



Sonoran Crossing - 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 V39 (FY 2022)	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	\$23,345	\$30,349	\$46,690
795	MS-DRG V39 (FY 2022)	NORMAL NEWBORN	\$3,095	\$4,023	\$6,189
871	MS-DRG V39 (FY 2022)	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	\$31,201	\$40,561	\$62,402
291	MS-DRG V39 (FY 2022)	HEART FAILURE AND SHOCK WITH MCC	\$16,364	\$21,273	\$32,728
872	MS-DRG V39 (FY 2022)	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	\$15,647	\$20,341	\$31,295
560	APR-DRG V38 (FY 2021)	VAGINAL DELIVERY	\$9,322	\$12,119	\$18,644
807	MS-DRG V39 (FY 2022)	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC/MCC	\$8,601	\$11,182	\$17,202
392	MS-DRG V39 (FY 2022)	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	\$15,791	\$20,528	\$31,582
640	APR-DRG V38 (FY 2021)	NEONATE BIRTH WEIGHT > 2499 GRAMS, NORMAL NEWBORN OR NEONATE WITH OTHER PROBLEM	\$2,721	\$3,538	\$5,443
788	MS-DRG V39 (FY 2022)	CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC/MCC	\$15,248	\$19,823	\$30,496
208	MS-DRG V39 (FY 2022)	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <=96 HOURS	\$79,598	\$103,477	\$159,196
467	MS-DRG V39 (FY 2022)	REVISION OF HIP OR KNEE REPLACEMENT WITH CC	\$108,706	\$141,318	\$217,412
640	MS-DRG V39 (FY 2022)	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITH MCC	\$29,847	\$38,801	\$59,693
698	MS-DRG V39 (FY 2022)	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH MCC	\$15,909	\$20,682	\$31,818
789	MS-DRG V39 (FY 2022)	NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY	\$2,821	\$3,667	\$5,642
720	APR-DRG V38 (FY 2021)	SEPTICEMIA AND DISSEMINATED INFECTIONS	\$37,371	\$48,582	\$74,741
207	MS-DRG V39 (FY 2022)	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT >96 HOURS	\$166,225	\$216,092	\$332,450
792	MS-DRG V39 (FY 2022)	PREMATURITY WITHOUT MAJOR PROBLEMS	\$4,122	\$5,359	\$8,244
794	MS-DRG V39 (FY 2022)	NEONATE WITH OTHER SIGNIFICANT PROBLEMS	\$3,675	\$4,777	\$7,349
193	MS-DRG V39 (FY 2022)	SIMPLE PNEUMONIA AND PLEURISY WITH MCC	\$18,813	\$24,457	\$37,627
758	MS-DRG V39 (FY 2022)	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM WITH CC	\$10,682	\$13,886	\$21,363
768	MS-DRG V39 (FY 2022)	VAGINAL DELIVERY WITH O.R. PROCEDURES EXCEPT STERILIZATION AND/OR D&C	\$10,086	\$13,112	\$20,172
440	MS-DRG V39 (FY 2022)	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITHOUT CC/MCC	\$16,674	\$21,676	\$33,348
854	MS-DRG V39 (FY 2022)	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH CC	\$34,083	\$44,308	\$68,166
683	MS-DRG V39 (FY 2022)	RENAL FAILURE WITH CC	\$19,708	\$25,620	\$39,416
092	MS-DRG V39 (FY 2022)	OTHER DISORDERS OF NERVOUS SYSTEM WITH CC	\$23,502	\$30,553	\$47,004
303	MS-DRG V39 (FY 2022)	ATHEROSCLEROSIS WITHOUT MCC	\$17,951	\$23,336	\$35,902
863	MS-DRG V39 (FY 2022)	POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITHOUT MCC	\$15,598	\$20,277	\$31,195
190	MS-DRG V39 (FY 2022)	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH MCC	\$8,673	\$11,274	\$17,345
394	MS-DRG V39 (FY 2022)	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH CC	\$11,605	\$15,086	\$23,209
682	MS-DRG V39 (FY 2022)	RENAL FAILURE WITH MCC	\$17,393	\$22,611	\$34,786
441	MS-DRG V39 (FY 2022)	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS OR ALCOHOLIC HEPATITIS WITH MCC	\$29,980	\$38,974	\$59,960
445	MS-DRG V39 (FY 2022)	DISORDERS OF THE BILIARY TRACT WITH CC	\$15,727	\$20,446	\$31,455
690	MS-DRG V39 (FY 2022)	KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	\$10,965	\$14,255	\$21,930
637	MS-DRG V39 (FY 2022)	DIABETES WITH MCC	\$27,204	\$35,366	\$54,409
639	MS-DRG V39 (FY 2022)	DIABETES WITHOUT CC/MCC	\$11,056	\$14,373	\$22,113
419	MS-DRG V39 (FY 2022)	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITHOUT CC/MCC	\$37,859	\$49,216	\$75,718
438	MS-DRG V39 (FY 2022)	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH MCC	\$10,985	\$14,280	\$21,969
544	MS-DRG V39 (FY 2022)	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITHOUT CC/MCC	\$9,476	\$12,319	\$18,953
377	MS-DRG V39 (FY 2022)	GASTROINTESTINAL HEMORRHAGE WITH MCC	\$27,807	\$36,149	\$55,615
065	MS-DRG V39 (FY 2022)	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	\$21,061	\$27,379	\$42,122



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175	MS-DRG V39 (FY 2022)	PULMONARY EMBOLISM WITH MCC OR ACUTE COR PULMONALE	\$14,127	\$18,364	\$28,253
468	MS-DRG V39 (FY 2022)	REVISION OF HIP OR KNEE REPLACEMENT WITHOUT CC/MCC	\$66,729	\$86,748	\$133,458
540	APR-DRG V38 (FY 2021)	CESAREAN SECTION WITHOUT STERILIZATION	\$14,863	\$19,322	\$29,726
570	MS-DRG V39 (FY 2022)	SKIN DEBRIDEMENT WITH MCC	\$39,553	\$51,419	\$79,107
004	MS-DRG V39 (FY 2022)	TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITHOUT MAJOR O.R. PROCEDURES	\$152,771	\$198,603	\$305,542
554	MS-DRG V39 (FY 2022)	BONE DISEASES AND ARTHROPATHIES WITHOUT MCC	\$6,759	\$8,787	\$13,519
189	MS-DRG V39 (FY 2022)	PULMONARY EDEMA AND RESPIRATORY FAILURE	\$76,721	\$99,737	\$153,442
282	MS-DRG V39 (FY 2022)	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITHOUT CC/MCC	\$19,959	\$25,946	\$39,918
335	MS-DRG V39 (FY 2022)	PERITONEAL ADHESIOLYSIS WITH MCC	\$22,168	\$28,818	\$44,336

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