

Exhibit #1 – Proposed

MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
1	PRE	SURG	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W MCC	25.2117	28.5	36.1
2	PRE	SURG	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W/O MCC	15.2867	16.9	20.3
3	PRE	SURG	ECMO OR TRACH W MV >96 HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	17.7325	24.3	30.8
4	PRE	SURG	TRACH W MV >96 HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	11.2228	19.6	23.8
5	PRE	SURG	LIVER TRANSPLANT W MCC OR INTESTINAL TRANSPLANT	10.3701	15.3	20.5
6	PRE	SURG	LIVER TRANSPLANT W/O MCC	4.4655	7.8	8.5
7	PRE	SURG	LUNG TRANSPLANT	9.8276	16.1	18.8
8	PRE	SURG	SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT	5.0846	9.2	10.7
10	PRE	SURG	PANCREAS TRANSPLANT	4.3783	8.1	9.0
11	PRE	SURG	TRACHEOSTOMY FOR FACE,MOUTH & NECK DIAGNOSES W MCC	4.9109	10.9	13.6
12	PRE	SURG	TRACHEOSTOMY FOR FACE,MOUTH & NECK DIAGNOSES W CC	3.5109	8.4	9.7
13	PRE	SURG	TRACHEOSTOMY FOR FACE,MOUTH & NECK DIAGNOSES W/O CC/MCC	2.4030	6.0	6.8
14	PRE	SURG	ALLOGENEIC BONE MARROW TRANSPLANT	11.5318	23.8	27.3
16	PRE	SURG	AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC	6.2657	17.2	18.5
17	PRE	SURG	AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC	4.1772	8.5	11.6
20	01	SURG	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W MCC	10.0449	13.5	16.7
21	01	SURG	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W CC	7.5504	11.8	13.3
22	01	SURG	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W/O CC/MCC	5.8233	7.0	8.6
23	01	SURG	CRANIOTOMY W MAJOR DEVICE IMPLANT OR ACUTE CNS PDX W MCC OR CHEMOTHERAPY IMPLANT OR EPILEPSY W NEUROSTIMULATOR	5.5252	7.6	10.7

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24	01	SURG	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W/O MCC	3.8539	4.2	5.5
25	01	SURG	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES W MCC	4.3085	7.0	9.1
26	01	SURG	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES W CC	3.0000	4.2	5.6
27	01	SURG	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES W/O CC/MCC	2.3655	2.2	2.9
28	01	SURG	SPINAL PROCEDURES W MCC	5.5357	9.1	11.7
29	01	SURG	SPINAL PROCEDURES W CC OR SPINAL NEUROSTIMULATORS	3.2706	4.2	5.8
30	01	SURG	SPINAL PROCEDURES W/O CC/MCC	2.1233	2.2	2.8
31	01	SURG	VENTRICULAR SHUNT PROCEDURES W MCC	4.1179	7.0	10.1
32	01	SURG	VENTRICULAR SHUNT PROCEDURES W CC	2.1277	3.2	4.6
33	01	SURG	VENTRICULAR SHUNT PROCEDURES W/O CC/MCC	1.6956	1.9	2.4
34	01	SURG	CAROTID ARTERY STENT PROCEDURE W MCC	4.0289	5.1	7.6
35	01	SURG	CAROTID ARTERY STENT PROCEDURE W CC	2.2355	2.1	3.1
36	01	SURG	CAROTID ARTERY STENT PROCEDURE W/O CC/MCC	1.7633	1.3	1.5
37	01	SURG	EXTRACRANIAL PROCEDURES W MCC	3.1639	5.1	7.4
38	01	SURG	EXTRACRANIAL PROCEDURES W CC	1.5647	2.2	3.1
39	01	SURG	EXTRACRANIAL PROCEDURES W/O CC/MCC	1.1117	1.3	1.5
40	01	SURG	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W MCC	3.6812	7.4	10.2
41	01	SURG	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W CC OR PERIPH NEUROSTIM	2.3414	4.3	5.4
42	01	SURG	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W/O CC/MCC	1.9535	2.6	3.2
52	01	MED	SPINAL DISORDERS & INJURIES W CC/MCC	1.5386	4.1	5.5
53	01	MED	SPINAL DISORDERS & INJURIES W/O CC/MCC	0.9514	2.7	3.3
54	01	MED	NERVOUS SYSTEM NEOPLASMS W MCC	1.3288	3.9	5.3
55	01	MED	NERVOUS SYSTEM NEOPLASMS W/O MCC	1.0026	2.9	4.0
56	01	MED	DEGENERATIVE NERVOUS SYSTEM DISORDERS W MCC	1.9249	5.4	7.7
57	01	MED	DEGENERATIVE NERVOUS SYSTEM DISORDERS W/O MCC	1.1329	3.8	5.4

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58	01	MED	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W MCC	1.6924	5.1	6.7
59	01	MED	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W CC	1.0719	3.7	4.6
60	01	MED	MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA W/O CC/MCC	0.8434	3.1	3.6
61	01	MED	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA W THROMBOLYTIC AGENT W MCC	2.8410	5.0	6.5
62	01	MED	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA W THROMBOLYTIC AGENT W CC	1.9528	3.5	4.1
63	01	MED	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA W THROMBOLYTIC AGENT W/O CC/MCC	1.6402	2.6	2.9
64	01	MED	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W MCC	1.7938	4.5	6.1
65	01	MED	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W CC OR TPA IN 24 HRS	1.0330	3.1	3.8
66	01	MED	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION W/O CC/MCC	0.7448	2.2	2.6
67	01	MED	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT W MCC	1.4214	3.5	4.8
68	01	MED	NONSPECIFIC CVA & PRECEREBRAL OCCLUSION W/O INFARCT W/O MCC	0.8938	2.2	2.8
69	01	MED	TRANSIENT ISCHEMIA W/O THROMBOLYTIC	0.7500	2.1	2.5
70	01	MED	NONSPECIFIC CEREBROVASCULAR DISORDERS W MCC	1.6531	4.6	6.4
71	01	MED	NONSPECIFIC CEREBROVASCULAR DISORDERS W CC	0.9871	3.4	4.4
72	01	MED	NONSPECIFIC CEREBROVASCULAR DISORDERS W/O CC/MCC	0.7572	2.4	3.0
73	01	MED	CRANIAL & PERIPHERAL NERVE DISORDERS W MCC	1.4138	3.9	5.3
74	01	MED	CRANIAL & PERIPHERAL NERVE DISORDERS W/O MCC	0.9543	2.9	3.7
75	01	MED	VIRAL MENINGITIS W CC/MCC	1.6583	5.1	6.4
76	01	MED	VIRAL MENINGITIS W/O CC/MCC	0.9584	3.1	3.7

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77	01	MED	HYPERTENSIVE ENCEPHALOPATHY W MCC	1.5683	4.3	5.5
78	01	MED	HYPERTENSIVE ENCEPHALOPATHY W CC	0.9940	3.2	3.9
79	01	MED	HYPERTENSIVE ENCEPHALOPATHY W/O CC/MCC	0.7663	2.3	2.7
80	01	MED	NONTRAUMATIC STUPOR & COMA W MCC	1.7311	4.5	6.5
81	01	MED	NONTRAUMATIC STUPOR & COMA W/O MCC	0.7512	2.5	3.3
82	01	MED	TRAUMATIC STUPOR & COMA, COMA >1 HR W MCC	2.1988	3.8	6.4
83	01	MED	TRAUMATIC STUPOR & COMA, COMA >1 HR W CC	1.2621	3.3	4.2
84	01	MED	TRAUMATIC STUPOR & COMA, COMA >1 HR W/O CC/MCC	0.8991	2.2	2.7
85	01	MED	TRAUMATIC STUPOR & COMA, COMA <1 HR W MCC	2.0884	4.8	6.6
86	01	MED	TRAUMATIC STUPOR & COMA, COMA <1 HR W CC	1.1938	3.2	4.1
87	01	MED	TRAUMATIC STUPOR & COMA, COMA <1 HR W/O CC/MCC	0.8323	2.2	2.7
88	01	MED	CONCUSSION W MCC	1.4218	3.6	4.6
89	01	MED	CONCUSSION W CC	1.0048	2.7	3.3
90	01	MED	CONCUSSION W/O CC/MCC	0.7805	2.0	2.3
91	01	MED	OTHER DISORDERS OF NERVOUS SYSTEM W MCC	1.5437	4.1	5.6
92	01	MED	OTHER DISORDERS OF NERVOUS SYSTEM W CC	0.9368	3.1	3.9
93	01	MED	OTHER DISORDERS OF NERVOUS SYSTEM W/O CC/MCC	0.7263	2.2	2.7
94	01	MED	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W MCC	3.4364	7.8	10.2
95	01	MED	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W CC	2.3653	5.8	7.0
96	01	MED	BACTERIAL & TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM W/O CC/MCC	2.2456	4.7	5.6
97	01	MED	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W MCC	3.4224	8.5	11.4
98	01	MED	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W CC	1.8771	5.5	7.3
99	01	MED	NON-BACTERIAL INFECT OF NERVOUS SYS EXC VIRAL MENINGITIS W/O CC/MCC	1.2062	3.6	4.6
100	01	MED	SEIZURES W MCC	1.6628	4.2	5.7

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101	01	MED	SEIZURES W/O MCC	0.8310	2.6	3.3
102	01	MED	HEADACHES W MCC	1.0636	3.0	4.1
103	01	MED	HEADACHES W/O MCC	0.7475	2.3	2.9
113	02	SURG	ORBITAL PROCEDURES W CC/MCC	2.1895	4.2	5.9
114	02	SURG	ORBITAL PROCEDURES W/O CC/MCC	1.2730	2.3	3.0
115	02	SURG	EXTRAOCULAR PROCEDURES EXCEPT ORBIT	1.4918	3.9	4.9
116	02	SURG	INTRAOCULAR PROCEDURES W CC/MCC	1.4965	3.3	4.7
117	02	SURG	INTRAOCULAR PROCEDURES W/O CC/MCC	0.9835	2.1	2.8
121	02	MED	ACUTE MAJOR EYE INFECTIONS W CC/MCC	0.9943	3.8	4.8
122	02	MED	ACUTE MAJOR EYE INFECTIONS W/O CC/MCC	0.7624	3.2	4.1
123	02	MED	NEUROLOGICAL EYE DISORDERS	0.7464	2.1	2.6
124	02	MED	OTHER DISORDERS OF THE EYE W MCC	1.2611	3.6	4.9
125	02	MED	OTHER DISORDERS OF THE EYE W/O MCC	0.7714	2.6	3.3
129	03	SURG	MAJOR HEAD & NECK PROCEDURES W CC/MCC OR MAJOR DEVICE	2.2841	3.7	5.2
130	03	SURG	MAJOR HEAD & NECK PROCEDURES W/O CC/MCC	1.4257	2.3	2.9
131	03	SURG	CRANIAL/FACIAL PROCEDURES W CC/MCC	2.5424	4.4	6.1
132	03	SURG	CRANIAL/FACIAL PROCEDURES W/O CC/MCC	1.5333	2.2	2.8
133	03	SURG	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES W CC/MCC	1.9803	3.8	5.4
134	03	SURG	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES W/O CC/MCC	1.1548	2.0	2.5
135	03	SURG	SINUS & MASTOID PROCEDURES W CC/MCC	2.2733	4.4	6.3
136	03	SURG	SINUS & MASTOID PROCEDURES W/O CC/MCC	1.3199	2.0	2.7
137	03	SURG	MOUTH PROCEDURES W CC/MCC	1.3491	3.5	4.6
138	03	SURG	MOUTH PROCEDURES W/O CC/MCC	0.8512	1.9	2.4
139	03	SURG	SALIVARY GLAND PROCEDURES	1.1117	1.9	2.7
146	03	MED	EAR, NOSE, MOUTH & THROAT MALIGNANCY W MCC	1.9321	5.4	7.8
147	03	MED	EAR, NOSE, MOUTH & THROAT MALIGNANCY W CC	1.2413	3.6	5.0
148	03	MED	EAR, NOSE, MOUTH & THROAT MALIGNANCY W/O CC/MCC	0.8064	2.1	2.9
149	03	MED	DYSEQUILIBRIUM	0.7007	2.1	2.5
150	03	MED	EPISTAXIS W MCC	1.3374	3.5	4.8
151	03	MED	EPISTAXIS W/O MCC	0.7339	2.3	2.8
152	03	MED	OTITIS MEDIA & URI W MCC	1.0519	3.2	4.1

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153	03	MED	OTITIS MEDIA & URI W/O MCC	0.7136	2.4	2.9
154	03	MED	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES W MCC	1.4583	4.1	5.5
155	03	MED	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES W CC	0.8990	3.0	3.8
156	03	MED	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES W/O CC/MCC	0.6645	2.2	2.7
157	03	MED	DENTAL & ORAL DISEASES W MCC	1.5609	4.4	5.8
158	03	MED	DENTAL & ORAL DISEASES W CC	0.8864	3.0	3.7
159	03	MED	DENTAL & ORAL DISEASES W/O CC/MCC	0.6709	2.2	2.6
163	04	SURG	MAJOR CHEST PROCEDURES W MCC	5.1039	10.2	12.7
164	04	SURG	MAJOR CHEST PROCEDURES W CC	2.6096	5.1	6.1
165	04	SURG	MAJOR CHEST PROCEDURES W/O CC/MCC	1.8581	3.1	3.7
166	04	SURG	OTHER RESP SYSTEM O.R. PROCEDURES W MCC	3.5128	8.2	10.5
167	04	SURG	OTHER RESP SYSTEM O.R. PROCEDURES W CC	1.8016	4.4	5.7
168	04	SURG	OTHER RESP SYSTEM O.R. PROCEDURES W/O CC/MCC	1.2768	2.4	3.1
175	04	MED	PULMONARY EMBOLISM W MCC	1.6094	4.6	5.7
176	04	MED	PULMONARY EMBOLISM W/O MCC	0.9555	3.0	3.7
177	04	MED	RESPIRATORY INFECTIONS & INFLAMMATIONS W MCC	1.8643	5.7	7.1
178	04	MED	RESPIRATORY INFECTIONS & INFLAMMATIONS W CC	1.3004	4.5	5.4
179	04	MED	RESPIRATORY INFECTIONS & INFLAMMATIONS W/O CC/MCC	0.9302	3.4	4.1
180	04	MED	RESPIRATORY NEOPLASMS W MCC	1.7074	5.0	6.5
181	04	MED	RESPIRATORY NEOPLASMS W CC	1.1585	3.5	4.6
182	04	MED	RESPIRATORY NEOPLASMS W/O CC/MCC	0.8413	2.4	3.1
183	04	MED	MAJOR CHEST TRAUMA W MCC	1.4845	4.5	5.6
184	04	MED	MAJOR CHEST TRAUMA W CC	1.0135	3.3	3.9
185	04	MED	MAJOR CHEST TRAUMA W/O CC/MCC	0.7579	2.5	2.9
186	04	MED	PLEURAL EFFUSION W MCC	1.5313	4.5	5.8
187	04	MED	PLEURAL EFFUSION W CC	1.0572	3.3	4.2
188	04	MED	PLEURAL EFFUSION W/O CC/MCC	0.7996	2.5	3.2
189	04	MED	PULMONARY EDEMA & RESPIRATORY FAILURE	1.2265	3.7	4.8
190	04	MED	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	1.1573	3.8	4.7

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191	04	MED	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W CC	0.9185	3.1	3.8
192	04	MED	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W/O CC/MCC	0.7253	2.6	3.0
193	04	MED	SIMPLE PNEUMONIA & PLEURISY W MCC	1.3795	4.5	5.5
194	04	MED	SIMPLE PNEUMONIA & PLEURISY W CC	0.9344	3.4	4.1
195	04	MED	SIMPLE PNEUMONIA & PLEURISY W/O CC/MCC	0.7089	2.7	3.2
196	04	MED	INTERSTITIAL LUNG DISEASE W MCC	1.6058	5.0	6.3
197	04	MED	INTERSTITIAL LUNG DISEASE W CC	1.0471	3.4	4.2
198	04	MED	INTERSTITIAL LUNG DISEASE W/O CC/MCC	0.7833	2.6	3.1
199	04	MED	PNEUMOTHORAX W MCC	1.8155	5.4	7.0
200	04	MED	PNEUMOTHORAX W CC	1.0613	3.4	4.3
201	04	MED	PNEUMOTHORAX W/O CC/MCC	0.7606	2.5	3.1
202	04	MED	BRONCHITIS & ASTHMA W CC/MCC	0.9280	3.1	3.8
203	04	MED	BRONCHITIS & ASTHMA W/O CC/MCC	0.7039	2.4	2.9
204	04	MED	RESPIRATORY SIGNS & SYMPTOMS	0.7692	2.2	2.8
205	04	MED	OTHER RESPIRATORY SYSTEM DIAGNOSES W MCC	1.5085	4.0	5.4
206	04	MED	OTHER RESPIRATORY SYSTEM DIAGNOSES W/O MCC	0.8511	2.5	3.1
207	04	MED	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT >96 HOURS	5.5696	12.2	14.1
208	04	MED	RESPIRATORY SYSTEM DIAGNOSIS W VENTILATOR SUPPORT <=96 HOURS	2.3991	5.0	6.8
215	05	SURG	OTHER HEART ASSIST SYSTEM IMPLANT	10.4983	7.3	11.7
216	05	SURG	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W MCC	9.5284	11.1	14.3
217	05	SURG	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W CC	6.2989	7.4	8.9
218	05	SURG	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W/O CC/MCC	5.7015	4.7	5.9
219	05	SURG	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W MCC	7.6245	9.2	11.2
220	05	SURG	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W CC	5.1476	6.2	6.8
221	05	SURG	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W/O CC/MCC	4.5800	4.5	5.0

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222	05	SURG	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK W MCC	8.4910	10.1	12.1
223	05	SURG	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK W/O MCC	6.4303	5.6	6.8
224	05	SURG	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK W MCC	7.3191	7.4	9.1
225	05	SURG	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK W/O MCC	5.6638	4.1	4.8
226	05	SURG	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH W MCC	6.8160	6.5	8.5
227	05	SURG	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH W/O MCC	5.4019	3.3	4.4
228	05	SURG	OTHER CARDIOTHORACIC PROCEDURES W MCC	6.8436	7.0	10.0
229	05	SURG	OTHER CARDIOTHORACIC PROCEDURES W/O MCC	4.7204	3.7	4.9
231	05	SURG	CORONARY BYPASS W PTCA W MCC	8.1445	10.2	12.0
232	05	SURG	CORONARY BYPASS W PTCA W/O MCC	5.8621	7.6	8.4
233	05	SURG	CORONARY BYPASS W CARDIAC CATH W MCC	7.3640	11.5	12.9
234	05	SURG	CORONARY BYPASS W CARDIAC CATH W/O MCC	5.0756	8.1	8.7
235	05	SURG	CORONARY BYPASS W/O CARDIAC CATH W MCC	5.7970	8.8	10.1
236	05	SURG	CORONARY BYPASS W/O CARDIAC CATH W/O MCC	3.8931	6.0	6.5
239	05	SURG	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W MCC	4.6375	10.2	13.0
240	05	SURG	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W CC	2.6675	6.9	8.4
241	05	SURG	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W/O CC/MCC	1.4778	4.3	5.1
242	05	SURG	PERMANENT CARDIAC PACEMAKER IMPLANT W MCC	3.7192	5.5	7.0
243	05	SURG	PERMANENT CARDIAC PACEMAKER IMPLANT W CC	2.6090	3.4	4.2
244	05	SURG	PERMANENT CARDIAC PACEMAKER IMPLANT W/O CC/MCC	2.1384	2.4	2.8
245	05	SURG	AICD GENERATOR PROCEDURES	5.4414	4.5	6.4
246	05	SURG	PERCUTANEOUS CARDIOVASCULAR PROCEDURES W DRUG-ELUTING STENT W MCC OR 4+ ARTERIES OR STENTS	3.2238	4.2	5.5

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
247	05	SURG	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W/O MCC	2.1227	2.2	2.6
248	05	SURG	PERCUTANEOUS CARDIOVASCULAR PROCEDURES W NON-DRUG-ELUTING STENT W MCC OR 4+ ARTERIES OR STENTS	3.0604	4.7	6.3
249	05	SURG	PERC CARDIOVASC PROC W NON-DRUG-ELUTING STENT W/O MCC	1.9638	2.5	3.0
250	05	SURG	PERC CARDIOVASC PROC W/O CORONARY ARTERY STENT W MCC	2.5208	4.0	5.3
251	05	SURG	PERC CARDIOVASC PROC W/O CORONARY ARTERY STENT W/O MCC	1.6707	2.3	2.7
252	05	SURG	OTHER VASCULAR PROCEDURES W MCC	3.2670	5.3	7.6
253	05	SURG	OTHER VASCULAR PROCEDURES W CC	2.6030	4.1	5.5
254	05	SURG	OTHER VASCULAR PROCEDURES W/O CC/MCC	1.8423	2.3	2.8
255	05	SURG	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W MCC	2.5101	6.6	8.3
256	05	SURG	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W CC	1.7431	5.3	6.3
257	05	SURG	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W/O CC/MCC	1.1254	3.4	4.1
258	05	SURG	CARDIAC PACEMAKER DEVICE REPLACEMENT W MCC	3.1313	4.9	6.5
259	05	SURG	CARDIAC PACEMAKER DEVICE REPLACEMENT W/O MCC	2.0909	2.8	3.5
260	05	SURG	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W MCC	3.6283	7.0	9.4
261	05	SURG	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W CC	1.9520	3.3	4.2
262	05	SURG	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W/O CC/MCC	1.6461	2.4	2.8
263	05	SURG	VEIN LIGATION & STRIPPING	2.3563	4.4	6.2
264	05	SURG	OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	3.2339	6.7	9.3
265	05	SURG	AICD LEAD PROCEDURES	3.3528	3.7	5.0
266	05	SURG	ENDOVASCULAR CARDIAC VALVE REPLACEMENT W MCC	7.7457	5.0	7.2
267	05	SURG	ENDOVASCULAR CARDIAC VALVE REPLACEMENT W/O MCC	6.1025	2.9	3.5

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
268	05	SURG	AORTIC AND HEART ASSIST PROCEDURES EXCEPT PULSATION BALLOON W MCC	6.5274	6.6	9.6
269	05	SURG	AORTIC AND HEART ASSIST PROCEDURES EXCEPT PULSATION BALLOON W/O MCC	4.1569	1.8	2.5
270	05	SURG	OTHER MAJOR CARDIOVASCULAR PROCEDURES W MCC	4.9547	6.5	9.4
271	05	SURG	OTHER MAJOR CARDIOVASCULAR PROCEDURES W CC	3.3885	4.4	5.8
272	05	SURG	OTHER MAJOR CARDIOVASCULAR PROCEDURES W/O CC/MCC	2.4581	2.2	2.8
273	05	SURG	PERCUTANEOUS INTRACARDIAC PROCEDURES W MCC	3.5838	5.7	7.7
274	05	SURG	PERCUTANEOUS INTRACARDIAC PROCEDURES W/O MCC	2.7696	2.3	3.0
280	05	MED	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE W MCC	1.6683	4.3	5.5
281	05	MED	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE W CC	0.9898	2.7	3.4
282	05	MED	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE W/O CC/MCC	0.7600	1.9	2.3
283	05	MED	ACUTE MYOCARDIAL INFARCTION, EXPIRED W MCC	1.7719	3.0	4.8
284	05	MED	ACUTE MYOCARDIAL INFARCTION, EXPIRED W CC	0.7919	1.7	2.4
285	05	MED	ACUTE MYOCARDIAL INFARCTION, EXPIRED W/O CC/MCC	0.5558	1.3	1.4
286	05	MED	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W MCC	2.2405	5.3	7.1
287	05	MED	CIRCULATORY DISORDERS EXCEPT AMI, W CARD CATH W/O MCC	1.1775	2.5	3.3
288	05	MED	ACUTE & SUBACUTE ENDOCARDITIS W MCC	2.7255	7.3	9.6
289	05	MED	ACUTE & SUBACUTE ENDOCARDITIS W CC	1.7053	5.4	6.8
290	05	MED	ACUTE & SUBACUTE ENDOCARDITIS W/O CC/MCC	1.0907	3.9	4.6
291	05	MED	HEART FAILURE & SHOCK W MCC	1.4825	4.5	5.7
292	05	MED	HEART FAILURE & SHOCK W CC	0.9610	3.5	4.2
293	05	MED	HEART FAILURE & SHOCK W/O CC/MCC	0.6732	2.5	3.0
294	05	MED	DEEP VEIN THROMBOPHLEBITIS W CC/MCC	1.0948	3.6	4.6

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
295	05	MED	DEEP VEIN THROMBOPHLEBITIS W/O CC/MCC	0.8015	2.9	3.5
296	05	MED	CARDIAC ARREST, UNEXPLAINED W MCC	1.4952	2.0	3.1
297	05	MED	CARDIAC ARREST, UNEXPLAINED W CC	0.6576	1.3	1.6
298	05	MED	CARDIAC ARREST, UNEXPLAINED W/O CC/MCC	0.4844	1.1	1.2
299	05	MED	PERIPHERAL VASCULAR DISORDERS W MCC	1.4860	4.1	5.4
300	05	MED	PERIPHERAL VASCULAR DISORDERS W CC	1.0585	3.4	4.2
301	05	MED	PERIPHERAL VASCULAR DISORDERS W/O CC/MCC	0.7519	2.4	3.0
302	05	MED	ATHEROSCLEROSIS W MCC	1.0792	2.8	3.9
303	05	MED	ATHEROSCLEROSIS W/O MCC	0.6629	1.9	2.3
304	05	MED	HYPERTENSION W MCC	1.0522	3.1	4.1
305	05	MED	HYPERTENSION W/O MCC	0.6914	2.1	2.6
306	05	MED	CARDIAC CONGENITAL & VALVULAR DISORDERS W MCC	1.3704	3.8	5.1
307	05	MED	CARDIAC CONGENITAL & VALVULAR DISORDERS W/O MCC	0.8275	2.5	3.1
308	05	MED	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W MCC	1.1968	3.6	4.6
309	05	MED	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W CC	0.7751	2.5	3.1
310	05	MED	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS W/O CC/MCC	0.5631	1.9	2.3
311	05	MED	ANGINA PECTORIS	0.6808	1.9	2.4
312	05	MED	SYNCOPE & COLLAPSE	0.7950	2.4	3.0
313	05	MED	CHEST PAIN	0.6993	1.8	2.2
314	05	MED	OTHER CIRCULATORY SYSTEM DIAGNOSES W MCC	1.9690	4.8	6.5
315	05	MED	OTHER CIRCULATORY SYSTEM DIAGNOSES W CC	0.9706	2.9	3.7
316	05	MED	OTHER CIRCULATORY SYSTEM DIAGNOSES W/O CC/MCC	0.7400	2.0	2.5
326	06	SURG	STOMACH, ESOPHAGEAL & DUODENAL PROC W MCC	4.5588	8.8	12.0
327	06	SURG	STOMACH, ESOPHAGEAL & DUODENAL PROC W CC	2.1177	4.6	6.0
328	06	SURG	STOMACH, ESOPHAGEAL & DUODENAL PROC W/O CC/MCC	1.5028	2.4	3.0
329	06	SURG	MAJOR SMALL & LARGE BOWEL PROCEDURES W MCC	4.9255	10.8	13.5

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
330	06	SURG	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC	2.4685	6.3	7.5
331	06	SURG	MAJOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	1.6745	3.8	4.3
332	06	SURG	RECTAL RESECTION W MCC	3.6476	7.7	9.6
333	06	SURG	RECTAL RESECTION W CC	1.9645	4.4	5.5
334	06	SURG	RECTAL RESECTION W/O CC/MCC	1.2915	2.5	3.1
335	06	SURG	PERITONEAL ADHESIOLYSIS W MCC	4.1069	10.3	12.5
336	06	SURG	PERITONEAL ADHESIOLYSIS W CC	2.3396	6.5	7.9
337	06	SURG	PERITONEAL ADHESIOLYSIS W/O CC/MCC	1.6132	4.0	5.0
338	06	SURG	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W MCC	2.7662	6.5	8.2
339	06	SURG	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W CC	1.7038	4.3	5.3
340	06	SURG	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W/O CC/MCC	1.1980	2.5	3.0
341	06	SURG	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W MCC	2.5000	4.6	6.5
342	06	SURG	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W CC	1.4868	2.8	3.7
343	06	SURG	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W/O CC/MCC	1.0514	1.7	2.0
344	06	SURG	MINOR SMALL & LARGE BOWEL PROCEDURES W MCC	2.7467	7.2	9.6
345	06	SURG	MINOR SMALL & LARGE BOWEL PROCEDURES W CC	1.5537	4.5	5.6
346	06	SURG	MINOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	1.0984	3.2	3.7
347	06	SURG	ANAL & STOMAL PROCEDURES W MCC	2.6309	6.3	8.4
348	06	SURG	ANAL & STOMAL PROCEDURES W CC	1.4093	3.7	4.8
349	06	SURG	ANAL & STOMAL PROCEDURES W/O CC/MCC	1.0083	2.5	3.0
350	06	SURG	INGUINAL & FEMORAL HERNIA PROCEDURES W MCC	2.4607	5.2	7.1
351	06	SURG	INGUINAL & FEMORAL HERNIA PROCEDURES W CC	1.4796	3.4	4.3
352	06	SURG	INGUINAL & FEMORAL HERNIA PROCEDURES W/O CC/MCC	1.0312	2.1	2.5

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MS-DRG Table

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
353	06	SURG	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL W MCC	3.0125	6.2	8.1
354	06	SURG	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL W CC	1.7186	3.9	4.8
355	06	SURG	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL W/O CC/MCC	1.3153	2.6	3.1
356	06	SURG	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W MCC	3.8751	7.8	10.5
357	06	SURG	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W CC	2.1295	4.8	6.2
358	06	SURG	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC	1.4039	2.9	3.7
368	06	MED	MAJOR ESOPHAGEAL DISORDERS W MCC	1.8657	4.6	6.1
369	06	MED	MAJOR ESOPHAGEAL DISORDERS W CC	1.0906	3.3	3.9
370	06	MED	MAJOR ESOPHAGEAL DISORDERS W/O CC/MCC	0.7481	2.4	2.9
371	06	MED	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W MCC	1.7350	5.5	7.1
372	06	MED	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W CC	1.0600	4.1	5.0
373	06	MED	MAJOR GASTROINTESTINAL DISORDERS & PERITONEAL INFECTIONS W/O CC/MCC	0.7611	3.2	3.8
374	06	MED	DIGESTIVE MALIGNANCY W MCC	2.0302	5.7	7.7
375	06	MED	DIGESTIVE MALIGNANCY W CC	1.2356	3.9	5.0
376	06	MED	DIGESTIVE MALIGNANCY W/O CC/MCC	0.9399	2.6	3.2
377	06	MED	G.I. HEMORRHAGE W MCC	1.7359	4.5	5.8
378	06	MED	G.I. HEMORRHAGE W CC	0.9744	3.1	3.6
379	06	MED	G.I. HEMORRHAGE W/O CC/MCC	0.6432	2.2	2.5
380	06	MED	COMPLICATED PEPTIC ULCER W MCC	1.9186	5.2	6.7
381	06	MED	COMPLICATED PEPTIC ULCER W CC	1.0813	3.4	4.1
382	06	MED	COMPLICATED PEPTIC ULCER W/O CC/MCC	0.8018	2.5	3.0
383	06	MED	UNCOMPLICATED PEPTIC ULCER W MCC	1.3666	3.9	5.1
384	06	MED	UNCOMPLICATED PEPTIC ULCER W/O MCC	0.8742	2.7	3.3
385	06	MED	INFLAMMATORY BOWEL DISEASE W MCC	1.6662	5.4	7.2
386	06	MED	INFLAMMATORY BOWEL DISEASE W CC	0.9665	3.6	4.4
387	06	MED	INFLAMMATORY BOWEL DISEASE W/O CC/MCC	0.7368	2.8	3.4
388	06	MED	G.I. OBSTRUCTION W MCC	1.5344	4.9	6.5
389	06	MED	G.I. OBSTRUCTION W CC	0.8529	3.4	4.1

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
390	06	MED	G.I. OBSTRUCTION W/O CC/MCC	0.5949	2.6	3.0
391	06	MED	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W MCC	1.2402	3.8	5.1
392	06	MED	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	0.7576	2.7	3.3
393	06	MED	OTHER DIGESTIVE SYSTEM DIAGNOSES W MCC	1.6582	4.6	6.3
394	06	MED	OTHER DIGESTIVE SYSTEM DIAGNOSES W CC	0.9457	3.2	4.1
395	06	MED	OTHER DIGESTIVE SYSTEM DIAGNOSES W/O CC/MCC	0.6722	2.4	2.9
405	07	SURG	PANCREAS, LIVER & SHUNT PROCEDURES W MCC	5.2915	9.9	13.1
406	07	SURG	PANCREAS, LIVER & SHUNT PROCEDURES W CC	2.7915	5.7	7.1
407	07	SURG	PANCREAS, LIVER & SHUNT PROCEDURES W/O CC/MCC	2.0128	4.1	4.8
408	07	SURG	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W MCC	3.9489	9.2	11.8
409	07	SURG	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W CC	2.3237	6.0	7.2
410	07	SURG	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W/O CC/MCC	1.7216	4.2	4.8
411	07	SURG	CHOLECYSTECTOMY W C.D.E. W MCC	3.3045	7.8	9.5
412	07	SURG	CHOLECYSTECTOMY W C.D.E. W CC	2.3762	5.5	6.6
413	07	SURG	CHOLECYSTECTOMY W C.D.E. W/O CC/MCC	1.6823	3.6	4.4
414	07	SURG	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W MCC	3.5467	8.1	9.9
415	07	SURG	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W CC	2.0132	5.3	6.2
416	07	SURG	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W/O CC/MCC	1.4004	3.4	3.9
417	07	SURG	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W MCC	2.3894	5.4	6.7
418	07	SURG	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W CC	1.6627	3.8	4.5
419	07	SURG	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W/O CC/MCC	1.3004	2.5	3.0
420	07	SURG	HEPATOBILIARY DIAGNOSTIC PROCEDURES W MCC	4.1005	8.1	11.6
421	07	SURG	HEPATOBILIARY DIAGNOSTIC PROCEDURES W CC	1.8803	4.3	5.6

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
422	07	SURG	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W/O CC/MCC	1.5541	3.1	3.8
423	07	SURG	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W MCC	3.6347	8.1	11.2
424	07	SURG	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W CC	2.2078	5.8	7.5
425	07	SURG	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W/O CC/MCC	1.6155	3.6	4.3
432	07	MED	CIRRHOSIS & ALCOHOLIC HEPATITIS W MCC	1.8127	4.8	6.5
433	07	MED	CIRRHOSIS & ALCOHOLIC HEPATITIS W CC	1.0222	3.4	4.3
434	07	MED	CIRRHOSIS & ALCOHOLIC HEPATITIS W/O CC/MCC	0.6240	2.3	2.7
435	07	MED	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS W MCC	1.6814	4.9	6.4
436	07	MED	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS W CC	1.1327	3.6	4.7
437	07	MED	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS W/O CC/MCC	0.9071	2.6	3.3
438	07	MED	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W MCC	1.6705	4.8	6.6
439	07	MED	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W CC	0.8730	3.3	4.1
440	07	MED	DISORDERS OF PANCREAS EXCEPT MALIGNANCY W/O CC/MCC	0.6365	2.5	3.0
441	07	MED	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W MCC	1.8237	4.8	6.6
442	07	MED	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W CC	0.9392	3.3	4.1
443	07	MED	DISORDERS OF LIVER EXCEPT MALIG,CIRR,ALC HEPA W/O CC/MCC	0.6772	2.5	3.0
444	07	MED	DISORDERS OF THE BILIARY TRACT W MCC	1.6063	4.4	5.8
445	07	MED	DISORDERS OF THE BILIARY TRACT W CC	1.0561	3.2	3.9
446	07	MED	DISORDERS OF THE BILIARY TRACT W/O CC/MCC	0.7882	2.3	2.8
453	08	SURG	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W MCC	9.7066	7.6	9.8
454	08	SURG	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W CC	6.4297	4.1	4.8

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
455	08	SURG	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W/O CC/MCC	5.0622	2.7	3.1
456	08	SURG	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFEC OR EXT FUS W MCC	9.1643	9.6	11.7
457	08	SURG	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFEC OR EXT FUS W CC	6.7933	5.4	6.4
458	08	SURG	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFEC OR EXT FUS W/O CC/MCC	5.3542	3.2	3.7
459	08	SURG	SPINAL FUSION EXCEPT CERVICAL W MCC	6.0301	5.8	7.4
460	08	SURG	SPINAL FUSION EXCEPT CERVICAL W/O MCC	4.0032	2.9	3.4
461	08	SURG	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W MCC	4.9088	6.1	7.8
462	08	SURG	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W/O MCC	3.2606	3.0	3.2
463	08	SURG	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W MCC	5.0018	9.8	13.0
464	08	SURG	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W CC	2.8295	5.5	6.9
465	08	SURG	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W/O CC/MCC	1.8727	3.0	3.7
466	08	SURG	REVISION OF HIP OR KNEE REPLACEMENT W MCC	5.0324	6.7	8.3
467	08	SURG	REVISION OF HIP OR KNEE REPLACEMENT W CC	3.4652	3.5	4.2
468	08	SURG	REVISION OF HIP OR KNEE REPLACEMENT W/O CC/MCC	2.8066	2.4	2.7
469	08	SURG	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W MCC OR TOTAL ANKLE REPLACEMENT	3.1954	5.1	6.3
470	08	SURG	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	2.0473	2.4	2.7
471	08	SURG	CERVICAL SPINAL FUSION W MCC	4.9042	6.3	8.6
472	08	SURG	CERVICAL SPINAL FUSION W CC	2.8444	2.2	3.1
473	08	SURG	CERVICAL SPINAL FUSION W/O CC/MCC	2.2840	1.4	1.7
474	08	SURG	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W MCC	3.8607	9.0	11.5
475	08	SURG	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W CC	2.1480	5.8	7.2

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
476	08	SURG	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W/O CC/MCC	1.1647	3.1	3.9
477	08	SURG	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC	3.2310	8.2	10.6
478	08	SURG	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC	2.2343	5.4	6.6
479	08	SURG	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC	1.7653	3.4	4.2
480	08	SURG	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT W MCC	3.0129	6.5	7.6
481	08	SURG	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT W CC	2.0417	4.5	4.9
482	08	SURG	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT W/O CC/MCC	1.6622	3.6	3.8
483	08	SURG	MAJOR JOINT/LIMB REATTACHMENT PROCEDURE OF UPPER EXTREMITIES	2.4185	1.7	2.0
485	08	SURG	KNEE PROCEDURES W PDX OF INFECTION W MCC	3.2509	8.2	9.9
486	08	SURG	KNEE PROCEDURES W PDX OF INFECTION W CC	2.2116	5.3	6.2
487	08	SURG	KNEE PROCEDURES W PDX OF INFECTION W/O CC/MCC	1.6517	3.9	4.3
488	08	SURG	KNEE PROCEDURES W/O PDX OF INFECTION W CC/MCC	1.9888	3.8	5.0
489	08	SURG	KNEE PROCEDURES W/O PDX OF INFECTION W/O CC/MCC	1.2814	2.2	2.6
492	08	SURG	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR W MCC	3.2856	6.2	7.6
493	08	SURG	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR W CC	2.1901	4.0	4.8
494	08	SURG	LOWER EXTREM & HUMER PROC EXCEPT HIP,FOOT,FEMUR W/O CC/MCC	1.7462	2.7	3.2
495	08	SURG	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W MCC	3.0039	6.5	8.7
496	08	SURG	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W CC	1.9650	3.5	4.5
497	08	SURG	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W/O CC/MCC	1.3839	1.8	2.2

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
498	08	SURG	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W CC/MCC	2.4277	5.3	7.1
499	08	SURG	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W/O CC/MCC	1.2468	2.3	2.8
500	08	SURG	SOFT TISSUE PROCEDURES W MCC	2.9764	7.1	9.4
501	08	SURG	SOFT TISSUE PROCEDURES W CC	1.6945	4.2	5.3
502	08	SURG	SOFT TISSUE PROCEDURES W/O CC/MCC	1.2649	2.5	3.0
503	08	SURG	FOOT PROCEDURES W MCC	2.4932	6.7	8.4
504	08	SURG	FOOT PROCEDURES W CC	1.7185	4.9	5.9
505	08	SURG	FOOT PROCEDURES W/O CC/MCC	1.5119	3.0	3.6
506	08	SURG	MAJOR THUMB OR JOINT PROCEDURES	1.3760	3.7	4.6
507	08	SURG	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W CC/MCC	1.9034	4.4	5.7
508	08	SURG	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W/O CC/MCC	1.5257	2.1	2.5
509	08	SURG	ARTHROSCOPY	1.8325	3.9	4.9
510	08	SURG	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W MCC	2.4801	4.8	6.0
511	08	SURG	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W CC	1.7728	3.4	3.9
512	08	SURG	SHOULDER,ELBOW OR FOREARM PROC,EXC MAJOR JOINT PROC W/O CC/MCC	1.4832	2.3	2.6
513	08	SURG	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W CC/MCC	1.6035	4.2	5.5
514	08	SURG	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W/O CC/MCC	1.0239	2.4	2.9
515	08	SURG	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W MCC	2.8625	6.2	7.9
516	08	SURG	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W CC	1.8777	3.8	4.8
517	08	SURG	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W/O CC/MCC	1.3716	2.2	2.7
518	08	SURG	BACK & NECK PROC EXC SPINAL FUSION W MCC OR DISC DEVICE/NEUROSTIM	2.8795	3.2	5.1
519	08	SURG	BACK & NECK PROC EXC SPINAL FUSION W CC	1.7929	3.2	4.1
520	08	SURG	BACK & NECK PROC EXC SPINAL FUSION W/O CC/MCC	1.2871	1.9	2.4
533	08	MED	FRACTURES OF FEMUR W MCC	1.4448	4.3	5.7

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MS-DRG Table

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
534	08	MED	FRACTURES OF FEMUR W/O MCC	0.7627	2.9	3.5
535	08	MED	FRACTURES OF HIP & PELVIS W MCC	1.2697	3.9	5.0
536	08	MED	FRACTURES OF HIP & PELVIS W/O MCC	0.7517	3.0	3.4
537	08	MED	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH W CC/MCC	0.9713	3.3	4.1
538	08	MED	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH W/O CC/MCC	0.6701	2.5	2.9
539	08	MED	OSTEOMYELITIS W MCC	1.8946	5.9	7.8
540	08	MED	OSTEOMYELITIS W CC	1.2976	4.5	5.7
541	08	MED	OSTEOMYELITIS W/O CC/MCC	0.9440	3.4	4.3
542	08	MED	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W MCC	1.8089	5.3	7.0
543	08	MED	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W CC	1.0770	3.7	4.6
544	08	MED	PATHOLOGICAL FRACTURES & MUSCULOSKELET & CONN TISS MALIG W/O CC/MCC	0.7728	3.0	3.4
545	08	MED	CONNECTIVE TISSUE DISORDERS W MCC	2.4075	5.9	8.2
546	08	MED	CONNECTIVE TISSUE DISORDERS W CC	1.1297	3.6	4.6
547	08	MED	CONNECTIVE TISSUE DISORDERS W/O CC/MCC	0.8113	2.6	3.2
548	08	MED	SEPTIC ARTHRITIS W MCC	2.0331	6.0	7.9
549	08	MED	SEPTIC ARTHRITIS W CC	1.2021	4.1	5.1
550	08	MED	SEPTIC ARTHRITIS W/O CC/MCC	0.8945	3.0	3.6
551	08	MED	MEDICAL BACK PROBLEMS W MCC	1.5657	4.5	5.8
552	08	MED	MEDICAL BACK PROBLEMS W/O MCC	0.8912	3.0	3.7
553	08	MED	BONE DISEASES & ARTHROPATHIES W MCC	1.2521	4.0	5.2
554	08	MED	BONE DISEASES & ARTHROPATHIES W/O MCC	0.7483	2.8	3.4
555	08	MED	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE W MCC	1.3023	3.9	5.1
556	08	MED	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONN TISSUE W/O MCC	0.7863	2.7	3.4
557	08	MED	TENDONITIS, MYOSITIS & BURSITIS W MCC	1.4516	4.6	5.8
558	08	MED	TENDONITIS, MYOSITIS & BURSITIS W/O MCC	0.8566	3.2	3.8
559	08	MED	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC	1.6993	4.7	6.3
560	08	MED	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC	1.0790	3.8	4.8

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MS-DRG Table

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
561	08	MED	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC	0.7617	2.6	3.4
562	08	MED	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH W MCC	1.3888	4.1	5.2
563	08	MED	FX, SPRN, STRN & DISL EXCEPT FEMUR, HIP, PELVIS & THIGH W/O MCC	0.8209	3.0	3.4
564	08	MED	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W MCC	1.4708	4.7	5.9
565	08	MED	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W CC	0.9539	3.5	4.2
566	08	MED	OTHER MUSCULOSKELETAL SYS & CONNECTIVE TISSUE DIAGNOSES W/O CC/MCC	0.7751	2.6	3.1
570	09	SURG	SKIN DEBRIDEMENT W MCC	2.5922	7.0	9.1
571	09	SURG	SKIN DEBRIDEMENT W CC	1.6247	5.0	6.1
572	09	SURG	SKIN DEBRIDEMENT W/O CC/MCC	1.1689	3.5	4.3
573	09	SURG	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W MCC	4.0912	8.8	12.8
574	09	SURG	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W CC	2.9289	7.3	9.3
575	09	SURG	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W/O CC/MCC	1.7389	4.5	5.6
576	09	SURG	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W MCC	4.5447	9.0	13.0
577	09	SURG	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W CC	2.4236	4.7	6.8
578	09	SURG	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W/O CC/MCC	1.4714	2.7	3.6
579	09	SURG	OTHER SKIN, SUBCUT TISS & BREAST PROC W MCC	2.7808	6.9	9.2
580	09	SURG	OTHER SKIN, SUBCUT TISS & BREAST PROC W CC	1.6549	3.9	5.1
581	09	SURG	OTHER SKIN, SUBCUT TISS & BREAST PROC W/O CC/MCC	1.3030	2.2	2.8
582	09	SURG	MASTECTOMY FOR MALIGNANCY W CC/MCC	1.4695	2.3	3.1
583	09	SURG	MASTECTOMY FOR MALIGNANCY W/O CC/MCC	1.3454	1.7	2.0
584	09	SURG	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W CC/MCC	1.8434	3.7	4.9
585	09	SURG	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W/O CC/MCC	1.5842	2.2	2.7

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
592	09	MED	SKIN ULCERS W MCC	1.4815	5.0	6.6
593	09	MED	SKIN ULCERS W CC	1.0469	4.1	4.9
594	09	MED	SKIN ULCERS W/O CC/MCC	0.7568	3.0	3.7
595	09	MED	MAJOR SKIN DISORDERS W MCC	2.1080	5.5	7.5
596	09	MED	MAJOR SKIN DISORDERS W/O MCC	0.9785	3.5	4.4
597	09	MED	MALIGNANT BREAST DISORDERS W MCC	1.8241	5.3	7.1
598	09	MED	MALIGNANT BREAST DISORDERS W CC	1.0872	3.5	4.5
599	09	MED	MALIGNANT BREAST DISORDERS W/O CC/MCC	0.8761	2.5	3.1
600	09	MED	NON-MALIGNANT BREAST DISORDERS W CC/MCC	0.9557	3.7	4.5
601	09	MED	NON-MALIGNANT BREAST DISORDERS W/O CC/MCC	0.6270	2.6	3.1
602	09	MED	CELLULITIS W MCC	1.4571	4.8	5.9
603	09	MED	CELLULITIS W/O MCC	0.8559	3.4	4.0
604	09	MED	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST W MCC	1.4190	3.9	5.1
605	09	MED	TRAUMA TO THE SKIN, SUBCUT TISS & BREAST W/O MCC	0.8531	2.7	3.3
606	09	MED	MINOR SKIN DISORDERS W MCC	1.3769	4.2	5.7
607	09	MED	MINOR SKIN DISORDERS W/O MCC	0.7901	2.9	3.7
614	10	SURG	ADRENAL & PITUITARY PROCEDURES W CC/MCC	2.3493	3.7	5.0
615	10	SURG	ADRENAL & PITUITARY PROCEDURES W/O CC/MCC	1.4724	2.0	2.4
616	10	SURG	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W MCC	4.0339	10.3	12.6
617	10	SURG	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W CC	2.0926	6.1	7.3
618	10	SURG	AMPUTAT OF LOWER LIMB FOR ENDOCRINE,NUTRIT,& METABOL DIS W/O CC/MCC	1.1695	4.1	4.8
619	10	SURG	O.R. PROCEDURES FOR OBESITY W MCC	3.1291	3.6	5.7
620	10	SURG	O.R. PROCEDURES FOR OBESITY W CC	1.8443	2.2	2.6
621	10	SURG	O.R. PROCEDURES FOR OBESITY W/O CC/MCC	1.5876	1.6	1.8
622	10	SURG	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W MCC	3.6089	8.4	11.1
623	10	SURG	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W CC	1.8906	5.5	6.6

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
624	10	SURG	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W/O CC/MCC	1.1632	3.3	4.1
625	10	SURG	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W MCC	2.6784	4.8	7.2
626	10	SURG	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W CC	1.4948	2.3	3.1
627	10	SURG	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W/O CC/MCC	1.0537	1.5	1.8
628	10	SURG	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W MCC	3.4610	6.8	9.8
629	10	SURG	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W CC	2.3137	6.1	7.2
630	10	SURG	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W/O CC/MCC	1.6099	2.8	3.6
637	10	MED	DIABETES W MCC	1.3458	3.9	5.1
638	10	MED	DIABETES W CC	0.8534	2.9	3.6
639	10	MED	DIABETES W/O CC/MCC	0.6250	2.2	2.6
640	10	MED	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W MCC	1.1757	3.3	4.5
641	10	MED	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	0.7456	2.6	3.3
642	10	MED	INBORN AND OTHER DISORDERS OF METABOLISM	1.2612	3.2	4.3
643	10	MED	ENDOCRINE DISORDERS W MCC	1.5996	5.1	6.5
644	10	MED	ENDOCRINE DISORDERS W CC	1.0040	3.6	4.4
645	10	MED	ENDOCRINE DISORDERS W/O CC/MCC	0.7387	2.7	3.3
652	11	SURG	KIDNEY TRANSPLANT	3.3376	5.5	6.4
653	11	SURG	MAJOR BLADDER PROCEDURES W MCC	5.7625	11.3	14.4
654	11	SURG	MAJOR BLADDER PROCEDURES W CC	2.9055	6.6	7.6
655	11	SURG	MAJOR BLADDER PROCEDURES W/O CC/MCC	2.1068	4.1	4.8
656	11	SURG	KIDNEY & URETER PROCEDURES FOR NEOPLASM W MCC	3.2492	6.0	7.8
657	11	SURG	KIDNEY & URETER PROCEDURES FOR NEOPLASM W CC	1.9728	3.8	4.5
658	11	SURG	KIDNEY & URETER PROCEDURES FOR NEOPLASM W/O CC/MCC	1.5580	2.4	2.7

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MS-DRG Table

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
659	11	SURG	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W MCC	3.4209	6.7	9.4
660	11	SURG	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W CC	1.8006	3.4	4.5
661	11	SURG	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W/O CC/MCC	1.4519	2.1	2.5
662	11	SURG	MINOR BLADDER PROCEDURES W MCC	3.0450	7.7	10.4
663	11	SURG	MINOR BLADDER PROCEDURES W CC	1.7790	3.9	5.3
664	11	SURG	MINOR BLADDER PROCEDURES W/O CC/MCC	1.2917	1.9	2.4
665	11	SURG	PROSTATECTOMY W MCC	3.1176	8.2	10.6
666	11	SURG	PROSTATECTOMY W CC	1.7342	4.4	5.8
667	11	SURG	PROSTATECTOMY W/O CC/MCC	0.9792	2.2	2.7
668	11	SURG	TRANSURETHRAL PROCEDURES W MCC	2.6316	6.6	8.7
669	11	SURG	TRANSURETHRAL PROCEDURES W CC	1.3804	3.1	4.2
670	11	SURG	TRANSURETHRAL PROCEDURES W/O CC/MCC	0.9801	2.2	2.7
671	11	SURG	URETHRAL PROCEDURES W CC/MCC	1.5289	3.7	5.0
672	11	SURG	URETHRAL PROCEDURES W/O CC/MCC	1.0134	1.9	2.3
673	11	SURG	OTHER KIDNEY & URINARY TRACT PROCEDURES W MCC	3.5441	7.7	10.7
674	11	SURG	OTHER KIDNEY & URINARY TRACT PROCEDURES W CC	2.3314	5.3	7.0
675	11	SURG	OTHER KIDNEY & URINARY TRACT PROCEDURES W/O CC/MCC	1.6581	2.6	3.3
682	11	MED	RENAL FAILURE W MCC	1.4921	4.3	5.8
683	11	MED	RENAL FAILURE W CC	0.9297	3.3	4.1
684	11	MED	RENAL FAILURE W/O CC/MCC	0.6267	2.3	2.8
685	11	MED	ADMIT FOR RENAL DIALYSIS	1.0531	2.7	3.4
686	11	MED	KIDNEY & URINARY TRACT NEOPLASMS W MCC	1.7557	5.2	6.8
687	11	MED	KIDNEY & URINARY TRACT NEOPLASMS W CC	1.1052	3.5	4.5
688	11	MED	KIDNEY & URINARY TRACT NEOPLASMS W/O CC/MCC	0.8523	2.0	2.4
689	11	MED	KIDNEY & URINARY TRACT INFECTIONS W MCC	1.0828	3.9	4.8
690	11	MED	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	0.7940	3.0	3.6
691	11	MED	URINARY STONES W ESW LITHOTRIPSY W CC/MCC	1.5943	2.6	3.4
692	11	MED	URINARY STONES W ESW LITHOTRIPSY W/O CC/MCC	1.1667	1.9	2.3

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MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
693	11	MED	URINARY STONES W/O ESW LITHOTRIPSY W MCC	1.4505	4.1	5.4
694	11	MED	URINARY STONES W/O ESW LITHOTRIPSY W/O MCC	0.8153	2.1	2.7
695	11	MED	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS W MCC	1.2113	3.9	5.0
696	11	MED	KIDNEY & URINARY TRACT SIGNS & SYMPTOMS W/O MCC	0.7031	2.5	3.1
697	11	MED	URETHRAL STRICTURE	1.0321	2.9	3.8
698	11	MED	OTHER KIDNEY & URINARY TRACT DIAGNOSES W MCC	1.6009	5.0	6.3
699	11	MED	OTHER KIDNEY & URINARY TRACT DIAGNOSES W CC	1.0331	3.4	4.3
700	11	MED	OTHER KIDNEY & URINARY TRACT DIAGNOSES W/O CC/MCC	0.7799	2.4	3.0
707	12	SURG	MAJOR MALE PELVIC PROCEDURES W CC/MCC	1.7951	2.4	3.3
708	12	SURG	MAJOR MALE PELVIC PROCEDURES W/O CC/MCC	1.3773	1.3	1.5
709	12	SURG	PENIS PROCEDURES W CC/MCC	2.2401	4.2	6.4
710	12	SURG	PENIS PROCEDURES W/O CC/MCC	1.4980	1.8	2.3
711	12	SURG	TESTES PROCEDURES W CC/MCC	2.0228	5.5	7.3
712	12	SURG	TESTES PROCEDURES W/O CC/MCC	0.9232	2.3	2.9
713	12	SURG	TRANSURETHRAL PROSTATECTOMY W CC/MCC	1.4197	2.9	4.2
714	12	SURG	TRANSURETHRAL PROSTATECTOMY W/O CC/MCC	0.8763	1.7	2.0
715	12	SURG	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W CC/MCC	2.1340	4.8	7.0
716	12	SURG	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W/O CC/MCC	1.4084	1.5	1.7
717	12	SURG	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W CC/MCC	1.9289	4.0	5.4
718	12	SURG	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W/O CC/MCC	1.2447	2.4	2.8
722	12	MED	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W MCC	1.7556	5.2	7.0
723	12	MED	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W CC	1.1231	3.6	4.6

Exhibit #1 – Proposed**MS-DRG Table****Effective for Dates of Service on and After 1/1/2018**

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
724	12	MED	MALIGNANCY, MALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.7504	1.8	2.3
725	12	MED	BENIGN PROSTATIC HYPERTROPHY W MCC	1.2712	4.2	5.6
726	12	MED	BENIGN PROSTATIC HYPERTROPHY W/O MCC	0.7378	2.6	3.2
727	12	MED	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM W MCC	1.4597	4.7	6.0
728	12	MED	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM W/O MCC	0.8109	3.1	3.7
729	12	MED	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES W CC/MCC	1.0535	3.3	4.3
730	12	MED	OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES W/O CC/MCC	0.6343	1.9	2.4
734	13	SURG	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W CC/MCC	2.1648	3.8	5.3
735	13	SURG	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W/O CC/MCC	1.2971	1.8	2.2
736	13	SURG	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W MCC	3.9264	9.2	11.4
737	13	SURG	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W CC	1.9504	4.8	5.6
738	13	SURG	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W/O CC/MCC	1.3806	2.8	3.2
739	13	SURG	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W MCC	3.5399	6.7	9.4
740	13	SURG	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W CC	1.7129	3.1	4.0
741	13	SURG	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W/O CC/MCC	1.2585	1.8	2.1
742	13	SURG	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W CC/MCC	1.6331	3.1	4.0
743	13	SURG	UTERINE & ADNEXA PROC FOR NON-MALIGNANCY W/O CC/MCC	1.0680	1.8	2.0
744	13	SURG	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W CC/MCC	1.6950	4.3	5.7
745	13	SURG	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W/O CC/MCC	1.0578	2.2	2.6
746	13	SURG	VAGINA, CERVIX & VULVA PROCEDURES W CC/MCC	1.6250	3.5	5.1

Exhibit #1 – Proposed

MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
747	13	SURG	VAGINA, CERVIX & VULVA PROCEDURES W/O CC/MCC	0.9144	1.6	2.0
748	13	SURG	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES	1.3396	1.7	2.2
749	13	SURG	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES W CC/MCC	2.5800	5.8	7.7
750	13	SURG	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC	1.2694	2.4	3.0
754	13	MED	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W MCC	1.7864	5.2	7.0
755	13	MED	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W CC	1.1069	3.5	4.6
756	13	MED	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.6353	2.0	2.5
757	13	MED	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM W MCC	1.4708	5.1	6.5
758	13	MED	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM W CC	1.0093	3.9	4.8
759	13	MED	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM W/O CC/MCC	0.7152	2.9	3.4
760	13	MED	MENSTRUAL & OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS W CC/MCC	0.8696	2.7	3.4
761	13	MED	MENSTRUAL & OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS W/O CC/MCC	0.6368	1.7	2.1
765	14	SURG	CESAREAN SECTION W CC/MCC	1.1541	3.7	4.7
766	14	SURG	CESAREAN SECTION W/O CC/MCC	0.8177	2.8	3.1
767	14	SURG	VAGINAL DELIVERY W STERILIZATION &/OR D&C	0.9126	2.4	2.9
768	14	SURG	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	1.0173	3.1	3.4
769	14	SURG	POSTPARTUM & POST ABORTION DIAGNOSES W O.R. PROCEDURE	1.7736	3.3	5.3
770	14	SURG	ABORTION W D&C, ASPIRATION CURETTAGE OR HYSTEROTOMY	0.7741	1.8	2.2
774	14	MED	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	0.8016	2.6	3.4
775	14	MED	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	0.6156	2.1	2.3

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
776	14	MED	POSTPARTUM & POST ABORTION DIAGNOSES W/O O.R. PROCEDURE	0.8129	2.5	3.4
777	14	MED	ECTOPIC PREGNANCY	0.8720	1.6	1.9
778	14	MED	THREATENED ABORTION	0.5961	2.1	3.1
779	14	MED	ABORTION W/O D&C	0.6768	1.7	2.4
780	14	MED	FALSE LABOR	0.4401	1.6	2.0
781	14	MED	OTHER ANTEPARTUM DIAGNOSES W MEDICAL COMPLICATIONS	0.8556	2.7	4.1
782	14	MED	OTHER ANTEPARTUM DIAGNOSES W/O MEDICAL COMPLICATIONS	0.6033	1.9	2.6
789	15	MED	NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY	1.6400	1.8	1.8
790	15	MED	EXTREME IMMATURITY OR RESPIRATORY DISTRESS SYNDROME, NEONATE	5.4079	17.9	17.9
791	15	MED	PREMATURITY W MAJOR PROBLEMS	3.6934	13.3	13.3
792	15	MED	PREMATURITY W/O MAJOR PROBLEMS	2.2285	8.6	8.6
793	15	MED	FULL TERM NEONATE W MAJOR PROBLEMS	3.7940	4.7	4.7
794	15	MED	NEONATE W OTHER SIGNIFICANT PROBLEMS	1.3428	3.4	3.4
795	15	MED	NORMAL NEWBORN	0.1818	3.1	3.1
799	16	SURG	SPLENECTOMY W MCC	4.6581	8.0	10.4
800	16	SURG	SPLENECTOMY W CC	2.6807	5.1	6.5
801	16	SURG	SPLENECTOMY W/O CC/MCC	1.7047	2.6	3.2
802	16	SURG	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W MCC	3.3337	7.5	10.8
803	16	SURG	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W CC	1.8040	4.3	5.6
804	16	SURG	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W/O CC/MCC	1.1968	2.3	2.9
808	16	MED	MAJOR HEMATOL/IMMUN DIAG EXC SICKLE CELL CRISIS & COAGUL W MCC	2.1388	5.6	7.5
809	16	MED	MAJOR HEMATOL/IMMUN DIAG EXC SICKLE CELL CRISIS & COAGUL W CC	1.1972	3.6	4.5
810	16	MED	MAJOR HEMATOL/IMMUN DIAG EXC SICKLE CELL CRISIS & COAGUL W/O CC/MCC	0.9385	2.8	3.4
811	16	MED	RED BLOOD CELL DISORDERS W MCC	1.3467	3.7	4.9
812	16	MED	RED BLOOD CELL DISORDERS W/O MCC	0.8817	2.8	3.5
813	16	MED	COAGULATION DISORDERS	1.7498	3.6	4.9

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
814	16	MED	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W MCC	1.7687	4.8	6.6
815	16	MED	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W CC	1.0006	3.2	4.0
816	16	MED	RETICULOENDOTHELIAL & IMMUNITY DISORDERS W/O CC/MCC	0.7007	2.4	2.9
820	17	SURG	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W MCC	5.3536	11.2	15.2
821	17	SURG	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W CC	2.3315	4.4	6.1
822	17	SURG	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W/O CC/MCC	1.2196	2.0	2.5
823	17	SURG	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER PROC W MCC	4.3480	10.6	13.7
824	17	SURG	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER PROC W CC	2.1737	5.3	7.1
825	17	SURG	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER PROC W/O CC/MCC	1.2700	2.5	3.4
826	17	SURG	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W MCC	5.2297	10.7	14.2
827	17	SURG	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W CC	2.3548	5.0	6.4
828	17	SURG	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W/O CC/MCC	1.6141	3.2	3.9
829	17	SURG	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS W OTHER PROCEDURE W CC/MCC	3.1042	6.2	9.4
830	17	SURG	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS W OTHER PROCEDURE W/O CC/MCC	1.2757	2.4	3.0
834	17	MED	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE W MCC	5.5307	10.1	16.8
835	17	MED	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE W CC	2.0965	4.4	7.0
836	17	MED	ACUTE LEUKEMIA W/O MAJOR O.R. PROCEDURE W/O CC/MCC	1.3865	3.0	4.9
837	17	MED	CHEMO W ACUTE LEUKEMIA AS SDX OR W HIGH DOSE CHEMO AGENT W MCC	5.6932	14.0	19.4

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
838	17	MED	CHEMO W ACUTE LEUKEMIA AS SDX W CC OR HIGH DOSE CHEMO AGENT	2.3687	6.1	8.2
839	17	MED	CHEMO W ACUTE LEUKEMIA AS SDX W/O CC/MCC	1.3374	4.7	5.3
840	17	MED	LYMPHOMA & NON-ACUTE LEUKEMIA W MCC	3.6284	8.0	11.1
841	17	MED	LYMPHOMA & NON-ACUTE LEUKEMIA W CC	1.7795	4.5	6.1
842	17	MED	LYMPHOMA & NON-ACUTE LEUKEMIA W/O CC/MCC	1.4044	3.2	4.4
843	17	MED	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W MCC	1.8021	5.3	7.2
844	17	MED	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W CC	1.2092	3.9	5.0
845	17	MED	OTHER MYELOPROLIF DIS OR POORLY DIFF NEOPL DIAG W/O CC/MCC	0.8984	2.8	3.5
846	17	MED	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W MCC	2.5766	6.1	8.3
847	17	MED	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W CC	1.2848	3.6	4.1
848	17	MED	CHEMOTHERAPY W/O ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS W/O CC/MCC	0.9369	2.8	3.3
849	17	MED	RADIOTHERAPY	1.7994	4.8	6.3
853	18	SURG	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W MCC	5.1567	10.3	13.3
854	18	SURG	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W CC	2.4260	6.4	7.7
855	18	SURG	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W/O CC/MCC	1.4549	3.4	4.1
856	18	SURG	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W MCC	4.5393	9.4	12.5
857	18	SURG	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W CC	2.0380	5.4	6.8
858	18	SURG	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W/O CC/MCC	1.3531	3.7	4.5
862	18	MED	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS W MCC	1.8700	5.2	6.8
863	18	MED	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS W/O MCC	1.0384	3.7	4.5
864	18	MED	FEVER	0.8705	2.8	3.5

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
865	18	MED	VIRAL ILLNESS W MCC	1.5090	4.1	5.6
866	18	MED	VIRAL ILLNESS W/O MCC	0.7987	2.7	3.4
867	18	MED	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W MCC	2.1586	5.7	7.7
868	18	MED	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W CC	1.0660	3.8	4.7
869	18	MED	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES W/O CC/MCC	0.7874	2.9	3.5
870	18	MED	SEPTICEMIA OR SEVERE SEPSIS W MV >96 HOURS	6.1735	12.6	14.6
871	18	MED	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W MCC	1.8410	4.9	6.4
872	18	MED	SEPTICEMIA OR SEVERE SEPSIS W/O MV >96 HOURS W/O MCC	1.0591	3.7	4.5
876	19	SURG	O.R. PROCEDURE W PRINCIPAL DIAGNOSES OF MENTAL ILLNESS	3.5205	7.6	14.3
880	19	MED	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	0.8085	2.7	3.7
881	19	MED	DEPRESSIVE NEUROSES	0.7420	3.8	5.2
882	19	MED	NEUROSES EXCEPT DEPRESSIVE	0.7762	3.2	4.5
883	19	MED	DISORDERS OF PERSONALITY & IMPULSE CONTROL	1.1800	4.8	7.8
884	19	MED	ORGANIC DISTURBANCES & INTELLECTUAL DISABILITY	1.2302	4.2	6.4
885	19	MED	PSYCHOSES	1.1660	5.8	8.2
886	19	MED	BEHAVIORAL & DEVELOPMENTAL DISORDERS	1.0647	3.7	6.9
887	19	MED	OTHER MENTAL DISORDER DIAGNOSES	1.0732	3.1	4.6
894	20	MED	ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AMA	0.5242	2.1	2.9
895	20	MED	ALCOHOL/DRUG ABUSE OR DEPENDENCE W REHABILITATION THERAPY	1.3253	9.1	11.9
896	20	MED	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W MCC	1.6504	4.8	6.7
897	20	MED	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W/O MCC	0.7889	3.4	4.3
901	21	SURG	WOUND DEBRIDEMENTS FOR INJURIES W MCC	4.1574	9.0	13.1
902	21	SURG	WOUND DEBRIDEMENTS FOR INJURIES W CC	1.9938	5.1	6.8

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
903	21	SURG	WOUND DEBRIDEMENTS FOR INJURIES W/O CC/MCC	1.2455	3.1	3.9
904	21	SURG	SKIN GRAFTS FOR INJURIES W CC/MCC	3.2158	6.7	9.6
905	21	SURG	SKIN GRAFTS FOR INJURIES W/O CC/MCC	1.4535	3.5	4.4
906	21	SURG	HAND PROCEDURES FOR INJURIES	1.7377	2.9	4.4
907	21	SURG	OTHER O.R. PROCEDURES FOR INJURIES W MCC	4.1965	7.3	10.3
908	21	SURG	OTHER O.R. PROCEDURES FOR INJURIES W CC	2.0626	4.0	5.3
909	21	SURG	OTHER O.R. PROCEDURES FOR INJURIES W/O CC/MCC	1.4323	2.5	3.2
913	21	MED	TRAUMATIC INJURY W MCC	1.4001	3.6	4.9
914	21	MED	TRAUMATIC INJURY W/O MCC	0.8301	2.5	3.2
915	21	MED	ALLERGIC REACTIONS W MCC	1.6317	3.7	5.0
916	21	MED	ALLERGIC REACTIONS W/O MCC	0.6030	1.8	2.1
917	21	MED	POISONING & TOXIC EFFECTS OF DRUGS W MCC	1.4129	3.5	4.8
918	21	MED	POISONING & TOXIC EFFECTS OF DRUGS W/O MCC	0.7522	2.3	3.0
919	21	MED	COMPLICATIONS OF TREATMENT W MCC	1.7831	4.4	6.1
920	21	MED	COMPLICATIONS OF TREATMENT W CC	1.0106	3.0	3.9
921	21	MED	COMPLICATIONS OF TREATMENT W/O CC/MCC	0.7230	2.3	2.8
922	21	MED	OTHER INJURY, POISONING & TOXIC EFFECT DIAG W MCC	1.5041	4.0	5.5
923	21	MED	OTHER INJURY, POISONING & TOXIC EFFECT DIAG W/O MCC	0.8186	2.6	3.6
927	22	SURG	EXTENSIVE BURNS OR FULL THICKNESS BURNS W MV >96 HRS W SKIN GRAFT	17.0027	23.9	30.2
928	22	SURG	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W CC/MCC	5.7285	10.7	14.5
929	22	SURG	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W/O CC/MCC	2.6456	5.6	7.5
933	22	MED	EXTENSIVE BURNS OR FULL THICKNESS BURNS W MV >96 HRS W/O SKIN GRAFT	3.2811	2.8	5.9
934	22	MED	FULL THICKNESS BURN W/O SKIN GRFT OR INHAL INJ	1.7345	4.3	6.2
935	22	MED	NON-EXTENSIVE BURNS	1.6890	3.5	5.0
939	23	SURG	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W MCC	3.4944	6.5	9.6
940	23	SURG	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W CC	2.3390	4.0	5.3

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MS-DRG Table

Effective for Dates of Service on and After 1/1/2018

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
941	23	SURG	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W/O CC/MCC	1.8555	2.5	3.2
945	23	MED	REHABILITATION W CC/MCC	1.2405	8.3	10.9
946	23	MED	REHABILITATION W/O CC/MCC	1.1266	6.4	7.3
947	23	MED	SIGNS & SYMPTOMS W MCC	1.1745	3.5	4.8
948	23	MED	SIGNS & SYMPTOMS W/O MCC	0.7711	2.7	3.3
949	23	MED	AFTERCARE W CC/MCC	1.1809	4.4	6.0
950	23	MED	AFTERCARE W/O CC/MCC	0.8042	3.4	4.7
951	23	MED	OTHER FACTORS INFLUENCING HEALTH STATUS	0.7870	2.4	3.2
955	24	SURG	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA	6.0288	7.4	10.9
956	24	SURG	LIMB REATTACHMENT, HIP & FEMUR PROC FOR MULTIPLE SIGNIFICANT TRAUMA	3.8425	6.2	7.7
957	24	SURG	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W MCC	7.3069	9.6	13.7
958	24	SURG	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W CC	4.2762	7.1	8.7
959	24	SURG	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W/O CC/MCC	2.7784	4.0	4.9
963	24	MED	OTHER MULTIPLE SIGNIFICANT TRAUMA W MCC	2.7694	5.5	8.1
964	24	MED	OTHER MULTIPLE SIGNIFICANT TRAUMA W CC	1.4301	4.0	4.8
965	24	MED	OTHER MULTIPLE SIGNIFICANT TRAUMA W/O CC/MCC	0.9933	2.9	3.3
969	25	SURG	HIV W EXTENSIVE O.R. PROCEDURE W MCC	5.4154	11.1	15.1
970	25	SURG	HIV W EXTENSIVE O.R. PROCEDURE W/O MCC	2.5664	4.4	7.1
974	25	MED	HIV W MAJOR RELATED CONDITION W MCC	2.8070	6.6	9.2
975	25	MED	HIV W MAJOR RELATED CONDITION W CC	1.3529	4.4	5.8
976	25	MED	HIV W MAJOR RELATED CONDITION W/O CC/MCC	0.9976	3.2	4.3
977	25	MED	HIV W OR W/O OTHER RELATED CONDITION	1.3051	3.7	5.2
981		SURG	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W MCC	4.3369	8.5	11.5
982		SURG	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W CC	2.5036	5.0	6.7
983		SURG	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC	1.6378	2.5	3.5
987		SURG	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W MCC	3.3133	8.1	10.7

Exhibit #1 – Proposed**MS-DRG Table****Effective for Dates of Service on and After 1/1/2018**

MS-DRG	MDC	TYPE	MS-DRG Title	Weights	Geometric mean LOS	Arithmetic mean LOS
988		SURG	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W CC	1.7448	4.4	6.0
989		SURG	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC	1.1192	2.2	2.9
998		**	PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS			
999		**	UNGROUPABLE			

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Exhibit #2 – Proposed			
Hospital Base Rates and Cost to Charge Ratios (CCR)			
Effective for Hospital Inpatient Discharge Date of Service on or after 1/1/2018			
Provider Number	Name	Base Rate	Total CCR
60001	NORTH COLORADO MEDICAL CENTER	\$6,784.96	0.254
60003	LONGMONT UNITED HOSPITAL	\$6,241.13	0.309
60004	PLATTE VALLEY MEDICAL CENTER	\$6,386.71	0.34
60006	MONTROSE MEMORIAL HOSPITAL	\$6,133.97	0.411
60008	SAN LUIS VALLEY HEALTH	\$6,242.35	0.373
60009	LUTHERAN MEDICAL CENTER	\$6,372.63	0.235
60010	POUDRE VALLEY HOSPITAL	\$6,539.44	0.304
60011	DENVER HEALTH MEDICAL CENTER	\$8,473.42	0.289
60012	CENTURA HEALTH-ST MARY CORWIN MEDICAL CENTER	\$6,675.37	0.249
60013	MERCY REGIONAL MEDICAL CENTER	\$7,906.12	0.34
60014	PRESBYTERIAN ST LUKES MEDICAL CENTER	\$7,007.25	0.184
60015	CENTURA HEALTH-ST ANTHONY HOSPITAL	\$6,331.38	0.201
60016	CENTURA HEALTH-ST THOMAS MORE HOSPITAL	\$6,915.90	0.4
60020	PARKVIEW MEDICAL CENTER INC	\$6,607.56	0.181
60022	UNIVERSITY COLO HEALTH MEMORIAL HOSPITAL CENTRAL	\$6,417.21	0.256
60023	ST MARYS MEDICAL CENTER	\$6,886.88	0.303
60024	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY	\$8,097.34	0.18
60027	FOOTHILLS HOSPITAL	\$6,180.76	0.23
60028	SAINT JOSEPH HOSPITAL	\$6,996.82	0.214
60030	MCKEE MEDICAL CENTER	\$6,418.54	0.37
60031	CENTURA HEALTH-PENROSE ST FRANCIS HEALTH SERVICES	\$6,282.89	0.221
60032	ROSE MEDICAL CENTER	\$6,660.80	0.16
60034	SWEDISH MEDICAL CENTER	\$6,419.01	0.139
60036	ARKANSAS VALLEY REGIONAL MEDICAL CENTER	\$6,222.39	0.527
60043	KEEFE MEMORIAL HOSPITAL	\$15,890.85	0.483
60044	COLORADO PLAINS MEDICAL CENTER	\$6,519.64	0.276
60049	YAMPA VALLEY MEDICAL CENTER	\$9,549.81	0.549
60054	COMMUNITY HOSPITAL	\$5,990.97	0.393
60064	CENTURA HEALTH-PORTER ADVENTIST HOSPITAL	\$6,246.32	0.21
60065	NORTH SUBURBAN MEDICAL CENTER	\$6,590.82	0.143
60071	DELTA COUNTY MEMORIAL HOSPITAL	\$6,131.00	0.431
60075	VALLEY VIEW HOSPITAL ASSOCIATION	\$8,009.31	0.506

Exhibit #2 – Proposed			
Hospital Base Rates and Cost to Charge Ratios (CCR)			
Effective for Hospital Inpatient Discharge Date of Service on or after 1/1/2018			
Provider Number	Name	Base Rate	Total CCR
60076	STERLING REGIONAL MEDCENTER	\$7,753.03	0.524
60096	VAIL VALLEY MEDICAL CENTER	\$11,966.12	0.485
60100	MEDICAL CENTER OF AURORA, THE	\$6,383.70	0.161
60103	CENTURA HEALTH-AVISTA ADVENTIST HOSPITAL	\$6,399.01	0.281
60104	ST ANTHONY NORTH HEALTH CAMPUS	\$7,138.78	0.267
60107	NATIONAL JEWISH HEALTH	\$6,477.32	0.229
60112	SKY RIDGE MEDICAL CENTER	\$6,096.15	0.138
60113	CENTURA HEALTH-LITTLETON ADVENTIST HOSPITAL	\$6,093.76	0.186
60114	PARKER ADVENTIST HOSPITAL	\$6,212.10	0.209
60116	GOOD SAMARITAN MEDICAL CENTER	\$6,031.09	0.21
60117	ANIMAS SURGICAL HOSPITAL, LLC	\$5,909.40	0.395
60118	ST ANTHONY SUMMIT MEDICAL CENTER	\$6,280.79	0.356
60119	MEDICAL CENTER OF THE ROCKIES	\$6,173.86	0.299
60124	ORTHOCOLORADO HOSPITAL AT ST ANTHONY MED CAMPUS	\$6,038.42	0.216
60125	CASTLE ROCK ADVENTIST HOSPITAL	\$6,095.85	0.297
60126	BANNER FORT COLLINS MEDICAL CENTER	\$6,056.28	0.251

Exhibit #3 – Proposed	
Critical Access Hospitals	
Effective for Dates of Service on and After 1/1/2018	
Hospital Name	Location in Colorado
Arkansas Valley Regional Medical Center	La Junta
Aspen Valley Hospital	Aspen
Colorado Canyon Hospital and Medical Center	Fruita
East Morgan County Hospital	Brush
Estes Park Medical Center	Estes Park
Grand River Hospital District	Rifle
Gunnison Valley Hospital	Gunnison
Haxtun Hospital District	Haxtun
Heart of the Rockies Regional Medical Center	Salida
Kit Carson County Memorial Hospital	Burlington
Lincoln Community Hospital	Hugo
Melissa Memorial Hospital	Holyoke
Middle Park Medical Center	Kremmling/Granby
Mt San Rafael Hospital	Trinidad
Pagosa Springs Medical Center	Pagosa Springs
Pikes Peak Regional Hospital	Woodland Park
Pioneers Medical Center	Meeker
Prowers Medical Center	Lamar
Rangely District Hospital	Rangely
Rio Grande Hospital	Del Norte
San Luis Valley Hospital	La Jara
Sedgwick County Health Center	Julesburg
Southeast Colorado Hospital	Springfield
Southwest Memorial Hospital	Cortez
Spanish Peaks Regional Health Center	Walsenburg
St Vincent General Hospital District	Leadville
The Memorial Hospital	Craig
Weisbrod Memorial County Hospital	Eads
Wray Community District Hospital	Wray
Yuma District Hospital	Yuma

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
701	Sr89 strontium	\$2,295.20	\$1,950.92	
726	Dexrazoxane HCl injection	\$371.39	\$315.68	
731	Sargramostim injection	\$66.76	\$56.75	
736	Amphotericin b liposome inj	\$35.15	\$29.88	
738	Rasburicase	\$466.47	\$396.50	
747	Chlorothiazide sodium inj	\$140.22	\$119.19	
751	Mechlorethamine hcl inj	\$478.60	\$406.81	
752	Dactinomycin injection	\$2,297.48	\$1,952.86	
759	Naltrexone, depot form	\$5.85	\$4.97	
800	Leuprolide acetate	\$1,844.19	\$1,567.56	
802	Etoposide oral	\$133.65	\$113.60	
807	Aldesleukin injection	\$5,521.75	\$4,693.49	
809	Bcg live intravesical vac	\$231.08	\$196.42	
810	Goserelin acetate implant	\$629.86	\$535.38	
812	Carmustine injection	\$6,924.53	\$5,885.85	
820	Daunorubicin injection	\$70.63	\$60.04	
821	Daunorubicin citrate inj	\$438.84	\$373.01	
823	Docetaxel injection	\$3.40	\$2.89	
825	Nelarabine injection	\$273.65	\$232.60	
827	Floxuridine injection	\$109.06	\$92.70	
831	Ifosfamide injection	\$50.53	\$42.95	
832	Idarubicin hcl injection	\$74.77	\$63.55	
836	Interferon alfa-2b inj	\$51.34	\$43.64	
838	Interferon gamma 1-b inj	\$11,354.63	\$9,651.44	
840	Inj melphalan hydrochl	\$3,247.43	\$2,760.32	
843	Pegaspargase injection	\$25,041.96	\$21,285.67	
844	Pentostatin injection	\$3,389.62	\$2,881.18	
849	Rituximab injection	\$1,472.96	\$1,252.02	
850	Streptozocin injection	\$576.38	\$489.92	
851	Thiotepa injection	\$1,569.85	\$1,334.37	
856	Porfimer sodium injection	\$38,195.23	\$32,465.95	
858	Inj cladribine	\$36.05	\$30.64	
864	Mitoxantrone hydrochl	\$59.13	\$50.26	
868	Oral aprepitant	\$21.20	\$18.02	
873	Hyalgan/supartz inj per dose	\$156.89	\$133.36	
874	Synvisc or synvisc-one	\$22.57	\$19.18	
875	Euflexxa inj per dose	\$276.91	\$235.37	
877	Orthovisc inj per dose	\$276.39	\$234.93	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
887	Azathioprine parenteral	\$450.81	\$383.19	
890	Lymphocyte immune globulin	\$2,661.84	\$2,262.56	
901	Alpha 1 proteinase inhibitor	\$8.68	\$7.38	
902	Injection, onabotulinumtoxinA	\$10.69	\$9.09	
903	Cytomegalovirus imm IV /vial	\$2,029.93	\$1,725.44	
910	Interferon beta-1b / .25 MG	\$677.34	\$575.74	
913	Ganciclovir long act implant	\$21.08	\$17.92	
925	Factor viii	\$1.82	\$1.55	
927	Factor viii recombinant	\$2.16	\$1.84	
928	Factor ix complex	\$2.41	\$2.05	
929	Anti-inhibitor	\$3.47	\$2.95	
931	Factor IX non-recombinant	\$2.09	\$1.78	
932	Factor ix recombinant nos	\$2.72	\$2.31	
943	Octagam injection	\$64.96	\$55.22	
944	Gammagard liquid injection	\$72.77	\$61.85	
946	Hepagam b im injection	\$105.57	\$89.73	
947	Flebogamma injection	\$54.32	\$46.17	
948	Gamunex-C/Gammaked	\$61.07	\$51.91	
961	Albumin (human), 5%, 50ml	\$21.24	\$18.05	
963	Albumin (human), 5%, 250 ml	\$98.50	\$83.73	
964	Albumin (human), 25%, 20 ml	\$40.48	\$34.41	
965	Albumin (human), 25%, 50ml	\$96.19	\$81.76	
1015	Injection glatiramer acetate	\$356.22	\$302.79	
1052	Injection, voriconazole	\$6.55	\$5.57	
1064	I131 iodide cap, rx	\$73.26	\$62.27	
1083	Adalimumab injection	\$2,118.47	\$1,800.70	
1086	Temozolomide	\$3.35	\$2.85	
1138	Hepagam b intravenous, inj	\$105.57	\$89.73	
1139	Protein c concentrate	\$27.36	\$23.26	
1142	Supprelin LA implant	\$49,926.47	\$42,437.50	
1150	I131 iodide sol, rx	\$22.61	\$19.22	
1166	Cytarabine liposome inj	\$1,069.18	\$908.80	
1168	Inj, temsirolimus	\$121.14	\$102.97	
1178	Busulfan injection	\$65.70	\$55.85	
1203	Verteporfin injection	\$19.37	\$16.46	
1207	Octreotide injection, depot	\$315.99	\$268.59	
1213	Antihemophilic viii/vwf comp	\$1.78	\$1.51	
1214	Inj IVIG privigen 500 mg	\$69.97	\$59.47	
1232	Mitomycin injection	\$208.22	\$176.99	
1235	Valrubicin injection	\$2,084.60	\$1,771.91	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1236	Levoleucovorin injection	\$1.28	\$1.09	
1237	Inj iron dextran	\$22.43	\$19.07	
1238	Topotecan oral	\$186.82	\$158.80	
1253	Triamcinolone A inj PRS-free	\$6.73	\$5.72	
1263	Antithrombin iii injection	\$5.80	\$4.93	
1268	Xyntha inj	\$2.20	\$1.87	
1274	Edetate calcium disodium inj	\$10,069.96	\$8,559.47	
1280	Corticotropin injection	\$6,366.76	\$5,411.75	
1281	Bevacizumab injection	\$3.31	\$2.81	
1289	AbobotulinumtoxinA	\$14.35	\$12.20	
1291	Riloncept injection	\$43.36	\$36.86	
1295	Sm 153 lexidronam	\$21,700.64	\$18,445.54	
1296	Degarelix injection	\$6.53	\$5.55	
1297	Ferumoxytol, non-esrd	\$1.60	\$1.36	
1311	Canakinumab injection	\$166.52	\$141.54	
1312	Hizentra injection	\$17.69	\$15.04	
1327	Imiglucerase injection	\$75.24	\$63.95	
1331	Olanzapine long-acting inj	\$5.26	\$4.47	
1332	Antithrombin recombinant	\$186.03	\$158.13	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1338	Methyl aminolevulinate, top	\$150.64	\$128.04	
1340	Collagenase, clost hist inj	\$73.24	\$62.25	
1341	Amobarbital 125 MG inj	\$349.67	\$297.22	
1352	Wilate injection	\$1.82	\$1.55	
1353	Belimumab injection	\$76.64	\$65.14	
1354	Hydroxyprogesterone caproate	\$4.93	\$4.19	
1361	Enfuvirtide injection	\$33.53	\$28.50	
1408	Cyclophosphamide 100 MG inj	\$76.16	\$64.74	
1413	Lumizyme injection	\$287.53	\$244.40	
1415	Glassia injection	\$7.85	\$6.67	
1416	Factor xiii anti-hem factor	\$14.74	\$12.53	
1417	Gel-one	\$978.50	\$831.73	
1420	Aflibercept injection	\$1,764.25	\$1,499.61	
1421	Imported lipodox inj	\$915.17	\$777.89	
1424	Nabilone oral	\$68.76	\$58.45	
1426	Eribulin mesylate injection	\$194.96	\$165.72	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1431	Centruroides immune f(ab)	\$7,644.04	\$6,497.43	
1433	Calcitonin salmon injection	\$4,082.20	\$3,469.87	
1440	Inj desmopressin acetate	\$23.67	\$20.12	
1442	Non-HEU TC-99M add-on/dose	\$18.00	\$15.30	
1443	Icatibant injection	\$586.10	\$498.19	
1446	Visualization adjunct	\$5.35	\$4.55	
1457	Totazoline hcl injection	\$2,880.72	\$2,448.61	
1458	Phentolaine mesylate inj	\$602.86	\$512.43	
1460	Interferon alfa-2a inj	\$58.01	\$49.31	
1464	Factor VIII (porcine)	\$0.36	\$0.31	
1466	Inj, vincristine sul lip 1mg	\$4,680.65	\$3,978.55	
1467	Factor ix recombinan rixubis	\$2.25	\$1.91	
1468	Inj Aripiprazole Ext Rel 1mg	\$8.24	\$7.00	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1469	Inj filgrastim excl biosimil	\$1.82	\$1.55	
1471	Injection, Pertuzumab, 1 mg	\$19.58	\$16.64	
1472	Inj beta interferon im 1 mcg	\$83.18	\$70.70	
1474	Certolizumab pegol inj 1mg	\$13.21	\$11.23	
1475	Golimumab for iv use 1mg	\$44.98	\$38.23	
1476	Obinutuzumab inj	\$103.25	\$87.76	
1478	Human fibrinogen conc inj	\$2.07	\$1.76	
1480	Elosulfase alfa, injection	\$403.87	\$343.29	
1482	Darbepoetin alfa, esrd use	\$6.93	\$5.89	
1484	Pentazocine injection	\$246.08	\$209.17	
1485	Ferumoxytol, esrd use	\$1.60	\$1.36	
1486	Factor ix fc fusion recomb	\$5.27	\$4.48	
1488	Injection, ramucirumab	\$101.29	\$86.10	
1489	Injection, vedolizumab	\$32.63	\$27.74	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1490	Inj pembrolizumab	\$85.14	\$72.37	
1491	New Technology - Level 1A (\$0-\$10)	\$9.00	\$7.65	
1492	New Technology - Level 1B (\$11-\$20)	\$27.90	\$23.72	
1493	New Technology - Level 1C (\$21-\$30)	\$45.90	\$39.02	
1494	New Technology - Level 1D (\$31-\$40)	\$63.90	\$54.32	
1495	New Technology - Level 1E (\$41-\$50)	\$81.90	\$69.62	
1496	New Technology - Level 1A (\$0-\$10)	\$9.00	\$7.65	
1497	New Technology - Level 1B (\$11-\$20)	\$27.90	\$23.72	
1498	New Technology - Level 1C (\$21-\$30)	\$45.90	\$39.02	
1499	New Technology - Level 1D (\$31-\$40)	\$63.90	\$54.32	
1500	New Technology - Level 1E (\$41-\$50)	\$81.90	\$69.62	
1502	New Technology - Level 2 (\$51 - \$100)	\$135.90	\$115.52	
1503	New Technology - Level 3 (\$101 - \$200)	\$270.90	\$230.27	
1504	New Technology - Level 4 (\$201 - \$300)	\$450.90	\$383.27	
1505	New Technology - Level 5 (\$301 - \$400)	\$630.90	\$536.27	
1506	New Technology - Level 6 (\$401 - \$500)	\$810.90	\$689.27	
1507	New Technology - Level 7 (\$501 - \$600)	\$990.90	\$842.27	
1508	New Technology - Level 8 (\$601 - \$700)	\$1,170.90	\$995.27	
1509	New Technology - Level 9 (\$701 - \$800)	\$1,350.90	\$1,148.27	
1510	New Technology - Level 10 (\$801 - \$900)	\$1,530.90	\$1,301.27	
1511	New Technology - Level 11 (\$901 - \$1000)	\$1,710.90	\$1,454.27	
1512	New Technology - Level 12 (\$1001 - \$1100)	\$1,890.90	\$1,607.27	
1513	New Technology - Level 13 (\$1101 - \$1200)	\$2,070.90	\$1,760.27	
1514	New Technology - Level 14 (\$1201- \$1300)	\$2,250.90	\$1,913.27	
1515	New Technology - Level 15 (\$1301 - \$1400)	\$2,430.90	\$2,066.27	
1516	New Technology - Level 16 (\$1401 - \$1500)	\$2,610.90	\$2,219.27	
1517	New Technology - Level 17 (\$1501-\$1600)	\$2,790.90	\$2,372.27	
1518	New Technology - Level 18 (\$1601-\$1700)	\$2,970.90	\$2,525.27	
1519	New Technology - Level 19 (\$1701-\$1800)	\$3,150.90	\$2,678.27	
1520	New Technology - Level 20 (\$1801-\$1900)	\$3,330.90	\$2,831.27	
1521	New Technology - Level 21 (\$1901-\$2000)	\$3,510.90	\$2,984.27	
1522	New Technology - Level 22 (\$2001-\$2500)	\$4,050.90	\$3,443.27	
1523	New Technology - Level 23 (\$2501-\$3000)	\$4,950.90	\$4,208.27	
1524	New Technology - Level 24 (\$3001-\$3500)	\$5,850.90	\$4,973.27	
1525	New Technology - Level 25 (\$3501-\$4000)	\$6,750.90	\$5,738.27	
1526	New Technology - Level 26 (\$4001-\$4500)	\$7,650.90	\$6,503.27	
1527	New Technology - Level 27 (\$4501-\$5000)	\$8,550.90	\$7,268.27	
1528	New Technology - Level 28 (\$5001-\$5500)	\$9,450.90	\$8,033.27	
1529	New Technology - Level 29 (\$5501-\$6000)	\$10,350.90	\$8,798.27	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1530	New Technology - Level 30 (\$6001-\$6500)	\$11,250.90	\$9,563.27	
1531	New Technology - Level 31 (\$6501-\$7000)	\$12,150.90	\$10,328.27	
1532	New Technology - Level 32 (\$7001-\$7500)	\$13,050.90	\$11,093.27	
1533	New Technology - Level 33 (\$7501-\$8000)	\$13,950.90	\$11,858.27	
1534	New Technology - Level 34 (\$8001-\$8500)	\$14,850.90	\$12,623.27	
1535	New Technology - Level 35 (\$8501-\$9000)	\$15,750.90	\$13,388.27	
1536	New Technology - Level 36 (\$9001-\$9500)	\$16,650.90	\$14,153.27	
1537	New Technology - Level 37 (\$9501-\$10000)	\$17,550.90	\$14,918.27	
1539	New Technology - Level 2 (\$51 - \$100)	\$135.90	\$115.52	
1540	New Technology - Level 3 (\$101 - \$200)	\$270.90	\$230.27	
1541	New Technology - Level 4 (\$201 - \$300)	\$450.90	\$383.27	
1542	New Technology - Level 5 (\$301 - \$400)	\$630.90	\$536.27	
1543	New Technology - Level 6 (\$401 - \$500)	\$810.90	\$689.27	
1544	New Technology - Level 7 (\$501 - \$600)	\$990.90	\$842.27	
1545	New Technology - Level 8 (\$601 - \$700)	\$1,170.90	\$995.27	
1546	New Technology - Level 9 (\$701 - \$800)	\$1,350.90	\$1,148.27	
1547	New Technology - Level 10 (\$801 - \$900)	\$1,530.90	\$1,301.27	
1548	New Technology - Level 11 (\$901 - \$1000)	\$1,710.90	\$1,454.27	
1549	New Technology - Level 12 (\$1001 - \$1100)	\$1,890.90	\$1,607.27	
1550	New Technology - Level 13 (\$1101 - \$1200)	\$2,070.90	\$1,760.27	
1551	New Technology - Level 14 (\$1201- \$1300)	\$2,250.90	\$1,913.27	
1552	New Technology - Level 15 (\$1301 - \$1400)	\$2,430.90	\$2,066.27	
1553	New Technology - Level 16 (\$1401 - \$1500)	\$2,610.90	\$2,219.27	
1554	New Technology - Level 17 (\$1501-\$1600)	\$2,790.90	\$2,372.27	
1555	New Technology - Level 18 (\$1601-\$1700)	\$2,970.90	\$2,525.27	
1556	New Technology - Level 19 (\$1701-\$1800)	\$3,150.90	\$2,678.27	
1557	New Technology - Level 20 (\$1801-\$1900)	\$3,330.90	\$2,831.27	
1558	New Technology - Level 21 (\$1901-\$2000)	\$3,510.90	\$2,984.27	
1559	New Technology - Level 22 (\$2001-\$2500)	\$4,050.90	\$3,443.27	
1560	New Technology - Level 23 (\$2501-\$3000)	\$4,950.90	\$4,208.27	
1561	New Technology - Level 24 (\$3001-\$3500)	\$5,850.90	\$4,973.27	
1562	New Technology - Level 25 (\$3501-\$4000)	\$6,750.90	\$5,738.27	
1563	New Technology - Level 26 (\$4001-\$4500)	\$7,650.90	\$6,503.27	
1564	New Technology - Level 27 (\$4501-\$5000)	\$8,550.90	\$7,268.27	
1565	New Technology - Level 28 (\$5001-\$5500)	\$9,450.90	\$8,033.27	
1566	New Technology - Level 29 (\$5501-\$6000)	\$10,350.90	\$8,798.27	
1567	New Technology - Level 30 (\$6001-\$6500)	\$11,250.90	\$9,563.27	
1568	New Technology - Level 31 (\$6501-\$7000)	\$12,150.90	\$10,328.27	
1569	New Technology - Level 32 (\$7001-\$7500)	\$13,050.90	\$11,093.27	
1570	New Technology - Level 33 (\$7501-\$8000)	\$13,950.90	\$11,858.27	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1571	New Technology - Level 34 (\$8001-\$8500)	\$14,850.90	\$12,623.27	
1572	New Technology - Level 35 (\$8501-\$9000)	\$15,750.90	\$13,388.27	
1573	New Technology - Level 36 (\$9001-\$9500)	\$16,650.90	\$14,153.27	
1574	New Technology - Level 37 (\$9501-\$10000)	\$17,550.90	\$14,918.27	
1575	New Technology - Level 38 (\$10,001-\$15,000)	\$22,500.90	\$19,125.77	
1576	New Technology - Level 39 (\$15,001-\$20,000)	\$31,500.90	\$26,775.77	
1577	New Technology - Level 40 (\$20,001-\$25,000)	\$40,500.90	\$34,425.77	
1578	New Technology - Level 41 (\$25,001-\$30,000)	\$49,500.90	\$42,075.77	
1579	New Technology - Level 42 (\$30,001-\$40,000)	\$63,000.90	\$53,550.77	
1580	New Technology - Level 43 (\$40,001-\$50,000)	\$81,000.90	\$68,850.77	
1581	New Technology - Level 44 (\$50,001-\$60,000)	\$99,000.90	\$84,150.77	
1582	New Technology - Level 45 (\$60,001-\$70,000)	\$117,000.90	\$99,450.77	
1583	New Technology - Level 46 (\$70,001-\$80,000)	\$135,000.90	\$114,750.77	
1584	New Technology - Level 47 (\$80,001-\$90,000)	\$153,000.90	\$130,050.77	
1585	New Technology - Level 48 (\$90,001-\$100,000)	\$171,000.90	\$145,350.77	
1589	New Technology - Level 38 (\$10,001-\$15,000)	\$22,500.90	\$19,125.77	
1590	New Technology - Level 39 (\$15,001-\$20,000)	\$31,500.90	\$26,775.77	
1591	New Technology - Level 40 (\$20,001-\$25,000)	\$40,500.90	\$34,425.77	
1592	New Technology - Level 41 (\$25,001-\$30,000)	\$49,500.90	\$42,075.77	
1593	New Technology - Level 42 (\$30,001-\$40,000)	\$63,000.90	\$53,550.77	
1594	New Technology - Level 43 (\$40,001-\$50,000)	\$81,000.90	\$68,850.77	
1595	New Technology - Level 44 (\$50,001-\$60,000)	\$99,000.90	\$84,150.77	
1596	New Technology - Level 45 (\$60,001-\$70,000)	\$117,000.90	\$99,450.77	
1597	New Technology - Level 46 (\$70,001-\$80,000)	\$135,000.90	\$114,750.77	
1598	New Technology - Level 47 (\$80,001-\$90,000)	\$153,000.90	\$130,050.77	
1599	New Technology - Level 48 (\$90,001-\$100,000)	\$171,000.90	\$145,350.77	
1605	Abciximab injection	\$2,073.94	\$1,762.85	
1607	Eptifibatide injection	\$42.50	\$36.13	
1608	Etanercept injection	\$787.64	\$669.49	
1609	Rho(D) immune globulin h, sd	\$40.86	\$34.73	
1612	Daclizumab, parenteral	\$18.00	\$15.30	
1613	Trastuzumab injection	\$170.08	\$144.57	
1630	Hep b ig, im	\$201.53	\$171.30	
1631	Baclofen intrathecal trial	\$138.31	\$117.56	
1633	Alefacept	\$74.95	\$63.71	
1643	Y90 ibritumomab, rx	\$84,801.42	\$72,081.21	
1656	Factor viii fc fusion recomb	\$3.56	\$3.03	
1657	Puraply or puraply am	\$187.42	\$159.31	
1658	Injection, belinostat, 10mg	\$61.90	\$52.62	
1660	Injection, oritavancin	\$44.21	\$37.58	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1661	Gen, neuro, HF, rechg bat	\$0.00	\$0.00	
1662	Inj tedizolid phosphate	\$2.29	\$1.95	
1663	Inj, phenylephrine ketorolac	\$878.15	\$746.43	
1664	Florbetapir f18	\$4,960.80	\$4,216.68	
1666	Tetracyclin injection	\$13.12	\$11.15	
1669	Erythro lactobionate /500 mg	\$106.99	\$90.94	
1670	Tetanus immune globulin inj	\$657.27	\$558.68	
1675	P32 Na phosphate	\$101.95	\$86.66	
1676	P32 chromic phosphate	\$128.05	\$108.84	
1683	Basiliximab	\$6,043.21	\$5,136.73	
1684	Corticotrelin ovine triflutal	\$14.62	\$12.43	
1685	Darbepoetin alfa, non-esrd	\$6.93	\$5.89	
1686	Epoetin alfa, non-esrd	\$24.52	\$20.84	
1687	Digoxin immune fab (ovine)	\$5,881.57	\$4,999.33	
1688	Ethanolamine oleate	\$760.27	\$646.23	
1689	Fomepizole	\$14.00	\$11.90	
1690	Hemin	\$41.15	\$34.98	
1693	Lepirudin	\$22.88	\$19.45	
1694	Ziconotide injection	\$13.19	\$11.21	
1695	Nesiritide injection	\$131.72	\$111.96	
1696	Palifermin injection	\$31.82	\$27.05	
1697	Pegaptanib sodium injection	\$1,898.46	\$1,613.69	
1700	Inj secretin synthetic human	\$62.60	\$53.21	
1701	Treprostinil injection	\$110.23	\$93.70	
1704	Humate-P, inj	\$1.96	\$1.67	
1705	Factor viia	\$3.47	\$2.95	
1709	Azacitidine injection	\$3.80	\$3.23	
1710	Clofarabine injection	\$274.27	\$233.13	
1711	Vantas implant	\$5,631.86	\$4,787.08	
1712	Paclitaxel protein bound	\$18.81	\$15.99	
1738	Oxaliplatin	\$0.49	\$0.42	
1739	Pegademase bovine, 25 iu	\$621.41	\$528.20	
1741	Urofollitropin, 75 iu	\$238.79	\$202.97	
1743	Nandrolone decanoate 50 mg	\$240.05	\$204.04	
1745	Radium ra223 dichloride ther	\$231.75	\$196.99	
1746	Factor xiii recomb a-subunit	\$26.53	\$22.55	
1747	Monovisc inj per dose	\$1,611.27	\$1,369.58	
1748	Inj tbo filgrastim 1 microg	\$1.21	\$1.03	
1761	rolapitant, oral, 1mg	\$3.87	\$3.29	
1809	Injection, alemtuzumab	\$3,155.44	\$2,682.12	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
1822	Inj filgrastim gcsf biosimil	\$1.37	\$1.16	
1823	Injection, dalbavancin	\$26.51	\$22.53	
1824	Ceftaroline fosamil inj	\$4.45	\$3.78	
1825	Ceftazidime and avibactam	\$138.83	\$118.01	
1826	Hyqvia 100mg immunoglobulin	\$23.33	\$19.83	
1827	Factor viii recomb obizur	\$7.13	\$6.06	
1828	Carbidopa levodopa ent 100ml	\$4.03	\$3.43	
1829	Penicillin g benzathine inj	\$19.35	\$16.45	
1832	Dimethyl sulfoxide 50% 50 ml	\$960.70	\$816.60	
1836	Penicillin g procaine inj	\$48.19	\$40.96	
1838	Urokinase 250,000 iu inj	\$473.02	\$402.07	
1839	Oral busulfan	\$42.61	\$36.22	
1842	Leuprolide acetate implant	\$303.26	\$257.77	
1844	Factor viii pegylated recomb	\$3.08	\$2.62	
1845	Tacrol envarsus ex rel oral	\$2.21	\$1.88	
1846	Factor viii nuwiq recomb 1iu	\$2.93	\$2.49	
1847	Inj., infliximab biosimilar	\$180.56	\$153.48	
1848	Artiss fibrin sealant	\$201.02	\$170.87	
1849	Foscarnet sodium injection	\$135.31	\$115.01	
1850	Gamma globulin 1 cc inj	\$64.33	\$54.68	
1851	Gamma globulin > 10 cc inj	\$643.28	\$546.79	
1852	Interferon beta-1a inj	\$867.98	\$737.78	
1853	Minocycline hydrochloride	\$2.72	\$2.31	
1854	Pentobarbital sodium inj	\$85.21	\$72.43	
1855	Pralidoxime chloride inj	\$156.67	\$133.17	
1856	Factor viii recomb noveight	\$2.32	\$1.97	
1857	Inj, factor x, (human), 1iu	\$11.74	\$9.98	
1858	Leuprolide acetate injeciton	\$46.73	\$39.72	
1859	Argatroban nonesrd use 1mg	\$2.92	\$2.48	
1860	Monoclonal antibodies	\$416.20	\$353.77	
1861	Inj., bendeka 1 mg	\$42.23	\$35.90	
1862	Gel-syn injection 0.1 mg	\$3.92	\$3.33	
1863	Inj diclofenac sodium 0.5mg	\$0.29	\$0.25	
1901	New Technology - Level 49 (\$100,001-\$120,000)	\$198,000.90	\$168,300.77	
1902	New Technology - Level 49 (\$100,001-\$120,000)	\$198,000.90	\$168,300.77	
1903	New Technology - Level 50 (\$120,001-\$140,000)	\$234,000.90	\$198,900.77	
1904	New Technology - Level 50 (\$120,001-\$140,000)	\$234,000.90	\$198,900.77	
1905	New Technology - Level 51 (\$140,001-\$160,000)	\$270,000.90	\$229,500.77	
1906	New Technology - Level 51 (\$140,001-\$160,000)	\$270,000.90	\$229,500.77	
2613	Lung bx plug w/del sys	\$0.00	\$0.00	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
2616	Brachytx, non-str, Yttrium-90	\$29,713.91	\$25,256.82	
2623	Cath, translumin, drug-coat	\$0.00	\$0.00	
2632	Iodine I-125 sodium iodide	\$53.87	\$45.79	
2634	Brachytx, non-str, HA, I-125	\$216.94	\$184.40	
2635	Brachytx, non-str, HA, P-103	\$46.26	\$39.32	
2636	Brachy linear, non-str, P-103	\$33.57	\$28.53	
2638	Brachytx, stranded, I-125	\$68.35	\$58.10	
2639	Brachytx, non-stranded, I-125	\$64.26	\$54.62	
2640	Brachytx, stranded, P-103	\$131.80	\$112.03	
2641	Brachytx, non-stranded, P-103	\$117.81	\$100.14	
2642	Brachytx, stranded, C-131	\$157.70	\$134.05	
2643	Brachytx, non-stranded, C-131	\$106.54	\$90.56	
2645	Brachytx, non-str, Gold-198	\$243.54	\$207.01	
2646	Brachytx, non-str, HDR Ir-192	\$506.84	\$430.81	
2647	Brachytx, NS, Non-HDR Ir-192	\$60.89	\$51.76	
2648	Brachytx planar, p-103	\$8.44	\$7.17	
2698	Brachytx, stranded, NOS	\$68.35	\$58.10	
2699	Brachytx, non-stranded, NOS	\$33.57	\$28.53	
2731	Immune globulin, powder	\$58.75	\$49.94	
2770	Quinupristin/dalfopristin	\$786.19	\$668.26	
3041	Bivalirudin	\$2.66	\$2.26	
4001	Echo guidance radiotherapy	\$39.40	\$33.49	
4002	Stereoscopic x-ray guidance	\$100.78	\$85.66	
4003	Radiation treatment delivery, MeV <= 5; simple	\$347.54	\$295.41	
4004	Radiation treatment delivery, 6-10 MeV; simple	\$263.57	\$224.03	
4005	Radiation treatment delivery, 11-19 MeV; simple	\$262.93	\$223.49	
4006	Radiation treatment delivery, MeV >=20; simple	\$262.93	\$223.49	
4007	Radiation treatment delivery, MeV <=5; intermediate	\$543.28	\$461.79	
4008	Radiation treatment delivery, 6-10 MeV; intermediate	\$363.04	\$308.58	
4009	Radiation treatment delivery, 11-19 MeV; intermediate	\$361.76	\$307.50	
4010	Radiation treatment delivery, MeV >=20; intermediate	\$360.47	\$306.40	
4011	Radiation treatment delivery, MeV <=5; complex	\$526.48	\$447.51	
4012	Radiation treatment delivery, 6-10 MeV; complex	\$480.62	\$408.53	
4013	Radiation treatment delivery, 11-19 MeV; complex	\$481.27	\$409.08	
4014	Radiation treatment delivery, MeV >=20; complex	\$481.91	\$409.62	
5012	Clinic Visits and Related Services	\$191.90	\$163.12	
5021	Level 1 Type A ED Visits	\$110.47	N/A	
5022	Level 2 Type A ED Visits	\$200.65	N/A	
5023	Level 3 Type A ED Visits	\$362.25	N/A	
5024	Level 4 Type A ED Visits	\$598.34	N/A	

Exhibit #4 – Proposed

Hospital Outpatient APC Codes and Values

Effective for Dates of Service on and After 1/1/2018

APC	Group Title	Hospitals	ASC	Notes
5025	Level 5 Type A ED Visits	\$879.73	N/A	
5031	Level 1 Type B ED Visits	\$153.23	N/A	
5032	Level 2 Type B ED Visits	\$136.03	N/A	
5033	Level 3 Type B ED Visits	\$225.00	N/A	
5034	Level 4 Type B ED Visits	\$321.39	N/A	
5035	Level 5 Type B ED Visits	\$662.20	N/A	
5041	Critical Care	\$1,236.91	N/A	
5045	Trauma Response with Critical Care	\$0.00	N/A	See Rule 18-6(J) for Trauma Activation Fees
5051	Level 1 Skin Procedures	\$275.62	\$234.28	
5052	Level 2 Skin Procedures	\$526.72	\$447.71	
5053	Level 3 Skin Procedures	\$815.58	\$693.24	
5054	Level 4 Skin Procedures	\$2,569.99	\$2,184.49	
5055	Level 5 Skin Procedures	\$4,508.44	\$3,832.17	
5061	Hyperbaric Oxygen	\$198.43	\$168.67	
5071	Level 1 Excision/ Biopsy/ Incision and Drainage	\$970.40	\$824.84	
5072	Level 2 Excision/ Biopsy/ Incision and Drainage	\$2,225.92	\$1,892.03	
5073	Level 3 Excision/ Biopsy/ Incision and Drainage	\$3,868.04	\$3,287.83	
5091	Level 1 Breast/Lymphatic Surgery and Related Procedures	\$4,499.06	\$3,824.20	
5092	Level 2 Breast/Lymphatic Surgery and Related Procedures	\$7,955.03	\$6,761.78	
5093	Level 3 Breast/Lymphatic Surgery and Related Procedures	\$11,675.43	\$9,924.12	
5094	Level 4 Breast/Lymphatic Surgery and Related Procedures	\$18,066.69	\$15,356.69	
5101	Level 1 Strapping and Cast Application	\$225.27	\$191.48	
5102	Level 2 Strapping and Cast Application	\$397.35	\$337.75	
5111	Level 1 Musculoskeletal Procedures	\$359.69	\$305.74	
5112	Level 2 Musculoskeletal Procedures	\$2,191.36	\$1,862.66	
5113	Level 3 Musculoskeletal Procedures	\$4,389.01	\$3,730.66	
5114	Level 4 Musculoskeletal Procedures	\$9,398.83	\$7,989.01	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
5115	Level 5 Musculoskeletal Procedures	\$17,210.21	\$14,628.68	
5116	Level 6 Musculoskeletal Procedures	\$26,467.43	\$22,497.32	
5151	Level 1 Airway Endoscopy	\$263.16	\$223.69	
5152	Level 2 Airway Endoscopy	\$651.46	\$553.74	
5153	Level 3 Airway Endoscopy	\$2,285.62	\$1,942.78	
5154	Level 4 Airway Endoscopy	\$4,376.21	\$3,719.78	
5155	Level 5 Airway Endoscopy	\$7,853.31	\$6,675.31	
5161	Level 1 ENT Procedures	\$318.76	\$270.95	
5162	Level 2 ENT Procedures	\$796.72	\$677.21	
5163	Level 3 ENT Procedures	\$1,869.39	\$1,588.98	
5164	Level 4 ENT Procedures	\$3,912.64	\$3,325.74	
5165	Level 5 ENT Procedures	\$7,435.69	\$6,320.34	
5166	Cochlear Implant Procedure	\$57,306.58	\$48,710.59	
5181	Level 1 Vascular Procedures	\$1,231.43	\$1,046.72	
5182	Level 2 Vascular Procedures	\$4,249.08	\$3,611.72	
5183	Level 3 Vascular Procedures	\$7,063.70	\$6,004.15	
5191	Level 1 Endovascular Procedures	\$5,100.39	\$4,335.33	
5192	Level 2 Endovascular Procedures	\$8,685.36	\$7,382.56	
5193	Level 3 Endovascular Procedures	\$17,554.37	\$14,921.21	
5194	Level 4 Endovascular Procedures	\$26,607.85	\$22,616.67	
5200	Implantation Wireless PA Pressure Monitor	\$53,131.63	\$45,161.89	
5211	Level 1 Electrophysiologic Procedures	\$1,560.33	\$1,326.28	
5212	Level 2 Electrophysiologic Procedures	\$9,011.52	\$7,659.79	
5213	Level 3 Electrophysiologic Procedures	\$30,213.41	\$25,681.40	
5221	Level 1 Pacemaker and Similar Procedures	\$4,607.26	\$3,916.17	
5222	Level 2 Pacemaker and Similar Procedures	\$12,557.83	\$10,674.16	
5223	Level 3 Pacemaker and Similar Procedures	\$16,944.57	\$14,402.88	
5224	Level 4 Pacemaker and Similar Procedures	\$30,180.35	\$25,653.30	
5231	Level 1 ICD and Similar Procedures	\$39,599.96	\$33,659.97	
5232	Level 2 ICD and Similar Procedures	\$54,948.98	\$46,706.63	
5241	Level 1 Blood Product Exchange and Related Services	\$638.17	\$542.44	
5242	Level 2 Blood Product Exchange and Related Services	\$1,977.62	\$1,680.98	
5243	Level 3 Blood Product Exchange and Related Services	\$5,738.09	\$4,877.38	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
5244	Level 4 Blood Product Exchange and Related Services	\$49,976.05	\$42,479.64	
5301	Level 1 Upper GI Procedures	\$1,259.62	\$1,070.68	
5302	Level 2 Upper GI Procedures	\$2,402.69	\$2,042.29	
5303	Level 3 Upper GI Procedures	\$4,519.26	\$3,841.37	
5311	Level 1 Lower GI Procedures	\$1,201.81	\$1,021.54	
5312	Level 2 Lower GI Procedures	\$1,579.68	\$1,342.73	
5313	Level 3 Lower GI Procedures	\$3,901.52	\$3,316.29	
5331	Complex GI Procedures	\$7,093.10	\$6,029.14	
5341	Abdominal/Peritoneal/Biliary and Related Procedures	\$5,152.93	\$4,379.99	
5361	Level 1 Laparoscopy and Related Services	\$7,558.43	\$6,424.67	
5362	Level 2 Laparoscopy and Related Services	\$12,545.71	\$10,663.85	
5371	Level 1 Urology and Related Services	\$388.87	\$330.54	
5372	Level 2 Urology and Related Services	\$988.99	\$840.64	
5373	Level 3 Urology and Related Services	\$2,960.39	\$2,516.33	
5374	Level 4 Urology and Related Services	\$4,576.61	\$3,890.12	
5375	Level 5 Urology and Related Services	\$6,271.22	\$5,330.54	
5376	Level 6 Urology and Related Services	\$13,414.79	\$11,402.57	
5377	Level 7 Urology and Related Services	\$25,854.50	\$21,976.33	
5401	Dialysis	\$994.64	\$845.44	
5411	Level 1 Gynecologic Procedures	\$273.98	\$232.88	
5412	Level 2 Gynecologic Procedures	\$496.37	\$421.91	
5413	Level 3 Gynecologic Procedures	\$1,198.57	\$1,018.78	
5414	Level 4 Gynecologic Procedures	\$3,753.85	\$3,190.77	
5415	Level 5 Gynecologic Procedures	\$6,859.53	\$5,830.60	
5416	Level 6 Gynecologic Procedures	\$10,558.93	\$8,975.09	
5431	Level 1 Nerve Procedures	\$2,814.16	\$2,392.04	
5432	Level 2 Nerve Procedures	\$7,473.35	\$6,352.35	
5441	Level 1 Nerve Injections	\$415.80	\$353.43	
5442	Level 2 Nerve Injections	\$912.94	\$776.00	
5443	Level 3 Nerve Injections	\$1,150.07	\$977.56	
5461	Level 1 Neurostimulator and Related Procedures	\$4,842.83	\$4,116.41	
5462	Level 2 Neurostimulator and Related Procedures	\$10,341.20	\$8,790.02	
5463	Level 3 Neurostimulator and Related Procedures	\$32,046.08	\$27,239.17	
5464	Level 4 Neurostimulator and Related Procedures	\$48,684.80	\$41,382.08	
5471	Implantation of Drug Infusion Device	\$28,120.63	\$23,902.54	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
5481	Laser Eye Procedures	\$845.77	\$718.90	
5491	Level 1 Intraocular Procedures	\$3,283.83	\$2,791.26	
5492	Level 2 Intraocular Procedures	\$6,153.77	\$5,230.70	
5493	Level 3 Intraocular Procedures	\$14,762.93	\$12,548.49	
5494	Level 4 Intraocular Procedures	\$21,685.10	\$18,432.34	
5495	Level 5 Intraocular Procedures	\$34,185.15	\$29,057.38	
5501	Level 1 Extraocular, Repair, and Plastic Eye Procedures	\$483.28	\$410.79	
5502	Level 2 Extraocular, Repair, and Plastic Eye Procedures	\$1,394.23	\$1,185.10	
5503	Level 3 Extraocular, Repair, and Plastic Eye Procedures	\$3,062.66	\$2,603.26	
5504	Level 4 Extraocular, Repair, and Plastic Eye Procedures	\$4,994.69	\$4,245.49	
5521	Level 1 Imaging without Contrast	\$107.75	\$91.59	
5522	Level 2 Imaging without Contrast	\$202.91	\$172.47	
5523	Level 3 Imaging without Contrast	\$406.64	\$345.64	
5524	Level 4 Imaging without Contrast	\$809.42	\$688.01	
5571	Level 1 Imaging with Contrast	\$477.04	\$405.48	
5572	Level 2 Imaging with Contrast	\$767.74	\$652.58	
5573	Level 3 Imaging with Contrast	\$1,182.44	\$1,005.07	
5591	Level 1 Nuclear Medicine and Related Services	\$599.54	\$509.61	
5592	Level 2 Nuclear Medicine and Related Services	\$772.43	\$656.57	
5593	Level 3 Nuclear Medicine and Related Services	\$2,050.09	\$1,742.58	
5594	Level 4 Nuclear Medicine and Related Services	\$2,378.75	\$2,021.94	
5611	Level 1 Therapeutic Radiation Treatment Preparation	\$211.66	\$179.91	
5612	Level 2 Therapeutic Radiation Treatment Preparation	\$560.83	\$476.71	
5613	Level 3 Therapeutic Radiation Treatment Preparation	\$1,919.23	\$1,631.35	
5621	Level 1 Radiation Therapy	\$205.83	\$174.96	
5622	Level 2 Radiation Therapy	\$368.12	\$312.90	
5623	Level 3 Radiation Therapy	\$890.33	\$756.78	
5624	Level 4 Radiation Therapy	\$1,329.53	\$1,130.10	
5625	Level 5 Radiation Therapy	\$1,789.42	\$1,521.01	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
5626	Level 6 Radiation Therapy	\$2,972.32	\$2,526.47	
5627	Level 7 Radiation Therapy	\$13,420.78	\$11,407.66	
5661	Therapeutic Nuclear Medicine	\$390.02	\$331.52	
5671	Level 1 Pathology	\$71.46	\$60.74	
5672	Level 2 Pathology	\$186.98	\$158.93	
5673	Level 3 Pathology	\$331.22	\$281.54	
5674	Level 4 Pathology	\$817.49	\$694.87	
5691	Level 1 Drug Administration	\$62.60	\$53.21	
5692	Level 2 Drug Administration	\$95.71	\$81.35	
5693	Level 3 Drug Administration	\$323.59	\$275.05	
5694	Level 4 Drug Administration	\$503.01	\$427.56	
5721	Level 1 Diagnostic Tests and Related Services	\$228.78	\$194.46	
5722	Level 2 Diagnostic Tests and Related Services	\$418.16	\$355.44	
5723	Level 3 Diagnostic Tests and Related Services	\$748.57	\$636.28	
5724	Level 4 Diagnostic Tests and Related Services	\$1,556.17	\$1,322.74	
5731	Level 1 Minor Procedures	\$22.72	\$19.31	
5732	Level 2 Minor Procedures	\$51.08	\$43.42	
5733	Level 3 Minor Procedures	\$98.19	\$83.46	
5734	Level 4 Minor Procedures	\$180.04	\$153.03	
5735	Level 5 Minor Procedures	\$474.50	\$403.33	
5741	Level 1 Electronic Analysis of Devices	\$63.27	\$53.78	
5742	Level 2 Electronic Analysis of Devices	\$196.60	\$167.11	
5743	Level 3 Electronic Analysis of Devices	\$454.73	\$386.52	
5771	Cardiac Rehabilitation	\$198.40	\$168.64	
5781	Resuscitation and Cardioversion	\$866.41	\$736.45	
5791	Pulmonary Treatment	\$291.74	\$247.98	
5801	Ventilation Initiation and Management	\$763.11	\$648.64	
5811	Manipulation Therapy	\$44.32	N/A	
5821	Level 1 Health and Behavior Services	\$45.41	N/A	
5822	Level 2 Health and Behavior Services	\$126.47	N/A	
5823	Level 3 Health and Behavior Services	\$226.82	N/A	
5853	Partial Hospitalization (3 or more services) for CMHCs	\$218.75	N/A	
5863	Partial Hospitalization (3 or more services) for Hospital-based PHPs	\$373.25	N/A	
5871	Dental Procedures	\$923.53	\$785.00	
5881	Ancillary Outpatient Services When Patient Dies	\$12,157.83	\$10,334.16	
7000	Amifostine	\$934.22	\$794.09	
7011	Oprelvekin injection	\$841.00	\$714.85	
7034	Somatropin injection	\$146.86	\$124.83	
7035	Teniposide	\$4,667.02	\$3,966.97	
7041	Tirofiban HCl	\$17.66	\$15.01	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
7043	Infliximab not biosimil 10mg	\$154.06	\$130.95	
7046	Doxorubicin inj 10mg	\$734.67	\$624.47	
7048	Alteplase recombinant	\$146.43	\$124.47	
7308	Aminolevulinic acid hcl top	\$662.06	\$562.75	
8001	LDR Prostate Brachytherapy Composite	\$6,300.45	\$5,355.38	
8004	Ultrasound Composite	\$519.05	\$441.19	
8005	CT and CTA without Contrast Composite	\$491.56	\$417.83	
8006	CT and CTA with Contrast Composite	\$880.87	\$748.74	
8007	MRI and MRA without Contrast Composite	\$993.15	\$844.18	
8008	MRI and MRA with Contrast Composite	\$1,533.04	\$1,303.08	
8010	Mental Health Services Composite	\$373.25	\$317.26	
8011	Comprehensive Observation Services	\$4,000.75	\$3,400.64	
9002	Tenecteplase injection	\$184.36	\$156.71	
9003	Palivizumab	\$317.43	\$269.82	
9005	Retepase injection	\$4,143.44	\$3,521.92	
9006	Tacrolimus injection	\$307.53	\$261.40	
9012	Arsenic trioxide injection	\$116.87	\$99.34	
9018	Inj, rimabotulinumtoxinB	\$21.15	\$17.98	
9019	Caspofungin acetate	\$19.01	\$16.16	
9024	Amphotericin b lipid complex	\$23.72	\$20.16	
9032	Baclofen 10 MG injection	\$303.64	\$258.09	
9033	Cidofovir injection	\$939.82	\$798.85	
9038	Inj estrogen conjugate	\$501.10	\$425.94	
9042	Glucagon hydrochloride	\$361.48	\$307.26	
9043	Afstyla Factor VIII recomb	\$2.56	\$2.18	
9044	Ibutilide fumarate injection	\$346.50	\$294.53	
9052	Fluciclovine F-18	\$701.19	\$596.01	
9056	Gallium Ga-68	\$120.13	\$102.11	
9058	Buprenorphine implant 74.2mg	\$2,269.06	\$1,928.70	
9059	Vonvendi inj 1 iu vwf:rco	\$4.09	\$3.48	
9060	Diazoxide injection	\$1,242.05	\$1,055.74	
9061	Inj milrinone lactate / 5 mg	\$4.46	\$3.79	
9062	Topotecan injection	\$2.27	\$1.93	
9104	Antithymocyte globuln rabbit	\$1,237.99	\$1,052.29	
9108	Thyrotropin injection	\$2,820.47	\$2,397.40	
9119	Injection, pegfilgrastim 6mg	\$7,544.41	\$6,412.75	
9120	Injection, Fulvestrant	\$173.23	\$147.25	
9122	Triptorelin pamoate	\$657.79	\$559.12	
9124	Daptomycin injection	\$1.22	\$1.04	
9125	Risperidone, long acting	\$14.71	\$12.50	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
9126	Natalizumab injection	\$33.84	\$28.76	
9130	Inj, Imm Glob Bivigam, 500mg	\$68.96	\$58.62	
9131	Inj, Ado-trastuzumab Emt 1mg	\$53.14	\$45.17	
9132	Kcentra, per i.u.	\$3.33	\$2.83	
9133	Rabies ig, im/sc	\$534.08	\$453.97	
9134	Rabies ig, heat treated	\$533.41	\$453.40	
9135	Varicella-zoster ig, im	\$2,215.76	\$1,883.40	
9139	Rabies vaccine, im	\$485.84	\$412.96	
9140	Rabies vaccine, id	\$253.84	\$215.76	
9171	Factor ix idelvion inj	\$7.47	\$6.35	
9207	Bortezomib injection	\$83.25	\$70.76	
9208	Agalsidase beta injection	\$298.91	\$254.07	
9209	Laronidase injection	\$55.10	\$46.84	
9210	Palonosetron hcl	\$40.73	\$34.62	
9213	Pemetrexed injection	\$115.27	\$97.98	
9214	Bevacizumab injection	\$132.48	\$112.61	
9215	Cetuximab injection	\$101.50	\$86.28	
9217	Leuprolide acetate suspnson	\$388.82	\$330.50	
9224	Galsulfase injection	\$664.96	\$565.22	
9225	Fluocinolone acetonide implt	\$36,198.70	\$30,768.90	
9228	Tigecycline injection	\$5.72	\$4.86	
9229	Ibandronate sodium injection	\$140.92	\$119.78	
9230	Abatacept injection	\$84.35	\$71.70	
9231	Decitabine injection	\$32.33	\$27.48	
9232	Idursulfase injection	\$939.62	\$798.68	
9233	Ranibizumab injection	\$675.38	\$574.07	
9234	Alglucosidase alfa injection	\$372.06	\$316.25	
9235	Panitumumab injection	\$193.88	\$164.80	
9236	Eculizumab injection	\$407.93	\$346.74	
9237	Inj, lanreotide acetate	\$97.22	\$82.64	
9240	Injection, ixabepilone	\$135.65	\$115.30	
9242	Injection, fosaprepitant	\$3.49	\$2.97	
9243	Inj., treanda 1 mg	\$50.35	\$42.80	
9245	Romiplostim injection	\$117.05	\$99.49	
9248	Inj, clevidipine butyrate	\$3.96	\$3.37	
9251	C1 esterase inhibitor inj	\$99.95	\$84.96	
9252	Plerixafor injection	\$561.78	\$477.51	
9253	Temozolomide injection	\$16.11	\$13.69	
9255	Paliperidone palmitate inj	\$17.10	\$14.54	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
9256	Dexamethasone intra implant	\$361.40	\$307.19	
9258	Telavancin injection	\$9.00	\$7.65	
9259	Pralatrexate injection	\$429.62	\$365.18	
9260	Ofatumumab injection	\$96.10	\$81.69	
9261	Ustekinumab sub cu inj, 1 mg	\$313.56	\$266.53	
9263	Ecallantide injection	\$758.92	\$645.08	
9264	Tocilizumab injection	\$7.60	\$6.46	
9265	Romidepsin injection	\$571.64	\$485.89	
9269	C-1 esterase, berinert	\$87.66	\$74.51	
9270	Gammaflex IVIG	\$74.92	\$63.68	
9271	Velaglucerase alfa	\$616.86	\$524.33	
9272	Inj, denosumab	\$29.93	\$25.44	
9273	Sipuleucel-T auto CD54+	\$71,854.22	\$61,076.09	
9274	Crotalidae Poly Immune Fab	\$5,165.86	\$4,390.98	
9276	Cabazitaxel injection	\$281.99	\$239.69	
9278	Incobotulinumtoxin A	\$8.87	\$7.54	
9281	Injection, pegloticase	\$3,278.75	\$2,786.94	
9284	Ipilimumab injection	\$260.39	\$221.33	
9286	Belatacept injection	\$6.89	\$5.86	
9287	Brentuximab vedotin inj	\$241.47	\$205.25	
9289	Erwinaze injection	\$724.93	\$616.19	
9293	Injection, glucarpidase	\$511.60	\$434.86	
9294	Inj, Taliglucerase Alfa 10 u	\$72.72	\$61.81	
9295	Injection, Carfilzomib, 1 mg	\$57.96	\$49.27	
9296	Inj, ziv-aflibercept, 1mg	\$14.62	\$12.43	
9297	Inj, Omacetaxine Mep, 0.01mg	\$4.90	\$4.17	
9298	Inj, Ocriplasmin, 0.125 mg	\$1,884.15	\$1,601.53	
9300	Omalizumab injection	\$60.50	\$51.43	
9441	Inj ferric carboxymaltos 1mg	\$1.91	\$1.62	
9445	Injection, ruconest	\$50.29	\$42.75	
9448	Netupitant palonosetron oral	\$800.84	\$680.71	
9449	Injection, blinatumomab	\$177.89	\$151.21	
9450	Fluocinol acet intravit imp	\$883.71	\$751.15	
9451	Injection, peramivir	\$2.92	\$2.48	
9452	Inj ceftolozane tazobactam	\$8.53	\$7.25	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
9453	Injection, nivolumab	\$47.57	\$40.43	
9454	Inj, pasireotide long acting	\$469.37	\$398.96	
9455	Injection, siltuximab	\$162.04	\$137.73	
9456	Injection, isavuconazonium	\$1.13	\$0.96	
9457	Inj sulf hexa lipid microsph	\$38.90	\$33.07	
9458	florbetaben f18 diagnostic	\$5,342.40	\$4,541.04	
9459	flutemetamol f18 diagnostic	\$6,296.40	\$5,351.94	
9460	Injection, cangrelor	\$27.67	\$23.52	
9461	Choline c-11, diagnostic, per study dose up to 20 millicuries	\$10,260.00	\$8,721.00	
9470	Aripiprazole lauroxil 1mg	\$4.30	\$3.66	
9471	Hymovis injection 1 mg	\$30.17	\$25.64	
9472	Inj talimogene laherparepvec	\$82.87	\$70.44	
9473	Injection, mepolizumab, 1mg	\$47.97	\$40.77	
9474	Inj irinotecan liposome 1 mg	\$71.06	\$60.40	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
9475	Injection, necitumumab, 1 mg	\$9.45	\$8.03	
9476	Injection, daratumumab 10 mg	\$86.60	\$73.61	
9477	Injection, elotuzumab, 1mg	\$11.18	\$9.50	
9478	Inj sebelipase alfa 1 mg	\$954.00	\$810.90	
9479	Instill, ciprofloxacin otic	\$53.91	\$45.82	
9480	Injection trabectedin 0.1mg	\$510.19	\$433.66	
9481	Injection, reslizumab	\$15.93	\$13.54	
9482	Sotalol hydrochloride IV	\$17.98	\$15.28	
9483	Injection, atezolizumab	\$136.12	\$115.70	
9484	Injection, eteplirsen	\$305.28	\$259.49	
9485	Injection, olaratumab	\$90.05	\$76.54	
9486	Inj, granisetron ext	\$9.34	\$7.94	
9487	Ustekinumab IV inj, 1 mg	\$23.00	\$19.55	
9488	Conivaptan HCL	\$53.87	\$45.79	
9497	Loxapine, inhalation powder	\$270.07	\$229.56	

Exhibit #4 – Proposed**Hospital Outpatient APC Codes and Values****Effective for Dates of Service on and After 1/1/2018**

APC	Group Title	Hospitals	ASC	Notes
9500	Platelets, irradiated	\$301.36	\$256.16	
9501	Platelet pheres leukoreduced	\$899.91	\$764.92	
9502	Platelet pheresis irradiated	\$1,001.84	\$851.56	
9503	Fr frz plasma donor retested	\$120.94	\$102.80	
9504	RBC deglycerolized	\$690.44	\$586.87	
9505	RBC irradiated	\$394.11	\$334.99	
9507	Platelets, pheresis	\$741.78	\$630.51	
9508	Plasma 1 donor frz w/in 8 hr	\$132.71	\$112.80	
9509	Frozen plasma, pooled, sd	\$120.28	\$102.24	
9510	Whole blood for transfusion	\$279.92	\$237.93	
9511	Cryoprecipitate each unit	\$95.45	\$81.13	
9512	RBC leukocytes reduced	\$334.48	\$284.31	
9513	Plasma, frz between 8-24hour	\$133.20	\$113.22	
9514	Plasma protein fract,5%,50ml	\$35.57	\$30.23	
9515	Platelets, each unit	\$173.68	\$147.63	
9516	Plaelet rich plasma unit	\$237.02	\$201.47	
9517	Red blood cells unit	\$256.25	\$217.81	
9518	Washed red blood cells unit	\$619.87	\$526.89	
9519	Plasmaprotein fract,5%,250ml	\$166.81	\$141.79	
9520	Blood split unit	\$237.56	\$201.93	
9521	Platelets leukoreduced irrad	\$291.76	\$248.00	
9522	RBC leukoreduced irradiated	\$479.30	\$407.41	
9523	Cryoprecipitatereducedplasma	\$113.92	\$96.83	
9524	Blood, l/r, cmv-neg	\$371.66	\$315.91	
9525	Platelets, hla-m, l/r, unit	\$1,328.65	\$1,129.35	
9526	Platelets leukocytes reduced	\$226.31	\$192.36	
9527	Blood, l/r, froz/degly/wash	\$496.04	\$421.63	
9528	Plt, aph/pher, l/r, cmv-neg	\$759.60	\$645.66	
9529	Blood, l/r, irradiated	\$223.87	\$190.29	
9530	Plate pheres leukoredu irrad	\$1,165.32	\$990.52	
9531	Plt, pher, l/r cmv-neg, irr	\$1,114.00	\$946.90	
9532	RBC, frz/deg/wsh, l/r, irrad	\$373.41	\$317.40	
9533	RBC, l/r, cmv-neg, irrad	\$450.18	\$382.65	
9534	Pathogen reduced plasma pool	\$133.20	\$113.22	
9535	Pathogen reduced plasma sing	\$132.71	\$112.80	
9536	Pathogen reduced platelets	\$1,165.32	\$990.52	

Exhibit #5 - Proposed**Rural Health Clinics**

find the most updated list at: <https://www.colorado.gov/pacific/cdphe/find-and-compare-facilities>
(effective 1/1/2018)

Facility	Address	City	State	Zip	County	Contact
AKRON CLINIC	82 MAIN	Akron	CO	80720	Washington	Phone: (970)345-6336, Fax: (970)345-6576
ARKANSAS VALLEY FAMILY PRACTICE, LLC	2317 SAN JUAN AVE	La Junta	CO	81050	Otero	Phone: (719)383-2325, Fax: (719)383-2327
BANNER HEALTH CENTER STERLING	102 HAYS AVE	Sterling	CO	80751	Logan	Phone: (970)521-3223, Fax: (970)521-3266
BASIN CLINIC	421 WEST ADAMS ROAD	Naturita	CO	80723	Montrose	Phone: (970)865-2665, Fax: (970)825-2674
BRUSH FAMILY CLINIC	2400 W EDISON	Brush	CO	81211	Morgan	Phone: (970)842-6740, Fax: (970)842-6241
BUENA VISTA HEALTH CENTER	28374 COUNTY ROAD 317	Buena Vista	CO	81211	Chaffee	Phone: (719)395-9048, Fax: (719)395-9064
BUTTON FAMILY PRACTICE	715 SOUTH 9TH STREET	Canon City	CO	81212	Fremont	Phone: (719)269-8820, Fax: (719)204-0230
CENTENNIAL FAMILY HEALTH CENTER	319 MAIN STREET	Ordway	CO	81063	Crowley	Phone: (719)267-3503, Fax: (719)267-4153
CORTEZ PRIMARY CARE CLINIC	118 NORTH CHESTNUT	Cortez	CO	81321	Montezuma	Phone: (970)564-9777, Fax: (970)564-8833
CREEDE FAMILY PRACTICE OF RIO GRANDE HOSPITAL	802 RIO GRANDE AVENUE	Creede	CO	81130	Mineral	Phone: (719)658-0929, Fax: (719)657-2851
CUSTER COUNTY MEDICAL CENTER	704 EDWARDS	Westcliffe	CO	81252	Custer	Phone: (719)783-2380, Fax: (719)783-2377
EADS MEDICAL CLINIC	1211 LUTHER STREET	Eads	CO	81036	Kiowa	Phone: (719)438-2251, Fax: (719)438-2254
EASTERN PLAINS MEDICAL CLINIC OF	560 CRYSTOLA STREET	Calhan	CO	80808	El Paso	Phone: (719)347-0100,

Facility	Address	City	State	Zip	County	Contact
CALHAN						Fax: (719)347-0551
FAMILY CARE CLINIC	615 FAIRHURST	Sterling	CO	80751	Logan	Phone: (970)521-3223, Fax: (970)521-3266
FAMILY PRACTICE OF HOLYOKE	1001 EAST JOHNSON STREET	Holyoke	CO	80734	Phillips	Phone: (970)854-2500, Fax: (970)854-3440
FLORENCE MEDICAL CENTER	501 W 5TH ST	Florence	CO	81226	Fremont	Phone: (719)784-4816, Fax: (719)784-6014
GRAND RIVER HEALTH CLINIC WEST	201 SIPPERELLE DRIVE	Parachute	CO	81635	Garfield	Phone: (970)285-7046, Fax: (970)285-6064
GRAND RIVER PRIMARY CARE	501 AIRPORT ROAD	Rifle	CO	81650	Garfield	Phone: (970)625-1100, Fax: (970)625-0725
KIT CARSON CLINIC	102 EAST 2ND AVENUE	Kit Carson	CO	80825	Cheyenne	Phone: (719)962-3501, Fax: (719)962-3403
LAKE CITY AREA MEDICAL CENTER	700 N HENSON STREET	Lake City	CO	81235	Hinsdale	Phone: (970)944-2331, Fax: (970)944-2320
LAMAR MEDICAL CLINIC	403 KENDALL DRIVE	Lamar	CO	81052	Prowers	Phone: (719)336-6767, Fax: (719)336-7217
MANCOS VALLEY HEALTH CENTER	111 RAILROAD AVE	Mancos	CO	81328	Montezuma	Phone: (970)564-2104, Fax: (970)564-2134
MEEKER FAMILY HEALTH CENTER	345 CLEVELAND STREET	Meeker	CO	81641	Rio Blanco	Phone: (970)878-4014, Fax: (970)878-3285
MONTE VISTA RHC OF RIO GRANDE HOSPITAL	1033 2ND AVENUE	Monte Vista	CO	81144	Rio Grande	Phone: (719)852-8827, Fax: (719)852-2739
MT SAN RAFAEL HOSPITAL HEALTH CLINIC	400 BENEDICTA STE A	Trinidad	CO	81082	Las Animas	Phone: (719)846-2206, Fax: (719)846-7823
NORTH PARK MEDICAL CENTER - WALDEN	350 MCKINLEY STREET	Walden	CO	80480	Jackson	Phone: (970)723-4255, Fax: (970)723-4268
PAGOSA MOUNTAIN CLINIC	95 SOUTH PAGOSA BLVD	Pagosa Springs	CO	81147	Archuleta	Phone: (970)731-3700, Fax: (970)731-3707
PARKE HEALTH CLINIC	182 16TH ST	Burlington	CO	80807	Kit Carson	Phone: (719)346-9481, Fax: (719)346-9485
PEDIATRIC ASSOCIATION OF CANON CITY	1335 PHAY AVENUE, SUITE A	Canon City	CO	81212	Fremont	Phone: (719)269-1727,

Facility	Address	City	State	Zip	County	Contact
						Fax: (719)269-1730
PRAIRIE VIEW RURAL HEALTH CLINIC	615 WEST 5TH NORTH	Cheyenne Wells	CO	80810	Cheyenne	Phone: (719)767-5669, Fax: (719)767-5098
RIO GRANDE HOSPITAL CLINIC	0310C COUNTY RD 14	Del Norte	CO	81132	Rio Grande	Phone: (719)657-2418, Fax: (719)658-3001
ROCKY FORD FAMILY HEALTH CENTER	1014 ELM AVENUE	Rocky Ford	CO	81067	Otero	Phone: (719)254-7421, Fax: (719)254-6966
SABATINI PEDIATRICS PC	612 YALE PLACE	Canon City	CO	81212	Fremont	Phone: (719)275-3442, Fax: (719)275-2306
SAN LUIS VALLEY HEALTH ANTONITO CLINIC	115 MAIN STREET	Antonito	CO	81120	Conejos	Phone: (719)376-2308, Fax: (719)376-2395
SAN LUIS VALLEY LA JARA MEDICAL CLINIC	509 MAIN STREET	La Jara	CO	81140	Conejos	Phone: (719)274-5000, Fax: (719)274-4111
SOUTHEAST COLORADO PHYSICIANS CLINIC	900 CHURCH STREET	Springfield	CO	81073	Baca	Phone: (719)523-6628, Fax: (719)523-4513
SOUTHWEST MEMORIAL PRIMARY CARE	33 NORTH ELM STREET	Cortez	CO	81321	Montezuma	Phone: (970)565-8556, Fax: (970)564-1134
SOUTHWEST SCHOOL-BASED HEALTH CENTER	418 S SLIGO STREET	Cortez	CO	81321	Montezuma	Phone: (970)564-2104, Fax: (970)564-2134
SOUTHWEST WALK-IN CARE	2095 NORTH DOLORES ROAD, STE C	Cortez	CO	81321	Montezuma	Phone: (970)564-1037, Fax: (970)564-1041
SPANISH PEAKS FAMILY CLINIC	23400 US HIGHWAY 160	Walsenburg	CO	81089	Huerfano	Phone: (719)738-4591, Fax: (719)738-4553
STRATTON MEDICAL CLINIC	500 NEBRASKA AVENUE	Stratton	CO	80836	Kit Carson	Phone: (719)348-4650, Fax: (719)348-4653
SURFACE CREEK FAMILY PRACTICE	255 SW 8TH AVE	Cedaredge	CO	81413	Delta	Phone: (970)856-3146, Fax: (970)856-4385
VALLEY MEDICAL CLINIC	116 E NINTH STREET	Julesburg	CO	80737	Sedgwick	Phone: (970)474-3376, Fax: (970)474-2461
WALSH MEDICAL CLINIC	137 KANSAS STREET	Walsh	CO	81090	Baca	Phone: (719)324-5253, Fax: (719)324-5621
WASHINGTON COUNTY CLINIC	482 ADAMS AVENUE	Akron	CO	80720	Washington	Phone: (970)345-2262,

Facility	Address	City	State	Zip	County	Contact
						Fax: (970)345-2265
YUMA CLINIC	1000 W 8TH AVENUE	Yuma	CO	80759	Yuma	Phone: (970)848-4676, Fax: (970)848-4952

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D0120	\$67.15
D0140	\$112.29
D0145	\$104.19
D0150	\$118.08
D0160	\$237.31
D0170	\$78.72
D0171	\$71.25
D0180	\$128.50
D0190	\$62.00
D0191	\$44.00
D0210	\$187.18
D0220	\$37.68
D0230	\$34.03
D0240	\$58.35
D0250	\$71.72
D0251	BR
D0270	\$38.89
D0272	\$63.21
D0273	\$76.58
D0274	\$88.74
D0277	\$133.71
D0310	\$556.70
D0320	\$948.10
D0321	BR
D0322	\$765.77
D0330	\$165.54
D0340	\$186.38
D0350	\$89.13
D0351	\$73.75
D0364	\$1,251.00
D0365	\$1,251.00
D0366	\$1,251.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D0367	\$1,251.00
D0368	\$1,831.00
D0369	\$3,274.00
D0370	\$1,102.00
D0371	BR
D0380	\$998.00
D0381	\$998.00
D0382	\$998.00
D0383	\$998.00
D0384	\$1,459.00
D0385	\$2,382.00
D0386	\$596.00
D0391	BR
D0393	BR
D0394	BR
D0395	BR
D0414	BR
D0415	\$72.00
D0416	\$106.00
D0417	\$97.00
D0418	\$100.00
D0422	BR
D0423	BR
D0425	\$62.00
D0431	\$100.00
D0460	\$100.00
D0470	\$219.00
D0472	\$137.00
D0473	\$290.00
D0474	\$325.00
D0475	\$175.00
D0476	\$170.00
D0477	\$232.00
D0478	\$212.00
D0479	\$325.00
D0480	\$200.00
D0481	\$858.14
D0482	\$250.00
D0483	\$250.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D0484	\$375.00
D0485	\$517.00
D0486	\$240.00
D0502	BR
D0600	BR
D0601	\$93.00
D0602	\$93.00
D0603	\$93.00
D0999	BR
D1110	\$120.33
D1120	\$83.87
D1206	\$72.93
D1208	\$45.15
D1310	\$70.61
D1320	\$77.56
D1330	\$97.24
D1351	\$78.72
D1352	\$94.50
D1353	\$80.75
D1354	BR
D1510	\$503.57
D1515	\$704.99
D1520	\$554.51
D1525	\$856.64
D1550	\$108.82
D1555	\$104.19
D1575	BR
D1999	BR
D2140	\$262.55
D2150	\$339.13
D2160	\$410.84
D2161	\$500.79
D2330	\$239.45
D2331	\$306.31
D2332	\$374.38
D2335	\$443.66
D2390	\$491.06
D2391	\$280.78
D2392	\$368.30

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D2393	\$457.03
D2394	\$560.35
D2410	\$457.26
D2420	\$762.88
D2430	\$1,322.01
D2510	\$1,209.72
D2520	\$1,372.95
D2530	\$1,582.48
D2542	\$1,551.22
D2543	\$1,623.00
D2544	\$1,687.82
D2610	\$1,423.88
D2620	\$1,502.60
D2630	\$1,601.00
D2642	\$1,555.85
D2643	\$1,677.40
D2644	\$1,779.27
D2650	\$935.36
D2651	\$1,114.80
D2652	\$1,171.52
D2662	\$1,016.40
D2663	\$1,195.82
D2664	\$1,281.49
D2710	\$628.41
D2712	\$628.41
D2720	\$1,548.55
D2721	\$1,451.31
D2722	\$1,482.92
D2740	\$1,588.67
D2750	\$1,568.01
D2751	\$1,459.83
D2752	\$1,495.07
D2780	\$1,503.58
D2781	\$1,414.85
D2782	\$1,461.04
D2783	\$1,546.13
D2790	\$1,512.09
D2791	\$1,433.08
D2792	\$1,459.83

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D2794	\$1,548.55
D2799	\$628.41
D2910	\$143.43
D2915	\$143.43
D2920	\$144.65
D2921	\$179.50
D2929	\$543.00
D2930	\$395.04
D2931	\$447.31
D2932	\$476.48
D2933	\$545.76
D2934	\$545.76
D2940	\$150.73
D2941	\$130.00
D2949	\$130.00
D2950	\$376.80
D2951	\$85.08
D2952	\$595.60
D2953	\$297.80
D2954	\$476.48
D2955	\$367.08
D2957	\$238.23
D2960	\$1,152.30
D2961	\$1,306.67
D2962	\$1,419.72
D2971	\$228.51
D2975	\$695.27
D2980	BR
D2981	BR
D2982	BR
D2983	BR
D2990	\$94.00
D2999	BR
D3110	\$131.25
D3120	\$105.35
D3220	\$268.80
D3221	\$295.20
D3222	\$273.20
D3230	\$307.52

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D3240	\$379.24
D3310	\$1,207.00
D3320	\$1,479.27
D3330	\$1,834.20
D3331	\$472.84
D3332	\$899.47
D3333	\$414.49
D3346	\$1,609.34
D3347	\$1,893.76
D3348	\$2,343.50
D3351	\$968.76
D3352	\$433.93
D3353	\$1,335.84
D3355	\$577.25
D3356	\$259.00
D3357	BR
D3410	\$1,920.50
D3421	\$2,138.07
D3425	\$2,421.29
D3426	\$818.03
D3427	\$1,035.75
D3428	\$1,509.25
D3429	\$1,439.50
D3430	\$601.67
D3431	\$1,772.25
D3432	\$1,523.50
D3450	\$1,251.97
D3460	\$4,676.05
D3470	\$2,388.47
D3910	\$334.27
D3920	\$951.74
D3950	\$433.93
D3999	BR
D4210	\$1,603.00
D4211	\$712.00
D4212	\$570.00
D4230	\$2,244.00
D4231	\$1,096.39
D4240	\$2,030.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D4241	\$1,175.00
D4245	\$1,496.00
D4249	\$2,226.00
D4260	\$3,383.00
D4261	\$1,816.00
D4263	\$1,211.00
D4264	\$1,033.00
D4265	BR
D4266	\$1,247.00
D4267	\$1,603.00
D4268	BR
D4270	\$2,404.00
D4273	\$2,938.00
D4274	\$1,667.00
D4275	\$2,208.00
D4276	\$3,294.00
D4277	\$2,493.00
D4278	\$819.00
D4283	BR
D4285	BR
D4320	\$625.99
D4321	\$633.28
D4341	\$361.00
D4342	\$217.57
D4346	BR
D4355	\$246.75
D4381	BR
D4910	\$222.44
D4920	\$161.66
D4921	BR
D4999	BR
D5110	\$2,343.00
D5120	\$2,343.00
D5130	\$2,555.00
D5140	\$2,555.00
D5211	\$1,977.00
D5212	\$2,298.00
D5213	\$2,771.36
D5214	\$2,589.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D5221	BR
D5222	BR
D5223	BR
D5224	BR
D5225	\$1,977.00
D5226	\$2,298.00
D5281	\$1,509.00
D5410	\$128.00
D5411	\$128.00
D5421	\$128.00
D5422	\$128.00
D5510	\$274.70
D5520	\$214.00
D5610	\$278.00
D5620	\$316.03
D5630	\$363.00
D5640	\$235.00
D5650	\$321.00
D5660	\$385.00
D5670	\$1,006.44
D5671	\$1,006.44
D5710	\$951.00
D5711	\$909.00
D5720	\$898.00
D5721	\$898.00
D5730	\$537.00
D5731	\$537.00
D5740	\$492.00
D5741	\$492.00
D5750	\$716.00
D5751	\$716.00
D5760	\$705.00
D5761	\$705.00
D5810	\$1,133.00
D5811	\$1,218.00
D5820	\$876.00
D5821	\$930.00
D5850	\$224.00
D5851	\$224.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D5862	BR
D5863	\$2,295.25
D5864	BR
D5865	\$2,295.25
D5866	\$3,146.00
D5867	BR
D5875	BR
D5899	BR
D5911	\$594.00
D5912	\$594.00
D5913	\$12,514.00
D5914	\$12,514.00
D5915	\$16,935.00
D5916	\$4,517.00
D5919	BR
D5922	BR
D5923	BR
D5924	BR
D5925	BR
D5926	BR
D5927	BR
D5928	BR
D5929	BR
D5931	\$6,738.00
D5932	\$12,602.00
D5933	BR
D5934	\$11,486.00
D5935	\$9,994.00
D5936	\$11,225.00
D5937	\$1,411.50
D5951	\$1,834.00
D5952	\$5,956.00
D5953	\$11,310.00
D5954	\$10,481.00
D5955	\$9,694.00
D5958	BR
D5959	BR
D5960	BR
D5982	\$997.93

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D5983	\$2,416.43
D5984	\$2,416.43
D5985	\$2,416.43
D5986	\$241.00
D5987	\$3,627.07
D5988	\$641.00
D5991	\$246.00
D5992	BR
D5993	BR
D5994	\$227.50
D5999	BR
D6010	\$3,914.00
D6011	BR
D6012	\$3,698.00
D6013	\$3,623.00
D6040	\$14,418.34
D6050	\$10,047.00
D6051	BR
D6052	\$1,535.25
D6055	\$1,176.00
D6056	\$812.00
D6057	\$1,005.00
D6058	\$2,253.00
D6059	\$2,379.96
D6060	\$2,249.90
D6061	\$2,294.88
D6062	\$2,286.36
D6063	\$1,963.04
D6064	\$2,079.74
D6065	\$2,217.00
D6066	\$2,311.89
D6067	\$2,242.61
D6068	\$2,234.00
D6069	\$2,379.96
D6070	\$2,249.90
D6071	\$2,144.00
D6072	\$2,343.50
D6073	\$2,121.06
D6074	\$2,106.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D6075	\$2,217.00
D6076	\$2,311.89
D6077	\$2,242.61
D6080	\$184.00
D6081	BR
D6085	BR
D6090	BR
D6091	\$887.00
D6092	\$173.00
D6093	\$271.00
D6094	\$1,887.68
D6095	BR
D6100	BR
D6101	\$587.50
D6102	\$769.75
D6103	\$672.50
D6104	\$672.50
D6110	\$2,705.00
D6111	\$2,705.00
D6112	\$2,705.00
D6113	\$2,705.00
D6114	BR
D6115	BR
D6116	BR
D6117	BR
D6190	\$395.00
D6194	\$1,817.00
D6199	BR
D6205	\$1,016.16
D6210	\$1,553.41
D6211	\$1,454.96
D6212	\$1,514.52
D6214	\$1,563.15
D6240	\$1,533.97
D6241	\$1,416.06
D6242	\$1,493.86
D6245	\$1,582.59
D6250	\$1,514.52
D6251	\$1,396.62

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D6252	\$1,441.59
D6253	\$652.72
D6545	\$610.19
D6548	\$651.00
D6549	\$377.21
D6600	\$1,186.33
D6601	\$1,266.56
D6602	\$1,294.51
D6603	\$1,424.58
D6604	\$1,268.99
D6605	\$1,344.35
D6606	\$1,248.32
D6607	\$1,385.67
D6608	\$1,277.00
D6609	\$1,355.29
D6610	\$1,396.62
D6611	\$1,527.89
D6612	\$1,389.33
D6613	\$1,452.53
D6614	\$1,358.93
D6615	\$1,413.64
D6624	\$1,294.51
D6634	\$1,358.93
D6710	\$1,345.00
D6720	\$1,619.06
D6721	\$1,535.18
D6722	\$1,563.15
D6740	\$1,650.00
D6750	\$1,656.73
D6751	\$1,546.13
D6752	\$1,583.81
D6780	\$1,563.15
D6781	\$1,516.00
D6782	\$1,563.15
D6783	\$1,561.00
D6790	\$1,599.60
D6791	\$1,516.96
D6792	\$1,571.65
D6793	\$637.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D6794	\$1,571.65
D6920	\$420.57
D6930	\$245.53
D6940	\$556.70
D6950	\$1,074.51
D6980	BR
D6985	\$934.72
D6999	BR
D7111	\$229.73
D7140	\$305.09
D7210	\$405.98
D7220	\$509.29
D7230	\$678.25
D7240	\$796.15
D7241	\$1,000.37
D7250	\$429.07
D7251	\$770.70
D7260	\$3,182.19
D7261	\$1,104.60
D7270	\$828.45
D7272	\$1,104.60
D7280	\$772.80
D7282	\$386.40
D7283	\$331.80
D7285	\$1,546.65
D7286	\$662.55
D7287	\$265.65
D7288	\$265.65
D7290	\$662.55
D7291	\$446.76
D7292	\$1,060.50
D7293	\$662.55
D7294	\$552.30
D7295	BR
D7310	\$1,009.00
D7311	\$883.00
D7320	\$1,640.00
D7321	\$1,388.00
D7340	\$6,938.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D7350	\$20,182.00
D7410	\$3,027.00
D7411	\$4,793.00
D7412	\$5,298.00
D7413	\$3,532.00
D7414	\$5,298.00
D7415	\$5,928.00
D7440	\$4,793.00
D7441	\$7,064.00
D7450	\$3,027.00
D7451	\$4,137.00
D7460	\$3,027.00
D7461	\$4,137.00
D7465	\$1,640.00
D7471	\$3,749.00
D7472	\$4,455.00
D7473	\$4,203.00
D7485	\$3,749.00
D7490	\$30,273.00
D7510	\$1,085.00
D7511	\$1,640.00
D7520	\$5,167.00
D7521	\$5,676.00
D7530	\$1,862.00
D7540	\$2,064.00
D7550	\$1,287.00
D7560	\$10,217.00
D7610	\$16,524.00
D7620	\$12,392.00
D7630	\$21,484.00
D7640	\$13,633.00
D7650	\$10,328.00
D7660	\$6,090.00
D7670	\$4,753.00
D7671	\$8,956.00
D7680	\$30,984.00
D7710	\$19,420.00
D7720	\$13,633.00
D7730	\$28,093.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D7740	\$13,900.00
D7750	\$17,679.00
D7760	\$7,094.00
D7770	\$9,612.00
D7771	\$7,417.00
D7780	\$41,313.00
D7810	\$18,174.00
D7820	\$2,977.00
D7830	\$1,705.00
D7840	\$24,773.00
D7850	\$21,393.00
D7852	\$24,496.00
D7854	\$25,278.00
D7856	\$17,937.00
D7858	\$51,126.00
D7860	\$21,792.00
D7865	\$35,117.00
D7870	\$1,160.00
D7871	\$2,321.00
D7872	\$12,387.00
D7873	\$14,914.00
D7874	\$21,393.00
D7875	\$23,436.00
D7876	\$25,268.00
D7877	\$22,301.00
D7880	\$2,785.00
D7881	BR
D7899	BR
D7910	\$1,655.00
D7911	\$4,132.00
D7912	\$7,437.00
D7920	\$12,185.00
D7921	\$1,125.00
D7940	BR
D7941	\$31,030.00
D7943	\$28,507.00
D7944	\$25,404.00
D7945	\$33,805.00
D7946	\$41,878.00

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D7947	\$35,218.00
D7948	\$45,712.00
D7949	\$59,537.00
D7950	BR
D7951	BR
D7952	BR
D7953	\$858.00
D7955	BR
D7960	\$1,388.00
D7963	\$2,270.00
D7970	\$2,018.00
D7971	\$757.00
D7972	\$2,825.00
D7980	\$3,179.00
D7981	BR
D7982	\$7,518.00
D7983	\$7,215.00
D7990	\$6,206.00
D7991	\$5,137.00
D7995	BR
D7996	BR
D7997	\$1,160.00
D7998	\$5,046.00
D7999	BR
D8010	BR
D8020	BR
D8030	BR
D8040	BR
D8050	BR
D8060	BR
D8070	BR
D8080	BR
D8090	BR
D8210	BR
D8220	BR
D8660	\$700.13
D8670	\$525.09
D8680	\$1,154.73
D8681	BR

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D8690	\$545.76
D8691	\$512.95
D8692	\$571.28
D8693	\$528.75
D8694	BR
D8999	BR
D9110	\$215.15
D9120	\$243.11
D9210	\$181.65
D9211	\$200.55
D9212	\$312.90
D9215	\$150.15
D9219	BR
D9223	BR
D9230	BR
D9243	BR
D9248	\$437.85
D9310	\$487.42
D9311	BR
D9410	\$557.92
D9420	\$903.13
D9430	\$151.94
D9440	\$305.09
D9450	\$151.94
D9610	BR
D9612	BR
D9630	BR
D9910	\$103.03
D9911	\$144.70
D9920	BR
D9930	BR
D9932	BR
D9933	BR
D9934	BR
D9935	BR
D9940	\$940.80
D9941	\$307.52
D9942	\$354.24
D9943	BR

Exhibit #6 – Proposed Dental Fees	
Effective for Dates of Service on and After 1/1/2018	
CDT 2017	2018 fees
D9950	\$560.29
D9951	\$251.20
D9952	\$1,179.62
D9970	\$133.13
D9971	\$171.33
D9972	\$590.39
D9973	\$97.24
D9974	\$516.31
D9975	\$576.00
D9985	BR
D9986	BR
D9987	BR
D9991	BR
D9992	BR
D9993	BR
D9994	BR
D9999	BR

Exhibit 7

Effective for Dates of Service On and After 1/1/2018

Evaluation and Management (E&M) Documentation Guidelines

for

Colorado Workers' Compensation Claims

This E&M Guidelines for Colorado Workers' Compensation Claims is intended for the physicians who manage injured workers' medical and non-medical care. Providers may also use the "1997 Documentation Guidelines for Evaluation and Management Services" as developed by Medicare. The Level of Service is determined by:

1. History (Hx),
2. Examination (Exam), and
3. Medical Decision Making (MDM)

Documentation requirements for any billed office visit:

- Chief complaint and medical necessity
- Patient specific and pertain directly to the current visit.
- Information copied directly from prior records without change is not considered current or counted.
- CPT© criteria for a consultation is required to bill a consultation code

Table I – History (Hx) Component: The overall level of history is determined based upon all three of the history elements (HPI, ROS, and PMFSW) being at the same level or higher.

HISTORY ELEMENTS	Requirements for a <u>Problem Focused (PF)</u> Level	Requirements for an <u>Extended Problem Focused (EPF)</u> Level	Requirements for a <u>Detailed (D)</u> Level	Requirements for a <u>Comprehensive (C)</u> Level
<u>A. History of Present Illness/Injury (HPI)</u>	Brief 1-3 elements	Brief 1-3 elements	Extended 4+ elements (Initial visits require(s) an injury causation statement and or an objective functional goal treatment plan. Follow-up visits require objective functional gains/losses, ADLs etc))	Extended 4+ elements (Initial visits require(s) an injury causation statement and or an objective functional goal treatment plan. Follow-up visits require objective functional gains/losses, ADLs etc))
<u>B. Review of Systems (ROS)</u> (not required for established patient visits)	None	Problem pertinent-limited to injured body part	2-9 body parts or body systems	Complete 10+
<u>C. Past Medical, Family and Social/Work History (PMFSH)</u>	None	None	Pertinent 1 of 4 types of histories	2 or more of the 4 types of histories

A. HPI Elements represents the injured worker relaying their condition to the physician and should include the following:

1. Location (where?)
2. Quality (sharp, dull)
3. Severity (pain level 1-10 or pain diagram)
4. Duration (how long?)
5. Timing (how often, regularity of occurrence, only at night etc?)
6. Context (what ADLs or functions aggravates/relieves, accident described,?)
7. Modifying factors (doing what, what makes it worse or better, ?)

8. Associated signs (nausea, numbness or tingling when?)

For the provider to achieve an “*extended*” or *greater HPI* in an initial patient/injured workers visit it is required for the provider to discuss the causality of the patient/injured worker’s work related injury(s) to the patient/injured worker’s job duties and or create and implement a treatment plan with objective functional measureable goals.

For the provider to achieve an “*extended*” or *greater HPI* in an established patient/injured worker visit it is required to document a detailed description of the patient’s objective functional gains or losses since the last visit with current treatment plan, such as ADLs, physical therapy goals and return to work.

B. Review of Systems (ROS): each system/body part is counted once whether positive or negative. Identify, perform and documentation of all pertinent ROS systems with either a “positive or negative” response is necessary to be counted.

1. Constitutional symptoms (e.g., fever, weight loss)
2. Eyes
3. Ears, Nose, Mouth, Throat
4. Cardiovascular
5. Respiratory
6. Gastrointestinal
7. Genitourinary
8. Musculoskeletal
9. Integumentary (skin and/or breast)
10. Neurological
11. Psychiatric
12. Endocrine
13. Hematologic/Lymphatic
14. Allergic/Immunologic

C. PMFSH consists of a review of four areas (NOTE: Employers should **not** have access to any patient’s or the family’s generic/hereditary diagnoses or testing information, etc.)

1. Past history – the patient’s past experiences with illnesses, operations, injuries and treatments.

2. Family history – a review of medical events in the patient’s family, including diseases which may be hereditary or place the patient at risk and any family situations that can interfere with or support the injured worker’s treatment plan and returning to work.
3. Occupational/Social History/Military – an age appropriate review of past and current work activities, occupational history, current work status, any work situations that support or interfere with return to work. For established visits specific updates of progress must be discussed.
4. Non-Occupational/Social History – Hobbies, current recreational physical activities and the patient’s support relationships, etc. For established visits specific updates of progress must be discussed.

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TABLE II: Examination Component: Each bullet is counted only when it is pertinent and related to the workers' compensation injury and is part of the medical decision making process. The total number of bullets determines the overall level of examination.

Physician's Examination Component	
Level of Examination Performed and Documented	# of Bullets Required for each level
Problem Focused	1-5 elements identified by a bullet as indicated in the guideline
Expanded Problem Focused	6 elements identified by a bullet as indicated in this guideline
Detailed	7-12 elements identified by a bullet as indicated in this guideline
Comprehensive	>13 elements identified by a bullet as indicated in this guideline

Examination Components:

Constitutional Measurement:

- Vital signs (may be measured and recorded by ancillary staff) – any of three (3) vital signs is counted as one bullet:
 1. sitting or standing blood pressure
 2. supine blood pressure
 3. pulse rate and regularity
 4. respiration
 5. temperature
 6. height
 7. weight or BMI
- One bullet for commenting on the general appearance of patient (e.g., development, nutrition, body habitus, deformities, attention to grooming)

Musculoskeletal: Each of the six body areas with three (3) assessments is counted as one bullet.

1. head and or neck
2. spine or ribs and pelvis or all three
3. right upper extremity (shoulder, elbow, wrist, entire hand)
4. left upper extremity (shoulder, elbow, wrist, entire hand)
5. right lower extremity (hip, knee, ankle, entire foot)
6. left lower extremity (hip, knee, ankle, entire foot)

Assessment of a given body area includes:

- Inspection, percussion and/or palpation with notation of any misalignment, asymmetry, crepitation, defects, tenderness, masses or effusions
- Assessment of range of motion with notation of any pain (e.g., straight leg raise), crepitation or contracture
- Assessment of stability with notation of any dislocation (luxation), subluxation or laxity
- Assessment of muscle strength and tone (e.g., flaccid, cog wheel, spastic) with notation of any atrophy or abnormal movements (fasciculation, tardive dyskinesia)
- Examination of gait and station
- Inspection and/or palpation of digits and nails (e.g., clubbing, cyanosis, inflammatory conditions, petechia, ischemia, infections, nodes)

Neck: One bullet for both examinations

- Examination of neck (e.g., masses, overall appearance, symmetry, tracheal position, crepitus) and
- Examination of thyroid (e.g., enlargement, tenderness, mass)

Neurological: One bullet for each neurological examination/assessment(s) per extremity:

1. Test coordination (e.g., finger/nose, heel/knee/shin, rapid alternating movements in the upper and lower extremities)
2. Examination of deep tendon reflexes and/or nerve stretch test with notation of pathological reflexes (e.g., Babinski)
3. Examination of sensation (e.g., by touch, pin, vibration, proprioception)
4. One bullet for all of the 12 cranial nerves assessments with notations of any deficits

Cardiovascular:

1. One bullet per extremity examination/assessment of peripheral vascular system by:
 - a. Observation (e.g., swelling, varicosities)
 - b. Palpation (e.g., pulses, temperature, edema, tenderness)
2. One bullet for palpation of heart (e.g., location, size, thrills)
3. One bullet for auscultation of heart with notation of abnormal sounds and murmurs
4. One bullet for examination of each one of the following:
 - a. carotid arteries (e.g., pulse amplitude, bruits)
 - b. abdominal aorta (e.g., size, bruits)
 - c. femoral arteries (e.g., pulse amplitude, bruits)

Skin: One bullet for pertinent body part(s) inspection and/or palpation of skin and subcutaneous tissue (e.g., scars, rashes, lesions, café au lait spots, ulcers)

Respiratory: (one bullet for each examination/assessment)

1. Assessment of respiratory effort (e.g., intercostal retractions, use of accessory muscles, diaphragmatic movement)
2. Percussion of chest (e.g., dullness, flatness, hyperresonance)
3. Palpation of chest (e.g., tactile fremitus)
4. Auscultation of lungs (e.g., breath sounds, adventitious sounds, rubs)

Gastrointestinal: One bullet for each examination /assessment

1. Examination of abdomen with notation of presence of masses or tenderness and liver and spleen
2. Examination of presence or absence of hernia
3. Examination (when indicated) of anus, perineum and rectum, including sphincter tone, present of hemorrhoids, rectal masses and/or obtain stool sample of occult blood test when indicated

Psychiatric:

1. One bullet for assessment of mood and affect (e.g., depression, anxiety, agitation) if not counted under the Neurological system
2. One bullet for a mental status examination which includes:
 - a. Attention span and concentration; and
 - b. Language (e.g., naming objects, repeating phrases, spontaneous speech)
 orientation to time, place and person; and
 - c. Recent and remote memory; and
 - d. Fund of knowledge (e.g., awareness of current events, past history, vocabulary)

Eyes: One bullet for both eyes and all three examinations/assessments

1. Inspection of conjunctivae and lids; and
2. Examination of pupils and irises (e.g., reaction of light and accommodation, size and symmetry); and

3. Ophthalmoscopic examination of optic discs (e.g., size, C/D ratio, appearance) and posterior segments (e.g., vessel changes, exudates, hemorrhages)

Ears and Nose, Mouth and Throat:

One bullet for all of the following examination/assessment:

1. External inspection of ears and nose (e.g., overall appearance, scars, lesions, asses)
2. Otosopic examination of external auditory canals and tympanic membranes
3. Assessment of hearing with tuning fork and clinical speech reception thresholds (e.g., whispered voice, finger rub, tuning fork)

One bullet for all of the following examinations/assessments:

1. Inspection of nasal mucosa, septum and turbinates
2. Inspection of lips, teeth and gums
3. Examination of oropharynx: oral mucosa, salivary glands, hard and soft palates, tongue, tonsils and posterior pharynx (e.g., asymmetry, lesions, hydration of mucosal surfaces)

Genitourinary MALE –

One bullet for each of the following examination of the male genitalia:

1. The scrotal contents (e.g., hydrocele, spermatocele, tenderness of cord, testicular mass)
2. Epididymides (e.g., size, symmetry, masses)
3. Testes (e.g., size symmetry, masses)
4. Urethral meatus (e.g., size location, lesions, discharge)
5. Examination of the penis (e.g., lesions, presence of absence of foreskin, foreskin retract ability, plaque, masses, scarring, deformities)
6. Digital rectal examination of prostate gland (e.g., size, symmetry, nodularity, tenderness)
7. Inspection of anus and perineum

Genitourinary FEMALE –

One bullet for each of the following female pelvic examination(s) (with or without specimen collection for smears and cultures):

1. Examination of external genitalia (e.g., general appearance, hair distribution, lesions) and vagina (e.g., general appearance, estrogen effect, discharge, lesions, pelvic support, cystocele rectocele)
2. Examination of urethra (e.g., masses, tenderness, scarring)
3. Examination of bladder (e.g., fullness, masses, tenderness)
4. Cervix (e.g., general appearance, lesions, discharge)
5. Uterus (e.g., size, contour, position, mobility, tenderness, consistency, descent or support)
6. Adnexa/parametria (e.g., masses, tenderness, organomegaly, nodularity)

Chest:

One bullet for both examinations/assessments of both breasts

1. Inspection of breasts (e.g., symmetry, nipple discharge); and
2. Palpation of breasts and axillae (e.g., masses or lumps, tenderness)

Lymphatic palpation of lymph nodes -- Two or more areas is counted as one bullet:

1. Neck
2. Axillae
3. Groin
4. Other

Verify all of the completed examination components listed in the report documents the relevance/relatedness to the injury and or “reasonable and necessity” for that specified patient’s condition. Any examination bullet that is not clearly related to the injury or a patient’s specific condition will not be counted/considered in the total number of bullets for the level of service.

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TABLE III: Medical Decision Making Component (MDM) is comprised of Tables A, B, AND C. Two of the three highest levels from Tables A., B., and C. determines the overall level of risk)

TABLE III A:

A. Number of Diagnosis & Management Options					
Category of Problem(s)	Occurrence of Problem(s)		Value		Total
Self-limited or minor problem	(max 2)	X	1		
Established problem, stable or improved		X	1		
Established problem, minor worsening with improvement with expected time frames		X	2		
Established problem without improvement within expected time frame that requires treatment plan changes with or without additional workup		X	4		
New problem with no additional workup planned or established patient with worsening of condition and no additional workup planned	(max 1)	X	3		
New problem, additional workup planned or established patient with worsening of condition and no additional workup planned		X	4		

TABLE III B:

B. Amount and/or Complexity of Data Reviewed	
	Points
Date Type:	
Lab(s) ordered and/or reports reviewed	1
X-ray (s) ordered and/or reports reviewed	1
Discussion of test results with performing physician	1
Decision to obtain old records and/or obtain history from someone other than the patient	1
Medicine section (90701-99199) ordered and /or physical therapy records reviewed and commented on progress 9state whether the patient is progressing and how they are functionally progressing or not and document any planned changes to the plan of care	2
Review and summary of old records and/or discussion with other health provider	2
Independent visualization of images, tracing or specimen	2
TOTAL	

TABLE III C:

C. Table of Risk (the highest one in any one category determines the overall risk for this portion)			
Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s) Ordered or Addressed	Management Option(s) Selected
Minimal	One self-limited or minor problem, e.g., cold, insect bite, tinea corpori, minor non-sutured laceration	Lab tests requiring venipuncture Chest x-rays EKG/EEG Urinalysis Ultrasound KOH prep	Rest Gargles Elastic bandages Superficial dressings
Low	Two or more self-limited or minor problems One stable chronic illness, e.g., well-controlled HTN, NIDDM, cataract, BPH Acute, uncomplicated illness or injury, e.g., allergic rhinitis or simple sprain Acute laceration repair	Physiologic tests nor under stress, e.g., PFTs Non-cardiovascular imaging studies w/contrast, e.g., barium enema Superficial needle biopsies Lab tests requiring arterial puncture Skin biopsies	Over-the-counter drugs Minor surgery w/no identified risk factors PT/OT IV fluids w/o additives Simple or layered closure Vaccine injection
Moderate	One of more chronic illnesses with mild exacerbation, progression or side effects of treatment Two or more stable chronic illnesses Undiagnosed new problem with uncertain prognosis, e.g., new extremity neurologic complaints Acute illness with systemic symptoms, e.g., pyelonephritis, colitis Acute complicated injury, e.g., head injury with brief loss of consciousness	Physiologic tests under stress, e.g. cardiac stress test, Discography, stress tests Diagnostic injections Deep needle or incisional biopsies Cardiovascular imaging studies with contrast and no identified risk factors e.g. arteriogram, cardiac cath Obtain fluid from body cavity, e.g. lumbar puncture, thoracentesis, culdocentesis	Minor surgery with identified risk factors Elective major surgery (open, percutaneous, or endoscopic) with no identified risk factors Prescription drug management Therapeutic nuclear medicine IV fluids with additives Closed Tx of Fx or dislocation w/o manipulation Inability to return the injured worker to work and requires detailed functional improvement plan.

TABLE III C:

C. Table of Risk (the highest one in any one category determines the overall risk for this portion)			
Level of Risk	Presenting Problem(s)	Diagnostic Procedure(s) Ordered or Addressed	Management Option(s) Selected
High	<p>One or more chronic illness with severe exacerbation, progression or side effects of treatment</p> <p>Acute or chronic illnesses or injuries that pose a threat to life or bodily function, e.g., multiple trauma, acute MI, severe respiratory distress, progressive severe rheumatoid arthritis, psychiatric illness with potential threat to self or others;</p> <p>An abrupt change in neurological status, e.g., seizure, TIA, weakness, sensory loss</p>	<p>Cardiovascular imaging studies with contrast with identified risk factors</p> <p>Cardiac electrophysiological tests</p> <p>Diagnostic endoscopies with identified risk factors</p>	<p>Elective major surgery with identified risk factors</p> <p>Emergency major surgery</p> <p>Parenteral controlled substances</p> <p>Drug therapy requiring intensive monitoring for toxicity</p> <p>Decision not to resuscitate or to de-escalate care because of poor prognosis,</p> <p>Potential for significant permanent work restrictions or total disability</p> <p>Management of addiction behavior or other significant psychiatric condition</p> <p>Treatment plan for patients with symptoms causing severe functional deficits without supporting physiological findings or verified related medical diagnosis.</p>

IV. Time Component: Time can determine the level of service if:

1. Greater than fifty percent of a physician's time at an E&M visit is spent either face-to-face with the patient counseling and/or coordination of care; and
2. There is detailed patient specific documentation of the counseling and/or coordination of care, including patient questions and or responses; and
3. The amount of time for the entire office visit and the amount of time counseling and/or coordination of care with the injured worker is documented.

If time is used to establish the level of visit and total amount of time falls in between two levels, then the provider's time shall be more than half way to reaching the higher level.

A. Counseling: Primary care physicians should have *shared decision making conferences* with their patients to *establish viable functional goals* prior to making referrals for diagnostic testing and/or to specialists. Shared decision making occurs when the physician shares with the patient all the treatment alternatives reflected in the Colorado Medical Treatment Guidelines as well as any possible side effects or limitations, and the patient shares with the primary physician their desired outcome from the treatment. Patients should be encouraged to express their goals, outcome expectations and desires from treatment as well as any personal habits or traits that may be impacted by procedures or their possible side effects.

1. The physician's time spent face-to-face with the patient and/or their family counseling him/her or them in one or more of the following:

- Injury/disease education that includes discussion of diagnostic tests results and a disease specific treatment plan.
- Return to work
- Temporary and/or permanent restrictions
- Self-management of symptoms while at home and/or work
- Correct posture/mechanics to perform work functions
- Job task exercises for muscle strengthening and stretching
- Appropriate tool and equipment use to prevent re-injury and/or worsening of the existing injury/condition
- Patient/injured worker expectations and specific goals
- Family and other interpersonal relationships and how they relate to psychological/social issues
- Discussion of pharmaceutical management (includes drug dosage, specific drug side effects and potential of addiction /problems
- Assessment of vocational plans (i.e., restrictions as they relate to current and future employment job requirements)

B. Coordination of Care: Coordination of care requires the physician to either call another health care provider (outside of their own clinic) regarding the patient’s diagnosis and/or treatment or the physician telephones or visits the employer in person to safely return the patient to work.

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Table V: New Patient/Office Consultations Level of Service: CPT consultation criteria must be met before a consultation can be billed for any level of service.

New Patient/Level of Service (Requires all three key components at the same level or higher)	History	Examination	Medical Decision Making (MDM)	Avg. time (minutes) as listed for the specific CPT code
99201/99241	Problem Focused (PF)	PF	Straight Forward (SF)	10
99202/99242	Extended Problem Focused (EPF)	EPF	SF	20
99203/99243	Detailed (D)	D	Low	30
99204/99244	Comprehensive(C)	C	Moderate	45
99205/99245	C	C	High	60

Table VI: Established Patient Office Visit Level of Service

Established Patient/Level of Service (Requires at least two of the three key components at the same level or higher and <u>one of the two must be MDM</u>)	History	Examination	Medical Decision Making (MDM)	Avg. time (minutes) as listed for the specific CPT code
99211	N/A	N/A	N/A	5
99212	PF	PF	SF	10
99213	EPF	EPF	Low	15
99214	D	D	Moderate	25
99215	C	C	High	40

Exhibit #8 – Proposed Clinical Laboratory Fees			
Effective for Dates of Service On and After 1/1/2018			
HCPCS	Modifier	Maximum Fees	SHORTDESC
36415		5.10	Routine venipuncture
36416		5.10	
78267		18.33	Breath tst attain/anal c-14
78268		157.08	Breath test analysis c-14
80047		19.72	Metabolic panel ionized ca
80047	QW	19.72	Metabolic panel ionized ca
80048		19.72	Metabolic panel total ca
80048	QW	19.72	Metabolic panel total ca
80050		52.75	General Health panel(85025,85004,80053)
80051		16.35	Electrolyte panel
80051	QW	16.35	Electrolyte panel
80053		24.63	Comprehen metabolic panel
80053	QW	24.63	Comprehen metabolic panel
80055		111.49	Obstetric panel
80061		31.23	Lipid panel
80061	QW	31.23	Lipid panel
80069		20.25	Renal function panel
80069	QW	20.25	Renal function panel
80074		111.08	Acute hepatitis panel
80076		19.06	Hepatic function panel
80081		174.57	Obstetric panel
80150		35.16	Assay of amikacin
80155		32.98	Drug screen quant caffeine
80156		33.97	Assay carbamazepine total
80157		30.91	Assay carbamazepine free
80158		42.09	Assay of cyclosporine
80159		43.13	Drug screen quant clozapine
80162		30.96	Assay of digoxin
80163		30.96	Assay of digoxin free
80164		31.59	Assay dipropylacetic acid
80165		31.59	Dipropylacetic acid free
80168		38.10	Assay of ethosuximide
80169		32.03	Drug screen quant everolimus
80170		38.20	Assay of gentamicin
80171		30.91	Drug screen quant gabapentin
80173		33.97	Assay of haloperidol

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
80175		30.91	Drug screen quan lamotrigine
80176		34.26	Assay of lidocaine
80177		30.91	Drug scrn quan levetiracetam
80178		15.42	Assay of lithium
80178	QW	15.42	Assay of lithium
80180		42.09	Drug scrn quan mycophenolate
80183		30.91	Drug scrn quant oxcarbazepin
80184		26.71	Assay of phenobarbital
80185		30.91	Assay of phenytoin total
80186		32.10	Assay of phenytoin free
80188		38.69	Assay of primidone
80190		39.07	Assay of procainamide
80192		39.07	Assay of procainamide
80194		34.05	Assay of quinidine
80195		32.03	Assay of sirolimus
80197		32.03	Assay of tacrolimus
80198		32.98	Assay of theophylline
80199		42.11	Drug screen quant tiagabine
80200		37.60	Assay of tobramycin
80201		27.80	Assay of topiramate
80202		31.59	Assay of vancomycin
80203		30.91	Drug screen quant zonisamide
80299		31.94	Quantitative assay drug
80305		25.43	Drug test prsmv dir opt obs
80306		33.92	Drug test prsmv instrmnt
80307		135.68	Drug test prsmv chem analyzr
80400		76.06	Acth stimulation panel
80402		202.78	Acth stimulation panel
80406		145.67	Acth stimulation panel
80408		292.66	Aldosterone suppression eval
80410		187.36	Calcitonin stimul panel
80412		768.67	CRH stimulation panel
80414		120.41	Testosterone response
80415		130.32	Estradiol response panel
80416		307.73	Renin stimulation panel
80417		102.58	Renin stimulation panel
80418		1351.60	Pituitary evaluation panel
80420		168.01	Dexamethasone panel

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
80422		107.44	Glucagon tolerance panel
80424		117.76	Glucagon tolerance panel
80426		346.09	Gonadotropin hormone panel
80428		155.55	Growth hormone panel
80430		183.02	Growth hormone panel
80432		275.09	Insulin suppression panel
80434		235.93	Insulin tolerance panel
80435		240.23	Insulin tolerance panel
80436		212.59	Metyrapone panel
80438		117.56	TRH stimulation panel
80439		156.74	TRH stimulation panel
81000		7.40	Urinalysis nonauto w/scope
81001		7.40	Urinalysis auto w/scope
81002		5.95	Urinalysis nonauto w/o scope
81003		5.24	Urinalysis auto w/o scope
81003	QW	5.24	Urinalysis auto w/o scope
81005		5.05	Urinalysis
81007		5.98	Urine screen for bacteria
81007	QW	5.98	Urine screen for bacteria
81015		7.11	Microscopic exam of urine
81020		8.60	Urinalysis glass test
81025		14.74	Urine pregnancy test
81050		7.00	Urinalysis volume measure
81161		239.90	Dmd dup/delet analysis
81162		4255.54	Brca1&2 seq & full dup/del
81170		564.09	Abl1 gene
81206		382.35	Bcr/abl1 gene major bp
81207		337.76	Bcr/abl1 gene minor bp
81208		375.07	Bcr/abl1 gene other bp
81210		306.39	Braf gene
81211		3732.32	Brca1&2 seq & com dup/del
81212		302.06	Brca1&2 185&5385&6174 var
81213		996.05	Brca1&2 uncom dup/del var
81214		2458.23	Brca1 full seq & com dup/del
81215		159.38	Brca1 gene known fam variant
81217		159.38	Brca2 gene known fam variant
81218		564.09	Cebpa gene full sequence
81219		283.63	Calr gene com variants

Exhibit #8 – Proposed Clinical Laboratory Fees

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HCPCS	Modifier	Maximum Fees	SHORTDESC
81225		498.78	Cyp2c19 gene com variants
81226		771.92	Cyp2d6 gene com variants
81227		299.25	Cyp2c9 gene com variants
81235		564.09	Egfr gene com variants
81240		114.75	F2 gene
81241		142.49	F5 gene
81245		283.63	Flt3 gene
81246		142.15	Flt3 gene analysis
81256		152.42	Hfe gene
81261		461.70	Igh gene rearrange amp meth
81262		101.80	Igh gene rearrang dir probe
81263		686.80	Igh vari regional mutation
81264		348.21	Igk rearrangeabn clonal pop
81265		501.48	Str markers specimen anal
81267		483.79	Chimerism anal no cell selec
81268		608.14	Chimerism anal w/cell select
81270		213.76	Jak2 gene
81272		564.09	Kit gene targeted seq analys
81273		213.76	Kit gene analys d816 variant
81275		337.57	Kras gene
81276		337.57	Kras gene addl variants
81287		142.24	Mgmt gene methylation anal
81288		273.29	Mlh1 gene
81291		101.80	Mthfr gene
81292		1104.63	Mlh1 gene full seq
81293		442.82	Mlh1 gene known variants
81294		325.92	Mlh1 gene dup/delete variant
81295		259.32	Msh2 gene full seq
81296		221.43	Msh2 gene known variants
81297		259.32	Msh2 gene dup/delete variant
81298		492.00	Msh6 gene full seq
81299		275.62	Msh6 gene known variants
81300		276.37	Msh6 gene dup/delete variant
81301		675.24	Microsatellite instability
81310		422.45	Npm1 gene
81311		506.36	Nras gene variants exon 2&3
81313		445.54	Pca3/klk3 antigen
81314		564.09	Pdgfra gene

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
81315		483.45	Pml/raralpha com breakpoints
81316		737.39	Pml/raralpha 1 breakpoint
81317		1335.49	Pms2 gene full seq analysis
81318		315.55	Pms2 known familial variants
81319		378.90	Pms2 gene dup/delet variants
81321		1026.80	Pten gene full sequence
81322		99.82	Pten gene known fam variant
81323		149.74	Pten gene dup/delet variant
81327		142.24	Sept9 methylation analysis
81332		101.80	Serpina1 gene
81340		487.19	Trb@ gene rearrange amplify
81341		115.63	Trb@ gene rearrange dirprobe
81342		469.88	Trg gene rearrangement anal
81370		937.74	Hla i & ii typing lr
81371		561.29	Hla i & ii type verify lr
81372		515.13	Hla i typing complete lr
81373		259.69	Hla i typing 1 locus lr
81374		169.64	Hla i typing 1 antigen lr
81375		514.76	Hla ii typing ag equiv lr
81376		285.02	Hla ii typing 1 locus lr
81377		214.10	Hla ii type 1 ag equiv lr
81378		805.85	Hla i & ii typing hr
81379		782.10	Hla i typing complete hr
81380		413.34	Hla i typing 1 locus hr
81381		220.56	Hla i typing 1 allele hr
81382		288.42	Hla ii typing 1 loc hr
81383		254.49	Hla ii typing 1 allele hr
81410		0.00	Aortic dysfunction/dilation
81411		0.00	Aortic dysfunction/dilation
81412		1023.57	Ashkenazi jewish assoc dis
81413		1363.96	Car ion chnnlpath inc 10 gns
81414		1363.96	Car ion chnnlpath inc 2 gns
81415		0.00	Exome sequence analysis
81416		0.00	Exome sequence analysis
81417		0.00	Exome re-evaluation
81420		1363.96	Fetal chrmoml aneuploidy
81422		1363.96	Fetal chrmoml microdeltj
81425		0.00	Genome sequence analysis

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
81426		0.00	Genome sequence analysis
81427		0.00	Genome re-evaluation
81430		0.00	Hearing loss sequence analys
81431		0.00	Hearing loss dup/del analys
81432		1583.52	Hrdtry brst ca-rlatd dsordrs
81433		1023.57	Hrdtry brst ca-rlatd dsordrs
81434		1023.57	Hereditary retinal disorders
81435		1363.96	Hereditary colon cancer
81436		1363.96	Hereditary colon ca synd
81437		1023.57	Heredtry nurondcrn tum dsrdr
81438		1023.57	Heredtry nurondcrn tum dsrdr
81439		1363.96	Inherited cardmyphy 5 gns
81440		0.00	Mitochondrial gene
81442		1023.57	Noonan spectrum disorders
81445		1023.57	Targeted genomic seq analys
81450		1110.00	Targeted genomic seq analys
81455		0.00	Targeted genomic seq analys
81460		0.00	Whole mitochondrial genome
81465		0.00	Whole mitochondrial genome
81470		0.00	X-linked intellectual dblt
81471		0.00	X-linked intellectual dblt
81490		1004.04	Autoimmune rheumatoid arthr
81493		1772.00	Cor artery disease mrna
81519		5853.71	Oncology breast mrna
81525		5313.74	Oncology colon mrna
81528		871.13	Oncology colorectal scr
81535		991.98	Oncology gynecologic
81536		303.96	Oncology gynecologic
81538		3615.53	Oncology lung
81539		1023.57	Oncology prostate prob score
81540		4964.51	Oncology tum unknown origin
81545		5478.08	Oncology thyroid
81595		4829.28	Cardiology hrt trnspl mrna
82009		10.54	Test for acetone/ketones
82010		19.06	Acetone assay
82010	QW	19.06	Acetone assay
82013		26.04	Acetylcholinesterase assay
82016		32.35	Acylcarnitines qual

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
82017		6.15	Acylcarnitines quant
82024		90.07	Assay of acth
82030		33.05	Assay of adp & amp
82040		11.54	Assay of serum albumin
82040	QW	11.54	Assay of serum albumin
82042		6.77	Assay of urine albumin
82042	QW	6.77	Assay of urine albumin
82043		13.48	Microalbumin quantitative
82043	QW	13.48	Microalbumin quantitative
82044		10.68	Microalbumin semiquant
82044	QW	10.68	Microalbumin semiquant
82045		76.04	Albumin ischemia modified
82075		28.10	Assay of breath ethanol
82085		22.64	Assay of aldolase
82088		95.03	Assay of aldosterone
82103		31.33	Alpha-1-antitrypsin total
82104		33.73	Alpha-1-antitrypsin pheno
82105		39.12	Alpha-fetoprotein serum
82106		39.12	Alpha-fetoprotein amniotic
82107		150.21	Alpha-fetoprotein I3
82108		59.42	Assay of aluminum
82120		4.03	Amines vaginal fluid qual
82120	QW	4.03	Amines vaginal fluid qual
82127		32.35	Amino acid single qual
82128		32.35	Amino acids mult qual
82131		39.34	Amino acids single quant
82135		38.37	Assay aminolevulinic acid
82136		6.15	Amino acids quant 2-5
82139		6.15	Amino acids quan 6 or more
82140		33.98	Assay of ammonia
82143		16.01	Amniotic fluid scan
82150		15.11	Assay of amylase
82150	QW	15.11	Assay of amylase
82154		34.80	Androstanediol glucuronide
82157		68.27	Assay of androstenedione
82160		58.31	Assay of androsterone
82163		47.86	Assay of angiotensin II
82164		34.05	Angiotensin I enzyme test

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
82172		36.14	Assay of apolipoprotein
82175		44.23	Assay of arsenic
82180		23.05	Assay of ascorbic acid
82190		34.77	Atomic absorption
82232		37.72	Assay of beta-2 protein
82239		19.67	Bile acids total
82240		29.84	Bile acids cholyglycine
82247		11.70	Bilirubin total
82247	QW	11.70	Bilirubin total
82248		11.70	Bilirubin direct
82252		3.26	Fecal bilirubin test
82261		6.15	Assay of biotinidase
82270		7.58	Occult blood feces
82271		7.58	Occult blood other sources
82271	QW	7.58	Occult blood other sources
82272		7.58	Occult bld feces 1-3 tests
82274		37.09	Assay test for blood fecal
82274	QW	37.09	Assay test for blood fecal
82286		16.07	Assay of bradykinin
82300		53.98	Assay of cadmium
82306		69.04	Vitamin d 25 hydroxy
82308		62.48	Assay of calcitonin
82310		12.04	Assay of calcium
82310	QW	12.04	Assay of calcium
82330		31.89	Assay of calcium
82330	QW	31.89	Assay of calcium
82331		12.07	Calcium infusion test
82340		14.06	Assay of calcium in urine
82355		27.00	Calculus analysis qual
82360		30.02	Calculus assay quant
82365		30.07	Calculus spectroscopy
82370		29.21	X-ray assay calculus
82373		42.11	Assay c-d transfer measure
82374		6.63	Assay blood carbon dioxide
82374	QW	6.63	Assay blood carbon dioxide
82375		28.73	Assay carboxyhb quant
82376		11.63	Assay carboxyhb qual
82378		44.22	Carcinoembryonic antigen

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
82379		6.15	Assay of carnitine
82380		21.51	Assay of carotene
82382		40.09	Assay urine catecholamines
82383		58.43	Assay blood catecholamines
82384		58.89	Assay three catecholamines
82387		18.85	Assay of cathepsin-d
82390		25.04	Assay of ceruloplasmin
82397		18.85	Chemiluminescent assay
82415		29.55	Assay of chloramphenicol
82435		6.49	Assay of blood chloride
82435	QW	6.49	Assay of blood chloride
82436		11.73	Assay of urine chloride
82438		11.39	Assay other fluid chlorides
82441		14.01	Test for chlorohydrocarbons
82465		10.15	Assay bld/serum cholesterol
82465	QW	10.15	Assay bld/serum cholesterol
82480		18.36	Assay serum cholinesterase
82482		17.90	Assay rbc cholinesterase
82485		41.41	Assay chondroitin sulfate
82495		47.29	Assay of chromium
82507		64.84	Assay of citrate
82523		43.57	Collagen crosslinks
82523	QW	43.57	Collagen crosslinks
82525		28.93	Assay of copper
82528		52.51	Assay of corticosterone
82530		38.96	Cortisol free
82533		38.01	Total cortisol
82540		10.81	Assay of creatine
82542		42.11	Column chromatography quant
82550		15.18	Assay of ck (cpk)
82550	QW	15.18	Assay of ck (cpk)
82552		31.23	Assay of cpk in blood
82553		26.93	Creatine mb fraction
82554		27.68	Creatine isoforms
82565		11.95	Assay of creatinine
82565	QW	11.95	Assay of creatinine
82570		12.07	Assay of urine creatinine
82570	QW	12.07	Assay of urine creatinine

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
82575		22.05	Creatinine clearance test
82585		16.52	Assay of cryofibrinogen
82595		15.08	Assay of cryoglobulin
82600		45.24	Assay of cyanide
82607		35.16	Vitamin B-12
82608		33.39	B-12 binding capacity
82610		13.21	Cystatin c
82615		19.04	Test for urine cystines
82626		58.94	Dehydroepiandrosterone
82627		51.85	Dehydroepiandrosterone
82633		72.25	Desoxycorticosterone
82634		68.27	Deoxycortisol
82638		28.56	Assay of dibucaine number
82652		89.78	Vit d 1 25-dihydroxy
82656		26.89	Pancreatic elastase fecal
82657		42.11	Enzyme cell activity
82658		42.11	Enzyme cell activity ra
82664		80.10	Electrophoretic test
82668		43.83	Assay of erythropoietin
82670		65.14	Assay of estradiol
82671		75.33	Assay of estrogens
82672		50.59	Assay of estrogen
82677		56.39	Assay of estriol
82679		58.19	Assay of estrone
82679	QW	58.19	Assay of estrone
82693		34.75	Assay of ethylene glycol
82696		55.00	Assay of etiocholanolone
82705		11.88	Fats/lipids feces qual
82710		39.19	Fats/lipids feces quant
82715		23.17	Assay of fecal fat
82725		31.04	Assay of blood fatty acids
82726		42.11	Long chain fatty acids
82728		31.79	Assay of ferritin
82731		150.21	Assay of fetal fibronectin
82735		43.23	Assay of fluoride
82746		34.29	Assay of folic acid serum
82747		40.12	Assay of folic acid rbc
82757		18.17	Assay of semen fructose

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCP	Modifier	Maximum Fees	SHORTDESC
82759		36.33	Assay of rbc galactokinase
82760		26.11	Assay of galactose
82775		49.13	Assay galactose transferase
82776		13.29	Galactose transferase test
82777		51.29	Galectin-3
82784		13.29	Assay iga/igd/igg/igm each
82785		38.39	Assay of ige
82787		10.71	Igg 1 2 3 or 4 each
82800		19.74	Blood pH
82803		45.12	Blood gases any combination
82805		66.16	Blood gases w/o2 saturation
82810		20.35	Blood gases o2 sat only
82820		22.59	Hemoglobin-oxygen affinity
82930		12.70	Gastric analy w/ph ea spec
82938		41.26	Gastrin test
82941		41.12	Assay of gastrin
82943		33.32	Assay of glucagon
82945		9.16	Glucose other fluid
82946		31.09	Glucagon tolerance test
82947		9.16	Assay glucose blood quant
82947	QW	9.16	Assay glucose blood quant
82948		7.40	Reagent strip/blood glucose
82950		11.07	Glucose test
82950	QW	11.07	Glucose test
82951		14.96	Glucose tolerance test (GTT)
82951	QW	14.96	Glucose tolerance test (GTT)
82952		9.15	GTT-added samples
82952	QW	9.15	GTT-added samples
82955		22.61	Assay of g6pd enzyme
82960		14.11	Test for G6PD enzyme
82962		4.20	Glucose blood test
82963		50.10	Assay of glucosidase
82965		18.02	Assay of gdh enzyme
82977		16.80	Assay of GGT
82977	QW	16.80	Assay of GGT
82978		24.82	Assay of glutathione
82979		16.07	Assay rbc glutathione
82985		35.16	Assay of glycated protein

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
82985	QW	35.16	Assay of glycated protein
83001		43.33	Assay of gonadotropin (fsh)
83001	QW	43.33	Assay of gonadotropin (fsh)
83002		43.18	Assay of gonadotropin (lh)
83002	QW	43.18	Assay of gonadotropin (lh)
83003		38.88	Assay growth hormone (hgh)
83006		51.29	Growth stimulation gene 2
83009		157.08	H pylori (c-13) blood
83010		15.45	Assay of haptoglobin quant
83012		40.09	Assay of haptoglobins
83013		157.08	H pylori (c-13) breath
83014		18.33	H pylori drug admin
83015		43.91	Heavy metal screen
83018		51.22	Quantitative screen metals
83020		27.10	Hemoglobin electrophoresis
83021		42.11	Hemoglobin chromatography
83026		5.51	Hemoglobin copper sulfate
83030		19.28	Fetal hemoglobin chemical
83033		13.91	Fetal hemoglobin assay qual
83036		22.64	Glycosylated hemoglobin test
83036	QW	22.64	Glycosylated hemoglobin test
83037		22.64	Glycosylated hb home device
83037	QW	22.64	Glycosylated hb home device
83045		11.54	Blood methemoglobin test
83050		17.09	Blood methemoglobin assay
83051		8.16	Assay of plasma hemoglobin
83060		19.28	Blood sulfhemoglobin assay
83065		16.07	Assay of hemoglobin heat
83068		19.74	Hemoglobin stability screen
83069		9.21	Assay of urine hemoglobin
83070		11.07	Assay of hemosiderin qual
83080		6.15	Assay of b hexosaminidase
83088		68.87	Assay of histamine
83090		39.34	Assay of homocystine
83150		45.12	Assay of homovanillic acid
83491		40.87	Assay of corticosteroids 17
83497		30.07	Assay of 5-hiaa
83498		63.36	Assay of progesterone 17-d

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
83499		58.79	Assay of progesterone 20-
83500		52.82	Assay free hydroxyproline
83505		56.68	Assay total hydroxyproline
83516		26.89	Immunoassay nonantibody
83516	QW	26.89	Immunoassay nonantibody
83518		19.77	Immunoassay dipstick
83518	QW	19.77	Immunoassay dipstick
83519		31.50	Ria nonantibody
83520		30.19	Immunoassay quant nos nonab
83520	QW	30.19	Immunoassay quant nos nonab
83525		26.66	Assay of insulin
83527		29.53	Assay of insulin
83528		37.09	Assay of intrinsic factor
83540		15.10	Assay of iron
83550		20.38	Iron binding test
83570		20.64	Assay of idh enzyme
83582		33.05	Assay of ketogenic steroids
83586		29.85	Assay 17- ketosteroids
83593		61.34	Fractionation ketosteroids
83605		3.26	Assay of lactic acid
83605	QW	3.26	Assay of lactic acid
83615		14.08	Lactate (LD) (LDH) enzyme
83625		13.86	Assay of ldh enzymes
83630		45.78	Lactoferrin fecal (qual)
83631		45.78	Lactoferrin fecal (quant)
83632		47.16	Placental lactogen
83633		12.82	Test urine for lactose
83655		28.24	Assay of lead
83655	QW	28.24	Assay of lead
83661		23.17	L/s ratio fetal lung
83662		44.10	Foam stability fetal lung
83663		44.10	Fluoro polarize fetal lung
83664		44.10	Lamellar bdy fetal lung
83670		21.37	Assay of lap enzyme
83690		16.07	Assay of lipase
83695		30.19	Assay of lipoprotein(a)
83698		76.04	Assay lipoprotein pla2
83700		23.04	Lipopro bld electrophoretic

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
83701		57.89	Lipoprotein bld hr fraction
83704		73.58	Lipoprotein bld by nmr
83718		19.11	Assay of lipoprotein
83718	QW	19.11	Assay of lipoprotein
83719		27.13	Assay of blood lipoprotein
83721		22.25	Assay of blood lipoprotein
83721	QW	22.25	Assay of blood lipoprotein
83727		40.09	Assay of lrh hormone
83735		15.62	Assay of magnesium
83775		17.19	Assay malate dehydrogenase
83785		57.36	Assay of manganese
83789		42.11	Mass spectrometry quant
83825		37.91	Assay of mercury
83835		39.51	Assay of metanephrines
83857		25.04	Assay of methemalbumin
83861		38.52	Microfluid analy tears
83861	QW	38.52	Microfluid analy tears
83864		46.44	Mucopolysaccharides
83872		13.67	Assay synovial fluid mucin
83873		40.12	Assay of csf protein
83874		30.12	Assay of myoglobin
83876		76.04	Assay myeloperoxidase
83880		76.04	Assay of natriuretic peptide
83880	QW	76.04	Assay of natriuretic peptide
83883		13.21	Assay nephelometry not spec
83885		57.15	Assay of nickel
83915		26.01	Assay of nucleotidase
83916		46.90	Oligoclonal bands
83918		38.37	Organic acids total quant
83919		38.37	Organic acids qual each
83921		38.37	Organic acid single quant
83930		15.42	Assay of blood osmolality
83935		15.90	Assay of urine osmolality
83937		34.80	Assay of osteocalcin
83945		30.02	Assay of oxalate
83950		150.21	Oncoprotein her-2/neu
83951		150.21	Oncoprotein dcp
83970		96.25	Assay of parathormone

Exhibit #8 – Proposed Clinical Laboratory Fees

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HCPCS	Modifier	Maximum Fees	SHORTDESC
83986		8.35	Assay ph body fluid nos
83986	QW	8.35	Assay ph body fluid nos
83987		37.04	Exhaled breath condensate
83992		34.29	Assay for phencyclidine
83993		45.78	Assay for calprotectin fecal
84030		12.82	Assay of blood pku
84035		7.14	Assay of phenylketones
84060		17.22	Assay acid phosphatase
84061		18.45	Phosphatase forensic exam
84066		22.53	Assay prostate phosphatase
84075		12.07	Assay alkaline phosphatase
84075	QW	12.07	Assay alkaline phosphatase
84078		17.02	Assay alkaline phosphatase
84080		34.48	Assay alkaline phosphatases
84081		38.52	Assay phosphatidylglycerol
84085		15.73	Assay of rbc pg6d enzyme
84087		24.07	Assay phosphohexose enzymes
84100		11.05	Assay of phosphorus
84105		12.07	Assay of urine phosphorus
84106		9.91	Test for porphobilinogen
84110		19.69	Assay of porphobilinogen
84112		150.21	Placenta alpha micro ig c/v
84119		20.09	Test urine for porphyrins
84120		34.31	Assay of urine porphyrins
84126		59.40	Assay of feces porphyrins
84132		10.73	Assay of serum potassium
84132	QW	10.73	Assay of serum potassium
84133		10.05	Assay of urine potassium
84134		13.21	Assay of prealbumin
84135		44.63	Assay of pregnanediol
84138		44.15	Assay of pregnanetriol
84140		34.80	Assay of pregnenolone
84143		34.80	Assay of 17-hydroxypregmeno
84144		36.33	Assay of progesterone
84145		62.48	Procalcitonin (pct)
84146		45.19	Assay of prolactin
84150		58.19	Assay of prostaglandin
84152		42.89	Assay of psa complexed

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
84153		42.89	Assay of psa total
84154		42.89	Assay of psa free
84155		8.55	Assay of protein serum
84155	QW	8.55	Assay of protein serum
84156		8.55	Assay of protein urine
84157		8.55	Assay of protein other
84157	QW	8.55	Assay of protein other
84160		12.07	Assay of protein any source
84163		35.11	Pappa serum
84165		25.04	Protein e-phoresis serum
84166		41.58	Protein e-phoresis/urine/csf
84181		39.71	Western blot test
84182		41.97	Protein western blot test
84202		33.46	Assay RBC protoporphyrin
84203		20.08	Test RBC protoporphyrin
84206		41.41	Assay of proinsulin
84207		65.52	Assay of vitamin b-6
84210		25.31	Assay of pyruvate
84220		22.02	Assay of pyruvate kinase
84228		27.13	Assay of quinine
84233		150.21	Assay of estrogen
84234		151.30	Assay of progesterone
84235		122.04	Assay of endocrine hormone
84238		85.27	Assay nonendocrine receptor
84244		51.29	Assay of renin
84252		47.19	Assay of vitamin b-2
84255		59.53	Assay of selenium
84260		43.37	Assay of serotonin
84270		50.68	Assay of sex hormone globul
84275		31.33	Assay of sialic acid
84285		54.89	Assay of silica
84295		11.22	Assay of serum sodium
84295	QW	11.22	Assay of serum sodium
84300		11.34	Assay of urine sodium
84302		11.34	Assay of sweat sodium
84305		45.80	Assay of somatomedin
84307		42.62	Assay of somatostatin
84311		16.30	Spectrophotometry

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
84315		5.85	Body fluid specific gravity
84375		5.58	Chromatogram assay sugars
84376		12.82	Sugars single qual
84377		12.82	Sugars multiple qual
84378		26.88	Sugars single quant
84379		26.88	Sugars multiple quant
84392		11.07	Assay of urine sulfate
84402		59.40	Assay of free testosterone
84403		60.20	Assay of total testosterone
84410		123.34	Testosterone bioavailable
84425		49.50	Assay of vitamin b-1
84430		27.13	Assay of thiocyanate
84431		39.19	Thromboxane urine
84432		35.65	Assay of thyroglobulin
84436		16.01	Assay of total thyroxine
84437		15.08	Assay of neonatal thyroxine
84439		19.01	Assay of free thyroxine
84442		27.10	Assay of thyroid activity
84443		39.19	Assay thyroid stim hormone
84443	QW	39.19	Assay thyroid stim hormone
84445		118.59	Assay of tsi globulin
84446		33.07	Assay of vitamin e
84449		34.80	Assay of transcortin
84450		12.07	Transferase (AST) (SGOT)
84450	QW	12.07	Transferase (AST) (SGOT)
84460		12.36	Alanine amino (ALT) (SGPT)
84460	QW	12.36	Alanine amino (ALT) (SGPT)
84466		29.77	Assay of transferrin
84478		13.40	Assay of triglycerides
84478	QW	13.40	Assay of triglycerides
84479		15.08	Assay of thyroid (t3 or t4)
84480		33.07	Assay triiodothyronine (t3)
84481		39.51	Free assay (FT-3)
84482		36.75	T3 reverse
84484		15.59	Assay of troponin quant
84485		9.91	Assay duodenal fluid trypsin
84488		9.91	Test feces for trypsin
84490		13.29	Assay of feces for trypsin

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
84510		24.26	Assay of tyrosine
84512		17.95	Assay of troponin qual
84520		9.21	Assay of urea nitrogen
84520	QW	9.21	Assay of urea nitrogen
84525		4.03	Urea nitrogen semi-quant
84540		11.07	Assay of urine/urea-n
84545		15.42	Urea-N clearance test
84550		10.54	Assay of blood/uric acid
84550	QW	10.54	Assay of blood/uric acid
84560		11.07	Assay of urine/uric acid
84577		29.10	Assay of feces/urobilinogen
84578		3.26	Test urine urobilinogen
84580		16.54	Assay of urine urobilinogen
84583		11.73	Assay of urine urobilinogen
84585		36.14	Assay of urine vma
84586		34.80	Assay of vip
84588		76.04	Assay of vasopressin
84590		27.06	Assay of vitamin a
84591		27.06	Assay of nos vitamin
84597		31.99	Assay of vitamin k
84600		37.50	Assay of volatiles
84620		27.63	Xylose tolerance test
84630		26.55	Assay of zinc
84681		40.53	Assay of c-peptide
84702		35.11	Chorionic gonadotropin test
84703		16.30	Chorionic gonadotropin assay
84703	QW	16.30	Chorionic gonadotropin assay
84704		35.11	Hcg free betachain test
84830		23.39	Ovulation tests
85002		10.52	Bleeding time test
85004		11.63	Automated diff wbc count
85007		8.01	Bl smear w/diff wbc count
85008		8.01	Bl smear w/o diff wbc count
85009		8.69	Manual diff wbc count b-coat
85013		5.53	Spun microhematocrit
85014		5.53	Hematocrit
85014	QW	5.53	Hematocrit
85018		5.53	Hemoglobin

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
85018	QW	5.53	Hemoglobin
85025		16.49	Complete cbc w/auto diff wbc
85027		11.63	Complete cbc automated
85032		10.05	Manual cell count each
85041		7.04	Automated rbc count
85044		10.05	Manual reticulocyte count
85045		9.32	Automated reticulocyte count
85046		12.99	Reticyte/hgb concentrate
85048		5.92	Automated leukocyte count
85049		10.44	Automated platelet count
85055		42.19	Reticulated platelet assay
85130		16.49	Chromogenic substrate assay
85170		8.45	Blood clot retraction
85175		10.63	Blood clot lysis time
85210		30.28	Clot factor ii prothrom spec
85220		41.16	Blood clot factor v test
85230		41.75	Clot factor vii proconvertin
85240		41.75	Clot factor viii ahg 1 stage
85244		47.62	Clot factor viii reltd antgn
85245		53.50	Clot factor viii vw ristoctn
85246		53.50	Clot factor viii vw antigen
85247		53.50	Clot factor viii multimetric
85250		44.40	Clot factor ix ptc/chrtmas
85260		41.75	Clot factor x stuart-power
85270		41.75	Clot factor xi pta
85280		45.12	Clot factor xii hageman
85290		38.10	Clot factor xiii fibrin stab
85291		20.74	Clot factor xiii fibrin scrn
85292		44.15	Clot factor fletcher fact
85293		44.15	Clot factor wght kininogen
85300		27.64	Antithrombin iii activity
85301		25.21	Antithrombin iii antigen
85302		28.02	Clot inhibit prot c antigen
85303		32.27	Clot inhibit prot c activity
85305		27.06	Clot inhibit prot s total
85306		35.73	Clot inhibit prot s free
85307		35.73	Assay activated protein c
85335		21.49	Factor inhibitor test

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
85337		24.31	Thrombomodulin
85345		10.05	Coagulation time lee & white
85347		9.93	Coagulation time activated
85348		8.69	Coagulation time otr method
85360		10.80	Euglobulin lysis
85362		16.07	Fibrin degradation products
85366		20.09	Fibrinogen test
85370		26.49	Fibrinogen test
85378		16.64	Fibrin degrade semiquant
85379		18.89	Fibrin degradation quant
85380		18.89	Fibrin degradj d-dimer
85384		19.81	Fibrinogen activity
85385		19.81	Fibrinogen antigen
85390		9.91	Fibrinolysins screen i&r
85397		53.50	Clotting funct activity
85400		20.64	Fibrinolytic plasmin
85410		16.52	Fibrinolytic antiplasmin
85415		40.09	Fibrinolytic plasminogen
85420		15.23	Fibrinolytic plasminogen
85421		23.75	Fibrinolytic plasminogen
85441		9.79	Heinz bodies direct
85445		15.90	Heinz bodies induced
85460		18.04	Hemoglobin fetal
85461		15.47	Hemoglobin fetal
85475		20.69	Hemolysin acid
85520		24.82	Heparin assay
85525		27.61	Heparin neutralization
85530		33.07	Heparin-protamine tolerance
85536		15.08	Iron stain peripheral blood
85540		20.06	Wbc alkaline phosphatase
85547		20.06	RBC mechanical fragility
85549		43.72	Muramidase
85555		15.59	RBC osmotic fragility
85557		31.14	RBC osmotic fragility
85576		50.10	Blood platelet aggregation
85576	QW	50.10	Blood platelet aggregation
85597		35.84	Phospholipid plltl neutraliz
85598		35.84	Hexagnal phosph plltl neutr

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
85610		9.16	Prothrombin time
85610	QW	9.16	Prothrombin time
85611		9.20	Prothrombin test
85612		22.34	Viper venom prothrombin time
85613		22.34	Russell viper venom diluted
85635		22.97	Reptilase test
85651		8.28	Rbc sed rate nonautomated
85652		6.29	Rbc sed rate automated
85660		12.85	RBC sickle cell test
85670		13.45	Thrombin time plasma
85675		15.96	Thrombin time titer
85705		16.30	Thromboplastin inhibition
85730		14.01	Thromboplastin time partial
85732		15.08	Thromboplastin time partial
85810		27.22	Blood viscosity examination
86000		16.29	Agglutinins febrile antigen
86001		11.17	Allergen specific igg
86003		11.17	Allergen specific IgE
86005		16.34	Allergen specific IgE
86021		35.11	WBC antibody identification
86022		42.84	Platelet antibodies
86023		29.05	Immunoglobulin assay
86038		28.19	Antinuclear antibodies
86039		26.03	Antinuclear antibodies (ANA)
86060		13.12	Antistreptolysin o titer
86063		8.30	Antistreptolysin o screen
86140		12.07	C-reactive protein
86141		30.19	C-reactive protein hs
86146		35.65	Beta-2 glycoprotein antibody
86147		35.65	Cardiolipin antibody ea ig
86148		37.47	Anti-phospholipid antibody
86152		572.97	Cell enumeration & id
86155		36.33	Chemotaxis assay
86156		15.62	Cold agglutinin screen
86157		18.80	Cold agglutinin titer
86160		27.98	Complement antigen
86161		27.98	Complement/function activity
86162		47.40	Complement total (ch50)

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
86171		23.34	Complement fixation each
86185		20.88	Counterimmunoelectrophoresis
86200		30.19	Ccp antibody
86215		30.89	Deoxyribonuclease antibody
86225		32.05	Dna antibody native
86226		28.24	Dna antibody single strand
86235		34.83	Nuclear antigen antibody
86243		47.84	Fc receptor
86255		28.10	Fluorescent antibody screen
86256		28.10	Fluorescent antibody titer
86277		36.70	Growth hormone antibody
86280		19.11	Hemagglutination inhibition
86294		45.76	Immunoassay tumor qual
86294	QW	45.76	Immunoassay tumor qual
86300		48.54	Immunoassay tumor ca 15-3
86301		48.54	Immunoassay tumor ca 19-9
86304		48.54	Immunoassay tumor ca 125
86305		48.54	Human epididymis protein 4
86308		12.07	Heterophile antibody screen
86308	QW	12.07	Heterophile antibody screen
86309		15.08	Heterophile antibody titer
86310		17.19	Heterophile antibody absrbj
86316		48.54	Immunoassay tumor other
86317		34.95	Immunoassay infectious agent
86318		30.19	Immunoassay infectious agent
86318	QW	30.19	Immunoassay infectious agent
86320		52.28	Serum immunoelectrophoresis
86325		52.16	Other immunoelectrophoresis
86327		52.90	Immunoelectrophoresis assay
86329		32.76	Immunodiffusion nes
86331		27.93	Immunodiffusion ouchterlony
86332		40.15	Immune complex assay
86334		52.11	Immunofix e-phoresis serum
86335		68.44	Immunifix e-phorsis/urine/csf
86336		30.21	Inhibin A
86337		49.93	Insulin antibodies
86340		35.16	Intrinsic factor antibody
86341		31.31	Islet cell antibody

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
86343		29.05	Leukocyte histamine release
86344		18.62	Leukocyte phagocytosis
86352		316.83	Cell function assay w/stim
86353		114.33	Lymphocyte transformation
86355		41.41	B cells total count
86356		42.19	Mononuclear cell antigen
86357		41.41	Nk cells total count
86359		41.41	T cells total count
86360		82.81	T cell absolute count/ratio
86361		42.19	T cell absolute count
86367		41.41	Stem cells total count
86376		33.93	Microsomal antibody each
86378		45.92	Migration inhibitory factor
86382		39.44	Neutralization test viral
86384		26.55	Nitroblue tetrazolium dye
86386		37.25	Nuclear matrix protein 22
86386	QW	37.25	Nuclear matrix protein 22
86403		16.30	Particle agglut antbdy scrn
86406		24.80	Particle agglut antbdy titr
86430		13.23	Rheumatoid factor test qual
86431		13.23	Rheumatoid factor quant
86480		144.53	Tb test cell immun measure
86481		174.74	Tb ag response t-cell susp
86590		24.82	Streptokinase antibody
86592		9.96	Syphilis test non-trep qual
86593		10.27	Syphilis test non-trep quant
86602		23.73	Antinomyces antibody
86603		26.16	Adenovirus antibody
86606		32.79	Aspergillus antibody
86609		30.04	Bacterium antibody
86611		23.73	Bartonella antibody
86612		26.16	Blastomyces antibody
86615		30.75	Bordetella antibody
86617		36.13	Lyme disease antibody
86618		39.71	Lyme disease antibody
86618	QW	39.71	Lyme disease antibody
86619		31.20	Borrelia antibody
86622		19.07	Brucella antibody

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
86625		30.60	Campylobacter antibody
86628		28.00	Candida antibody
86631		27.57	Chlamydia antibody
86632		29.58	Chlamydia igm antibody
86635		26.16	Coccidioides antibody
86638		26.16	Q fever antibody
86641		16.30	Cryptococcus antibody
86644		33.56	CMV antibody
86645		33.30	Cmv antibody igm
86648		35.46	Diphtheria antibody
86651		30.75	Encephalitis californ antbdy
86652		30.75	Encephaltis east eqne anbdy
86653		30.75	Encephaltis st louis antibody
86654		30.75	Encephaltis west eqne antbdy
86658		26.16	Enterovirus antibody
86663		30.60	Epstein-barr antibody
86664		33.30	Epstein-barr nuclear antigen
86665		33.30	Epstein-barr capsid vca
86666		23.73	Ehrlichia antibody
86668		18.17	Francisella tularensis
86671		26.16	Fungus nes antibody
86674		33.30	Giardia lamblia antibody
86677		33.83	Helicobacter pylori antibody
86682		24.12	Helminth antibody
86684		16.30	Hemophilus influenza antibdy
86687		19.57	Htlv-i antibody
86688		23.27	Htlv-ii antibody
86689		45.14	Htlv/hiv confirmj antibody
86692		40.02	Hepatitis delta agent antbdy
86694		33.56	Herpes simplex nes antbdy
86695		30.75	Herpes simplex type 1 test
86696		45.14	Herpes simplex type 2 test
86698		26.16	Histoplasma antibody
86701		20.72	Hiv-1antibody
86701	QW	20.72	Hiv-1antibody
86702		23.27	Hiv-2 antibody
86703		23.27	Hiv-1/hiv-2 1 result antbdy
86704		28.10	Hep b core antibody total

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
86705		27.46	Hep b core antibody igm
86706		25.04	Hep b surface antibody
86707		26.98	Hepatitis be antibody
86708		28.88	Hepatitis a total antibody
86709		26.25	Hepatitis a igm antibody
86710		31.60	Influenza virus antibody
86711		33.56	John cunningham antibody
86713		33.30	Legionella antibody
86717		28.56	Leishmania antibody
86720		30.75	Leptospira antibody
86723		30.75	Listeria monocytogenes
86727		26.16	Lymph choriomeningitis ab
86729		27.85	Lympho venereum antibody
86732		30.75	Mucormycosis antibody
86735		30.43	Mumps antibody
86738		30.87	Mycoplasma antibody
86741		30.75	Neisseria meningitidis
86744		30.75	Nocardia antibody
86747		35.05	Parvovirus antibody
86750		30.75	Malaria antibody
86753		24.12	Protozoa antibody nos
86756		30.06	Respiratory virus antibody
86757		45.14	Rickettsia antibody
86759		30.75	Rotavirus antibody
86762		33.56	Rubella antibody
86765		30.04	Rubeola antibody
86768		30.75	Salmonella antibody
86771		30.75	Shigella antibody
86774		34.51	Tetanus antibody
86777		33.56	Toxoplasma antibody
86778		33.30	Toxoplasma antibody igm
86780		30.87	Treponema pallidum
86780	QW	30.87	Treponema pallidum
86784		14.82	Trichinella antibody
86787		30.04	Varicella-zoster antibody
86788		33.30	West Nile virus ab igm
86789		33.56	West Nile virus antibody
86790		30.04	Virus antibody nos

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
86793		30.75	Yersinia antibody
86800		37.09	Thyroglobulin antibody
86803		33.27	Hepatitis c ab test
86803	QW	33.27	Hepatitis c ab test
86804		36.13	Hep c ab test confirm
86805		121.94	Lymphocytotoxicity assay
86806		110.98	Lymphocytotoxicity assay
86807		92.29	Cytotoxic antibody screening
86808		69.21	Cytotoxic antibody screening
86812		60.18	Hla typing a b or c
86813		74.46	Hla typing a b or c
86816		64.96	Hla typing dr/dq
86817		150.14	Hla typing dr/dq
86821		131.67	Lymphocyte culture mixed
86822		85.26	Lymphocyte culture primed
86825		126.60	Hla x-math non-cytotoxic
86826		42.19	Hla x-match noncytotoxc addl
86828		92.29	Hla class i&ii antibody qual
86829		69.21	Hla class i/ii antibody qual
86830		188.28	Hla class i phenotype qual
86831		161.38	Hla class ii phenotype qual
86832		295.87	Hla class i high defin qual
86833		268.97	Hla class ii high defin qual
86834		833.82	Hla class i semiquant panel
86835		753.13	Hla class ii semiquant panel
86850		8.93	Rbc antibody screen
86880		12.56	Coombs test direct
86885		13.35	Coombs test indirect qual
86886		12.07	Coombs test indirect titer
86900		6.97	Blood typing abo
86901		6.97	Blood typing rh (d)
86902		8.93	Blood type antigen donor ea
86904		22.19	Blood typing patient serum
86905		8.93	Blood typing rbc antigens
86906		14.96	Blood typing rh phenotype
86940		19.13	Hemolysins/agglutinins auto
86941		28.24	Hemolysins/agglutinins
87003		39.27	Small animal inoculation

Exhibit #8 – Proposed Clinical Laboratory Fees

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HCPCS	Modifier	Maximum Fees	SHORTDESC
87015		15.57	Specimen infect agnt concntj
87040		24.07	Blood culture for bacteria
87045		22.02	Feces culture aerobic bact
87046		22.02	Stool cultr aerobic bact ea
87070		20.09	Culture othr specimn aerobic
87071		22.02	Culture aerobic quant other
87073		22.02	Culture bacteria anaerobic
87075		22.08	Cultr bacteria except blood
87076		16.52	Culture anaerobe ident each
87077		16.52	Culture aerobic identify
87077	QW	16.52	Culture aerobic identify
87081		15.45	Culture screen only
87084		20.09	Culture of specimen by kit
87086		18.82	Urine culture/colony count
87088		18.87	Urine bacteria culture
87101		17.97	Skin fungi culture
87102		19.60	Fungus isolation culture
87103		21.03	Blood fungus culture
87106		24.07	Fungi identification yeast
87107		24.07	Fungi identification mold
87109		35.89	Mycoplasma
87110		45.70	Chlamydia culture
87116		25.19	Mycobacteria culture
87118		25.52	Mycobacteric identification
87140		12.99	Culture type immunofluoresc
87143		29.21	Culture typing glc/hplc
87147		12.07	Culture type immunologic
87149		46.77	Dna/rna direct probe
87150		81.84	Dna/rna amplified probe
87152		12.21	Culture type pulse field gel
87153		269.01	Dna/rna sequencing
87158		12.21	Culture typing added method
87164		25.04	Dark field examination
87166		26.35	Dark field examination
87168		9.96	Macroscopic exam arthropod
87169		9.96	Macroscopic exam parasite
87172		9.96	Pinworm exam
87176		13.72	Tissue homogenization cultr

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
87177		20.76	Ova and parasites smears
87181		11.07	Microbe susceptible diffuse
87184		16.08	Microbe susceptible disk
87185		11.07	Microbe susceptible enzyme
87186		20.16	Microbe susceptible mic
87187		24.17	Microbe susceptible mlc
87188		15.49	Microbe suscept macrobroth
87190		9.91	Microbe suscept mycobacteri
87197		35.04	Bactericidal level serum
87205		9.96	Smear gram stain
87206		12.56	Smear fluorescent/acid stai
87207		13.29	Smear special stain
87209		39.90	Smear complex stain
87210		9.96	Smear wet mount saline/ink
87210	QW	9.96	Smear wet mount saline/ink
87220		9.96	Tissue exam for fungi
87230		46.04	Assay toxin or antitoxin
87250		45.61	Virus inoculate eggs/animal
87252		60.79	Virus inoculation tissue
87253		47.11	Virus inoculate tissue addl
87254		45.61	Virus inoculation shell via
87255		78.97	Genet virus isolate hsv
87260		27.95	Adenovirus ag if
87265		27.95	Pertussis ag if
87267		27.95	Enterovirus antibody dfa
87269		27.95	Giardia ag if
87270		27.95	Chlamydia trachomatis ag if
87271		27.95	Cytomegalovirus dfa
87272		27.95	Cryptosporidium ag if
87273		27.95	Herpes simplex 2 ag if
87274		27.95	Herpes simplex 1 ag if
87275		27.95	Influenza b ag if
87276		27.95	Influenza a ag if
87277		27.95	Legionella micdadei ag if
87278		27.95	Legion pneumophilia ag if
87279		27.95	Parainfluenza ag if
87280		27.95	Respiratory syncytial ag if
87281		27.95	Pneumocystis carinii ag if

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
87283		27.95	Rubeola ag if
87285		27.95	Treponema pallidum ag if
87290		27.95	Varicella zoster ag if
87299		27.95	Antibody detection nos if
87300		27.95	Ag detection polyval if
87301		27.95	Adenovirus ag eia
87305		27.95	Aspergillus ag eia
87320		27.95	Chylmd trach ag eia
87324		27.95	Clostridium ag eia
87327		27.95	Cryptococcus neoform ag eia
87328		27.95	Cryptosporidium ag eia
87329		27.95	Giardia ag eia
87332		27.95	Cytomegalovirus ag eia
87335		27.95	E coli 0157 ag eia
87336		27.95	Entamoeb hist dispr ag eia
87337		27.95	Entamoeb hist group ag eia
87338		27.98	Hpylori stool eia
87338	QW	27.98	Hpylori stool ia
87339		27.95	H pylori ag eia
87340		24.09	Hepatitis b surface ag eia
87341		24.09	Hepatitis b surface ag eia
87350		26.88	Hepatitis be ag eia
87380		38.27	Hepatitis delta ag eia
87385		27.95	Histoplasma capsul ag eia
87389		56.15	Hiv-1 ag w/hiv-1 & hiv-2 ab
87389	QW	56.15	Hiv-1 ag w/hiv-1 & hiv-2 ab
87390		41.14	Hiv-1 ag eia
87391		41.14	Hiv-2 ag eia
87400		27.95	Influenza a/b ag eia
87420		27.95	Resp syncytial ag eia
87425		27.95	Rotavirus ag eia
87427		27.95	Shiga-like toxin ag eia
87430		27.95	Strep a ag eia
87449		27.95	Ag detect nos eia mult
87449	QW	27.95	Ag detect nos eia mult
87450		22.37	Ag detect nos eia single
87451		22.37	Ag detect polyval eia mult
87470		46.77	Bartonella dna dir probe

Exhibit #8 – Proposed Clinical Laboratory Fees

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HCPCS	Modifier	Maximum Fees	SHORTDESC
87471		81.84	Bartonella dna amp probe
87472		99.89	Bartonella dna quant
87475		46.77	Lyme dis dna dir probe
87476		81.84	Lyme dis dna amp probe
87477		99.89	Lyme dis dna quant
87480		46.77	Candida dna dir probe
87481		81.84	Candida dna amp probe
87482		97.38	Candida dna quant
87483		971.92	Cns dna amp probe type 12-25
87485		46.77	Chylmd pneum dna dir probe
87486		81.84	Chylmd pneum dna amp probe
87487		99.89	Chylmd pneum dna quant
87490		46.77	Chylmd trach dna dir probe
87491		81.84	Chylmd trach dna amp probe
87492		81.52	Chylmd trach dna quant
87493		81.84	C diff amplified probe
87495		46.77	Cytomeg dna dir probe
87496		81.84	Cytomeg dna amp probe
87497		99.89	Cytomeg dna quant
87498		81.84	Enterovirus probe&revrs trns
87500		81.84	Vanomycin dna amp probe
87501		119.66	Influenza dna amp prob 1+
87502		198.44	Influenza dna amp probe
87502	QW	198.44	Influenza dna amp probe
87503		48.43	Influenza dna amp prob addl
87505		299.17	Nfct agent detection gi
87506		497.71	ladna-dna/rna probe tq 6-11
87507		971.92	ladna-dna/rna probe tq 12-25
87510		46.77	Gardner vag dna dir probe
87511		81.84	Gardner vag dna amp probe
87512		97.38	Gardner vag dna quant
87515		46.77	Hepatitis b dna dir probe
87516		81.84	Hepatitis b dna amp probe
87517		99.89	Hepatitis b dna quant
87520		46.77	Hepatitis c rna dir probe
87521		81.84	Hepatitis c probe&rvrs trnsc
87522		99.89	Hepatitis c revrs trnscrpj
87525		46.77	Hepatitis g dna dir probe

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
87526		81.84	Hepatitis g dna amp probe
87527		97.38	Hepatitis g dna quant
87528		46.77	Hsv dna dir probe
87529		81.84	Hsv dna amp probe
87530		99.89	Hsv dna quant
87531		46.77	Hhv-6 dna dir probe
87532		81.84	Hhv-6 dna amp probe
87533		97.38	Hhv-6 dna quant
87534		46.77	Hiv-1 dna dir probe
87535		81.84	Hiv-1 probe&reverse trnscrpj
87536		198.44	Hiv-1 quant&revrse trnscrpj
87537		46.77	Hiv-2 dna dir probe
87538		81.84	Hiv-2 probe&revrse trnscripj
87539		99.89	Hiv-2 quant&revrse trnscripj
87540		46.77	Legion pneumo dna dir prob
87541		81.84	Legion pneumo dna amp prob
87542		97.38	Legion pneumo dna quant
87550		46.77	Mycobacteria dna dir probe
87551		81.84	Mycobacteria dna amp probe
87552		99.89	Mycobacteria dna quant
87555		46.77	M.tuberculo dna dir probe
87556		81.84	M.tuberculo dna amp probe
87557		99.89	M.tuberculo dna quant
87560		46.77	M.avium-intra dna dir prob
87561		81.84	M.avium-intra dna amp prob
87562		99.89	M.avium-intra dna quant
87580		46.77	M.pneumon dna dir probe
87581		81.84	M.pneumon dna amp probe
87582		97.38	M.pneumon dna quant
87590		46.77	N.gonorrhoeae dna dir prob
87591		81.84	N.gonorrhoeae dna amp prob
87592		99.89	N.gonorrhoeae dna quant
87623		81.84	Hpv low-risk types
87624		81.84	Hpv high-risk types
87625		81.84	Hpv types 16 & 18 only
87631		299.17	Resp virus 3-11 targets
87631	QW	299.17	Resp virus 3-5 targets
87632		497.71	Resp virus 6-11 targets

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
87633		971.92	Resp virus 12-25 targets
87640		81.84	Staph a dna amp probe
87641		81.84	Mr-staph dna amp probe
87650		46.77	Strep a dna dir probe
87650	QW	46.77	Strep a dna dir probe
87651		81.84	Strep a dna amp probe
87651	QW	81.84	Strep a dna amp probe
87652		97.38	Strep a dna quant
87653		81.84	Strep b dna amp probe
87660		46.77	Trichomonas vagin dir probe
87661		81.84	Trichomonas vaginalis amplif
87797		46.77	Detect agent nos dna dir
87798		81.84	Detect agent nos dna amp
87799		99.89	Detect agent nos dna quant
87800		93.55	Detect agnt mult dna direc
87801		163.69	Detect agnt mult dna ampli
87802		27.95	Strep b assay w/optic
87803		27.95	Clostridium toxin a w/optic
87804		27.95	Influenza assay w/optic
87804	QW	27.95	Influenza assay w/optic
87806		56.15	Hiv antigen w/hiv antibodies
87806	QW	56.15	Hiv antigen w/hiv antibodies
87807		27.95	Rsv assay w/optic
87807	QW	27.95	Rsv assay w/optic
87808		27.95	Trichomonas assay w/optic
87808	QW	27.95	Trichomonas assay w/optic
87809		27.95	Adenovirus assay w/optic
87809	QW	27.95	Adenovirus assay w/optic
87810		27.95	Chylmd trach assay w/optic
87850		27.95	N. gonorrhoeae assay w/optic
87880		27.95	Strep a assay w/optic
87880	QW	27.95	Strep a assay w/optic
87899		27.95	Agent nos assay w/optic
87899	QW	27.95	Agent nos assay w/optic
87900		303.96	Phenotype infect agent drug
87901		600.36	Genotype dna hiv reverse t
87902		600.36	Genotype dna/rna hep c
87903		1139.53	Phenotype dna hiv w/culture

Exhibit #8 – Proposed Clinical Laboratory Fees**Effective for Dates of Service On and After 1/1/2018**

HCPCS	Modifier	Maximum Fees	SHORTDESC
87904		60.79	Phenotype dna hiv w/clt add
87905		12.22	Sialidase enzyme assay
87905	QW	12.22	Sialidase enzyme assay
87906		300.19	Genotype dna/rna hiv
87910		600.36	Genotype cytomegalovirus
87912		600.36	Genotype dna hepatitis b
88130		35.11	Sex chromatin identification
88140		6.77	Sex chromatin identification
88142		47.24	Cytopath c/v thin layer
88143		47.24	Cytopath c/v thin layer redo
88147		26.54	Cytopath c/v automated
88148		35.43	Cytopath c/v auto rescreen
88150		24.63	Cytopath c/v manual
88152		24.63	Cytopath c/v auto redo
88153		24.63	Cytopath c/v redo
88154		24.63	Cytopath c/v select
88155		13.97	Cytopath c/v index add-on
88164		24.63	Cytopath tbs c/v manual
88165		24.63	Cytopath tbs c/v redo
88166		24.63	Cytopath tbs c/v auto redo
88167		24.63	Cytopath tbs c/v select
88174		49.83	Cytopath c/v auto in fluid
88175		61.78	Cytopath c/v auto fluid redo
88230		85.99	Tissue culture lymphocyte
88233		171.94	Tissue culture skin/biopsy
88235		171.94	Tissue culture placenta
88237		294.54	Tissue culture bone marrow
88239		344.01	Tissue culture tumor
88240		23.55	Cell cryopreserve/storage
88241		23.55	Frozen cell preparation
88245		347.14	Chromosome analysis 20-25
88248		403.84	Chromosome analysis 50-100
88249		403.84	Chromosome analysis 100
88261		412.17	Chromosome analysis 5
88262		290.67	Chromosome analysis 15-20
88263		350.47	Chromosome analysis 45
88264		290.67	Chromosome analysis 20-25
88267		419.24	Chromosome analys placenta

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
88269		387.87	Chromosome analys amniotic
88271		49.95	Cytogenetics dna probe
88272		62.44	Cytogenetics 3-5
88273		74.92	Cytogenetics 10-30
88274		81.18	Cytogenetics 25-99
88275		93.65	Cytogenetics 100-300
88280		58.51	Chromosome karyotype study
88283		159.97	Chromosome banding study
88285		44.30	Chromosome count additional
88289		80.29	Chromosome study additional
88371		51.78	Protein western blot tissue
88372		46.07	Protein analysis w/probe
88720		11.70	Bilirubin total transcut
88738		11.70	Hgb quant transcutaneous
88740		11.70	Transcutaneous carboxyhb
88741		11.70	Transcutaneous methb
89050		9.91	Body fluid cell count
89051		12.84	Body fluid cell count
89055		9.96	Leukocyte assessment fecal
89060		16.68	Exam synovial fluid crystals
89125		10.08	Specimen fat stain
89160		8.30	Exam feces for meat fibers
89190		8.30	Nasal smear for eosinophils
89300		20.83	Semen analysis w/huhner
89300	QW	20.83	Semen analysis w/huhner
89310		14.82	Semen analysis w/count
89320		28.10	Semen anal vol/count/mot
89321		28.10	Semen anal sperm detection
89321	QW	28.10	Semen anal sperm detection
89322		36.14	Semen anal strict criteria
89325		18.17	Sperm antibody test
89329		48.89	Sperm evaluation test
89330		23.07	Evaluation cervical mucus
89331		45.68	Retrograde ejaculation anal
0006M		0.00	Onc hep gene risk classifier
0007M		0.00	Onc gastro 51 gene nomogram
0008M		5853.71	Onc breast risk score
0009M		1023.57	Fetal aneuploidy trisom risk

Exhibit #8 – Proposed Clinical Laboratory Fees

Effective for Dates of Service On and After 1/1/2018

HCPCS	Modifier	Maximum Fees	SHORTDESC
ATP02		12.16	Auto.Test Panel Pricing Code, 1-2 Tests
ATP03		15.50	Auto.Test Panel Pricing Code, 3 Tests
ATP04		16.35	Auto.Test Panel Pricing Code, 4 Tests
ATP05		18.24	Auto.Test Panel Pricing Code, 5 Tests
ATP06		18.29	Auto.Test Panel Pricing Code, 6 Tests
ATP07		19.06	Auto.Test Panel Pricing Code, 7 Tests
ATP08		19.72	Auto.Test Panel Pricing Code, 8 Tests
ATP09		20.25	Auto.Test Panel Pricing Code, 9 Tests
ATP10		20.25	Auto.Test Panel Pricing Code, 10 Tests
ATP11		20.60	Auto.Test Panel Pricing Code, 11 Tests
ATP12		21.06	Auto.Test Panel Pricing Code, 12 Tests
ATP16		24.63	Auto Test Panel Pricing Code 13-16 Test
ATP18		24.82	Auto Test Panel Pricing Code, 17-18 Test
ATP19		25.81	Auto Test Panel Pricing Code, 19 Tests
ATP20		26.62	Auto Test Panel Pricing Code, 20 Tests
ATP21		27.47	Auto Test Panel Pricing Code, 21 Tests
ATP22		28.29	Auto.Test Panel Pricing Code, 22+ Tests
ATP23		28.29	Auto.Test Panel Pricing Code, 23+ Tests
G0027		15.16	Semen analysis
G0103		42.89	PSA screening
G0123		47.24	Screen cerv/vag thin layer
G0143		47.24	Scr c/v cyto,thinlayer,rescr
G0144		49.83	Scr c/v cyto,thinlayer,rescr
G0145		61.78	Scr c/v cyto,thinlayer,rescr
G0147		26.54	Scr c/v cyto, automated sys
G0148		35.43	Scr c/v cyto, autosys, rescr
G0306		16.49	CBC/diffwbc w/o platelet
G0307		11.63	CBC without platelet
G0328		37.09	Fecal blood scrn immunoassay
G0328	QW	37.09	Fecal blood scrn immunoassay
G0432		23.27	EIA HIV-1/HIV-2 screen
G0433		23.27	ELISA HIV-1/HIV-2 screen
G0433	QW	23.27	ELISA HIV-1/HIV-2 screen
G0435		27.95	Oral HIV-1/HIV-2 screen
G0471		8.50	Ven blood coll SNF/HHA
G0472		33.27	Hep c screen high risk/other
G0472	QW	33.27	Hep c screen high risk/other
G0475		56.15	Hiv combination assay

Exhibit #8 – Proposed Clinical Laboratory Fees			
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HCPCS	Modifier	Maximum Fees	SHORTDESC
G0476		81.84	Hpv combo assay ca screen
G0480		200.01	Drug test def 1-7 classes
G0481		273.68	Drug test def 8-14 classes
G0482		347.38	Drug test def 15-21 classes
G0483		431.58	Drug test def 22+ classes
G0659		135.68	Drug test def simple all cl
G9143		281.50	Warfarin respon genetic test
P2038		11.73	Blood mucoprotein
P3000		24.63	Screen pap by tech w md supv
P9612		5.10	Catheterize for urine spec
P9615		5.10	Urine specimen collect mult
Q0111		9.96	Wet mounts/ w preparations
Q0112		9.96	Potassium hydroxide preps
Q0113		12.61	Pinworm examinations
Q0114		16.68	Fern test
Q0115		23.07	Post-coital mucous exam