaison Psychiatry Service	$600,000
Mater Health Services	High Cost Outliers	$2,937,676
Metro North	Blood Clotting factors	$10,317,749
Metro North	Centre for Gynaecological Oncology	$900,775
Metro North	Comprehensive Epilepsy Program	$615,000
Metro North	Haemophilia Centre	$963,693
Metro North	High Cost Outliers	$20,298,597
Metro North	Limited Indication Medication Scheme	$1,008,971
Metro North	Neonatal Retrieval Service	$3,003,568
Metro North	Paediatric Adolescent gynaecology	$161,570
Metro North	Percutaneous Valve Replacement	$1,083,882
Metro North	PET Service	$2,263,740
Metro North	PET/Fluorodeoxyglucose (FDG) production	$803,530
Metro South	High Cost Outliers	$10,905,563
Metro South	Limited Indication Medication Scheme	$541,620
Metro South	PET Service	$2,105,540
North West	High Cost Outliers	$341,750
Sunshine Coast	High Cost Outliers	$1,521,099
Townsville	High Cost Outliers	$1,619,198

HHS	Specified Grants	2017-18
Townsville	Limited Indication Medication Scheme	$856,973
Townsville	Neonatal Retrieval Service	$406,379
Townsville	PET Service	$1,787,605
West Moreton	High Cost Outliers	$422,831
Wide Bay	High Cost Outliers	$1,180,380
		$104,273,962

Appendix 17 Clinical education and training grants

Hospital and Health Service	Hospital Name	2017-18
Cairns and Hinterland	Atherton Hospital	$817,492
Cairns and Hinterland	Cairns Base Hospital	$19,235,695
Cairns and Hinterland	Innisfail Hospital	$715,871
Cairns and Hinterland	Mareeba Hospital	$762,174
Central Queensland	Emerald Hospital	$612,809
Central Queensland	Gladstone Hospital	$1,564,944
Central Queensland	Rockhampton Hospital	$8,056,495
Children's Health Queensland	Lady Cilento Children's Hospital	$14,140,621
Darling Downs	Dalby Hospital	$397,417
Darling Downs	Kingaroy Hospital	$778,176
Darling Downs	Toowoomba Hospital	$10,521,655
Darling Downs	Warwick Hospital	$730,223
Gold Coast	Gold Coast University Hospital	$37,576,662
Gold Coast	Robina Hospital	$3,816,537
Mackay	Mackay Base Hospital	$10,087,213
Mackay	Proserpine Hospital	$386,768
Mater Public Hospitals	Mater Adult Hospital	$8,347,965
Mater Public Hospitals	Mater Mothers' Hospital	$2,889,240
Metro North	Caboolture Hospital	$7,901,632
Metro North	Redcliffe Hospital	$9,959,187
Metro North	Royal Brisbane & Women's Hospital	$38,670,834
Metro North	The Prince Charles Hospital	$18,538,366
Metro South	Logan Hospital	$16,516,241
Metro South	Princess Alexandra Hospital	$33,839,461
Metro South	Queen Elizabeth II Jubilee Hospital	$5,119,036
Metro South	Redland Hospital	$5,111,156
North West	Mount Isa Base Hospital	$2,696,367
Sunshine Coast	Caloundra Hospital	$599,340
Sunshine Coast	Gympie Hospital	$1,445,610
Sunshine Coast	Nambour General Hospital	$6,066,067
Sunshine Coast	Sunshine Coast University Public Hospital	$15,695,721
Townsville	The Townsville Hospital	$23,113,183
West Moreton	Ipswich Hospital	$11,397,804
Wide Bay	Bundaberg Base Hospital	$5,087,370
Wide Bay	Hervey Bay Hospital	$5,082,465
Wide Bay	Maryborough Hospital	$739,013
Total		**$329,016,810**

Appendix 18 2017-18 HHS hospitals and facilities by funding model

Refer legend below table

Hospital & Health Service	Hospital or facility name	PHE ID	Funding model	Block funded sub-group
Cairns and Hinterland	Atherton Hospital	310000211	ABF	
Cairns and Hinterland	Babinda Hospital	310000212	Block	Small rural and MPHS
Cairns and Hinterland	*Cairns Community Care Unit*	*310082008*	Block	Res-MHCCU
Cairns and Hinterland	Cairns Hospital	310000214	ABF	
Cairns and Hinterland	Gordonvale Hospital	310000220	Block	Small rural
Cairns and Hinterland	Herberton Hospital	310000221	Block	Small rural
Cairns and Hinterland	Innisfail Hospital	310000222	ABF	
Cairns and Hinterland	Mareeba Hospital	310000223	ABF	
Cairns and Hinterland	Mossman Hospital	310000224	Block	Small rural and MPHS
Cairns and Hinterland	Tully Hospital	310000227	Block	Small rural
Central Queensland	Baralaba Hospital	310000132	Block	Small rural and MPHS
Central Queensland	Biloela Hospital	310000133	Block	Small rural
Central Queensland	*Birribi (Rockhampton) IHU*	*310000616*	Block	Res-Other
Central Queensland	Blackwater Hospital	310000134	Block	Small rural and MPHS
Central Queensland	Capricorn Coast Hospital	310000144	Block	Small rural
Central Queensland	Emerald Hospital	310000135	ABF	
Central Queensland	*Eventide (Rockhampton) Aged Care Facility*	*310000692*	Block	Res-Other
Central Queensland	Gladstone Hospital	310000136	ABF	
Central Queensland	Mount Morgan Hospital	310000139	Block	Small rural and MPHS
Central Queensland	Moura Hospital	310000140	Block	Small rural
Central Queensland	*North Rockhampton Aged Care Facility*	*310000613*	Block	Res-Other
Central Queensland	*Rockhampton Community Care Unit*	*310082010*	Block	Res-MHCCU
Central Queensland	Rockhampton Hospital	310000141	ABF	
Central Queensland	Springsure Hospital	310000142	Block	Small rural and MPHS

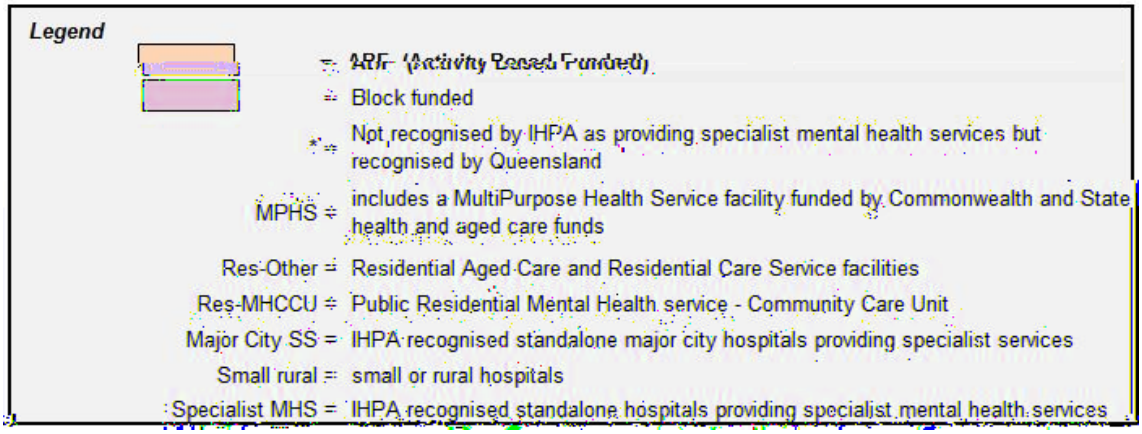
Hospital & Health Service	Hospital or facility name	PHE ID	Funding model	Block funded sub-group
Central Queensland	Theodore Hospital	310000143	Block	Small rural and MPHS
Central Queensland	Woorabinda Hospital	310000145	Block	Small rural and MPHS
Central West	Alpha Hospital	310000131	Block	Small rural and MPHS
Central West	Barcaldine Hospital	310000152	Block	Small rural and MPHS
Central West	Blackall Hospital	310000153	Block	Small rural and MPHS
Central West	Longreach Hospital	310000156	Block	Small rural
Central West	Winton Hospital	310000159	Block	Small rural and MPHS
Children's Health Queensland	Ellen Barron Family Centre	310000017	Block	Major city SS
Children's Health Queensland	Lady Cilento Children's Hospital	310000202	ABF	
Darling Downs	*Baillie Henderson Hospital*	*340000701*	Block	Specialist MHS
Darling Downs	Cherbourg Hospital	310000063	Block	Small rural
Darling Downs	Chinchilla Hospital	310000091	Block	Small rural
Darling Downs	Dalby Hospital	310000092	ABF	
Darling Downs	*Dr E A F McDonald Aged Care Facility*	*310000614*	Block	Res-Other
Darling Downs	*Forest View Aged Care Facility*	*310000623*	Block	Res-Other
Darling Downs	Goondiwindi Hospital	310000093	Block	Small rural
Darling Downs	Inglewood Hospital	310000094	Block	Small rural and MPHS
Darling Downs	Jandowae Hospital	310000095	Block	Small rural
Darling Downs	*Karingal Aged Care Facility*	*310000607*	Block	Res-Other
Darling Downs	Kingaroy Hospital	310000070	ABF	
Darling Downs	Miles Hospital	310000097	Block	Small rural
Darling Downs	Millmerran Hospital	310000098	Block	Small rural and MPHS
Darling Downs	*Milton House Aged Care Facility*	*310001344*	Block	Res-Other
Darling Downs	*Mt Lofty Aged Care Facility*	*310000611*	Block	Res-Other
Darling Downs	Murgon Hospital	310000075	Block	Small rural
Darling Downs	Nanango Hospital	310000076	Block	Small rural

Hospital & Health Service	Hospital or facility name	PHE ID	Funding model	Block funded sub-group
Darling Downs	Oakey Hospital	310000099	Block	Small rural
Darling Downs	Stanthorpe Hospital	310000100	Block	Small rural
Darling Downs	Tara Hospital	310000101	Block	Small rural
Darling Downs	Taroom Hospital	310000102	Block	Small rural
Darling Downs	Texas Hospital	310000103	Block	Small rural and MPHS
Darling Downs	*The Oaks Aged Care Facility*	*310000618*	Block	Res-Other
Darling Downs	*Toowoomba Community Care Unit*	*310082009*	Block	Res-MHCCU
Darling Downs	Toowoomba Hospital	310000104	ABF	
Darling Downs	Warwick Hospital	310000105	ABF	
Darling Downs	Wondai Hospital	310000077	Block	Small rural
Gold Coast	Gold Coast University Hospital	310000936	ABF	
Gold Coast	Robina Hospital	310000934	ABF	
Mackay	Bowen Hospital	310000192	Block	Small rural
Mackay	Clermont Hospital	310000171	Block	Small rural and MPHS
Mackay	Collinsville Hospital	310000194	Block	Small rural and MPHS
Mackay	Dysart Hospital	310000176	Block	Small rural
Mackay	Mackay Base Hospital	310000172	ABF	
Mackay	Moranbah Hospital	310000173	Block	Small rural
Mackay	Proserpine Hospital	310000174	ABF	
Mackay	Sarina Hospital	310000175	Block	Small rural
Mater	Mater Hospital Brisbane	310000001	ABF	
Mater	Mater Mothers' Hospital	310000003	ABF	
Metro North	*Ashworth House Aged Care Facility*	*310000624*	Block	Res-Other
Metro North	Caboolture Hospital	310000030	ABF	
Metro North	*Cooinda House Aged Care Facility*	*310000615*	Block	Res-Other
Metro North	*Eventide (Sandgate) Aged Care Facility*	*310000691*	Block	Res-Other
Metro North	*Halwyn Centre IHU*	*310000605*	Block	Res-Other

Hospital & Health Service	Hospital or facility name	PHE ID	Funding model	Block funded sub-group
Metro North	*Jacana Centre - ABI Rehab Unit*	*310000601*	Block	Res-Other
Metro North	Kilcoy Hospital	310000046	Block	Small rural
Metro North	*Pine Rivers Community Care Unit*	*310082001*	Block	Res-MHCCU
Metro North	Redcliffe Hospital	310000016	ABF	
Metro North	*Redcliffe-Caboolture Community Care Unit*	*310082002*	Block	Res-MHCCU
Metro North	Royal Brisbane & Women's Hospital	310000201	ABF	
Metro North	*Somerset Villas Community Care Unit*	*310082003*	Block	Res-MHCCU
Metro North	The Prince Charles Hospital	310000004	ABF	
Metro South	*Bayside Community Care Unit*	*310082005*	Block	Res-MHCCU
Metro South	Beaudesert Hospital	310000041	Block	Small rural
Metro South	*Casuarina Lodge*	*310000625*	Block	Res-Other
Metro South	*Coorparoo Community Care Unit*	*310082000*	Block	Res-MHCCU
Metro South	*Logan Community Care Unit*	*310082006*	Block	Res-MHCCU
Metro South	Logan Hospital	310000029	ABF	
Metro South	Princess Alexandra Hospital	310000011	ABF	
Metro South	QE II Hospital	310000022	ABF	
Metro South	*Redland Aged Care Facility*	*310001404*	Block	Res-Other
Metro South	Redland Hospital	310000028	ABF	
Metro South	Wynnum Hospital	310000024	Block	Major city SS
North West	Cloncurry Hospital	310000243	Block	Small rural and MPHS
North West	Doomadgee Hospital	310000252	Block	Small rural
North West	Julia Creek Hospital	310000245	Block	Small rural and MPHS
North West	Mornington Island Hospital	310000249	Block	Small rural
North West	Mount Isa Base Hospital	310000246	ABF	
North West	Normanton Hospital	310000247	Block	Small rural
South West	Augathella Hospital	310000111	Block	Small rural and MPHS
South West	Charleville Hospital	310000112	Block	Small rural
South West	Cunnamulla Hospital	310000113	Block	Small rural

Hospital & Health Service	Hospital or facility name	PHE ID	Funding model	Block funded sub-group
South West	Dirranbandi Hospital	310000114	Block	Small rural and MPHS
South West	Injune Hospital	310000115	Block	Small rural and MPHS
South West	Mitchell Hospital	310000116	Block	Small rural and MPHS
South West	Mungindi Hospital	310000117	Block	Small rural and MPHS
South West	Quilpie Hospital	310000118	Block	Small rural and MPHS
South West	Roma Hospital	310000119	Block	Small rural
South West	St George Hospital	310000120	Block	Small rural
South West	Surat Hospital	310000121	Block	Small rural and MPHS
South West	*Waroona Aged Care Facility*	*310000621*	Block	Res-Other
South West	*Westhaven Aged Care Facility*	*310000622*	Block	Res-Other
Sunshine Coast	Caloundra Hospital	310000043	ABF	
Sunshine Coast	Gympie Hospital	310000068	ABF	
Sunshine Coast	Maleny Hospital	310000048	Block	Small rural
Sunshine Coast	*Mountain Creek Community Care Unit*	*310082004*	Block	Res-MHCCU
Sunshine Coast	*Nambour (Glenbrook) Aged Care Facility*	*310000612*	Block	Res-Other
Sunshine Coast	Nambour General Hospital	310000049	ABF	
Sunshine Coast	Sunshine Coast University Hospital	310000032	ABF	
Torres and Cape	Bamaga Hospital	310000213	Block	Small rural
Torres and Cape	Cooktown Hospital	310000216	Block	Small rural and MPHS
Torres and Cape	Thursday Island Hospital	310000226	Block	Small rural
Torres and Cape	Weipa Hospital	310000228	Block	Small rural and MPHS
Townsville	Ayr Hospital	310000191	Block	Small rural
Townsville	Charters Towers Hospital	310000193	Block	Small rural
Townsville	*Charters Towers Rehabilitation Unit**	*340000703*	Block	Specialist MHS
Townsville	*Eventide (Charters Towers) Aged Care Facility*	*310000693*	Block	Res-Other
Townsville	Home Hill Hospital	310000195	Block	Small rural

Hospital & Health Service	Hospital or facility name	PHE ID	Funding model	Block funded sub-group
Townsville	Hughenden Hospital	310000244	Block	Small rural and MPHS
Townsville	Ingham Hospital	310000196	Block	Small rural
Townsville	Joyce Palmer Hospital	310000197	Block	Small rural
Townsville	*Kirwan Mental Rehabilitation Unit*	*340000715*	Block	Specialist MHS
Townsville	*Parklands Aged Care Facility*	*310000619*	Block	Res-Other
Townsville	Richmond Hospital	310000248	Block	Small rural and MPHS
Townsville	Townsville Hospital	310000200	ABF	
West Moreton	Boonah Hospital	310000042	Block	Small rural
West Moreton	Esk Hospital	310000044	Block	Small rural
West Moreton	*Gailes Community Care Unit*	*310082011*	Block	Res-MHCCU
West Moreton	Gatton Hospital	310000045	Block	Small rural
West Moreton	Ipswich Hospital	310000015	ABF	
West Moreton	Laidley Hospital	310000047	Block	Small rural
West Moreton	*The Park Centre For Mental Health*	*340000751*	Block	Specialist MHS
Wide Bay	Biggenden Hospital	310000061	Block	Small rural and MPHS
Wide Bay	Bundaberg Base Hospital	310000062	ABF	
Wide Bay	Childers Hospital	310000064	Block	Small rural and MPHS
Wide Bay	Eidsvold Hospital	310000065	Block	Small rural and MPHS
Wide Bay	Gayndah Hospital	310000066	Block	Small rural
Wide Bay	Gin Gin Hospital	310000067	Block	Small rural
Wide Bay	Hervey Bay Hospital	310000069	ABF	
Wide Bay	Maryborough Hospital	310000071	ABF	
Wide Bay	Monto Hospital	310000072	Block	Small rural
Wide Bay	Mundubbera Hospital	310000074	Block	Small rural and MPHS
Wide Bay	*Wide Bay Community Care Unit*	*310082007*	Block	Res-MHCCU
		ABF:	36	
		Block funded:	120	
		Total	156	


Legend
= ABF (Activity Based Funded)
= Block funded
= Not recognised by IHPA as providing specialist mental health services but recognised by Queensland
MPHS = includes a MultiPurpose Health Service facility funded by Commonwealth and State health and aged care funds
Res-Other = Residential Aged Care and Residential Care Service facilities
Res-MHCCU = Public Residential Mental Health service - Community Care Unit
Major City SS = IHPA recognised standalone major city hospitals providing specialist services
Small rural = small or rural hospitals
Specialist MHS = IHPA recognised standalone hospitals providing specialist mental health services

Appendix 19 ABF-Non-ABF service category definitions

Queensland Government

Department of Health
2017-18 ABF & Non-ABF (NABF) Service Category Definitions (Phase 19B)

v 1.1

Legend:	
ABF (%)	- % are applied to Cost Centre(s) in DSS to estimate the Costs related to ABF activity
Non-ABF (%)	- % are applied to Cost Centre(s) in DSS to estimate the Costs related to this non-ABF category
Non-ABF (Actual costs)	- actual expenses excluded from ABF by specific GL accounts --- NB % are not required if coded correctly
Non-ABF	- ***category unavailable for 2017-18***

**** For noting: BreastScreen and Oral health services are funded on an activity basis but for the purposes of costing and Cost Centre alignment they remain NABF**

Cost Category Type	Service Category	Definitions	Service examples (List not exhaustive for each service type)
ABF	**ABF Activity delivered by :** **- ABF facilities within Queensland Health** **- activity Outsourced to Private sector** **(unless specifically excluded below as Non-ABF e.g. Depreciation, Patient Travel)**	Queensland Health facilities: All activities undertaken by ABF facilities within Queensland Health NB the only expenses which may reasonably be excluded from the ABF pool are those: • specifically identified as exclusions (e.g. Depreciation, Patient Transport etc) • related to a defined Non-ABF service (e.g. Community Mental Health, Research, Residential Care etc.) • that portion of HHS overhead costs deemed appropriate Private Facilities: Services provided by contract with a private provider that otherwise would equal ABF activity if delivered in an ABF facility e.g. Noosa Hospital contracted services.	• Inpatient and Outpatient services • clinical support • HITH (Hospital in the Home) • staff development / training / education • non- clinical support service • hotel services (e.g. cleaning, catering & wards persons) • business management (including Finance, HR, media staff, etc.) • facility & grounds management & maintenance • including (as overheads) any appropriate share of HHS management costs • HEN, TPN, Home Ventilation • Organ/Tissue donor retrievals • **Nurse Navigators** # Activity (public) outsourced to Private Providers e.g. Noosa Hospital
Non-ABF	ABF Equivalent Activity provided by an Outsourced Provider	Hospital Services provided by an outsourced provider that otherwise would equal ABF activity if delivered in an ABF facility e.g. Noosa Hospital contracted services. From 2014-15, outsourced public activity (ABF equivalent) is considered an ABF expense	## ***category no longer available***
Non-ABF	**ABF Equivalent Activity in Block Funded Public Facilities**	ABF equivalent hospital services provided in small facilities i.e. IHPA In Scope facilities. This includes Mental Health Facilities and facilities previously defined as Community Service Obligations (CSOs). From July 2017, this will include the Mental Health CCUs (previously classified as ABF.)	• Baillie Henderson • The Park • Charters Towers Rehabilitation Unit • Kirwan Rehabilitation Unit • **Community Care Units (Mtl Health) from 1 July 2017** • 83 small hospitals (mostly Rural)
Non-ABF	**Aged Care Assessment Program**	Services provided under the Commonwealth Aged Care Assessment Program.	
Non-ABF	**Alcohol and Other Drugs**	Services targeted at the treatment of substance abuse and misuse.	• Consultation & Liaison • Counselling • Needle & Syringe Program • Opioid Treatment Program • Police Diversion • Residential Rehabilitation & Detox

Cost Category Type	Service Category	Definitions	Service examples (List not exhaustive for each service type)
Non-ABF	Breast Screen **	Specific breast screening service programs (excludes opportunistic screening services, mental health, child and youth)	• Breast • ~~Bowel Screening~~ (align to Tier 2 ABF or Primary Health Care)
Non-ABF	Care Co-ordination	Community services that involve coordination of other services to achieve the optimal outcomes for a non-admitted client. Includes contractual arrangements for the provision of interim care.	• Community Hospital Interface Program (CHIP) or similar community based co-ordination services • Interim care • Liaison services including indigenous liaison officers • Post-Acute services
Non-ABF	Child & Youth	Community services provided principally for an infant, child or a young person under 18 years of age. Whilst the service may be provided to a parent or guardian the focus is on supporting the health or development of the child or young person. Includes child protection services. Excludes: • oral health services (refer to Oral Health category) • mental health services to clients under 18yrs (see Community Mental Health - Child & Youth)	• Child development assessment, treatment and rehabilitation • Child Protection Services • Community Clinic Services • Hearing Screening (including Healthy Hearing programs) • Parenting support programs • School based health nurses
Non-ABF	Chronic Disease	Community services provided to identify and manage an illness or medical condition that lasts over a long period (e.g. more than 12 months) and sometimes causes a long-term change in the body.	• Type 2 diabetes services • pulmonary services • cardiac services • renal services
Non-ABF	Commercial Activities **(NOTE: Funding should not be provided for these functions)**	Costs associated with the operation of Commercial businesses and activities that are off-set by revenue sources **external to the HHS** Includes: - user pays activities (e.g. canteen, cafeterias, car parking etc.) - costs recovered either from outside entities or other HHSs for recovery of Salaries or consumables Excludes: HHS expenses offset by internal re-distribution practices	• Cafeterias and canteens • Commercial Carparks • Foundation costs • Recoveries of staff or clinical support (e.g. equipment hire or supplies) • Trust accounts (including those for Research)
Non-ABF	Communicable Diseases	Community based surveillance and treatment of communicable and infectious diseases, including immunisations. Excludes: sexually transmitted diseases (see Sexual Health) and Staff vaccinations (align with facility expenses)	• Includes immunisations relevant for this service • activity pertaining to general communicable or infectious disease prevention, detection and response
Non-ABF	Community Allied Health	[Allied Health services for people 18 years and older provided in the community or in a clinic setting - previously identified by provide discipline e.g. Physio, Podiatry etc.] NOTE: Tier 2 clinics for these Allied Health are aligned to Primary Health Care.	***## category no longer available (expenses to be aligned to the service area)***
Non-ABF	Community Care Program (DCCSDS funded)	Services provided under the State government Community Care Program. These services are provided **under a contractual arrangement with the Department of Communities Child Safety and Disability services.** It includes direct service delivery and purchased services from a non-government provider. (Excludes mental health services).	• Services provided primarily to persons under 65 years or 50 years and younger for people from an Aboriginal and Torres Strait Island background

Cost Category Type	Service Category	Definitions	Service examples (List not exhaustive for each service type)
Non-ABF	Community Mental Health – Adult & Older persons	Specialised mental health care provided in the community by community and hospital based community/ambulatory care services for people aged 18 years and older.	• Acute care services • Community Forensic Outreach services • Mobile Intensive Rehabilitation Treatment Teams, Older persons psychiatric teams, mobile assessment and treatment services, outreach and consultation liaison. Includes forensic and prison services. • Multidisciplinary community care services • Services provide assessment, diagnosis, treatment, rehabilitation or care of non-admitted patients including but not limited to case management, crisis assessment and treatment services.
Non-ABF	Community Mental Health – Child & Youth	Specialised mental health care provided in the community by community and hospital based community/ambulatory care services for people under the age of 18 years of age.	• Adolescent day programs • Child and Youth Forensic Outreach Services • Multidisciplinary Child and Youth Mental Health Services • Services provide assessment, diagnosis, treatment, rehabilitation or care of non-admitted inpatients, including but not confined to crisis assessment and treatment services, mobile assessment and treatment services.
Non-ABF	Community Palliative Care	Community palliative care services provided in the community or a patient's home. Includes care services purchased through non-government providers and palliative care equipment hire	• Includes terminal heart failure
Non-ABF	Community Rehabilitation	Community based rehabilitation services for children and/or adults provided in a community setting (i.e. patients home or community centre) and usually, but not always, following a hospital event. Includes: care services purchased through non-government providers and equipment hire.	• Acquired Brain Injury Rehabilitation • Cardiac Rehabilitation • General including Community Rehabilitation • Heart Failure (see Community palliative care) • Respiratory/Pulmonary Rehabilitation • Spinal Injury Rehabilitation including Spinal Outreach Program • Transitional Rehabilitation
Non-ABF	Consumer Information Services (state-wide)	Services aimed at providing clinical advice and general information to the public. Services may be delivered by Registered Nurses, Allied Health professionals and/or administration officers. The services will often be supplemented with online access options for consumers and are generally primary or preventative health orientated.	• 13HEALTH • Child Health Information Line • Queensland Poisons Information Centre • Quitline
Non-ABF	Disability Residential Care Services	Residential services targeted specifically to people under the age of 65 years typically with a physical, mental or cognitive disability.	
Non-ABF	Environmental Health	Public health initiatives to safeguard the community from potential harm or illness caused by exposure to environmental hazards or harmful practices.	• Food safety • Health risk assessment of environmental hazards • Water and waste
Non-ABF	Home and Community Care (HACC) Program	Services provided under the Commonwealth Home and Community Care Program. These services are provided under the contractual arrangement with the Commonwealth principally for people 65 years and older (50 years and older for people from an Aboriginal and Torres Strait Island background) and includes State contributions. Includes direct service delivery and purchased services from a non-government provider.	• Allied Health • Nursing • Personal Care; domestic assistance; respite

Cost Category Type	Service Category	Definitions	Service examples (List not exhaustive for each service type)
Non-ABF	**Home and Community Medical Aids & Appliances (MASS)**	Only management and administrative support expenses dedicated to delivery of the Medical Aids and Appliances services (i.e. labour and office costs related to the administration of MASS scheme) NOTE: Clinical Supplies expense will be captured by the relevant GL account code - see Non-ABF Actual $ below	• MASS co-ordinator - labour and office expenses
Non-ABF	**Home Care Packages (EACH, CACPs)**	Services provided under the Commonwealth Home Care Package program formerly known as Community Aged Care Packages and Extended Aged Care at Home Packages. Includes: community care services provided as part of an MPHS.	• persons receiving the service will be 65 years and older and 50 years and older for Aboriginal and Torres Strait Island persons
Non-ABF	IHPA Block-Funded Services	Services specifically block funded by IHPA: • Home Ventilated Services • Home Enteral Nutrition • Total Parenteral Nutrition From 2015-16, IHPA Block -funded services are considered an ABF expense	**## category no longer available**
Non-ABF	**Interstate Hospital Charges**	HHS payments to other jurisdictions (States) for services provided to Queensland residents.	
Non-ABF	**Maternal Health**	Community based pre-natal and post-natal services provided to women/parents. Excludes parenting support programs (see Child and Youth community health service type).	• includes postnatal contact/visits delivered under specific initiatives and government commitments (e.g. Mums and Bubs)
Non-ABF	**Multi-Purpose Health Service (MPHS)**	Multi-purpose Health Services (those services which attract MPHS funding)	
Non-ABF	**Offender Health Services**	Primary and community health services provided to offenders/prisoners. Excludes Prisoner Mental Health Services (funded under Community Mental Health Services - Adult)	• any community health service where the client is an offender / prisoner
Non-ABF	**Oral Health ****	Oral health services provided to eligible children and adults via community and school-based mobile and fixed public dental clinics including health promotion and disease prevention activities.	• Emergency dental services • General dental services • School dental services • Specialist dental services
Non-ABF	**Patient Transport**	Only management and administrative support expenses directly related to delivery of the patient transport services i.e. labour and other costs dedicated to coordinating this service for an HHS. NOTE: Actual patient transport costs are captured by the relevant GL account codes - see Non-ABF Actual $ below	• Patient travel co-ordinator - labour and office expenses
Non-ABF	**Preventative Health Services**	Services targeted at the broader population to improve health. Includes: services with a State-wide or Hospital and Health Service area focus. Excludes: small group or individual services and services required to be provided under a NPA or Legislation.	
Non-ABF	**Primary Health Care**	GP type services provided in the community. Includes: services to Medicare ineligible clients	• Indigenous services • Primary Care Clinics (out of scope Tier 2 clinics) • Refugee Health • Sect 19 (2) Services

Cost Category Type	Service Category	Definitions	Service examples (List not exhaustive for each service type)
Non-ABF	**Research**	Services targeted at establishing or examining a body of knowledge or practice includes education specific services. NOTE: relates to resources and consumables dedicated to a research program	
Non-ABF	**Residential Aged Care**	Costs associated with the operation of State-government operated residential aged care facilities (excludes Multi-purpose Health Services)	
Non-ABF	**Sexual Health**	Services provided in the community to provide testing, support, education and advice for sexual health including transmission of sexually transmitted diseases and management and referral for sexual assault.	• Complex STIs • Non-Stable HIV • Post Exposure Prophylaxis for HIV • Sexual Assault Services • Viral based services including HEP C treatment
Non-ABF	Specific Allocations - Funding only (*Not available for cost centre %)*	The primary purpose of this category is for the **Non-ABF portion** of funding adjustments (to reduce administrative workload to apportion across multiple NABF categories) The purpose of ABF-NABF Cost Centre alignment is to capture costs of services. Expenses related to these funding allocations e.g. EB; QGIF; etc will generally be embedded in the cost centres related to services and facilities. Where a discrete CC is used for these expenses, the CC should be apportioned to various NABF service categories. Exceptions: 'Transitioning' to a new facility where a discrete cost centre(s) is used and costs do not overlay existing services.	• Transitioning & Service Ramping *[Backlog Maintenance] - not related to ABF or NEC hospitals* *[EB & NLE funding] - non-ABF component* *[HSIA & HSQ] - non-ABF component* *[Insurance - Premiums (QGIF) and Claims] - non-ABF component*
Non-ABF	**State-Wide Functions** **(Corporately 'sponsored' functions - see specific inclusions)**	Costs associated with specifically negotiated budget for delivery of State-wide non-patient functions. i.e. costs hosted by a single HHS for delivery of support to all HHSs such as staff development (only those services listed as examples are allowable) Excludes: costs associated with provision of a state-wide clinical or consultative services to patients	• Clinical Networks - Chairs • Clinical Skills Development Centre (MNT HHS) • Cunningham Centre (DDS HHS) • ~~Organ/Tissue donor retrievals~~ (from 2016-17 this is considered ABF) • PHC Information Systems Support - FERRET (TAC HHS) • Queensland Cancer Control Analysis Team (MST HHS) • Queensland Centre for Mental Health Learning (WMT HHS) • Queensland Centre for Mental Health Research (WMT HHS) • Rural and Remote Medical Officer Credentialling and PHC Standards, previously known as Office of Rural and Remote (TAC HHS)
Non-ABF	**Transition Care**	Services provided under the Commonwealth State funded Transition Care Program for the short-term support and active management of Older People at conclusion of a hospital episode Includes: costs of direct service provision as well as any contractual arrangements.	• Services provided to older persons
Non-ABF	**Women's and Men's Health**	Community health services targeted to women or men for specific gender related health issues. Excludes: diagnostic screening	• Family Planning • Breast health, gynaecological care, female genital mutilation and gynaecological oncology in community clinics. Specific services may include early pregnancy clinic, fertility and reproductive endocrinology, uro-gynaecology sexual health and menopausal health. • Advice re vasectomy, male infertility, penile and testicular problems, sexual function and dysfunction, sexual health and the prostate.

Cost Category Type	Service Category	Definitions	Service examples (List not exhaustive for each service type)
Non-ABF (Actual $)	**Depreciation**	As recorded by the General Ledger Account codes for Depreciation	
Non-ABF (Actual $)	**Home and Community Medical Aids & Appliances (MASS)**	As recorded by the General Ledger Account codes for Medical Aids & Appliances Aids and appliances refers to equipment provided by health services to people on a temporary or permanent basis to: (a) assist with their discharge from hospital, and/or (b) prevent readmission to hospital, and/or (c) support treatment or rehabilitation in the home or community setting; and/or (d) assist with managing a permanent health condition or disability in the home environment in order to avoid hospitalisation or admission to residential aged care. Aids and appliances may be supplied ad-hoc or where the condition is permanent and stabilised. Excludes: palliative care equipment hire (refer to Palliative Care).	• Spinal Cord Injury Response • Queensland Artificial Limb Service (QALS) • Spectacle Supply Scheme • Aids and appliances include, infusion pumps and long term ongoing requirements include wheelchairs, wheeled walkers, continence products, oxygen, artificial limbs etc. • Cystic fibrosis program
Non-ABF (Actual $)	**Interstate Hospital Charges**	As recorded by the General Ledger Account codes for Interstate Patients HHS payments to other jurisdictions (States) for services provided to Queensland residents.	• Charges for Qld residents treated Interstate
Non-ABF (Actual $)	**Patient Transport**	As recorded by the General Ledger Account codes for patient travel i.e. Cost of patient accommodation and transport to services provided by a Hospital and Health Service.	• Aeromedical services including Fixed Wing • Hospital based ambulance services • Queensland Ambulance Service • Administration of Patient Transport Subsidy Scheme

Acronyms

ABF	Activity Based Funding
ACAP	Aged Care Assessment Program
ACHI	Australian Classification of Health Interventions
ACS	Australian Coding Standard
ADL	Activity of Daily Living
AIHW	Australian Institute of Health and Welfare
ALOS	Average Length of Stay
AMHCC	Australian Mental Health Care Classification
AN-SNAP	Australian National Subacute and Non Acute Patient Classification
ANZICS	Australian and New Zealand Intensive Care Society
APD	Automated peritoneal dialysis
AR-DRG	Australian Refined Diagnosis Related Groups
BiPAP	Bi-level positive airway pressure
BSQ	BreastScreen Queensland
CAPD	Continuous ambulatory peritoneal dialysis
CCC	Corporate Clinic Code
CCU	Coronary Care Unit
CE	Chief Executive
CET	Clinical education and training
CIMHA	Consumer Integrated Mental Health Application
CMHC	Community Mental Health Care
COAG	Council of Australian Governments
CPAP	Continuous positive airway pressur
CSCF	Clinical Services Capability Framework
CSO	Community Service Obligation
DNW	Did Not Wait
DOMSAC	Directors of Medical Services Advisory Committee
DQT	Data Quality Team
DRG	Diagnosis Related Group

DSS	Data Set Specification
DSS	Data Set SpecificationDecision Support System
DVA	Department of Veterans' Affairs
ED	Emergency Department
EDC	Emergency Data Collection
EDIS	Emergency Department Information System
ES	Emergency Services
FIM	Functional Improvement Measure
GP	General Practitioner
HACC	Home and Community Care
HBCIS	Hospital Based Corporate Information System
HHS	Hospital and Health Service
HITH	Hospital in the Home
HIU	Healthcare Improvement Unit
HoNOS	Health of the National Outcome Scales
HPF	Healthcare Purchasing and Funding Branch
ICD	International Classification of Diseases
ICD-10-AM	International Classification of Diseases 10th Revision Australian Modification
ICU	Intensive Care Unit
IHPA	Independent Hospital Pricing Authority
LCZ	Localisations
LOS	Length of Stay
MAC	Monthly Activity Collection
MAIC	Motor Accident Insurance Commission
MBS	Medicare Benefits Schedule
MDB	Major Diagnostic Block (used in Urgency Related Groups – URGs)
MDC	Major Diagnostic Category
METeOR	Metadata Online Registry
MOU	Memorandum of Understanding
MPHS	Multipurpose Health Services
MVA	Motor Vehicle Accident
NABF	National Activity Based Funding

NBEDS	National Best Endeavours Dataset
NDIS	National Disability Insurance Scheme
NEC	National Efficient Cost
NEP	National Efficient Price
NGO	Non-government Organisation
NHCDC	National Hospital Cost Data Collection
NHFP	National Health Funding Pool
NHRA	National Health Reform Agreement
NICU	Neonatal Intensive Care Unit
NIIS	National Injury Insurance Scheme
NMDS	National Minimum Data Set
NOCC	National Outcomes and Casemix Collection
NoF	Neck of Femur
NPHED	National Public Hospital Establishment Database
NSW	New South Wales
NWAU	National Weighted Activity Unit (applicable nationally)
OHS	Oral Health Services
OoS	Occasions of Service
OSR	Own Source Revenue
PBS	Pharmaceutical Benefits Scheme
PHB	Preventative Health Branch
PHEC	Public Hospital Establishments Collection
PI	Purchasing Initiatives
PICU	Paediatric Intensive Care Unit
QEP	Queensland Efficient Price
QHAPDC	Queensland Health Admitted Patient Data Collection
QHNAPDC	Queensland Health Non-Admitted Patient Data Collection
QIP	Quality Improvement Payment
QWAU	Queensland Weighted Activity Unit (used in Queensland Health)
REDIS	Rural Emergency Department Information System
RHCA	Reciprocal Health Care Agreement
RUG	Resource Utilisation Groups

SA	Service Agreement
SCN	Special Care Nursery
SEIFA	Socio-Economic Indexes for Areas
SNAP	Sub and Non-Acute Patient
SPP	Specific Purpose Payment
TTR	Teaching, Training and Research
UDG	Urgency Disposition Groups
UoW	University of Wollongong
URG	Urgency Related Groups
WAU	Weighted Activity Unit
WOOS	Weighted Occasions of Service

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