



Thompson Peak - Inpatient - Average Patient Price List

DRG Code	DRG Type	Procedure Description	Prompt Pay Price ⁽¹⁾	Direct Pay Price ⁽²⁾	Average Total Price ⁽³⁾
177	MS-DRG	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	\$21,352	\$27,758	\$42,704
871	MS-DRG	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	\$24,416	\$31,740	\$48,831
281	MS-DRG	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH CC	\$22,416	\$29,141	\$44,833
309	MS-DRG	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH CC	\$41,110	\$53,443	\$82,221
392	MS-DRG	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	\$10,868	\$14,128	\$21,735
454	MS-DRG	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH CC	\$147,592	\$191,870	\$295,185
455	MS-DRG	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITHOUT CC/MCC	\$138,775	\$180,407	\$277,550
470	MS-DRG	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	\$45,725	\$59,443	\$91,451
683	MS-DRG	RENAL FAILURE WITH CC	\$10,006	\$13,008	\$20,013
641	MS-DRG	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITHOUT MCC	\$13,562	\$17,630	\$27,123
473	MS-DRG	CERVICAL SPINAL FUSION WITHOUT CC/MCC	\$64,299	\$83,589	\$128,598
394	MS-DRG	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH CC	\$13,595	\$17,673	\$27,189
435	MS-DRG	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH MCC	\$35,186	\$45,742	\$70,373
438	MS-DRG	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH MCC	\$33,144	\$43,087	\$66,288
378	MS-DRG	GASTROINTESTINAL HEMORRHAGE WITH CC	\$22,197	\$28,856	\$44,394
389	MS-DRG	GASTROINTESTINAL OBSTRUCTION WITH CC	\$12,796	\$16,634	\$25,591
872	MS-DRG	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	\$14,034	\$18,245	\$28,069
857	MS-DRG	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS WITH O.R. PROCEDURES WITH CC	\$30,155	\$39,202	\$60,310
690	MS-DRG	KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	\$16,382	\$21,296	\$32,764
708	MS-DRG	MAJOR MALE PELVIC PROCEDURES WITHOUT CC/MCC	\$47,577	\$61,850	\$95,153
743	MS-DRG	UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITHOUT CC/MCC	\$39,559	\$51,426	\$79,117
64	MS-DRG	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH MCC	\$26,441	\$34,373	\$52,881
291	MS-DRG	HEART FAILURE AND SHOCK WITH MCC	\$23,980	\$31,174	\$47,960
300	MS-DRG	PERIPHERAL VASCULAR DISORDERS WITH CC	\$25,118	\$32,653	\$50,236
178	MS-DRG	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH CC	\$26,273	\$34,155	\$52,546
208	MS-DRG	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <=96 HOURS	\$40,527	\$52,685	\$81,053
456	MS-DRG	SPINAL FUSION EXCEPT CERVICAL WITH SPINAL CURVATURE, MALIGNANCY, INFECTION OR EXTENSIVE FUSIONS WITH MCC	\$226,177	\$294,030	\$452,354
441	MS-DRG	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH MCC	\$10,976	\$14,269	\$21,953
390	MS-DRG	GASTROINTESTINAL OBSTRUCTION WITHOUT CC/MCC	\$11,955	\$15,541	\$23,909



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386	MS-DRG	INFLAMMATORY BOWEL DISEASE WITH CC	\$14,242	\$18,514	\$28,483
310	MS-DRG	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITHOUT CC/MCC	\$11,896	\$15,465	\$23,792
312	MS-DRG	SYNCOPE AND COLLAPSE	\$20,773	\$27,005	\$41,547
339	MS-DRG	APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITH CC	\$34,159	\$44,407	\$68,319
346	MS-DRG	MINOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC	\$31,472	\$40,914	\$62,945
480	MS-DRG	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH MCC	\$42,955	\$55,842	\$85,910
481	MS-DRG	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	\$56,822	\$73,869	\$113,645
482	MS-DRG	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITHOUT CC/MCC	\$55,426	\$72,054	\$110,852
483	MS-DRG	MAJOR JOINT OR LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITIES	\$45,521	\$59,177	\$91,042
489	MS-DRG	KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITHOUT CC/MCC	\$53,214	\$69,178	\$106,428
493	MS-DRG	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH CC	\$101,506	\$131,958	\$203,012
512	MS-DRG	SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITHOUT CC/MCC	\$32,318	\$42,014	\$64,637
644	MS-DRG	ENDOCRINE DISORDERS WITH CC	\$18,592	\$24,170	\$37,184
660	MS-DRG	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH CC	\$41,656	\$54,153	\$83,313
661	MS-DRG	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC	\$23,482	\$30,526	\$46,964
666	MS-DRG	PROSTATECTOMY WITH CC	\$38,868	\$50,528	\$77,735
682	MS-DRG	RENAL FAILURE WITH MCC	\$22,240	\$28,912	\$44,480
684	MS-DRG	RENAL FAILURE WITHOUT CC/MCC	\$13,261	\$17,239	\$26,522
552	MS-DRG	MEDICAL BACK PROBLEMS WITHOUT MCC	\$115,520	\$150,176	\$231,041
558	MS-DRG	TENDONITIS, MYOSITIS AND BURSITIS WITHOUT MCC	\$18,806	\$24,448	\$37,613
580	MS-DRG	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH CC	\$17,766	\$23,095	\$35,531

The above prices do not include physicians' fees, which may be charged by your surgeon, anesthesiologist, pathologist or radiologist. Please contact your physicians' offices and health insurance provider directly for price information.

(1) Prompt Pay Price is the average price a self-pay patient will pay when paid-in-full in advance of having this procedure.

(2) Direct Pay Price is the average price a self-pay patient will pay when having this procedure. Arrangements can be made to pay over time.

(3) Average (Estimated) Total Price is the estimated average total charges a person will experience when having this procedure