Independent Hospital Pricing Authority

National Hospital Cost Data Collection Australian Public Hospitals Cost Report 2012-2013, Round 17

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Executive summary

The *National Health Reform Act 2011* established the Independent Hospital Pricing Authority (IHPA) as part of the National Health Reform agenda. The key purpose of the IHPA is to promote improved efficiency in, and access to, public hospital services through setting the National Efficient Price (NEP) and levels of block funding for hospital services. The National Hospital Cost Data Collection (NHCDC) is the primary data collection used in these processes.

Participation

The Round 17 NHCDC includes cost and activity data from the financial year 2012-13. There were 402 participating hospitals that submitted data, located across all jurisdictions. This is a decrease of 37 (8.4%) from the 439 hospitals that participated in Round 16. In comparison to Round 16, the total number of hospitals submitting:

- admitted acute data by Australian Refined Diagnosis-Related Groups (AR-DRGs) decreased by 10.1%;
- emergency department data by Urgency Related Group (URG) increased by 7.7%;
- non-admitted data by Tier 2 clinics increased by 35.7%; and
- subacute data (made up of rehabilitation, psychogeriatric, geriatric evaluation and management (GEM), palliative care and maintenance) decreased by 6.4%.

Volume

In Round 17, the 402 hospitals provided data on:

- 4.8 million admitted acute separations, up 1.9% from 4.7 million in Round 16;
- 6.5 million emergency (admitted and non-admitted) presentations, up 8.1% from 6.0 million in Round 16;
- 12.6 million non-admitted service events, up 18.1% from 10.7 in Round 16; and
- 167,663 admitted subacute separations, up 8.6% from 154,432 in Round 16.

The volume of activity and costs increased across all four major product groups, most notably, non-admitted service event data was submitted by New South Wales for the first time. The use of AN-SNAP classification has increased amongst the majority of jurisdictions, although there is still variation between the different versions used to report. Finally, there were no submissions of cost modelled sites in Round 17, with each of the 402 hospitals submitting patient level cost data.

Costs

The data provided accounted for a total for $31.6 billion (admitted ED costs included only once) in Australian hospital costs. Total costs for each product were as follows:

- $23.4 billion in admitted acute patient costs (including admitted emergency), up 2.9% from $22.7 billion in Round 16;
- $3.8 billion in emergency (admitted and non-admitted) presentation costs, up 8.8% from $3.4 billion in Round 16;
- $4.0 billion in non-admitted service event costs, up 19.4% from $3.3 billion in Round 16;
- $2.1 billion in admitted subacute patient costs, up 10.1% from $1.9 billion in Round 16; and
- $55 million in other costs, down 30.0% from $79 million in Round 16.

This coverage demonstrates considerable progress in the transition of the NHCDC from a voluntary data collection that was largely focused on the production of admitted acute cost weights to the primary data collection supporting the development of the NEP for public hospital services. This report focusses on the analysis of actual costs using submitted data.

Summary of results

Based on the Round 17 NHCDC data the following national average costs were calculated:

- $4,914 per admitted acute separation, up 0.9% from $4,868 in Round 16;
- $578 per emergency presentation, up 0.7% from $575 in Round 16, which includes both admitted presentations ($960 per presentation, down 8.3% from $1,047 in Round 16) and non-admitted presentations ($451 per presentation, down 2.6% from $463 in Round 16);
- $316 per non-admitted service event, up 1.1% from $313 in Round 16; and
- $12,267 per subacute separation, up 1.4% from $12,098 in Round 16, and $938 per subacute bed day, up 4.3% from $899 in Round 16.

Round 17 saw improvement in many areas that had previously been inconsistent or under-reported within the NHCDC sample, such as the increased reporting of non-admitted data and the improved consistency in the allocation of acute costs to cost buckets. There are still areas for improvement, for example, more consistent allocation of indirect costs for the acute product, increased reporting of 'other' services (including teaching, training and research costs), and increased use of line items such as pharmaceutical-PBS, blood, capital expenditure and corporate expenditure. In interpreting these results, it is important to have regard to Chapter 8, which reproduces the statements of data quality issues affecting the results, as submitted by the jurisdictions to the IHPA.

Readers of the report are reminded that the results published should not be compared to the NEP. The NEP includes a series of adjustments to the NHCDC results to account for variations in the cost of delivering services, based on factors such as location, indigenous status and paediatrics. Further information about the NEP adjustments can be found on the IHPA website (www.ihpa.gov.au).

This report presents an analysis of the annual data submitted to the National Hospital Cost Data Collection (NHCDC) for Round 17 (2012-13). This chapter sets out the context for this report and provides background information on the NHCDC, how the data is collected and analysed and other relevant work that relies on or supports the NHCDC.

1 Introduction

Contents of this Chapter:

1.1 Objective of the NHCDC

The National Hospital Cost Data Collection (NHCDC) is an annual collection of public hospital data, and is the primary data collection used to develop the National Efficient Price (NEP). Each Round is made up of several components including the public hospital report and an independent financial review of the public hospital collection.

The objective of the NHCDC is to provide Australian federal and jurisdictional governments and the health care industry with a robust data set developed using nationally consistent methods of costing all hospital activity which can be used for benchmarking, funding and planning hospital services.

The current goals of the NHCDC are to:

- produce robust estimates of hospital costs and casemix relativities;
- provide a platform for inter- and intra-jurisdictional comparison of hospital costs;
- encourage hospitals to examine their cost structures and produce costing information; and
- provide data to inform the ongoing refinement of casemix classifications.

1.2 History of the NHCDC

The NHCDC was established by the Commonwealth Government in 1996. Initially, the NHCDC was required to provide retrospective, detailed, national cost weights for admitted acute patient services (based on data grouped to the AR-DRG classification), and summary information on other patient services such as subacute care, emergency departments and non-admitted clinics.

In 2011, the *National Health Reform Act 2011* established the IHPA as part of the National Health Reform agenda. From Round 15 (2010-11), the NHCDC moved from a voluntary data collection that was largely focussed on the production of admitted acute cost weights to a primary data collection that supported the development of the NEP by the IHPA for all public hospital services (including admitted acute, subacute, emergency care and non-admitted data).

The most recent NHCDC Rounds are Round 16 (2011-12) and Round 17 (2012-13).

1.3 The NHCDC and the National Efficient Price (NEP)

The key purpose of the IHPA is to promote improved efficiency in, and access to, public hospital services through setting the National Efficient Price (NEP). The NEP underpins Activity Based Funding (ABF) across Australia for Commonwealth funded public hospital services.

The NEP has two key purposes: to determine the amount of Commonwealth Government funding provided to public hospital services; and to provide a price signal or benchmark about the efficient cost of providing public hospital services.

Each NEP Determination includes the scope of public hospital services eligible for Commonwealth Government funding on an activity basis (the General List) and adjustments to the price to reflect legitimate and unavoidable variations in the cost of delivering health care services.

The NEP is developed based on the results of recent NHCDC collections, in close consultation with Australian federal and jurisdictional governments on an annual basis.

1.4 Scope of the Collection

The purpose of the NHCDC is to collect primary data in support of the development of the NEP for all public hospital services. The data in scope includes all episodes of hospital care for all public hospital facilities across Australia, and the costs incurred by the health service in relation to these episodes.

1.4.1 Product Groups

Public hospital services are broadly classified into five product groups: admitted acute services; admitted subacute and non-acute services; admitted and non-admitted emergency care services; non-admitted or outpatient services; and other services.

Admitted acute services

The admitted episodes of care in scope for Round 17 include all admitted acute separations with a discharge date in 2012/13 which were performed at public hospitals. Admitted acute care is provided to patients who go through a formal admission process where the clinical intent or treatment goal is to do one or more of the following[1]:

- manage labour (obstetric),
- cure illness or provide definitive treatment of injury,
- perform surgery,
- relieve symptoms of illness or injury (excluding palliative care),
- reduce severity of illness or injury,
- protect against exacerbation and/or complication of an illness and/or injury which could threaten life or normal functions, or
- perform diagnostic or therapeutic procedures.

The acute product also includes some episodes of neonate care[2]. These patients are classified under the AR-DRG classification and have a care type[3] of '1' (acute) or '7' (neonates). The version of AR-DRG applying to the current round is AR-DRG v6.0x. Admitted acute care (including newborn care) consumes the vast majority of hospital resources.

Admitted subacute and non-acute services

The admitted subacute and non-acute episodes of care in scope for Round 17 include all separations performed at public hospitals with a care type[3] of rehabilitation care (care type '2'), palliative care('3'), geriatric evaluation and management ('4'), psychogeriatric care ('5') or maintenance care ('6') and a discharge date in 2012/13.

Subacute admitted care is provided to patients who go through a formal admission process, where the clinical intent or treatment goal is specialised multidisciplinary care in which the primary need

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1 Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) – 'Care type'. URL: http://meteor.aihw.gov.au/content/index.phtml/itemId/584408 , accessed 11/03/2015.

2 Neonates born in hospital, or is nine days old or younger at the time of admission and has been qualified for one or more days are included in admitted acute care.

3 The Care Types are defined in the Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR). For 2012-13 these were as follows: acute care, rehabilitation care, palliative care, geriatric evaluation and management, psychogeriatric care, maintenance care, newborn care, other admitted patient care, organ procurement - posthumous and hospital boarder. Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) – 'Care type'. URL: http://meteor.aihw.gov.au/content/index.phtml/itemId/584408 , accessed 11/03/2015.

for care is optimisation of the patient's functioning and quality of life[4]. These patients are classified under the Australian National Sub and Non-acute Patient Classification (AN-SNAP). Data was reported in various versions of this classification and more clarification over the reported version is included in the relevant subacute chapter. Where data on AN-SNAP classification is not available, the episode is classified by care type.

Other services

Other services are classified by care type[3] where the principal clinical intent does not meet the criteria for any of the other care types. The 'other' services in scope for Round 17 include all episodes defined under 'other care' ('8'), posthumous organ procurement ('9') and hospital boarders ('10') with a date in 2012/13 which were performed at public hospitals.

Emergency care services

The emergency care presentations in scope for Round 17 include all patients registered for care in an emergency care service within a public hospital in 2012/13. This includes stays for patients who are treated and then leave the emergency department (non-admitted emergency), and ones that are subsequently admitted to hospital (admitted emergency). Patients declared dead on arrival are considered in scope if the death is certified by an emergency department clinician.

Two systems are used to classify emergency care for the purposes of ABF: Urgency Related Groups (URGs) and Urgency Disposition Groups (UDGs). In this report emergency care services are reported using URG version 1.3.2.

Non-admitted or outpatient services

The non-admitted or outpatient episodes of care in scope for Round 17 include all non-admitted patient service events that occurred in 2012/13. A non-admitted patient service event is an interaction between one or more healthcare provider(s) with one non-admitted patient. It must contain therapeutic/clinical content and result in a dated entry in the patient's medical record. This includes service events occurring in non-admitted clinics in hospitals and in the community.

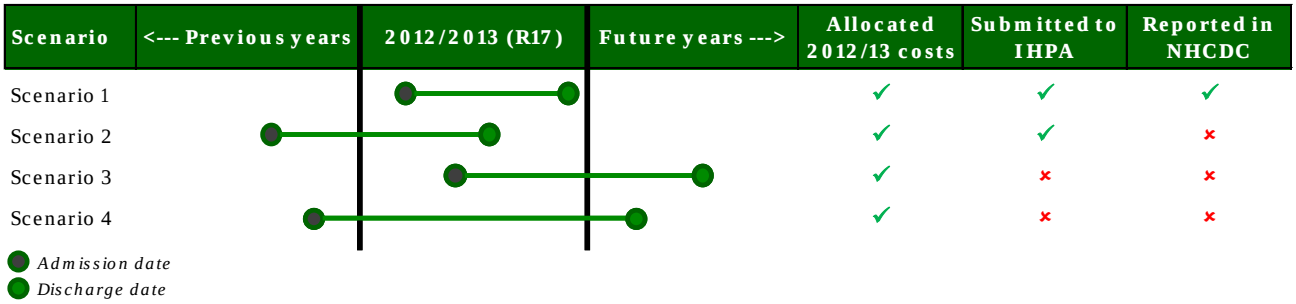
The Tier 2 Non-admitted Care Services is the classification system for non-admitted care. The majority of service events were submitted in version 1.2, however a small proportion have been reported in version 2.0.

1.4.2 Work in progress patients

The Australian Hospital Patient Costing Standards (AHPCS) require that all patient activity during the year be costed according to the guidelines set in the standards. For the purposes of the NHCDC, not all patients are considered in scope. Figure 1 shows the four possible scenarios of patient episodes occurring in part or in full in 2012-13.

[4] Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) – 'Care type, derived subacute'. URL: http://meteor.aihw.gov.au/content/index.phtml/itemId/512105 accessed 11/03/2015.

Figure 1: WIP patients in and out of scope



Of these scenarios, only those with a discharge date in 2012-13 are included in the Round 17 data submission to the IHPA (scenarios 1 and 2). Scenarios 3 and 4 will be reported in the year the patient is discharged. Patients in scenarios 2, 3 and 4 are considered to be Work In Progress (WIP).

The majority of results in this report only include Scenario 1 patients. Each set of results will include a caption or footnote specifying whether the results include or exclude WIP patients. This is done to ensure consistency of reporting of costs, as historically the process and accuracy of WIP patient costing varied substantially between jurisdictions and between hospitals. The Round 17 Independent Financial Review (IFR) (see section 1.8.1) observed a substantial improvement in WIP patient costing within the past year and it is hoped that reporting of WIP patients will be able to be consistently applied in this report in future.

1.5 Australian Hospital Patient Costing Standards (AHPCS)

The costs in-scope associated with patient care for Round 17 are specified in the Australian Hospital Patient Costing Standards v2.0 – 1 March 2011 (AHPCS)[5]. These costs are defined as all expenditure incurred by or on behalf of the hospital related to day to day delivery of services. This includes an allocation of costs that could be incurred outside the hospital but relate to the delivery of services (for example, shared service functions). The standards also discuss the types of costs that are excluded from patient costing, such as commercial business entities that might include activities such as operating a retail florist business, commercial parking, and child care centres. Hospitals were requested to submit costs that comply with the AHPCS to support consistency in the input data used to calculate the cost weights.

To achieve the objective of the NHCDC it is important that hospital costing be performed to a rigorous and consistent standard. The AHPCS were developed as a set of nationally consistent costing standards that were devised in consultation with the jurisdictions. Each standard describes a particular element of the costing or reporting process, and sets out the appropriate methodology to be followed.

The IFR examines the application of the AHPCS in each Round of the NHCDC to assess the quality of the data provided. The findings of the Round 17 IFR are summarised below in section 1.8.1. Each jurisdiction is required to accompany their NHCDC submission with a Data Quality Statement that describes any particular data quality issues or non-compliance with the AHPCS for that Round. These data quality statements are reproduced in full in chapter 8.

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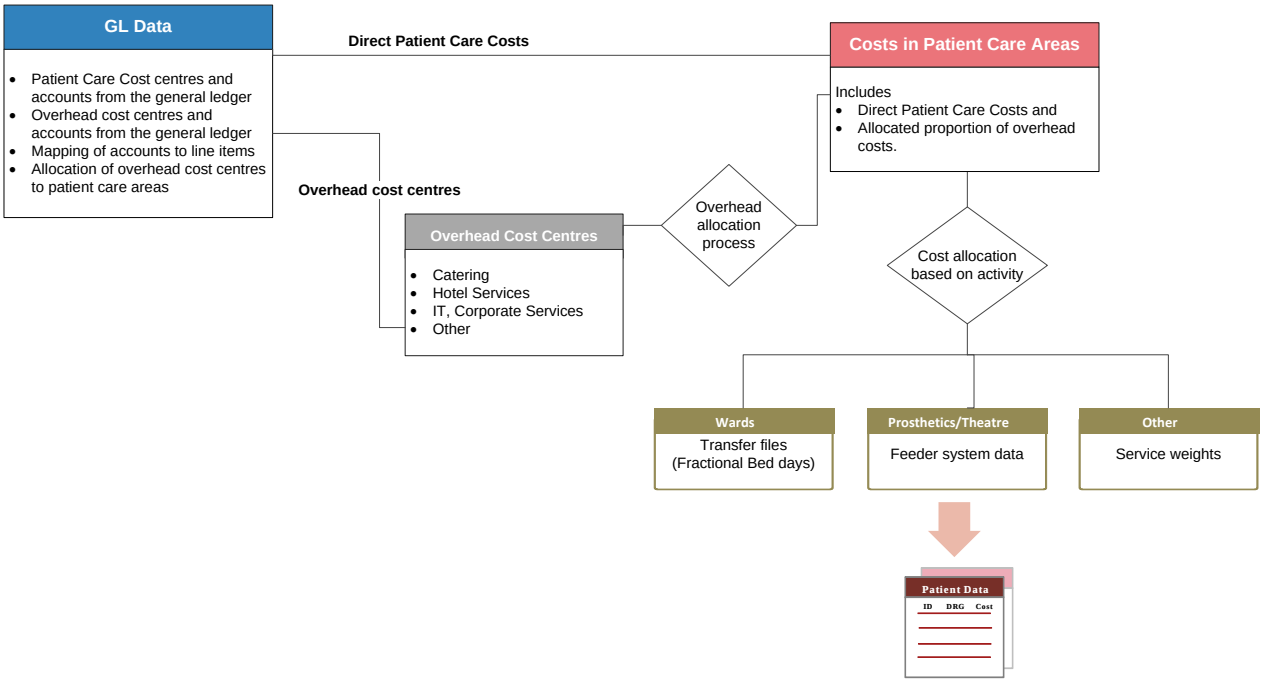
5 Australian Hospital Patient Costing Standards v2.0 – 1 March 2011. URL: http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/content/EC0666091A19EBB1CA257B9B0083827A/$File/HospitalPatientCostingStandards_v2_Final_June%202011.doc, accessed 26/11/2014.

1.6 Data Collection and Costing

Hospital costing is the process of identifying the resources and inputs used during an episode and applying the costs of those inputs to the different types of clinical procedures and treatments provided to each patient in a hospital. Figure 2 below illustrates the overall costing process.

Figure 2: Hospital Costing Process



The two methods of hospital costing are:

- **Patient level costing** (also known as bottom-up costing).

  Hospitals provide a calculated cost of care at the patient level for each episode of care. This is done using actual patient level consumption data if practical. For example, Direct Pathology costs may be based on the actual number of pathology tests performed for each patient. If actual patient consumption is impractical to measure, allocation methods are required. The patient level method of costing is often referred to as a 'bottom up' method of costing because cost aggregates are devised from individual items of patient consumption[6].

- **Cost modelling** (also known as top-down costing)

  Cost modelling makes minimal use of measures of resource consumption by individual patients, and aims to estimate mean costs for classes of patients (for example, by DRG). Cost modelled sites are hospitals that 'model' their cost centres using service weights, which are pre-determined statistics and service consumption weights. Service weights are applied to apportion costs to patient groups defined by their DRG (in the case of admitted acute care). This is also known as 'top down' costing because the hospital starts with an aggregate cost and apportions it across cost centres based on assumptions about relative resource utilisation (which are set at the DRG level).

6 DoHA, Hospital Reference Manual for Round 11 (2006-07)

Patient level costing yields results that are closer to the true cost of an encounter within a hospital, however due to the dependency on feeder systems, perfect patient level costing can be difficult to achieve.

The AHPCS prescribes the set of line items and cost centres that hospital costs are mapped to for the costing process, to ensure that there is a consistent treatment of costs between hospitals. These costs are allocated to, and reported under, the NHCDC defined 'cost buckets'. Please refer to 0 for the reference tables of line items, cost centre groups and cost buckets.

In the public sector collection, hospital costing is either performed by hospital or jurisdiction costing staff. Costed results are produced at the episode level, per cost centre and per line item. These results are provided to the IHPA and are collated and analysed to produce this report.

1.7 Changes in Data Collection and Costing between Rounds

The NHCDC has been through several changes in the method of collecting and costing data. Prior to Round 15, the collection was voluntary and focussed primarily on acute cost weights. In Round 15, the collection moved to a primary data collection supporting the calculation of the NEP.

In Round 17 the Data Request Specification was modified significantly to enable Single Submission Multiple Use (SSMU) of activity data. The SSMU removes specific data fields from the NHCDC Data Request Specification where that data has been or will be provided in the bi-annual ABF data collection. The ABF data collection includes activity data on admitted (acute and subacute), non-admitted, emergency care, and teaching, training and research. This ABF activity data is merged with the NHCDC datasets to form a complete dataset. This reduces work for the hospitals and jurisdictions.

In Round 17 there were no cost modelled sites included in the collection. The Round 16 results which have been presented for comparison purposes contained 61 cost modelled sites.

1.8 Other IHPA work related to the NHCDC

1.8.1 Independent Financial Review

The Independent Financial Review (IFR) was first commissioned in Round 14. Its objective is to ensure that the quality of the NHCDC data is robust and fit for purpose for developing the NEP. On a sample basis, the IFR assesses the accuracy and completeness of the hospital financial reconciliations compared to the financial system data and cost system data, and assesses the application of the AHPCS.

In Round 16, the scope of the IFR was extended to include the internal IHPA processes, including the data flow from the hospital submission through to finalisation in the national database. The purpose of this extension was to provide transparency around the new IHPA processes. The Round 16 IFR found there were no major anomalies in the cost data with respect to the total reconciliation or with the IHPA processes. The IFR Report notes 'that substantial steps forward have been made from previous rounds of the NHCDC submission'.

In Round 17, as in previous years, jurisdictions were asked to nominate hospitals or Local Health Networks (LHNs) to participate in the IFR, which resulted in a sample of 15 hospitals or LHNs being nominated across the eight jurisdictions. The Round 17 review focussed on understanding the allocation methodologies for three selected feeder systems (pharmacy, theatre and ward nursing), exploring how costs were allocated to patients and which linking rules were used.

The Round 17 IFR observed improved methodologies and control procedures for the Round 17 submissions, as there is growing evidence that hospital managers are now using the data to inform hospital operations, rather than purely for NHCDC submissions. Of particular relevance to this report is the improvement to non-admitted costing methodologies, particularly in New South Wales as this jurisdiction substantially increased their reporting of non-admitted episodes in Round 17. The Round 17 IFR report can be accessed via the IHPA's website.

1.8.2 Strategic Review

The IHPA commissioned a strategic review of the NHCDC in early 2013 to assess the collection's suitability as the primary data collection used to determine the NEP, to seek the views of stakeholders regarding issues with the current collection and its future directions, and to recommend a roadmap for the future.

The strategic review of the NHCDC found that the collection is valued by the sector. It was described as a robust cost data collection, guided by a set of standards and review processes, that has been used successfully both domestically and internationally. It provides a degree of confidence to enable policy makers to utilise the data for price setting. And it is an example of how hospitals, both public and private, Commonwealth, States and Territory jurisdictions can work cohesively.

The strategic review also recognised that there are still opportunities for improving the governance of the collection, the various data processes at all organisational levels (hospital, jurisdiction and the IHPA), and the transparency and methodology for data collection. There were 20 recommendations in the strategic review report addressing areas such as governance, communication and transparency; and costing standards and compliance.

IHPA is currently implementing the recommendations from the Strategic Review. The full strategic review report can be found on the IHPA website.

1.9 Format of this Report

This report begins with an introduction to the NHCDC, including the history and purpose of the collection, and a brief summary of other projects related to the NHCDC. Chapter 2 introduces the results of Round 17 with a summary of the participation across the various jurisdictions. The subsequent chapters of this report are focussed on results relating to each of the five hospital products. Each chapter investigates and reports on a number of specific questions relating to hospital costs for that hospital product, presenting tables and charts with accompanying descriptive analysis to provide context and insight into the results. The final chapter explores some data quality issues affecting the results that have been reported by the jurisdictions.

This report also contains the Round 17 public sector national cost weights[7] for acute products by AR-DRG 6.0x. 0 reports the cost weights as they are calculated, based on the reported data. 0 reports the same cost weight table with an adjustment based on national population.

The Round 16 NHCDC data that is published in this report does not reconcile to that published in the Round 16 NHCDC Cost Report. This is due to changes in the data which were made after the

[7] A 'cost weight' for a selected DRG is calculated as the average cost for that DRG, expressed as a weight relative to the overall average cost across all DRGs. The national cost weight across all DRGs is equal to 1.00, with higher cost DRGs having a cost weight higher than 1.00 (for example, A10Z Insertion of Ventricular Assist Devices with a cost weight of 71.86), and lower cost DRGs having a cost weight lower than 1.00 (for example, L61Z Haemodialysis with a cost weight of 0.11).

Round 16 NHCDC Cost report was published. The values presented in this report provide a more accurate description of the change in the cost data between the rounds.

1.10 Release notes and confidentiality

To ensure hospital and patient confidentiality is maintained, the IHPA has taken the following actions:

- Where a reported result is based on less than five separations, the figures have been replaced by asterisks (*****).
- Where data has not been submitted, the figures have been replaced with (na).
- NSW submitted (some) palliative care data at the phase level rather than the episode level. For the purpose of this report this data has been reported at the episode level except in Table 56 (Average cost per subacute separation (by phase for Palliative Care) by AN-SNAP, by jurisdiction, Round 17).

2 Overview of hospitals participating in Round 17 NHCDC

Contents of this Chapter:

This chapter presents an overview of the number of hospitals and services covered in the Round 17 (2012-2013) National Hospital Cost Data Collection (NHCDC), with comparisons to Round 16 (2011-2012). This provides important context for interpreting the results of the NHCDC collection, as substantial changes in participation levels or services provided can affect the trends in results between Round 17 and previous rounds. In this chapter, admitted acute costs include the costs of admitted emergency presentations, and emergency costs include only costs for non-admitted presentations, unless otherwise stated in the footnote to the table.

Overall, participation and services in Round 17 are similar to Round 16. The most substantial changes were the decrease in the number of participating hospitals, the decrease in the number of smaller hospitals, and the reflection of this in the increased volume of activity and costs reported in Round 17 compared with Round 16.

2.1 How many hospitals participated in Round 17 compared with Round 16?

The Round 17 NHCDC includes data from 402 public hospitals nationally, all of whom performed patient-level costing in Round 17. Across the nation, the total number of participating hospitals decreased by 8.4% compared with Round 16. The number of participating hospitals by product type and by jurisdiction is shown in Table 1 and Figure 3 below. As the figures in Table 1 represent the number of sites that provided data for each specific activity type, the figures cannot be aggregated to equal the total number of hospitals per jurisdiction or nationally.

The decrease in the number of participating hospitals compared with Round 16 was primarily due to the exclusion of cost modelled sites in Round 17. Looking ahead to the results in section 2.3, the total episodes submitted in Round 17 have increased from Round 16 despite this decrease in number of hospital participants, which indicates that it was predominantly the smaller hospitals that did not contribute to Round 17. This is confirmed by the results in section 2.2, which show that the decrease in participating hospitals is mainly isolated to peer groups containing smaller hospitals (peer groups D1, D2, D3, E2, E4, E5, F and G).

Consistent with the trend of an overall decrease in site participation, the number of hospitals that submitted data for admitted acute products decreased by 10.1%, and those submitting subacute data decreased by 6.4%. However the number of sites submitting data for emergency department (ED) increased by 7.7% and those submitting data for non-admitted increased by 35.7%.

The overall increase in the number of sites submitting non-admitted episodes is primarily due to New South Wales, who submitted non-admitted data for 57 sites for the first time in Round 17. Queensland also submitted an increased number of sites for non-admitted episodes (144 in Round 17, up from 117 in the previous Round). Refer to section 2.4.3 and Chapter 4 for further discussion of this data.

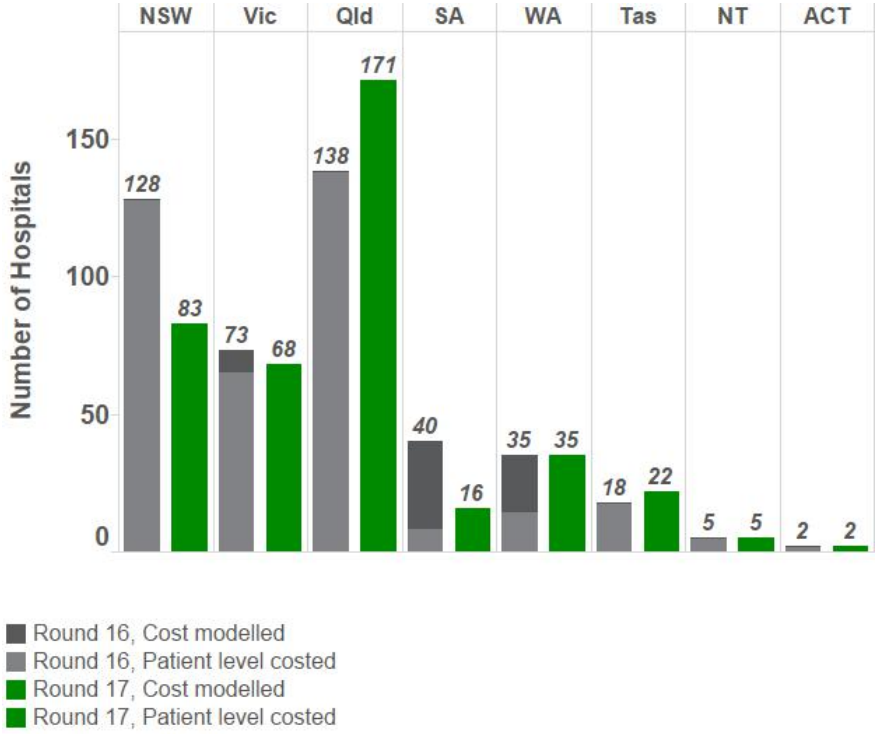
Table 1: Profile of the hospitals that submitted data to the NHCDC by jurisdiction and product in Round 16 and Round 17

Profile by Products	NSW		Vic		Qld		SA		WA		Tas		NT		ACT		National	
	R16	R17	R16	R17	R16	R17	R16	R17	R16	R17	R16	R17	R16	R17	R16	R17	R16	R17
Cost modelled	-	-	8	-	-	-	32	-	21	-	-	-	-	-	-	-	61	-
Patient costed	128	83	65	68	138	171	8	16	14	35	18	22	5	5	2	2	378	402
Total	**128**	**83**	**73**	**68**	**138**	**171**	**40**	**16**	**35**	**35**	**18**	**22**	**5**	**5**	**2**	**2**	**439**	**402**
Admitted acute																		
Reported by AR-DRG 6.0x	124	75	66	63	107	140	40	16	35	34	18	22	5	5	2	2	397	357
Emergency department																		
Reported by URG v1.3	71	53	26	38	101	126	10	13	29	15	4	15	5	5	2	2	248	267
Non-admitted																		
Reported by Tier 2 clinics	-	57	34	36	117	144	-	-	33	33	16	4	5	5	2	2	207	281
Subacute																		
Reported by care type	125	81	54	54	86	126	34	15	35	34	17	19	5	4	2	2	358	335
Reported by AN-SNAP	48	57	42	50	18	22	-	1	-	34	-	-	-	-	2	2	110	166
Other																		
Reported by care type	40	22	-	9	85	98	-	-	12	28	7	4	5	5	1	2	150	168

The table shows the number of hospitals who reported to the Round 17 NHCDC by product and jurisdiction, with Round 16 results reported for comparison. Round 16 results include both cost modelled and patient costed sites (there were no cost modelled sites in Round 17). Each product group is reported by the relevant classification system: Admitted acute reported by AR-DRG 6.0x; Emergency department (ED) reported by URG (includes admitted and non-admitted URGs); Subacute reported primarily by care type, although some sites also submitted AN-SNAP data. Subacute separations are identified by the following care types: Rehabilitation, Palliative Care, Maintenance, Geriatric Evaluation and Management (GEM) and Psychogeriatric. 'Other' services are identified by the following care types: Other Admitted Patient Care, Boarders, and Organ Procurement.

On a jurisdictional basis, New South Wales and South Australia submitted cost data for substantially fewer hospital sites in Round 17 compared with Round 16, and Victoria submitted slightly fewer sites. All other jurisdictions either matched or increased the number of hospital sites submitted this round (Figure 3). The reduction in sites in South Australia was primarily due to the exclusion of cost modelled sites from collection and, as in Round 16, the majority of South Australia's sites were cost modelled. South Australia implemented a new costing system during Round 16/17 which also migrated most sites from cost modelled to patient level costing, however not all sites were sufficiently integrated to participate in the Round 17 collection. It is expected that South Australia's participation will increase again in R18. The reduced number of sites in New South Wales was because they restricted the Round 17 data submission to sites that are funded through Activity Based Funding, rather than for all sites that participated in Round 16. The increase in sites submitted by Queensland was due to increased availability of data from these sites, a reflection of the national trend towards increased use of patient costing methodologies.

Figure 3: Profile of the hospitals that submitted data to the NHCDC by jurisdiction and by costing methodology in Round 16 and Round 17



2.2 What was the distribution of participating hospitals by peer group in Round 17?

Hospitals are assigned to a peer group by the Australian Institute of Health and Welfare (AIHW) so that peer group comparisons can be conducted (hospitals within peer groups are relatively similar in size, function and location characteristics). Additional information about peer group definition is provided in 0. For the purpose of this report the AIHW peer groups D2, E2, E4, E5, E9, F and G have been collectively reported as peer group G: subacute and non-acute. Table 2 shows the number and proportion of hospitals submitting data by peer group for Round 17. For the purpose of this report, peer groups of small, non-acute, multi-purpose services and other non-acute hospitals have been categorised into a subacute and non-acute peer group G.

Table 2: Number of hospitals that submitted data by peer group for Round 17

Peer group		NSW		Vic		Qld		SA		WA		Tas		NT		ACT		National			
		R17	% of Total	R17	% of Total	R17	% of Total	R17	% of Total	R17	% of Total	R17	% of Total	R17	% of Total	R17	% of Total	R16	% of Total	R17	% of Total
A1	Principal referral	27	33%	20	29%	19	11%	4	25%	4	11%	2	9%	2	40%	2	100%	80	18%	80	20%
A2	Specialist women's & children's	3	4%	2	3%	3	2%	1	6%	2	6%	-	0%	-	0%	-	0%	11	3%	11	3%
B1	Large major city	10	12%	6	9%	2	1%	2	13%	3	9%	-	0%	-	0%	-	0%	22	5%	23	6%
B2	Large regional	3	4%	6	9%	2	1%	-	0%	3	9%	1	5%	-	0%	-	0%	15	3%	15	4%
C1	Medium	11	13%	6	9%	3	2%	4	25%	3	9%	1	5%	-	0%	-	0%	26	6%	28	7%
C2	Medium Other	6	7%	6	9%	8	5%	2	13%	2	6%	-	0%	-	0%	-	0%	51	12%	24	6%
D1	Small regional	-	0%	2	3%	27	16%	-	0%	3	9%	6	27%	-	0%	-	0%	54	12%	38	9%
D3	Small remote	-	0%	-	0%	16	9%	1	6%	8	23%	1	5%	3	60%	-	0%	28	6%	29	7%
G	Subacute and non-acute	23	28%	20	29%	86	50%	2	13%	7	20%	11	50%	-	0%	-	0%	146	33%	149	37%
Total		83	100%	68	100%	171	100%	16	100%	35	100%	22	100%	5	100%	2	100%	439	100%	402	100%

This table shows the number of hospitals submitting data by Peer Group for Round 17. In the discussion where Round 16 results are reported for comparison, these include cost modelled sites. The totals for Round 17 include five hospitals in Queensland without peer group classifications, which are not reported in the table (there were 6 in Round 16). AIHW peer group categories D2, E2, E4, E5, E9, F and G have been combined into group G.

The peer group with the highest number of hospitals was subacute and non-acute (peer group G, which also includes peer groups D2, E2, E4, E5, E9 and F). There were 149 subacute and non-acute hospitals, which represents 37.1% of all hospitals that submitted data to the NHCDC in Round 17. Of these, 86 hospitals (57.7% of peer group G) are in Queensland. Although this peer group represents the highest number of hospitals, it only accounts for 3.4% of the volume of activity in the NHCDC, as these hospitals are smaller in size.

The next largest peer group by number of hospitals was principal referral hospitals (peer group A1) with 80 hospitals, which represents 19.9% of the hospitals. The principal referral hospitals peer group represents a substantial proportion (typically greater than 10%, sometimes substantially so) of contributing hospitals nationally and also by jurisdiction.

All the major hospital peer groups from A1 to C2 are strongly represented in the Round 17 data. Overall the peer group mix moved towards larger hospitals in Round 17 in the majority of jurisdictions, with the exception of Queensland. In particular New South Wales and South Australia submitted substantially fewer sites in peer groups D1, D2, D3, E2, E4, E5, E9, F and G, which are the smallest sized hospitals. This accounts for the reduction in the number of participant hospitals between Round 16 and Round 17.

2.3 What volume of services did participating hospitals provide in Round 17 compared with Round 16?

The volume of activity provided by participants in the NHCDC increased in all product groups in Round 17 compared with Round 16, despite the decrease in the number of participating hospitals (see 2.1). In all jurisdictions there was sufficient coverage across the product groups, with the exception of non-admitted data from South Australia which was absent in both Round 17 and Round 16. For all jurisdictions (except South Australia), non-admitted data was the largest product group by volume of activity, followed by the emergency department and acute products (Table 3).

Table 3: Volume of activity submitted by product group and jurisdiction for Round 16 and Round 17

Product		NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National
Acute	**R16**	1,375,890	1,210,690	923,699	361,970	492,124	96,391	111,877	91,937	4,664,578
	R17	1,365,084	1,258,612	989,758	338,929	491,104	103,345	116,915	89,591	4,753,338
	% difference	-0.8%	4.0%	7.2%	-6.4%	-0.2%	7.2%	4.5%	-2.6%	1.9%
ED	**R16**	2,148,205	1,182,229	1,378,810	341,283	548,639	140,302	144,576	118,767	6,002,811
	R17	1,954,569	1,470,350	1,575,813	437,258	627,582	160,556	145,446	118,975	6,490,549
	% difference	-9.0%	24.4%	14.3%	28.1%	14.4%	14.4%	0.6%	0.2%	8.1%
Non-admitted	**R16**	-	1,824,077	5,076,250	-	1,786,732	480,629	225,649	1,286,470	10,679,807
	R17	3,318,642	2,140,149	4,628,166	-	1,229,279	363,020	256,656	674,859	12,610,771
	% difference	-	17.3%	-8.8%	-	-31.2%	-24.5%	13.7%	-47.5%	18.1%
Sub-acute	**R16**	48,983	31,873	39,642	12,258	14,258	1,919	784	4,715	154,432
	R17	52,313	35,959	46,367	11,916	14,099	1,888	806	4,315	167,663
	% difference	6.7%	12.8%	17.0%	-2.8%	-1.1%	-1.6%	2.8%	-8.5%	8.6%
Other	**R16**	229	-	11,419	-	3,278	151	8,908	22	24,007
	R17	127	44	11,955	-	9,254	8	7,735	7	29,130
	% difference	-44.5%	-	4.7%	-	182.3%	-94.7%	-13.2%	-68.2%	21.3%

The results include all emergency department presentations – where an emergency department episode was subsequently admitted, the episode is counted in both the emergency department and the admitted acute product. The Round 16 results include both cost modelled and patient costed sites.

For the admitted acute product type, the Round 17 NHCDC includes data for 4.753 million separations, an increase of 1.9% compared with Round 16. At the same time, the number of participating hospitals in this product group decreased by 40 sites. The increase in separations despite the decrease in participating hospitals reflects the removal of smaller participant hospitals compared with Round 16 (see 2.2).

Emergency presentations totalled 6.491 million, an increase of 8.1% from Round 16. For emergency care there was an increase in the number of participating hospitals (7.6%, 19 sites) and an increase in the number of smaller participating hospitals (peer groups D1, D2, D3, E2, E4, E5, E9, F and G) was primarily driven by an increase in participation in these peer groups in Queensland.

The most substantial increase in data volume was for non-admitted service events, which increased by 18.1% from 10.679 million in Round 16 to 12.610 million in Round 17. This was largely driven by the submission of non-admitted service events by New South Wales sites for the first time in Round 17. Without this contribution by New South Wales , the total non-admitted activity would have decreased overall, as Queensland, South Australia, Western Australia, Tasmania and the Australian Capital Territory all submitted substantially fewer non-admitted service events in Round 17 than Round 16. Queensland submitted 8.8% fewer episodes while submitting data for 27 more sites. Again this is a reflection of the change in peer group mix in Queensland towards smaller hospitals.

For the subacute product, there was a 8.6% increase in volume for subacute separations, despite a 6.4% decrease in participant hospitals. This is due to the overall move in the peer group mix towards larger hospitals.

Table 3 also shows the change in volume by product and jurisdiction between Round 16 and 17. Victoria, Queensland, Tasmania and the Northern Territory reported an increase in admitted acute volumes between Round 16 and Round 17, while New South Wales, South Australia, Western Australia and the Australian Capital Territory each reported a decrease.

For the emergency department product, all jurisdictions experienced higher volumes in Round 17 except for New South Wales, which reported a 9.0% decrease. The national increase was 8.1% from Round 16 to 17.

Nationally, subacute separations increased 8.6% to 167,663 in Round 17. Victoria and Queensland experienced the highest growth in subacute separations from Round 16, which is significant as these two jurisdictions capture the second and third most number of separations nationally; their overnight subacute separations increased 12.8% and 17.0% respectively.

2.4 Did the jurisdiction proportions for product types change?

2.4.1 Admitted acute

There has been minimal change in the proportion of admitted acute separations contributed by each jurisdiction from Round 16 to Round 17. Nationally there was a 1.9% increase in submitted separations, with the total for Round 17 at 4.75 million (Table 4). This contrasts with the number of participating hospitals for each jurisdiction, which decreased from 397 to 357 between Round 16 and 17 (Figure 3).

The stability in the each of the jurisdiction's submissions of admitted acute separations resulted in a relatively unchanged proportion of submitted separations. In terms of hospitals submitted admitted acute separations, the most notable changes occurred in New South Wales and Queensland. In Round 17, Queensland hospitals represented 39.2% of hospitals submitting admitted acute separations, up from 27.0% in the previous round. The count of hospitals increased from 107 to 140 as shown in Table 1. NSW had 124 hospitals who submitted admitted acute separations in Round 16 and 75 in Round 17. This is reflected in the relative proportion of submitting hospitals decreasing from 31.2% to 21.0% between rounds.

Table 4: Proportion of admitted acute separations by jurisdiction, Round 16 and Round 17

Jurisdiction	Round 16			Round 17		
	Separations	% of total seps	% of hospitals	Separations	% of total seps	% of hospitals
NSW	1,375,890	29.5%	31.2%	1,365,084	28.7%	21.0%
Vic	1,210,690	26.0%	16.6%	1,258,612	26.5%	17.6%
Qld	923,699	19.8%	27.0%	989,758	20.8%	39.2%
SA	361,970	7.8%	10.1%	338,929	7.1%	4.5%
WA	492,124	10.6%	8.8%	491,104	10.3%	9.5%
Tas	96,391	2.1%	4.5%	103,345	2.2%	6.2%
NT	111,877	2.4%	1.3%	116,915	2.5%	1.4%
ACT	91,937	2.0%	0.5%	89,591	1.9%	0.6%
National %	4,664,578	100.0%	100.0%	4,753,338	100.0%	100.0%
National Total	4,664,578		397	4,753,338		357
% change				+1.9%		-10.1%

This table shows admitted acute separations by jurisdiction and the proportion they contribute to the total for Round 16 and 17. It also shows the jurisdictions' proportion of participating hospitals to total hospitals for Round 16 and 17. Below the table is shown the national total number of admitted acute separations and hospitals, and the percentage change between rounds.

2.4.2 Emergency department

Submitted ED presentations increased by 8.1% to 6.49 million presentations in Round 17. The five smallest jurisdictions by emergency department presentation volume (the Australian Capital Territory, the Northern Territory, Western Australia, South Australia and Tasmania) submitted similar volumes of emergency department presentations in Round 17 compared with Round 16. Tasmania and South Australia however, did submit an increase in presentations of 14.4% and 28.1% between Round 16 and 17 respectively. The largest three jurisdictions experienced movements in their emergency department volumes, as shown in Table 5. Queensland and Victoria experienced increases in emergency department volume, while New South Wales experienced a decrease. However, New South Wales still contributed the highest proportion of emergency department presentations at 30.1%, followed by Queensland at 24.3%.

In terms of submitting hospitals, the number of hospitals submitting emergency department presentations increased 7.7% to 267 in Round 17. Queensland remained the largest contributor by facility count, increasing their share from approximately 41% to 47% between rounds. The proportion of hospitals submitting emergency department presentations decreased from 28.6% to 19.9% in New South Wales between Round 16 and 17, as the count of hospitals decreased from 71 to 53.

Table 5: Proportion of emergency presentations by jurisdiction, Round 16 and Round 17

Jurisdiction	Round 16			Round 17		
	Presentations	% of total presentations	% of hospitals	Presentations	% of total presentations	% of hospitals
NSW	2,148,205	35.8%	28.6%	1,954,569	30.1%	19.9%
Vic	1,182,229	19.7%	10.5%	1,470,350	22.7%	14.2%
Qld	1,378,810	23.0%	40.7%	1,575,813	24.3%	47.2%
SA	341,283	5.7%	4.0%	437,258	6.7%	4.9%
WA	548,639	9.1%	11.7%	627,582	9.7%	5.6%
Tas	140,302	2.3%	1.6%	160,556	2.5%	5.6%
NT	144,576	2.4%	2.0%	145,446	2.2%	1.9%
ACT	118,767	2.0%	0.8%	118,975	1.8%	0.7%
National %	**6,002,811**	**100.0%**	**100.0%**	**6,490,549**	**100.0%**	**100.0%**
National Total	6,002,811		248	6,490,549		267
% change				*+8.1%*		*+7.7%*

This table shows emergency department presentations by jurisdiction and the proportion they contribute to the total for Round 16 and 17. It also shows the jurisdictions' proportion of participating hospitals to total hospitals for Round 16 and 17. Below the table is shown the national total number of emergency presentations and hospitals, and the percentage change between rounds.

2.4.3 Non-admitted

Nationally, the number of non-admitted service events submitted increased 18% between Round 16 and 17. New South Wales contributed non-admitted data for the first time in Round 17 (section 2.1), representing 26.3% of non-admitted activity in Round 17 which was a key contributor to increasing the total volume of non-admitted data in the collection (Table 6). The observed decrease in relative proportions for Queensland, Western Australia, Tasmania and the Australian Capital Territory reflects both a reduction in the actual volume of service events in those jurisdictions, and the effect of the inclusion of New South Wales service events for the first time. The highest proportion of service events is from Queensland at 36.7%, followed by New South Wales at 26.3%.

Table 6: Proportion of non-admitted service events by jurisdiction, Round 16 and Round 17

Jurisdiction	Round 16			Round 17		
	Service events	% of total service events	% of hospitals	Service events	% of total service events	% of hospitals
NSW	-	0.0%	0.0%	3,318,642	26.3%	20.3%
Vic	1,824,077	17.1%	16.4%	2,140,149	17.0%	12.8%
Qld	5,076,250	47.5%	56.5%	4,628,166	36.7%	51.2%
SA	-	0.0%	0.0%	-	0.0%	0.0%
WA	1,786,732	16.7%	15.9%	1,229,279	9.7%	11.7%
Tas	480,629	4.5%	7.7%	363,020	2.9%	1.4%
NT	225,649	2.1%	2.4%	256,656	2.0%	1.8%
ACT	1,286,470	12.0%	1.0%	674,859	5.4%	0.7%
National %	10,679,807	100.0%	100.0%	12,610,771	100.0%	100.0%
National Total	10,679,807		207	12,610,771		281
% change				+18.1%		+35.7%

This table shows non-admitted service events by jurisdiction and the proportion they contribute to the total for Round 16 and 17. It also shows the jurisdictions' proportion of participating hospitals to total hospitals for Round 16 and 17. Below the table is shown the national total number of non-admitted service events and hospitals, and the percentage change between rounds. Zero results are represented by a '-'.

2.4.4 Subacute

Overall there was no substantial movement in the jurisdiction proportions in Round 17 for the subacute product, and no change in the rankings of the jurisdictions based on the relative proportions (Table 7), despite separations increasing 8.6% between rounds. In contrast, the number of submitting hospitals decreased 6.4% between Round 16 and 17, with the number of submitting hospitals falling from 358 to 335. New South Wales and Queensland were the two jurisdictions who experienced the most change in their proportion of submitting hospitals. In Round 16, New South Wales hospitals submitting subacute separations represented approximately 35% of all hospitals submitting subacute separations, but this fell to 24% in Round 17. However, the number of separations submitted by New South Wales between rounds increased by 6.7%.

Queensland increased their proportionate share of submitting hospitals from 24.0% to 37.6% in Round 17, with separations increasing almost 17% as well. Victoria was another jurisdiction with an increase in separations between rounds, with an increase of almost 13%. Their number of submitting hospitals stayed constant between Round 16 and 17.

Table 7: Proportion of subacute separations by jurisdiction, Round 16 and Round 17

Jurisdiction	Round 16			Round 17		
	Separations	% of total seps	% of hospitals	Separations	% of total seps	% of hospitals
NSW	48,983	31.7%	34.9%	52,313	31.2%	24.2%
Vic	31,873	20.6%	15.1%	35,959	21.4%	16.1%
Qld	39,642	25.7%	24.0%	46,367	27.7%	37.6%
SA	12,258	7.9%	9.5%	11,916	7.1%	4.5%
WA	14,258	9.2%	9.8%	14,099	8.4%	10.1%
Tas	1,919	1.2%	4.7%	1,888	1.1%	5.7%
NT	784	0.5%	1.4%	806	0.5%	1.2%
ACT	4,715	3.1%	0.6%	4,315	2.6%	0.6%
National %	154,432	100.0%	100.0%	167,663	100.0%	100.0%
National Total	154,432		358	167,663		335
% change				+8.6%		-6.4%

This table shows subacute separations by jurisdiction and the proportion they contribute to the total for Round 16 and 17. It also shows the jurisdictions' proportion of participating hospitals to total hospitals for Round 16 and 17. Below the table is shown the national total number of subacute separations and hospitals, and the percentage change between rounds.

2.4.5 Other

The separations that make up the 'Other' product are the following care types: organ procurement, other admitted patient care, and boarders. Teaching, training and research costs are also considered in scope for the 'other' product, but no teaching, training and research costs were reported in Round 17.

Round 17 saw an overall increase in the number of these separations by 21% from Round 16 (Table 8). This difference was largely driven by Western Australia submitting approximately 6,000 additional separations from last round. The other jurisdictions who represented a substantial proportion of 'Other' separations, Queensland and the Northern Territory, submitted fewer separations in Round 17, to result in their contribution to the total fall compared to Round 16. The remaining jurisdictions submitted an immaterial number of 'Other' product separations.

The number of hospitals who submitted 'Other' product separations increased by 18 to 168 facilities in Round 17. The largest change proportional change was seen in Western Australia, doubling participation from 8.0% of the total to 16.7%. This represents approximately an additional 12 sites submitting 'Other' product separations in Round 17. Another noteworthy movement in the proportion of hospitals submitting 'Other' separations was in New South Wales, with a halving of their share between rounds, falling from 26.7% to 13.1% in Round 17.

Table 8: Proportion of other separations by jurisdiction, Round 16 and Round 17

Jurisdiction	Round 16			Round 17		
	Separations	% of total seps	% of hospitals	Separations	% of total seps	% of hospitals
NSW	229	1.0%	26.7%	127	0.4%	13.1%
Vic	-	0.0%	0.0%	44	0.2%	5.4%
Qld	11,419	47.6%	56.7%	11,955	41.0%	58.3%
SA	-	0.0%	0.0%	-	0.0%	0.0%
WA	3,278	13.7%	8.0%	9,254	31.8%	16.7%
Tas	151	0.6%	4.7%	8	0.0%	2.4%
NT	8,908	37.1%	3.3%	7,735	26.6%	3.0%
ACT	22	0.1%	0.7%	7	0.0%	1.2%
National %	**24,007**	**100.0%**	**100.0%**	**29,130**	**100.0%**	**100.0%**
National Total	24,007		150	29,130		168
% change				*+21.3%*		*+12.0%*

This table shows other separations by jurisdiction and the proportion they contribute to the total for Round 16 and 17. It also shows the jurisdictions' proportion of participating hospitals to total hospitals for Round 16 and 17. Below the table is shown the national total number of other separations and hospitals, and the percentage change between rounds. Zero results are represented by a '-'.

2.5 How much hospital cost was accounted for in Round 17?

The total hospital cost accounted for in Round 17 was $31.6 billion compared to $30.1 billion submitted in Round 16, which represents an increase of 5.1% (Table 9). This increase in cost was observed despite a decrease in the number of hospital sites contributing data, reflecting an increase in activity submitted.

The proportion of cost contributed by each jurisdiction is broadly consistent with their relevant population proportions – the main exception is Queensland where the non-admitted and other products represent the highest proportion of costs despite having the third highest proportion of population.

By product type, the admitted acute product accounts for the largest proportion of cost at $23.4 billion in Round 17. The largest percentage increase in costs between Round 16 and Round 17 is in the non-admitted product group: $4.0 billion in Round 17 compared with $3.3 billion in Round 16 (an increase of 19.4%) which is largely due to the contribution of New South Wales for the first time. Without the New South Wales contribution in non-admitted the total costs in this product group for Round 17 would have decreased from the Round 16 collection. There was also a substantial decrease in costs submitted for the ‘other’ product group, compared with Round 16 ($78.5 million versus $55.0 million).

Table 9: Total costs submitted to Round 17 NHCDC by product and jurisdiction

Product		Round 17 Total Costs								National Total Costs	
		NSW	Vic	Qld	SA	WA	Tas	NT	ACT	Round 16	Round 17
Admitted acute	Total $	7,215,498,677	5,245,519,817	4,768,916,088	1,958,188,723	2,595,245,232	547,223,450	445,279,534	581,808,268	22,707,053,198	23,357,679,789
	% of total	*30.9%*	*22.5%*	*20.4%*	*8.4%*	*11.1%*	*2.3%*	*1.9%*	*2.5%*	*100.0%*	*100.0%*
Emergency department	Total $	1,212,674,878	759,504,683	898,539,173	238,834,817	373,082,173	84,465,705	87,899,742	98,931,343	3,448,886,833	3,753,932,513
	% of total	32.3%	20.2%	23.9%	6.4%	9.9%	2.3%	2.3%	2.6%	*100.0%*	*100.0%*
Non-admitted	Total $	875,564,823	578,895,458	1,735,398,488	-	402,257,225	101,765,740	106,626,208	189,981,405	3,342,172,878	3,990,489,348
	% of total	*21.9%*	*14.5%*	*43.5%*	*0.0%*	*10.1%*	*2.6%*	*2.7%*	*4.8%*	*100.0%*	*100.0%*
Subacute	Total $	620,961,010	494,596,854	486,657,967	117,675,174	216,781,631	31,230,645	24,675,884	64,150,642	1,868,373,938	2,056,729,807
	% of total	*30.2%*	*24.0%*	*23.7%*	*5.7%*	*10.5%*	*1.5%*	*1.2%*	*3.1%*	*100.0%*	*100.0%*
Other	Total $	645,887	399,983	40,579,087	-	2,688,704	108,493	10,532,131	61,644	78,546,611	55,015,928
	% of total	*1.2%*	*0.7%*	*73.8%*	*0.0%*	*4.9%*	*0.2%*	*19.1%*	*0.1%*	*100.0%*	*100.0%*
Total[8]	Total $	9,307,104,467	6,721,756,819	7,633,918,244	2,210,390,648	3,453,345,051	732,161,939	646,243,828	890,298,699	30,073,556,441	31,595,219,695
	% of total	*29.5%*	*21.3%*	*24.2%*	*7.0%*	*10.9%*	*2.3%*	*2.0%*	*2.8%*	*100.0%*	*100.0%*
Population[9]		**32.0%**	**24.8%**	**20.1%**	**7.2%**	**10.9%**	**2.2%**	**1.0%**	**1.7%**	**100.0%**	**100.0%**

These results show the total hospital costs submitted to the Round 17 NHCDC by jurisdiction and by product. Admitted acute includes depreciation and admitted emergency department costs. Emergency costs include admitted and non-admitted costs. Round 16 costs that are reported for comparison include both cost modelled and patient costed sites results. Population proportions are shown for comparative purposes. Zero results are represented by a '-'.

8 The total for each product does not agree to the total provided, as the admitted emergency care costs are included in both the admitted acute and the emergency department totals. Admitted emergency care costs are included once in the totals provided.

9 Australian Bureau of Statistics (ABS) 3101.0 – Australian Demographic Statistics, June 2013. URL: http://www.abs.gov.au/AUSSTATS/abs@.nsf/allprimarymainfeatures/61D19DFBD033B48FCA257CA7000DCB16?opendocument , accessed 17/03/2015.

2.6 What was the average cost of each product in Round 17?

Average costs per unit of activity and average costs per weighted unit of activity for each of the products[10] by jurisdiction have been presented in Table 10. Average cost per weighted unit of activity adjusts volume for the expected relative cost of the service provided. The purpose of this weighting is to adjust the average cost for the differences in casemix in each jurisdiction.

On a jurisdictional basis, the Australian Capital Territory had the highest average cost per weighted unit of activity in acute and emergency department. Victoria, however, was consistent in having some of the lowest average costs per weighted unit of activity, across all product groups. The other jurisdictions had varying rankings in terms of average costs per weighted unit of activity depending on the product group.

The highest cost product per unit of activity was subacute, with a national average cost per separation of $12,267. The second highest cost product was the admitted acute, with a national average cost per separation of $4,914. Emergency department cost per presentations was $960 for admitted presentations and $451 for non-admitted presentations. Finally, the national average cost per service event for non-admitted was $316.

The average admitted acute cost at a jurisdictional level ranged from $3,809 in the Northern Territory to $6,494 in the Australian Capital Territory. However, after weighting separations for casemix, the lowest average cost per weighted separation was $4,251 in Victoria, with the Australian Capital Territory remaining the highest at $6,442. The Northern Territory recorded the second highest average cost per weighted separation, despite having the lowest average cost per separation. This highlights the importance of reporting and comparing average costs with the casemix adjustment.

[10] Average costs per weighted unit of activity have been reported for admitted acute, emergency department and non-admitted products only. For Round 17, subacute reporting by the AN-SNAP classification was not sufficiently consistent across the jurisdictions to develop the cost weights required to calculate an average cost per weighted unit of activity, and so a cost per day has been reported as an alternative.

Table 10: Average cost by product by jurisdiction, Round 17

Average cost by Product	Average Cost								
	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National
Admitted acute (AR-DRG 6.0x)									
Per separation	5,286	4,168	4,818	5,778	5,285	5,295	3,809	6,494	4,914
Per weighted separation	4,983	4,251	4,871	5,335	5,695	5,226	5,972	6,442	4,914
Emergency department (URG v1.3)									
Per admitted presentation	1,128	856	936	783	750	1,028	763	1,430	960
Per admitted weighted presentation	667	509	585	450	586	617	466	845	585
Per non-admitted presentation	423	382	478	443	531	402	549	619	451
Per non-admitted weighted presentation	540	498	599	545	675	532	779	812	569
Non-admitted (Tier 2 clinic)									
Per service event	264	270	375	-	327	280	415	282	316
Per weighted service event	268	292	353	-	345	268	391	302	316
Subacute									
Per separation	11,870	13,754	10,496	9,875	15,376	16,542	30,615	14,867	12,267
Per day	966	752	1,073	1,071	956	1,031	1,239	1,242	938

This table reports the average cost and the average cost per weighted unit of activity, by product and by jurisdiction. For emergency presentations, costs have been divided into those for patients who were admitted into hospital following their ED visit, and those for patients who were not admitted. ED admitted costs include only those costs relating to the ED portion of the episode, while admitted acute costs include those for both the ED presentation and the Admitted episode. Per weighted presentation data for admitted emergency excludes Western Australian data submitted as part of the admitted setting. Subacute includes rehabilitation, palliative care, GEM, psychogeriatric and maintenance.

In the emergency department product, costs have been divided into admitted and non-admitted product types. Patients who were admitted into hospital following their emergency department visit are classified as ‘admitted’, and those for patients who were not admitted as ‘non-admitted’. The most expensive average cost per admitted weighted presentation was reported in the Australian Capital Territory ($845) while the least expensive was reported in South Australia ($450). For the non-admitted emergency department weighted presentations, Victoria was the least expensive ($498) and the Australian Capital Territory was the most expensive ($812).

Non-admitted average costs per weighted service event were highest in the Northern Territory ($391) and lowest in Tasmania and New South Wales ($268).

For subacute separations, South Australia reported the lowest average cost per separation ($9,875) and Northern Territory the highest ($30,615). In Round 17 however, without the consistent reporting of AN-SNAP classes, subacute separations were unable to be adjusted for casemix in the same manner as other products. An alternative measure to an average cost per weighted unit of activity, the average cost per day has been reported to take into account the length of stay. Victoria had the lowest average cost per day ($752) while the Australian Capital Territory highest average cost per day ($1,242).

3 Admitted acute product results

Contents of this Chapter:

This chapter presents an analysis of the admitted acute cost data submitted in Round 17 (2012-13) and makes comparisons to previous Rounds where possible. Admitted acute care consumes the majority of hospital resources (74.1% of total costs, see section 2.5) and it is the product group with the most developed costing methodologies in the NHCDC collection. In this chapter, admitted acute costs include the costs of admitted emergency presentations, unless otherwise stated in the footnote to the table.

The results for the admitted acute product in Round 17 were similar to Round 16. There were generally small increases between Round 16 and 17 in most of the results presented. For example, the national average cost per admitted acute weighted separation increased by 0.9%, which was one of the lowest annual increases since the Public NHCDC commenced.

3.1 How has the average cost of an admitted acute weighted separation changed in Round 17?

The national average cost per admitted acute weighted separation was $4,914 (Table 12), an increase of only 0.9% from $4,868 in Round 16, and one of the lowest annual increases since the Public NHCDC commenced. By comparison, the average cost per admitted acute weighted separation increased 4.1% between Round 15 and 16.

Table 11: Average cost per admitted acute weighted separation for Round 15, 16 and 17

National	Round 15	Round 16	Round 17
Average cost per separation	4,676	4,868	4,914
% change from previous round		*4.1%*	*0.9%*

The table above shows the average cost per admitted acute weighted separation for Round 15, 16 and 17, and the percentage change between rounds.

3.2 How did the average cost of an admitted acute separation vary across jurisdictions?

Across the jurisdictions there was substantial variation in cost movements between Round 15 and 16 which reflects the refinement of costing processes in the new Activity Based Funding (ABF) environment. As the NHCDC has progressed to Round 17, these movements between rounds have been substantially reduced.

In Round 17, the largest movement since Round 16 in the average cost per admitted acute weighted separation was in Western Australia (a 5.0% increase) (Table 12). In Tasmania the average cost per admitted acute weighted separation has decreased for three consecutive rounds, reducing by 1.8% between Round 16 and 17. A decrease was also evident in Queensland (down 2.1%) and the Australian Capital Territory (down 1.4%). There was a modest increase in New South Wales (up 1.2%), Victoria (up 2.2%), South Australia (up 1.8%), and the Northern Territory (up 0.8%).

Comparing each jurisdiction to the national average (Figure 4) the relative differences between jurisdictions in Round 17 was similar to Round 16. At the lower end the average cost in Victoria was $4,251 which is 13.5% lower than the national average of $4,914 and at the higher end was the Australian Capital Territory at $6,442 which is 31.1% above the national average. The average cost in New South Wales and Queensland, which are two of the three largest jurisdictions by population, hovered around the national average with New South Wales at $4,983 (1.4% above national average) and Queensland at $4,871 (0.9% below national average). The remaining jurisdictions were all higher than the national average but are also relatively small in terms of population size.

Table 12: Average cost per acute weighted separation, by jurisdiction, Round 15, 16 and 17

Jurisdiction	Average cost per weighted separation			% change between rounds	
	Round 15	Round 16	Round 17	R15 and R16	R16 and R17
NSW	4,623	4,923	4,983	6.5%	1.2%
Vic	4,029	4,160	4,251	3.2%	2.2%
Qld	4,815	4,978	4,871	3.4%	-2.1%
SA	4,952	5,243	5,335	5.9%	1.8%
WA	5,270	5,422	5,695	2.9%	5.0%
Tas	5,506	5,320	5,226	-3.4%	-1.8%
NT	5,948	5,926	5,972	-0.4%	0.8%
ACT	6,324	6,536	6,442	3.3%	-1.4%
National	**4,676**	**4,868**	**4,914**	**4.1%**	**0.9%**

This table reports the average cost per weighted separation, by jurisdiction, for Round 16 and Round 17, and the percentage movement between the Rounds. Costs include depreciation and costs for emergency department presentations which were subsequently admitted. Round 15 and 16 results include cost modelled sites.

Figure 4: Average cost per admitted acute weighted separation, Round 17

The national average cost for an admitted acute weighted separation including depreciation increased by only 0.9% in Round 17 (Table 13). This compares to a 4.1% increase between Round 15 and Round 16. This increase of 0.9% is one of the lowest increases since the NHCDC commenced in 1996. When depreciation is excluded the increase between Round 16 and 17 was even lower at 0.6%, indicating that depreciation costs at a national level grew at a faster rate than other costs in Round 17 compared to Round 16 (refer to section 3.7 which describes the change between Round 16 and Round 17 at a cost bucket level).

Table 13: Change in average cost per admitted acute weighted separation by jurisdiction, Round 15 to Round 17, comparing including depreciation and excluding depreciation

Jurisdiction	Round 15		Round 16		Round 17		% change from Round 15 to 16		% change from Round 16 to 17	
	Incl. Depreciation	Excl. Depreciation	Incl. Depreciation	Excl. Depreciation	Incl. Depreciation	Excl. Depreciation	Incl. Depreciation	Excl. Depreciation	Incl. Depreciation	Excl. Depreciation
NSW	4,623	4,457	4,923	4,743	4,983	4,813	6.5%	6.4%	1.2%	1.5%
Vic	4,029	3,996	4,160	4,130	4,251	4,213	3.2%	3.4%	2.2%	2.0%
Qld	4,815	4,746	4,978	4,912	4,871	4,800	3.4%	3.5%	-2.1%	-2.3%
SA	4,952	4,791	5,243	5,089	5,335	5,113	5.9%	6.2%	1.8%	0.5%
WA	5,270	5,122	5,422	5,277	5,695	5,411	2.9%	3.0%	5.0%	2.5%
Tas	5,506	5,307	5,320	5,194	5,226	5,106	-3.4%	-2.1%	-1.8%	-1.7%
NT	5,948	5,748	5,926	5,865	5,972	5,802	-0.4%	2.0%	0.8%	-1.1%
ACT	6,324	6,133	6,536	6,362	6,442	6,256	3.3%	3.7%	-1.4%	-1.7%
National	4,676	4,562	4,868	4,758	4,914	4,784	4.1%	4.3%	0.9%	0.6%

This table reports the average cost per weighted separation, by jurisdiction, for Round 15, 16 and 17 to compare the trend in average costs over time. It also reports the percentage movement from Round 15 to 16 and from Round 16 to 17. Costs are reported both including and excluding depreciation. Costs include those for emergency department presentations which were subsequently admitted, and costs include cost modelled sites where applicable.

3.3 How did the average cost of an admitted acute separation vary across peer groups?

The following tables report average costs per separation and average cost per weighted separation by NHCDC peer group and jurisdiction. For the purpose of this report, the AIHW peer groups D2, E2, E4, E5, E9, F and G have been collectively reported as peer group G: subacute and non-acute.

At a national level, the majority of peer groups reported a similar average cost in Round 17 compared with Round 16 (Table 14). The most substantial movements were in the following peer groups: medium other (C2), a 7.6% decrease; small regional (D1), a 9.6% decrease; and small non-acute (D3), a 9.9% increase, which reflects the change in the number of participating sites in these peer groups in Round 17. The smallest change from Round 16 was for principal referral hospitals (peer group A1) and it is expected that this peer group will experience minimal changes (other than true cost increases or decreases) due to the consistency in costing methodologies and number of sites submitting from each jurisdiction in this peer group.

In Round 17 the national average cost for principal referral hospitals (peer group A1), the largest group by volume of activity, was $5,135. This was 4.5% higher than the national average cost across all peer groups. The Northern Territory had the lowest average cost for this peer group ($3,946) due in part to a very high proportion (76%) of Haemodialysis separations – nationally, haemodialysis separations have a low average cost. The Australian Capital Territory had the highest cost per separation ($6,494) for the A1 peer group.

For the large and medium regional hospitals (peer groups B1, B2, C1 and C2) Victoria had the lowest average cost per admitted acute separation. Victoria also had the lowest average cost ($2,877) for subacute and non-acute hospitals (peer groups D2, E2, E4, E5, E9, F and G), while the highest average cost for these peer groups was in New South Wales ($10,375). These peer groups also reported the highest variation between jurisdictions which is a reflection of the variation in demographics, clinical profile and length of stay for these separations.

The average cost per admitted acute separation in specialist women's and children's hospitals (peer group A2) was $6,764 nationally. Western Australia had the highest average cost per admitted acute separation ($7,578) and South Australia had the lowest ($6,128). Nationally, and in most jurisdictions, the average cost per separation for specialist women’s and children’s hospitals was higher than the average cost across all other hospital peer groups.

Table 14: Number of hospitals and average cost per admitted acute separation (non-weighted) by jurisdiction and by peer group, Round 17

Peer Group		NSW		Vic		Qld		SA		WA		Tas		NT		ACT		National			
		Round 17		Round 17		Round 17		Round 17		Round 17		Round 17		Round 17		Round 17		Round 16		Round 17	
		N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost	N	Avg Cost
A1	Principal referral	27	5,401	20	4,482	18	5,108	4	6,285	4	5,416	2	5,088	2	3,946	2	6,494	78	5,143	79	5,135
A2	Specialist women's & children's	3	6,455	2	6,664	3	6,935	1	6,128	2	7,578	-	-	-	-	-	-	11	6,429	11	6,764
B1	Large major city	10	4,780	6	3,131	2	3,634	2	5,464	3	4,313	-	-	-	-	-	-	22	4,298	23	4,146
B2	Large regional	3	4,587	6	3,517	2	4,235	-	-	2	3,981	1	6,955	-	-	-	-	15	4,013	14	4,078
C1	Medium	11	4,233	6	2,034	3	2,095	4	3,527	3	4,105	1	3,930	-	-	-	-	26	3,230	28	3,269
C2	Medium Other	6	3,667	6	1,721	8	2,601	2	3,702	2	3,468	-	-	-	-	-	-	51	2,927	24	2,705
D1	Small regional	-	-	2	2,690	26	2,791	-	-	3	4,301	6	9,177	-	-	-	-	54	3,726	37	3,367
D3	Small remote	-	-	-	-	16	8,662	1	3,216	8	5,783	1	10,060	3	3,019	-	-	28	4,868	29	5,351
G	Subacute and non-acute	15	10,375	15	2,877	62	2,965	2	10,630	7	6,051	11	9,082	-	-	-	-	111	4,641	112	4,763
Total		75	5,286	63	4,168	140	4,818	16	5,778	34	5,285	22	5,295	5	3,809	2	6,494	397	4,868	357	4,914

This table reports the number of hospitals and average cost per separation, by peer group and by jurisdiction, for Round 17. Costs include depreciation and costs for admitted emergency department presentations which were subsequently admitted. There were no hospitals in the acute product which did not have a peer group classification in Round 17.

The majority of jurisdictions had relatively consistent average costs between the peer groups. However, in New South Wales and South Australia subacute and non-acute hospitals (peer groups D2, E2, E4, E5, E9, F and G) had a substantially higher cost than the other peer groups for that jurisdiction - $10,375 and $10,630 respectively - compared to the jurisdictional average costs of $5,286 and $5,778 respectively. This was largely driven by longer lengths of stay of 9.6 and 7.3 days respectively, which are substantially longer than the national average lengths of stay for the peer group of 3.9 days (Table 15). Similarly, in Tasmania small regional, small remote and subacute and non-acute hospitals (peer groups D1, D2, D3, E2, E4, E5, E9, F and G) had an average cost substantially above the average costs of other peer groups; in the case of small regional (D1) and subacute and non-acute (D2, E2, E4, E5, E9, F, G) in particular this was driven by a longer length of stay.

Table 15: Average length of stay by peer group and jurisdiction for Round 17

Peer Group		NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National
A1	Principal referral	3.29	2.76	2.58	3.32	2.70	2.78	2.42	2.88	2.91
A2	Specialist women's & children's	3.00	2.80	2.62	3.02	3.18	-	-	-	2.91
B1	Large major city	3.23	1.94	2.01	3.49	2.23	-	-	-	2.57
B2	Large regional	2.53	2.32	2.15	-	1.95	3.46	-	-	2.34
C1	Medium	2.49	1.62	1.48	2.18	2.15	1.99	-	-	2.04
C2	Medium Other	2.59	1.86	1.88	2.12	1.98	-	-	-	2.05
D1	Small regional	-	3.04	2.21	-	2.63	5.58	-	-	2.52
D3	Small remote	-	-	2.41	2.12	2.07	3.31	1.66	-	2.03
G	Subacute and non-acute	9.61	2.78	2.56	7.34	3.49	6.78	-	-	3.89
Total		3.23	2.57	2.47	3.15	2.56	2.89	2.31	2.88	2.79

This table reports the length of stay by peer group and by jurisdiction, for Round 17. There were no hospitals in the acute product which did not have a peer group classification in Round 17.

Between Round 16 and 17 at a national level (Table 16), the D3 (small remote) and A2 (specialist women's and children's) peer groups experienced the highest growth increasing by 9.9% and 5.2% respectively. The C2 (medium other) and D3 (small remote) peer groups experienced a decrease in average cost by 7.6% and 9.6% respectively.

The jurisdictions that experienced the highest increase in average cost were Western Australia (up 6.0%) followed by the Australian Capital Territory (up 2.0%). In Western Australia this increase was driven by large increases in average cost in the D3 (small remote) and A2 (specialist women's and children's) peer groups. Queensland experienced a decrease in average cost by 2.3% which was mostly driven by decreases in average cost for their B1 (large major city) and D1 (small regional) peer group hospitals of 32.7% and 28.8% respectively.

Table 16: Average cost per separation by peer group and jurisdiction for Round 17 and the percentage change from Round 16

Peer Group		NSW		Vic		Qld		SA		WA		Tas		NT		ACT		National	
		R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change
A1	Principal referral	5,401	-0.4%	4,482	-1.3%	5,108	-0.3%	6,285	2.7%	5,416	5.1%	5,088	-4.5%	3,946	-1.8%	6,494	2.0%	5,135	-0.2%
A2	Specialist women's & children's	6,455	0.8%	6,664	0.5%	6,935	19.1%	6,128	-3.8%	7,578	9.1%	-		-		-		6,764	5.2%
B1	Large major city	4,780	-3.2%	3,131	2.6%	3,634	-32.7%	5,464	-19.0%	4,313	7.1%	-		-		-		4,146	-3.5%
B2	Large regional	4,587	1.9%	3,517	8.1%	4,235	-3.4%	-		3,981	0.3%	6,955	-21.4%	-		-		4,078	1.6%
C1	Medium	4,233	-1.4%	2,034	25.3%	2,095	18.7%	3,527	-4.0%	4,105	0.5%	3,930	-10.5%	-		-		3,269	1.2%
C2	Medium Other	3,667	-1.2%	1,721	-14.2%	2,601	5.7%	3,702	0.9%	3,468	7.6%	-		-		-		2,705	-7.6%
D1	Small regional	-	-100%	2,690	-10.6%	2,791	-28.8%	-	-100.0%	4,301	-1.7%	9,177	29.0%	-		-		3,367	-9.6%
D3	Small remote	-	-100%	-		8,662	5.7%	3,216	-6.2%	5,783	9.0%	10,060	1274.7%	3,019	-6.9%	-		5,351	9.9%
G	Subacute and non-acute	10,375	18.1%	2,877	15.1%	2,965	-16.9%	10,630	183.9%	6,051	-3.2%	9,082	145.0%	-		-		4,763	2.6%
Total		**5,286**	**0.9%**	**4,168**	**1.7%**	**4,818**	**-2.3%**	**5,778**	**5.7%**	**5,285**	**6.0%**	**5,295**	**-4.2%**	**3,809**	**-2.5%**	**6,494**	**2.0%**	**4,914**	**0.9%**

This table reports the average cost per separation by peer group and jurisdiction for Round 17 and the percentage change from Round 16. Costs include depreciation and costs for emergency department presentations which were subsequently admitted. There were no hospitals in the acute product which did not have a peer group classification in Round 17.

The average cost per separation was adjusted for differences in casemix by weighting separations for the expected cost of the mix of services provided (Table 17). The largest change in average cost per weighted separation between Round 16 and 17 was in the D3 (small remote) peer group, increasing 13.2% to $7,855. The D1 (small regional) peer group experienced a decrease in average cost per weighted separation of 9.2%.

Across the jurisdictions, Western Australia remained the state with the largest increase (up 5.0%) in average cost per weighted separation. The largest decrease was in Queensland (down 2.1%).

Table 17: Average cost per weighted separation by peer group and jurisdiction for Round 17 and the percentage change from Round 16

Peer Group		NSW		Vic		Qld		SA		WA		Tas		NT		ACT		National	
		R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change	R17	% change
A1	Principal referral	4,985	1.0%	4,164	1.0%	4,902	-1.0%	5,383	2.4%	5,629	5.6%	4,952	-3.2%	5,898	0.1%	6,442	-1.4%	4,876	0.7%
A2	Specialist women's & children's	5,236	-0.7%	5,251	0.9%	5,767	13.2%	5,618	-0.8%	6,115	7.9%	-		-		-		5,553	4.0%
B1	Large major city	4,700	1.3%	4,321	3.5%	4,414	-32.3%	4,859	-14.3%	5,332	3.3%	-		-		-		4,699	-2.9%
B2	Large regional	5,753	0.0%	4,357	7.8%	5,168	-2.2%	-		6,037	9.1%	5,511	-14.3%	-		-		5,048	1.8%
C1	Medium	4,957	0.5%	4,163	19.5%	3,358	16.0%	4,978	-2.4%	4,643	-3.7%	5,211	-7.7%	-		-		4,612	1.3%
C2	Medium Other	4,753	2.9%	3,903	11.2%	3,555	7.0%	4,786	-0.1%	4,605	7.6%	-		-		-		4,133	0.5%
D1	Small regional	-	-100%	3,783	-24.4%	3,639	-25.8%	-	-100.0%	5,553	1.9%	10,789	40.5%	-		-		4,369	-9.2%
D3	Small remote	-	-100%	-		11,123	3.5%	4,237	-1.1%	7,619	7.8%	13,372	1247.6%	6,598	6.3%	-		7,855	13.2%
G	Subacute and non-acute	5,558	-4.7%	4,818	4.5%	3,804	-14.9%	8,412	51.5%	5,710	-6.4%	9,877	143.9%	-		-		5,126	-3.0%
Total		**4,983**	**1.2%**	**4,251**	**2.2%**	**4,871**	**-2.1%**	**5,335**	**1.8%**	**5,695**	**5.0%**	**5,226**	**-1.8%**	**5,972**	**0.8%**	**6,442**	**-1.4%**	**4,914**	**0.9%**

This table reports the average cost per weighted separation by peer group and jurisdiction for Round 17 and the percentage change from Round 16. Costs include depreciation and costs for emergency department presentations which were subsequently admitted. There were no hospitals in the acute product which did not have a peer group classification in Round 17.

3.4 What is the difference in cost for overnight versus sameday admitted acute patients?

Sameday separations are a high proportion of admitted acute activity, approximately 52% based on the sample collected as part of the NHCDC Round 17. Within the jurisdictions however, New South Wales and South Australia were the only jurisdictions with more overnight than sameday separations, with New South Wales contributing the most (32.5%) overnight separations to the national total. This is a ratio of approximately 1.19 overnight separations for every sameday separation. The Northern Territory had the lowest ratio of overnight to sameday separations, with 0.47 overnight separations for every sameday separation.

The average length of stay for overnight separations was 4.7 days nationally with an average cost of $8,938. This equates to an average cost per day of $1,895. This compares with an average cost per sameday separation of $1,196 (Table 18), which demonstrates that overnight separations remain at a higher average cost than sameday separations even after accounting for the increased length of stay.

Table 18: Comparison of overnight and sameday admitted acute separations by number of separations, average length of stay (ALOS) and average cost per separation (non-weighted), Round 17

Jurisdiction	Overnight				Sameday			Total		
	Separations	ALOS	Average cost	Average cost per day	Separations	ALOS	Average cost	Separations	ALOS	Average cost
NSW	741,265	5.1	8,864	1,737	623,819	1.0	1,034	1,365,084	3.2	5,286
Vic	538,407	4.7	8,148	1,742	720,205	1.0	1,192	1,258,612	2.6	4,168
Qld	480,830	4.0	8,636	2,146	508,928	1.0	1,212	989,758	2.5	4,818
SA	179,876	5.0	9,628	1,909	159,053	1.0	1,423	338,929	3.1	5,778
WA	217,159	4.5	10,182	2,247	273,945	1.0	1,402	491,104	2.6	5,285
Tas	47,485	5.1	9,876	1,934	55,860	1.0	1,401	103,345	2.9	5,295
NT	37,480	5.1	10,122	1,993	79,435	1.0	829	116,915	2.3	3,809
ACT	40,297	5.2	12,469	2,409	49,294	1.0	1,610	89,591	2.9	6,494
National	2,282,799	4.7	8,938	1,895	2,470,539	1.0	1,196	4,753,338	2.8	4,914

This table reports the number of separations, average length of stay (ALOS) and average cost per separation, by jurisdiction, for Round 17. Results are divided into those for overnight separations and those for sameday separations (where the patient was discharged on the same day they were admitted). Costs for emergency department presentations that were subsequently admitted are included, as is depreciation. Where Round 16 results are included in the discussion this includes cost modelled sites.

The Australian Capital Territory had the highest average cost for overnight separations ($12,469) and it also had the highest average length of stay for these separations (5.2 days). In contrast, Victoria had the lowest average cost for overnight separations ($8,148) but was ranked third from the bottom by average length of stay (4.7 days) – both Queensland (4.0 days) and Western Australia (4.5 days) had lower average lengths of stay.

For sameday patients, the Australian Capital Territory again had the highest average cost per separation ($1,610) and the Northern Territory had the lowest by a substantial margin ($829). The low cost in the Northern Territory reflects the higher proportion of sameday separations for renal dialysis in this jurisdiction which are relatively inexpensive.

3.5 What is the difference in average cost of elective and emergency patients?

Each separation has an 'urgency of admission' status assigned to it. 'Urgency of admission' is defined in the Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR)[11] as determining whether the admission has an emergency basis to it. The four urgency of admission categories are 'Emergency', 'Elective', 'Not assigned' or 'Unknown'. 'Emergency' admissions are defined by clinical indicators for which the patient requires admission within 24 hours. The majority of admissions that are not 'Emergency' are 'Elective', except for a specific subset of admissions that are defined as 'Not Assigned' (such as normal birth / deliveries, planned readmissions or statistical admissions). Finally, if a separation occurs for which the urgency of admission is not recorded or not known, it is assigned as 'Unknown'. For the purposes of this report, 'Not assigned' and 'Unknown' have been grouped together into a 'Not assigned' category.

The national average cost per separation for elective admitted acute separations ($3,495) was lower than that for emergency admitted acute separations ($6,917) (Table 19). This is partly due to the longer average length of stay for 'emergency' patients. However, on a per day basis, the national average costs for 'elective' and 'emergency' were $2,030 and $1,698 respectively, making elective separations more expensive per day.

Across the jurisdictions the average cost for elective type separations was substantially higher than the national average in the Australian Capital Territory ($6,697, 92% above national average), Queensland ($6,157, 76% above national average), South Australia ($5,360, 53% above national average) and Western Australia ($4,690, 34% above national average). The only jurisdiction with substantially lower costs than the national average for elective separations was the Northern Territory ($1,826, 52% of the national average), however as discussed in section 3.4 this may not be the case once casemix variation has been taken into account. For emergency patients again the Australian Capital Territory had the highest cost ($9,835, 42% above national average).

[11] Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) – 'Urgency of admission'. URL: http://meteor.aihw.gov.au/content/index.phtml/itemId/269986 , accessed 11/03/2015.

Table 19: Comparison of elective and emergency type separations by number of separations, average length of stay (ALOS) and average cost per separation (non-weighted), Round 17

Jurisdiction	Elective				Emergency				Not Assigned				Total			
	Seps	ALOS	Avg Cost	Avg Cost per day	Seps	ALOS	Avg Cost	Avg Cost per day	Seps	ALOS	Avg Cost	Avg Cost per day	Seps	ALOS	Avg Cost	Avg Cost per day
NSW	665,481	1.6	2,846	1,804	564,477	5.0	7,732	1,560	135,126	4.13	7,079	1,713	1,365,084	3.2	5,286	1,637
Vic	762,956	1.7	2,824	1,679	418,767	4.0	6,127	1,535	76,889	3.70	6,832	1,847	1,258,612	2.6	4,168	1,620
Qld	218,711	2.1	6,157	2,907	498,674	3.1	5,640	1,832	272,373	1.64	2,238	1,368	989,758	2.5	4,818	1,951
SA	103,820	2.1	5,360	2,508	149,623	4.6	8,048	1,766	85,486	1.90	2,312	1,217	338,929	3.1	5,778	1,837
WA	146,974	1.9	4,690	2,503	207,493	3.7	7,636	2,060	136,637	1.56	2,354	1,507	491,104	2.6	5,285	2,063
Tas	54,574	1.5	3,114	2,087	36,225	4.9	8,705	1,780	12,546	3.17	4,937	1,557	103,345	2.9	5,295	1,834
NT	34,817	1.2	1,826	1,579	37,303	3.9	7,134	1,817	44,795	1.85	2,580	1,391	116,915	2.3	3,809	1,650
ACT	22,086	2.0	6,697	3,367	39,702	4.4	9,835	2,243	27,803	1.43	1,563	1,091	89,591	2.9	6,494	2,257
National	**2,009,419**	**1.7**	**3,495**	**2,030**	**1,952,264**	**4.1**	**6,917**	**1,698**	**791,655**	**2.31**	**3,577**	**1,550**	**4,753,338**	**2.8**	**4,914**	**1,764**

This table reports the number of separations, average length of stay (ALOS), average cost per separation (unweighted), and average cost separation per day, by jurisdiction, for Round 17. Results are divided into those for 'Elective', 'Emergency', 'Not Assigned' and 'Unknown' separations, which are defined in the AIHW National Data Dictionary[11]. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are included in the discussion this includes cost modelled sites.

On an average cost per day basis, the Australian Capital Territory had the highest average cost per separation per day ($3,367 for elective; $2,243 for emergency). The Northern Territory had the lowest average cost on a per day basis for 'elective' ($1,579) and Victoria had the lowest average cost on a per day basis for 'emergency' ($1,535).

The data also highlighted differences across jurisdictions in the proportion of separations classified into 'elective' and 'emergency' type (Table 20). The percentage of total jurisdictional separations classified into 'Elective' ranged from 22.1% in Queensland to 60.6% in Victoria. The range across jurisdictions for the 'Emergency' type was narrower, from 31.9% in the Northern Territory to 50.4% in Queensland. Only New South Wales and Victoria had less than 10% of separations classified as 'Not assigned', while the Northern Territory reported 38.3% of separations in this category.

Table 20: Proportion of separations in Elective and Emergency type, Round 17

Jurisdiction	Elective	Emergency	Not Assigned	Total
NSW	48.8%	41.4%	9.9%	100.0%
Vic	60.6%	33.3%	6.1%	100.0%
Qld	22.1%	50.4%	27.5%	100.0%
SA	30.6%	44.1%	25.2%	100.0%
WA	29.9%	42.3%	27.8%	100.0%
Tas	52.8%	35.1%	12.1%	100.0%
NT	29.8%	31.9%	38.3%	100.0%
ACT	24.7%	44.3%	31.0%	100.0%
National	42.3%	41.1%	16.7%	100.0%

This table reports the proportion of separations in Elective, Emergency and Not Assigned type, by jurisdiction, for Round 17. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are included in the discussion this includes cost modelled sites.

3.6 How does the average cost change for variables used to make adjustments in calculating NWAUs?

The National Weighted Activity Unit (NWAU) is a measure of health service activity expressed as a common unit, against which the national efficient price (NEP) is paid. It provides a way of comparing and valuing each hospital service by weighting it for its clinical complexity. The average hospital service is worth one NWAU – the most intensive and expensive activities are worth multiple NWAUs, the simplest and least expensive are worth fractions of an NWAU. Certain characteristics of patients are used to adjust the price weight applied to each separation for activity based payment purposes. Some of these characteristics that influence clinical complexity include Indigenous status, patient age (and whether or not they are a paediatric patient) and remoteness of a patient's residence.

3.6.1 Indigenous patients

Each patient has an Indigenous status assigned. 'Indigenous Status' is defined in the Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR)[12] as determining whether a person identifies as being of Aboriginal or Torres Strait Islander origin[13].

The national average cost for Indigenous separations was lower, by $941 (18.9%), than for non-Indigenous separations (Table 21). This difference was partly due to the longer average length of stay for non-Indigenous patients, which was evident in all jurisdictions except Tasmania and the Australian Capital Territory. On a per day basis the cost difference was only $20 (1.1%), a negligible difference. Looking across the jurisdictions there were three that appear to have substantial variation in average cost between Indigenous and non-Indigenous patients – South Australia (non-Indigenous higher by $1,515), the Northern Territory (non-Indigenous higher by $2,667) and the Australian Capital Territory (non-Indigenous lower by $1,102). However this variation is largely eliminated when the same comparisons are made on a per day basis.

The national average cost per overnight admitted acute separation is higher for Indigenous patients ($9,157) than non-Indigenous patients ($8,926). In contrast to this, the average cost for sameday separations is lower for Indigenous patients ($927) compared to non-Indigenous patients ($1,219). This is reflective of the difference in casemix between the groups (Table 22 and Table 23) and is due to the high proportion of separations for renal dialysis (haemodialysis) for Indigenous patients. Haemodialysis accounts for approximately 45% of national indigenous separations, compared to 18.9% of non-Indigenous separations.

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12 Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) – 'Indigenous status'. URL: http://meteor.aihw.gov.au/content/index.phtml/itemId/291036 , accessed 11/03/2015.

13 The five categories are 'Aboriginal (but not Torres Strait Islander)', 'Torres Strait Islander (but not Aboriginal)', 'Both Aboriginal and Torres Strait Islander', 'Neither Aboriginal and Torres Strait Islander' or 'Not stated'. In this report these five categories are summarised to a binary category – Indigenous includes 'Aboriginal', 'Torres Strait Islander' and 'Both', while non-Indigenous includes 'Neither' and 'Not stated'.

Across the jurisdictions, the average cost per overnight admitted acute separation was lower for Indigenous patients than non-Indigenous patients in every jurisdiction with the exception of South Australia (8.6% higher) and Queensland (0.4% higher), and in Tasmania the cost was substantially lower (14.1% lower). For sameday separations, the average cost was lower for Indigenous patients in all jurisdictions except Tasmania (16.7% higher) and the Australian Capital Territory (12.8% higher).

Table 21: Comparison of Indigenous and non-Indigenous admitted acute separations by number of separations, average length of stay (ALOS), average cost and sameday/overnight status, Round 17

Jurisdiction	Indigenous							Non-Indigenous						
	Sameday			Overnight			Total	Sameday			Overnight			Total
	Seps	ALOS	Avg Cost	Seps	ALOS	Avg Cost	Avg Cost	Seps	ALOS	Avg Cost	Seps	ALOS	Avg Cost	Avg Cost
NSW	27,778	1.00	944	28,072	4.69	8,553	4,768	596,041	1.00	1,038	713,193	5.12	8,876	5,308
Vic	9,524	1.00	982	6,044	4.48	8,022	3,715	710,681	1.00	1,195	532,363	4.68	8,150	4,173
Qld	53,682	1.00	1,054	34,873	3.93	8,670	4,053	455,246	1.00	1,230	445,957	4.03	8,633	4,893
SA	12,702	1.00	905	7,216	5.15	10,419	4,352	146,351	1.00	1,468	172,660	5.04	9,595	5,867
WA	30,491	1.00	1,058	20,859	4.05	9,737	4,583	243,454	1.00	1,445	196,300	4.58	10,229	5,366
Tas	1,598	1.00	1,627	1,928	4.53	8,536	5,405	54,262	1.00	1,394	45,557	5.13	9,933	5,291
NT	61,986	1.00	710	20,522	5.27	10,011	3,024	17,449	1.00	1,252	16,958	4.85	10,258	5,691
ACT	872	1.00	1,812	1,059	4.88	12,315	7,572	48,422	1.00	1,606	39,238	5.18	12,473	6,470
National	198,633	1.00	927	120,573	4.47	9,157	4,036	2,271,906	1.00	1,219	2,162,226	4.73	8,926	4,977

This table reports the number of separations, average length of stay (ALOS) and average cost per separation (unweighted), by jurisdiction, for Round 17. Results are divided into those for Indigenous and non-Indigenous patients and further divided into overnight separations and those for sameday separations (where the patient was discharged on the same day they were admitted. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation.

Table 22: Top 20 DRGs ranked by number of separations for Indigenous patients, Round 17

Round 17 Rank	DRG	Description	Separations	% of total separations	Avg cost	ALOS
1	L61Z	HAEMODIALYSIS	144,526	45.3%	643	1.0
2	O60B	VAGINAL DELIVERY -CSCC	4,698	1.5%	6,615	2.6
3	J64B	CELLULITIS -CSCC	4,366	1.4%	4,773	2.7
4	F74Z	CHEST PAIN	4,278	1.3%	2,325	1.3
5	O66B	ANTENATAL&OTH OBSTETRIC ADM,SD	3,589	1.1%	574	1.0
6	X60B	INJURIES - CSCC	3,388	1.1%	2,425	1.4
7	O66A	ANTENATAL&OTH OBSTETRIC ADM	3,082	1.0%	3,810	2.5
8	G70B	OTHER DIGESTIVE SYS DIAG -CSCC	2,658	0.8%	2,827	1.7
9	D63Z	OTITIS MEDIA AND URI	2,532	0.8%	3,338	1.8
10	V60B	ALCOHOL INTOXICATN&WITHDRWL-CC	2,436	0.8%	1,993	1.5
11	B76B	SEIZURE - CSCC	2,392	0.7%	3,133	1.7
12	E65B	CHRNIC OBSTRCT AIRWAY DIS -CCC	2,319	0.7%	6,290	3.8
13	G66Z	ABDMNL PAIN/MESENTRC ADENTS	2,236	0.7%	2,617	1.7
14	G67B	OESPHS, GASTR -CSCC	2,007	0.6%	3,037	1.7
15	D40Z	DENTAL EXTRACT & RESTORATIONS	1,979	0.6%	3,721	1.2
16	O01C	CAESAREAN DELIVERY -CSCC	1,962	0.6%	12,355	3.8
17	O60C	VAGINAL DEL SINGLE UNCOMPL	1,898	0.6%	5,189	1.8
18	L63B	KDNY & UNRY TRCT INF -CSCC	1,871	0.6%	4,103	2.3
19	E62C	RESPIRATORY INFECTN/INFLAMM-CC	1,801	0.6%	4,956	2.6
20	E70B	WHOOPNG CGH &ACTE BRNCHIO-CC	1,729	0.5%	5,021	2.2
Total DRGs for Indigenous patients			**319,206**	**100.0%**	**4,036**	**2.3**

This table reports the number of separations, percentage of separations, average length of stay (ALOS), and average cost per separation, for the top 20 DRGs ranked by number of separations, for Round 17, for Indigenous patients. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

Table 23: Top 20 DRGs ranked by number of separations for non-Indigenous patients, Round 17

Round 17 Rank	DRG	Description	Separations	% of total separations	Avg cost	ALOS
1	L61Z	HAEMODIALYSIS	838,302	18.9%	526	1.0
2	R63Z	CHEMOTHERAPY	126,203	2.8%	1,483	1.0
3	O60B	VAGINAL DELIVERY -CSCC	96,499	2.2%	5,036	2.4
4	F74Z	CHEST PAIN	86,534	2.0%	1,935	1.3
5	C16Z	LENS PROCEDURES	56,016	1.3%	2,665	1.0
6	G70B	OTHER DIGESTIVE SYS DIAG -CSCC	53,666	1.2%	2,655	1.9
7	G48C	COLONSCOPY, SD	47,234	1.1%	1,577	1.0
8	Q61B	RED BLOOD CELL DISDERS - CSCC	46,723	1.1%	1,498	1.2
9	G66Z	ABDMNL PAIN/MESENTRC ADENTS	44,753	1.0%	2,366	1.6
10	O01C	CAESAREAN DELIVERY -CSCC	41,737	0.9%	9,593	3.7
11	O66B	ANTENATAL&OTH OBSTETRIC ADM,SD	39,840	0.9%	558	1.0
12	G67B	OESPHS, GASTR -CSCC	37,778	0.9%	2,389	1.7
13	Z64B	OTH FCTR INFL HEALTH STATUS,SD	37,686	0.8%	1,152	1.0
14	J64B	CELLULITIS -CSCC	37,465	0.8%	3,865	3.1
15	X60B	INJURIES - CSCC	35,337	0.8%	2,212	1.5
16	Z40Z	ENDO+DX OTH CNT HLTH SRV SD	34,995	0.8%	1,212	1.0
17	J11Z	OTHER SKIN, SUBC TIS & BRST PR	33,116	0.7%	2,521	1.2
18	G47C	OTH GASTROSCOPY, SD	32,298	0.7%	1,402	1.0
19	F76B	ARRHY, CARD & COND DISDR - CSCC	32,168	0.7%	2,898	2.0
20	E65B	CHRNIC OBSTRCT AIRWAY DIS - CCC	31,240	0.7%	5,566	4.2
Total DRGs for non-Indigenous patients			**4,434,132**	**100.0%**	**4,977**	**2.8**

This table reports the number of separations, percentage of separations, average length of stay (ALOS), and average cost per separation, for the top 20 DRGs ranked by number of separations, for Round 17, for non-Indigenous patients. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.6.2 Paediatric patients

Paediatric separations are defined both by patient age and hospital type. Nine specialist children's hospitals were identified as performing paediatric separations (refer to Table 64 in 0 for a list of these sites - no sites in Tasmania, the Northern Territory or the Australian Capital Territory). All separations at these facilities where the patient was aged less than 17 years were classified as paediatric separations and all other separations were classified as non-paediatric. The national average cost per separation for non-paediatric patients was $4,841 compared to $6,685 (38.1% higher) for paediatrics patients (Table 24). The average length of stay for paediatric and non-paediatric patients was very similar but the average cost per separation per day still reported a $682 difference between the two cohorts, with paediatric having the higher cost. On a jurisdictional basis there was minimal variation, as all jurisdictions reported a per day average cost difference between non-paediatric and paediatric patients of between $398 (South Australia) and $935 (Queensland), paediatric patients being the higher cost in all cases.

Table 24: Number of separations, average length of stay (ALOS), average cost per separation (non-weighted) and average cost per day, Round 17, Paediatric and non-Paediatric patients

Jurisdiction	Paediatric				Non-paediatric			
	Seps	ALOS	Avg Cost	Avg Cost per day	Seps	ALOS	Avg Cost	Avg Cost per day
NSW	53,112	3.0	6,728	2,235	1,311,972	3.2	5,227	1,615
Vic	48,054	2.9	6,827	2,327	1,210,558	2.6	4,062	1,587
Qld	36,987	2.3	6,511	2,854	952,771	2.5	4,753	1,919
SA	21,895	3.0	6,563	2,210	317,034	3.2	5,723	1,812
WA	28,191	2.5	6,686	2,696	462,913	2.6	5,199	2,026
Tas	-	-	-	-	103,345	2.9	5,295	1,834
NT	-	-	-	-	116,915	2.3	3,809	1,650
ACT	-	-	-	-	89,591	2.9	6,494	2,257
National	188,239	2.8	6,685	2,419	4,565,099	2.8	4,841	1,737

This table reports the number of separations, average length of stay (ALOS), average cost per separation (unweighted), and average cost separation per day, by jurisdiction, for Round 17. Results are divided into those Paediatric and Non-Paediatric patients, which are identified by age and hospital type as described in the text. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are included in the discussion this includes cost modelled sites.

3.6.3 Remote patients

Remoteness is defined on a per patient basis into one of the seven remoteness categories[14] based on their postcode of residence (refer to Table 65 and Table 66 in 0 for a listing of these categories) using a reference table from the Australian Bureau of Statistics[15]. The national average cost per separation for patients who reside in an outer regional, remote or very remote area was $5,123, which was 5.0% higher than those living in metropolitan and inner regional areas at $4,880 (Table 25). Again these populations have similar average lengths of stay, but the average cost per separation per day differs by 11.7%. Looking at the jurisdictions, the Australian Capital Territory reported a substantially higher average cost for remote patients ($14,636, 133.8% higher) compared to metro. This was partly due to variances in average length of stay, although the difference on a per day basis was still 41.8%. The only jurisdiction reporting a lower cost for remote patients ($3,788) compared to metro patients ($5,196) was the Northern Territory.

Table 25: Number of separations, average length of stay (ALOS), average cost per non-weighted separation and average cost per day, Round 17, outer regional, remote and very remote patients compared to metro and inner regional patients

Jurisdiction	Outer regional, remote and very remote				Metro and inner regional			
	Seps	ALOS	Avg Cost	Avg Cost per day	Seps	ALOS	Avg Cost	Seps
NSW	74,919	3.1	6,218	2,021	1,290,165	3.2	5,232	1,616
Vic	71,693	2.6	4,517	1,756	1,186,919	2.6	4,147	1,611
Qld	217,427	2.5	4,813	1,908	772,331	2.5	4,820	1,964
SA	64,365	3.0	6,062	2,002	274,564	3.2	5,711	1,800
WA	84,841	2.6	6,068	2,363	406,263	2.6	5,121	2,000
Tas	37,282	3.0	5,613	1,876	66,063	2.8	5,116	1,809
NT	115,199	2.3	3,788	1,647	1,716	2.8	5,196	1,865
ACT	2,500	4.7	14,636	3,140	87,091	2.8	6,260	2,215
National	**668,226**	**2.6**	**5,123**	**1,940**	**4,085,112**	**2.8**	**4,880**	**1,737**

This table reports the number of separations, average length of stay (ALOS), average cost per separation (unweighted), and average cost separation per day, by jurisdiction, for Round 17. Results are divided into those 'Outer Regional, Remote and Very Remote' and 'Metro & Inner Regional' patients, which are primarily identified by patient postcode of residence as described in the text. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are included in the discussion this includes cost modelled sites.

14 In this report, the remoteness categories have been summarised to a binary category of 'Metro' and Inner Regional', and 'Outer Regional, Remote and Very Remote', with the latter receiving a Remoteness Area Adjustment in calculating the NWAU.

15 For postcodes that were unable to be matched, the Statistical Area Level 2 (SA2) code of the patient was classified into a remoteness category using a separate ABS correspondence table. For separations that are still unable to be classified, the geographical indicator field (remoteness) of the hospital is used.

3.7 How have the costs attributed to cost buckets changed over time?

Cost buckets were developed as a reporting tool in the NHCDC to estimate the costs on a per patient and aggregate (per hospital or per jurisdiction) basis that are attributable to interim products such as ward costs, pathology costs, imaging costs, ICU costs and allied health costs. There are 16 cost buckets that are described in Table 63 in 0[16]. The column that details the percentage of average cost provides context to the percentage change in average costs for each cost bucket between rounds.

In Round 17, the highest cost bucket component of the national average cost was ward nursing, which made up 19.7% of the national average cost (Table 28). This cost bucket increased 3% from Round 16. By comparison, ward medical costs, which represented the third largest cost bucket declined by 0.8% between Round 16 and 17. The second largest cost bucket in Round 17 was operating rooms, and has remained consistently 13.7% of national average costs since Round 15. The average cost for this cost bucket remained relatively stable between Round 16 and 17, increasing slightly by 0.7%. Ward nursing, non-clinical salaries, specialist procedure suites, prosthetics, on-costs and depreciation cost buckets all reported decreases in average costs between Round 15 and 16, but an increase in average cost between Round 16 and 17.

The cost bucket that experienced the largest increase between Round 16 and 17 was depreciation, with a 17.7% increase. Pathology experienced the largest decrease between Round 16 and 17, with a 15% decrease. This is following a 12.6% decrease from Round 15 to 16 and appears to be the only cost bucket following such a trend from Round 15.

While section 3.2 concluded that the variation in the movement in average cost per weighted separation at a jurisdictional level had reduced substantially by Round 17, the variation in the costs assigned to cost buckets reported in this section highlights that costing approaches at the cost bucket level are still being refined in the ABF environment.

[16] Payroll tax is reported as a separate cost bucket but is not included in any of the results presented in this report due to the substantial differences between jurisdictional arrangements for payroll tax that would affect the validity of comparisons.

Table 26: Change in average cost per separation (non-weighted) by cost bucket, Round 15 to Round 17

Cost Buckets	Round 15		Round 16		Round 17		% change from Round 15 to Round 16	% change from Round 16 to Round 17
	Average Cost	% of R15 average cost	Average Cost	% of R16 average cost	Average Cost	% of R17 average cost		
Ward Medical	583	12.5%	595	12.2%	590	12.0%	2.1%	-0.8%
Ward Nursing	943	20.2%	941	19.3%	970	19.7%	-0.2%	3.0%
Non-Clinical Salaries	288	6.2%	274	5.6%	289	5.9%	-4.8%	5.5%
Pathology	176	3.8%	154	3.2%	131	2.7%	-12.6%	-15.0%
Imaging	142	3.0%	125	2.6%	119	2.4%	-12.2%	-4.9%
Allied Health	120	2.6%	140	2.9%	156	3.2%	17.0%	11.2%
Pharmacy	210	4.5%	201	4.1%	181	3.7%	-4.3%	-9.8%
Critical Care	339	7.2%	355	7.3%	365	7.4%	4.7%	2.8%
Operating Rooms	640	13.7%	667	13.7%	672	13.7%	4.2%	0.7%
Emergency Department	155	3.3%	320	6.6%	327	6.7%	106.2%	2.3%
Ward Supplies	325	6.9%	348	7.1%	341	6.9%	7.0%	-2.1%
SPS	45	1.0%	42	0.9%	45	0.9%	-7.0%	8.0%
Prosthetics	140	3.0%	139	2.9%	146	3.0%	-0.7%	5.0%
On-costs	315	6.7%	306	6.3%	314	6.4%	-3.0%	2.7%
Hotel	142	3.0%	151	3.1%	139	2.8%	6.4%	-8.1%
Depreciation	114	2.4%	110	2.3%	130	2.6%	-3.3%	17.7%
National	**4,677**	**100.0%**	**4,868**	**100.0%**	**4,914**	**100.0%**	**4.1%**	**0.9%**

This table reports the average cost per separation by cost bucket, for Round 15, 16 and 17 to compare the trend in average costs over time. It also reports the percentage movement between Round 15 and 16, and between Round 16 and 17. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Results include cost modelled sites where applicable.

3.8 What proportion of the costs are jurisdictions allocating to each cost bucket?

The following three sections report costs by cost bucket, which are split into 'direct' and 'indirect' costs. In product costing, cost centres are generally classified as either direct (deliver products/services directly to patients) or indirect (provide products/services for costs centres that deliver services directly to patients). Direct cost centres include wards, pathology and allied health where a patient receives a specified service or product directly.

Indirect cost centres include finance, cleaning, and equipment maintenance. Indirect costs are allocated to patients based on some reasonable method of measuring consumption of that resource by each patient (for example, cleaning costs are often allocated based on the square metre area of a ward). There are cost buckets which may initially be solely indirect costs – hotel costs, on-costs and depreciation costs. However these can be mapped to direct and indirect cost centres in the hospital general ledger. Depreciation is typically reported as a separate cost centre, but sometimes it is allocated as an overhead or indirect cost and sometimes it is allocated to virtual patients which can result in depreciation being reported as a direct cost.

At a national level, direct costs represent the vast majority (76.9%) of total costs (Table 27), with the lowest proportion reported in Western Australia (70.0%) and the highest in Queensland (82.4%).

Table 27: Total cost, total direct cost and total indirect cost by jurisdiction, Round 17

Jurisdiction	Total cost ($m)	Direct cost		Indirect cost	
		Cost ($m)	% of total	Cost ($m)	% of total
NSW	7,215	5,469	75.8%	1,747	24.2%
Vic	5,246	4,181	79.7%	1,065	20.3%
Qld	4,769	3,930	82.4%	839	17.6%
SA	1,958	1,397	71.3%	561	28.7%
WA	2,595	1,816	70.0%	779	30.0%
Tas	547	427	78.0%	120	22.0%
NT	445	327	73.5%	118	26.5%
ACT	589	411	70.6%	171	29.4%
National	**23,358**	**17,958**	**76.9%**	**5,400**	**23.1%**

This table reports the total cost, total direct cost and total indirect cost for each jurisdiction for Round 17. It also reports the proportion of the total costs represented by the Direct and Indirect costs. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are reported in the discussion, this includes cost modelled sites. Costs have been rounded to the nearest million.

3.8.1 Overall

At a national level, the cost bucket that attracted the greatest proportion of total costs for admitted acute care was ward nursing (19.7%), closely followed by operating rooms (13.7%) and then ward medical (12.0%) (Table 28).

At a jurisdictional level, these cost buckets were also the three largest for all jurisdictions except the Northern Territory where ward supplies were the second largest cost bucket (16.1%) and the Australian Capital Territory where critical care was in third place (9.9%). However, while the ranking of cost buckets remained fairly consistent by jurisdiction, the precise proportion of costs allocated to each cost bucket varied across jurisdictions. Taking the largest cost bucket, ward nursing, as an example, proportions ranged from 16.1% in the Australian Capital Territory to 23.0% in the Northern Territory.

Table 28: Proportion of total cost allocated to each cost bucket for admitted acute patients by jurisdiction, Round 17

Jurisdiction	Admitted acute - Proportion of total cost																
	Ward Medical	Ward Nursing	Non-Clinical	Pathology	Imaging	Allied Health	Pharmacy	Critical	OR	ED	Ward Supplies	SPS	Pros	On Costs	Hotel	Deprec	Total
NSW	11.7%	20.2%	6.0%	2.9%	2.8%	3.4%	2.9%	7.5%	11.8%	7.8%	6.7%	0.7%	3.4%	5.4%	3.4%	3.4%	100.0%
Vic	10.4%	17.8%	6.3%	2.2%	2.1%	3.1%	5.4%	7.2%	16.5%	7.1%	6.4%	1.2%	3.1%	8.2%	2.2%	0.9%	100.0%
Qld	15.2%	22.1%	5.6%	2.7%	2.3%	3.1%	3.3%	8.1%	15.9%	6.2%	4.7%	1.0%	2.4%	4.8%	1.2%	1.5%	100.0%
SA	11.8%	20.7%	5.2%	2.5%	2.1%	3.3%	2.4%	7.0%	11.0%	5.0%	9.8%	1.3%	2.9%	8.5%	2.2%	4.2%	100.0%
WA	12.8%	17.8%	5.0%	2.0%	2.5%	3.0%	4.1%	5.5%	11.3%	5.0%	9.0%	0.8%	2.9%	6.7%	6.5%	5.0%	100.0%
Tas	8.4%	18.4%	7.6%	4.1%	2.5%	2.3%	4.1%	8.6%	14.2%	6.5%	7.4%	0.7%	3.2%	8.0%	1.7%	2.3%	100.0%
NT	10.3%	23.0%	8.2%	3.3%	2.2%	3.6%	3.2%	9.1%	9.7%	4.7%	16.1%	0.0%	0.9%	1.9%	0.8%	2.8%	100.0%
ACT	7.5%	16.1%	5.2%	5.1%	2.4%	1.9%	3.4%	9.9%	15.7%	7.7%	6.9%	1.2%	2.6%	8.6%	2.8%	2.9%	100.0%
National	12.0%	19.7%	5.9%	2.7%	2.4%	3.2%	3.7%	7.4%	13.7%	6.7%	6.9%	0.9%	3.0%	6.4%	2.8%	2.6%	100.0%

This table reports the proportion of total cost for each jurisdiction that was allocated to each cost bucket for Round 17. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are reported in the discussion, this includes cost modelled sites.

3.8.2 Direct Costs

Looking only at direct costs, at a national level the top three cost buckets by proportion of costs were still ward nursing (23.1%), operating rooms (14.5%) and ward medical (13.5%), with proportions that are similar to those at the total cost level (Table 29). This is expected since direct costs represent the vast majority of total costs (76.9%) (Table 27).

The three largest cost buckets were consistent across all jurisdictions except the Australian Capital Territory which again reported critical care in third place (11.1%) followed by ward medical (10.1%). In fact, the relative proportions on a cost bucket basis for direct costs are very similar to those for total costs.

Table 29: Proportion of direct cost allocated to each cost bucket for admitted acute patients by jurisdiction, Round 17

Jurisdiction	Admitted acute - Proportion of direct cost																
	Ward Medical	Ward Nursing	Non-Clinical	Pathology	Imaging	Allied Health	Pharmacy	Critical	OR	ED	Ward Supplies	SPS	Pros	On Costs	Hotel	Deprec	Total
NSW	14.9%	25.0%	1.7%	3.4%	3.1%	3.4%	3.5%	8.1%	12.9%	8.0%	3.1%	0.8%	4.5%	5.0%	1.7%	0.9%	100.0%
Vic	11.7%	20.0%	3.7%	2.5%	2.3%	3.0%	6.3%	7.5%	16.8%	7.3%	3.9%	1.3%	3.8%	8.0%	1.3%	0.5%	100.0%
Qld	12.0%	22.4%	6.1%	3.2%	2.3%	3.0%	3.7%	8.0%	16.2%	6.0%	4.7%	1.0%	2.9%	5.7%	1.4%	1.5%	100.0%
SA	15.2%	27.0%	1.4%	2.4%	2.5%	3.3%	3.3%	8.2%	12.6%	5.2%	4.4%	1.5%	4.1%	7.7%	1.2%	0.1%	100.0%
WA	17.0%	22.9%	1.3%	3.0%	2.8%	3.2%	5.6%	5.8%	12.5%	5.3%	4.9%	0.9%	4.2%	5.7%	3.2%	1.8%	100.0%
Tas	10.0%	21.2%	3.0%	4.8%	2.8%	2.2%	4.9%	9.2%	15.0%	6.9%	4.7%	0.8%	4.1%	8.4%	0.8%	1.3%	100.0%
NT	13.6%	29.8%	4.7%	4.0%	2.4%	4.1%	4.1%	9.5%	9.7%	4.6%	8.8%	0.0%	1.3%	2.2%	0.3%	1.0%	100.0%
ACT	10.1%	20.8%	1.3%	6.4%	2.5%	1.9%	4.7%	11.1%	16.2%	7.6%	3.1%	1.2%	3.7%	6.6%	1.5%	1.3%	100.0%
National	13.5%	23.1%	3.1%	3.1%	2.6%	3.1%	4.4%	7.8%	14.5%	6.8%	4.1%	1.0%	3.9%	6.2%	1.6%	1.0%	100.0%

This table reports the proportion of direct costs for each jurisdiction that was allocated to each cost bucket for Round 17. Direct costs are costs for health care services or products that are delivered directly to the patient or can be attributed to a specific patient. Costs for emergency department presentations which were subsequently admitted are included, as is depreciation. Where Round 16 results are reported in the discussion, this includes cost modelled sites.

The largest variation in direct costs across jurisdictions was in ward nursing, ranging from 29.8% in the Northern Territory to 20.0% in Victoria (national average 23.1%).

3.8.3 Indirect Costs

The trends in indirect costs were different to those shown in total costs and direct costs (Table 27). At a national level the top three cost buckets by proportion of indirect costs were ward supplies (16.5%), non-clinical (15.0%) and operating rooms (10.8%) (Table 30).

In Queensland a high proportion of indirect cost was allocated to ward medical and ward nursing (29.9% and 20.7% respectively). This compares to the national average for these cost buckets of 7.1% and 8.6% respectively. Furthermore, the proportion of indirect costs allocated to non-clinical salary and wages in Queensland was only 3.5% compared to the national average of 15.0%, perhaps indicating a difference in the method of allocating these salary and wage costs.

The range across jurisdictions within cost buckets was larger on average for indirect costs than for either total costs or direct costs. The greatest variation in any single cost bucket was ward supplies, which ranged between 36.3% in the Northern Territory and 4.7% in Queensland. Interestingly, the proportion of direct costs in the ward supplies cost bucket for those two jurisdictions was relatively similar (8.8% and 4.7% respectively), indicating that the variation in indirect costs in this cost bucket was not due to a simple difference in the allocation of costs between direct and indirect cost centres.

Table 30: Proportion of indirect cost allocated to each cost bucket for admitted acute patients by jurisdiction, Round 17

Jurisdiction	Admitted acute - Proportion of indirect cost																
	Ward Medical	Ward Nursing	Non-Clinical	Pathology	Imaging	Allied Health	Pharmacy	Critical	OR	ED	Ward Supplies	SPS	Pros	On Costs	Hotel	Deprec	Total
NSW	1.6%	5.2%	19.6%	1.2%	1.5%	3.7%	1.2%	5.8%	8.5%	6.9%	17.8%	0.4%	0.0%	6.7%	8.8%	11.1%	100.0%
Vic	5.1%	9.3%	16.4%	1.3%	1.2%	3.4%	2.0%	5.9%	15.1%	6.0%	16.4%	0.9%	0.2%	8.9%	5.4%	2.5%	100.0%
Qld	29.9%	20.7%	3.5%	0.4%	2.3%	3.4%	1.6%	8.9%	14.4%	6.8%	4.7%	0.9%	0.0%	0.8%	0.5%	1.3%	100.0%
SA	3.1%	5.2%	14.4%	2.7%	1.4%	3.5%	0.4%	4.0%	7.1%	4.6%	23.1%	0.8%	0.0%	10.5%	4.7%	14.4%	100.0%
WA[17]	3.1%	6.1%	13.8%	-0.3%	1.8%	2.6%	0.6%	4.9%	8.4%	4.5%	18.4%	0.6%	0.0%	8.8%	14.1%	12.4%	100.0%
Tas	2.4%	8.5%	24.0%	1.5%	1.6%	2.5%	1.3%	6.5%	11.6%	5.2%	17.3%	0.3%	0.0%	6.7%	4.7%	5.7%	100.0%
NT	1.1%	4.1%	18.0%	1.4%	1.9%	2.4%	0.9%	8.0%	9.7%	5.0%	36.3%	0.0%	0.0%	1.2%	2.0%	8.0%	100.0%
ACT	1.1%	4.8%	14.7%	2.2%	2.2%	1.9%	0.3%	7.0%	14.6%	7.8%	16.2%	1.2%	0.0%	13.2%	6.1%	6.8%	100.0%
National	7.1%	8.6%	15.0%	1.1%	1.6%	3.3%	1.2%	6.1%	10.8%	6.1%	16.5%	0.7%	0.0%	7.0%	6.9%	8.1%	100.0%

This table reports the proportion of indirect costs for each jurisdiction that was allocated to each cost bucket for Round 17. Indirect costs (sometimes referred to as 'overhead costs') are general expenses that are not attributable to a specific patient. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation. Where Round 16 results are reported in the discussion, this includes cost modelled sites.

[17] Western Australia has reported negative indirect costs in the pathology cost bucket. Please refer to the Western Australia data quality statement in section 8.6 for further information regarding this.

3.9 What is the national average cost for each line item for admitted acute separations?

Line items are groups of general ledger expenditure account codes that describe the input type of the expense (rather than the function of the expense), which define the resources being used by a cost centre. For example, a hospital might have line items for drugs, prostheses, nursing salaries or medical labour. They are different to cost buckets, which typically accumulate costs of interim products provided directly to patients. There is a standard set of line items defined in the Australian Hospital Patient Costing Standards v2.0 – 1 March 2011 (AHPCS)[18]. These are listed in Table 61 of 0 Attachment A of the AHPCS provides the full definition of costs prescribed as included in each line item.

Nationally and across all jurisdictions the highest national average cost line item was nursing salary and wages at $1,381 (Table 31) and it ranged from $1,682 in South Australia to $1,103 in Victoria. This was also the line item with the largest range across jurisdictions on an absolute basis. 'Salary & wages – medical (non-VMO)' was another line item displaying both a high average cost and substantial variability across the jurisdictions. On a proportional basis (and excluding line items in which three or more jurisdictions did not submit costs) the line item with the greatest variance was 'depreciation – equipment', which ranged from $44 in New South Wales to $126 in Western Australia.

As highlighted in the preceding discussion, not all jurisdictions reported costs against all line items. In particular the following line items had three or more jurisdictions reporting nil costs: pharmaceuticals – PBS; blood; capital costs; corporate costs; and excluded costs.

[18] Australian Hospital Patient Costing Standards v2.0 – 1 March 2011. URL: http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/content/EC0666091A19EBB1CA257B9B0083827A/$File/HospitalPatientCostingStandards_v2_Final_June%202011.doc, accessed 26/11/2014.

Table 31: Average cost per admitted acute separation by line item by jurisdiction, Round 17

Line Items	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National	% of total
Salary & Wages - Medical (non-VMO)	583	463	1,007	853	858	700	563	776	693	15.0%
Salary & Wages - Medical (VMO)	284	280	60	134	182	5	-	302	202	4.4%
Salary & Wages - Nursing	1,484	1,103	1,537	1,682	1,294	1,398	1,168	1,601	1,381	29.9%
Salary & Wages - Allied Health	233	223	193	164	246	170	113	246	214	4.6%
Salary & Wages - Other	454	429	351	409	403	584	441	548	422	9.1%
On-costs	287	341	233	490	352	407	73	556	314	6.8%
Medical supplies	257	234	233	300	238	301	221	322	248	5.4%
Prostheses	182	128	116	167	155	168	35	168	146	3.2%
Imaging	47	25	29	7	1	-	34	2	28	0.6%
Pathology	133	39	104	121	108	37	46	77	93	2.0%
Pharmaceuticals - non-PBS	139	127	156	118	217	135	120	182	146	3.2%
Pharmaceuticals - PBS	-	82	-	43	-	88	1	90	28	0.6%
Blood	-	0	10	-	-	53	-	71	5	0.1%
Hotel	181	90	59	128	342	85	29	184	139	3.0%
Goods and services	432	295	347	552	457	402	677	683	399	8.6%
Depreciation - building	136	-	13	152	97	57	-	79	65	1.4%
Depreciation - equipment	44	-	58	59	126	45	96	84	47	1.0%
Lease	-	37	-	30	42	22	13	24	17	0.4%
Capital	0	-	0	-	-	-	-	-	0	0.0%
Corporate	-	-	15	76	112	134	-	-	23	0.5%
Excluded costs	29	-	0	-	-	43	3	0	10	0.2%
Total	4,905	3,896	4,522	5,487	5,229	4,834	3,632	5,996	4,621	100.0%

This table is based on the Cost C (patient costed) tables, and as such the results do not reconcile completely to those presented earlier due to adjustments made when summarising patient costs to the cost bucket level. The most substantial difference is that the Cost C table does not include any emergency department costs for patients who were subsequently admitted. Costs for WIP patients have been excluded as well as separations with missing DRGs. Values that appear as 0 in the table represent fractional dollar costs that have been rounded. Zero cost items are represented by a '-'. Definitions of the line items can be found in Attachment A of the Australian Patient Costing Standards version 2.0.

3.10 What is the average cost per admitted acute separation by MDC?

Major Diagnostic Categories (MDC) are formed by dividing all possible principal diagnoses (from International Classification of Diseases (ICD)-10-AM) into 23 mutually exclusive diagnosis areas. The diagnoses in each MDC correspond to a single organ system or aetiology and are grouped according to principal diagnoses. Pre-MDC, unlike the others, can be reached from a number of diagnosis/procedure situations.

The MDC with the highest average cost per separation was pre-MDC ($101,514) and the lowest was MDC 11 (diseases and disorders of the kidney and urinary tract) at $1,207 (Table 32). Correspondingly, the MDC with the highest average length of stay was pre-MDC (25.1 days) and the MDCs with the lowest average length of stay were MDC 2 (Diseases and disorders of the eye) and MDC 11 (Diseases and disorders of the kidney and urinary tract) with an average length of stay of 1.3 days.

Table 32: Average cost per separation by MDC, Round 17

MDC	MDC Description	Separations	ALOS	Total Cost	Average Cost per separation
Pre-MDC	Major procedures where the principal diagnosis may be associated with any MDC	12,037	25.1	1,221,925,289	101,514
MDC 01	Diseases and disorders of the nervous system	240,799	4.0	1,583,048,766	6,574
MDC 02	Diseases and disorders of the eye	94,644	1.3	295,655,227	3,124
MDC 03	Diseases and disorders of the ear, nose, mouth and throat	166,397	1.6	608,635,626	3,658
MDC 04	Diseases and disorders of the respiratory system	260,653	4.2	1,738,660,478	6,670
MDC 05	Diseases and disorders of the circulatory system	385,661	3.2	2,571,609,152	6,668
MDC 06	Diseases and disorders of the digestive system	458,685	2.6	2,237,496,429	4,878
MDC 07	Diseases and disorders of the hepatobiliary system and pancreas	90,922	3.9	707,042,560	7,776
MDC 08	Diseases and disorders of the musculoskeletal system and connective tissue	348,485	3.7	2,776,237,900	7,967
MDC 09	Diseases and disorders of the skin, subcutaneous tissue and breast	177,824	2.8	812,480,773	4,569
MDC 10	Endocrine, nutritional and metabolic diseases and disorders	68,674	3.8	459,550,076	6,692
MDC 11	Diseases and disorders of the kidney and urinary tract	1,174,259	1.3	1,417,190,350	1,207
MDC 12	Diseases and disorders of the male reproductive system	40,111	2.0	187,924,252	4,685
MDC 13	Diseases and disorders of the female reproductive system	105,424	1.7	476,981,610	4,524
MDC 14	Pregnancy, childbirth and the puerperium	338,630	2.5	1,707,563,671	5,043
MDC 15	Newborns and other neonates	62,093	7.6	792,631,450	12,765
MDC 16	Diseases and disorders of the blood and blood forming organs and immunological disorders	91,955	2.1	270,153,363	2,938
MDC 17	Neoplastic disorders (haematological and solid neoplasms)	174,586	1.8	530,625,561	3,039
MDC 18	Infectious and parasitic diseases	58,273	5.2	482,989,617	8,288
MDC 19	Mental diseases and disorders	113,166	9.1	1,220,697,125	10,787
MDC 20	Alcohol/drug use and alcohol/drug induced organic mental disorders	30,549	3.8	149,147,114	4,882
MDC 21	Injuries, poisoning and toxic effects of drugs	138,085	2.8	688,645,077	4,987
MDC 22	Burns	7,282	4.6	82,151,259	11,281
MDC 23	Factors influencing health status and other contacts with health services	109,023	1.8	247,068,316	2,266
Unrelated OR DRGs		4,459	9.7	87,579,428	19,641
Error DRGs		662	3.0	3,989,322	6,026
Total		4,753,338	2.8	23,357,679,789	4,914

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, by major diagnostic categories (MDC) for Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation. Where Round 16 results are reported in the discussion, this includes cost modelled sites.

3.11 Top Diagnosis Related Groups (DRGs)

Australian Refined Diagnosis Related Groups (AR-DRGs) is an Australian admitted patient classification system which provides a clinically meaningful way of relating the number and type of patients treated in a hospital (that is, its casemix) to the resources required by the hospital. Each AR-DRG represents a class of patients with similar clinical conditions requiring similar hospital services. The classification categorises admitted acute patient episodes of care into groups with similar conditions and similar usage of hospital resources, using information in the hospital morbidity record such as the diagnoses, procedures and demographic characteristics of the patient.[19]

3.11.1 What are the top 20 DRGs ranked by highest average cost per separation?

In total, the top 20 highest cost DRGs accounted for $1.502 billion or 6.4% of the total reported admitted acute patient cost, but only 0.3% of total separations.

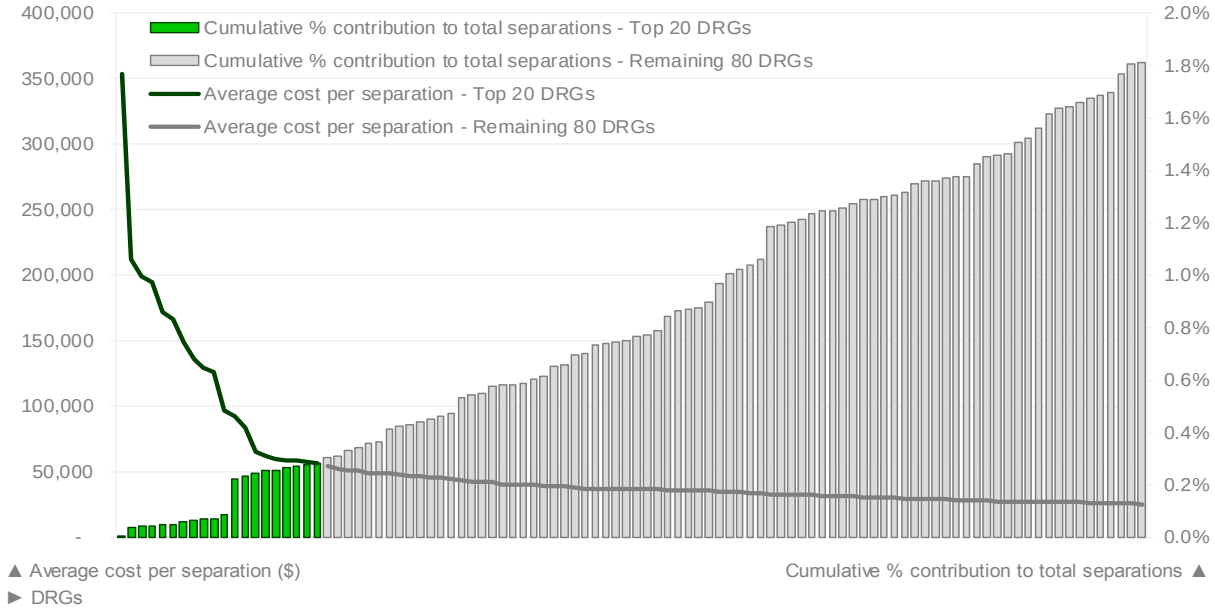
The DRG with the highest average cost per separation in both Round 16 and Round 17 was DRG A10Z (insertion of ventricular assisted devices (VAD)) with an average cost per separation of $353,143 in Round 17, up 17.9% from $299,650 in Round 16 (Table 33 . This 17.9% increase was also the largest increase in the average cost per separation for a DRG between Round 16 and Round 17.

In Round 17, seven of the top 20 highest cost DRGs related to neonates (ranked 3, 7, 10, 11, 14, 19 and 20). Four of these showed an increase in the average cost per separation from Round 16 to Round 17 including a substantial increase of 12.0% for P02Z (Cardiothoracic/Vascular Procedures for Neonates). The remaining three of these seven DRGs (P61Z, P06A, P05Z) showed a slight decrease in average cost per separation.

Figure 5 shows the top 100 DRGs ranked by highest average cost (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 DRGs are shown in green. This figure shows the steep fall in average cost outside of the highest cost DRGs. In comparison, the proportions of separations contributed to the total increases at a more linear rate.

[19] AR-DRG Data Cubes. Canberra: AIHW. Viewed 4 March 2015 http://www.aihw.gov.au/hospitals-data/ar-drg-data-cubes/

Figure 5: Top 100 DRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each DRG on the left hand side and the cumulative contribution of each DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 33: Top 20 DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	A10Z	INSERTION OF VAD	48	38	51.3	49.6	13,419,445	299,650	353,143	53,493	17.9%
2	2	A06A	TRACHEOSTOMY W VENT>95 +CCC	1,824	1,783	44.8	45.6	378,067,680	213,478	212,040	(1,438)	-0.7%
3	3	P61Z	NEONATE, ADMISSION WT <750 G	290	231	75.4	72.2	45,956,233	202,793	198,945	(3,849)	-1.9%
4	4	A05Z	HEART TRANSPLANT	58	72	40.2	40.1	13,993,283	187,536	194,351	6,816	3.6%
5	5	Y01Z	VENT BURN&SEV FULL THICK BURN	142	116	33.2	34.6	19,990,876	150,676	172,335	21,659	14.4%
6	7	A40Z	ECMO	196	193	24.7	28.3	32,160,792	142,068	166,636	24,569	17.3%
7	6	P62Z	NEONATE, ADMISSION WT 750-999G	495	481	60.2	61.6	71,890,617	144,804	149,461	4,656	3.2%
8	8	A03Z	LUNG OR HEART/LUNG TRANSPLANT	136	153	28.8	30.5	20,734,503	132,260	135,520	3,259	2.5%
9	9	A01Z	LIVER TRANSPLANT	180	237	26.5	26.6	30,690,068	123,779	129,494	5,715	4.6%
10	10	P02Z	NEO,CARDIOTHORACIC/VASCULAR PR	156	158	26.2	28.3	19,992,931	112,987	126,538	13,551	12.0%
11	11	P03Z	NEO,ADMWT 1000-1499G+SIG OR PR	776	746	47.0	48.4	71,958,834	94,270	96,460	2,190	2.3%
12	12	A06B	TRCH&VNT-CCC OR TRCH/VNT+CCC	6,246	6,454	23.6	23.6	595,012,276	90,849	92,193	1,343	1.5%
13	13	A07Z	ALLOG BONE MARROW TRANSPLANT	509	542	29.5	30.0	45,409,218	87,338	83,781	(3,557)	-4.1%
14	15	P06A	NEO,ADMWT >2499G+SIG OR PR+MMP	529	561	25.4	24.5	36,703,649	65,877	65,425	(451)	-0.7%
15	16	F03A	CRDC VALV PR+PMP+INV INVES+CCC	415	445	19.6	19.4	27,683,911	64,039	62,211	(1,828)	-2.9%
16	14	A11A	INS IMPLNT SP INFUS DEV+CCC	18	9	29.3	12.3	537,344	74,804	59,705	(15,099)	-20.2%
17	17	W01Z	VENTILN/CRANIA MULT SIG TRAUMA	475	499	19.2	18.3	29,587,326	59,832	59,293	(539)	-0.9%
18	23	I01A	BL/MLT MJ JT PR LWR EXT+RV/CCC	177	191	22.0	24.0	11,242,255	53,430	58,860	5,430	10.2%
19	19	P04Z	NEO,ADMWT 1500-1999G+SIG OR PR	351	369	31.3	32.3	21,296,083	55,069	57,713	2,644	4.8%
20	18	P05Z	NEO,ADMWT 2000-2499G+SIG OR PR	252	295	25.5	26.1	16,566,147	57,497	56,156	(1,340)	-2.3%
Remaining DRGs				4,651,305	4,739,765	2.78	2.71	21,854,786,319	4,565	4,611	46	1.0%
Total DRGs				4,664,578	4,753,338	2.86	2.79	23,357,679,789	4,868	4,914	46	0.9%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 DRGs ranked by highest average cost per separations, for Round 17. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

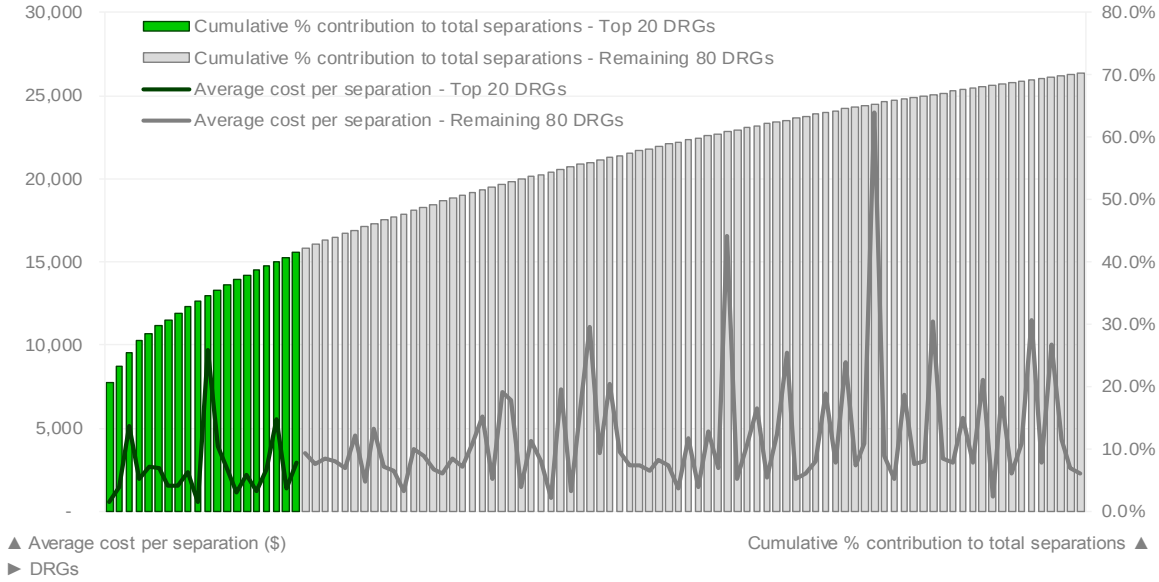
3.11.2 What are the top 20 DRGs ranked by the highest number of separations?

Taken together, the top 20 highest volume DRGs accounted for $3.267 billion, which represents 14.0% of the total reported admitted acute patient cost and 41.5% of total separations.

The DRG with the highest volume in both Round 16 and Round 17 was L61Z (haemodialysis) with 982,822 separations (20.7% of reported separations) (Table 34). Comparing across the rounds, there were no DRGs from the Round 16 top 20 that are not also in the Round 17 top 20, although many from 11th to 20th place have shifted positions.

Figure 6 shows the top 100 DRGs ranked by highest number of separations, with average cost by DRG (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 DRGs, shown in green, together represent 41.5% of total separations. The highest DRG by volume (L61Z – haemodialysis) alone represents over 20% of total separations.

Figure 6: Top 100 DRGs showing average cost per separation (LHS) and ordered by cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each DRG on the left hand side and the cumulative contribution of each DRG to total separations on the right hand side for DRGs. The Top 20 have been ranked by separations and are highlighted in green.

Table 34: Top 20 DRGs ranked by number of separations, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	L61Z	HAEMODIALYSIS	976,955	982,822	1.0	1.0	533,839,428	571	543	(28)	-4.9%
2	2	R63Z	CHEMOTHERAPY	130,783	127,907	1.0	1.0	189,511,628	1,522	1,482	(40)	-2.6%
3	3	O60B	VAGINAL DELIVERY -CSCC	96,082	100,551	2.5	2.4	513,684,380	5,083	5,109	26	0.5%
4	4	F74Z	CHEST PAIN	83,984	90,653	1.3	1.3	176,654,071	2,064	1,949	(115)	-5.6%
5	5	C16Z	LENS PROCEDURES	59,731	57,379	1.0	1.0	153,811,098	2,646	2,681	34	1.3%
6	6	G70B	OTHER DIGESTIVE SYS DIAG -CSCC	53,089	56,144	2.0	1.9	148,916,335	2,674	2,652	(22)	-0.8%
7	7	G48C	COLONSCOPY, SD	53,082	48,018	1.0	1.0	76,071,724	1,520	1,584	64	4.2%
8	8	Q61B	RED BLOOD CELL DISDERS - CSCC	48,724	47,869	1.3	1.2	72,473,015	1,614	1,514	(100)	-6.2%
9	12	G66Z	ABDMNL PAIN/MESENTRC ADENTS	41,341	46,854	1.7	1.6	111,082,856	2,451	2,371	(80)	-3.3%
10	10	O66B	ANTENATAL&OTH OBSTETRIC ADM,SD	41,816	43,429	1.0	1.0	24,302,770	601	560	(41)	-6.8%
11	9	O01C	CAESAREAN DELIVERY -CSCC	42,662	43,284	3.8	3.6	420,855,126	9,969	9,723	(246)	-2.5%
12	13	J64B	CELLULITIS -CSCC	39,310	41,545	3.3	3.1	163,952,066	4,067	3,946	(121)	-3.0%
13	16	G67B	OESPHS, GASTR -CSCC	36,442	39,666	1.8	1.7	95,945,731	2,512	2,419	(93)	-3.7%
14	11	Z64B	OTH FCTR INFL HEALTH STATUS,SD	41,687	39,009	1.0	1.0	44,758,488	1,113	1,147	34	3.1%
15	17	X60B	INJURIES - CSCC	35,673	38,624	1.7	1.5	86,076,828	2,259	2,229	(30)	-1.3%
16	14	Z40Z	ENDO+DX OTH CNT HLTH SRV SD	36,900	35,381	1.0	1.0	42,995,204	1,209	1,215	6	0.5%
17	15	J11Z	OTHER SKIN, SUBC TIS & BRST PR	36,614	33,883	1.2	1.2	86,180,287	2,552	2,543	(9)	-0.3%
18	19	E65B	CHRNIC OBSTRCT AIRWAY DIS -CCC	34,933	33,041	4.5	4.1	183,963,007	5,797	5,568	(229)	-4.0%
19	18	G47C	OTH GASTROSCOPY, SD	35,538	33,027	1.0	1.0	46,598,738	1,325	1,411	86	6.5%
20	20	F76B	ARRHY, CARD & COND DISDR -CSCC	32,670	32,683	2.1	2.0	95,259,964	2,978	2,915	(63)	-2.1%
Remaining DRGs				2,706,562	2,781,569	3.9	3.8	20,090,747,046	7,173	7,223	50	0.7%
Total DRGs				4,664,578	4,753,338	2.9	2.8	23,357,679,789	4,868	4,914	46	0.9%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 DRGs ranked by highest number of separations, for Round 17. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

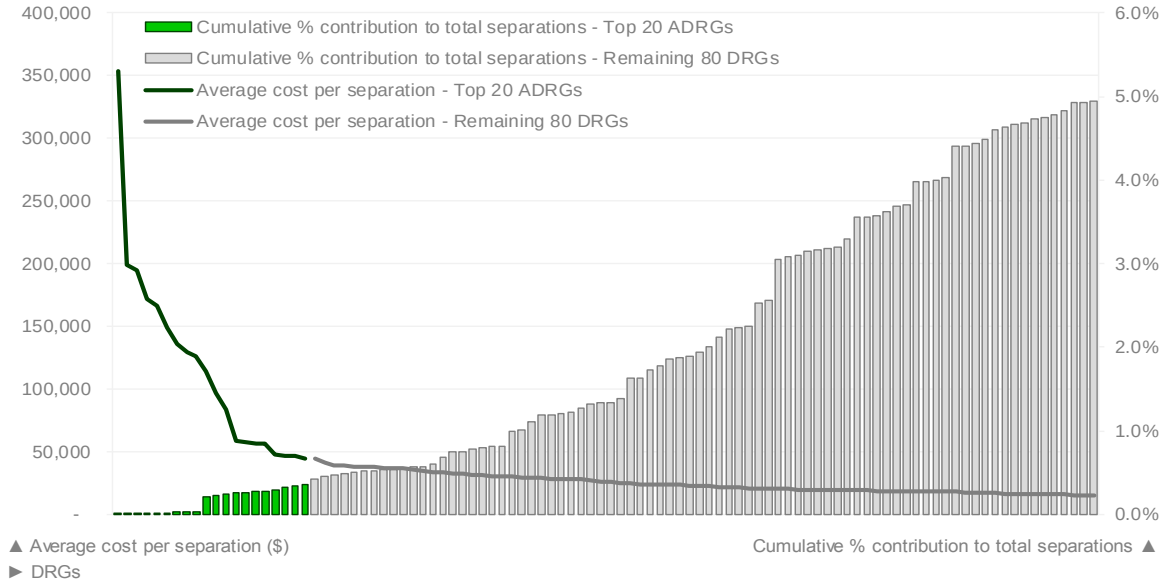
3.11.3 What are the top 20 adjacent DRGs with the highest average cost per separation?

‘Adjacent DRGs’ (ADRGs) are a grouping of one or more DRGs defined by the same diagnosis or procedure code list. Adjacent DRGs (DRGs) re-aggregate the DRGs that have been split on the basis of Patient Care Complexity Level (PCCL), malignancy, same day status, mental health status and mode of separation (that is, the last split in the DRG hierarchy). The ADRG number is the first three characters of the DRG number. Taken together, the top 20 highest cost adjacent DRGs accounted for $1.664 billion, which represents 7.1% of the total reported admitted acute patient cost and 0.4% of total separations.

Insertion of VAD (A10) was the adjacent DRG with the highest average cost per separation (Table 35). This adjacent DRG is the same as the DRG itself (A10Z) as there is no split on the basis of any of the factors listed above. This was also the adjacent DRG that had increased the most in average cost between Round 16 and Round 17 (by 17.9% or an average of $53,493 per separation).

Figure 7 shows the top 100 ADRGs ranked by highest average cost (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 ADRGs are shown in green. Similar to the profile of DRGs, very high cost ADRGs represent a small proportion of overall separations.

Figure 7: Top 100 ADRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each adjacent DRG on the left hand side and the cumulative contribution of each adjacent DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 35: Top 20 adjacent DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	Adjacent DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	A10	Insertion of Ventricular Assist Devises	48	38	51.3	49.6	13,419,445	299,650	353,143	53,493	17.9%
2	2	P61	Neonate, AdmWt <750 g	290	231	75.4	72.2	45,956,233	202,793	198,945	(3,849)	-1.9%
3	3	A05	Heart Transplant	58	72	40.2	40.1	13,993,283	187,536	194,351	6,816	3.6%
4	4	Y01	Ventilation for Burns and Severe Full Thickness Burns	142	116	33.2	34.6	19,990,876	150,676	172,335	21,659	14.4%
5	6	A40	ECMO	196	193	24.7	28.3	32,160,792	142,068	166,636	24,569	17.3%
6	5	P62	Neonate, AdmWt 750-999 g	495	481	60.2	61.6	71,890,617	144,804	149,461	4,656	3.2%
7	7	A03	Lung or Heart/Lung Transplant	136	153	28.8	30.5	20,734,503	132,260	135,520	3,259	2.5%
8	8	A01	Liver Transplant	180	237	26.5	26.6	30,690,068	123,779	129,494	5,715	4.6%
9	10	P02	Cardiothoracic/Vascular Procedures for Neonates	156	158	26.2	28.3	19,992,931	112,987	126,538	13,551	12.0%
10	9	A06	Tracheostomy and/or Ventilation	8,574	8,676	27.5	27.6	992,271,721	114,249	114,370	121	0.1%
11	11	P03	Neonate, AdmWt 1000-1499 g W Significant OR Procedure	776	746	47.0	48.4	71,958,834	94,270	96,460	2,190	2.3%
12	12	A07	Allogeneic Bone Marrow Transplant	509	542	29.5	30.0	45,409,218	87,338	83,781	(3,557)	-4.1%
13	13	W01	Ventilation or Canial Procedures for Multiple Significant Trauma	475	499	19.2	18.3	29,587,326	59,832	59,293	(539)	-0.9%
14	16	P04	Neonate, AdmWt 1500-1999 g W Significant OR Procedure	351	369	31.3	32.3	21,296,083	55,069	57,713	2,644	4.8%
15	14	F03	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation	560	580	17.3	16.9	33,149,765	57,868	57,155	(713)	-1.2%
16	15	P05	Neonate, AdmWt 2000-2499 g W Significant OR Procedure	252	295	25.5	26.1	16,566,147	57,497	56,156	(1,340)	-2.3%
17	18	P06	Neonate, AdmWt >=2500g W Significant OR Procedures	967	977	18.8	18.5	47,181,951	47,711	48,293	582	1.2%
18	19	F05	Coronary Bypass W Invasive Cardiac Investigation	1,583	1,521	16.2	15.7	71,945,482	47,153	47,301	149	0.3%
19	17	I06	Spinal Fusion W Deformity	424	403	8.5	7.9	18,759,328	50,012	46,549	(3,463)	-6.9%
20	21	F07	Other Cardiothoracic/Vascular Procedures W CPB Pump	943	1,044	10.0	10.1	46,813,027	42,166	44,840	2,674	6.3%
Remaining DRGs				4,647,463	4,736,007	2.8	2.7	21,693,912,160	4,534	4,581	47	1.0%
Total DRGs				4,664,578	4,753,338	2.9	2.8	23,357,679,789	4,868	4,914	46	0.9%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 adjacent DRGs ranked by highest average cost per separations, for Round 17. An adjacent DRG is a re-aggregation of DRGs to the last split in the DRG hierarchy and is represented by the first three characters of the DRG code. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.12 Top Medical DRGs

The AR-DRG classification is categorised into 'medical', 'surgical' and 'other' partitions based on clinical factors. The middle two characters of the DRG identify the partition, where 01 – 39 are surgical DRGs; 40 – 59 are other non-surgical procedural DRGs (for example, endoscopy); and 60 – 99 are medical DRGs. Table 36 shows the total and relative proportion of separations and costs in each of these categories.

Table 36: Total and relative proportion of separations and costs for the medical, surgical and 'other' DRG categories, Round 17

	Separations		Cost	
DRG category	Number	% of total	Total cost	% of total
Medical	3,493,182	73.5%	12,148,342,432	52.0%
Surgical	954,877	20.1%	9,940,227,510	42.6%
Other	305,279	6.4%	1,269,109,847	5.4%
Total	4,753,338	100.0%	23,357,679,789	100.0%

3.12.1 What are the top 20 medical DRGs ranked by highest average cost per separation?

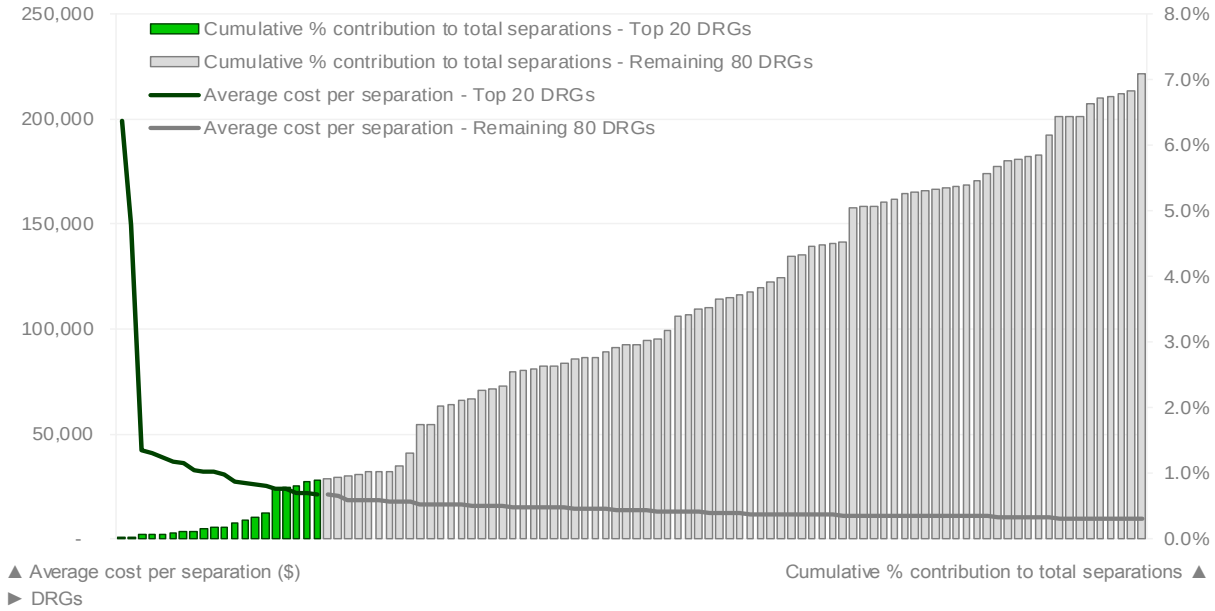
In total, the medical DRGs accounted for $12.148 billion which represents 52.0% of the total reported admitted acute patient cost and 73.5% of total separations (Table 36). Taken together, the top 20 highest cost medical DRGs accounted for $0.925 billion which represents 7.6% of the total reported admitted acute patient cost for medical DRGs and 0.9% of total medical DRG separations.

The medical DRG with the highest average cost per separation in both Round 16 and Round 17 was P61Z (neonate admission with a weight less than 750 grams) at $198,945, which had a decrease of 1.9% from the Round 16 average cost of $202,793 (Table 37).

Eight of the top 20 medical DRGs related to neonate admissions (ranked 1, 2, 5, 6, 10, 13, 17 and 18) with four of these showing an increase in the average cost per separation and four (P61Z, P63Z, P65A, P65C) showing a decrease between Round 16 and Round 17. The largest proportional increase in the average cost per separation was for DRG E60A (cystic fibrosis with catastrophic or severe complication or comorbidity) which moved from rank 22 in Round 16 to rank 19 in Round 17. One of the top 20 DRGs also had a substantial decrease between Round 16 and Round 17 - B60A (acute paraplegia/quadriplegia with or without operating room procedures with catastrophic complication or comorbidity), moving from $53,857 to $40,797 (24.2% decrease) although it maintained a similar rank in the top 20.

Figure 8 shows the top 100 medical DRGs ranked by highest average cost (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 DRGs are shown in green. This figure shows that there are two Medical DRGs (P61Z and P62Z) with a very high average cost. The top 100 medical DRGs represent approximately 7% of total separations with a medical DRG.

Figure 8: Top 100 Medical DRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each medical DRG on the left hand side and the cumulative contribution of each medical DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 37: Top 20 medical DRGs ranked by highest average cost per separation, Round 16 and Round 17

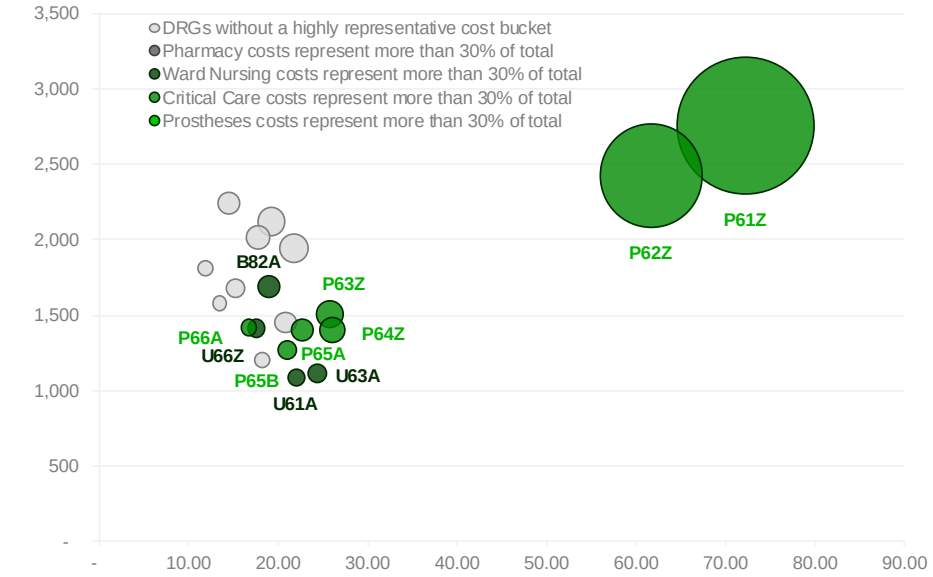
Round 17 Rank	Round 16 Rank	DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	P61Z	NEONATE, ADMISSION WT <750 G	290	231	75.4	72.2	45,956,233	202,793	198,945	(3,849)	-1.9%
2	2	P62Z	NEONATE, ADMISSION WT 750-999G	495	481	60.2	61.6	71,890,617	144,804	149,461	4,656	3.2%
3	4	R60A	ACUTE LEUKAEMIA + CCC	1,347	1,542	22.8	21.8	65,136,282	44,823	42,241	(2,581)	-5.8%
4	3	B60A	ACUTE PARA/QUAD+/-OR PR +CCC	84	81	29.0	19.3	3,304,542	53,857	40,797	(13,060)	-24.2%
5	5	P63Z	NEO,ADMWT 1000-1249G-SIG OR PR	378	309	26.1	25.7	11,954,146	38,901	38,687	(214)	-0.6%
6	7	P64Z	NEO,ADMWT 1250-1499G-SIG OR PR	772	771	26.0	26.2	28,317,293	35,898	36,728	830	2.3%
7	6	S65A	HIV-RELATED DISEASES +CCC	247	254	19.3	17.8	9,089,026	36,676	35,784	(892)	-2.4%
8	11	B61A	SPINAL CORD COND+/-OR PR +CSCC	514	534	14.9	14.5	17,396,850	30,370	32,578	2,209	7.3%
9	9	B82A	CHR UNSP PARA/QUAD+/-OR PR+CCC	1,057	1,201	19.9	19.0	38,663,115	32,402	32,192	(209)	-0.6%
10	8	P65A	NEO,ADMWT 1500-1999G-SG OR+MMP	349	339	24.2	22.8	10,850,086	33,433	32,006	(1,427)	-4.3%
11	10	F61A	INFECTIVE ENDOCARDITIS +CCC	375	408	22.4	20.9	12,377,531	32,128	30,337	(1,791)	-5.6%
12	13	U63A	MJR AFFECT DSRD A>69/+CSCC	2,381	2,573	25.5	24.4	69,930,022	27,175	27,178	3	0.0%
13	14	P65B	NEO,ADMWT 1500-1999G-SG OR+MJP	1,001	979	20.1	21.1	26,266,612	26,548	26,830	282	1.1%
14	12	R61A	LYMPHMA &N-ACUTE LEUKAEMIA+CCC	1,671	1,827	16.0	15.3	46,803,757	27,317	25,618	(1,699)	-6.2%
15	15	U66Z	EATING & OBSESSV-COMPULSV DSRD	1,967	2,223	17.8	17.6	55,421,055	24,244	24,931	687	2.8%
16	17	U61A	SCHIZOPHRENIA DISORDERS+MHLS	12,437	13,004	22.3	22.1	311,954,613	22,492	23,989	1,497	6.7%
17	16	P66A	NEO,ADMWT 2000-2499G-SG OR+MMP	391	420	16.2	16.7	9,949,966	22,658	23,690	1,033	4.6%
18	18	P65C	NEO,ADMWT 1500-1999G-SG OR+OTP	1,240	1,287	18.6	18.2	28,246,456	22,410	21,948	(463)	-2.1%
19	22	E60A	CYSTIC FIBROSIS +CSCC	1,661	1,807	11.9	12.0	39,092,429	19,062	21,634	2,572	13.5%
20	19	T64A	OTH INFECTOUS&PARSTIC DIS +CCC	776	1,061	14.0	13.5	22,610,818	22,168	21,311	(857)	-3.9%
Remaining medical DRGs				3,365,337	3,461,850	2.5	2.4	11,223,130,980	3,239	3,242	3	0.1%
Total medical DRGs				3,394,770	3,493,182	2.7	2.6	12,148,342,432	3,467	3,478	10	0.3%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 medical DRGs ranked by highest average cost per separations, for Round 17. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.12.2 Which cost buckets are utilised most for admitted acute separations with medical DRGs?

All of the top 20 medical DRGs reported the highest proportion of average cost in either critical care or ward nursing (Table 38 and Figure 9). All of the top 20 DRGs reported greater than 19% of average cost in their largest cost bucket, and some reported almost 70% of costs in a single cost bucket. The top two DRGs, P61Z and P62Z (neonate admission with a weight less than 750 grams and neonate admission with a weight between 750 and 999 grams) both reported 69.1% of costs in critical care. The second most utilised cost bucket for these DRGs was the oncost bucket at 8.2% of total average cost.

Figure 9: Top 20 Medical DRGs by average cost - Bubble size represents average cost



Note: Colour has been used to indicate where a cost bucket is on average, greater than 30% of total encounter cost.

▲ Average cost per day ($) ► Average length of stay (days)

Table 38: Top 20 medical DRGs by highest average cost per separation by cost bucket. Round 17

DRG	Description	Average cost	ALOS	Average cost per day	Ward Medical	Ward Nursing	Non-Clinical	Path	Imag	Allied Health	Phar	Critical	OR	ED	Ward Supp	SPS	Pros	On Costs	Hotel	Deprec
P61Z	NEONATE, ADMISSION WT <750 G	198,945	72.2	2,755	11,173	5,645	1,943	4,187	3,070	1,813	2,859	137,518	351	83	3,285	-	36	16,252	4,740	5,991
P62Z	NEONATE, ADMISSION WT 750-999G	149,461	61.6	2,425	8,438	3,667	1,729	2,765	2,737	1,327	2,073	103,307	247	87	2,284	0	24	12,305	3,799	4,671
R60A	ACUTE LEUKAEMIA + CCC	42,241	21.8	1,941	4,186	10,788	2,475	3,119	1,122	1,333	9,170	1,281	527	540	2,803	94	55	2,558	1,222	967
B60A	ACUTE PARA/QUAD+/-OR PR +CCC	40,797	19.3	2,117	4,007	11,650	2,609	931	1,899	2,985	1,245	2,942	2,519	740	2,684	99	1,350	2,948	1,127	1,061
P63Z	NEO,ADMWT 1000-1249G-SIG OR PR	38,687	25.7	1,504	4,155	4,583	1,195	575	502	404	600	19,878	24	101	1,588	0	6	3,140	787	1,148
P64Z	NEO,ADMWT 1250-1499G-SIG OR PR	36,728	26.2	1,404	5,431	6,284	1,376	481	415	424	534	15,034	17	20	1,901	0	3	3,070	786	952
S65A	HIV-RELATED DISEASES +CCC	35,784	17.8	2,014	5,517	6,925	2,336	2,890	947	1,631	5,048	1,572	459	1,012	2,598	90	103	2,567	1,293	796
B61A	SPINAL CORD COND+/-OR PR +CSCC	32,578	14.5	2,239	3,078	7,418	1,872	703	1,026	2,415	471	2,621	3,319	795	2,403	30	2,126	2,186	1,109	1,007
B82A	CHR UNSP PARA/QUAD+/-OR PR+CCC	32,192	19.0	1,692	3,796	9,699	2,245	856	709	1,772	1,106	2,266	1,798	869	2,539	108	470	2,114	1,036	810
P65A	NEO,ADMWT 1500-1999G-SG OR+MMP	32,006	22.8	1,405	4,543	4,390	1,132	701	471	464	510	14,172	45	16	1,452	0	4	2,764	578	763
F61A	INFECTIVE ENDOCARDITIS +CCC	30,337	20.9	1,452	4,932	7,490	2,036	1,181	1,212	1,112	1,793	3,076	307	915	2,294	121	75	2,067	994	731
U63A	MJR AFFECT DSRD A>69/+CSCC	27,178	24.4	1,114	4,328	9,547	2,417	321	227	2,035	559	410	695	425	2,202	77	23	2,120	1,104	686
P65B	NEO,ADMWT 1500-1999G-SG OR+MJP	26,830	21.1	1,271	4,342	5,545	1,176	407	294	336	332	9,431	14	14	1,547	0	2	2,152	575	663
R61A	LYMPHMA &N-ACUTE LEUKAEMIA+CCC	25,618	15.3	1,679	2,680	6,509	1,672	1,729	949	1,018	4,333	961	175	620	1,805	68	25	1,675	794	604
U66Z	EATING & OBSESSV-COMPULSV DSRD	24,931	17.6	1,413	4,395	9,045	2,167	384	85	2,197	398	255	39	423	1,970	5	19	1,979	793	778
U61A	SCHIZOPHRENIA DISORDERS+MHLS	23,989	22.1	1,086	4,645	8,354	2,331	326	64	1,237	684	464	104	414	2,067	25	3	1,776	826	668
P66A	NEO,ADMWT 2000-2499G-SG OR+MMP	23,690	16.7	1,415	4,025	4,159	1,038	604	376	581	308	8,047	42	28	1,304	0	2	2,206	430	539
P65C	NEO,ADMWT 1500-1999G-SG OR+OTP	21,948	18.2	1,208	3,919	5,629	1,230	289	117	251	242	5,704	16	11	1,675	0	1	1,780	500	583
E60A	CYSTIC FIBROSIS +CSCC	21,634	12.0	1,807	3,490	4,874	1,320	438	389	2,094	3,226	74	236	251	1,771	893	22	1,514	624	417
T64A	OTH INFECTOUS&PARSTIC DIS +CCC	21,311	13.5	1,580	2,815	5,207	1,408	898	734	762	2,679	1,377	203	999	1,701	47	18	1,426	589	448
Remaining medical DRGs		3,242	2.4	1,345	456	833	246	87.7	89.8	122	163	111	70	370	286	13	6	208	98	83
Total medical DRGs		3,478	2.6	1,348	491	895	262	93	93	133	175	151	72	370	302	13	7	226	106	90

This table reports the average cost per separation in total and by cost bucket, for the top 20 medical DRGs ranked by highest average cost per separations, for Round 17. It also reports the average length of stay (ALOS) and average cost per separation per day. Where Round 16 results are reported in the discussion, these include cost-modelled sites. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

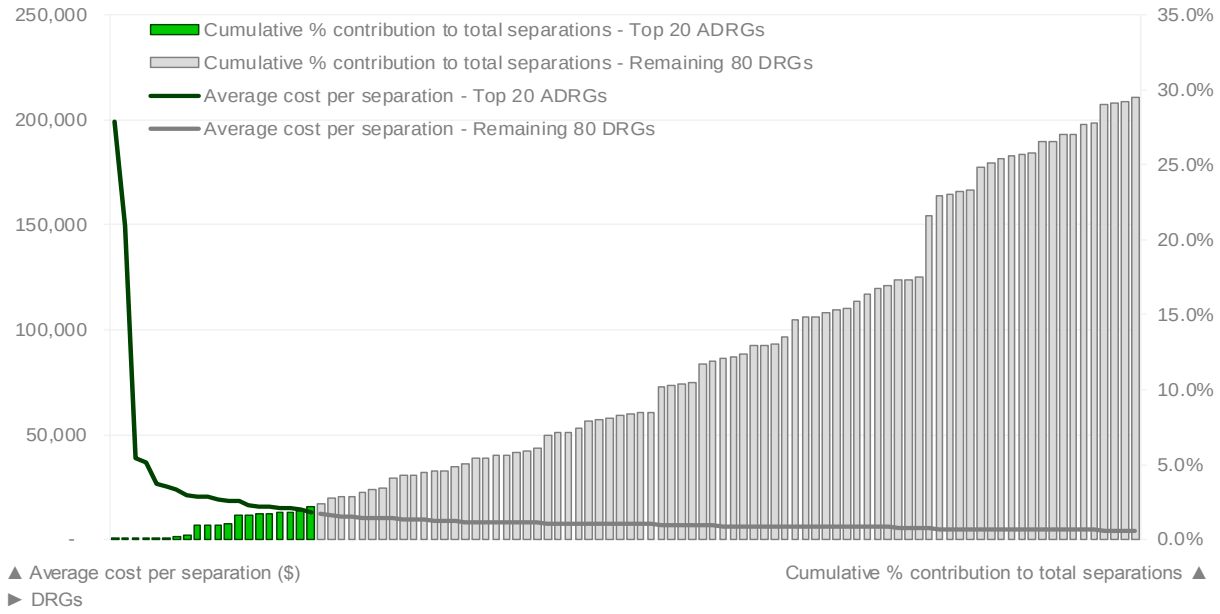
3.12.3 What are the top 20 adjacent medical DRGs with the highest average cost per separation?

'Adjacent DRGs' (ADRGs) are a grouping of one or more DRGs defined by the same diagnosis or procedure code list. Adjacent DRGs (DRGs) re-aggregate the DRGs that have been split on the basis of Patient Care Complexity Level (PCCL), malignancy, same day status, mental health status and mode of separation (that is, the last split in the DRG hierarchy). The ADRG number is the first three characters of the DRG number. Taken together the top 20 highest cost adjacent medical DRGs accounted for $1.514 billion which represents 12.5% of the total reported admitted acute patient cost for medical DRGs and 2.2% of total separations that have been assigned to a medical DRG.

From the top 20 medical DRGs, the neonate admissions that have no splits (P61 - P64) remain in the top 20 when looking at adjacent medical DRGs, as does P65 (which has four splits A-D) whereas P66 (neonates weighing 2000 to 2499 grams) disappears out of the top 20 when looking at adjacent medical DRGs (Table 39). The range in the average cost per separation was from $198,945 (rank 1) to $13,132 (rank 20) which is a difference of $185,813.

Figure 10 shows the top 100 medical ADRGs ranked by highest average cost by ADRG (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 ADRGs are shown in green. This figure shows a very steep fall in average costs for the top 20. The top 100 medical ADRGs represent approximately 30% of total separations with a medical ADRG.

Figure 10: Top 100 Medical ADRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each medical adjacent DRG on the left hand side and the cumulative contribution of each medical adjacent DRG to total separations on the right hand side. The Top 20 are highlighted in green

Table 39: Top 20 adjacent medical DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	Adjacent DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	P61	Neonate, AdmWt <750 g	290	231	75.4	72.2	45,956,233	202,793	198,945	(3,849)	-1.9%
2	2	P62	Neonate, AdmWt 750-999 g	495	481	60.2	61.6	71,890,617	144,804	149,461	4,656	3.2%
3	3	P63	Neonate, AdmWt 1000-1249 g W/O Significant OR Procedure	378	309	26.1	25.7	11,954,146	38,901	38,687	(214)	-0.6%
4	4	P64	Neonate, AdmWt 1250-1499 g W/O Significant OR Procedure	772	771	26.0	26.2	28,317,293	35,898	36,728	830	2.3%
5	5	B60	Acute Paraplegia and Quadriplegia W or W/O OR Procedures	188	198	18.8	12.0	5,202,975	34,362	26,278	(8,084)	-23.5%
6	6	U66	Eating and Obsessive-Compulsive Disorders	1,967	2,223	17.8	17.6	55,421,055	24,244	24,931	687	2.8%
7	7	P65	Neonate, AdmWt 1500-1999g W/O Significant OR Procedures	3,715	3,698	18.6	18.5	87,467,857	23,130	23,653	523	2.3%
8	9	S65	Human Immunodeficiency Virus	797	767	10.7	10.8	16,197,818	20,341	21,118	778	3.8%
9	10	U61	Schizophrenia Disorders	22,281	23,084	18.7	18.7	475,208,437	18,977	20,586	1,609	8.5%
10	11	B61	Spinal Cord Conditions W or W/O OR Procedures	1,219	1,267	9.0	8.7	25,530,904	18,851	20,151	1,300	6.9%
11	8	F61	Infective Endocarditis	877	1,021	15.7	14.7	19,269,174	20,851	18,873	(1,978)	-9.5%
12	15	E60	Cystic Fibrosis	3,359	3,367	10.4	10.6	63,048,631	16,099	18,725	2,626	16.3%
13	12	U63	Major Affective Disorders	16,689	17,930	15.2	15.0	324,135,685	17,072	18,078	1,005	5.9%
14	17	U68	Childhood Mental Disorders	644	656	7.4	8.4	10,603,345	14,667	16,164	1,496	10.2%
15	14	B82	Chronic and Unspecified Paraplegia/Quadriplegia W or W/O OR Procedures	4,104	4,452	10.3	9.3	69,866,756	16,322	15,693	(628)	-3.8%
16	61	E76	Respiratory Tuberculosis	998	490	5.7	12.5	7,534,540	6,401	15,377	8,976	140.2%
17	16	W61	Multiple Trauma W/O OR Procedures	1,319	1,429	9.3	8.6	21,737,472	15,238	15,212	(27)	-0.2%
18	13	K61	Severe Nutritional Disturbance	653	703	11.8	10.1	10,441,942	16,552	14,853	(1,698)	-10.3%
19	19	U62	Paranoia and Acute Psychotic Disorders	4,744	4,815	12.1	12.0	69,015,553	13,757	14,333	577	4.2%
20	20	B63	Dementia and Other Crinic Disturbances of Cerebral Function	7,249	7,256	12.0	11.7	95,286,804	12,874	13,132	259	2.0%
Remaining medical DRGs				3,322,032	3,418,034	2.4	2.3	10,634,255,195	3,120	3,111	(9)	-0.3%
Total medical DRGs				3,394,770	3,493,182	2.7	2.6	12,148,342,432	3,467	3,478	10	0.3%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 adjacent medical DRGs ranked by highest average cost per separations, for Round 17. An adjacent DRG is a re-aggregation of DRGs to the last split in the DRG hierarchy and is represented by the first three characters of the DRG code. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.13 Top Surgical DRGs

The AR-DRG classification is categorised into 'medical', 'surgical' and 'other' partitions based on clinical factors. The middle two characters of the DRG identify the partition, where 01 – 39 are surgical DRGs; 40 – 59 are other non-surgical procedural DRGs (eg. endoscopy); and 60 – 99 are medical DRGs. Table 36 shows the total and relative proportion of separations and costs in each of these categories.

3.13.1 What are the top 20 surgical DRGs with the highest average cost per separation?

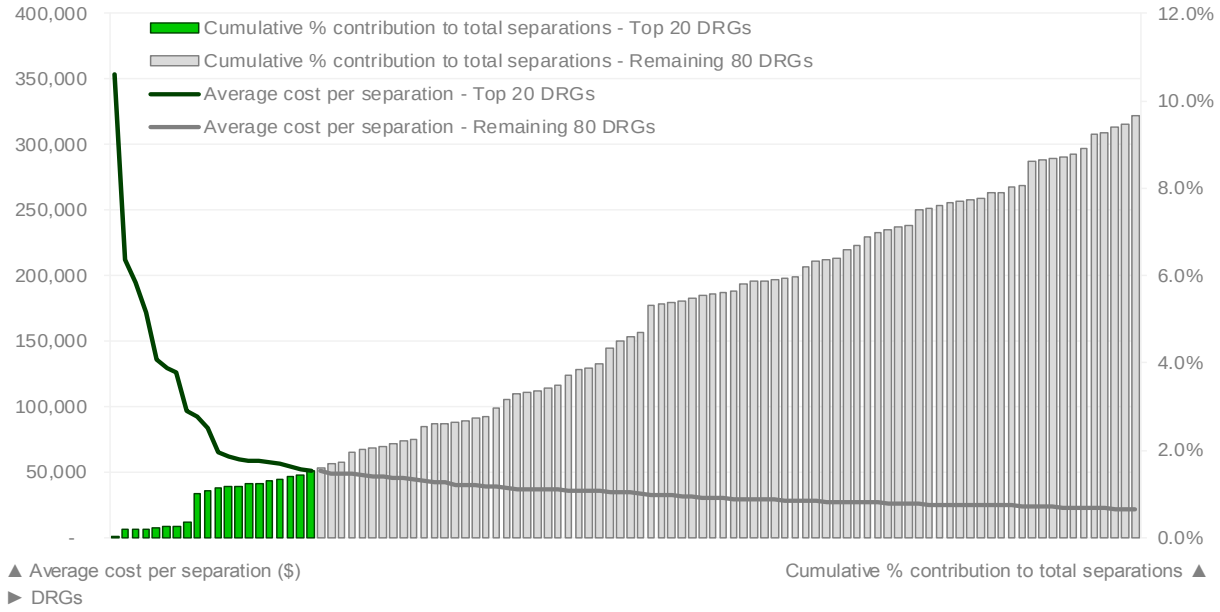
In total, the surgical DRGs accounted for $9.940 billion (42.6% of the total reported admitted acute patient cost) but only 20.1% of total separations (Table 36). Taken together, the top 20 highest cost surgical DRGs accounted for $1.462 billion which represents 14.7% of the total reported admitted acute patient cost for surgical DRGs and 1.5% of total surgical DRG separations.

The surgical DRG A10Z (insertion of ventricular assistance device (VAD)) had the highest average cost ($353,143) in Round 17 which was an increase of 17.9% on the Round 16 cost, despite a slight decrease in average length of stay (49.6 days in Round 17 compared with 51.3 days in Round 16) (Table 40).

As in Round 16, five of the top 20 surgical DRGs related to neonate admissions (ranked 7, 8, 11, 16 and 17). Comparing across the rounds, there were no DRGs from the Round 16 top 20 that were not also in the Round 17 top 20, although many from 11th to 20th place have shifted positions. The most substantial increase in average cost between Round 16 and Round 17 was in A10Z as highlighted above. The most substantial decrease was in A11A (insertion of implantable spinal infusion device with catastrophic complication or comorbidity) which reduced from $74,804 to $59,705 (20.2% decrease), which is largely explained by the substantial decrease in average length of stay from 29.3 days to 12.3 days.

Figure 11 shows the top 100 surgical DRGs ranked by highest average cost by DRG (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 DRGs are shown in green. All of the top 20 surgical DRGs have an average cost above $50,000. The top 100 DRGs represent approximately 10% of total separations with a surgical DRG.

Figure 11: Top 100 Surgical DRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each surgical DRG on the left hand side and the cumulative contribution of each surgical DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 40: Top 20 surgical DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	A10Z	INSERTION OF VAD	48	38	51.3	49.6	13,419,445	299,650	353,143	53,493	17.9%
2	2	A06A	TRACHEOSTOMY W VENT>95 +CCC	1,824	1,783	44.8	45.6	378,067,680	213,478	212,040	(1,438)	-0.7%
3	3	A05Z	HEART TRANSPLANT	58	72	40.2	40.1	13,993,283	187,536	194,351	6,816	3.6%
4	4	Y01Z	VENT BURN&SEV FULL THICK BURN	142	116	33.2	34.6	19,990,876	150,676	172,335	21,659	14.4%
5	5	A03Z	LUNG OR HEART/LUNG TRANSPLANT	136	153	28.8	30.5	20,734,503	132,260	135,520	3,259	2.5%
6	6	A01Z	LIVER TRANSPLANT	180	237	26.5	26.6	30,690,068	123,779	129,494	5,715	4.6%
7	7	P02Z	NEO,CARDIOTHORACIC/VASCULAR PR	156	158	26.2	28.3	19,992,931	112,987	126,538	13,551	12.0%
8	8	P03Z	NEO,ADMWT 1000-1499G+SIG OR PR	776	746	47.0	48.4	71,958,834	94,270	96,460	2,190	2.3%
9	9	A06B	TRCH&VNT-CCC OR TRCH/VNT+CCC	6,246	6,454	23.6	23.6	595,012,276	90,849	92,193	1,343	1.5%
10	10	A07Z	ALLOG BONE MARROW TRANSPLANT	509	542	29.5	30.0	45,409,218	87,338	83,781	(3,557)	-4.1%
11	12	P06A	NEO,ADMWT >2499G+SIG OR PR+MMP	529	561	25.4	24.5	36,703,649	65,877	65,425	(451)	-0.7%
12	13	F03A	CRDC VALV PR+PMP+INV INVES+CCC	415	445	19.6	19.4	27,683,911	64,039	62,211	(1,828)	-2.9%
13	11	A11A	INS IMPLNT SP INFUS DEV+CCC	18	9	29.3	12.3	537,344	74,804	59,705	(15,099)	-20.2%
14	14	W01Z	VENTILN/CRANIA MULT SIG TRAUMA	475	499	19.2	18.3	29,587,326	59,832	59,293	(539)	-0.9%
15	19	I01A	BL/MLT MJ JT PR LWR EXT+RV/CCC	177	191	22.0	24.0	11,242,255	53,430	58,860	5,430	10.2%
16	16	P04Z	NEO,ADMWT 1500-1999G+SIG OR PR	351	369	31.3	32.3	21,296,083	55,069	57,713	2,644	4.8%
17	15	P05Z	NEO,ADMWT 2000-2499G+SIG OR PR	252	295	25.5	26.1	16,566,147	57,497	56,156	(1,340)	-2.3%
18	18	I02A	MCRVAS TT/SKIN GRAFT+CSCC-HAND	723	844	27.8	25.7	45,587,318	54,116	54,013	(102)	-0.2%
19	17	A06C	VENTILATION>95 - CCC	205	207	12.8	12.4	10,824,191	54,592	52,291	(2,301)	-4.2%
20	20	F05A	CRNRY BYPSS+INV INVES+REOP/CCC	1,028	1,037	17.9	17.1	53,013,363	51,266	51,122	(144)	-0.3%
Remaining surgical DRGs				**941,801**	**940,121**	**3.4**	**3.4**	**8,477,916,810**	**8,807**	**9,018**	**211**	**2.4%**
Total surgical DRGs				956,049	954,877	3.8	3.7	9,940,227,510	10,157	10,410	253	2.5%

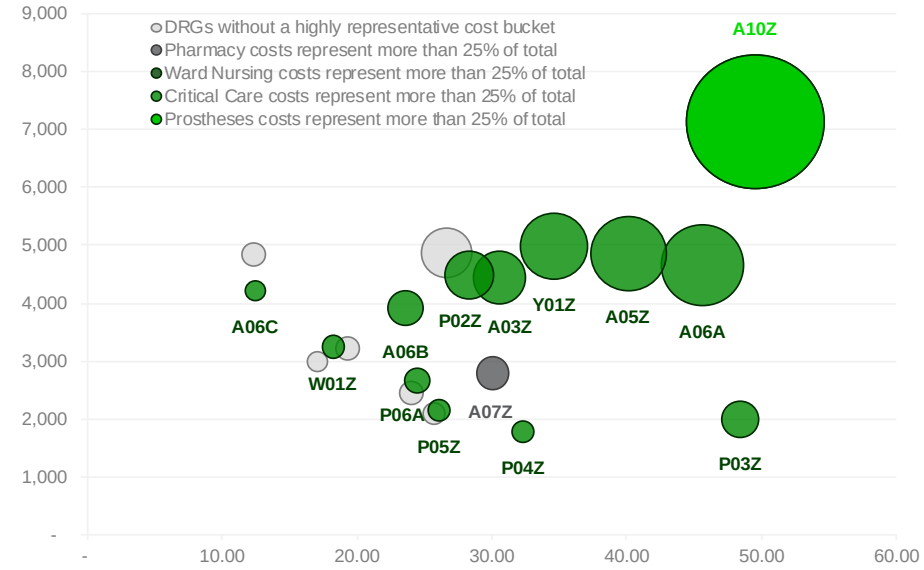
This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 surgical DRGs ranked by highest average cost per separations, for Round 17. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.13.2 Which cost buckets are utilised most for admitted acute separations with surgical DRGs?

All of the top 20 surgical DRGs reported the highest proportion of average cost in critical care, with the exception of A07Z (allogeneic bone marrow transplant), I01A (bilateral/multiple major joint procedure of lower extremity with revision or with catastrophic complication or comorbidity), and I02A (microvascular tissue transfer or (skin graft with catastrophic or severe complication or comorbidity), excluding hand) (Table 41 and Figure 12). Critical care costs accounted for between 3.4% and 65.1% of total average cost.

The majority of the top 20 DRGs also reported operating rooms as the second largest cost bucket, which would be expected for DRGs grouped into the surgical category. However the DRG with the highest average cost, A10Z (insertion of VAD), reported the second most utilised cost bucket as prosthesis at 26.3%.

Figure 12: Top 20 Surgical DRGs by average cost - Bubble size represents average cost



Note: Colour has been used to indicate where a cost bucket is on average, greater than 25% of total encounter cost.

▲ Average cost per day ($) ► Average length of stay (days)

Table 41: Top 20 surgical DRGs by highest average cost per separation by cost bucket. Round 17

DRG	Description	Average cost	ALOS	Average cost per day	Ward Medical	Ward Nursing	Non-Clinical	Path	Imag	Allied Health	Pharm	Critical	OR	ED	Ward Supp	SPS	Pros	On Costs	Hotel	Deprec
A10Z	INSERTION OF VAD	353,143	49.6	7,127	18,574	15,282	5,120	10,530	3,495	8,760	15,692	126,316	18,668	291	12,079	524	92,891	14,586	5,741	4,597
A06A	TRACHEOSTOMY W VENT>95 +CCC	212,040	45.6	4,651	8,848	11,633	3,331	6,502	4,741	7,152	4,263	122,349	9,791	1,116	4,074	389	2,214	15,394	4,509	5,733
A05Z	HEART TRANSPLANT	194,351	40.1	4,845	14,146	13,245	4,642	7,860	2,623	5,594	17,381	62,336	33,620	418	9,211	724	4,757	11,169	3,521	3,104
Y01Z	VENT BURN&SEV FULL THICK BURN	172,335	34.6	4,979	6,954	16,251	3,411	6,149	1,696	13,083	4,564	61,261	24,481	932	10,941	49	1,472	11,943	4,181	4,966
A03Z	LUNG OR HEART/LUNG TRANSPLANT	135,520	30.5	4,438	9,156	10,545	3,149	6,458	2,373	4,958	18,464	40,660	18,985	382	5,553	81	1,322	7,492	3,894	2,047
A01Z	LIVER TRANSPLANT	129,494	26.6	4,861	19,749	16,612	5,999	7,804	3,009	3,959	10,254	19,820	17,076	601	8,337	36	4,034	7,463	1,760	2,979
P02Z	NEO,CARDIOTHORACIC/ VASCULAR PR	126,538	28.3	4,473	11,949	7,675	3,872	6,880	2,960	3,788	1,679	48,889	15,674	111	5,325	758	1,221	9,425	1,859	4,470
P03Z	NEO,ADMWT 1000-1499G+SIG OR PR	96,460	48.4	1,993	7,245	4,182	1,415	1,728	1,400	868	1,476	62,802	210	51	1,890	0	18	7,845	2,393	2,936
A06B	TRCH&VNT-CCC OR TRCH/VNT+CCC	92,193	23.6	3,907	5,179	5,817	1,953	3,908	2,576	3,007	2,424	44,123	6,636	997	2,466	318	1,752	6,508	1,978	2,552
A07Z	ALLOG BONE MARROW TRANSPLANT	83,781	30.0	2,789	7,244	18,748	3,704	4,991	1,450	3,198	25,226	5,851	625	81	5,073	23	89	4,218	1,676	1,582
P06A	NEO,ADMWT >2499G+SIG OR PR+MMP	65,425	24.5	2,672	7,021	5,045	2,098	2,639	1,661	1,482	1,674	29,431	3,166	95	2,518	-	264	5,379	1,089	1,862
F03A	CRDC VALV PR+PMP+INV INVES+CCC	62,211	19.4	3,214	4,977	5,461	1,826	2,218	1,261	1,730	980	13,040	9,654	410	3,361	3,843	6,576	3,780	1,473	1,622
A11A	INS IMPLNT SP INFUS DEV+CCC	59,705	12.3	4,841	6,979	6,925	1,598	1,130	1,114	2,949	1,083	11,684	6,276	36	5,785	61	7,500	4,012	1,377	1,197
W01Z	VENTILN/CRANIA MULT SIG TRAUMA	59,293	18.3	3,248	4,061	5,847	1,813	1,485	2,943	2,739	994	16,042	8,761	2,159	2,241	79	2,902	3,747	1,755	1,726
I01A	BL/MLT MJ JT PR LWR EXT+RV/CCC	58,860	24.0	2,450	5,413	9,343	2,300	1,529	820	2,103	1,775	2,027	10,122	344	3,526	49	13,628	2,884	1,810	1,187
P04Z	NEO,ADMWT 1500-1999G+SIG OR PR	57,713	32.3	1,786	5,262	3,158	1,224	1,395	1,121	670	1,081	34,299	525	31	1,502	0	38	4,612	1,127	1,669
P05Z	NEO,ADMWT 2000-2499G+SIG OR PR	56,156	26.1	2,153	5,733	4,423	1,635	1,761	1,141	1,281	1,216	27,518	1,754	48	1,985	87	93	4,437	1,113	1,930
I02A	MCRVAS TT/SKIN GRAFT+CSCC-HAND	54,013	25.7	2,099	5,474	10,102	2,943	1,180	1,231	1,845	1,760	1,932	13,931	757	3,616	132	2,581	3,436	1,753	1,339
A06C	VENTILATION>95 - CCC	52,291	12.4	4,205	2,993	2,536	1,040	2,222	1,254	1,440	956	28,521	2,140	932	1,258	150	448	3,649	1,124	1,629
F05A	CRNRY BYPSS+INV INVES+REOP/CCC	51,122	17.1	2,995	4,339	5,083	1,688	2,001	942	1,308	668	12,668	9,775	550	2,675	1,627	1,278	3,873	1,315	1,334
Remaining surgical DRGs		9,018	3.4	2,686	921	1,289	390	207	184	211	180	401	2,774	202	477	93	662	550	237	239
Total surgical DRGs		10,410	3.7	2,789	1,003	1,383	419	260	218	257	231	1,086	2,848	211	517	99	685	649	267	276

This table reports the average cost per separation in total and by cost bucket, for the top 20 medical DRGs ranked by highest average cost per separations, for Round 17. It also reports the average length of stay (ALOS) and average cost per separation per day. Where Round 16 results are reported in the discussion, these include cost-modelled sites. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

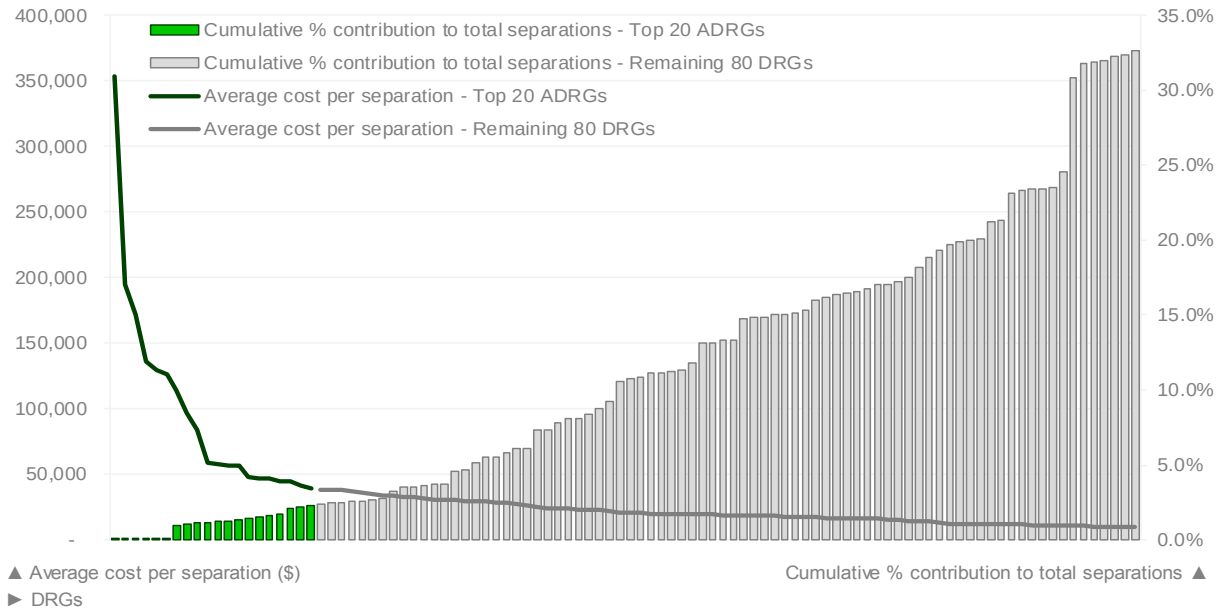
3.13.3 What are the top 20 adjacent surgical DRGs with the highest average cost per separation?

'Adjacent DRGs' (ADRGs) are a grouping of one or more DRGs defined by the same diagnosis or procedure code list. Adjacent DRGs (DRGs) re-aggregate the DRGs that have been split on the basis of Patient Care Complexity Level (PCCL), malignancy, same day status, mental health status and mode of separation (that is, the last split in the DRG hierarchy). The ADRG number is the first three characters of the DRG number. Taken together the top 20 highest cost adjacent surgical DRGs accounted for $1.750 billion which represents 17.6% of the total reported admitted acute patient cost for surgical DRGs and 2.3% of total separations that have been assigned to a surgical DRG.

The majority of the top 20 surgical DRGs remain in the top 20 when looking at adjacent DRGs. The adjacent surgical DRG for insertion of ventricular assistance device (VAD) (A10) had the highest average cost per admitted acute separation in Round 17 of $353,143 (Table 42). The range in the average cost per separation for adjacent surgical DRGs was from $353,143 (rank 1) to $38,757 (rank 20) which is a difference of $314,386.

Figure 13 shows the top 100 surgical ADRGs ranked by highest average cost by ADRG (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 DRGs are shown in green, and together represent 2.3% of total separations with a surgical DRG. The top 100 DRGs contributed approximately 33% of total separations with a surgical ADRG.

Figure 13: Top 100 Surgical ADRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each surgical adjacent DRG on the left hand side and the cumulative contribution of each surgical adjacent DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 42: Top 20 adjacent surgical DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	Adjacent DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	A10	Insertion of Ventricular Assist Devises	48	38	51.3	49.6	13,419,445	299,650	353,143	53,493	17.9%
2	2	A05	Heart Transplant	58	72	40.2	40.1	13,993,283	187,536	194,351	6,816	3.6%
3	3	Y01	Ventilation for Burns and Severe Full Thickness Burns	142	116	33.2	34.6	19,990,876	150,676	172,335	21,659	14.4%
4	4	A03	Lung or Heart/Lung Transplant	136	153	28.8	30.5	20,734,503	132,260	135,520	3,259	2.5%
5	5	A01	Liver Transplant	180	237	26.5	26.6	30,690,068	123,779	129,494	5,715	4.6%
6	7	P02	Cardiothoracic/Vascular Procedures for Neonates	156	158	26.2	28.3	19,992,931	112,987	126,538	13,551	12.0%
7	6	A06	Tracheostomy and/or Ventilation	8,574	8,676	27.5	27.6	992,271,721	114,249	114,370	121	0.1%
8	8	P03	Neonate, AdmWt 1000-1499 g W Significant OR Procedure	776	746	47.0	48.4	71,958,834	94,270	96,460	2,190	2.3%
9	9	A07	Allogeneic Bone Marrow Transplant	509	542	29.5	30.0	45,409,218	87,338	83,781	(3,557)	-4.1%
10	10	W01	Ventilation or Canial Procedures for Multiple Significant Trauma	475	499	19.2	18.3	29,587,326	59,832	59,293	(539)	-0.9%
11	13	P04	Neonate, AdmWt 1500-1999 g W Significant OR Procedure	351	369	31.3	32.3	21,296,083	55,069	57,713	2,644	4.8%
12	11	F03	Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation	560	580	17.3	16.9	33,149,765	57,868	57,155	(713)	-1.2%
13	12	P05	Neonate, AdmWt 2000-2499 g W Significant OR Procedure	252	295	25.5	26.1	16,566,147	57,497	56,156	(1,340)	-2.3%
14	15	P06	Neonate, AdmWt >=2500g W Significant OR Procedures	967	977	18.8	18.5	47,181,951	47,711	48,293	582	1.2%
15	16	F05	Coronary Bypass W Invasive Cardiac Investigation	1,583	1,521	16.2	15.7	71,945,482	47,153	47,301	149	0.3%
16	14	I06	Spinal Fusion W Deformity	424	403	8.5	7.9	18,759,328	50,012	46,549	(3,463)	-6.9%
17	18	F07	Other Cardiothoracic/Vascular Procedures W CPB Pump	943	1,044	10.0	10.1	46,813,027	42,166	44,840	2,674	6.3%
18	17	F04	Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Investigation	3,175	3,231	11.1	11.1	144,417,297	44,224	44,697	473	1.1%
19	19	A09	Renal Transplant	762	863	9.8	9.5	36,024,756	40,920	41,744	824	2.0%
20	22	I02	Microvascular Tissue Transfers or Skin Grafts, Excluding Hand	1,322	1,432	18.7	17.9	55,499,911	37,138	38,757	1,619	4.4%
Remaining surgical DRGs				934,656	932,925	3.3	3.3	8,190,525,559	8,572	8,779	208	2.4%
Total surgical DRGs				956,049	954,877	3.8	3.7	9,940,227,510	10,157	10,410	253	2.5%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 adjacent surgical DRGs ranked by highest average cost per separations, for Round 17. An adjacent DRG is a re-aggregation of DRGs to the last split in the DRG hierarchy and is represented by the first three characters of the DRG code. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.14 Top ‘Other’ DRGs

The AR-DRG classification is categorised into ‘medical’, ‘surgical’ and ‘other’ partitions based on clinical factors. The middle two characters of the DRG identify the partition, where 01 – 39 are surgical DRGs; 40 – 59 are other non-surgical procedural DRGs (eg. endoscopy); and 60 – 99 are medical DRGs. Table 36 shows the total and relative proportion of separations and costs in each of these categories.

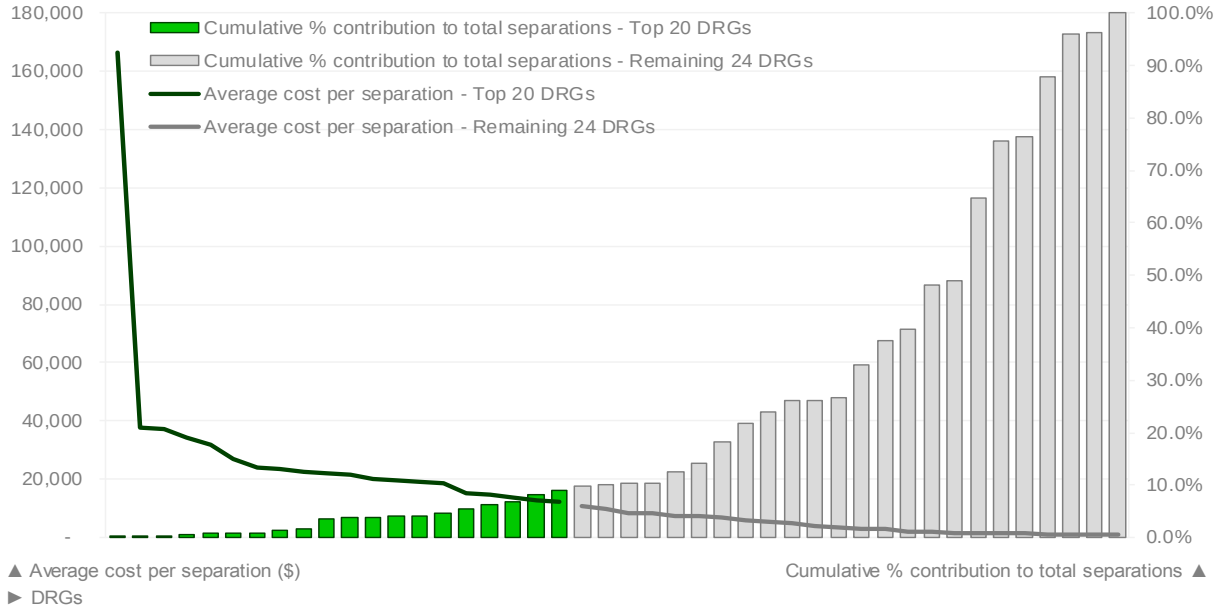
3.14.1 What are the top 20 ‘other’ DRGs with the highest average cost per separation?

In total, the ‘other’ DRGs account for $1.269 billion which represents 5.4% of the total reported admitted acute patient cost and 6.4% of total separations (Table 36).Taken together, the top 20 highest cost ‘other’ DRGs account for $0.545 billion which represents 42.9% of the total reported admitted acute patient cost for ‘other’ DRGs and 9.0% of total ‘other’ DRG separations.

The highest ranked other DRG was A40Z (extracorporeal membrane oxygenation (ECMO)) with an average cost per admitted acute separation of $166,636 compared to $142,068 in Round 16 (a 17.3% increase) (Table 43). There was little change in the number of separations for DRG A40Z (196 in Round 16 versus 193 in Round 17), however there was an increase in the average length of stay (from 24.7 days in Round 16 to 28.3 days in Round 17) which partly contributed to the increase in the average cost per separation. This DRG also reported the largest proportional increase in the average cost per separation. The largest proportional decrease in average cost per separation was in G46A (complex gastroscopy with catastrophic complication or comorbidity), which decreased from $20,669 in Round 16 to $18,539 in Round 17 (10.3% decrease). This has also resulted in a drop in its ranking from 12 to 15.

Figure 14 shows the 44 other DRGs ranked by highest average cost by DRG (shown on the left hand axis) and the cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 DRGs, shown in green, contribute approximately 9% of total 'other' separations, and all have an average cost per separation exceeding $12,300.

Figure 14: Top 44 Other DRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each 'other' DRG on the left hand side and the cumulative contribution of each 'other' DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 43: Top 20 'other' DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	A40Z	ECMO	196	193	24.7	28.3	32,160,792	142,068	166,636	24,569	17.3%
2	2	B42A	NERV SYS DX W VENT SUPPORT+CCC	397	471	13.7	12.8	17,688,626	36,003	37,555	1,552	4.3%
3	4	T40Z	INFECT&PARAS DIS+VENT SUPPORT	235	284	11.6	11.1	10,547,691	33,724	37,140	3,416	10.1%
4	3	E40A	RESP DX W VENTILATOR SUPPT+CCC	887	945	11.5	10.8	32,238,611	35,761	34,115	(1,647)	-4.6%
5	5	F40A	CIRC SYS DX+VENTILTR SUPPT+CCC	418	489	10.3	9.2	15,507,882	33,283	31,713	(1,569)	-4.7%
6	6	K40A	ENDO/INVEST PR METAB DIS +CCC	222	235	18.5	16.9	6,317,702	28,524	26,884	(1,640)	-5.8%
7	7	E40B	RESP DX W VENTILATOR SUPPT-CCC	350	297	6.7	6.5	7,137,129	23,839	24,031	192	0.8%
8	10	F43Z	CIRC SYS DIAG W NIV	786	942	12.1	11.9	22,195,707	22,818	23,562	744	3.3%
9	8	E42A	BRONCHOSCOPY +CCC	1,008	1,015	14.9	14.2	23,103,024	23,758	22,762	(997)	-4.2%
10	9	E41Z	RESP SYS DX +NON-INVAS VENTILN	4,244	5,562	11.2	9.9	123,434,174	23,225	22,192	(1,033)	-4.4%
11	11	X40Z	INJ,POIS,TOX EFF DRUG W VENT	883	903	6.9	6.5	19,370,245	21,112	21,451	339	1.6%
12	13	B42B	NERV SYS DX W VENT SUPPORT-CCC	546	543	5.4	5.3	11,038,263	19,525	20,328	803	4.1%
13	14	H40A	ENDO PR BLEED OES VARICES +CCC	297	339	8.5	8.9	6,665,776	19,277	19,663	386	2.0%
14	15	F40B	CIRC SYS DX+VENTILTR SUPPT-CCC	203	201	4.3	4.4	3,797,759	17,414	18,894	1,480	8.5%
15	12	G46A	COMPLEX GASTROSCOPY+CCC	1,553	1,882	12.8	11.0	34,891,216	20,669	18,539	(2,130)	-10.3%
16	16	H43A	ERCP PROCEDURE +CSCC	2,055	2,256	9.9	9.1	34,051,539	15,628	15,094	(534)	-3.4%
17	17	G47A	OTH GASTROSCOPY +CCC	2,014	2,485	9.9	9.5	36,557,283	15,006	14,711	(295)	-2.0%
18	18	F41A	CRC DSRD+AMI+INVA INVE PR+CSCC	1,831	2,077	7.4	7.3	28,473,613	13,675	13,709	34	0.3%
19	19	F42A	CRC DSRD-AMI+IC IN PR +CSCC	3,122	3,805	7.6	7.0	48,594,466	13,294	12,771	(523)	-3.9%
20	20	G48A	COLONSCOPY +CSCC	2,109	2,500	8.9	8.2	30,787,681	12,856	12,315	(541)	-4.2%
Remaining other DRGs				290,403	277,855	1.5	1.5	724,550,668	2,578	2,608	30	1.2%
Total other DRGs				313,759	305,279	2.1	2.2	1,269,109,847	3,907	4,157	250	6.4%

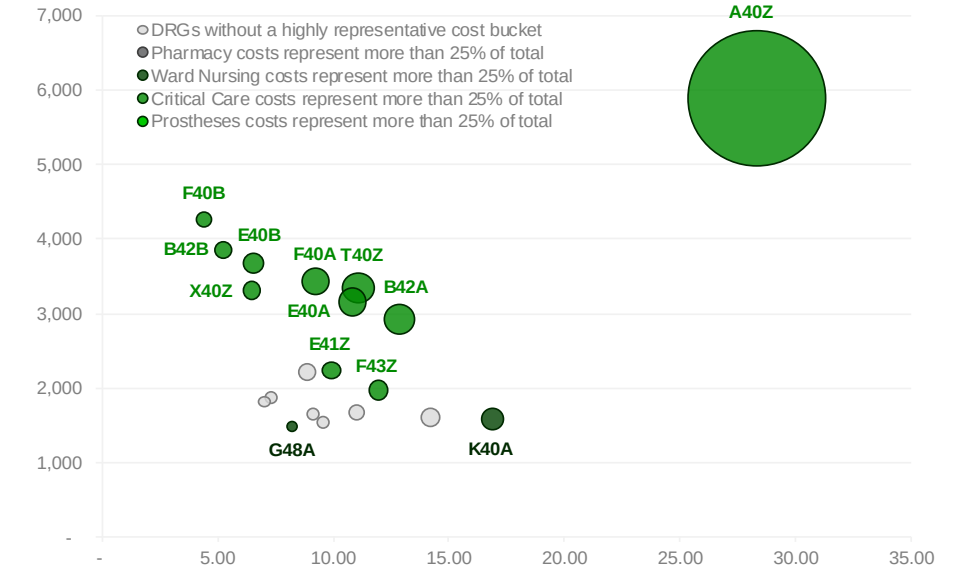
This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 'other' DRGs ranked by highest average cost per separations, for Round 17. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

3.14.2 Which cost buckets are utilised most for admitted acute separations with 'other' DRGs?

The majority of the top 20 'other' DRGs reported the highest proportion of average cost in critical care, with the exception of K40A (endoscopic or investigative procedure for metabolic disorders with catastrophic complication or comorbidity), E42A (bronchoscopy with catastrophic complication or comorbidity), G46A (complex gastroscopy with catastrophic complication or comorbidity), H43A (endoscopic retrograde cholangiopancreatography procedures with catastrophic or severe complication or comorbidity) and G47A (other gastroscopy with catastrophic complication or comorbidity) which all reported the highest proportion of cost in ward nursing (Table 40 and Figure 15). Critical care costs accounted for between 2.5% and 57.1% of total average cost.

The majority of the top 20 DRGs also reported either on-costs or ward nursing as the second largest cost bucket. However the DRG with the highest average cost, A40Z (extracorporeal membrane oxygenation (ECMO)), reported the second most utilised cost bucket as operating rooms at 9.5%.

Figure 15: Top 20 Other DRGs by average cost – Bubble size represents average cost



Note: Colour has been used to indicate where a cost bucket is on average, greater than 25% of total encounter cost.

Table 44: Top 20 'other' DRGs by highest average cost per separation by cost bucket. Round 17

DRG	Description	Average cost	ALOS	Average cost per day	Ward Medical	Ward Nursing	Non-Clinical	Path	Imag	Allied Health	Phar	Critical	OR	ED	Ward Supp	SPS	Pros	On Costs	Hotel	Deprec
A40Z	ECMO	166,636	28.3	5,886	7,630	4,784	2,711	9,796	3,370	4,448	4,105	85,557	15,766	735	4,635	642	3,361	12,083	3,015	3,999
B42A	NERV SYS DX W VENT SUPPORT+CCC	37,555	12.8	2,924	2,665	4,504	1,135	1,364	1,183	1,517	546	16,782	533	1,397	1,216	42	37	2,906	834	894
T40Z	INFECT&PARAS DIS+VENT SUPPORT	37,140	11.1	3,348	2,272	2,784	916	1,998	1,164	1,027	1,064	18,461	640	1,396	994	37	52	2,559	766	1,008
E40A	RESP DX W VENTILATOR SUPPT+CCC	34,115	10.8	3,150	2,140	2,348	884	1,531	813	1,147	685	18,186	226	849	952	41	34	2,570	787	922
F40A	CIRC SYS DX+VENTILTR SUPPT+CCC	31,713	9.2	3,429	1,808	1,721	729	1,371	781	929	553	17,166	224	1,122	999	232	96	2,378	746	858
K40A	ENDO/INVEST PR METAB DIS +CCC	26,884	16.9	1,593	3,578	6,893	1,650	1,346	826	1,408	1,396	2,149	796	934	2,049	282	55	2,033	799	690
E40B	RESP DX W VENTILATOR SUPPT-CCC	24,031	6.5	3,671	1,458	1,488	550	898	454	589	316	13,698	481	714	513	35	59	1,654	429	694
F43Z	CIRC SYS DIAG W NIV	23,562	11.9	1,973	2,438	4,014	1,096	899	501	745	581	6,974	111	1,471	1,366	117	51	1,777	765	654
E42A	BRONCHOSCOPY +CCC	22,762	14.2	1,603	3,080	5,363	1,486	1,250	954	1,133	1,835	1,161	821	912	1,862	150	33	1,495	702	525
E41Z	RESP SYS DX +NON-INVAS VENTILN	22,192	9.9	2,239	2,248	4,004	980	711	377	899	615	7,038	91	1,059	1,171	165	9	1,615	642	566
X40Z	INJ,POIS,TOX EFF DRUG W VENT	21,451	6.5	3,308	1,469	1,520	569	771	451	656	230	11,232	341	1,063	547	17	16	1,575	440	555
B42B	NERV SYS DX W VENT SUPPORT-CCC	20,328	5.3	3,850	1,200	1,288	446	771	702	635	235	10,405	494	1,226	503	14	35	1,353	452	569
H40A	ENDO PR BLEED OES VARICES +CCC	19,663	8.9	2,213	1,900	3,467	917	1,311	431	589	814	3,978	1,622	1,024	1,136	97	119	1,226	556	476
F40B	CIRC SYS DX+VENTILTR SUPPT-CCC	18,894	4.4	4,262	1,076	562	268	771	483	420	175	10,780	150	1,344	378	182	34	1,365	328	579
G46A	COMPLEX GASTROSCOPY+CCC	18,539	11.0	1,680	2,318	4,134	1,118	894	577	759	902	1,583	1,324	897	1,305	257	170	1,257	591	454
H43A	ERCP PROCEDURE +CSCC	15,094	9.1	1,655	1,809	3,318	926	629	729	414	523	1,125	1,193	774	1,112	315	286	1,028	499	414
G47A	OTH GASTROSCOPY +CCC	14,711	9.5	1,542	1,906	3,519	953	664	472	657	614	1,002	772	976	1,111	157	32	1,018	504	355
F41A	CRC DSRD+AMI+INVA INVE PR+CSCC	13,709	7.3	1,872	1,676	1,920	699	483	436	408	301	3,162	103	853	837	962	152	914	405	398
F42A	CRC DSRD-AMI+IC IN PR +CSCC	12,771	7.0	1,819	1,680	1,944	686	453	497	380	369	2,082	171	809	901	1,034	174	823	371	397
G48A	COLONSCOPY +CSCC	12,315	8.2	1,495	1,686	3,229	849	593	416	374	659	308	713	824	970	158	23	812	404	299
Remaining other DRGs		2,608	1.5	1,780	279	279	126	87	61	48	47	77	743	115	149	231	44	160	74	90
Total other DRGs		4,157	2.2	1,913	436	540	196	153	106	107	99	559	730	190	234	241	50	271	117	129

This table reports the average cost per separation in total and by cost bucket, for the top 20 medical DRGs ranked by highest average cost per separations, for Round 17. It also reports the average length of stay (ALOS) and average cost per separation per day. Where Round 16 results are reported in the discussion, these include cost-modelled sites. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

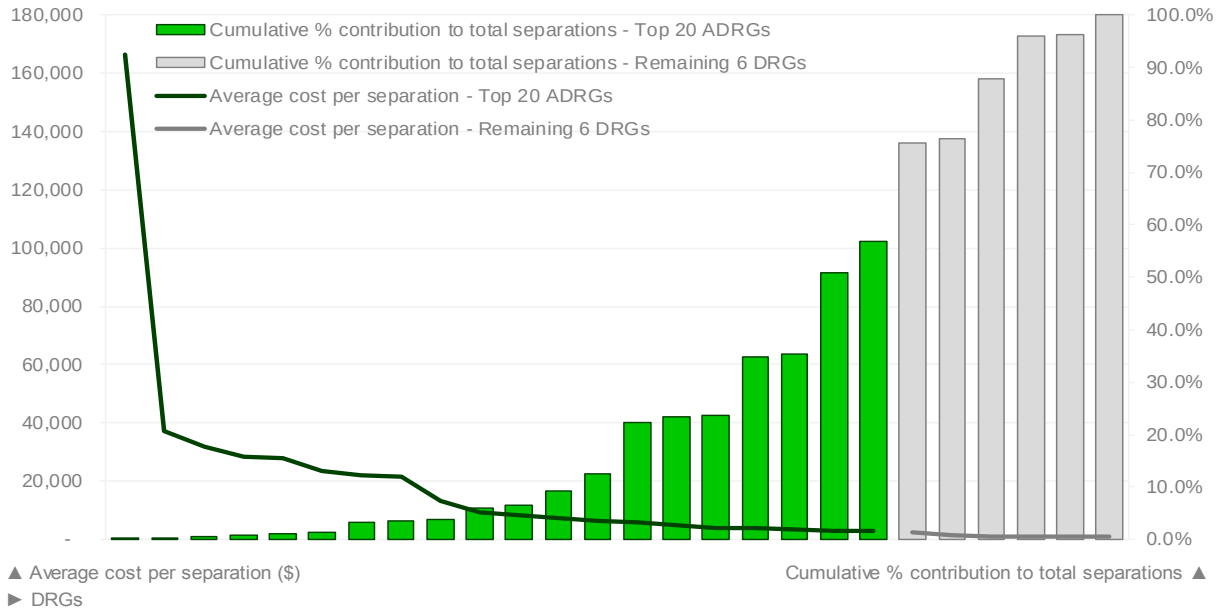
3.14.3 What are the top 20 adjacent ‘other’ DRGs with the highest average cost per separation?

‘Adjacent DRGs’ (ADRGs) are a grouping of one or more DRGs defined by the same diagnosis or procedure code list. Adjacent DRGs (DRGs) re-aggregate the DRGs that have been split on the basis of Patient Care Complexity Level (PCCL), malignancy, same day status, mental health status and mode of separation (that is, the last split in the DRG hierarchy). The ADRG number is the first three characters of the DRG number. Taken together the top 20 highest cost adjacent ‘other’ DRGs accounted for $1.040 billion which represents 82.0% of the total reported admitted acute patient cost for ‘other’ DRGs and 57.0% of total separations that have been assigned to an ‘other’ DRG.

The majority of the top 20 ‘other’ DRGs remain in the top 20 when looking at adjacent DRGs. The adjacent ‘other’ DRG for ECMO (A40), which has no splits, had the highest average cost per admitted acute separation in Round 17 of $166,636 (Table 45). The range in the average cost per separation for adjacent surgical DRGs was from $166,636 (rank 1) to $3,028 (rank 20) which is a difference of $163,608.

Figure 16 shows the 26 other ADRGs ranked by highest average cost by DRG (shown on the left hand axis) while showing their cumulative percentage contribution to total separations (shown on the right hand axis). The top 20 ADRGs, shown in green, contribute over 55% of total 'other' separations.

Figure 16: Top 26 Other ADRGs ordered by average cost per separation (LHS) and their cumulative % contribution to total separations (RHS)



The chart above shows the average cost for each adjacent DRG on the left hand side and the cumulative contribution of each DRG to total separations on the right hand side. The Top 20 are highlighted in green.

Table 45: Top 20 adjacent 'other' DRGs ranked by highest average cost per separation, Round 16 and Round 17

Round 17 Rank	Round 16 Rank	Adjacent DRG	Description	Separations		ALOS		Total cost Round 17	Average cost per separation		Change in avg cost Round 16 to 17	
				Round 16	Round 17	Round 16	Round 17		Round 16	Round 17	$	%
1	1	A40	ECMO	196	193	24.7	28.3	32,160,792	142,068	166,636	24,569	17.3%
2	2	T40	Infectious and Parasitic Diseases W Ventilator Support	235	284	11.6	11.1	10,547,691	33,724	37,140	3,416	10.1%
3	3	E40	Respiratory System Disorders W Ventilator Support	1,237	1,242	10.1	9.8	39,375,740	32,388	31,703	(685)	-2.1%
4	5	B42	Nervous System Disorders W Ventilator Support	943	1,014	8.9	8.8	28,726,889	26,462	28,330	1,868	7.1%
5	4	F40	Circulatory Disorders W Ventilator Support	621	690	8.4	7.8	19,305,640	28,095	27,979	(116)	-0.4%
6	7	F43	Circulatory System Diagnosis W Non-Invasive Ventilation	786	942	12.1	11.9	22,195,707	22,818	23,562	744	3.3%
7	6	E41	Respiratory sSystem Diagnosis W Non-Invasive Ventilation	4,244	5,562	11.2	9.9	123,434,174	23,225	22,192	(1,033)	-4.4%
8	8	X40	Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support	883	903	6.9	6.5	19,370,245	21,112	21,451	339	1.6%
9	9	H40	Endoscopic Procedures for Bleeding Oesophageal Varices	705	751	6.0	6.2	10,036,480	13,090	13,364	274	2.1%
10	10	F41	Circulatory Disorders, Admitted for AMI W Invasive Cardiac Investigative Procedures	6,824	7,070	4.6	4.6	64,793,410	9,068	9,165	96	1.1%
11	11	B41	Telemetric EEG Monitoring	1,035	1,062	4.6	4.4	8,845,930	7,822	8,330	507	6.5%
12	12	H43	ERCP Procedures	8,342	8,514	4.6	4.4	63,802,440	7,451	7,494	43	0.6%
13	13	E42	Bronchoscopy	10,470	10,313	3.7	3.6	64,005,360	6,235	6,206	(28)	-0.5%
14	14	F42	Circulatory Disorders, Not Admitted for AMI W Invasive Cardiac Investigative Procedures	29,871	29,763	2.5	2.5	175,319,774	5,523	5,891	368	6.7%
15	15	K40	Endoscopic and Investigative Procedures for Metabolic Disorders	3,352	3,174	3.0	2.9	15,428,954	4,731	4,861	130	2.8%
16	16	L40	Ureteroscopy	500	498	1.7	1.5	2,069,735	4,172	4,156	(16)	-0.4%
17	18	G46	Complex Endoscopy	35,302	34,502	2.1	2.1	129,679,263	3,590	3,759	169	4.7%
18	17	L42	ESW Lithotripsy for Urinary Stones	1,674	1,659	1.2	1.1	5,967,943	3,675	3,597	(78)	-2.1%
19	20	G47	Gastroscopy	49,011	46,884	1.9	2.0	147,687,556	2,902	3,150	248	8.6%
20	19	D40	Dental Extractions and Restorations	20,265	18,958	1.1	1.1	57,406,993	3,110	3,028	(82)	-2.6%
Remaining other DRGs				137,263	131,301	1.2	1.2	228,949,129	1,784	1,744	(41)	-2.3%
Total other DRGs				313,759	305,279	2.1	2.2	1,269,109,847	3,907	4,157	250	6.4%

This table reports the number of separations, average length of stay (ALOS), total cost and average cost per separation, for the top 20 adjacent 'other' DRGs ranked by highest average cost per separations, for Round 17. An adjacent DRG is a re-aggregation of DRGs to the last split in the DRG hierarchy and is represented by the first three characters of the DRG code. Round 16 comparatives are presented for separations, average length of stay and average cost per separation, and these costs include cost-modelled sites. Also reported is the absolute and percentage change in average cost per separation between Round 16 and Round 17. Costs for emergency department presentations that were subsequently admitted are included, as is depreciation.

4 Emergency department product results

Contents of this Chapter:

This chapter presents an analysis of the emergency department cost data submitted in Round 17 (2012-13) and makes comparisons to previous Rounds where possible. Emergency presentations are divided into admitted (where the patient went on to be admitted to hospital) and non-admitted (where the patient's treatment was completed in emergency). There were a total of 6,490,549 emergency presentations reported in Round 17. Emergency department presentations are classified by Urgency Related Groups (URGs) which provide a summary of the complexity and type of patients treated within an emergency department. Emergency department episodes of care are grouped into URGs based on the triage category (urgency of care); nature of diagnosis and admitted or non-admitted status[20]. In this chapter, emergency costs include the costs of admitted and non-admitted emergency presentations, unless otherwise stated in the footnote to the table.

4.1 What was the average cost of an emergency presentation?

The average cost for all emergency presentations was $578, compared to $575 in Round 16, an increase of less than 1% (Table 46). At a jurisdictional level the average cost increased by 36.6% in Western Australia and by 19.4% in the Northern Territory, while decreasing by 11.1% in South Australia and by 8.4% in Queensland. The remaining jurisdictions experienced small changes in average cost between Round 16 and Round 17. The non-admitted presentations represented 74% of total emergency presentations in Round 17, but reported a substantially lower average costs than admitted presentations ($451 for non-admitted compared to $960 for admitted, at the national level).

[20] Australian Institute of Health and Welfare (AIHW) Metadata Online Registry (METeOR) – 'Urgency related groups'. URL: http://meteor.aihw.gov.au/content/index.phtml/itemId/496744 , accessed 9/03/2015.

Table 46: Number of presentations and average cost for admitted, non-admitted and combined emergency presentations by jurisdiction, Round 17

Jurisdiction	Separations, Round 17			Average cost		R16 average cost	R17 average cost	% change in avg cost R16 to R17
	Admitted	Non-admitted	Total	R17 Admitted	R17 Non-admitted			
NSW	548,094	1,406,475	1,954,569	1,128	423	599	620	3.5%
Vic	417,355	1,052,995	1,470,350	856	382	514	517	0.5%
Qld	316,463	1,259,350	1,575,813	936	478	622	570	-8.4%
SA	133,275	303,983	437,258	783	443	614	546	-11.1%
WA	182,192	445,390	627,582	750	531	435	594	36.6%
Tas	31,755	128,801	160,556	1,028	402	527	526	-0.1%
NT	37,687	107,759	145,446	763	549	506	604	19.4%
ACT	31,212	87,763	118,975	1,430	619	839	832	-0.8%
National	1,698,033	4,792,516	6,490,549	960	451	575	578	0.7%

This table shows the number of presentations and average cost, by jurisdiction and by admitted and non-admitted product type, for Round 17. The average cost for Round 16 is also reported, and the percentage movement to Round 17.

4.2 What was the average cost of an admitted emergency presentation?

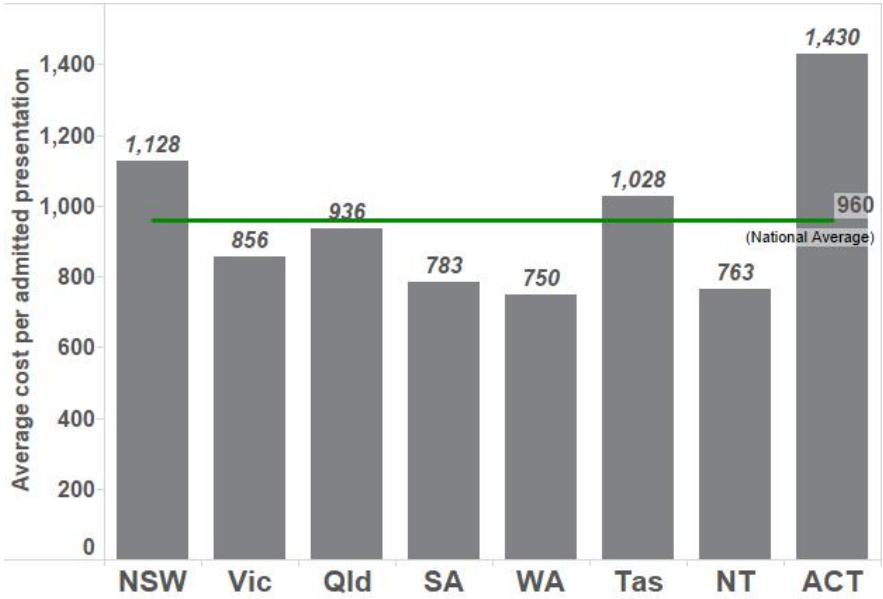
The national average cost for admitted emergency presentations was $960 (Table 47) a decrease of 8.3% from the Round 16 national average of $1,047. The average cost per admitted presentation decreased between Round 16 and Round 17 in all jurisdictions with the exception of Tasmania (up 9.2%) and South Australia (up 0.5%).

Table 47: Average cost for admitted emergency presentations by jurisdiction, Round 16 and 17

Jurisdiction	R16 average cost	R17 average cost	% difference
NSW	1,181	1,128	-4.5%
Vic	878	856	-2.6%
Qld	997	936	-6.1%
SA	779	783	0.5%
WA	.	750	na
Tas	941	1,028	9.2%
NT	1,307	763	-41.6%
ACT	1,955	1,430	-26.8%
National	1,047	960	-8.3%

The national average cost has been calculated using the URG classification only as this is consistent with the publication of the cost weight table and also allows consistent totals for emergency department products to be reported in Table 47, Table 48, chapter 2, and the cost weight tables. However, within these tables, where an average cost for a jurisdiction's has been calculated, this has been done using the product type classification. This was done to manage presentations in the Round 16 data which reported a conflicting URG and product type (admitted / non-admitted) (for example, an emergency department presentation with an 'admitted' URG but a 'non-admitted' product type).

Figure 17: Average cost per admitted emergency presentation by jurisdiction, Round 17



Comparing each jurisdiction to the national average (Figure 17), the relative differences between jurisdictions in Round 17 was similar to the relative differences in Round 16. At the lower end the average cost per presentation in Western Australia was $750 and in the Northern Territory was $763 which is 21.9% and 20.5% lower than the national average cost of $960 respectively. At the higher end was the Australian Capital Territory at $1,430 which is 49.0% above the national average cost. The average cost in New South Wales was $1,128 (17.5% above national average) while Tasmania was around the national average $1,028. The remaining jurisdictions were all lower than the national average.

4.3 What was the average cost of a non-admitted emergency presentation?

The national average cost for non-admitted emergency presentations was $451 (Table 48), which was considerably lower than for admitted emergency presentations ($960). The Round 17 average cost for non-admitted presentations represents a decrease of 2.6% from the Round 16 national average of $463. There was substantial movement across the jurisdictions between Round 16 and Round 17 with the largest increase being in the Northern Territory (an increase of 70.7%) and the largest decrease in South Australia (a decrease of 19.1%).

Comparing each jurisdiction to the national average (Figure 18), New South Wales, Victoria, South Australia and Tasmania all reported average costs lower than the national average with the lowest being Victoria at $382 (15.3% below national average). The remaining jurisdictions all reported average costs higher than the national, with the highest being the Australian Capital Territory at $619 (37.3% above national average). The jurisdictions reporting substantially different results in the average cost of non-admitted presentations compared to admitted presentations are New South Wales (6.2% below national average for non-admitted but 17.5% above national average for admitted) and the Northern Territory (21.7% above national average for non-admitted but 20.5% below national average for admitted).

However in terms of the movement between Round 16 and Round 17, the most notable jurisdictions are the Northern Territory and the Australian Capital Territory, which reported substantial increases in average cost for non-admitted presentations (70.7% and 41.2% respectively). In comparison, the Northern Territory reported a substantial decrease in the admitted average costs between Round 16 and Round 17 (41.6%). Looking at the combined average cost of admitted and non-admitted presentations for these jurisdictions (Table 46), the Australian Capital Territory reported only a small change in average cost (a decrease of 0.8%), which suggests that a possible reason for the large percentage movements described above was a change in the allocation of costs between admitted and non-admitted presentations. At the combined average cost level, the Northern Territory still reported an increase of 19.4%, however again the large percentage movements in admitted and non-admitted could be due to changes in the allocation of costs.

Table 48: Average cost for non-admitted emergency presentations by jurisdiction, Round 16 and 17

Jurisdiction	R16 average cost	R17 average cost	% difference
NSW	441	423	-4.2%
Vic	377	382	1.2%
Qld	532	478	-10.1%
SA	547	443	-19.1%
WA	435	531	22.0%
Tas	420	402	-4.2%
NT	321	549	70.7%
ACT	438	619	41.2%
National	463	451	-2.6%

The national average cost has been calculated using the URG classification only as this is consistent with the publication of the cost weight table and also allows consistent totals for emergency department products to be reported in Table 47, Table 48, chapter 2, and the cost weight tables. However, within these tables, where an average cost for a jurisdiction's has been calculated, this has been done using the product type classification. This was done to manage presentations in the Round 16 data which reported a conflicting URG and product type (admitted / non-admitted) (for example, an emergency department presentation with an 'admitted' URG but a 'non-admitted' product type).

Figure 18: Average cost per non-admitted emergency presentation by jurisdiction, Round 17

4.4 How much has the cost of emergency presentations changed over time?

The national average cost for an admitted emergency presentation has decreased between Round 16 and Round 17 by 8.3%, compared to an increase of 21.0% between Round 15 and Round 16 (Table 49). Non-admitted emergency presentations followed the trend of with a 17.2% increase between Round 15 and Round 16 and a 2.6% decrease between Round 16 and Round 17.

The admitted URG with the highest average cost in Round 17 was T1 injury – single sites at $2,093, and the admitted URG with the lowest average cost was Return visit planned with any Triage at $538. Across the admitted URGs there was substantial variation in cost movements between Round 15 and Round 16 (ranging from 0.3% to 33.7% increase in average cost) and also between Round 16 and Round 17 (ranging from 14.7% decrease in average cost to 7.6% increase in average cost). Between Round 16 and Round 17, the admitted URG with the largest increase in average cost was in T1 Respiratory system illness (7.6% increase in average cost). This URG was reported for 4,614 presentations in Round 17, and this number has remained fairly consistent over the last two Rounds (3,816 in Round 16 and 3,668 in Round 15).

The non-admitted URG with the highest average cost in Round 17 was for patients who die in the emergency department at $1,375 in Round 17. This was also the largest movement in non-admitted URG average cost between Round 16 and Round 17 (217.0% increase in average cost from $434 in Round 16). The non-admitted URG with the second highest average cost was T1 All MDB groups at $1,244, which reported an 18.4% decrease on the Round 16 average cost of $1,524. The lowest average cost non-admitted URG was for patients who did not wait ($188). Across the non-admitted URGs there was substantial variation in cost movements between Round 15 and Round 16 (ranging from 0.6% decrease in average cost to 61.5% increase in average cost) and also between Round 16 and Round 17 (ranging from 20.2% decrease in average cost to 217.0% increase in average cost).

Table 49: Change in emergency presentations and average cost per presentation by URG, Round 15 to Round 17

URG Code	URG Description	Round 17 cost weights	Presentations			Average cost per presentation			Change in presentations	Change in average cost per presentation
			Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 16 to 17 (%)	Round 16 to 17 (%)
3	Adm_T1_Injury_Single sites	3.64	5,404	5,136	5,918	1,950	2,190	2,093	15.2%	-4.4%
4	Adm_T1_Poisoning	2.81	1,265	1,256	1,617	1,396	1,573	1,619	28.7%	2.9%
5	Adm_T1_Respiratory system illness	2.88	3,668	3,816	4,614	1,461	1,541	1,658	20.9%	7.6%
6	Adm_T1_Circulatory system illness	2.72	6,021	5,019	6,442	1,217	1,504	1,568	28.4%	4.2%
7	Adm_T1_All other MDB groups	3	7,087	7,608	9,468	1,508	1,740	1,727	24.4%	-0.7%
9	Adm_T2_Poisoning	1.85	4,545	5,279	7,458	1,060	1,150	1,065	41.3%	-7.5%
10	Adm_T2_Injury	2.35	22,053	26,281	32,583	1,140	1,370	1,353	24.0%	-1.2%
11	Adm_T2_Gastrointestinal system illness	2.2	15,295	18,718	24,440	1,136	1,362	1,266	30.6%	-7.1%
12	Adm_T2_Respiratory system illness	1.99	35,081	42,781	53,249	1,014	1,178	1,147	24.5%	-2.7%
14	Adm_T2_Neurological illness	2.4	16,770	19,423	25,622	1,138	1,413	1,382	31.9%	-2.2%
15	Adm_T2_Toxic effects of drugs	1.91	1,242	1,459	1,999	1,057	1,127	1,099	37.0%	-2.5%
16	Adm_T2_Circulatory system illness	1.88	95,704	109,650	135,620	953	1,131	1,083	23.7%	-4.2%
17	Adm_T2_All other MDB groups	2.01	33,305	40,643	55,595	980	1,216	1,157	36.8%	-4.8%
19	Adm_T3_Blood/Immune system illness	1.76	12,419	13,925	16,630	889	1,189	1,013	19.4%	-14.7%
20	Adm_T3_Injury	1.66	57,266	64,155	76,876	819	1,006	957	19.8%	-4.9%
21	Adm_T3_Neurological illness	1.86	48,898	57,123	74,272	934	1,166	1,070	30.0%	-8.3%
22	Adm_T3_Obstetric/Gynaecological illness	1.07	16,881	18,444	19,842	538	612	618	7.6%	1.1%
23	Adm_T3_Gastrointestinal system illness	1.79	106,829	125,903	159,848	914	1,117	1,029	27.0%	-7.9%
24	Adm_T3_Circulatory system illness	1.7	80,261	88,336	103,881	875	1,041	981	17.6%	-5.7%
25	Adm_T3_Poisoning/Toxic effects of drugs	1.52	10,066	11,049	14,383	870	926	872	30.2%	-5.8%
26	Adm_T3_Urological illness	1.72	30,212	35,020	43,517	905	1,084	992	24.3%	-8.5%
27	Adm_T3_Respiratory system illness	1.67	75,864	84,419	97,067	863	1,040	961	15.0%	-7.6%
29	Adm_T3_All other MDB groups	1.65	83,088	92,283	116,163	841	999	949	25.9%	-5.1%

URG Code	URG Description	Round 17 cost weights	Presentations			Average cost per presentation			Change in presentations	Change in average cost per presentation
			Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 16 to 17 (%)	Round 16 to 17 (%)
30	Adm_T4_Poisoning/Toxic effects of drugs	1.25	3,075	3,141	4,570	700	734	717	45.5%	-2.4%
31	Adm_T4_Respiratory system illness	1.41	22,110	22,146	24,190	732	888	814	9.2%	-8.3%
32	Adm_T4_Gastrointestinal system illness	1.49	59,537	63,903	82,086	775	950	860	28.5%	-9.5%
33	Adm_T4_All other MDB groups	1.38	127,249	133,270	164,997	710	862	794	23.8%	-7.9%
34	Adm_T4_Injury	1.28	42,858	44,863	55,072	643	774	738	22.8%	-4.6%
35	Adm_T4_Psychiatric/Social problem/Other presentation	1.33	23,228	23,398	30,134	784	786	768	28.8%	-2.3%
36	Adm_T5_Psychiatric/Social problem/Other presentation	1.01	3,988	3,281	3,856	528	547	579	17.5%	5.7%
37	Adm_T5_All other MDB groups	1.07	19,676	18,203	20,033	596	711	613	10.1%	-13.8%
AE1	Error - Episode End Status not (1, 2, 3, 4, 5, 6 or 7)	-	-	-	-	-	-	-		
AE2	Error - Triage not (1, 2, 3, 4 or 5)	-	33	-	-	543	-	-		
AE3	Error – Blank diagnosis code	-	14,829	-	-	701	-	-		
AE4	Error – Invalid diagnosis code	-	43,642	-	-	848	-	-		
AE5	Error – Diagnosis code – No MDB map	-	1,622	-	-	964	-	-		
	WA data submitted as part of the admitted setting				150,002			697		
National admitted ED presentations		**1.71**	**1,131,071**	**1,189,931**	**1,622,044**	**865**	**1,047**	**960**	**36.3%**	**-8.3%**
39	N-A_T1_All MDB groups	2.16	6,366	6,788	5,298	1,468	1,524	1,244	-22.0%	-18.4%
40	N-A_T2_Alcohol/drug abuse	1.6	2,866	3,438	4,474	879	981	919	30.1%	-6.3%
42	N-A_T2_Musculoskeletal/connective tissue illness	1.35	3,078	4,495	6,423	707	781	778	42.9%	-0.3%
43	N-A_T2_Circulatory system/Respiratory system illness	1.44	71,623	99,057	120,628	840	898	829	21.8%	-7.7%
44	N-A_T2_Injury	1.44	29,432	37,083	43,260	834	884	831	16.7%	-6.0%
45	N-A_T2_Poisoning	1.53	3,945	4,700	6,206	820	925	882	32.0%	-4.7%

URG Code	URG Description	Round 17 cost weights	Presentations			Average cost per presentation			Change in presentations	Change in average cost per presentation
			Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 16 to 17 (%)	Round 16 to 17 (%)
46	N-A_T2_All other MDB groups	1.34	55,693	71,724	85,636	751	827	772	19.4%	-6.7%
48	N-A_T3_Circulatory system illness	1.12	82,193	101,038	115,551	649	699	643	14.4%	-8.0%
50	N-A_T3_Injury	1	159,828	200,393	241,131	553	613	576	20.3%	-6.2%
51	N-A_T3_Genitourinary illness	1.08	62,606	80,335	94,923	626	674	621	18.2%	-7.9%
52	N-A_T3_Gastrointestinal system illness	1.06	128,172	167,002	203,143	607	665	611	21.6%	-8.1%
53	N-A_T3_Neurological illness	1.12	66,256	84,020	102,807	629	702	642	22.4%	-8.5%
55	N-A_T3_Respiratory system illness	0.9	100,247	127,396	142,732	510	539	517	12.0%	-4.2%
56	N-A_T3_Musculoskeletal/connective tissue illness	1.03	15,026	20,038	26,491	543	598	591	32.2%	-1.1%
57	N-A_T3_All other MDB groups	0.9	224,866	261,876	323,134	490	550	519	23.4%	-5.6%
58	N-A_T4_Injury	0.64	434,911	535,414	686,395	343	375	370	28.2%	-1.2%
60	N-A_T4_Genitourinary illness	0.74	90,982	110,702	131,173	407	436	423	18.5%	-2.8%
61	N-A_T4_Circulatory system/Respiratory system illness	0.67	149,082	178,118	206,023	369	394	384	15.7%	-2.3%
62	N-A_T4_Gastrointestinal system illness	0.76	160,501	197,953	248,928	422	463	436	25.8%	-5.8%
63	N-A_T4_Musculoskeletal/connective tissue illness	0.74	53,036	63,680	86,206	382	413	426	35.4%	3.1%
65	N-A_T4_Illness of the ENT	0.56	68,375	80,873	108,717	286	303	320	34.4%	5.4%
66	N-A_T4_Illness of the Eyes	0.5	51,543	58,069	71,471	250	272	288	23.1%	6.1%
67	N-A_T4_Other presentation block	0.61	109,494	109,957	132,524	338	369	351	20.5%	-4.9%
68	N-A_T4_All other MDB groups	0.68	286,707	315,705	408,007	344	398	390	29.2%	-2.0%
69	N-A_T5_Poisoning/Toxic effects of drugs	0.48	3,812	3,859	5,516	257	280	274	42.9%	-2.0%
70	N-A_T5_Injury	0.45	110,355	123,894	152,471	236	253	258	23.1%	2.2%
71	N-A_T5_Other presentation block	0.39	102,520	72,493	85,602	206	220	222	18.1%	1.1%
72	N-A_T5_All other MDB groups	0.46	172,661	155,610	188,172	235	260	265	20.9%	2.0%
38	Dead on Arrival w any Triage w any MDB	0.53	3,986	4,929	4,667	169	273	304	-5.3%	11.0%
73	Did Not Wait	0.33	258,865	287,595	266,568	155	154	188	-7.3%	21.5%
URG	URG Description		Round 15	Round 16	Round 17	Round 15	Round 16	Round 17	Round 16 to 17	Round 16 to 17

URG Code	URG Description	Round 17 cost weights	Presentations			Average cost per presentation			Change in presentations	Change in average cost per presentation
			Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 15 (URG v1.2)	Round 16 (URG v1.3)	Round 17 (URG v1.3)	Round 16 to 17 (%)	Round 16 to 17 (%)
Code			(URG v1.2)	(URG v1.3)	(URG v1.3)	(URG v1.2)	(URG v1.3)	(URG v1.3)	(%)	(%)
74	Transfer presentation	1.75	-	55,186	85,795	-	833	1,010	55.5%	21.3%
75	Died in emergency department	2.39	-	13,879	4,393	-	434	1,375	-68.3%	217.0%
76	Adm_Return visit, planned w any Triage	0.94	-	7,723	8,876	-	605	538	14.9%	-11.0%
77	N-A Return visit, planned – Triage 1, 2, 3	0.89	-	3,500	4,316	-	514	512	23.3%	-0.5%
78	N-A Return visit, planned – Triage 4,5	0.49	-	83,642	78,245	-	259	280	-6.5%	8.0%
E1	Error - Episode End Status not (1, 2, 3, 4, 5, 6 or 7)	0.93	-	26,558	62,670	-	328	538	136.0%	63.7%
E2	Error - Triage not (1, 2, 3, 4 or 5)	0.56	-	1,813	243	-	203	321	-86.6%	58.4%
E3	Error – Blank diagnosis code	0.77	-	42,378	2,839	-	328	440	-93.3%	34.1%
E4	Error – Invalid diagnosis code	1.05	-	515,248	49,016	-	512	606	-90.5%	18.4%
E5	Error – Diagnosis code – No MDB map	0.86	-	6,445	8,851	-	509	494	37.3%	-2.8%
E6	Error - Type of visit not (1,2, 3, 4 or 5)	0.72	-	189,883	258,984	-	519	415	36.4%	-20.2%
NE1	Error - Episode End Status not (1, 2, 3, 4, 5, 6 or 7)	-	22,356	-	-	346	-	-		
NE2	Error - Triage not (1, 2, 3, 4 or 5)	-	156	-	-	699	-	-		
NE3	Error – Blank diagnosis code	-	178,959	-	-	242	-	-		
NE4	Error – Invalid diagnosis code	-	189,587	-	-	396	-	-		
NE5	Error – Diagnosis code – No MDB map	-	14,383	-	-	453	-	-		
National non-admitted ED presentations		**0.78**	**3,474,468**	**4,514,489**	**4,868,505**	**395**	**463**	**451**	**7.8%**	**-2.6%**
Total ED presentations		**1**	**4,605,539**	**5,704,420**	**6,490,549**	**511**	**585**	**578**	**13.8%**	**-1.1%**

This table reports the number of presentations and average cost per presentation, by URG, for Round 15, Round 16 and Round 17. It also reports the change in number of presentations and average cost per presentations between Round 16 and Round 17. The first half of the table lists the admitted URGs and the second half lists the non-admitted URGs. The results exclude those for cost-modelled sites where applicable. Values that appear as 0 in the table represent fractional amounts that have been rounded. Zero results are represented by a '-'.

4.5 What are the major input costs for emergency department services?

Line items are groups of general ledger expenditure account codes that describe the input type of the expense (rather than the function of the expense), and define the resources being used by a cost centre. For example, a hospital might have line items for drugs, prostheses, nursing salaries or medical labour. There is a standard set of line items defined in the Australian Hospital Patient Costing Standards v2.0 – 1 March 2011 (AHPCS)[21]. These are listed in Table 61 of 0. Attachment A of the AHPCS provides the full definition of costs prescribed as included in each line item.

Nationally and across all jurisdictions the two highest cost line items for emergency department presentations were medical salary and wages (non-VMO) at $149 and nursing salary and wages at $127 (Table 50). Medical (non-VMO) salary and wages was the highest line item for all jurisdictions except Victoria and Tasmania, and this line item ranged from $115 in Victoria to $242 in the Australian Capital Territory. This was also the line item with the largest range across jurisdictions on an absolute basis. The combination of medical (non-VMO) salary and wages and nursing salary and wages represents at least 45% of the average cost of an emergency department presentation in all jurisdictions (at a national level they represent 50% of the total average). Total labour costs represent over 60% of the total average in all jurisdictions, with the highest proportion reported in Queensland (71.4%).

At the national level, the major non-labour input costs were general goods and services (8.8%) and pathology services (5.1%). Not all jurisdictions reported costs against all line items. In particular the following line items had three or more jurisdictions reporting nil costs: pharmaceuticals – PBS; blood; capital costs; corporate costs; and excluded costs.

21 Australian Hospital Patient Costing Standards v2.0 – 1 March 2011. URL: http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/content/EC0666091A19EBB1CA257B9B0083827A/$File/HospitalPatientCostingStandards_v2_Final_June%202011.doc, accessed 26/11/2014.

Table 50: Average cost for emergency department presentations by line item by jurisdiction, Round 17

Line Item	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National	% of total
Salary & Wages - Medical (non-VMO)	138	115	199	127	144	121	136	242	149	27.0%
Salary & Wages - Medical (VMO)	19	17	2	20	10	-	-	32	13	2.3%
Salary & Wages - Nursing	130	119	134	113	115	137	132	160	127	23.0%
Salary & Wages - Allied Health	25	29	16	13	23	12	16	36	22	4.0%
Salary & Wages - Other	58	58	36	37	46	73	73	80	52	9.3%
On-costs	36	46	27	34	43	49	15	81	37	6.8%
Medical supplies	17	18	16	13	11	18	18	28	16	3.0%
Prostheses	0	0	0	0	0	0	-	-	0	0.0%
Imaging	22	21	13	6	0	-	11	1	16	2.8%
Pathology	45	14	21	53	22	4	9	9	28	5.1%
Pharmaceuticals - non-PBS	7	8	7	8	10	10	10	12	8	1.5%
Pharmaceuticals - PBS	-	1	-	2	-	3	0	0	0	0.1%
Blood	-	0	1	-	-	1	-	1	0	0.1%
Hotel	14	7	4	8	27	5	3	17	10	1.8%
Goods and services	55	46	29	60	51	57	113	105	49	8.8%
Depreciation - building	15	-	2	11	15	5	-	7	7	1.3%
Depreciation - equipment	6	-	8	4	14	5	14	16	6	1.1%
Lease	-	7	-	2	12	1	1	4	3	0.5%
Capital	-	-	0	-	-	-	-	-	0	0.0%
Corporate	-	-	28	6	9	13	-	-	8	1.5%
Excluded costs	2	-	0	-	-	5	0	0	1	0.1%
Total	590	507	542	517	551	517	551	831	553	100.0%

This table reports the average cost for an emergency department presentation by jurisdiction. Costs are reported against each of the prescribed NHCDC line items. Costs include those for admitted and non-admitted presentations. Presentations with a missing URG have been excluded. This table is based on the Cost C (patient costed) table, and as such the results do not reconcile completely to those presented earlier due to adjustments made when summarising patient costs to the cost bucket level. In particular, this table excludes Western Australian data submitted as part of the admitted setting. Values that appear as 0 in the table represent fractional dollar costs that have been rounded. Zero cost items are represented by a '-'. Definitions of the line items can be found in Attachment A of the Australian Patient Costing Standards version 2.0.

5 Non-admitted services product results

Contents of this Chapter:

This chapter presents an analysis of the non-admitted cost data submitted in Round 17 (2012-13) by non-admitted Tier 2 Clinic and makes comparisons to previous Rounds where possible. There were a total of 12,610,771 non-admitted service events reported in Round 17.

No substantial changes between Round 16 and Round 17 were reported in the results. The average cost per non-admitted service event increased by 1.1% between Round 16 and Round 17, and although this varied across jurisdictions the trend in jurisdictional results compared to the national average was similar in Round 17 to Round 16.

5.1 What was the average cost of a non-admitted service event?

The national average cost of a non-admitted service event was $316 (Table 51), an increase of 1.1% from the Round 16 national average of $313. In Victoria and Queensland, the average cost decreased slightly (7.7% and 1.0% respectively). New South Wales provided non-admitted data for the first time in Round 17 while South Australia did not submit data for non-admitted service events. In all other jurisdictions the average cost increased substantially between Round 16 and Round 17, ranging from 11.1% in Tasmania to 60.6% in the Australian Capital Territory. The number of service events did not change substantially for any of these jurisdictions except the Australian Capital Territory, where the number of service events decreased by 8.5%, which could account for some of the apparent increase in average cost. The 1.1% national increase in average cost is explained by the small decrease in average cost in jurisdictions with large volumes of service events (Victoria and Queensland) and a large increase in average cost in the jurisdictions with smaller volumes of service events.

Comparing each jurisdiction to the national average (Figure 19), both Queensland and the Northern Territory were above the national average cost (18.5% and 31.3% respectively). Western Australia reported an average cost of $327, which was just above the national average. As in Round 16, all other jurisdictions were below national average, with the lowest cost being reported in New South Wales ($264, 16.5% below national average).

Table 51: Average cost for non-admitted service events by jurisdiction, Round 16 and 17

Jurisdiction	R16 Average Cost	R17 Average Cost	% Difference
NSW	-	264	na
Vic	293	270	-7.7%
Qld	379	375	-1.0%
SA	-	-	na
WA	258	327	27.0%
Tas	252	280	11.1%
NT	346	415	20.2%
ACT	175	282	60.6%
National	313	316	1.1%

Figure 19: Average cost for non-admitted service event by jurisdiction, Round 17

5.2 How much has the cost of non-admitted service events changed over time?

The national average cost for a non-admitted service event has increased by 1.1% nationally between Round 16 and Round 17, compared to a decrease of 2.8% between Round 15 and Round 16 (Table 52).

Non-admitted service events are classified by Tier 2 Clinics which classify events by the type and specialty of the health care professional and the nature of the service being provided. The highest average cost admitted Tier 2 Clinic in Round 17 was interventional imaging (10.02) at $3,840, which is a substantial increase from the Round 15 average cost of $543 (Round 16 did not report costs for this clinic). The lowest cost clinic was Hydrotherapy (40.05) at $81, an increase from the previously reported cost of $52 in Round 16.

Across the clinics there was substantial variation in cost movements between Round 15 and Round 16 and also between Round 16 and Round 17. The number of non-admitted service events increased substantially between Round 15 and Round 16 (102.7% increase) and also between Round 16 and Round 17 (18.1% increase).

Table 52: Change in non-admitted service events and average cost per service events by Tier 2 Clinic, Round 15 to Round 17

Clinic Code	Description	Service Events			Average Cost			Cost Weight			% change in service events		% change in average cost	
		R15	R16	R17	R15	R16	R17	R15	R16	R17	R15 to R16	R16 to R17	R15 to R16	R16 to R17
10.01	Hyperbaric medicine	2,005	6,665	12,503	1,445	570	479	4.48	1.82	1.51	232.4%	87.6%	-60.5%	-16.1%
10.02	Interventional imaging	7,671	-	62	543	-	3,840	1.69	-	12.14	-100.0%		-100.0%	
10.03	Minor surgical	4,039	11,689	9,902	692	154	319	2.15	0.49	1.01	189.4%	-15.3%	-77.7%	107.0%
10.04	Dental	1,265	14,545	10,358	435	242	439	1.35	0.77	1.39	1049.8%	-28.8%	-44.3%	81.2%
10.05	Angioplasty/angiography	5,153	3,752	9,332	1,200	1,352	1,677	3.72	4.32	5.30	-27.2%	148.7%	12.7%	24.0%
10.06	Endoscopy – gastrointestinal	20,190	32,833	77,195	1,131	1,089	909	3.51	3.48	2.87	62.6%	135.1%	-3.7%	-16.5%
10.07	Endoscopy – urological/gynaecological	12,324	20,310	20,900	292	271	410	0.90	0.86	1.29	64.8%	2.9%	-7.3%	51.4%
10.08	Endoscopy – orthopaedic	1,076	1,360	1,104	318	242	313	0.99	0.77	0.99	26.4%	-18.8%	-24.0%	29.4%
10.09	Endoscopy – respiratory/ENT	413	16,619	1,808	3,122	256	851	9.69	0.82	2.69	3924.0%	-89.1%	-91.8%	232.5%
10.10	Renal dialysis – hospital delivered	11,059	10,663	22,556	756	501	673	2.35	1.60	2.13	-3.6%	111.5%	-33.7%	34.3%
10.11	Medical oncology (treatment)	59,322	92,358	112,616	709	794	831	2.20	2.54	2.63	55.7%	21.9%	12.0%	4.6%

Clinic Code	Description	Service Events			Average Cost			Cost Weight			% change in service events		% change in average cost	
		R15	R16	R17	R15	R16	R17	R15	R16	R17	R15 to R16	R16 to R17	R15 to R16	R16 to R17
10.12	Radiation oncology (treatment)	286,336	124,648	158,522	336	488	411	1.04	1.56	1.30	-56.5%	27.2%	45.3%	-15.8%
10.13	Minor medical procedures	472	23,426	28,789	1,291	379	594	4.00	1.21	1.88	4863.1%	22.9%	-70.7%	56.8%
10.14	Pain management interventions	-	915	1,961	-	181	439	-	0.58	1.39		114.3%		142.3%
10.16	Renal dialysis – peritoneal dialysis – home delivered	-	-	23	-	-	868	-	-	2.74				
10.17	Total parenteral nutrition – home delivered	-	-	8	-	-	1,991	-	-	6.29				
20.01	Transplants	22,744	45,372	66,838	863	661	692	2.68	2.11	2.19	99.5%	47.3%	-23.5%	4.8%
20.02	Anaesthetics	20,897	86,650	175,698	288	477	397	0.89	1.52	1.25	314.7%	102.8%	65.6%	-16.8%
20.03	Pain management	19,983	36,930	46,726	511	501	495	1.58	1.60	1.56	84.8%	26.5%	-2.0%	-1.1%
20.04	Developmental disabilities	8,358	22,524	81,240	377	354	378	1.17	1.13	1.20	169.5%	260.7%	-6.2%	7.0%
20.05	General medicine	243,364	504,770	236,535	309	374	325	0.96	1.19	1.03	107.4%	-53.1%	20.9%	-13.0%
20.06	General practice and primary care	73,681	150,209	146,695	199	268	469	0.62	0.86	1.48	103.9%	-2.3%	34.8%	74.7%
20.07	General surgery	191,988	293,581	331,427	280	270	297	0.87	0.86	0.94	52.9%	12.9%	-3.5%	10.0%
20.08	Genetics	1,056	5,428	18,837	261	620	642	0.81	1.98	2.03	414.0%	247.0%	137.6%	3.5%
20.09	Geriatric medicine	10,613	17,013	41,538	355	399	501	1.10	1.27	1.58	60.3%	144.2%	12.4%	25.6%
20.10	Haematology	61,074	156,859	155,756	631	562	587	1.96	1.80	1.86	156.8%	-0.7%	-10.9%	4.5%
20.11	Paediatric medicine	97,329	143,245	125,349	349	308	330	1.08	0.99	1.04	47.2%	-12.5%	-11.6%	7.1%
20.12	Paediatric surgery	10,191	17,592	30,264	388	246	305	1.20	0.79	0.96	72.6%	72.0%	-36.5%	23.8%
20.13	Palliative care	21,300	40,412	28,620	214	302	299	0.66	0.97	0.95	89.7%	-29.2%	41.2%	-0.9%
20.14	Epilepsy	5,288	4,659	11,432	330	411	310	1.02	1.31	0.98	-11.9%	145.4%	24.7%	-24.8%
20.15	Neurology	27,034	77,058	113,061	368	385	396	1.14	1.23	1.25	185.0%	46.7%	4.7%	2.7%
20.16	Neurosurgery	17,697	52,602	64,565	391	429	448	1.21	1.37	1.42	197.2%	22.7%	9.8%	4.3%
20.17	Ophthalmology	99,045	285,488	363,209	203	216	222	0.63	0.69	0.70	188.2%	27.2%	6.6%	2.7%
20.18	Ear, nose and throat (ENT)	61,982	123,514	159,088	262	296	254	0.81	0.95	0.80	99.3%	28.8%	13.0%	-14.2%
20.19	Respiratory	64,303	114,937	141,670	366	417	338	1.13	1.33	1.07	78.7%	23.3%	13.9%	-19.0%
20.20	Respiratory – cystic fibrosis	5,081	10,041	13,917	1,443	875	708	4.48	2.80	2.24	97.6%	38.6%	-39.4%	-19.1%

Clinic Code	Description	Service Events			Average Cost			Cost Weight			% change in service events		% change in average cost	
		R15	R16	R17	R15	R16	R17	R15	R16	R17	R15 to R16	R16 to R17	R15 to R16	R16 to R17
20.21	Anti-coagulant screening and management	1	1,369	3,330	42	342	407	0.13	1.09	1.29	136800.0%	143.2%	715.1%	18.9%
20.22	Cardiology	137,276	197,081	239,813	336	413	359	1.04	1.32	1.13	43.6%	21.7%	23.0%	-13.2%
20.23	Cardiothoracic	10,494	20,938	23,271	296	582	495	0.92	1.86	1.57	99.5%	11.1%	96.7%	-14.9%
20.24	Vascular surgery	25,305	63,672	59,170	335	266	304	1.04	0.85	0.96	151.6%	-7.1%	-20.5%	14.2%
20.25	Gastroenterology	65,004	136,560	171,274	633	478	531	1.96	1.53	1.68	110.1%	25.4%	-24.6%	11.2%
20.26	Hepatobiliary	1,065	13,469	43,831	588	577	669	1.82	1.84	2.11	1164.7%	225.4%	-1.8%	15.8%
20.27	Craniofacial	1,684	17,020	19,864	540	284	328	1.68	0.91	1.04	910.7%	16.7%	-47.3%	15.3%
20.28	Metabolic bone	1,241	3,888	8,972	185	534	387	0.58	1.71	1.22	213.3%	130.8%	188.7%	-27.5%
20.29	Orthopaedics	384,328	656,971	804,873	229	241	233	0.71	0.77	0.74	70.9%	22.5%	5.3%	-3.5%
20.30	Rheumatology	24,208	60,887	82,606	393	399	365	1.22	1.27	1.15	151.5%	35.7%	1.4%	-8.4%
20.31	Spinal	3,432	5,893	8,330	714	415	326	2.22	1.33	1.03	71.7%	41.4%	-41.9%	-21.5%
20.32	Breast	7,116	38,257	41,981	175	448	461	0.54	1.43	1.46	437.6%	9.7%	155.7%	3.1%
20.33	Dermatology	33,777	91,680	128,787	289	263	272	0.90	0.84	0.86	171.4%	40.5%	-8.9%	3.3%
20.34	Endocrinology	38,018	136,977	206,591	446	366	350	1.38	1.17	1.11	260.3%	50.8%	-18.0%	-4.3%
20.35	Nephrology	73,120	132,614	215,874	632	584	464	1.96	1.87	1.47	81.4%	62.8%	-7.6%	-20.6%
20.36	Urology	64,846	139,037	145,337	283	307	287	0.88	0.98	0.91	114.4%	4.5%	8.5%	-6.5%
20.37	Assisted reproductive technology	-	7,186	16,967	-	330	432	-	1.05	1.37		136.1%		31.2%
20.38	Gynaecology	95,749	176,983	224,394	284	266	254	0.88	0.85	0.80	84.8%	26.8%	-6.5%	-4.3%
20.39	Gynaecology oncology	57,321	22,722	28,764	223	407	351	0.69	1.30	1.11	-60.4%	26.6%	82.3%	-13.7%
20.40	Obstetrics	378,985	714,418	826,182	216	183	221	0.67	0.58	0.70	88.5%	15.6%	-15.3%	20.6%
20.41	Immunology	9,930	45,341	80,961	641	527	458	1.99	1.68	1.45	356.6%	78.6%	-17.8%	-13.0%
20.42	Medical oncology (consultation)	111,773	205,959	291,248	570	691	562	1.77	2.21	1.78	84.3%	41.4%	21.3%	-18.6%
20.43	Radiation oncology (consultation)	81,853	88,248	83,604	518	686	374	1.61	2.19	1.18	7.8%	-5.3%	32.4%	-45.4%
20.44	Infectious diseases	24,253	65,486	80,792	565	899	717	1.75	2.87	2.26	170.0%	23.4%	59.1%	-20.3%
20.45	Psychiatry	56,822	93,438	71,899	1,105	809	1,470	3.43	2.58	4.65	64.4%	-23.1%	-26.8%	81.7%
20.46	Plastic and reconstructive surgery	62,666	199,879	189,543	193	219	187	0.60	0.70	0.59	219.0%	-5.2%	13.7%	-14.7%

Clinic Code	Description	Service Events			Average Cost			Cost Weight			% change in service events		% change in average cost	
		R15	R16	R17	R15	R16	R17	R15	R16	R17	R15 to R16	R16 to R17	R15 to R16	R16 to R17
20.47	Rehabilitation	15,448	30,943	70,007	733	887	433	2.27	2.83	1.37	100.3%	126.2%	20.9%	-51.1%
20.48	Multidisciplinary burns clinic	1,747	14,938	13,620	797	271	166	2.47	0.87	0.53	755.1%	-8.8%	-66.0%	-38.6%
20.49	Geriatric evaluation and management (GEM)	19	1,127	5,674	222	65	514	0.69	0.21	1.62	5831.6%	403.5%	-70.9%	696.7%
20.50	Psychogeriatric	1,034	1,670	273	201	341	524	0.62	1.09	1.65	61.5%	-83.7%	69.7%	53.5%
20.51	Sleep disorders	6,812	11,236	28,145	702	761	472	2.18	2.43	1.49	64.9%	150.5%	8.4%	-37.9%
30.01	General imaging	150,944	420,571	210,847	242	216	289	0.75	0.69	0.91	178.6%	-49.9%	-10.9%	34.0%
30.02	Magnetic resonance imaging (MRI)	12,107	6,651	4,196	765	615	675	2.37	1.97	2.13	-45.1%	-36.9%	-19.6%	9.8%
30.03	Computerised tomography (CT)	10,785	6,292	5,257	417	478	315	1.29	1.53	1.00	-41.7%	-16.4%	14.5%	-34.0%
30.04	Nuclear medicine	3,455	1,857	1,366	1,163	1,400	1,283	3.61	4.47	4.05	-46.3%	-26.4%	20.4%	-8.4%
30.05	Pathology (microbiology, haematology, biochemistry)	101,701	612,467	73,468	121	59	127	0.37	0.19	0.40	502.2%	-88.0%	-50.9%	112.9%
30.06	Positron emission tomography (PET)	1,964	1,476	1,207	1,918	2,393	2,490	5.95	7.65	7.87	-24.8%	-18.2%	24.8%	4.0%
30.07	Mammography screening	18,713	16,336	14,221	330	322	405	1.02	1.03	1.28	-12.7%	-12.9%	-2.5%	25.9%
30.08	Clinical measurement	69,719	145,222	205,928	354	260	313	1.10	0.83	0.99	108.3%	41.8%	-26.6%	20.4%
40.01	Aboriginal and Torres Strait Islander peoples health clinic	37	2,098	17,928	289	69	348	0.90	0.22	1.10	5570.3%	754.5%	-76.1%	402.6%
40.02	Aged care assessment	21,665	22,539	41,140	114	249	228	0.35	0.80	0.72	4.0%	82.5%	118.7%	-8.5%
40.03	Aids and Appliances	3,211	30,453	59,817	176	951	241	0.55	3.04	0.76	848.4%	96.4%	440.5%	-74.7%
40.04	Clinical Pharmacy	158,001	296,961	194,056	407	381	410	1.26	1.22	1.30	87.9%	-34.7%	-6.5%	7.7%
40.05	Hydrotherapy	239	31,593	56,728	348	52	81	1.08	0.17	0.25	13118.8%	79.6%	-85.1%	55.4%
40.06	Occupational therapy	61,275	195,354	251,480	193	231	213	0.60	0.74	0.67	218.8%	28.7%	19.6%	-7.7%
40.07	Pre-Admission and Pre-Anaesthesia	158,326	237,204	267,407	330	319	304	1.02	1.02	0.96	49.8%	12.7%	-3.4%	-4.7%
40.08	Primary health care	372,986	610,298	865,509	278	342	251	0.86	1.09	0.79	63.6%	41.8%	23.1%	-26.7%
40.09	Physiotherapy	182,405	572,010	747,291	189	227	178	0.59	0.73	0.56	213.6%	30.6%	20.4%	-21.6%
40.10	Sexual health	-	3,540	24,930	-	927	299	-	2.96	0.95		604.2%		-67.7%
40.11	Social Work	37,887	127,768	132,933	294	206	299	0.91	0.66	0.95	237.2%	4.0%	-29.8%	45.0%

Clinic Code	Description	Service Events			Average Cost			Cost Weight			% change in service events		% change in average cost	
		R15	R16	R17	R15	R16	R17	R15	R16	R17	R15 to R16	R16 to R17	R15 to R16	R16 to R17
40.12	Rehabilitation	6,954	45,323	34,142	157	152	233	0.49	0.49	0.74	551.8%	-24.7%	-3.0%	52.9%
40.13	Wound management	38,498	52,500	162,928	194	203	176	0.60	0.65	0.56	36.4%	210.3%	4.6%	-13.1%
40.14	Neuropsychology	1,728	1,045	5,408	528	651	495	1.64	2.08	1.57	-39.5%	417.5%	23.2%	-23.9%
40.15	Optometry	2,351	6,110	13,345	747	135	218	2.32	0.43	0.69	159.9%	118.4%	-81.9%	61.2%
40.16	Orthoptics	5,090	24,118	34,613	97	156	121	0.30	0.50	0.38	373.8%	43.5%	61.1%	-22.4%
40.17	Audiology	10,530	29,511	50,303	474	325	299	1.47	1.04	0.94	180.3%	70.5%	-31.5%	-8.0%
40.18	Speech pathology	21,818	93,796	109,398	220	291	340	0.68	0.93	1.07	329.9%	16.6%	32.1%	17.0%
40.19	Asthma	991	733	4,886	689	541	443	2.14	1.73	1.40	-26.0%	566.6%	-21.5%	-18.0%
40.20	Chronic Obstructive Pulmonary (Disease)	-	291	4,155	-	171	256	-	0.55	0.81		1327.8%		49.6%
40.21	Cardiac rehabilitation	7,741	30,529	74,988	434	331	229	1.35	1.06	0.72	294.4%	145.6%	-23.7%	-30.8%
40.22	Stomal therapy	6,275	8,121	17,015	213	225	288	0.66	0.72	0.91	29.4%	109.5%	5.8%	27.8%
40.23	Nutrition/dietetics	47,602	104,959	144,441	142	204	278	0.44	0.65	0.88	120.5%	37.6%	43.8%	36.2%
40.24	Orthotics	4,846	24,149	38,240	246	204	249	0.76	0.65	0.79	398.3%	58.4%	-17.2%	22.2%
40.25	Podiatry	24,884	53,297	79,277	335	239	195	1.04	0.76	0.62	114.2%	48.7%	-28.6%	-18.3%
40.26	Diabetes	74,895	153,516	213,840	264	346	339	0.82	1.11	1.07	105.0%	39.3%	31.1%	-2.1%
40.27	Family planning	669	1,052	842	297	99	184	0.92	0.32	0.58	57.2%	-20.0%	-66.5%	85.6%
40.28	Midwifery and maternity	87,576	386,458	891,518	158	166	171	0.49	0.53	0.54	341.3%	130.7%	5.0%	3.3%
40.29	Psychology	11,253	32,666	65,000	475	444	345	1.47	1.42	1.09	190.3%	99.0%	-6.5%	-22.4%
40.30	Alcohol and other drugs	24,268	24,765	68,386	184	269	352	0.57	0.86	1.11	2.0%	176.1%	46.4%	30.6%
40.31	Burns	9,880	14,727	16,022	200	434	301	0.62	1.39	0.95	49.1%	8.8%	117.2%	-30.6%
40.32	Continence	1,373	17,125	27,753	349	206	214	1.08	0.66	0.68	1147.3%	62.1%	-41.0%	4.0%
40.33	General counselling	13,010	18,650	5,063	482	267	188	1.50	0.85	0.59	43.4%	-72.9%	-44.6%	-29.7%
40.34	Specialist mental health	251,227	271,122	8,219	166	184	504	0.51	0.59	1.59	7.9%	-97.0%	10.7%	174.1%
40.35	Palliative care	-	-	13,396	-	-	580	-	-	1.83				
40.36	Geriatric Evaluation and Management (GEM)	-	-	3,902	-	-	306	-	-	0.97				
40.38	Infectious diseases	-	-	3,540	-	-	507	-	-	1.60				

Clinic Code	Description	Service Events			Average Cost			Cost Weight			% change in service events		% change in average cost	
		R15	R16	R17	R15	R16	R17	R15	R16	R17	R15 to R16	R16 to R17	R15 to R16	R16 to R17
40.39	Neurology	-	-	8,058	-	-	407	-	-	1.29				
40.40	Respiratory	-	-	11,080	-	-	222	-	-	0.70				
40.41	Gastroenterology	-	-	10,991	-	-	475	-	-	1.50				
40.42	Circulatory	-	-	3,168	-	-	358	-	-	1.13				
40.43	Hepatobiliary	-	-	64	-	-	86	-	-	0.27				
40.44	Orthopaedics	-	-	19,684	-	-	228	-	-	0.72				
40.45	Dermatology	-	-	947	-	-	201	-	-	0.63				
40.46	Endocrinology	-	-	80,704	-	-	193	-	-	0.61				
40.47	Nephrology	-	-	3,376	-	-	240	-	-	0.76				
40.48	Haematology and immunology	-	-	3,667	-	-	353	-	-	1.11				
40.49	Gynaecology	-	-	2,678	-	-	252	-	-	0.80				
40.50	Urology	-	-	1,265	-	-	343	-	-	1.08				
40.51	Breast	-	-	10,121	-	-	255	-	-	0.81				
40.52	Oncology	-	-	15,448	-	-	272	-	-	0.86				
40.53	General medicine	-	-	2,497	-	-	191	-	-	0.60				
40.54	General surgery	-	-	5,736	-	-	242	-	-	0.76				
40.55	Paediatrics	-	-	71,133	-	-	144	-	-	0.46				
40.56	Falls prevention	-	-	1,795	-	-	181	-	-	0.57				
40.57	Cognition and memory	-	-	3,968	-	-	237	-	-	0.75				
40.58	Hospital avoidance programs	-	-	7,137	-	-	254	-	-	0.80				
40.59	Post-acute care	-	-	37,456	-	-	385	-	-	1.22				
99.96	Unclassified	-	-	7,354	-	-	793	-	-	2.50				
99.97	Unclassified	-	-	34	-	-	226	-	-	0.72				
National	**All Clinics**	**5,268,539**	**10,679,807**	**12,610,771**	**322**	**313**	**316**	**1.00**	**1.00**	**1.00**	**102.7%**	**18.1%**	**-2.8%**	**1.1%**

This table reports the number of service events, cost weight and average cost per service event, by Tier 2 Clinic, for Round 15, Round 16 and Round 17. It also reports the change in number of service events and average cost per service event between Round 16 and Round 17. The results include those for cost-modelled sites where applicable, except for those cost modelled sites from South Australia in Round 15. There are additional clinics included in this table compared to the cost weight table, as the cost weight table is published using Tier 2 version 1.2 while some jurisdictions reported in version 2.0. Values that appear as 0 in the table represent fractional amounts that have been rounded. Zero results are represented by a '-'.

5.3 What are the major input costs for non-admitted services?

Line items are groups of general ledger expenditure account codes that describe the input type of the expense (rather than the function of the expense), and define the resources being used by a cost centre. For example, a hospital might have line items for drugs, prostheses, nursing salaries or medical labour. There is a standard set of line items defined in the Australian Hospital Patient Costing Standards v2.0 – 1 March 2011 (AHPCS)[22]. These are listed in Table 61 of 0. Attachment A of the AHPCS provides the full definition of costs prescribed as included in each line item.

Nationally the highest cost line item for non-admitted service events at $59 was medical (non-VMO) salary and wages (Table 53). This was also the largest line item for all jurisdictions except the Australian Capital Territory and New South Wales, which reported nursing salary and wages as the largest line item at $52 and $49 respectively. This was followed by allied health salary and wages in the Australian Capital Territory at $44, and medical (non-VMO) salary and wages at in New South Wales at $45. The second largest line item at the national level was nursing salary and wages at $47. However this differs at a jurisdictional level – Victoria reported other salary and wages as the second largest line item ($38), Western Australia reported pharmaceuticals (non-PBS) ($55), the Northern Territory reported goods and services ($90) and the Australian Capital Territory reported medical (non-VMO) salary and wages ($35).

Labour costs represented at least 50% of total costs both nationally and across all jurisdictions, with the highest proportion of labour costs reported in Victoria (63.3% of total average cost per service event) and the lowest proportion in Western Australia (52.9% of total average cost per service event). The major non-labour input costs were general goods and services, and pharmaceutical costs. Not all jurisdictions reported costs against all line items. In particular the following line items had three or more jurisdictions[23] reporting nil costs: pharmaceuticals – PBS; blood; capital costs; corporate costs; and excluded costs.

22 Australian Hospital Patient Costing Standards v2.0 – 1 March 2011. URL: http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/content/EC0666091A19EBB1CA257B9B0083827A/$File/HospitalPatientCostingStandards_v2_Final_June%202011.doc, accessed 26/11/2014.

23 The count of three or more jurisdictions excludes South Australia, which did not report data for non-admitted service events.

Table 53: Average cost for non-admitted service events by line item by jurisdiction, Round 17

Line Item	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National	% of total
Salary & Wages - Medical (non-VMO)	45	41	74	-	70	74	98	35	59	18.5%
Salary & Wages - Medical (VMO)	11	37	4	-	4	0	-	5	11	3.6%
Salary & Wages - Nursing	49	26	58	-	30	39	69	52	47	14.8%
Salary & Wages - Allied Health	32	29	47	-	41	31	27	44	38	12.1%
Salary & Wages - Other	29	38	33	-	28	30	46	28	32	10.1%
On-costs	17	24	18	-	19	26	8	34	20	6.2%
Medical supplies	12	9	11	-	11	9	26	7	11	3.3%
Prostheses	1	0	1	-	2	-	-	0	1	0.2%
Imaging	3	3	5	-	0	-	17	0	4	1.1%
Pathology	10	5	8	-	16	2	3	3	8	2.7%
Pharmaceuticals - non-PBS	12	6	40	-	55	9	15	6	25	7.9%
Pharmaceuticals - PBS	-	30	-	-	-	18	0	6	6	1.8%
Blood	-	0	2	-	-	1	-	-	1	0.2%
Hotel	5	2	1	-	9	1	2	5	3	1.1%
Goods and services	27	18	43	-	23	27	90	41	33	10.3%
Depreciation - building	7	-	2	-	5	3	-	6	4	1.1%
Depreciation - equipment	3	-	6	-	10	3	12	6	5	1.5%
Lease	-	4	-	-	1	1	3	3	1	0.3%
Capital	-	-	0	-	-	-	-	-	0	0.0%
Corporate	-	-	22	-	5	7	-	-	9	2.7%
Excluded costs	3	-	-	-	-	3	0	1	1	0.3%
Total	267	270	375	-	327	283	416	282	317	100.0%

This table reports the average cost for a non-admitted service event by jurisdiction. Costs are reported against each of the prescribed NHCDC line items. Service events with a missing Tier 2 clinic have been excluded. This table is based on the Cost C (patient costed) table, and as such the results do not reconcile completely to those presented earlier due to adjustments made when summarising patient costs to the cost bucket level. Values that appear as 0 in the table represent fractional dollar costs that have been rounded. Zero cost items are represented by a '-'. Definitions of the line items can be found in Attachment A of the Australian Patient Costing Standards version 2.0.

6 Subacute product results

Contents of this Chapter:

This chapter presents an analysis of the subacute cost data submitted in Round 17 (2012-13) by care type and AN-SNAP class, and makes comparisons to previous Rounds where possible. The admitted subacute and non-acute episodes of care presented in this chapter include all separations with a care type of rehabilitation care (care type '2'), palliative care (care type '3'), geriatric evaluation and management (care type '4'), psychogeriatric care (care type '5') or maintenance care (care type '6'). There were a total of 167,663 subacute separations reported in Round 17.

The other product types (acute, emergency, and non-admitted) are presented by average cost per service event for each item in the respective classification system (e.g. average cost per separation for each DRG). This allows casemix to be taken into account when comparing costs, as different types of service events will require different levels of resources. As the classification system for the subacute product is not yet adopted widely or consistently enough to be used as a reporting mechanism in this way, this chapter instead presents average cost per separation per bed day.

The results for the subacute product in Round 17 were similar to Round 16. The national average cost per subacute presentation increased by 1.4% to $12,267, although the movement between Round 16 and Round 17 average costs at the jurisdictional level varied substantially. The use of AN-SNAP classification has increased amongst the majority of jurisdictions, although there is still variation between the different versions used to report.

6.1 What was the average cost of a subacute separation?

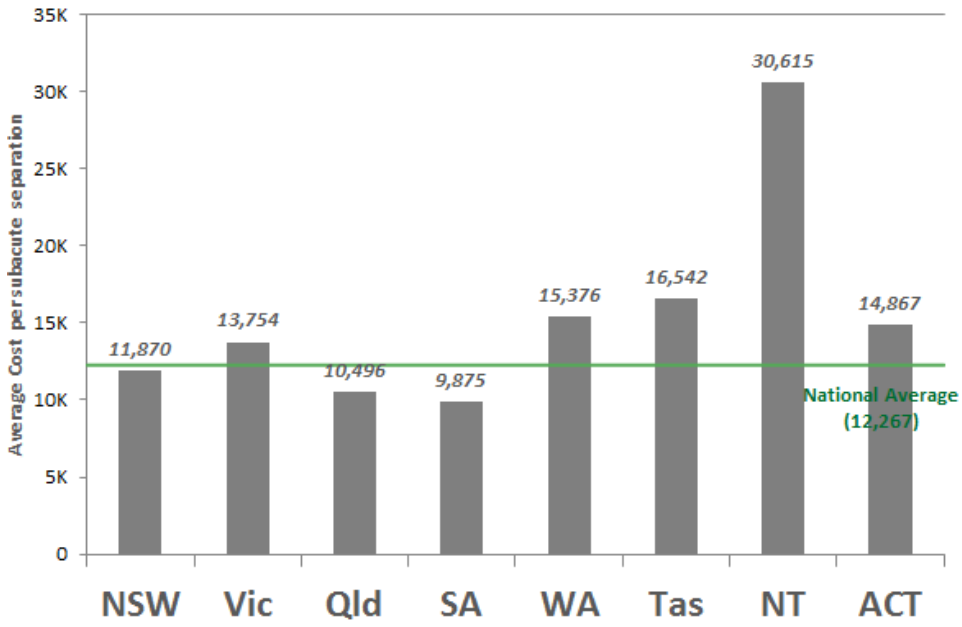
The national average cost of a subacute presentation was $12,267 (Table 54), an increase of 1.4% from the Round 16 national average of $12,098. In Victoria and Queensland, the average cost decreased slightly (4.7% and 4.6% respectively). The remaining jurisdictions reported an increase in the average cost, substantially so for two jurisdictions – Tasmania (47.7% increase) and the Northern Territory (91.0% increase). The Northern Territory reported the highest average cost ($30,615) which was substantially higher (149.6%) than the national average.

Comparing each jurisdiction to the national average (Figure 20), the relative differences between jurisdictions in Round 17 was similar to Round 16, with the exception of Tasmania and the Northern Territory. Tasmania reported an average cost 34.8% higher than the national average in Round 17 but 7.4% lower than the national average in Round 16. The Northern Territory reported an average cost 149.6% higher than the national average in Round 17 but only 32.5% higher than the national average in Round 16. Of the other jurisdictions, New South Wales, Queensland and South Australia reported average costs below the national average of $12,267, while the remainder reported average costs higher than the national average.

Table 54: Average cost for subacute separations by jurisdiction, Round 16 and 17

Jurisdiction	R16 Average Cost	R17 Average Cost	% Difference
NSW	11,016	11,870	7.8%
Vic	14,439	13,754	-4.7%
Qld	11,001	10,496	-4.6%
SA	9,578	9,875	3.1%
WA	14,895	15,376	3.2%
Tas	11,200	16,542	47.7%
NT	16,027	30,615	91.0%
ACT	14,559	14,867	2.1%
National	12,098	12,267	1.4%

Figure 20: Average cost for subacute separations by jurisdiction, Round 17



6.2 How does the average cost of a subacute separation vary across subacute care types?

The national average cost of a subacute separation ranged from $10,366 for palliative care to $28,699 for psychogeriatric care (Table 55). Much of this variation is accounted for by differences in length of stay in subacute care, as the national average cost of a subacute bed day ranged from $824 for geriatric evaluation and maintenance to $1,111 for psychogeriatric care.

Rehabilitation (care type '2') accounted for the majority (53.4%) of the NHCDC subacute sample by volume of activity. The national average cost per separation for rehabilitation care in Round 17 was $11,855, which was 3.4% lower than the national average cost across all care types. South Australia had the lowest average cost per separation ($5,365) and the Northern Territory had the highest average cost per separation ($29,773). On a per day basis, Victoria had the lowest average cost ($754 per day) and the Australian Capital Territory had the highest average cost ($1,258 per day).

The jurisdiction reporting the lowest average cost varied across the different care types on a per separation basis. On the other hand, the Northern Territory consistently reported costs per separation substantially above the national average (typically more than twice the national average) in all care types, with the exception of psychogeriatric for which less than five separations were reported. On a per day basis, Victoria consistently reported the lowest average cost (typically greater than 15% below the national average) in all care types, except psychogeriatric for which Victoria did not submit any data. On a per day basis, the Northern Territory reported the highest cost across two care types, i.e. palliative care and GEM, and the ACT reported the highest cost per day for rehabilitation and maintenance.

Table 55: Average cost per subacute separation by care type, Round 17

Jurisdiction	Rehabilitation			Palliative care			GEM			Psychogeriatric			Maintenance		
	Seps	Avg cost per sep ($)	Avg cost per day ($)	Seps	Avg cost per sep ($)	Avg cost per day ($)	Seps	Avg cost per sep ($)	Avg cost per day ($)	Seps	Avg cost per sep ($)	Avg cost per day ($)	Seps	Avg cost per sep ($)	Avg cost per day ($)
NSW	29,306	13,118	980	10,842	10,306	1,032	4,447	8,913	858	619	19,987	899	7,099	10,253	886
Vic	13,494	14,745	754	6,266	10,213	885	16,050	14,126	719	-	-	-	149	32,974	762
Qld	26,180	9,285	1,039	8,224	8,999	1,225	4,438	14,302	1,076	445	17,764	1,011	7,080	13,870	1,065
SA	7,265	5,365	971	1,129	14,618	1,303	1,405	17,316	1,050	239	40,988	1,126	1,878	14,946	1,116
WA	9,747	14,567	848	953	12,034	1,355	1,867	11,956	1,249	633	41,277	1,289	899	16,549	1,162
Tas	728	19,882	969	535	12,280	1,389	302	17,752	999	*****	*****	*****	320	15,073	915
NT	251	29,773	857	305	22,570	2,170	93	26,087	1,761	*****	*****	*****	155	50,921	1,189
ACT	2,532	12,517	1,258	580	13,309	1,262	449	13,975	1,162	25	8,740	954	729	25,027	1,239
National	89,503	11,855	925	28,834	10,366	1,083	29,051	13,443	824	1,966	28,699	1,111	18,309	13,644	1,018

This table reports the number of separations, average cost per separation, and average cost separation per day, by jurisdiction, for Round 17. Results are divided into the different care types for subacute separations - rehabilitation care (care type '2'), palliative care ('3'), geriatric evaluation and management ('4'), psychogeriatric care ('5') and maintenance care ('6'). Where Round 16 results are included in the discussion this includes cost modelled sites. Values that appear as 0 in the table represent fractional amounts that have been rounded. Zero results are represented by a '-'. Where a reported result is based on less than five separations, the figures have been replaced by asterisks (*****).

6.3 How widely is AN-SNAP used in the costing of admitted subacute services?

The Australian National - Subacute and Non-Acute Patient (AN-SNAP) classification is the IHPA endorsed classification system for ABF purposes. Table 1 shows that there has been a fall in the number of hospitals submitting by care type (by 6.4%), but a rise in the number of hospitals submitting by AN-SNAP by 50.9%.

The Australian Capital Territory had two sites submitting subacute product data under AN-SNAP, however the majority (91.7%) of this data was reported as 'Unclassified Encounters', meaning that no AN-SNAP information was provided or it was unable to be matched to a valid AN-SNAP class. Similarly, South Australia had 89.6% of separations reported as 'Unclassified Encounters', and 100.0% of separations reported by the Northern Territory and Tasmania were unable to be classified to any AN-SNAP class. Queensland reported approximately 63% of separations as unclassified, while Victoria had less than 3% of separations reported as unclassified and WA submitted SNAP classes for all subacute separations.

NSW submitted SNAP data for 45% of subacute service events, this included at the phase level for palliative care data and at the episode level for other classes.

The current version of the AN-SNAP classification is version 3, and all AN-SNAP version 2 and version 1 classes that are identical to those in version 3 have been reported under version 3 in the results provided in Table 56. The use of different versions of AN-SNAP varies by jurisdiction although has improved since previous Rounds. In Round 17 the only jurisdiction still submitting data in AN-SNAP version 1 classes that did not map to version 3 was Queensland (9.0% of separations under various codes).

Table 56: Average cost per subacute separation (by phase for Palliative Care) by AN-SNAP, by jurisdiction, Round 17

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
AN-SNAP Version 3																	
Overnight Palliative Care																	
3-101	Palliative care, admit for assessment only	0.1%	1,333														
3-102	Stable, RUG-ADL 4	2.1%	6,397	1.7%	9,586	0.3%	8,588	-	-	-	-	-	-	-	-	-	-
3-103	Stable, RUG-ADL 5-17	5.2%	7,164	2.0%	14,224	0.4%	11,052	-	-	-	-	-	-	-	-	-	-
3-104	Stable, RUG 18	1.0%	6,286	0.3%	11,987	0.1%	9,173	-	-	-	-	-	-	-	-	-	-
3-105	Unstable, RUG 4-17	7.4%	2,916	0.8%	8,035	2.9%	11,822	-	-	-	-	-	-	-	-	-	-
3-106	Unstable, RUG-ADL 18	1.4%	2,427	0.1%	6,324	0.4%	9,699	-	-	-	-	-	-	-	-	-	-
3-107	Deteriorating, RUG-ADL 4-14	2.1%	5,021	0.8%	10,766	-	-	-	-	-	-	-	-	-	-	-	-
3-108	Deteriorating, RUG-ADL 15-18, age <=52	0.3%	4,447	0.1%	9,356	-	-	-	-	-	-	-	-	-	-	-	-
3-109	Deteriorating, RUG-ADL 15-18, age >=53	4.2%	4,391	0.3%	6,388	-	-	-	-	-	-	-	-	-	-	-	-
3-110	Terminal, RUG 4-16	0.5%	2,307	3.6%	11,064	0.2%	4,854	-	-	-	-	-	-	-	-	-	-
3-111	Terminal, RUG-ADL 17-18	4.7%	2,674	6.3%	9,293	0.9%	3,605	-	-	-	-	-	-	-	-	-	-
3-112	Bereavement	-	-	-	-	0.1%	2,207	-	-	-	-	-	-	-	-	-	-
Overnight Rehabilitation																	
3-201	Admit for assessment only	0.6%	8,275	2.9%	1,996	0.2%	25,888	-	-	0.2%	4,111	-	-	-	-	-	-
3-202	Brain, Neuro, Spine and MMT, FIM 13	0.1%	100,447	0.3%	55,149	0.2%	57,378	0.0%	1,518	0.1%	74,416	-	-	-	-	0.0%	223,329
3-203	All other impairments, FIM 13	0.3%	29,281	0.5%	28,781	0.3%	24,550	0.0%	134,753	0.5%	42,261	-	-	-	-	0.1%	42,074
3-204	Stroke ,Mot 63-91,Cog 20-35	0.6%	13,679	1.1%	11,363	0.8%	15,467	-	-	0.9%	12,841	-	-	-	-	0.8%	40,411
3-205	Stroke, FIM motor 63-91, FIM cognition 5-19	0.1%	26,237	0.3%	15,923	0.1%	22,446	-	-	0.1%	23,311	-	-	-	-	0.0%	22,005
3-206	Stroke, FIM motor 47-62, FIM cognition 16-35	0.7%	19,122	1.0%	17,415	-	-	-	-	0.6%	23,377	-	-	-	-	0.3%	51,524
3-207	Stroke, FIM motor 47-62, FIM cognition 5-15	0.1%	24,237	0.2%	21,640	-	-	-	-	0.1%	37,224	-	-	-	-	0.0%	27,905
3-208	Stroke, Mot 14-46, Age>=75	0.7%	27,765	1.0%	25,246	0.5%	28,185	-	-	0.8%	38,190	-	-	-	-	0.3%	38,430
3-209	Stroke and Burns, motor 14-46, age<=74	0.5%	35,800	0.9%	32,111	0.5%	39,734	-	-	0.9%	49,774	-	-	-	-	0.3%	69,671

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
AN-SNAP Version 3																	
3-210	Brain Dysfunction, FIM motor 56-91, FIM cognition 32-35	0.1%	13,862	0.1%	9,384	-	-	0.1%	9,556	0.2%	9,316	-	-	-	-	0.0%	30,250
3-211	Brain Dysfunction, FIM motor 56-91, FIM cognition 24-31	0.1%	20,523	0.2%	11,813	-	-	0.1%	12,260	0.4%	15,358	-	-	-	-	0.1%	22,556
3-212	Brain Dysfunction, motor 56-91, cog 20-23	0.1%	26,262	0.1%	12,876	-	-	0.0%	19,154	0.1%	24,021	-	-	-	-	0.0%	12,359
3-213	Brain Dysfunction, FIM motor 56-91, FIM cognition 5-19	0.1%	60,273	0.2%	21,936	-	-	0.0%	22,112	0.2%	32,155	-	-	-	-	0.0%	52,422
3-214	Brain Dysfunction, FIM motor 24-55	0.3%	31,155	0.3%	23,189	-	-	0.1%	40,580	0.5%	33,046	-	-	-	-	0.1%	39,618
3-215	Brain Dysfunction, motor 14-23	0.1%	50,615	0.1%	39,066	-	-	0.0%	47,645	0.1%	32,510	-	-	-	-	0.1%	111,321
3-216	Neurological, motor 63-91	0.2%	14,766	1.0%	11,204	-	-	0.1%	11,528	0.6%	13,152	-	-	-	-	0.1%	26,623
3-217	Neurological, FIM motor 49-62	0.2%	18,140	0.6%	14,891	-	-	0.1%	11,517	0.4%	16,979	-	-	-	-	0.0%	40,864
3-218	Neurological, motor 18-48	0.3%	25,527	0.8%	22,341	-	-	0.1%	38,431	0.7%	23,315	-	-	-	-	0.1%	61,194
3-219	Neurological, motor 14-17	0.0%	34,400	0.1%	22,543	-	-	0.0%	8,550	0.0%	33,588	-	-	-	-	0.0%	49,595
3-220	Spnl Cord Dysfnc,Mot 81-91	0.0%	25,074	0.0%	16,332	0.0%	12,537	0.0%	3,906	0.0%	1,628	-	-	-	-	-	-
3-221	Spinal Cord Dysfunction, FIM motor 47-80	0.1%	29,654	0.3%	20,949	0.1%	33,273	0.0%	12,756	0.1%	37,081	-	-	-	-	0.1%	37,794
3-222	Spinal Cord Dysfunction, FIM motor 14-46, age>=33	0.2%	57,105	0.3%	37,321	0.3%	58,299	0.1%	41,909	0.1%	70,054	-	-	-	-	0.0%	29,018
3-223	Spnl Cord Dysfnc,Mot 14-46, Age<=32	0.0%	58,781	0.0%	90,693	-	-	-	-	0.1%	59,496	-	-	-	-	-	-
3-224	Amp of limb,Mot 72-91	0.1%	22,486	0.2%	16,761	-	-	0.1%	19,884	0.2%	15,162	-	-	-	-	0.1%	7,750
3-225	Amputation of limb, FIM motor 14-71	0.5%	28,737	0.8%	23,372	-	-	0.5%	35,854	0.4%	26,526	-	-	-	-	0.4%	73,703
3-226	Pain Syndromes	0.9%	13,459	1.2%	10,650	0.1%	15,359	0.1%	34,132	0.9%	14,237	-	-	-	-	0.2%	16,860
3-227	Orthopaedic conditions, fractures, FIM motor 58-91	1.4%	14,057	1.4%	12,079	-	-	0.6%	11,961	2.6%	14,549	-	-	-	-	0.5%	20,150
3-228	Orthpaed Conds, Fractures, Mot 48-57	1.3%	17,571	1.1%	14,131	-	-	0.6%	15,568	2.3%	17,268	-	-	-	-	0.3%	26,424
3-229	Orthopaedic conditions, fractures, FIM motor 14-47, FIM cognition 19-35	1.6%	21,223	1.3%	17,111	-	-	0.6%	31,060	2.9%	22,016	-	-	-	-	0.4%	32,654

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
3-230	Orthopaedic conditions, fractures, FIM motor 14-47, FIM cognition 5-18	0.5%	22,546	0.4%	17,264	-	-	0.1%	49,038	1.0%	18,011	-	-	-	-	0.1%	10,802
3-231	Orthpaed Conds, Replcmnt, Mot 72-91	0.4%	9,594	0.8%	7,880	-	-	0.1%	7,640	0.3%	4,031	-	-	-	-	0.2%	11,548
3-232	Orthpaed Conds, Replcmnt, Mot 49-71	1.3%	12,647	3.3%	9,405	-	-	0.4%	11,531	0.7%	10,795	-	-	-	-	0.2%	24,208
3-233	Orthopaedic conditions, replacement, FIM motor 14-48	0.4%	21,738	0.9%	13,052	-	-	0.2%	29,423	0.4%	17,928	-	-	-	-	0.1%	45,270
3-234	Orthopaedic conditions, all other, FIM motor 68-91	0.1%	10,403	0.8%	9,320	-	-	0.1%	8,896	0.2%	10,228	-	-	-	-	0.0%	16,654
3-235	Orthpaed Conds, Other, Mot 53-67	0.1%	16,232	1.6%	11,717	-	-	0.2%	18,974	0.2%	15,123	-	-	-	-	0.1%	24,236
3-236	Orthpaed Conds, Other, Mot 14-52	0.2%	22,384	1.7%	16,067	-	-	0.1%	27,861	0.2%	21,346	-	-	-	-	0.0%	30,641
3-237	Cardiac	0.5%	14,926	0.7%	11,826	0.3%	18,190	0.3%	22,415	0.6%	16,455	-	-	-	-	0.0%	28,768
3-238	Major Multiple Trauma, FIM total 101-126	0.0%	25,415	0.0%	11,009	-	-	0.0%	4,348	0.1%	23,917	-	-	-	-	-	-
3-239	Major Multiple Trauma, FIMtotal 74-100; or Burns	0.1%	20,258	0.1%	17,828	-	-	0.0%	15,274	0.1%	25,106	-	-	-	-	-	-
3-240	Major Multiple Trauma, FIMtotal 44-73	**0.0%**	41,790	0.1%	29,431	-	-	0.0%	19,157	0.0%	45,362	-	-	-	-	0.1%	38,451
3-241	Major Multiple Trauma, FIMtotal 19-43	0.0%	36,198	0.0%	4,192	-	-	-	-	0.0%	50,138	-	-	-	-	-	-
3-242	All other impairments, FIM motor 67-91	1.3%	12,187	1.8%	10,667	0.7%	14,651	0.6%	11,908	2.2%	10,055	-	-	-	-	1.0%	17,761
3-243	Oth Impairs,Mot 53-66	2.4%	14,477	2.8%	12,652	0.8%	16,863	0.8%	13,910	2.5%	14,576	-	-	-	-	0.8%	23,743
3-244	Oth Impairs,Mot 25-52	3.5%	19,173	2.6%	16,056	1.2%	18,709	0.9%	23,026	3.6%	18,671	-	-	-	-	0.9%	25,133
3-245	All other impairments, FIM motor 14-24	0.5%	21,593	0.4%	22,991	0.2%	21,524	0.1%	67,198	0.6%	21,613	-	-	-	-	0.1%	50,607
Same Day Rehabilitation																	
3-251	Brain, MMT & Pulmonary	-	-	-	-	2.9%	511	-	-	0.0%	178	-	-	-	-	-	-
3-252	Burns, Cardiac, Pain, Spine, & Neurological	-	-	-	-	0.7%	226	-	-	0.0%	713	-	-	-	-	-	-
3-253	All other impairments	-	-	-	-	7.8%	351	-	-	0.0%	344	-	-	-	-	-	-

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
Overnight Psychogeriatric																	
3-302	HoNOS 65+ Overactive behaviour 3,4	-	15,363	-	-	-	-	-	-	0.7%	45,540	-	-	-	-	-	-
3-303	HoNOS 65+ Overactive behaviour 1,2 HoNOS 65+ ADL 4	-	-	-	-	-	-	-	-	0.1%	40,146	-	-	-	-	-	-
3-304	HoNOS 65+ Overactive behaviour 1,2 HoNOS 65+ ADL 0-3	-	-	-	-	-	-	-	-	0.9%	35,899	-	-	-	-	-	-
3-305	HoNOS 65+ Overactive behaviour 0 HoNOS 65+ total>=18	0.0%	11,401	-	-	-	-	-	-	0.2%	33,995	-	-	-	-	-	-
3-306	HoNOS 65+ Overactive behaviour 0 HoNOS 65+ total<=17	-	-	-	-	-	-	-	-	0.8%	31,406	-	-	-	-	-	-
3-307	Long term care	-	-	-	-	0.0%	133,257	-	-	0.2%	155,253	-	-	-	-	-	-
All Ambulatory Psychogeriatric																	
3-353	Treatment, Focus of Care=acute	-	-	-	-	-	-	-	-	0.0%	804	-	-	-	-	-	-
Overnight GEM																	
3-401	Admit for assessment only	1.3%	8,513	4.3%	1,945	-	-	-	-	0.3%	7,996	-	-	-	-	-	-
3-402	Cognition<=15, motor 13-43	0.2%	13,976	8.0%	17,426	0.6%	20,879	-	-	0.5%	20,700	-	-	-	-	-	-
3-403	FIM cognition <=15, FIM motor 44-91, age>=84	0.0%	16,771	1.3%	16,737	0.1%	20,863	0.2%	18,639	0.2%	12,511	-	-	-	-	-	-
3-404	Cognition<=15, motor 44-91, age<=83	0.0%	27,635	1.6%	17,367	0.1%	15,288	0.1%	18,098	0.2%	12,709	-	-	-	-	-	-
3-405	Cognition 16-35, motor 13-50	0.5%	16,132	13.9%	17,502	1.4%	15,163	0.1%	17,819	2.2%	15,802	-	-	-	-	-	-
3-406	Cognition 16-35, motor 51-77	0.5%	14,547	15.1%	12,774	1.7%	12,944	0.9%	22,434	5.9%	11,350	-	-	-	-	-	-
3-407	Cognition 16-35, motor 78-91	0.1%	16,752	1.5%	10,872	0.3%	12,178	2.0%	17,304	0.7%	6,348	-	-	-	-	-	-
Same Day GEM																	
3-451	Same day GEM, assessment Only	-	-	-	-	-	-	-	-	0.0%	414	-	-	-	-	-	-
3-454	All Sameday	-	-	-	-	0.0%	4,014	-	-	0.0%	821	-	-	-	-	-	-

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
Overnight Maintenance																	
3-501	Respite, RUG 15-18	0.0%	3,500	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-502	Respite, RUG 5-14	0.0%	9,958	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-503	Respite, RUG 4	0.1%	4,339	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-504	Nursing Home Type, RUG 11-18	0.6%	11,223	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-505	Nursing Home Type, RUG 4-10	0.6%	12,221	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-506	Convalescent care	0.2%	12,306	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-507	Other Maintenance, RUG 14-18	0.1%	17,526	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-508	Other Maintenance, RUG 4-13	0.2%	11,941	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3-510	Long term care, RUG 10-16	0.0%	7,609	-	-	-	-	-	-	-	-	-	-	-	-	-	-
All Ambulatory Maintenance																	
3-511	Long term care, RUG 4-9	0.0%	8,371	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ungroupable																	
3-901	Overnight Palliative Care ungroupable	-	-	-	-	-	-	-	-	6.3%	12,715	-	-	-	-	-	-
3-902	Overnight Rehabilitation ungroupable	-	-	-	-	-	-	-	-	38.5%	10,870	-	-	-	-	-	-
3-903	Overnight GEM ungroupable	-	-	-	-	-	-	-	-	3.0%	11,171	-	-	-	-	-	-
3-904	Overnight Psychogeriatric ungroupable	-	-	-	-	-	-	-	-	1.2%	38,491	-	-	-	-	-	-
3-905	Overnight Maintenance ungroupable	-	-	-	-	-	-	0.0%	18,990	6.2%	16,865	-	-	-	-	-	-
3-906	All other subacute care ungroupable	-	-	-	-	-	-	-	-	1.9%	937	-	-	-	-	-	-
AN-SNAP Version 2																	
Overnight Maintenance																	
2-501	Admit for assessment only	0.0%	5,081	-	-	-	-	-	-	-	-	-	-	-	-	-	-

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
AN-SNAP Version 1																	
Overnight Palliative Care																	
0-106	Deteriorating, RUG 4-17	-	-	-	-	1.5%	10,335	-	-	-	-	-	-	-	-	-	-
0-107	Deteriorating, RUG 18, age <=71	-	-	-	-	0.2%	6,818	-	-	-	-	-	-	-	-	-	-
0-108	Deteriorating, RUG 18, age >=72	-	-	-	-	0.4%	7,412	-	-	-	-	-	-	-	-	-	-
Overnight Rehabilitation																	
0-206	Stroke and Burns, motor 47-62	-	-	-	-	0.6%	22,121	-	-	-	-	-	-	-	-	-	-
0-209	Brain Dysfunction, motor 71-91	-	-	-	-	0.3%	25,280	-	-	-	-	-	-	-	-	-	-
0-210	Brain Dysfunction, motor 29-70, age>=55	-	-	-	-	0.1%	27,006	-	-	-	-	-	-	-	-	-	-
0-211	Brain Dysfunction, motor 29-70, age<=54	-	-	-	-	0.1%	39,813	-	-	-	-	-	-	-	-	-	-
0-212	Brain Dysfunction, motor 14-28	-	-	-	-	0.1%	64,707	-	-	-	-	-	-	-	-	-	-
0-213	Neurological, motor 74-91	-	-	-	-	0.2%	11,700	-	-	-	-	-	-	-	-	-	-
0-214	Neurological, motor 41-73	-	-	-	-	0.4%	22,841	-	-	-	-	-	-	-	-	-	-
0-215	Neurological, motor 14-40	-	-	-	-	0.2%	32,865	-	-	-	-	-	-	-	-	-	-
0-219	Amputation of limb, motor 66-91	-	-	-	-	0.3%	13,419	-	-	-	-	-	-	-	-	-	-
0-220	Amputation of limb, motor 47-65	-	-	-	-	0.2%	15,330	-	-	-	-	-	-	-	-	-	-
0-221	Amputation of limb, motor 14-46	-	-	-	-	0.3%	15,476	-	-	-	-	-	-	-	-	-	-
0-223	Orthopaedic conditions, motor 74-91	-	-	-	-	0.3%	15,972	-	-	-	-	-	-	-	-	-	-
0-224	Orthopaedic conditions, motor 58-73	-	-	-	-	1.1%	16,804	-	-	-	-	-	-	-	-	-	-
0-225	Orthopaedic conditions, motor 52-57	-	-	-	-	0.6%	17,935	-	-	-	-	-	-	-	-	-	-
0-226	Orthopaedic conditions, motor 14-51	-	-	-	-	1.8%	23,599	-	-	-	-	-	-	-	-	-	-
0-228	Major Multiple Trauma	-	-	-	-	0.2%	18,639	-	-	-	-	-	-	-	-	-	-

SNAP Class	Descriptions	NSW		Vic		Qld		SA		WA		Tas		NT		ACT	
		% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep	% seps	Avg cost / sep
Overnight Psychogeriatric																	
0-301	HoNOS Overactive behaviour 4,5	-	-	-	-	0.1%	26,225	-	-	-	-	-	-	-	-	-	-
0-302	HoNOS Overactive behaviour 2,3, ADL 5	-	-	-	-	0.0%	30,131	-	-	-	-	-	-	-	-	-	-
0-303	HoNOS Overactive behaviour 2,3, ADL 1-4	-	-	-	-	0.0%	24,029	-	-	-	-	-	-	-	-	-	-
0-305	HoNOS Overactive behaviour 1, HoNOS total<=29	-	-	-	-	0.0%	35,581	-	-	-	-	-	-	-	-	-	-
Unclassified encounters																	
	Unclassified encounters	44.8%	7,649	2.2%	17,618	63.5%	9,582	89.6%	8,694	-	-	100.0%	16,542	100.0%	30,615	91.7%	13,126
Total		100.0%	9,502	100.0%	13,754	100.0%	10,496	100.0%	9,875	100.0%	15,376	100.0%	16,542	100.0%	30,615	100.0%	14,867

This table reports the proportion of separations and average cost per separations, by AN-SNAP code and by jurisdiction, for Round 17. The results are presented separately for each of the AN-SNAP versions 1, 2 and 3, as well as the proportion of separations with no AN-SNAP information (unclassified encounters). The results exclude those for cost-modelled sites where applicable. Values that appear as 0 in the table represent fractional amounts that have been rounded. Zero results are represented by a '-'.

6.4 What are the major input costs for subacute services?

Line items are groups of general ledger expenditure account codes that describe the input type of the expense (rather than the function of the expense), and define the resources being used by a cost centre. For example, a hospital might have line items for drugs, prostheses, nursing salaries or medical labour. There is a standard set of line items defined in the Australian Hospital Patient Costing Standards v2.0 – 1 March 2011 (AHPCS)[24]. These are listed in Table 61 of 0. Attachment A of the AHPCS provides the full definition of costs prescribed as included in each line item.

Nationally and across all jurisdictions the highest cost line item for subacute separations was nursing salary and wages with an average cost per separation of $4,271 nationally and ranging from $3,253 in South Australia to $8,596 in the Northern Territory (Table 57). The second largest line item at the national level was medical (non-VMO) salary and wages at $1,486, and this trend was shared by Queensland ($2,187), Western Australia ($1,767) and South Australia ($1,350). Three of the remaining jurisdictions reported the second largest line item as other salary and wages – the Northern Territory ($6,582), Tasmania ($3,112) and Victoria ($2,184). New South Wales reported allied health salary and wages as the second largest line item at $1,434. Other salary and wages was the line item with the largest (absolute) range in reported average costs, ranging from $947 in Queensland to $6,582 in the Northern Territory.

Labour costs represented over 70.8% of total costs both nationally and across all jurisdictions, with the highest proportion of labour costs reported in Queensland (80.0% of total average cost per separation) and the lowest proportion in Western Australia (60.9% of total average cost per separation). The major non-labour input costs were general goods and services at a national level and for the majority of jurisdictions, although Victoria and Queensland reported the highest non-labour cost as on-costs, and Western Australia reported the highest non-labour cost as hotel costs. On a proportional basis (and excluding line items in which three or more jurisdictions did not submit costs) the line item with the greatest variance was ‘depreciation – equipment’, which ranged from $46 in Queensland to $866 in the Northern Territory. Not all jurisdictions reported costs against all line items. In particular the following line items had three or more jurisdictions reporting nil costs: pharmaceuticals – PBS; blood; capital costs; corporate costs; and excluded costs.

24 Australian Hospital Patient Costing Standards v2.0 – 1 March 2011. URL: http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/content/EC0666091A19EBB1CA257B9B0083827A/$File/HospitalPatientCostingStandards_v2_Final_June%202011.doc, accessed 26/11/2014.

Table 57: Average cost for subacute separations by line item by jurisdiction, Round 17

Line Item	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National	% of total
Salary & Wages - Medical (non-VMO)	1,138	990	2,187	1,350	1,767	1,474	3,355	1,379	1486	12.1%
Salary & Wages - Medical (VMO)	252	448	61	44	141	0	-	499	219	1.8%
Salary & Wages - Nursing	3,869	4,919	4,153	3,253	4,625	5,643	8,596	5,195	4,271	34.8%
Salary & Wages - Allied Health	1,434	1,489	1,030	762	1,511	1,023	2,139	1,028	1,282	10.5%
Salary & Wages - Other	1,299	2,184	947	1,046	1,316	3,112	6,582	1,573	1,428	11.6%
On-costs	782	1,383	615	1,051	1,195	1,555	473	1,598	947	7.7%
Medical supplies	212	284	203	136	248	375	719	313	229	1.9%
Prostheses	7	8	8	6	52	3	15	40	12	0.1%
Imaging	41	45	24	16	1	-	104	2	31	0.3%
Pathology	168	67	105	133	112	36	397	76	119	1.0%
Pharmaceuticals - non-PBS	278	218	196	141	262	186	550	269	232	1.9%
Pharmaceuticals - PBS	-	62	-	29	-	99	-	56	18	0.1%
Blood	-	0	7	-	-	19	-	29	3	0.0%
Hotel	674	540	184	192	1,485	528	490	660	541	4.4%
Goods and services	1,335	977	612	1,145	1,391	1,609	5,843	1,643	1,083	8.8%
Depreciation - building	324	-	57	279	312	258	-	303	174	1.4%
Depreciation - equipment	49	-	46	81	371	73	866	150	74	0.6%
Lease	-	123	-	49	155	40	152	51	45	0.4%
Capital	0	-	0	-	-	-	-	-	0	0.0%
Corporate	-	-	36	149	414	372	-	-	60	0.5%
Excluded costs	19	-	0	-	-	159	11	65	9	0.1%
Total	11,880	13,739	10,472	9,865	15,359	16,564	30,291	14,928	12,263	100.0%

This table reports the average cost for a subacute separation by jurisdiction. Costs are reported against each of the prescribed NHCDC line items. WIP patients and separations with a missing DRG have been excluded. This table is based on the Cost C (patient costed) table, and as such the results do not reconcile completely to those presented earlier due to adjustments made when summarising patient costs to the line item level. Values that appear as 0 in the table represent fractional dollar costs that have been rounded. Zero cost items are represented by a '-'. Definitions of the line items can be found in Attachment A of the Australian Patient Costing Standards version 2.0.

7 Other product results

Contents of this Chapter:

This chapter presents an analysis of the costs reported against other products in Round 17 (2012-13) and makes comparisons to previous Rounds where possible. Other services episodes are classified by care type where the principal clinical intent does meet the criteria for any of the other care types, which includes all episodes defined under ‘other care’ (care type ‘8’), posthumous organ procurement (care type ‘9’) and hospital boarders (care type ‘10’). Teaching, training and research costs are also considered in scope for the ‘other’ product, but no teaching, training and research costs were reported using these care types in Round 17.

7.1 What proportion of total costs reported to NHCDC was attributed to other products?

As in the previous Round, in Round 17 there was limited consistency in reporting the costs of other products to the NHCDC, and these costs were not reported to a great extent. At the national level, the proportion of costs attributed to other products was $55.0 million, which was 0.2% of total NHCDC costs in Round 17 (Figure 21). This was actually a decrease of 30.0% from the Round 16 other costs of $78.5 million, and was likely in large part due to costs included in other in Round 16 which were not reported in Round 17.

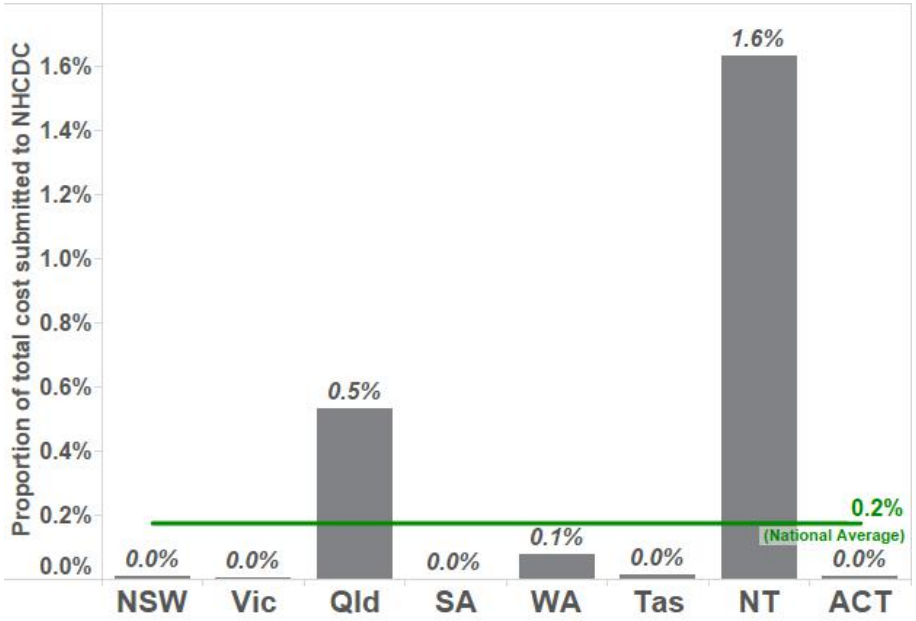
The only jurisdiction which reported greater than 1% of total NHCDC costs in the ‘other’ product was the Northern Territory at 1.6%, although this was substantially reduced since Round 16 (6.2%). Looking at the total cost reported, the Northern Territory included $37.2 million of other cost in Round 16 but only $10.5 million in Round 17. One other jurisdiction reported ‘other’ costs higher than the national average, which was Queensland, reporting 0.5% of total costs at $40.6 million, compared to Round 16 costs of $34.6 million. With the exception of South Australia, all other jurisdictions reported non-zero costs in the ‘other’ product but this was less than 0.1% of total NHCDC costs.

Table 58: Proportion of total costs reported to the NHCDC that was attributed to 'other' products, Round 16 and Round 17

Jurisdiction	R16 'other' cost	R16 proportion of total cost	R17 'other' cost	R17 proportion of total cost
NSW	1,665,270	0.0%	645,887	0.0%
Vic	-	0.0%	399,983	0.0%
Qld	34,587,206	0.5%	40,579,087	0.5%
SA	-	-	-	-
WA	4,341,538	0.1%	2,688,704	0.1%
Tas	552,231	0.1%	108,493	0.0%
NT	37,208,171	6.2%	10,532,131	1.6%
ACT	192,194	0.0%	61,644	0.0%
National	78,546,611	0.3%	55,015,928	0.2%

Values that appear as 0 in the table represent fractional amounts that have been rounded. Zero results are represented by a '-'.

Figure 21: Proportion of total costs reported to the NHCDC that was attributed to 'other' products, Round 17



8 Data quality issues affecting the results

Contents of this Chapter:

Each jurisdiction provided a data quality statement outlining any substantial data quality issues affecting the results of their NHCDC submission. Many jurisdictions reported similar data quality issues, and these have been summarised below. Some jurisdictions highlighted other data quality issues unique to their facilities or costing methodologies. The data quality statements are reproduced in full in this chapter.

8.1 Round 17 data quality

This section summarises any particular data quality issues which have affected the results of the Round 17 NHCDC. These issues may have been highlighted through the IFR or through the jurisdictional data quality statements. It is important to clarify that the IFR reports on a sample of hospitals only and these conclusions may not apply across all hospitals or jurisdictions.

Product Fractions (PFRACs)

Where hospitals have cost centres that contain costs for more than one hospital product (such as medical costs that need to be allocated to both acute and ED patients), PFRACs can be developed to split those costs.

Eleven out of the fifteen participants in the Round 17 IFR noted that they used PFRACs for the Round 17 costing, however varying levels of control over the calculation and review of these PFRACs were noted. No information about the use, review or control over PFRACs was submitted in the jurisdictional data quality statements. The IFR recommendation was that the IHPA and stakeholders (jurisdictions) should collaborate to determine the best practice for calculating and reviewing PFRACs to attain consistency.

Allocation of costs to NHCDC line items

The AHPCS detail a list of standard line items for which hospital accounts are to be mapped against. Many participants in the IFR noted that the allocation of costs to specific line items was not accurate. This is due to various reasons, including that accounts and cost centres are not set up to appropriately split these costs, or staff that are unaware of line item requirements.

No information about the allocation to line items was submitted in the jurisdictional data quality statements. The recommendation from the IFR was that additional guidance and examples be provided to participating sites on what types of costs are to be included in the various line items.

Teaching, Training and Research (TTR)

The AHPCS require that teaching and research costs should be allocated to “teaching” and “research” where direct clinical teaching or direct research is clearly the purpose of the cost centre and within other cost centres where there is a robust and justifiable method of identification of actual teaching or actual research activity. However the standard notes that this definition is interim pending the Activity Based Funding Workstream on Teaching, Training and Research.

The findings from the Round 17 IFR were that TTR is a major hospital product with no classification system and as such, there is limited guidance on how this is to be costed other than to be costed in aggregate. Some participants have cost centres specifically for teaching, and others do not. The jurisdictions that specifically addressed this in their data quality statements were Vic, SA, and Tas. Vic allocated TTR to overheads where it could be separated from routine work activities. Other TTR costs were allocated as part of salary and wages. In the case of SA and Tas, TTR costs were not reported at the patient level but excluded and reported as part of the reconciliation process.

The recommendation from the IFR was to develop a TTR classification in order to understand activities being delivered. This will support the classification and thus support correct application of the costing standards.

Blood Costs

The allocation of blood costs directly to patients varies across jurisdictions in that the majority of jurisdictions hold the expense of blood products at the state level. AHPCS require hospitals to allocate blood costs to patients and the IHPA is facilitating improvement in this area.

In particular, NSW and Tas specified that only the State share of blood costs was reported in the NHCDC as this is the expense that is distributed to and reported in the LHD/THO; and Vic and SA reported no blood costs in the NHCDC.
Some jurisdictions have or are in the process of redirecting expenses back to hospitals so that costs can be allocated directly to patients as specified in the AHPCS. This data quality issue has not yet been specifically addressed in an IFR, however it is a potential avenue of exploration for upcoming rounds.

8.2 New South Wales

Overview

The NSW Round 17 2012/13 NHCDC is based on the NSW District and Network Return (DNR). Guidelines for the DNR are published in the NSW Cost Accounting Guidelines (CAG), which incorporate Version 2 of the Australian Hospital Patient Costing Standards.

The DNR is prepared and submitted by each of the 15 Local Health District and 3 Specialist Health Network (LHD/SHN). In NSW, financial results are reported at the LHD/SHN level and not at the hospital level.

The DNR includes all products for all LHD/SHN reconciled to published financial results. No adjustments are made to DNR submitted by the LHD/SHNs.

The DNR is a single submission used to inform not only the NHCDC, but also the Public Hospital Establishment Collection, the Mental Health Establishment National Minimum Dataset and the Health Expenditure submissions.

On submission, the DNR is consolidated and formatted by the ABF Taskforce and the relevant products for appropriate hospitals are submitted to IHPA for the NHCDC.

Coverage

NSW submitted patient level data for all hospitals that are considered in scope for ABF. This represents 83 hospitals for Round 17.

Overall, 91% of acute inpatient activity was submitted which reflected 93% of total cost

Overall, 83% of Emergency Department presentation activity was submitted, which reflected 90% of total cost

For the first time, NSW submitted patient level non admitted service events. It is anticipated that the activity and costs associated with Non Admitted Patients will continue to increase over the next couple of Rounds as the collection of patient level activity data is expanded

No TTR costs were submitted as part of the NHCDC

Work in Progress episodes were included in Round 17 where the admission year was Round 16.

Data Quality

The 2012/13 DNR submission incorporated additional data quality strategies. The DNR Module in PPM2 included a number of fatal and warning validations to ensure compliance with key CAG requirements.

The DNR submission process incorporates a draft submission period to enable LHD/SHNs to undertake benchmarking with peer facilities in other LHD/SHNs. Benchmarking is undertaken at an aggregate level by class within each product group.

Patient level data quality checks are also provided by ABF Taskforce to LHD/SHNs that identify individual records for review which may not be identified in aggregate analysis. These data quality checks were informed by the IHPA National Efficient Price Determination Technical Specifications.

Technical Issues

AN-SNAP episode costing - NSW costs and reports Palliative Care episodes at the Phase level and not the episode level. This required NSW and IHPA to develop a work around as the NHCDC submission validation rules are applied to the episode level and not the phase level.

Blood costs - The NHCDC reports only the State share of blood costs as this is the expense that is distributed to and reported in the LHD/SHNs financial statements.

Professional Indemnity Costs - This expense is not distributed to the LHD/SHNs and reported in their financial statements. However to ensure compliance with AHPCS SCP1.992 Expenditure in Scope, the expense is distributed to LHD/SHNs and added to their general ledger in PPM2. This adjustment is noted in the LHD/SHN reconciliation schedule that is submitted as one of the DNR files.

Hosted Services - a number of LHDs have hosted service arrangements in place. These are for services such as IT. Where appropriate, the expense associated with these services are adjusted for both the Host LHD and the Hosted LHD. These adjustments are also noted in the LHD/SHN DNR reconciliation schedule.

S100 drug costs - the expense associated with S100 drugs are not attached to and included in the relevant patient level service event. The NSW DNR standard to to report all S100 drug costs separately. This may partly explain why NSW average costs for Tier 2 classes are slightly lower than the national average.

8.3 Victoria

Business Rules

The Victorian submission to the Round 17 (2012-13) NHCDC is based on the 2012-13 Victorian Cost Data Collection (VCDC).

The Business Rules for the VCDC collection are published annually by the Department of Health, Victoria and provide guidance to health services in the costing and reporting of patient level cost data to the VCDC (http://www.health.vic.gove.au/hdss/vcdc/index.htm).

The VCDC business rules ensure that the submissions from Health Services comply with:

- the VCDC file specifications; and
- the Australian Hospital Patient Costing Standards (AHPCS) V2 – excluding standards relating to Depreciation (DEP 1.001, 1a.001, 1B.001, 1C.001, 1D.001, 1E.001), Teaching (SCP 2A.002) and Research (SCP 2B.001).

The patient demographics that are linked to the cost data collection are collected based on the specifications outlined in the following manuals:

- Victorian Admitted Episodes Dataset (VAED) manual 22nd edition (Admitted)
- Victorian Emergency Minimum Dataset (VEMD) manual 17nd edition (Emergency)
- Victorian Integrated Non-Admitted Health Minimum Dataset (VINAH) manual version 8 (Non-admitted)

These patient demographics are then converted to the relevant national minimum dataset or IHPA data set specification based on the Department of Health, Victoria's interpretation of the specifications.

Scope

The number of hospitals that report to the NHCDC can vary from year to year due to the timing of the submission date required by the IHPA. This has resulted in the following exclusions/inclusions between 2010-11, 2011-12 and 2012-13.

Campuses that were reported in 2012-13 and not in 2011-12 were 210301021 – The Bendigo Hospital; 210301022 – Anne Caudle; 210101071 – Hamilton; 210101072 – Penshurst; 210102140 – Coleraine District Health Service.

All campuses reported in 2011-12 were also reported in 2012-13.

Campuses that were reported in 2010-11 and not in 2011-12 were 21092112 – Cranbourne Integrated Care.

Campuses that were reported in 2011-12 but not in 2010-11 were 210802080 – Caritas Christi Hospice; 210802330 – Wantirna Health; 210803690 – Yarra Ranges Health; 210901250 – Rosebud Hospital; 210902220 – Frankston Hospital; 210904082 – Rosebud Rehab; 210904083 – Golf Links Rd Rehab; 210904084 – The Mornington Centre; 210A02700 – Sunbury Day Hospital; and 210A03670 – Craigieburn Health Service.

Victoria reports the following contact account classes to the NHCDC:

- MP – Public Eligible
- MA – Reciprocal Health Care Agreement
- MV – Public Eligible: VACS-funded Outpatient
- MG – Public Eligible: Specified-grant-funded Outpatient
- VX – Department of Veterans' Affairs (DVA)

Limitations

The following limitations of the Round 17 (2012-13) NHCDC data for Victoria should be noted:

Direct Teaching, Training and Research (TTR): Victorian hospitals have only excluded TTR costs that were associated with Research Special Purpose Funds. Where teaching and training cannot be separated from routine work undertaken, it has been included as a salary and wages expense. Where teaching and training can be discerned from other activities, it was allocated as an overhead.

Work in Progress: Only patients who were discharged during the reporting year (1 July 2012 to 30 June 2013) were included in the Round 17 submission. Costs incurred by these patients in the prior year were also included in the reported Round 17 total costs.

Blood products in the Round 17 NHCDC submission: Blood products are not included in the hospital general ledger as they are paid by the department. However, there may be a small insignificant amount of costs for recombinant blood products included at some hospitals.

Changes to costing or admission policies between Round 15, 16 and 17 NHCDC collections: Victoria implemented a significant admission policy change in 2012-13 which removed ED only admissions (patients admitted and treated entirely in the ED) to align with the national funding model. However, there were no significant changes to costing policies between the three collection rounds as the Victorian Round 15 (2010-11) and Round 16 (2011-12) NHCDC cost data submissions had already been aligned with the national funding models and therefore reported ED only admissions as non-admitted activity. The 2010-11 and 2011-12 Admitted Patient Care (APC) NMDS (but not the 2012-13 APC NMDS) included ED only admissions, consistent with Victorian admission policy in the relevant year.

Ancillary costs for private patients: The majority of Victorian Health Services include ancillary costs for private patients in their NHCC submissions with the exception of:

- Northern Health (private patient pathology and radiology costs are excluded from the VCDC)
- Barwon Health (private patient pathology costs are excluded from the VCDC)
- Ballarat Health (private patient pathology and radiology costs are excluded from the VCDC)
- Peninsula Health (private patient pathology costs are excluded from the VCDC)
- Western Health (private patient pathology costs are excluded from the VCDC)
- Alfred Health Caulfield Campus (private patient radiology costs are excluded from the VCDC).

Limitations with the activity data linked to the costs data

The following limitations have been identified in respect to the activity data that is linked to the cost data:

ICU hours: where ICU and CCU coexist, Victoria is unable to distinguish the time spent in a CCU or ICU.

PICU hours and NICU hours: PICUs are located at Monash Medical Centre and the Royal Children's Hospital only. NICUs are located within four Victorian hospitals – Mercy Hospital for Women, Monash Medical Centre, Royal Women's Hospital and the Royal Children's Hospital. However, where a patient spends time in a PICU and NICU, Victoria is unable to distinguish PICU from NICU hours.

PysICU hours: Victoria does not collect the amount of time (measured in hours) that a patient spends in a state of psychosis while in an ICU.

Mechanical ventilation hours: Victoria only collects the total duration of Mechanical Ventilation (MV) in hours provided in an approved ICU or NICU only. MV hours provided in a non-approved ICU are not collected.

Mental Health Legal Status: Only patients in Approved Mental Health Service or Psychogeriatric Program in public hospitals whose care is funded by Mental Health Services can report the status. Patients in all other care types report the 'not applicable' code.

8.4 Queensland

Context

For Round 17 of the National Hospital Cost Data Collection (NHCDC) all establishments where activity data was available were submitted (regardless of funding source), with the exception of Community Mental Health, some Multipurpose Health Centres, some transition care services, and Local Hospital Network (LHN) run Nursing homes. Reconciliation of patient level costs was provided at LHN level with the facility being a sub unit of the LHN. All data was validated prior to submission to the Independent Hospital Pricing Authority (IHPA).

The following is the range of data quality issues that have been identified for Round 17 of the NHCDC.

Unlinked Diagnostic data

Where pathology or imaging data has not been able to be linked according to the data matching rules, these records have been mapped to Tier 2 clinics. Pathology has been mapped to 30.05 and diagnostic imaging has been mapped to 30.01 and 30.03 (as applicable). As there is no clinic for unlinked pharmacy these have been mapped to 40.04.

Aggregate Patient data

The majority of records submitted are patient level costed. Where patient level data was not available for costing an aggregate patient has been used during the costing process in the source costing system. This cost information has been mapped to the aggregate clinic counts and are reported at “patient level”. As this is a form of cost modelling, records with a personID of “VPM” should be excluded from the calculation of the National Efficient Price.

Work in Progress data

All patient costed establishments’ data submission includes work in progress (WIP) from prior years. Episodes admitted in the reference year for this round but yet to be discharged are not included.

Other issues identified

The following issues in round 17 do not have a significant impact on overall cost outcomes but are noted here for completeness.

Activity and cost mismatch - Establishment based service costing

A number of establishments are showing average patient costs lower or higher than would be normally expected for the type of services delivered. This is largely associated with general ledger (GL) practice, where services are provided from a regional hub to smaller associated establishments and costs for services provided have not been transferred through the GL to the establishment where the service has actually been delivered.

Inconsistent costing methodology applied

These include:

- The use of an aggregate patient product instead of costing an available patient level cost product;

- Patient level products with no relative value unit where the product should be costed as recommended in the costing standards; and
- Some products with identifiable differences in human and material resource consumption have an RVU that indicates that the department has not reviewed these allocations. This affects the costing validity in the database at a lower level and may lead to specific services or patient types carrying more cost (or less cost) than would normally be expected.

Management of Zero Cost Patients

Zero cost patients may be associated with merged records that have not been managed in the costing system, due to the point in time when the initial data was imported compared to the time when the patient record was merged in the admitted patient collection. This leads to incorrect activity volume counts and may affect average patient cost calculations.

Incomplete Coverage in Feeder Systems

Some establishments (especially in the case of non-admitted data) do not have 100% coverage and collection in an appropriate feeder system. Facilities that have gaps in feeder systems use an aggregate patient to carry the cost of the services where patient level clinical information is not available.

Similarly, a feeder system may exist, however the data has not been interfaced with the costing system. Those identified include Allied Health, Mental Health, Ambulatory Endoscopy, Blood products, and Private Practice and some other speciality clinical systems. Implementation of Allied health systems occurred during the 12-13 reference year but was only completed towards the end of that year so not all sites have had patient level allied health data for all service locations. Where available this data has been provided. Community mental health and private practice systems are being implemented in the 14-15 reference year and will be available for patient level cost reporting in round 19 of the NHCDC. This has an impact on ancillary system linking especially for pharmacy records. While all unlinked records are reported to IHPA, the implementation of these two systems will have an impact on the percentage of ancillary system records that could not be linked based on time date stamps.

8.5 South Australia

Participation and Coverage

South Australia's 2012-13 cost data was processed following the implementation of a new state-wide patient costing system and the centralisation of the patient costing process within the Department of Health. The maintenance of the patient costing system and the processing of data are undertaken by Funding Unit staff within the Department of Health based on advice from Local Hospital Network representatives and in accordance with the Australian Hospital Patient Costing Standards v2.0.

The implementation of the new patient costing system provided South Australia with the opportunity to increase the number of patient costed hospitals. In the metropolitan area eight hospitals were submitted, an increase of one. For the regional area, six large country hospitals were submitted that were previously submitted as part of the 32 cost modelled sites. No cost modelled sites were submitted in 2012-13. Stand-alone designated mental health units are not included in the South Australian cost study.

The data were extensively reviewed by the Funding Unit, in conjunction with sites, before submission to IHPA. The costing data was subjected to considerable scrutiny, with appropriate corrections and resubmissions as required to ensure that it was fit for this purpose.

2012-13 was the first time that South Australia has produced patient level costing data for Outpatient and Emergency Department (ED) services due to the implementation of the new patient costing system. The ED cost data was reviewed and it was determined to be of reasonable accuracy and submitted to IHPA however, this was not the case for the Outpatient's cost data and it was not submitted to IHPA. Further work is being undertaken to improve the quality of the non-admitted data.

Teaching, Training and Research (TTR)

Teaching, Training and Research (TTR) direct cost are not reported at the patient level, however they are reported in the reconciliation. TTR costs have been treated in compliance with the Australian Hospital Patient Costing Standards v2.0.

Blood products

Blood product costs were not included in the cost data submitted.

Work in Progress

In the patient costing process, all work in progress is costed, however only work in progress for patients that were admitted prior to 1 July 2012 and discharged during 2012-13 were submitted.

Other

South Australia has a common chart of accounts and one general ledger from which each hospital's financial data is extracted for processing. In addition, cost data for centralised services such as ICT and procurement are included in the patient costing process.

Pathology services are provided to the hospitals by SA Pathology and hospitals are charged for the services provided to public patients but this does not cover the full cost of the service. In 2012-13, for the first time, an additional loading was added to the hospital's cost to reflect full cost of the service.

The costing data submitted has been reconciled to the Public Hospital Expenditure (PHE) with work continuing to minimise the variation between the two data sources.

8.6 Western Australia

Sampling

Western Australia (WA) contributed data for thirty-two public hospital sites for Round 17 of the National Hospital Cost Data Collection (NHCDC). Although this represents a similar proportion of public hospital separations to Round 16, it marked the first year in which the submission was fully patient costed.

The current mix of participating hospitals has been maintained over the last six rounds of the NHCDC. All hospitals that are considered in scope for activity based funding are currently part of the NHCDC submissions in WA.

Trendstar, the clinical costing system used for the patient costed submissions up to and including Round 16, was replaced by Power Performance Management 2 (PPM2) and this was used for all sites in Round 17. The move enhanced WA's ability to comply with Australian Hospital Patient Costing Standards (AHPCS) and further improved costing quality and standardisation.

WA will contribute data for the same sites in Round 18 with a focus on further refining costing practices and moving towards full compliance with Version 3.1 of the AHPCs.

Products Costed

The implementation of PPM 2 facilitated WA's most extensive NHCDC submission with patient level coverage of Inpatient, Emergency and Non Admitted patients in accordance with the IHPA data specifications. For the majority of participating sites Admitted ED costs still formed part of the Acute Inpatient costings. WA's Outpatient work was predominantly costed at a patient level however work is continuing on disaggregating and costing the activity that remains non patient costed.

For Round 17, Teaching and Research costs were identified by site at a cost centre level. In accordance with the relevant AHPCS these costs were removed from the costing submission but identified in the reconciliation process. For Round 18 these costs will be identified at a patient level for local management use and then be removed from the NHCDC submission.

Blood product costs were not included in the Round 17 submission.

Round 17 marked the first year that WA reported "Work in Progress" (WIP) in the NHCDC submission. The implementation of PPM2 meant that WIP costs from prior years could not be reported. Patient episodes admitted during the reference year for Round 17 but not discharged during the period were not included in the submission. Round 18 will be the first year in which start of period WIP can be reported by WA.

All WA hospital submissions were reconciled to total accrued operating expenditure as per the audited financial statements with a reconciliation statement supplied for each site. Following the submission process, a pathology related reclassification error was detected for a WA site. Although there was no net effect on the Pathology costs as a total, this resulted in an overstatement of direct costs, and a corresponding understatement, and overall negative amount, in overhead costs.

The successful statewide implementation of a new costing system and the relative stability of the costing requirements and submission protocols will enhance the quality and timeliness of the Round 18 costing data.

8.7 Tasmania

Overview

The Tasmanian Department of Health and Human Services submission to the Round 17 (2012-13), National Hospital Cost Data Collection (NHCDC), is produced centrally by the Clinical Costing and Resource Strategy Unit, Service Purchasing and Performance, DHHS, in close consultation with the Tasmanian Health Organisations (THOs). Costing for Round 17 was undertaken in accordance with the Australian Hospital Costing Standards (AHPCS) V2.0.

In Round 17, improvements were made to the consistency of costing across all THOs with particular emphasis on compliance with the AHPCS V2.0. Tasmania utilises a single general ledger with a common chart of accounts. Cost data for centralised services, such as ICT, finance and human resources were allocated to each THO using an agreed formula. Tasmania also uses a single Patient Management System and each THO's data are extracted to a central data warehouse. Data from the central data warehouse were used for processing. In addition sites were provided cost allocations for centralised services, such as ICT and Human Resources and procurement, for inclusion in the patient costing process.

Tasmania reported all hospitals to the NHCDC. This includes the four larger hospitals as well as eighteen small rural hospitals. This accounts for all Tasmanian public hospital activity. Tasmania has undertaken work to improve the quality of coding of hospital activity. This has resulted in a higher weight index overall. In addition the THOs have undertaken reviews of the cost allocation across all hospital products and this has resulted in an increase in the cost allocated to out of scope activity; in particular, to community based services. Consequently, Tasmania's average cost has decreased overall for in-scope products.

For Round 17, costs incurred by the large regional hospitals for services supplied to the smaller rural hospitals have been included in the smaller hospital results. In the past these costs have been excluded.

Improvements were made to the major utilisation data feeder systems of pharmacy, imaging, and pathology resulting in an improved and more accurate matching to patient episodes.

Work in Progress

Only those patients who were discharged during the reporting year (I July 2012 - 30 June 2013) were included in the Round 17 submission. Costs incurred by these patients in the prior year were not included in the reported Round 17 total costs. Episodes admitted in the collection year but yet to be discharged are not included. The end-of-period work-in-progress activity were fully costed and will be included in the Round 18 submission.

Teaching, Training and Research (TT&R)

TT&R costs were not reported at the patient level but excluded and reported as part of the reconciliation process. TT&R costs were based on both direct and indirect TT&R.

Blood Products

It should be noted that Tasmania reports only the state share of blood costs in the NHCDC as this expense is distributed to the THOs.

Changes to costing or admission policies between Round 16 and 17 NHCDC collections

There were no significant changes to costing or admission policies between the two rounds.

8.8 Northern Territory

The most significant changes in NT costing methodology in Round 17 were as described below.

Decentralisation of costing

Ongoing training and consultation with hospital clinical and administrative staff enabled the decentralisation of the costing study in Round 17, with the allocation of cost centres to product types determined by the hospitals and submitted to the NT Department of Health for the first time.

While significant variation to previous rounds has resulted, the benefits of this change in process are important as clinical participation in and ownership of the costing study increases. As this process continues in Rounds 18 and 19, it is anticipated that variations to historic results will continue as hospitals staff are empowered to collaborate, evidence and resolve the issues.

For example, the identification and allocation for the first time in Round 17 of Royal Darwin and Alice Springs hospital costs to the provision of specialist and visiting services to Katherine, Gove and Tennant Creek hospitals are indicative of how substantial the potential for cost centre reallocation through this process is.

Inclusions and Exclusions

All costs generated by NT hospitals in producing patient and non-patient products are submitted in the costing studying. Specific inclusions in compliance with the costing standards include:

- Ambulance and patient transport (generated by the hospital) - only costs of inter-hospital patient transfers where a validated link to episode level data is verified are submitted;
- Blood products - all costs are submitted;
- Organ and tissue donation for transplantation -all costs are submitted;
- Insurance - building, equipment, workers compensation and medical indemnity insurance - only costs incurred by the hospitals and expensed in the hospital accounts are submitted;
- Depreciation - all costs are submitted; and
- Corporate services cost including human resources, payroll, finance, procurement, information technology: and corporate costs incurred at LHN or equivalent level.

Costs of Indigenous services

Consistent with previous rounds (since Round 15) the NT continues to allocate the costs of Indigenous only services entirely to Indigenous patients, where the following criteria were satisfied:

- the cost centre must be a hospital network controlled cost centre;
- to prevent all hospital cost centres being split between Indigenous and non-Indigenous services, 100% of the costs must relate to services provided only to Indigenous clients:
  - Essentially the service provided to Indigenous clients must be additional, complementary or different to that provided to non-Indigenous clients to be classified as an Indigenous only cost centre and allocated only to Indigenous clients; and
  - For example the cost of patient liaison services are not allocated or split between Indigenous and non-Indigenous clients as the service is available for all and is the same for all clients, in contrast services provided by Aboriginal liaison officers are only available for Indigenous clients.

Indigenous only cost centres in Round 17 include:

- Aboriginal Health Workers;
- Aboriginal Liaison Officers;
- Indigenous Cultural Competency and Cultural Security Training; and
- Indigenous Services and Support Units.

It should also be noted that Indigenous Interpreter services have historically been provided to the hospitals by the NT Government as a free of charge service - however, in 2013-14 a fee for service arrangement was introduced and this cost centre will be allocated as Indigenous only in Round 18.

Non admitted patient activity

Non admitted patient activity is currently recorded in multiple corporate information systems across the Territory. In Round 17 non admitted patient activity recorded in the Community, and Primary care systems was included in the study for the first time, where the following criteria were satisfied:

- Validation and verification of the data was successful;
- IHPA's recognition criteria for in scope non admitted services was meet; and
- The data was able to be costed and submitted in compliance with the costing standards.

Work in progress costs

Work in progress costs carried forward from Round 16 for patients admitted prior to 1 July 2012 and discharged prior to 30 June 2013 were included in the submission, while patients not discharged by 30 June 2013 were not submitted.

8.9 Australian Capital Territory

Participation and Coverage

For Round 17, ACT Health submitted Patient-Level costing data for 100% of hospital sites, in-scope for the National Health Cost Data Collection (NHCDC).

Overview of Costing Process

Costing is performed once a year, in-house, using patient-level costing software.

ACT Health uses this data firstly for internal management purposes, and then secondly for reporting to the NHCDC collection. This year ACT Health started collating data from our Jurisdiction-wide Health Data Warehouse, and this work will continue in Round 18.

Data submitted to the NHCDC complied with the Australian Hospital Patient Costing Standards (AHPCS), Version 2, and went through numerous internal data quality checks before being submitted.

Significant Changes to Reported Round 17 NHCDC data

2012-2013 (Round 17) data will be the last year that our two costed hospitals have separate Patient Activity Systems (PAS) as input files to our costing process. For Calvary hospital (CAL - NHCDC Hospital Code 83) costing has had four months of data on the original PAS and 8 months on the new territory-wide PAS. This made data matching difficult, with more un-linked data reported than the previous year. Stand-out issues were the costing of prostheses against surgical patients; which (when data was found to be of poor quality) was cost-modelled at the DRG level. However, this was the only intermediate product cost-modelled, with all other costs allocated via service-level utilisation data.

For Canberra Hospital and Health Services (CHHS - NHCDC Hospital Code 82) the same Territory-wide PAS was used across the hospital, with a noticeable improvement in ‘intermediate’ product matching rates than the previous year; including the matching of prosthesis data to surgical cases (with a small amount of off-the-shelf prosthesis being un-accounted for), better matching of Blood costs, Pathology costs, and Pharmacy cost (both PBS and Non-PBS) to the patient.

Further work was completed at both sites to better cost non-admitted services, with activity files for non-admitted being considerably better this year than the previous years. However, due to Calvary Hospital’s issues with implementing a new PAS, there were issues with linking intermediate Allied health services, to inpatient care.

Teaching, Training and Research

Further work was completed in Round 17 to better capture Teaching, Training and Research (TTR) costs, especially by CHHS. However it must be noted that both directly captured (at the cost centre level) and time reported by Medical staff for Teaching Training and Research (via hospital-wide survey) is considered low, and further work will be completed in Round 18 to better capture TTR costs.

Work-In-Progress

Round 17 was the first year that Work In Progress (W.I.P) inpatient costs were both included and excluded from our costing dataset.

Changes to business rules or methodologies

No major changes to costing methodology was noted between Round 16 and Round 17, with both years having ‘High level’ (Jurisdiction) costs excluded from their cost data, as well as shared services costs being allocated to each hospital, at the jurisdiction level.

Appendices

Contents:

Appendix A
List of Participating Hospitals

Below is the list of public hospitals contributing data to Round 17 of the NHCDC.

Table 59: List of participating hospitals to the NHCDC, Round 17

Jurisdiction	Network	Hospital Name	Location	Peer Group
NSW	**101 - South Eastern Sydney**	Calvary Health Care Sydney Ltd	Major cities of Australia	G - Subacute and non-acute
NSW	101 - South Eastern Sydney	Prince Of Wales Hospital	Major cities of Australia	A1 - Principal referral
NSW	101 - South Eastern Sydney	Royal Hospital For Women	Major cities of Australia	A2 - Specialist women's and children's
NSW	101 - South Eastern Sydney	St George Hospital (Nsw)	Major cities of Australia	A1 - Principal referral
NSW	101 - South Eastern Sydney	Sydney Hospital And Sydney Eye Hospital	Major cities of Australia	C1 - Medium
NSW	101 - South Eastern Sydney	The Sutherland Hospital	Major cities of Australia	A1 - Principal referral
NSW	101 - South Eastern Sydney	War Memorial Hospital, Waverley	Major cities of Australia	E4 - Rehabilitation
NSW	**102 - Sydney**	Balmain Hospital	Major cities of Australia	E9 - Other non-acute
NSW	102 - Sydney	Canterbury Hospital	Major cities of Australia	B1 - Large major city
NSW	102 - Sydney	Concord Hospital	Major cities of Australia	A1 - Principal referral
NSW	102 - Sydney	Royal Prince Alfred Hospital	Major cities of Australia	A1 - Principal referral
NSW	102 - Sydney	RPAH Institute Of Rheumatology & Orthopaedics	Major cities of Australia	C2 - Medium other
NSW	**103 - South Western Sydney**	Bankstown-Lidcombe Hospital	Major cities of Australia	A1 - Principal referral
NSW	103 - South Western Sydney	Bowral And District Hospital	Inner regional Australia	C1 - Medium
NSW	103 - South Western Sydney	Braeside Hospital	Major cities of Australia	E9 - Other non-acute
NSW	103 - South Western Sydney	Camden Hospital	Major cities of Australia	D2 - Small non-acute
NSW	103 - South Western Sydney	Campbelltown Hospital	Major cities of Australia	A1 - Principal referral
NSW	103 - South Western Sydney	Fairfield Hospital	Major cities of Australia	B1 - Large major city
NSW	103 - South Western Sydney	Liverpool Hospital	Major cities of Australia	A1 - Principal referral
NSW	**104 - Western Sydney**	Auburn Hospital	Major cities of Australia	B1 - Large major city
NSW	104 - Western Sydney	Blacktown Hospital	Major cities of Australia	A1 - Principal referral
NSW	104 - Western Sydney	Cumberland Hospital	Major cities of Australia	F - Psychiatric
NSW	104 - Western Sydney	Mount Druitt Hospital	Major cities of Australia	C1 - Medium
NSW	104 - Western Sydney	Westmead Hospital	Major cities of Australia	A1 - Principal referral
NSW	**105 - Nepean Blue Mountains**	Blue Mountains District Anzac Memorial	Inner regional Australia	C2 - Medium other
NSW	105 - Nepean Blue Mountains	Nepean Hospital	Major cities of Australia	A1 - Principal referral
NSW	105 - Nepean Blue Mountains	Springwood Hospital	Major cities of Australia	D2 - Small non-acute
NSW	**106 - Northern Sydney**	Greenwich Hospital	Major cities of Australia	E9 - Other non-acute
NSW	106 - Northern Sydney	Hornsby Ku-Ring-Gai Hospital	Major cities of Australia	B1 - Large major city
NSW	106 - Northern Sydney	Macquarie	Major cities of Australia	F - Psychiatric

Jurisdiction	Network	Hospital Name	Location	Peer Group
NSW	106 - Northern Sydney	Manly Hospital	Major cities of Australia	B1 - Large major city
NSW	106 - Northern Sydney	Mona Vale Hospital	Major cities of Australia	B1 - Large major city
NSW	106 - Northern Sydney	Neringah Hospital	Major cities of Australia	G - Subacute and non-acute
NSW	106 - Northern Sydney	Royal North Shore Hospital	Major cities of Australia	A1 - Principal referral
NSW	106 - Northern Sydney	Royal Rehabilitation Centre Sydney	Major cities of Australia	E4 - Rehabilitation
NSW	106 - Northern Sydney	Ryde Hospital	Major cities of Australia	B1 - Large major city
NSW	**107 - Central Coast (NSW)**	Gosford Hospital	Major cities of Australia	A1 - Principal referral
NSW	107 - Central Coast (NSW)	Long Jetty Hospital	Major cities of Australia	G - Subacute and non-acute
NSW	107 - Central Coast (NSW)	Woy Woy Hospital	Major cities of Australia	G - Subacute and non-acute
NSW	107 - Central Coast (NSW)	Wyong Hospital	Major cities of Australia	A1 - Principal referral
NSW	**108 - Illawarra Shoalhaven**	Coledale Hospital	Major cities of Australia	E9 - Other non-acute
NSW	108 - Illawarra Shoalhaven	David Berry Hospital	Inner regional Australia	E9 - Other non-acute
NSW	108 - Illawarra Shoalhaven	Port Kembla Hospital	Major cities of Australia	E4 - Rehabilitation
NSW	108 - Illawarra Shoalhaven	Shellharbour Hospital	Major cities of Australia	B1 - Large major city
NSW	108 - Illawarra Shoalhaven	Shoalhaven District Memorial Hospital	Inner regional Australia	A1 - Principal referral
NSW	108 - Illawarra Shoalhaven	Wollongong Hospital	Major cities of Australia	A1 - Principal referral
NSW	**109 - Hunter New England**	Armidale Hospital	Inner regional Australia	C1 - Medium
NSW	109 - Hunter New England	Belmont Hospital	Major cities of Australia	C1 - Medium
NSW	109 - Hunter New England	Calvary Mater Newcastle	Major cities of Australia	B1 - Large major city
NSW	109 - Hunter New England	James Fletcher - Newcastle	Major cities of Australia	F - Psychiatric
NSW	109 - Hunter New England	John Hunter Hospital	Major cities of Australia	A1 - Principal referral
NSW	109 - Hunter New England	Kurri Kurri District Hospital	Major cities of Australia	C2 - Medium other
NSW	109 - Hunter New England	Manning Rural Referral Hospital	Inner regional Australia	A1 - Principal referral
NSW	109 - Hunter New England	Tamworth Hospital	Inner regional Australia	A1 - Principal referral
NSW	109 - Hunter New England	The Maitland Hospital	Major cities of Australia	B1 - Large major city
NSW	**110 - Mid North Coast (NSW)**	Coffs Harbour Health Campus	Inner regional Australia	A1 - Principal referral
NSW	110 - Mid North Coast (NSW)	Kempsey District Hospital	Inner regional Australia	C1 - Medium
NSW	110 - Mid North Coast (NSW)	Port Macquarie Base Hospital	Inner regional Australia	A1 - Principal referral
NSW	**111 - Northern NSW**	Ballina District Hospital	Inner regional Australia	C2 - Medium other
NSW	111 - Northern NSW	Grafton Base Hospital	Inner regional Australia	B2 - Large regional
NSW	111 - Northern NSW	Lismore Base Hospital	Inner regional Australia	A1 - Principal referral
NSW	111 - Northern NSW	Murwillumbah District Hospital	Inner regional Australia	C1 - Medium
NSW	111 - Northern NSW	The Tweed Hospital	Major cities of Australia	A1 - Principal referral
NSW	**112 - Western NSW**	Bathurst Base Hospital	Inner regional Australia	B2 - Large regional
NSW	112 - Western NSW	Dubbo Base Hospital	Inner regional Australia	A1 - Principal referral
NSW	112 - Western NSW	Lourdes Hospital & Community Health Service	Inner regional Australia	G - Subacute and non-acute

Jurisdiction	Network	Hospital Name	Location	Peer Group
NSW	112 - Western NSW	Orange Base Hospital	Inner regional Australia	A1 - Principal referral
NSW	**113 - Southern NSW**	Batemans Bay Hospital	Inner regional Australia	C2 - Medium other
NSW	113 - Southern NSW	Bega District Hospital	Outer regional Australia	C1 - Medium
NSW	113 - Southern NSW	Bourke Street Health Service Goulburn	Inner regional Australia	E9 - Other non-acute
NSW	113 - Southern NSW	Goulburn Base Hospital	Inner regional Australia	B2 - Large regional
NSW	113 - Southern NSW	Moruya District Hospital	Outer regional Australia	C1 - Medium
NSW	113 - Southern NSW	Queanbeyan Hospital	Major cities of Australia	C2 - Medium other
NSW	**114 - Murrumbidgee**	Griffith Base Hospital	Outer regional Australia	C1 - Medium
NSW	114 - Murrumbidgee	Mercy Care Centre - Young	Inner regional Australia	E9 - Other non-acute
NSW	114 - Murrumbidgee	Mercy Health Service - Albury	Inner regional Australia	E9 - Other non-acute
NSW	114 - Murrumbidgee	Wagga Wagga Base Hospital	Inner regional Australia	A1 - Principal referral
NSW	**115 - Far West NSW**	Broken Hill Health Service	Outer regional Australia	C1 - Medium
NSW	**117 - Sydney Children's Hospital Network**	Sydney Children's Hospital	Major cities of Australia	A2 - Specialist women's and children's
NSW	117 - Sydney Children's Hospital Network	The Children's Hospital At Westmead	Major cities of Australia	A2 - Specialist women's and children's
NSW	**118 - St Vincent's Health Network (NSW)**	Sacred Heart	Major cities of Australia	G - Subacute and non-acute
NSW	118 - St Vincent's Health Network (NSW)	St Joseph's Hospital	Major cities of Australia	E9 - Other non-acute
NSW	118 - St Vincent's Health Network (NSW)	St Vincent's Hospital (Darlinghurst)	Major cities of Australia	A1 - Principal referral
Vic	**203 - Ballarat Health Services**	Ballarat Health Services (Base Hospital)	Inner regional Australia	A1 - Principal referral
Vic	203 - Ballarat Health Services	Ballarat Health Services (Queen Elizabeth Hopsital)	Inner regional Australia	D2 - Small non-acute
Vic	**209 - Western Health (Vic)**	Sunshine Hospital	Major cities of Australia	A1 - Principal referral
Vic	209 - Western Health (Vic)	Western Hospital	Major cities of Australia	A1 - Principal referral
Vic	209 - Western Health (Vic)	Williamstown Hospital	Major cities of Australia	C1 - Medium
Vic	**210 - Bendigo Health Care Group**	Bendigo Health Care Group (Anne Caudl	Inner regional Australia	D2 - Small non-acute
Vic	210 - Bendigo Health Care Group	Bendigo Health Care Group (Bendigo Hospital)	Inner regional Australia	A1 - Principal referral
Vic	**212 - Swan Hill District Health**	Swan Hill District Health	Outer regional Australia	C1 - Medium
Vic	**223 - Royal Children's Hospital (Melbourne)**	The Royal Children's Hospital	Major cities of Australia	A2 - Specialist women's and children's
Vic	**224 - Royal Women's Hospital (Melbourne)**	The Royal Women's Hospital	Major cities of Australia	A2 - Specialist women's and children's
Vic	**225 - Melbourne Health**	Orygen Inpatient Unit	Major cities of Australia	G - Subacute and non-acute
Vic	225 - Melbourne Health	Royal Melbourne Hospital - City Campus	Major cities of Australia	A1 - Principal referral
Vic	225 - Melbourne Health	Royal Melbourne Hospital - Royal Park	Major cities of Australia	D2 - Small non-acute
Vic	**226 - Northern Health (Vic)**	Broadmeadows Health Service	Major cities of Australia	C2 - Medium other
Vic	226 - Northern Health (Vic)	Bundoora Extended Care Centre	Major cities of Australia	D2 - Small non-acute
Vic	226 - Northern Health (Vic)	Craigieburn Health Service	Major cities of Australia	G - Subacute and non-acute
Vic	226 - Northern Health (Vic)	The Northern Hospital	Major cities of Australia	A1 - Principal referral

Jurisdiction	Network	Hospital Name	Location	Peer Group
Vic	**231 - Barwon Health**	Barwon Health - Geelong Hospital CampUS	Major cities of Australia	A1 - Principal referral
Vic	231 - Barwon Health	Barwon Health - Mckellar Centre Campus	Major cities of Australia	G - Subacute and non-acute
Vic	**234 - Eastern Health (Vic)**	Angliss Hospital	Major cities of Australia	B1 - Large major city
Vic	234 - Eastern Health (Vic)	Box Hill Hospital	Major cities of Australia	A1 - Principal referral
Vic	234 - Eastern Health (Vic)	Healesville & District Hospital	Inner regional Australia	D1 - Small regional
Vic	234 - Eastern Health (Vic)	Maroondah Hospital	Major cities of Australia	A1 - Principal referral
Vic	234 - Eastern Health (Vic)	Peter James Centre	Major cities of Australia	C2 - Medium other
Vic	234 - Eastern Health (Vic)	Wantirna Health	Major cities of Australia	G - Subacute and non-acute
Vic	234 - Eastern Health (Vic)	Yarra Ranges Health	Major cities of Australia	G - Subacute and non-acute
Vic	**235 - Goulburn Valley Health**	Goulburn Valley Health (Shepparton Campus)	Inner regional Australia	A1 - Principal referral
Vic	235 - Goulburn Valley Health	Goulburn Valley Health (Tatura Campus)	Inner regional Australia	G - Subacute and non-acute
Vic	235 - Goulburn Valley Health	Goulburn Valley Health (Waranga Campus)	Inner regional Australia	G - Subacute and non-acute
Vic	**243 - Northeast Health Wangaratta**	Northeast Health Wangaratta	Inner regional Australia	B2 - Large regional
Vic	**249 - Albury Wodonga Health**	Albury Wodonga Health, Wodonga Campus	Inner regional Australia	B2 - Large regional
Vic	**252 - West Gippsland Healthcare Group**	West Gippsland Healthcare Group	Inner regional Australia	B2 - Large regional
Vic	**253 - Bass Coast Regional Health**	Bass Coast Regional Health	Inner regional Australia	C2 - Medium other
Vic	**254 - Gippsland Southern Health Service**	Gippsland Southern Health Service - Korumburra Campus	Inner regional Australia	D1 - Small regional
Vic	254 - Gippsland Southern Health Service	Gippsland Southern Health Service - Leongatha Campus	Inner regional Australia	C2 - Medium other
Vic	**256 - Bairnsdale Regional Health Service**	Bairnsdale Regional Health Service	Outer regional Australia	C1 - Medium
Vic	**259 - Central Gippsland Health Service**	Central Gippsland Health Service	Inner regional Australia	B2 - Large regional
Vic	**260 - Latrobe Regional Hospital**	Latrobe Regional Hospital	Inner regional Australia	A1 - Principal referral
Vic	**262 - St Vincent's Hospital (Melbourne) Limited**	Caritas Christi Hospice	Major cities of Australia	G - Subacute and non-acute
Vic	262 - St Vincent's Hospital (Melbourne) Limited	St George's Health Service - Aged Care	Major cities of Australia	A1 - Principal referral
Vic	262 - St Vincent's Hospital (Melbourne) Limited	St George's Health Service - Aged Care	Major cities of Australia	D2 - Small non-acute
Vic	**263 - Royal Victorian Eye & Ear Hospital**	The Royal Victorian Eye And Ear Hospital	Major cities of Australia	B1 - Large major city
Vic	**264 - Peter MacCallum Cancer Institute (Vic)**	Peter Maccallum Cancer Institute	Major cities of Australia	B1 - Large major city
Vic	**266 - Austin Health (Vic)**	Austin Health - Austin Hospital	Major cities of Australia	A1 - Principal referral
Vic	266 - Austin Health (Vic)	Austin Health - Heidelberg Repatriation Hospital	Major cities of Australia	C1 - Medium
Vic	266 - Austin Health (Vic)	Royal Talbot Rehabilitation Centre	Major cities of Australia	G - Subacute and non-acute
Vic	**267 - Mercy Public Hospital Inc. (Vic)**	Mercy Hospital For Women	Major cities of Australia	A1 - Principal referral
Vic	267 - Mercy Public Hospital Inc. (Vic)	Werribee Mercy Hospital	Major cities of Australia	B1 - Large major city
Vic	**268 - Alfred Health (Vic)**	Caulfield General Medical Centre	Major cities of Australia	C2 - Medium other

Jurisdiction	Network	Hospital Name	Location	Peer Group
Vic	268 - Alfred Health (Vic)	Sandringham And District Memorial Hospital	Major cities of Australia	B1 - Large major city
Vic	268 - Alfred Health (Vic)	The Alfred	Major cities of Australia	A1 - Principal referral
Vic	**269 - Southern Health (Vic)**	Casey Hospital	Major cities of Australia	A1 - Principal referral
Vic	269 - Southern Health (Vic)	Cranbourne Integrated Care Centre	Major cities of Australia	C2 - Medium other
Vic	269 - Southern Health (Vic)	Dandenong Hospital	Major cities of Australia	A1 - Principal referral
Vic	269 - Southern Health (Vic)	Kingston Centre	Major cities of Australia	D2 - Small non-acute
Vic	269 - Southern Health (Vic)	Monash Medical Centre, Clayton Campus	Major cities of Australia	A1 - Principal referral
Vic	269 - Southern Health (Vic)	Monash Medical Centre, Moorabbin Campus	Major cities of Australia	B1 - Large major city
Vic	**270 - Peninsula Health (Vic)**	Frankston Hospital	Major cities of Australia	A1 - Principal referral
Vic	270 - Peninsula Health (Vic)	Golf Links Road Rehabilitation Centre	Major cities of Australia	G - Subacute and non-acute
Vic	270 - Peninsula Health (Vic)	Rosebud Hospital	Major cities of Australia	C1 - Medium
Vic	270 - Peninsula Health (Vic)	The Mornington Centre	Major cities of Australia	G - Subacute and non-acute
Vic	**275 - Wimmera Health Care Group**	Wimmera Health Care Group (Horsham)	Outer regional Australia	B2 - Large regional
Vic	**279 - Mildura Base Hospital (Public)**	Mildura Base Hospital - Mildura Campus	Outer regional Australia	B2 - Large regional
Vic	**282 - Western District Health Service (Vic)**	Sunbury Day Hospital	Major cities of Australia	G - Subacute and non-acute
Vic	282 - Western District Health Service (Vic)	Western District Health Service - Coleraine	Outer regional Australia	G - Subacute and non-acute
Vic	282 - Western District Health Service (Vic)	Western District Health Service - Hamilton	Inner regional Australia	C1 - Medium
Vic	282 - Western District Health Service (Vic)	Western District Health Service - Penshurst	Outer regional Australia	G - Subacute and non-acute
Vic	**284 - South West Healthcare (Vic)**	South West Healthcare, Warrnambool Campus	Inner regional Australia	A1 - Principal referral
Qld	**0 - Mater Misericordiae Health Service Brisbane**	Mater Adult Hospital	Major cities of Australia	A1 - Principal referral
Qld	0 - Mater Misericordiae Health Service Brisbane	Mater Children's Hospital	Major cities of Australia	A2 - Specialist women's and children's
Qld	0 - Mater Misericordiae Health Service Brisbane	Mater Mother's Hospital	Major cities of Australia	A2 - Specialist women's and children's
Qld	**301 - Metro North**	Caboolture Hospital	Major cities of Australia	A1 - Principal referral
Qld	301 - Metro North	Halwyn Centre	Major cities of Australia	U - Ungroupable
Qld	301 - Metro North	Kilcoy Hospital	Inner regional Australia	D2 - Small non-acute
Qld	301 - Metro North	Metro Transitional Health Service Brisbane	Major cities of Australia	A1 - Principal referral
Qld	301 - Metro North	Redcliffe Hospital	Major cities of Australia	A1 - Principal referral
Qld	301 - Metro North	Royal Brisbane & Women's Hospital	Major cities of Australia	A1 - Principal referral
Qld	301 - Metro North	The Prince Charles Hospital	Major cities of Australia	A1 - Principal referral
Qld	**302 - Metro South**	Beaudesert Hospital	Inner regional Australia	D2 - Small non-acute
Qld	302 - Metro South	Logan Hospital	Major cities of Australia	A1 - Principal referral
Qld	302 - Metro South	Marie Rose Centre - Dunwich	Outer regional Australia	G - Subacute and non-acute
Qld	302 - Metro South	Princess Alexandra Hospital	Major cities of Australia	A1 - Principal referral

Jurisdiction	Network	Hospital Name	Location	Peer Group
Qld	302 - Metro South	Queen Elizabeth Ii Jubilee Hospital	Major cities of Australia	B1 - Large major city
Qld	302 - Metro South	Redland Hospital	Major cities of Australia	B1 - Large major city
Qld	302 - Metro South	The Park - Centre For Mental Health	Major cities of Australia	F - Psychiatric
Qld	302 - Metro South	Wynnum Hospital	Major cities of Australia	D2 - Small non-acute
Qld	**303 - Gold Coast**	Gold Coast Hospital	Major cities of Australia	A1 - Principal referral
Qld	303 - Gold Coast	Robina Hospital	Major cities of Australia	A1 - Principal referral
Qld	303 - Gold Coast	Southern Ahs Trans Care Program - Gold Coast	Major cities of Australia	A1 - Principal referral
Qld	**304 - Sunshine Coast**	Caloundra Hospital	Major cities of Australia	C1 - Medium
Qld	304 - Sunshine Coast	Gympie Hospital	Inner regional Australia	C1 - Medium
Qld	304 - Sunshine Coast	Maleny Hospital	Inner regional Australia	D2 - Small non-acute
Qld	304 - Sunshine Coast	Nambour General Hospital	Inner regional Australia	A1 - Principal referral
Qld	**305 - West Moreton**	Boonah Hospital	Inner regional Australia	D2 - Small non-acute
Qld	305 - West Moreton	Esk Hospital	Inner regional Australia	D1 - Small regional
Qld	305 - West Moreton	Gatton Hospital	Inner regional Australia	D2 - Small non-acute
Qld	305 - West Moreton	Ipswich Hospital	Major cities of Australia	A1 - Principal referral
Qld	305 - West Moreton	Laidley Hospital	Inner regional Australia	D2 - Small non-acute
Qld	**306 - Darling Downs**	Baillie Henderson Hospital	Inner regional Australia	F - Psychiatric
Qld	306 - Darling Downs	Cherbourg Hospital	Inner regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Chinchilla Hospital	Outer regional Australia	D2 - Small non-acute
Qld	306 - Darling Downs	Dalby Hospital Health Service	Inner regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Goondiwindi Hospital	Outer regional Australia	D2 - Small non-acute
Qld	306 - Darling Downs	Inglewood Multipurpose Health Service	Outer regional Australia	E2 - Multi-purpose services
Qld	306 - Darling Downs	Jandowae Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	306 - Darling Downs	Kingaroy Hospital & Community Health	Inner regional Australia	C2 - Medium other
Qld	306 - Darling Downs	Miles Hospital	Outer regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Millmerran Hospital	Inner regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Murgon Hospital	Outer regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Nanango Hospital	Inner regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Oakey Hospital	Inner regional Australia	D2 - Small non-acute
Qld	306 - Darling Downs	Stanthorpe Hospital	Outer regional Australia	D2 - Small non-acute
Qld	306 - Darling Downs	Tara Hospital	Outer regional Australia	D1 - Small regional
Qld	306 - Darling Downs	Taroom Hospital	Remote Australia	G - Subacute and non-acute
Qld	306 - Darling Downs	Texas Hospital Multipurpose Health Service	Remote Australia	E2 - Multi-purpose services
Qld	306 - Darling Downs	Toowoomba Hospital	Inner regional Australia	A1 - Principal referral
Qld	306 - Darling Downs	Wandoan Hospital	Remote Australia	G - Subacute and non-acute
Qld	306 - Darling Downs	Warwick Hospital	Inner regional Australia	C2 - Medium other

Jurisdiction	Network	Hospital Name	Location	Peer Group
Qld	306 - Darling Downs	Wondai Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	**307 - South West**	Augathella Hospital	Very remote Australia	G - Subacute and non-acute
Qld	307 - South West	Charleville Hospital	Remote Australia	D3 - Small remote
Qld	307 - South West	Cunnamulla Hospital	Very remote Australia	D2 - Small non-acute
Qld	307 - South West	Dirranbandi Hospital	Remote Australia	E2 - Multi-purpose services
Qld	307 - South West	Injune Hospital	Remote Australia	G - Subacute and non-acute
Qld	307 - South West	Mitchell Hospital	Remote Australia	D3 - Small remote
Qld	307 - South West	Mungindi Hospital	Remote Australia	G - Subacute and non-acute
Qld	307 - South West	Quilpie Hospital	Very remote Australia	E2 - Multi-purpose services
Qld	307 - South West	Roma Hospital	Outer regional Australia	D1 - Small regional
Qld	307 - South West	St George Hospital (Qld)	Remote Australia	D3 - Small remote
Qld	307 - South West	Surat Hospital	Remote Australia	G - Subacute and non-acute
Qld	307 - South West	Thargomindah Hospital	Very remote Australia	G - Subacute and non-acute
Qld	**308 - Wide Bay**	Biggendem Multipurpose Health Centre	Inner regional Australia	U - Ungroupable
Qld	308 - Wide Bay	Biggenden Hospital	Outer regional Australia	D1 - Small regional
Qld	308 - Wide Bay	Bundaberg Hospital	Inner regional Australia	A1 - Principal referral
Qld	308 - Wide Bay	Childers Hospital	Inner regional Australia	D2 - Small non-acute
Qld	308 - Wide Bay	Childers Multi Purpose Health Service	Outer regional Australia	U - Ungroupable
Qld	308 - Wide Bay	Eidsvold Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	308 - Wide Bay	Eidsvold Multipurpose Health Centre	Outer regional Australia	U - Ungroupable
Qld	308 - Wide Bay	Gayndah Hospital	Outer regional Australia	D1 - Small regional
Qld	308 - Wide Bay	Gin Gin Hospital	Outer regional Australia	D2 - Small non-acute
Qld	308 - Wide Bay	Hervey Bay Hospital	Inner regional Australia	B2 - Large regional
Qld	308 - Wide Bay	Maryborough Hospital	Inner regional Australia	C2 - Medium other
Qld	308 - Wide Bay	Monto Hospital	Outer regional Australia	D2 - Small non-acute
Qld	308 - Wide Bay	Mount Perry Health Centre	Outer regional Australia	G - Subacute and non-acute
Qld	308 - Wide Bay	Mundubbera Hospital	Outer regional Australia	E2 - Multi-purpose services
Qld	308 - Wide Bay	Mundubbera Multipurpose Health Centre	Outer regional Australia	U - Ungroupable
Qld	**309 - Central Queensland**	Baralaba Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	309 - Central Queensland	Baralaba Multi Purpose Health Service	Outer regional Australia	G - Subacute and non-acute
Qld	309 - Central Queensland	Biloela Hospital	Outer regional Australia	D1 - Small regional
Qld	309 - Central Queensland	Blackwater Hospital	Outer regional Australia	D1 - Small regional
Qld	309 - Central Queensland	Blackwater Multi Purpose Health Service	Outer regional Australia	D1 - Small regional
Qld	309 - Central Queensland	Emerald Hospital	Outer regional Australia	C2 - Medium other
Qld	309 - Central Queensland	Gladstone Hospital	Inner regional Australia	C1 - Medium
Qld	309 - Central Queensland	Mount Morgan Hospital	Inner regional Australia	D2 - Small non-acute

Jurisdiction	Network	Hospital Name	Location	Peer Group
Qld	309 - Central Queensland	Mount Morgan Multi Purpose Health Service	Inner regional Australia	D2 - Small non-acute
Qld	309 - Central Queensland	Moura Hospital	Outer regional Australia	D1 - Small regional
Qld	309 - Central Queensland	Rockhampton Base Hospital	Inner regional Australia	A1 - Principal referral
Qld	309 - Central Queensland	Springsure Hospital	Remote Australia	D2 - Small non-acute
Qld	309 - Central Queensland	Springsure Hospital Multi Purpose Health Service	Remote Australia	D2 - Small non-acute
Qld	309 - Central Queensland	Theodore Hospital	Outer regional Australia	D1 - Small regional
Qld	309 - Central Queensland	Theodore Multi Purpose Health Service	Outer regional Australia	D1 - Small regional
Qld	309 - Central Queensland	Woorabinda Hospital	Remote Australia	E2 - Multi-purpose services
Qld	309 - Central Queensland	Woorabinda Multi Purpose Health Service	Remote Australia	E2 - Multi-purpose services
Qld	309 - Central Queensland	Yeppoon Hospital	Inner regional Australia	D1 - Small regional
Qld	**310 - Mackay**	Bowen Hospital	Outer regional Australia	D1 - Small regional
Qld	310 - Mackay	Clermont Hospital	Remote Australia	E2 - Multi-purpose services
Qld	310 - Mackay	Collinsville Hospital	Remote Australia	D3 - Small remote
Qld	310 - Mackay	Dysart Hospital	Outer regional Australia	D1 - Small regional
Qld	310 - Mackay	Mackay Base Hospital	Inner regional Australia	A1 - Principal referral
Qld	310 - Mackay	Moranbah Hospital	Outer regional Australia	D1 - Small regional
Qld	310 - Mackay	Proserpine Hospital	Outer regional Australia	C2 - Medium other
Qld	310 - Mackay	Sarina Hospital	Outer regional Australia	D1 - Small regional
Qld	**311 - Townsville**	Ayr Hospital	Outer regional Australia	D1 - Small regional
Qld	311 - Townsville	Charters Towers Hospital	Outer regional Australia	D1 - Small regional
Qld	311 - Townsville	Charters Towers Rehabilitation Unit	Outer regional Australia	F - Psychiatric
Qld	311 - Townsville	Home Hill Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	311 - Townsville	Hughenden Hospital	Very remote Australia	D2 - Small non-acute
Qld	311 - Townsville	Ingham Hospital	Outer regional Australia	D1 - Small regional
Qld	311 - Townsville	Joyce Palmer Health Service	Remote Australia	D3 - Small remote
Qld	311 - Townsville	Kirwan Rehabilitation Unit	Outer regional Australia	F - Psychiatric
Qld	311 - Townsville	Magnetic Island Health Service Centre	Outer regional Australia	G - Subacute and non-acute
Qld	311 - Townsville	Richmond Hospital	Very remote Australia	G - Subacute and non-acute
Qld	311 - Townsville	The Townsville Hospital	Outer regional Australia	A1 - Principal referral
Qld	**312 - Central West**	Alpha Hospital	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Aramac Hospital	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Barcaldine Hospital	Very remote Australia	D3 - Small remote
Qld	312 - Central West	Blackall Hospital	Very remote Australia	D3 - Small remote
Qld	312 - Central West	Boulia Primary Health Centre	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Isisford Primary Health Centre	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Jundah Primary Health Centre	Very remote Australia	G - Subacute and non-acute

Jurisdiction	Network	Hospital Name	Location	Peer Group
Qld	312 - Central West	Longreach Hospital	Very remote Australia	D3 - Small remote
Qld	312 - Central West	Muttaburra Primary Health Centre	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Tambo Primary Health Centre	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Windorah Clinic	Very remote Australia	G - Subacute and non-acute
Qld	312 - Central West	Winton Hospital	Very remote Australia	D2 - Small non-acute
Qld	**313 - North West (QLD)**	Burketown Health Clinic	Very remote Australia	G - Subacute and non-acute
Qld	313 - North West (QLD)	Camooweal Hospital	Very remote Australia	G - Subacute and non-acute
Qld	313 - North West (QLD)	Cloncurry Hospital	Remote Australia	D3 - Small remote
Qld	313 - North West (QLD)	Dajarra Health Clinic	Very remote Australia	G - Subacute and non-acute
Qld	313 - North West (QLD)	Doomadgee Hospital	Very remote Australia	D3 - Small remote
Qld	313 - North West (QLD)	Julia Creek Hospital	Very remote Australia	G - Subacute and non-acute
Qld	313 - North West (QLD)	Karumba Health Clinic	Very remote Australia	G - Subacute and non-acute
Qld	313 - North West (QLD)	Mornington Island Hospital	Very remote Australia	D3 - Small remote
Qld	313 - North West (QLD)	Mount Isa Base Hospital	Remote Australia	B2 - Large regional
Qld	313 - North West (QLD)	Normanton Hospital	Very remote Australia	D3 - Small remote
Qld	**314 - Cairns and Hinterland**	Atherton Hospital	Outer regional Australia	C2 - Medium other
Qld	314 - Cairns and Hinterland	Babinda Hospital	Outer regional Australia	D2 - Small non-acute
Qld	314 - Cairns and Hinterland	Cairns Base Hospital	Outer regional Australia	A1 - Principal referral
Qld	314 - Cairns and Hinterland	Chillagoe Hospital	Remote Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Croydon Hospital	Very remote Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Dimbulah Outpatients Clinic	Outer regional Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Forsayth Hospital	Very remote Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Georgetown Hospital	Very remote Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Gordonvale Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Herberton Hospital	Outer regional Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Innisfail Hospital	Outer regional Australia	C2 - Medium other
Qld	314 - Cairns and Hinterland	Mareeba Hospital	Outer regional Australia	C2 - Medium other
Qld	314 - Cairns and Hinterland	Mossman Hospital (Douglas Shire Multi-Purpose Service)	Outer regional Australia	E2 - Multi-purpose services
Qld	314 - Cairns and Hinterland	Mount Garnet Outpatients Clinic	Remote Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Ravenshoe Outpatients Clinic	Outer regional Australia	G - Subacute and non-acute
Qld	314 - Cairns and Hinterland	Tully Hospital	Outer regional Australia	D1 - Small regional
Qld	314 - Cairns and Hinterland	Yarrabah Hospital	Outer regional Australia	D1 - Small regional
Qld	**315 - Cape York**	Aurukun Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Coen Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Cooktown Hospital	Remote Australia	E2 - Multi-purpose services
Qld	315 - Cape York	Hopevale Primary Health Care Centre	Remote Australia	D3 - Small remote

Jurisdiction	Network	Hospital Name	Location	Peer Group
Qld	315 - Cape York	Kowanyama Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Laura Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Lockhart River Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Mapoon Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Napranum Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Pormpuraaw Primary Health Care Centre	Very remote Australia	G - Subacute and non-acute
Qld	315 - Cape York	Weipa Hospital	Very remote Australia	D3 - Small remote
Qld	315 - Cape York	Wujal Wujal Primary Health Care Centre	Remote Australia	G - Subacute and non-acute
Qld	**316 - Torres Strait - Northern Peninsula**	Bamaga Hospital	Very remote Australia	D3 - Small remote
Qld	316 - Torres Strait - Northern Peninsula	Island Medical Service	Very remote Australia	G - Subacute and non-acute
Qld	316 - Torres Strait - Northern Peninsula	Thursday Island Hospital	Very remote Australia	D3 - Small remote
Qld	**317 - Children's Health Queensland (Qld)**	Ellen Barron Family Centre	Major cities of Australia	E5 - Mothercraft
Qld	317 - Children's Health Queensland (Qld)	Royal Children's Hospital	Major cities of Australia	A2 - Specialist women's and children's
SA	**401 - Northern Adelaide**	Lyell Mcewin Hospital	Major cities of Australia	A1 - Principal referral
SA	401 - Northern Adelaide	Modbury Hospital	Major cities of Australia	B1 - Large major city
SA	**402 - Central Adelaide**	Glenside Campus	Major cities of Australia	F - Psychiatric
SA	402 - Central Adelaide	Pregnancy Advisory Centre	Major cities of Australia	G - Subacute and non-acute
SA	402 - Central Adelaide	Royal Adelaide Hospital	Major cities of Australia	A1 - Principal referral
SA	402 - Central Adelaide	The Queen Elizabeth Hospital	Major cities of Australia	A1 - Principal referral
SA	**403 - Southern Adelaide**	Flinders Medical Centre	Major cities of Australia	A1 - Principal referral
SA	403 - Southern Adelaide	Noarlunga Community Hospital	Major cities of Australia	C1 - Medium
SA	403 - Southern Adelaide	Repatriation General Hospital	Major cities of Australia	B1 - Large major city
SA	**404 - Country Health SA**	Mount Gambier And Districts Health Service	Inner regional Australia	C1 - Medium
SA	404 - Country Health SA	Port Augusta Hospital	Outer regional Australia	C1 - Medium
SA	404 - Country Health SA	Port Lincoln Health Services	Remote Australia	D3 - Small remote
SA	404 - Country Health SA	Port Pirie Regional Health Service	Outer regional Australia	C2 - Medium other
SA	404 - Country Health SA	Riverland Regional Health Service	Outer regional Australia	C2 - Medium other
SA	404 - Country Health SA	The Whyalla Hospital And Health Service	Outer regional Australia	C1 - Medium
SA	**405 - Women's and Children's Health Network (SA)**	Women's And Children's Hospital	Major cities of Australia	A2 - Specialist women's and children's
WA	**501 - North Metropolitan Health Service (WA)**	Kalamunda Hospital	Major cities of Australia	D2 - Small non-acute
WA	501 - North Metropolitan Health Service (WA)	King Edward Memorial Hospital	Major cities of Australia	A2 - Specialist women's and children's
WA	501 - North Metropolitan Health Service (WA)	Osborne Park Hospital	Major cities of Australia	C1 - Medium

Jurisdiction	Network	Hospital Name	Location	Peer Group
WA	501 - North Metropolitan Health Service (WA)	Sir Charles Gairdner Hospital	Major cities of Australia	A1 - Principal referral
WA	501 - North Metropolitan Health Service (WA)	Swan Districts Hospital	Major cities of Australia	B1 - Large major city
WA	**502 - South Metropolitan Health Service (WA)**	Armadale Kelmscott Memorial Hospital	Major cities of Australia	B1 - Large major city
WA	502 - South Metropolitan Health Service (WA)	Bentley Health Service	Major cities of Australia	C1 - Medium
WA	502 - South Metropolitan Health Service (WA)	Fremantle Hospital And Health Service	Major cities of Australia	A1 - Principal referral
WA	502 - South Metropolitan Health Service (WA)	Fremantle-Kaleeya Hospital	Major cities of Australia	C1 - Medium
WA	502 - South Metropolitan Health Service (WA)	Murray District Hospital	Inner regional Australia	G - Subacute and non-acute
WA	502 - South Metropolitan Health Service (WA)	Rockingham General Hospital	Major cities of Australia	B1 - Large major city
WA	502 - South Metropolitan Health Service (WA)	Royal Perth (Rehab) Hospital	Major cities of Australia	E4 - Rehabilitation
WA	502 - South Metropolitan Health Service (WA)	Royal Perth Hospital	Major cities of Australia	A1 - Principal referral
WA	**503 - WA Country Health Service**	Albany Hospital	Outer regional Australia	B2 - Large regional
WA	503 - WA Country Health Service	Broome Hospital	Remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Bunbury Hospital	Inner regional Australia	A1 - Principal referral
WA	503 - WA Country Health Service	Busselton Hospital	Inner regional Australia	C2 - Medium other
WA	503 - WA Country Health Service	Carnarvon Hospital	Remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Collie District Hospital	Inner regional Australia	D1 - Small regional
WA	503 - WA Country Health Service	Derby Hospital	Very remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Esperance Hospital	Remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Geraldton Hospital	Outer regional Australia	B2 - Large regional
WA	503 - WA Country Health Service	Hedland Health Hospital	Major cities of Australia	D3 - Small remote
WA	503 - WA Country Health Service	Kalgoorlie Hospital	Outer regional Australia	B2 - Large regional
WA	503 - WA Country Health Service	Katanning Hospital	Outer regional Australia	E2 - Multi-purpose services
WA	503 - WA Country Health Service	Kununurra Hospital	Remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Margaret River Hospital	Outer regional Australia	D1 - Small regional
WA	503 - WA Country Health Service	Merredin Hospital	Outer regional Australia	E2 - Multi-purpose services
WA	503 - WA Country Health Service	Moora Hospital	Outer regional Australia	E2 - Multi-purpose services
WA	503 - WA Country Health Service	Narrogin Hospital	Outer regional Australia	C2 - Medium other
WA	503 - WA Country Health Service	Newman Hospital	Very remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Nickol Bay Hospital	Remote Australia	D3 - Small remote
WA	503 - WA Country Health Service	Northam Hospital	Inner regional Australia	D2 - Small non-acute

Jurisdiction	Network	Hospital Name	Location	Peer Group
WA	503 - WA Country Health Service	Warren Hospital	Outer regional Australia	D1 - Small regional
WA	**505 - Children's Network (WA)**	Princess Margaret Hospital	Major cities of Australia	A2 - Specialist women's and children's
Tas	**601 - Tasmanian Health Organisation - South**	Esperance Multipurpose Centre	Outer regional Australia	G - Subacute and non-acute
Tas	601 - Tasmanian Health Organisation - South	Huon Eldercare	Outer regional Australia	G - Subacute and non-acute
Tas	601 - Tasmanian Health Organisation - South	May Shaw Health Centre	Remote Australia	G - Subacute and non-acute
Tas	601 - Tasmanian Health Organisation - South	Midlands Multipurpose Health Centre	Outer regional Australia	G - Subacute and non-acute
Tas	601 - Tasmanian Health Organisation - South	New Norfolk District Hospital	Inner regional Australia	D1 - Small regional
Tas	601 - Tasmanian Health Organisation - South	Royal Hobart Hospital	Inner regional Australia	A1 - Principal referral
Tas	601 - Tasmanian Health Organisation - South	Tasman Multipurpose Centre	Outer regional Australia	G - Subacute and non-acute
Tas	**602 - Tasmanian Health Organisation - North**	Beaconsfield District Health Service	Outer regional Australia	G - Subacute and non-acute
Tas	602 - Tasmanian Health Organisation - North	Campbell Town Multipurpose Centre	Outer regional Australia	G - Subacute and non-acute
Tas	602 - Tasmanian Health Organisation - North	Deloraine District Hospital	Outer regional Australia	D1 - Small regional
Tas	602 - Tasmanian Health Organisation - North	Flinders Island Multipurpose Centre	Very remote Australia	G - Subacute and non-acute
Tas	602 - Tasmanian Health Organisation - North	George Town Hospital And Community Ce	Outer regional Australia	D2 - Small non-acute
Tas	602 - Tasmanian Health Organisation - North	Launceston General Hospital	Inner regional Australia	A1 - Principal referral
Tas	602 - Tasmanian Health Organisation - North	North East Soldiers Memorial Hospital	Outer regional Australia	D1 - Small regional
Tas	602 - Tasmanian Health Organisation - North	St Helens District Hospital	Outer regional Australia	D1 - Small regional
Tas	602 - Tasmanian Health Organisation - North	St Marys Health Centre	Outer regional Australia	D1 - Small regional
Tas	602 - Tasmanian Health Organisation - North	Toosey Aged And Community Care	Inner regional Australia	G - Subacute and non-acute
Tas	**603 - Tasmanian Health Organisation - North West**	King Island District Hospital And Health Service	Very remote Australia	D3 - Small remote
Tas	603 - Tasmanian Health Organisation - North West	Mersey Community Hospital	Inner regional Australia	C1 - Medium
Tas	603 - Tasmanian Health Organisation - North West	North West Regional Hospital	Outer regional Australia	B2 - Large regional
Tas	603 - Tasmanian Health Organisation - North West	Smithton District Hospital	Outer regional Australia	D1 - Small regional

Jurisdiction	Network	Hospital Name	Location	Peer Group
Tas	603 - Tasmanian Health Organisation - North West	West Coast District Hospital	Remote Australia	G - Subacute and non-acute
NT	**701 - Top End (NT)**	Gove District Hospital	Very remote Australia	D3 - Small remote
NT	701 - Top End (NT)	Katherine Hospital	Remote Australia	D3 - Small remote
NT	701 - Top End (NT)	Royal Darwin Hospital	Outer regional Australia	A1 - Principal referral
NT	**702 - Central Australia (NT)**	Alice Springs Hospital	Remote Australia	A1 - Principal referral
NT	702 - Central Australia (NT)	Tennant Creek Hospital	Very remote Australia	D3 - Small remote
ACT	**801 - Australian Capital Territory**	Calvary Public Hospital Act	Major cities of Australia	A1 - Principal referral
ACT	801 - Australian Capital Territory	The Canberra Hospital	Major cities of Australia	A1 - Principal referral

Appendix B
Cost Weights (Actual) for AR-DRG version 6.0x, Round 17 (2012-13)

Notes:

Please note the Round 17 (2012-13) National Hospital Cost Data Collection (NHCDC) cost weights are not the Activity Based Funding (ABF) Cost Weights that will be used to fund public hospitals. The ABF Cost Weights are developed by the Independent Hospital Pricing Authority (IHPA) and further information about the ABF Cost Weights can be obtained from the IHPA website at http://www.ihpa.gov.au/internet/ihpa/publishing.nsf.

Introductory Notes to Cost Weights:

These notes provide assistance in interpreting the cost weight tables that follow. For further information, see Glossary of the National Hospital Cost Data Collection Cost Report Round 17 (2012-13) for detailed definitions of NHCDC terms or the National Hospital Cost Data Collection Hospital Reference Manual for a detailed explanation of each of the 'cost buckets' described below.

Additional notes:

- Care should be taken when comparing average costs between the public and private sectors as cost components differ between sectors.
- Slight differences may occur between figures in the tables displayed in the Round 16 Cost Report and figures displayed in the attached Cost Weight reports due to rounding.

Cost Weight Table Columns

The following is a brief explanation of each of the 24 columns including 'cost bucket' columns displayed in the Cost Weight Report.

1. **AR-DRG:** AR-DRGs or Australian Refined Diagnosis Related Groups is a patient classification scheme that provides a clinically meaningful way of relating the number and types of patients treated in a hospital to the resources required by the hospital.
2. **AR-DRG Description:** Descriptive text for the AR-DRG code.
3. **Cost Weight:** A measure of the average cost of an DRG, compared with the average cost of all DRGs. The average cost of all DRGs is given a cost weight of 1.0.
4. **Number of Seps:** This column displays the number of separations. A separation is termed to be one complete episode of care for a given patient.
5. **Number of Days:** Number of Days is the sum of lengths of stay of the separations for a given DRG.
6. **ALOS:** The ALOS is calculated by dividing the number of days by the number of separations for each DRG. There may be minor variations at decimal place level for some DRGs with low volumes.
7. **Average Cost per DRG ($)**: The following gives a break down of the average cost for each DRG.
    a. **Total:** The Total column displays the total average cost for each DRG.
    b. **Direct:** The Direct column displays the total direct average cost for each DRG.
    c. **Ohead:** The Ohead column displays the total overhead average cost for each DRG.
8. **No. of Hosps:** This column displays the number of sample hospitals which reported data for a particular AR-DRG.

Average Component Cost per DRG ($): The following are the average component (or bucket) costs for each DRG.

9. **Ward Medical:** Also known as Medical Clinical Services, this bucket includes the salaries and wages of all medical officers including sessional payments.

10. **Ward Nursing:** Also known as Nursing Clinical Services, this bucket includes all costs associated with nursing care in general ward areas.
11. **Non Clinical Salaries:** This bucket was renamed 'Non-clinical Salaries' from 'Other' in Round 4. This bucket contains all other costs of service provision for each inpatient separation during the Round. These costs are primarily other salaries and wages such as patient care assistants.
12. **Pathology:** This column reports costs recorded from diagnostic clinical laboratory tests for the diagnosis and treatment of patients.
13. **Imaging:** This bucket contains costs for diagnostic and therapeutic images produced under the direction of a qualified radiographer or suitably qualified technician and reported by a medical practitioner (radiologist).
14. **Allied:** 'Allied' is an abbreviation for the Allied Health cost bucket. The Allied Health cost bucket reports costs delivered to clinical services by qualified health professionals (exclusive of medical and nurse trained personnel) who have direct patient contact and provide services in Audiology, Dietetics/Nutrition, Occupational Therapy, Optometry, Orthotics, Physiotherapy, Podiatry, Social Work, Psychology, Speech Pathology and other Allied Health.
15. **Pharmacy:** This column reports costs associated with the provision of pharmaceuticals including purchasing, production, distribution, supply and storage of drug products and clinical pharmacy services.
16. **Critical Care:** The Critical Care cost bucket is the combination of intensive care and coronary care costs.
17. **Oper Rooms:** 'Oper Rooms' is an abbreviation for the Operating Rooms cost bucket and reports costs for a health care facility under sterile conditions, where significant surgical procedures are carried out under the direction of suitably qualified medical practitioners.
18. **Emerg Depts:** This column displays costs reported for health care facilities designed and equipped specifically to provide an environment where patients presenting in an unscheduled manner can be triaged, assessed and treated.
19. **Supplies:** 'Supplies' is an abbreviation for the Supplies and Ward Overheads cost bucket. It includes costs for goods and services, medical and surgical supplies, ward overheads and clinical department overheads.
20. **Spec Proc Suites (or SPS):** 'Spec Proc Suites' is an abbreviation for the Specialist Procedure Suites cost bucket. This includes costs equipped specifically to provide an environment where diagnostic and therapeutic procedures can be performed under the direction of suitably qualified medical practitioners. Does not include Operating Room costs.
21. **Prosthesis:** This column displays costs of prostheses and includes prostheses appearing on hospital accounts as well as a best estimate of the prostheses whose costs were missed because of acquisition by the patient or doctor.
22. **On-Costs:** The On-Costs cost bucket includes indirect salary costs like superannuation, termination payments, lump sum payments, fringe benefits tax, long service leave, worker's compensation and recruitment costs.
23. **Hotel:** The Hotel cost bucket reports costs of hotel services and is a grouping of the following overhead costs: cleaning, linen and laundry, food services, general hotel, porters and orderlies.
24. **Deprec:** The 'Deprec' bucket reports depreciation costs. Note that depreciation is not reported consistently between jurisdictions.

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
A01Z	LIVER TRANSPLANT	26.35	237	6,313	27	129,494	107,555	21,938	17,355	2,394	15,719	893	5,999	6,988	816
A03Z	LUNG OR HEART/LUNG TRANSPLANT	27.58	153	4,672	31	135,520	118,986	16,533	8,369	787	10,036	509	3,149	5,820	637
A05Z	HEART TRANSPLANT	39.55	72	2,888	40	194,351	169,290	25,061	13,177	969	12,903	342	4,642	6,732	1,128
A06A	TRACHEOSTOMY W VENT>95 +CCC	43.15	1,783	81,288	46	212,040	170,212	41,828	8,099	749	10,515	1,118	3,331	5,792	711
A06B	TRCH&VNT-CCC OR TRCH/VNT+CCC	18.76	6,454	152,311	24	92,193	74,001	18,191	4,746	433	5,280	537	1,953	3,485	423
A06C	VENTILATION>95 - CCC	10.64	207	2,574	12	52,291	41,837	10,454	2,825	167	2,285	251	1,040	1,982	239
A06D	TRACHEOSTOMY -CCC	7.34	232	3,134	14	36,067	28,243	7,824	3,357	308	3,352	406	1,555	885	78
A07Z	ALLOG BONE MARROW TRANSPLANT	17.05	542	16,282	30	83,781	70,633	13,148	5,204	2,040	18,122	626	3,704	4,160	831
A08A	AUTO BONE MARROW TRANSPLNT+CCC	8.12	653	14,222	22	39,908	31,618	8,289	3,218	789	9,964	662	2,611	2,211	286
A08B	AUTO BONE MARROW TRANSPLNT-CCC	2.45	311	2,150	7	12,034	9,219	2,815	818	163	3,450	323	798	559	92
A09A	RENAL TRANSPLANT+PANCREAS/+CCC	9.41	454	5,151	11	46,224	39,029	7,195	3,771	636	6,048	278	1,594	1,976	341
A09B	RENAL TRANSPLANT -PANCREAS-CCC	7.48	409	3,024	7	36,770	30,679	6,092	4,167	1,054	4,831	248	1,176	1,492	195
A10Z	INSERTION OF VAD	71.86	38	1,883	50	353,143	316,076	37,067	17,074	1,500	14,797	485	5,120	9,177	1,353
A11A	INS IMPLNT SP INFUS DEV+CCC	12.15	9	111	12	59,705	48,852	10,853	5,679	1,300	6,124	801	1,598	1,097	33
A11B	INS IMPLNT SP INFUS DEV-CCC	4.01	31	137	4	19,703	16,467	3,236	1,555	107	2,445	232	806	57	8
A12Z	INS NEUROSTIMULATOR DEV	4.93	259	685	3	24,213	21,460	2,753	605	50	925	106	366	68	14
A40Z	ECMO	33.91	193	5,464	28	166,636	135,105	31,531	7,414	216	4,530	254	2,711	8,187	1,609
B01A	VENTRICULAR SHUNT REV+CSCC	3.65	231	1,729	7	17,949	14,249	3,700	1,701	123	3,121	288	915	275	37
B01B	VENTRICULAR SHUNT REV-CSCC	2.51	166	759	5	12,348	9,737	2,611	1,060	83	1,780	156	568	148	19
B02A	CRANIAL PROCEDURES + CCC	8.95	2,874	45,572	16	43,996	35,262	8,733	3,063	313	6,045	529	1,717	1,168	160
B02B	CRANIAL PROCEDURES + SCC	5.54	1,844	17,118	9	27,201	21,613	5,588	2,073	193	3,512	345	1,028	640	77
B02C	CRANIAL PROCEDURES - CSCC	4.12	3,559	21,679	6	20,227	16,116	4,111	1,536	126	2,276	224	702	438	53
B03A	SPINAL PROCEDURES + CSCC	5.90	337	3,991	12	28,971	23,130	5,840	2,269	248	4,398	308	1,317	640	79
B03B	SPINAL PROCEDURES - CSCC	3.23	839	3,462	4	15,894	12,899	2,995	881	107	1,688	140	517	195	24
B04A	EXTRACRANIAL VASCULAR PR +CCC	5.16	421	4,335	10	25,371	20,187	5,184	2,005	177	3,487	285	1,129	604	64
B04B	EXTRACRANIAL VASCULAR PR -CCC	2.73	1,387	5,224	4	13,436	10,762	2,674	908	88	1,178	103	428	232	26
B05Z	CARPAL TUNNEL RELEASE	0.46	9,226	9,678	1	2,255	1,719	536	195	20	96	18	84	7	1
B06A	CBL PSY,MUS DYSY,NPTHY PR +CC	4.01	438	4,395	10	19,706	15,356	4,350	2,022	192	3,651	301	1,127	503	61
B06B	CBL PSY,MUS DYSY,NPTHY PR -CC	1.07	1,836	2,748	1	5,238	4,105	1,132	380	36	439	51	186	82	10
B07A	PRPHL & CRANL NERV & OTH PR+CC	3.57	699	6,177	9	17,529	13,542	3,988	1,604	198	3,118	301	991	302	37
B07B	PRPHL & CRANL NERV & OTH PR-CC	1.18	3,423	5,706	2	5,796	4,470	1,326	398	47	466	56	203	38	4
B40Z	PLASMAPHERESIS + NEURO DIS SD	0.22	1,069	1,069	1	1,075	824	251	129	29	169	13	108	41	7
B41Z	TELEMETRIC EEG MONITORING	1.70	1,062	4,653	4	8,330	6,651	1,678	1,431	189	2,042	126	903	92	14
B42A	NERV SYS DX W VENT SUPPORT+CCC	7.64	471	6,049	13	37,555	30,129	7,426	2,415	250	4,149	354	1,135	1,220	144
B42B	NERV SYS DX W VENT SUPPORT-CCC	4.14	543	2,867	5	20,328	16,116	4,212	1,095	105	1,140	148	446	704	67
B60A	ACUTE PARA/QUAD+/-OR PR +CCC	8.30	81	1,561	19	40,797	32,392	8,404	2,956	1,051	10,787	863	2,609	847	84
B60B	ACUTE PARA/QUAD+/-OR PR -CCC	3.30	117	819	7	16,226	12,951	3,274	1,077	491	3,341	275	894	325	15
B61A	SPINAL CORD COND+/-OR PR +CSCC	6.63	534	7,769	15	32,578	25,055	7,523	2,674	404	6,837	581	1,872	623	80
B61B	SPINAL CORD COND+/-OR PR -CSCC	2.26	733	3,252	4	11,097	8,669	2,428	875	100	2,208	193	619	167	20
B62Z	APHERESIS	0.27	306	312	1	1,330	1,018	312	94	13	164	15	114	320	57

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
A01Z	2,552	457	3,054	906	9,601	652	16,487	3,333	14,735	2,342	508	93	5,210	3,127	30	6	4,034	7,463	1,760	2,979	9
A03Z	1,972	401	4,214	744	18,023	441	37,057	3,603	16,978	2,007	320	62	4,140	1,413	71	10	1,322	7,492	3,894	2,047	4
A05Z	2,194	429	4,725	870	16,543	837	54,544	7,793	30,578	3,042	346	73	7,192	2,019	596	128	4,757	11,169	3,521	3,104	5
A06A	3,958	784	5,914	1,238	3,982	282	101,030	21,319	8,191	1,600	898	218	1,830	2,244	332	58	2,214	15,394	4,509	5,733	90
A06B	2,163	412	2,433	574	2,262	162	36,318	7,805	5,538	1,098	801	197	1,179	1,287	273	46	1,752	6,508	1,978	2,552	108
A06C	1,037	216	1,177	263	897	58	23,539	4,982	1,812	328	747	185	561	697	132	18	448	3,649	1,124	1,629	66
A06D	303	56	1,625	349	486	40	2,810	634	10,009	2,169	191	45	1,058	1,032	17	4	941	2,323	1,003	1,034	53
A07Z	1,234	215	2,686	512	24,049	1,177	5,040	811	524	100	66	15	3,100	1,973	19	5	89	4,218	1,676	1,582	20
A08A	795	122	1,214	332	6,676	349	2,001	343	240	48	27	7	1,358	1,559	159	15	59	2,706	1,177	979	37
A08B	163	27	270	105	2,349	189	19	6	72	13	15	4	476	604	15	4	9	703	405	383	34
A09A	1,147	205	757	234	12,276	594	1,122	227	6,564	1,172	62	12	1,207	954	34	4	421	2,752	910	927	20
A09B	798	168	692	159	8,361	502	305	77	5,921	1,244	108	18	826	709	1	0	436	1,811	696	777	20
A10Z	2,906	589	6,617	2,142	14,696	995	112,622	13,694	15,969	2,698	235	56	9,383	2,697	457	67	92,891	14,586	5,741	4,597	7
A11A	951	163	2,490	460	971	112	9,982	1,701	5,006	1,270	27	9	4,006	1,779	54	7	7,500	4,012	1,377	1,197	7
A11B	154	22	504	246	550	57	-	-	2,440	589	11	2	365	697	31	4	7,046	965	325	485	17
A12Z	216	32	246	351	123	25	122	34	3,861	917	19	3	212	310	33	23	14,169	688	306	388	32
A40Z	2,783	587	3,803	645	3,792	313	71,062	14,495	13,253	2,513	603	132	2,876	1,759	544	98	3,361	12,083	3,015	3,999	29
B01A	537	106	361	128	278	28	598	140	3,216	683	550	133	722	706	4	2	1,165	1,186	493	450	30
B01B	328	68	253	93	114	12	48	16	3,170	643	427	123	341	436	1	1	987	764	341	368	28
B02A	2,098	397	1,493	399	1,941	130	5,560	1,156	6,019	1,366	639	154	1,156	1,299	117	25	1,943	2,848	1,141	1,120	41
B02B	1,355	279	694	222	371	32	2,478	581	5,264	1,151	433	109	687	796	112	22	1,622	1,631	698	797	43
B02C	1,034	216	407	152	204	21	1,264	296	4,823	1,026	273	70	475	560	102	18	1,603	1,168	536	624	55
B03A	855	124	790	302	532	66	981	230	6,092	1,308	394	93	849	971	34	11	2,759	1,779	779	764	39
B03B	282	46	300	187	147	17	333	72	4,780	1,027	126	32	270	360	14	4	2,694	839	363	450	51
B04A	965	175	871	235	309	36	2,591	599	4,557	911	682	140	562	683	242	33	920	1,773	706	629	44
B04B	500	91	189	78	92	11	1,070	239	4,201	824	162	41	239	281	83	12	833	824	320	384	63
B05Z	3	1	15	7	11	2	2	1	1,136	270	4	1	22	51	4	1	31	141	59	75	200
B06A	597	123	972	266	400	56	765	200	2,580	509	480	112	559	742	118	19	878	1,319	642	513	98
B06B	34	6	130	40	41	6	53	9	2,222	476	14	3	63	118	16	1	186	333	137	164	157
B07A	445	90	630	182	298	34	670	151	2,990	657	832	220	415	620	59	31	459	1,192	560	442	109
B07B	35	8	69	27	35	5	74	13	2,387	538	283	81	74	131	8	1	116	361	161	178	152
B40Z	5	1	12	11	241	50	-	-	2	2	0	0	107	40	1	0	0	70	16	21	20
B41Z	334	54	691	48	135	22	89	21	47	9	75	19	418	377	0	0	3	676	229	286	27
B42A	995	188	1,235	282	501	45	13,970	2,813	433	100	1,112	286	497	720	36	6	37	2,906	834	894	86
B42B	580	122	517	118	215	21	8,528	1,877	405	89	975	250	223	280	12	2	35	1,353	452	569	94
B60A	1,605	294	2,357	628	1,168	77	2,457	485	2,103	416	594	146	1,259	1,425	82	17	1,350	2,948	1,127	1,061	23
B60B	449	89	1,037	245	181	20	1,709	388	1,388	301	294	75	433	451	73	14	798	984	458	423	36
B61A	865	161	1,847	568	422	49	2,104	516	2,690	629	638	158	1,015	1,388	24	6	2,126	2,186	1,109	1,007	90
B61B	450	89	540	168	127	22	352	81	1,117	252	559	148	470	448	27	5	788	625	323	323	149
B62Z	9	1	16	12	140	12	35	0	11	2	0	0	93	64	4	0	0	84	35	35	17

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
B63Z	DMNTIA&CHRNIC DISTURB CRBRL FN	2.67	7,256	84,804	12	13,132	9,395	3,737	1,538	254	4,083	475	1,185	205	47
B64A	DELIRIUM+CCC	2.58	2,816	30,602	11	12,658	9,477	3,181	1,551	176	3,475	343	1,088	341	34
B64B	DELIRIUM-CCC	1.36	6,377	33,443	5	6,705	4,950	1,754	807	104	1,728	204	539	144	13
B65Z	CEREBRAL PALSY	0.55	1,905	2,486	1	2,684	2,209	475	280	47	386	26	184	19	3
B66A	NERVOUS SYSTEM NEOPLASM+CSCC	2.39	2,339	19,136	8	11,744	8,756	2,988	1,373	217	3,023	361	945	212	21
B66B	NERVOUS SYSTEM NEOPLASM-CSCC	1.00	2,743	8,446	3	4,921	3,701	1,220	544	90	1,048	119	361	91	11
B67A	DEGNRTV NERV SYS DIS+CSCC	2.78	2,409	25,409	11	13,643	10,228	3,415	1,715	221	3,785	426	1,066	285	33
B67B	DEGNRTV NERV SYS DIS+MCC	1.53	1,440	8,426	6	7,531	5,493	2,037	1,005	136	1,845	265	638	148	14
B67C	DEGNRTV NERV SYS DIS-CC	0.40	8,525	15,168	2	1,986	1,517	469	272	39	399	62	148	123	9
B68A	MLT SCLROSIS&CEREBEL ATAXIA+CC	2.23	725	5,546	8	10,962	8,441	2,521	1,376	190	2,913	341	879	290	28
B68B	MLT SCLROSIS&CEREBEL ATAXIA-CC	0.40	14,203	17,600	1	1,968	1,711	258	123	13	158	20	74	31	5
B69A	TIA & PRECEREBRAL OCCLUSN+CSCC	1.45	2,600	12,408	5	7,118	5,407	1,712	839	108	1,562	208	476	162	14
B69B	TIA & PRECEREBRAL OCCLUSN-CSCC	0.72	8,973	19,979	2	3,521	2,671	850	374	46	586	89	218	66	6
B70A	STROKE & OTH CEREB DIS +CCC	3.55	6,801	84,638	12	17,443	13,330	4,113	1,857	233	4,718	475	1,216	372	43
B70B	STROKE & OTH CEREB DIS +SCC	1.99	6,710	43,218	6	9,766	7,382	2,384	1,103	133	2,222	265	645	183	18
B70C	STROKE & OTH CEREB DIS -CSCC	1.38	7,607	33,142	4	6,794	5,135	1,659	803	85	1,348	170	449	122	12
B70D	STRKE&OTH CEREB DIS DIE/TRN<5D	0.73	4,087	7,430	2	3,599	2,784	815	293	41	496	60	200	67	6
B71A	CRANIAL & PERIPHL NERV DSRD+CC	1.62	2,815	15,734	6	7,976	6,047	1,929	979	122	1,869	227	596	276	32
B71B	CRANIAL & PERIPHL NERV DSRD-CC	0.30	15,923	22,088	1	1,470	1,117	353	209	27	257	34	114	71	9
B72A	NRVS SYS INF EX VRL MNGTS+CSCC	3.78	919	11,578	13	18,569	14,319	4,250	2,394	328	4,561	449	1,284	616	65
B72B	NRVS SYS INF EX VRL MNGTS-CSCC	1.48	2,083	9,513	5	7,260	5,571	1,689	1,006	140	1,785	183	501	242	21
B73Z	VIRAL MENINGITIS	0.97	2,898	8,518	3	4,780	3,616	1,164	662	88	1,107	107	338	149	13
B74A	NONTRAUMATIC STUPOR & COMA +CC	1.17	995	3,690	4	5,768	4,353	1,415	627	75	1,261	153	393	135	16
B74B	NONTRAUMATIC STUPOR & COMA -CC	0.48	707	1,066	2	2,380	1,828	552	231	31	363	49	140	46	4
B75Z	FEBRILE CONVULSIONS	0.50	1,853	2,438	1	2,442	1,849	593	375	53	507	43	157	43	4
B76A	SEIZURE + CSCC	1.84	4,684	25,779	6	9,038	6,917	2,122	1,063	125	2,041	225	609	210	21
B76B	SEIZURE - CSCC	0.65	22,465	41,379	2	3,176	2,398	778	410	56	588	70	216	61	6
B77Z	HEADACHE	0.46	22,830	36,408	2	2,282	1,740	542	254	34	373	48	151	44	4
B78A	INTRACRANIAL INJURY+CSCC	2.71	2,045	17,713	9	13,307	10,196	3,111	1,384	173	3,374	355	868	299	33
B78B	INTRACRANIAL INJURY-CSCC	1.14	4,085	13,272	3	5,623	4,268	1,355	596	72	1,174	137	346	85	9
B79A	SKULL FRACTURES+CSCC	2.01	198	1,175	6	9,856	7,402	2,454	1,083	117	1,938	272	611	164	18
B79B	SKULL FRACTURES-CSCC	0.76	1,470	2,878	2	3,743	2,846	897	417	50	676	69	221	31	3
B80Z	OTHER HEAD INJURY	0.40	15,171	20,074	1	1,990	1,502	488	213	29	276	39	121	18	2
B81A	OTHER DSRD OF NERVOUS SYS+CSCC	2.14	4,282	34,702	8	10,494	7,868	2,626	1,289	148	2,701	312	837	255	28
B81B	OTHER DSRD OF NERVOUS SYS-CSCC	0.83	11,212	28,656	3	4,067	3,086	981	513	67	716	93	268	87	11
B82A	CHR UNSP PARA/QUAD+/-OR PR+CCC	6.55	1,201	22,845	19	32,192	24,871	7,322	3,217	579	8,807	891	2,245	770	86
B82B	CHR UNSP PARA/QUAD+/-PR+SCC	2.70	1,183	9,631	8	13,268	9,995	3,273	1,478	242	3,184	383	960	242	23
B82C	CHR UNSP PARA/QUAD+/- PR -CSCC	1.53	2,068	9,100	4	7,499	5,619	1,879	848	128	1,626	198	557	108	10
C01Z	PROC FOR PENETRATNG EYE INJURY	1.89	636	1,899	3	9,288	7,096	2,191	1,131	144	1,047	181	419	53	4
C02Z	ENUCLEATIONS & ORBITAL PROCS	1.87	609	1,878	3	9,185	7,030	2,155	1,195	116	1,151	169	444	298	34

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
B63Z	159	31	607	172	223	32	76	20	19	5	605	159	428	814	4	1	4	1,000	603	385	261
B64A	285	45	673	173	336	37	143	29	27	7	908	214	421	670	3	1	4	905	493	275	177
B64B	151	27	299	85	121	16	67	17	15	3	766	191	201	351	1	0	3	430	264	159	263
B65Z	57	17	276	30	64	7	3	0	601	70	15	4	107	94	5	2	99	176	46	64	67
B66A	430	73	696	165	461	36	72	16	46	16	632	158	467	631	34	9	10	879	418	342	178
B66B	294	56	197	56	225	19	14	3	191	43	366	95	213	242	5	1	18	319	147	154	194
B67A	284	51	880	215	400	41	189	45	97	17	685	172	442	707	40	18	11	971	512	336	191
B67B	187	35	445	106	192	21	48	11	83	15	472	124	234	424	22	4	6	522	307	221	191
B67C	57	11	86	21	114	11	10	2	41	10	123	33	71	86	11	3	4	127	60	50	224
B68A	362	64	694	154	448	38	94	20	97	16	567	138	383	499	2	1	10	749	367	242	125
B68B	37	7	30	8	1,126	52	1	0	15	5	43	11	40	41	1	0	2	71	28	26	169
B69A	351	61	441	100	152	19	89	25	19	5	918	230	204	300	6	1	13	426	219	167	184
B69B	249	46	160	40	55	8	21	7	12	3	749	192	89	127	6	2	5	188	94	84	250
B70A	577	101	1,611	355	396	39	375	89	49	18	1,018	236	531	792	33	7	25	1,235	638	403	195
B70B	477	87	819	189	197	22	191	47	20	6	944	231	286	432	18	4	15	612	346	253	205
B70C	450	82	410	99	133	15	125	33	31	9	842	208	197	300	18	3	29	415	224	181	218
B70D	177	35	167	43	45	5	213	47	40	9	783	193	181	120	4	1	10	196	78	89	252
B71A	280	48	413	97	243	24	236	54	122	25	501	128	277	376	13	3	8	558	266	201	197
B71B	46	9	50	13	52	5	5	2	88	19	114	31	51	66	13	2	4	101	40	38	242
B72A	643	104	735	185	993	89	895	207	162	34	788	187	631	824	12	2	22	1,292	600	467	141
B72B	199	41	186	53	312	25	273	64	89	19	544	141	253	322	1	0	6	441	215	201	215
B73Z	102	17	52	24	105	13	40	9	23	5	849	221	127	218	5	2	2	272	127	102	177
B74A	148	29	236	59	147	18	321	72	13	2	744	199	163	247	7	1	8	387	177	130	161
B74B	73	17	58	15	24	3	143	30	14	3	572	154	58	69	26	9	10	135	56	48	156
B75Z	22	5	27	11	19	3	53	12	19	4	527	151	62	105	-	-	1	137	51	53	173
B76A	230	42	410	92	242	27	619	141	41	8	902	221	255	397	5	1	6	608	279	217	211
B76B	107	25	94	22	57	7	90	22	39	9	562	155	89	129	3	1	4	188	82	85	274
B77Z	122	22	48	14	40	4	8	2	44	9	537	144	57	83	2	0	4	125	56	51	286
B78A	497	96	815	191	263	30	759	170	53	23	1,034	255	403	571	9	2	11	860	462	316	150
B78B	286	59	248	67	72	9	235	54	27	9	880	231	157	225	1	0	8	313	173	150	195
B79A	472	106	622	126	176	19	482	106	103	47	1,245	304	221	406	-	-	12	609	332	266	83
B79B	171	37	123	32	39	7	88	24	75	18	784	221	126	140	-	-	6	197	89	97	175
B80Z	100	23	46	14	16	2	36	8	7	2	570	162	48	65	0	0	1	97	43	52	274
B81A	320	56	629	156	256	29	168	39	48	13	772	190	329	537	9	2	9	738	380	246	201
B81B	330	67	169	40	65	8	49	15	105	23	475	124	140	171	14	3	34	251	113	118	268
B82A	601	108	1,377	395	1,017	89	1,864	403	1,474	324	690	179	1,102	1,437	91	17	470	2,114	1,036	810	149
B82B	253	47	519	149	437	37	432	116	705	169	546	149	458	634	36	19	313	882	482	375	163
B82C	144	27	265	85	198	20	100	29	606	134	393	106	311	369	44	9	189	477	272	243	186
C01Z	83	16	113	49	193	29	65	19	2,743	685	360	106	266	271	5	1	241	558	231	273	73
C02Z	94	16	102	47	221	22	61	16	2,552	629	119	36	238	310	3	0	232	583	215	282	67

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
C03Z	RETINAL PROCEDURES	0.73	9,621	12,736	1	3,607	2,693	914	412	52	318	69	160	15	2
C04Z	MAJOR CORN, SCLERAL&CONJNCT PR	1.50	905	2,078	2	7,364	5,515	1,848	713	76	830	162	333	63	5
C05Z	DACRYOCYSTORHINOSTOMY	0.94	845	961	1	4,612	3,477	1,135	506	41	277	64	152	15	2
C10Z	STRABISMUS PROCEDURES	0.79	1,796	1,837	1	3,899	2,959	940	440	25	152	34	112	6	1
C11Z	EYELID PROCEDURES	0.68	3,323	3,769	1	3,342	2,542	800	389	29	174	35	113	16	2
C12Z	OTHER CORN, SCLERAL&CONJNCT PR	0.73	2,850	3,873	1	3,609	2,698	911	459	35	285	58	152	43	6
C13Z	LACRIMAL PROCEDURES	0.46	581	667	1	2,247	1,690	557	303	17	122	26	91	27	3
C14Z	OTHER EYE PROCEDURES	0.58	1,882	2,953	2	2,848	2,152	696	487	38	304	72	147	62	7
C15A	GLAUCOMA/CX CATARACT PROCS	1.32	878	2,100	2	6,502	4,793	1,709	898	92	878	162	335	34	4
C15B	GLAUCOMA/CX CATARACT PROCS, SD	0.63	2,001	2,001	1	3,097	2,302	795	272	28	78	20	76	4	1
C16Z	LENS PROCEDURES	0.55	57,379	57,951	1	2,681	2,094	587	452	22	97	20	86	4	1
C60A	AC & MJR EYE INFECTN +CC	2.24	397	2,851	7	11,029	8,223	2,806	2,128	210	2,830	333	937	191	16
C60B	AC & MJR EYE INFECTN -CC	1.36	768	3,267	4	6,695	4,937	1,757	1,474	122	1,743	228	622	74	8
C61A	NEUROLOGICAL&VASCLR EYE DIS+CC	1.31	485	2,185	5	6,453	4,879	1,573	854	113	1,288	177	471	192	19
C61B	NEUROLOGICAL&VASCLR EYE DIS-CC	0.57	1,455	2,692	2	2,814	2,123	690	343	36	438	64	179	88	9
C62Z	HYPHEMA &MED MANAGD EYE TRAUMA	0.50	3,736	6,413	2	2,445	1,826	620	331	38	416	58	168	28	3
C63Z	OTHER DISORDERS OF THE EYE	0.55	4,497	8,527	2	2,721	2,026	695	463	47	462	62	208	53	6
D01Z	COCHLEAR IMPLANT	6.63	516	646	1	32,584	29,080	3,504	700	77	644	135	291	19	3
D02A	HEAD & NECK PR +CSCC	6.03	461	4,586	10	29,652	23,757	5,896	2,418	216	3,533	309	1,174	744	81
D02B	HEAD & NECK PR+MALIGNANCY/MCC	3.09	270	1,234	5	15,170	12,104	3,065	1,330	141	1,646	157	604	371	44
D02C	HEAD & NECK PR -MALIGNANCY -CC	1.85	484	1,001	2	9,084	7,206	1,878	719	60	841	94	354	113	13
D03Z	SURGCL RPR CLEFT LIP/PALATE DX	1.84	565	1,228	2	9,050	7,132	1,918	795	57	1,309	87	453	19	4
D04A	MAXILLO SURGERY + CC	2.48	1,110	3,446	3	12,186	9,795	2,391	1,063	88	1,040	116	435	79	8
D04B	MAXILLO SURGERY - CC	1.73	2,962	5,447	2	8,478	6,799	1,679	657	53	646	82	286	24	3
D05Z	PAROTID GLAND PROCEDURES	2.26	748	1,708	2	11,105	8,797	2,308	801	67	847	103	343	231	24
D06Z	SINUS &CMPLX MDDL EAR PR	1.35	3,860	4,788	1	6,651	5,157	1,494	822	57	430	75	225	70	8
D10Z	NASAL PROCEDURES	0.94	6,202	6,577	1	4,643	3,581	1,062	486	39	366	63	172	18	2
D11Z	TONSILLECTOMY, ADENOIDECTOMY	0.72	17,822	19,819	1	3,520	2,688	832	394	40	530	65	175	24	3
D12Z	OTH EAR,NOSE,MOUTH & THROAT PR	1.07	8,141	12,475	2	5,257	4,066	1,190	467	38	462	56	215	65	7
D13Z	MYRINGOTOMY +TUBE INSERTION	0.40	6,435	6,920	1	1,985	1,523	462	252	20	141	19	78	10	2
D14Z	MOUTH & SALIVARY GLAND PROCS	0.95	4,328	7,143	2	4,691	3,665	1,026	435	39	402	53	203	120	12
D15Z	MASTOID PROCEDURES	2.34	1,022	2,210	2	11,484	8,993	2,491	964	91	783	128	341	99	12
D40Z	DENTAL EXTRACT & RESTORATIONS	0.62	18,958	20,730	1	3,028	2,264	764	178	40	166	25	122	12	1
D60A	EAR NOSE MOUTH&THROAT MAL+CSCC	2.56	844	6,433	8	12,594	9,571	3,023	1,416	404	3,146	324	926	288	26
D60B	EAR NOSE MOUTH&THROAT MAL-CSCC	0.70	2,276	3,953	2	3,447	2,656	791	342	70	494	68	217	110	9
D61Z	DYSEQUILIBRIUM	0.56	17,137	34,125	2	2,755	2,064	691	312	34	498	76	195	46	4
D62Z	EPISTAXIS	0.49	4,923	8,474	2	2,396	1,800	596	350	32	440	55	177	57	5
D63Z	OTITIS MEDIA AND URI	0.59	31,827	57,514	2	2,892	2,168	724	412	63	619	74	209	71	6
D64Z	LARYNGOTRACHEITIS&EPIGLOTTITIS	0.43	4,669	5,946	1	2,122	1,615	507	298	41	349	31	124	18	2
D65Z	NASAL TRAUMA & DEFORMITY	0.43	3,826	5,241	1	2,113	1,614	500	216	21	232	31	126	18	2

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
C03Z	7	1	22	10	98	11	4	1	1,289	347	27	8	120	109	0	0	90	228	82	126	75
C04Z	11	4	45	29	201	27	11	3	2,200	596	14	4	190	230	0	0	765	428	174	248	44
C05Z	7	1	13	12	63	9	11	3	2,007	519	27	7	110	116	-	-	87	303	108	151	69
C10Z	1	0	19	8	48	7	8	2	1,843	479	1	0	100	99	-	-	29	253	81	149	76
C11Z	12	3	22	9	35	4	2	1	1,444	368	61	18	90	83	2	0	35	200	84	111	165
C12Z	13	3	45	17	65	12	14	4	1,320	358	12	4	114	108	1	0	48	211	96	128	119
C13Z	5	1	13	6	16	2	6	1	878	235	19	6	90	72	-	-	30	149	51	77	87
C14Z	7	2	22	10	62	8	0	0	796	208	31	11	108	99	2	0	23	178	72	92	144
C15A	27	4	54	29	175	23	2	1	1,818	541	54	17	168	227	3	1	167	415	180	195	53
C15B	1	0	18	8	65	10	-	-	1,378	440	3	1	137	70	2	0	141	201	50	92	94
C16Z	2	1	20	12	33	5	0	0	982	275	1	0	65	62	3	1	275	134	55	74	134
C60A	160	26	269	90	532	51	64	23	15	3	526	139	486	576	1	0	4	722	402	294	117
C60B	47	11	98	38	288	35	8	3	52	13	272	83	275	385	1	0	4	391	212	210	144
C61A	422	75	218	52	199	19	65	21	76	19	716	184	185	296	14	4	7	398	202	168	111
C61B	233	46	66	18	50	6	5	2	121	29	370	100	79	114	52	11	6	186	78	85	132
C62Z	92	21	68	21	30	5	12	3	68	16	490	137	68	100	0	0	3	132	72	66	244
C63Z	74	17	52	19	107	11	18	5	202	49	224	65	94	133	2	1	9	175	76	87	234
D01Z	46	10	305	265	114	27	70	20	3,921	994	11	1	145	210	0	0	23,390	587	231	367	24
D02A	322	62	843	199	348	33	1,683	367	9,757	1,861	62	14	641	729	72	13	547	2,117	778	730	59
D02B	81	14	400	77	154	16	531	120	5,616	1,154	48	10	295	395	26	5	291	923	334	384	62
D02C	85	18	70	31	85	11	362	83	3,580	747	47	14	126	196	12	3	365	590	211	255	89
D03Z	5	1	111	40	53	12	288	67	3,464	685	1	0	145	262	-	-	55	634	219	283	27
D04A	242	50	196	70	115	14	370	75	3,915	859	408	113	178	282	20	3	1,144	709	282	313	60
D04B	106	23	85	37	64	8	88	22	3,228	713	195	57	107	173	13	3	864	522	199	221	86
D05Z	10	2	48	28	63	9	68	16	5,391	1,126	8	2	162	227	15	2	154	778	280	300	93
D06Z	22	4	37	17	89	11	42	10	2,915	654	18	4	80	166	12	3	98	436	148	198	124
D10Z	4	1	17	10	47	7	23	6	2,111	481	8	2	51	112	2	0	60	310	110	136	138
D11Z	7	2	22	11	40	7	27	7	1,178	273	36	11	60	119	17	2	48	225	94	104	167
D12Z	42	10	48	18	55	7	118	27	2,048	470	103	29	81	141	10	2	96	352	130	161	177
D13Z	5	1	11	6	22	3	3	0	813	192	11	3	24	53	0	0	66	125	52	72	141
D14Z	55	10	56	16	50	6	203	47	1,619	361	128	35	75	117	10	2	73	315	119	128	185
D15Z	49	11	66	25	177	26	73	18	5,454	1,238	34	9	155	239	8	1	162	765	246	309	93
D40Z	9	3	38	9	26	4	22	5	1,421	376	29	8	45	76	1	0	32	189	82	109	167
D60A	298	52	944	160	682	55	266	56	278	62	242	61	475	576	98	20	19	910	372	437	120
D60B	100	19	139	32	219	19	9	2	679	158	46	13	89	110	34	10	27	233	88	109	143
D61Z	114	21	102	27	42	6	19	6	6	1	593	162	70	108	6	1	6	158	79	62	277
D62Z	17	3	37	14	49	5	19	5	77	17	455	133	75	109	0	0	7	143	63	51	227
D63Z	36	7	44	17	70	7	46	11	30	7	483	139	89	130	3	1	2	169	74	73	298
D64Z	12	3	19	9	14	2	200	44	20	4	446	127	53	80	4	1	1	131	43	47	220
D65Z	64	14	47	14	17	3	16	3	449	97	315	84	36	67	2	0	8	127	51	54	208

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
D66A	OTH EAR,NOSE,MOUTH&THRT DX +CC	1.18	1,859	6,897	4	5,776	4,392	1,384	754	94	1,137	140	379	133	12
D66B	OTH EAR,NOSE,MOUTH&THRT DX -CC	0.40	12,108	16,081	1	1,943	1,475	468	255	28	234	32	136	32	3
D67A	ORAL&DNTAL DIS-EXTRCT&RESTN	0.88	5,823	14,589	3	4,341	3,264	1,078	584	84	881	102	319	75	7
D67B	ORAL&DNTAL DIS-EXTRCT&RESTN,SD	0.23	7,221	7,221	1	1,152	883	270	89	14	80	13	54	11	1
E01A	MAJOR CHEST PROCEDURE + CCC	5.80	2,176	28,462	13	28,509	22,693	5,815	2,654	243	4,446	352	1,428	1,046	123
E01B	MAJOR CHEST PROCEDURE - CCC	3.21	2,383	15,537	7	15,777	12,461	3,316	1,658	169	2,372	203	722	520	50
E02A	OTHER RESPIRATRY SYS OR PR+CCC	4.54	981	11,752	12	22,298	17,415	4,883	2,186	260	3,866	375	1,277	877	93
E02B	OTH RESPIRATRY SYS OR PR+SMCC	2.02	828	3,394	4	9,931	7,758	2,173	956	120	1,472	144	493	293	37
E02C	OTHER RESPIRATY SYS OR PR -CC	0.89	5,629	7,291	1	4,391	3,382	1,009	471	42	646	71	215	53	6
E40A	RESP DX W VENTILATOR SUPPT+CCC	6.94	945	10,234	11	34,115	26,876	7,238	1,979	161	2,123	225	884	1,371	160
E40B	RESP DX W VENTILATOR SUPPT-CCC	4.89	297	1,944	7	24,031	19,216	4,814	1,318	140	1,322	166	550	817	81
E41Z	RESP SYS DX +NON-INVAS VENTILN	4.52	5,562	55,120	10	22,192	17,311	4,882	2,027	222	3,674	330	980	644	67
E42A	BRONCHOSCOPY +CCC	4.63	1,015	14,412	14	22,762	17,867	4,895	2,705	375	4,879	483	1,486	1,132	118
E42B	BRONCHOSCOPY -CCC	2.17	2,558	16,484	6	10,661	8,266	2,395	1,343	157	1,998	214	694	616	50
E42C	BRONCHOSCOPY SAMEDAY	0.41	6,740	6,740	1	2,022	1,646	376	125	9	52	10	56	267	16
E60A	CYSTIC FIBROSIS +CSCC	4.40	1,807	21,638	12	21,634	17,435	4,199	2,907	583	4,567	307	1,320	395	43
E60B	CYSTIC FIBROSIS -CSCC	3.13	1,560	13,932	9	15,357	11,934	3,423	1,816	331	3,247	214	987	255	41
E61A	PULMONARY EMBOLISM + CCC	2.75	1,279	11,803	9	13,526	10,387	3,139	1,627	220	2,970	373	923	450	48
E61B	PULMONARY EMBOLISM - CCC	1.25	6,959	33,334	5	6,118	4,670	1,448	796	99	1,199	155	414	190	18
E62A	RESPIRATRY INFECTN/INFLAMM+CCC	2.26	18,397	147,723	8	11,112	8,442	2,670	1,295	167	2,804	339	783	364	40
E62B	RESPIRATRY INFECTN/INFLAM+SMCC	1.36	20,269	93,178	5	6,661	4,953	1,708	811	109	1,590	226	493	200	19
E62C	RESPIRATORY INFECTN/INFLAMM-CC	0.82	20,915	56,240	3	4,051	2,992	1,059	538	75	938	131	307	100	9
E63Z	SLEEP APNOEA	0.38	6,299	8,737	1	1,885	1,432	453	181	15	182	18	163	15	2
E64A	PULMONRY OEDEMA &RESP FAIL+CCC	2.18	1,007	6,642	7	10,709	8,092	2,617	1,154	140	2,064	215	660	355	41
E64B	PULMONRY OEDEMA &RESP FAIL-CCC	1.16	1,149	3,852	3	5,718	4,244	1,474	597	77	989	135	342	149	15
E65A	CHRNIC OBSTRCT AIRWAY DIS +CCC	2.05	10,643	79,165	7	10,071	7,629	2,442	1,266	165	2,403	316	746	307	34
E65B	CHRNIC OBSTRCT AIRWAY DIS -CCC	1.13	33,041	136,197	4	5,568	4,115	1,453	729	98	1,253	210	440	139	12
E66A	MAJOR CHEST TRAUMA +CCC	2.88	695	7,056	10	14,172	10,834	3,338	1,759	148	3,124	349	1,002	353	40
E66B	MJR CHEST TRMA +SMCC	1.39	1,778	7,834	4	6,850	5,164	1,685	825	87	1,299	175	451	118	11
E66C	MAJOR CHEST TRAUMA -CC	0.77	2,149	5,001	2	3,786	2,845	941	439	39	597	84	249	43	4
E67A	RESPIRATRY SIGNS & SYMPTM+CSCC	1.12	2,085	7,637	4	5,509	4,162	1,347	663	79	1,098	135	390	164	18
E67B	RESPIRTRY SIGNS & SYMPTM -CSCC	0.47	10,352	14,670	1	2,291	1,704	587	265	33	328	38	139	45	4
E68A	PNEUMOTHORAX +CC	1.80	1,799	9,434	5	8,866	6,791	2,075	1,039	139	1,763	250	569	163	12
E68B	PNEUMOTHORAX -CC	0.85	1,941	5,083	3	4,193	3,133	1,060	535	66	826	121	289	46	3
E69A	BRONCHITIS & ASTHMA +CC	1.08	5,790	19,130	3	5,303	4,012	1,291	666	87	1,060	142	365	135	13
E69B	BRNCHTS&ASTHMA -CC	0.53	26,830	42,098	2	2,595	1,926	670	362	47	536	61	181	30	3
E70A	WHOOPNG CGH &ACTE BRNCHIO+CC	1.56	2,364	8,753	4	7,683	5,744	1,939	1,129	151	2,187	143	566	88	11
E70B	WHOOPNG CGH &ACTE BRNCHIO-CC	0.84	13,205	26,186	2	4,104	3,092	1,013	628	108	1,160	90	274	38	4
E71A	RESPIRATORY NEOPLASMS +CCC	2.37	2,964	25,226	9	11,645	8,721	2,924	1,477	227	2,935	354	903	356	33
E71B	RESPIRATORY NEOPLASMS -CCC	1.10	5,643	21,366	4	5,413	4,045	1,368	669	108	1,194	179	422	175	15

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
D66A	157	30	143	46	211	19	334	68	346	74	402	110	178	249	19	6	16	383	174	161	183
D66B	43	10	26	9	27	3	20	5	359	81	157	45	47	70	55	14	21	124	47	61	250
D67A	96	20	115	37	121	13	70	15	213	47	540	151	138	199	3	1	17	252	118	123	256
D67B	23	5	11	4	11	2	1	0	265	63	136	40	17	25	118	24	8	71	28	38	239
E01A	947	183	803	197	728	60	3,076	649	4,206	737	342	87	819	903	158	39	685	2,109	820	668	87
E01B	438	90	342	112	256	22	954	227	3,416	619	188	50	418	501	20	4	511	995	471	451	91
E02A	927	162	819	214	658	65	2,226	480	1,793	336	692	161	683	825	99	24	373	1,580	695	554	117
E02B	350	62	228	68	178	18	704	169	1,859	362	233	60	240	326	85	26	222	679	256	288	101
E02C	29	6	44	18	51	9	126	30	1,388	298	19	4	78	142	11	2	75	303	122	133	134
E40A	680	133	923	223	625	60	14,940	3,246	188	37	678	172	363	589	35	6	34	2,570	787	922	104
E40B	383	72	477	113	285	31	11,268	2,430	430	52	572	143	189	323	31	5	59	1,654	429	694	79
E41Z	319	59	725	174	566	49	5,754	1,284	79	12	846	213	495	676	136	29	9	1,615	642	566	150
E42A	818	136	913	220	1,740	96	952	209	692	129	739	173	872	990	127	23	33	1,495	702	525	98
E42B	366	60	314	86	514	33	148	39	822	159	438	108	395	467	205	56	46	709	339	287	111
E42C	46	10	15	4	30	3	1	0	756	153	4	1	31	26	116	32	26	132	43	60	106
E60A	325	64	1,722	372	3,076	150	61	13	198	38	204	47	1,032	740	670	224	22	1,514	624	417	62
E60B	178	52	1,201	223	2,105	142	8	1	285	60	114	31	616	705	609	212	17	1,067	445	397	82
E61A	597	102	452	118	574	56	891	208	46	9	955	226	420	560	26	6	14	920	432	302	151
E61B	316	54	118	37	242	24	196	51	13	2	828	206	204	255	10	2	8	372	166	144	229
E62A	247	44	518	129	386	39	481	110	31	7	865	216	352	500	14	3	8	750	374	246	247
E62B	136	27	227	66	210	24	157	38	21	4	754	199	216	322	5	1	4	408	222	174	284
E62C	73	15	83	30	83	12	48	12	7	2	620	175	128	195	3	1	2	233	123	111	292
E63Z	11	2	100	9	26	2	29	6	7	1	26	7	131	73	472	137	0	170	48	50	131
E64A	222	42	426	120	267	33	1,360	334	24	6	880	224	297	439	28	4	10	746	332	286	141
E64B	130	25	161	47	133	16	630	163	23	4	615	176	163	233	104	56	3	393	167	169	188
E65A	195	35	399	105	347	37	455	108	23	5	874	220	338	457	16	3	6	669	331	212	230
E65B	91	18	180	54	184	22	97	25	14	3	679	184	194	270	12	3	3	332	182	138	299
E66A	465	80	643	163	363	43	1,047	204	88	19	1,206	294	406	612	3	1	10	934	492	326	129
E66B	318	65	258	75	115	15	305	68	65	12	1,065	273	190	285	2	0	6	393	204	168	191
E66C	206	42	122	34	53	8	67	19	16	4	868	225	116	154	2	0	2	197	98	98	232
E67A	250	45	179	47	182	18	166	42	32	8	672	174	189	252	35	8	8	355	161	139	188
E67B	101	17	37	13	32	4	24	7	21	5	510	147	60	91	76	19	9	135	57	74	264
E68A	412	88	265	75	175	17	592	134	250	40	951	241	294	337	4	1	15	550	268	223	183
E68B	235	49	82	28	65	8	93	29	26	7	682	184	140	180	1	0	17	237	123	119	201
E69A	78	15	132	40	167	20	352	82	18	3	722	190	159	220	18	5	4	340	154	117	234
E69B	19	4	32	14	60	7	64	16	4	1	531	154	70	119	4	1	1	148	66	62	279
E70A	42	11	111	44	115	13	558	125	6	1	613	190	208	432	17	6	3	504	200	208	154
E70B	14	4	35	18	31	5	78	16	172	1	489	145	124	209	3	1	0	236	106	116	220
E71A	512	88	501	129	456	37	123	30	38	9	593	150	440	623	35	5	11	855	411	312	178
E71B	389	68	167	50	243	21	20	6	45	11	364	92	194	270	19	3	8	349	178	158	248

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
E72Z	RESP PROBS FROM NEONATL PERIOD	0.94	275	786	3	4,619	3,489	1,130	754	111	1,059	78	305	63	4
E73A	PLEURAL EFFUSION + CCC	2.58	1,134	10,338	9	12,682	9,741	2,941	1,540	172	3,108	339	926	514	54
E73B	PLEURAL EFFUSN + SMCC	1.36	1,562	7,453	5	6,680	5,043	1,637	811	94	1,463	186	484	256	23
E73C	PLEURAL EFFUSION - CC	0.69	1,382	3,423	2	3,405	2,577	828	433	51	594	83	225	163	13
E74A	INTERSTITAL LUNG DIS +CCC	2.46	575	5,241	9	12,065	9,056	3,008	1,599	180	2,821	338	893	378	47
E74B	INTERSTITIAL LUNG DIS +SMCC	1.47	666	3,448	5	7,246	5,399	1,846	955	119	1,671	224	527	240	24
E74C	INTERSTITIAL LUNG DIS -CC	0.81	859	2,429	3	3,994	2,984	1,010	498	60	723	117	270	130	12
E75A	OTHER RESP SYS DX +CCC	1.95	2,829	19,784	7	9,604	7,169	2,435	1,208	144	2,323	288	698	301	32
E75B	OT RESP SYS DX +SMCC	1.18	7,271	27,631	4	5,791	4,285	1,506	684	91	1,300	177	424	157	14
E75C	OTHER RESP SYS DX - CC	0.60	13,576	25,382	2	2,941	2,181	759	358	61	608	79	204	60	5
E76Z	RESPIRATORY TUBERCULOSIS	3.13	490	6,121	12	15,377	11,379	3,997	2,320	241	3,998	422	1,440	488	55
F01A	IMPLNTN/REPLCMNT AICD TTL+CCC	9.32	647	6,761	10	45,808	39,229	6,579	2,262	305	2,494	178	1,063	685	90
F01B	IMPLNTN/REPLCMNT AICD TTL-CCC	4.47	2,092	5,388	3	21,954	19,604	2,351	764	117	637	65	354	115	12
F02Z	OTHER AICD PROCEDURES	2.39	232	844	4	11,762	9,772	1,989	825	99	1,053	74	396	214	23
F03A	CRDC VALV PR+PMP+INV INVES+CCC	12.66	445	8,613	19	62,211	51,190	11,021	4,411	566	5,031	431	1,826	1,976	242
F03B	CRDC VALV PR+PMP+INV INVES-CCC	8.24	135	1,167	9	40,488	35,526	4,961	2,480	390	2,714	185	899	837	63
F04A	CRD VLV PR+PMP-INV INVES+CCC	9.87	2,397	29,214	12	48,511	40,330	8,182	3,031	372	3,693	293	1,404	1,551	210
F04B	CRD VLV PR+PMP-INV INVES-CCC	6.87	834	6,540	8	33,735	28,146	5,589	2,192	304	2,734	227	917	1,060	119
F05A	CRNRY BYPSS+INV INVES+REOP/CCC	10.40	1,037	17,703	17	51,122	40,757	10,365	3,906	432	4,692	390	1,688	1,785	216
F05B	CRNRY BYPSS+INV INVES-REOP-CCC	7.96	484	6,148	13	39,116	30,955	8,161	3,243	495	4,075	343	1,282	1,269	148
F06A	CRNRY BYPSS-INV INVS+REOP/CSCC	7.16	3,161	31,276	10	35,161	28,750	6,411	2,441	262	2,792	227	1,104	1,293	167
F06B	CRNRY BYPSS-INV INVS-REOP-CSCC	5.36	721	5,200	7	26,317	21,270	5,047	2,051	255	2,527	212	862	992	115
F07A	OTHER CARDTHOR/VASC PR+PMP+CCC	10.38	682	8,066	12	51,029	41,119	9,910	4,054	227	4,432	248	1,895	1,578	293
F07B	OTH CARDTHOR/VASC PR+PMP+SMCC	7.55	196	1,500	8	37,087	29,407	7,680	3,778	259	3,207	201	1,476	950	155
F07C	OTHER CARDTHOR/VASC PR+PMP-CC	5.81	166	960	6	28,568	23,143	5,426	2,672	185	2,117	130	1,123	802	136
F08A	MJR RECONSTRC VASC PR-PUMP+CCC	7.79	1,732	23,344	13	38,266	31,177	7,089	2,738	293	4,373	351	1,351	1,084	124
F08B	MJR RECONSTRC VASC PR-PUMP-CCC	4.44	2,194	11,956	5	21,830	18,086	3,744	1,370	143	1,938	177	611	344	33
F09A	OTH CARDIOTHOR PR-PMP+CCC	5.50	870	7,408	9	27,027	21,896	5,131	1,903	231	2,011	152	946	842	109
F09B	OTH CARDIOTHOR PR-PMP +SMCC	2.88	529	2,099	4	14,149	11,559	2,590	1,058	162	1,184	86	511	296	34
F09C	OTH CARDIOTHOR PR-PMP -CC	2.44	696	2,096	3	11,998	9,830	2,169	884	136	910	70	390	208	22
F10A	INTERVENTN CORONARY PR+AMI+CCC	3.70	1,763	12,581	7	18,195	14,583	3,612	1,390	188	1,419	139	647	494	55
F10B	INTERVENTN CORONARY PR+AMI-CCC	2.16	9,112	29,731	3	10,598	8,613	1,985	687	99	581	56	328	201	19
F11A	AMPUTN CIRC SYS-UP LMB&TOE+CCC	9.01	428	10,779	25	44,270	34,884	9,386	4,802	612	10,023	760	2,529	1,419	159
F11B	AMPUTN CIRC SYS-UP LMB&TOE-CCC	4.87	199	2,816	14	23,921	18,373	5,548	3,006	278	5,141	416	1,388	685	51
F12A	IMPLANT/REPLACE PM,TOT SYS+CCC	4.69	1,171	10,743	9	23,055	18,791	4,263	1,867	252	2,518	205	920	527	57
F12B	IMPLANT/REPLACE PM,TOT SYS-CCC	2.46	5,043	15,878	3	12,105	10,218	1,888	775	110	843	77	373	135	14
F13A	UP LIMB&TOE AMP CIRC DIS +CSCC	5.11	416	6,038	15	25,108	19,564	5,544	3,029	315	5,696	574	1,514	618	59
F13B	UP LIMB&TOE AMP CIRC DIS -CSCC	2.17	250	1,608	6	10,640	8,086	2,554	1,328	111	2,047	235	647	219	23
F14A	VASC PR-MJR RECONSTRC-PUMP+CCC	4.00	2,457	20,932	9	19,641	15,705	3,936	1,711	251	3,039	261	942	592	52
F14B	VASC PR-MJR RECONSTR-PUMP+SMCC	1.84	3,113	9,020	3	9,052	7,289	1,764	629	75	980	86	338	146	13

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
E72Z	34	9	151	34	304	9	293	47	7	1	138	42	161	271	100	32	0	339	131	142	75
E73A	587	95	430	117	514	41	430	99	44	11	805	195	440	585	17	3	23	864	425	304	144
E73B	353	60	198	57	214	20	145	40	50	12	626	156	240	315	26	8	18	430	220	176	183
E73C	256	44	78	25	76	9	37	13	50	15	452	117	107	144	10	3	11	201	104	93	170
E74A	284	51	534	127	366	36	500	125	25	5	895	231	420	582	26	4	5	827	447	320	127
E74B	214	40	315	81	257	22	141	40	24	5	616	161	256	355	19	3	4	471	270	192	145
E74C	170	38	122	35	382	26	27	10	30	7	376	107	122	186	36	4	11	236	142	114	159
E75A	239	44	404	112	360	33	243	65	27	6	797	207	315	473	9	1	12	659	362	242	201
E75B	148	31	194	56	229	20	117	30	23	5	690	187	181	280	25	8	5	349	200	164	270
E75C	79	17	61	21	60	6	28	7	14	3	548	153	98	126	11	3	2	159	85	84	288
E76Z	239	47	562	159	1,006	81	73	23	19	7	372	95	657	995	1	0	9	1,092	628	345	97
F01A	621	102	1,336	793	400	53	5,192	1,324	1,105	245	446	119	774	635	2,457	438	18,994	1,847	759	1,091	43
F01B	194	30	677	403	71	15	552	183	812	140	95	25	441	232	1,824	307	12,646	515	214	513	46
F02Z	209	33	421	145	131	18	1,214	298	979	136	153	44	429	258	792	105	2,542	568	228	372	48
F03A	1,080	181	1,285	445	886	94	10,672	2,369	8,340	1,314	329	81	2,117	1,243	3,465	378	6,576	3,780	1,473	1,622	26
F03B	597	88	653	279	285	27	3,655	792	5,849	597	147	32	1,475	599	4,043	321	10,081	1,782	701	915	23
F04A	638	122	1,016	341	570	56	8,355	1,666	9,803	1,515	84	19	1,309	895	439	76	5,894	3,039	953	1,164	29
F04B	368	78	621	280	268	23	4,219	921	7,721	1,178	28	6	974	578	208	35	5,232	1,763	660	1,020	28
F05A	804	138	1,048	260	610	58	10,256	2,412	8,338	1,437	443	107	1,483	1,192	1,407	220	1,278	3,873	1,315	1,334	25
F05B	605	104	825	227	387	31	6,403	1,695	6,977	1,230	354	89	1,369	957	1,102	172	997	2,470	1,002	1,264	24
F06A	498	95	740	170	352	34	6,740	1,357	8,258	1,314	70	18	900	691	457	61	1,011	2,445	778	889	24
F06B	340	65	576	137	215	18	3,788	851	6,975	1,234	59	14	699	561	110	15	677	1,571	599	800	23
F07A	709	144	1,556	245	577	61	8,397	1,763	11,437	2,090	110	30	1,484	1,183	274	43	2,086	3,614	977	1,523	29
F07B	384	100	1,079	174	249	37	5,435	1,222	8,179	1,329	54	19	1,675	955	88	15	1,222	2,307	785	1,755	27
F07C	411	83	894	132	256	27	4,150	859	6,713	942	26	5	1,675	664	43	6	842	1,694	569	1,412	26
F08A	1,216	225	708	256	643	59	4,222	926	7,762	1,453	330	75	992	856	140	24	3,843	2,362	973	886	61
F08B	814	157	228	192	189	21	832	197	5,618	1,097	154	36	443	412	84	12	4,651	1,085	454	539	73
F09A	612	107	659	154	550	52	6,345	1,464	1,526	257	511	110	801	560	1,719	252	1,950	1,848	607	749	55
F09B	261	43	290	71	290	33	1,880	512	1,118	196	473	105	393	279	1,436	248	1,693	797	286	414	59
F09C	164	27	237	54	203	20	1,361	373	853	161	379	88	476	237	1,561	247	1,620	681	248	389	61
F10A	437	63	431	113	404	41	3,343	923	266	34	730	160	338	389	1,960	313	1,762	1,170	443	543	60
F10B	209	30	170	64	229	23	1,401	447	182	23	506	125	224	186	1,605	271	1,786	552	231	363	63
F11A	1,256	223	1,639	405	1,449	120	1,795	348	5,168	1,042	553	143	2,016	1,680	174	23	568	2,867	1,373	1,126	71
F11B	517	99	857	251	541	49	267	78	3,725	817	377	110	1,009	1,041	19	3	280	1,399	842	673	54
F12A	457	75	692	239	278	36	2,533	751	619	104	641	156	582	566	1,601	268	4,675	1,290	554	590	58
F12B	215	35	295	142	79	12	694	229	437	86	310	76	320	233	1,232	198	4,149	496	206	336	64
F13A	1,134	189	708	227	889	75	283	87	2,542	547	399	98	1,337	1,056	84	20	567	1,624	819	619	77
F13B	408	77	220	83	225	23	17	5	1,718	383	211	60	414	460	17	5	385	653	372	295	79
F14A	1,681	297	389	129	532	46	1,023	242	2,731	545	394	98	666	570	162	18	945	1,256	534	535	77
F14B	1,300	220	105	55	172	15	125	33	1,787	363	148	36	222	219	154	16	795	500	218	305	87

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
F14C	VASC PR-MJR RECONSTR-PUMP-CC	1.42	4,350	7,700	2	6,960	5,669	1,291	431	37	524	54	217	74	8
F15A	INTER CORONARY PR-AMI+STN+CSCC	2.37	2,089	7,887	4	11,665	9,640	2,024	779	114	862	68	381	259	26
F15B	INTER CORONRY PR-AMI+STNT-CSCC	1.66	5,591	9,866	2	8,172	6,883	1,289	423	66	461	35	223	105	11
F16A	INTERVN CORONARY PR-AMI-STN+CC	2.10	168	708	4	10,337	8,363	1,974	871	161	1,020	86	406	240	35
F16B	INTERV CORONARY PR-AMI-STNT-CC	1.27	276	502	2	6,256	5,141	1,115	402	72	440	39	210	84	10
F17A	INSERT/REPLACE PM GENERTR+CSCC	2.73	181	871	5	13,428	11,104	2,323	1,020	173	1,221	99	455	193	21
F17B	INSERT/REPLACE PM GENERTR-CSCC	1.44	1,510	1,811	1	7,088	6,209	879	268	33	219	25	143	23	4
F18A	OTHER PACEMAKER PROCEDURES+CC	3.12	168	1,194	7	15,344	12,677	2,666	1,644	273	1,844	130	705	447	51
F18B	OTHER PACEMAKER PROCEDURES-CC	1.21	194	389	2	5,961	4,804	1,158	460	53	625	52	258	80	18
F19Z	TRNS-VSCLR PERC CRDC INTRV	3.32	856	3,162	4	16,293	13,873	2,421	1,155	144	1,443	94	492	253	29
F20Z	VEIN LIGATION & STRIPPING	0.97	4,512	5,148	1	4,765	3,658	1,107	376	39	296	45	171	18	2
F21A	OTH CIRC SYS OR PR+CCC	4.75	674	9,345	14	23,319	18,284	5,036	2,621	383	4,529	490	1,458	775	84
F21B	OTH CIRC SYS OR PR -CCC	1.78	888	3,709	4	8,753	6,793	1,960	968	116	1,332	160	495	150	16
F40A	CIRC SYS DX+VENTILTR SUPPT+CCC	6.45	489	4,523	9	31,713	25,163	6,550	1,654	153	1,575	146	729	1,237	134
F40B	CIRC SYS DX+VENTILTR SUPPT-CCC	3.84	201	891	4	18,894	14,907	3,987	1,024	52	492	70	268	700	71
F41A	CRC DSRD+AMI+INVA INVE PR+CSCC	2.79	2,077	15,213	7	13,709	10,595	3,114	1,463	213	1,754	166	699	442	41
F41B	CRC DSRD+AMI+INVA INVE PR-CSCC	1.48	4,993	17,071	3	7,274	5,635	1,639	682	96	699	65	331	180	16
F42A	CRC DSRD-AMI+IC IN PR +CSCC	2.60	3,805	26,713	7	12,771	10,041	2,731	1,458	222	1,801	144	686	416	37
F42B	CRC DSRD-AMI+IC IN PR -CSCC	1.43	12,064	35,148	3	7,041	5,568	1,473	675	93	735	63	329	139	14
F42C	CRC DSRD-AMI+IC IN PR SD	0.61	13,894	13,894	1	3,007	2,419	588	137	24	161	9	107	16	2
F43Z	CIRC SYS DIAG W NIV	4.79	942	11,249	12	23,562	18,103	5,459	2,232	207	3,626	389	1,096	822	77
F60A	CRC DSRD+AMI-INVA INVE PR+CCC	2.23	3,440	25,423	7	10,966	8,323	2,642	1,277	161	2,223	300	710	359	34
F60B	CRC DSRD+AMI-INVA INVE PR-CCC	0.95	14,646	39,638	3	4,648	3,525	1,123	486	75	659	119	267	120	9
F61A	INFECTIVE ENDOCARDITIS +CCC	6.17	408	8,523	21	30,337	23,462	6,875	4,367	565	6,763	726	2,036	1,074	107
F61B	INFECTIVE ENDOCARDITIS -CCC	2.29	613	6,489	11	11,242	8,503	2,739	1,822	217	2,527	344	844	310	29
F62A	HEART FAILURE & SHOCK + CCC	2.33	11,116	95,092	9	11,474	8,673	2,801	1,424	166	2,697	331	851	377	40
F62B	HEART FAILURE & SHOCK - CCC	1.16	20,583	84,772	4	5,714	4,221	1,493	712	88	1,238	194	429	158	15
F63A	VENOUS THROMBOSIS + CSCC	1.75	1,344	9,281	7	8,601	6,524	2,078	1,104	152	2,015	251	664	305	33
F63B	VENOUS THROMBOSIS - CSCC	0.84	5,005	23,083	5	4,119	3,123	996	727	73	861	101	326	99	11
F64A	SKN ULCERS CIRC DISORD +CSCC	2.30	763	7,065	9	11,309	8,556	2,752	1,573	217	3,007	420	898	338	30
F64B	SKN ULCERS CIRC DISORD -CSCC	0.98	1,205	5,154	4	4,812	3,553	1,259	749	86	1,063	169	390	108	11
F65A	PERIPHERAL VASCULAR DSRD +CSCC	2.06	1,755	12,195	7	10,128	7,799	2,329	1,274	161	2,282	268	733	345	35
F65B	PERIPHERAL VASCULAR DSRD -CSCC	0.66	5,855	11,886	2	3,267	2,527	740	349	42	465	58	207	72	7
F66A	CORONARY ATHEROSCLEROSIS +CSCC	1.25	1,498	6,102	4	6,131	4,655	1,476	757	127	1,213	164	427	183	18
F66B	CORONARY ATHEROSCLEROSIS -CSCC	0.50	9,266	14,474	2	2,469	1,862	607	258	41	359	63	160	56	5
F67A	HYPERTENSION + CSCC	1.36	943	4,163	4	6,671	5,111	1,560	701	93	1,335	199	446	224	20
F67B	HYPERTENSION - CSCC	0.62	4,385	8,166	2	3,071	2,386	685	311	47	485	91	203	86	5
F68A	CONGENITAL HEART DISEASE +CC	1.76	173	732	4	8,625	6,639	1,985	1,710	151	1,732	99	385	145	17
F68B	CONGENITAL HEART DISEASE -CC	0.53	533	725	1	2,617	1,939	679	387	44	332	22	171	51	7
F69A	VALVULAR DISORDERS + CSCC	1.67	1,205	7,100	6	8,202	6,250	1,952	1,098	136	1,678	188	566	256	25

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
F14C	1,345	220	68	45	75	7	50	13	1,418	272	54	13	135	139	197	21	767	369	151	255	111
F15A	260	35	166	71	174	22	1,294	368	231	35	316	76	300	208	2,087	345	1,943	621	244	380	58
F15B	198	21	89	61	86	11	462	157	184	26	196	50	244	121	1,825	297	2,027	346	143	302	62
F16A	291	45	185	49	126	15	1,200	339	274	59	413	99	350	220	1,767	250	662	621	213	341	47
F16B	136	17	72	26	78	8	497	160	152	27	194	43	194	98	1,576	275	770	305	132	241	51
F17A	170	28	387	131	136	11	893	313	380	69	309	74	304	293	1,389	264	3,757	627	261	450	38
F17B	70	9	162	62	26	4	90	23	427	71	26	7	184	92	1,104	219	3,267	223	83	220	54
F18A	360	55	659	128	388	31	1,708	434	1,002	126	316	77	900	384	616	86	1,384	921	302	370	38
F18B	158	22	142	41	45	8	279	90	645	124	126	36	288	185	600	103	913	322	102	186	38
F19Z	714	76	291	83	153	17	1,078	288	1,417	223	76	15	619	306	1,996	250	3,517	747	296	523	35
F20Z	52	8	27	12	22	3	17	4	2,314	515	7	2	59	109	20	3	62	314	128	140	161
F21A	537	91	680	187	1,072	98	1,605	372	2,334	453	448	105	996	839	83	14	179	1,642	738	505	100
F21B	191	33	172	56	222	22	60	18	2,227	451	131	34	269	301	60	7	221	549	250	242	120
F40A	658	123	762	167	509	44	14,059	3,106	186	38	919	203	510	489	200	32	96	2,378	746	858	87
F40B	399	84	342	77	159	15	8,811	1,969	122	27	1,063	281	146	232	160	21	34	1,365	328	579	76
F41A	382	54	336	72	272	29	2,434	728	86	17	692	161	432	406	811	152	152	914	405	398	68
F41B	194	26	151	34	122	14	1,191	374	59	11	492	130	325	196	711	138	160	429	190	259	68
F42A	438	58	309	71	340	29	1,637	445	146	26	652	157	505	397	880	153	174	823	371	397	74
F42B	230	28	136	29	91	10	587	190	248	43	469	122	290	193	1,046	172	279	401	168	259	81
F42C	160	13	40	8	13	1	7	2	111	24	13	3	184	50	1,133	242	163	161	60	162	56
F43Z	426	75	594	151	535	46	5,627	1,346	95	16	1,198	273	565	801	102	15	51	1,777	765	654	125
F60A	232	40	377	102	284	32	1,186	342	46	10	892	220	338	432	19	4	13	728	358	248	182
F60B	85	16	100	31	93	12	621	200	28	4	655	174	217	157	12	2	13	270	118	106	269
F61A	1,038	174	829	283	1,658	135	2,466	610	254	54	732	183	1,105	1,189	105	16	75	2,067	994	731	114
F61B	257	50	323	69	748	48	365	102	152	34	363	100	521	553	47	10	24	718	342	325	147
F62A	224	38	418	118	338	41	756	199	25	5	829	205	393	520	10	2	15	791	401	263	231
F62B	105	20	175	52	141	19	228	69	11	2	698	191	189	271	6	1	7	351	194	148	287
F63A	370	65	267	79	444	41	107	27	40	8	690	179	310	409	6	1	15	558	266	195	168
F63B	149	26	66	24	174	15	19	5	14	3	459	122	166	213	3	0	5	274	88	94	228
F64A	335	60	415	125	398	44	77	19	124	30	514	138	465	533	103	17	15	752	424	239	144
F64B	228	38	136	44	116	14	3	1	70	18	228	63	205	261	130	22	16	318	170	155	169
F65A	513	88	345	92	521	34	246	65	184	43	584	139	407	461	33	4	24	675	329	241	168
F65B	432	74	54	18	89	6	30	8	204	43	247	65	144	128	87	11	29	204	82	109	239
F66A	200	34	182	52	172	19	380	104	16	4	691	180	218	250	13	3	7	382	188	146	187
F66B	87	15	49	15	45	6	99	34	10	2	538	149	96	88	21	5	7	136	58	66	266
F67A	218	43	196	54	196	24	484	111	147	21	650	164	224	254	58	4	21	429	202	154	173
F67B	100	20	49	16	49	7	61	19	41	6	450	123	98	102	310	24	50	163	74	78	268
F68A	162	29	378	75	131	12	548	127	169	32	213	57	505	433	87	22	77	744	202	380	58
F68B	149	31	89	14	52	4	67	14	226	45	76	18	91	138	141	37	18	179	48	166	73
F69A	225	38	269	73	186	19	662	193	56	11	631	161	315	374	27	5	27	543	242	197	168

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
F69B	VALVULAR DISORDERS - CSCC	0.46	6,427	10,095	2	2,249	1,712	537	254	37	310	43	142	51	4
F72A	UNSTABLE ANGINA + CSCC	1.25	2,110	8,370	4	6,144	4,644	1,500	731	115	1,129	185	401	177	17
F72B	UNSTABLE ANGINA - CSCC	0.58	11,954	20,950	2	2,849	2,158	691	293	47	391	70	169	66	5
F73A	SYNCOPE & COLLAPSE + CSCC	1.31	7,347	33,948	5	6,456	4,839	1,618	759	93	1,443	200	466	166	18
F73B	SYNCOPE & COLLAPSE - CSCC	0.55	22,298	39,635	2	2,712	2,055	656	295	35	421	67	170	50	4
F74Z	CHEST PAIN	0.40	90,653	115,931	1	1,949	1,487	462	172	25	247	41	109	40	3
F75A	OTHER CIRCULATRY SYSTEM DX+CCC	2.85	2,656	22,962	9	14,007	10,907	3,101	1,575	248	3,012	300	890	540	54
F75B	OTH CIRCULATRY SYSTEM DX+SMCC	1.25	6,092	23,070	4	6,126	4,713	1,413	730	108	1,218	135	391	188	17
F75C	OTHER CIRCULATY SYSTEM DX-CC	0.66	6,934	13,623	2	3,264	2,499	765	369	50	511	62	203	89	8
F76A	ARRHY, CARD & COND DISDR +CSCC	1.54	8,647	44,102	5	7,568	5,740	1,829	867	107	1,387	186	497	222	21
F76B	ARRHY, CARD & COND DISDR -CSCC	0.59	32,683	65,928	2	2,915	2,193	722	336	44	378	61	180	68	6
G01A	RECTAL RESECTION +CCC	7.42	2,398	38,897	16	36,443	28,820	7,623	3,373	239	5,286	628	1,529	1,296	126
G01B	RECTAL RESECTION -CCC	4.26	2,065	16,466	8	20,952	16,568	4,385	1,895	140	2,697	340	802	636	60
G02A	MJR SMALL & LARGE BOWEL PR+CCC	6.76	6,065	91,650	15	33,207	26,124	7,083	3,121	265	5,058	606	1,468	1,163	114
G02B	MJR SMALL & LARGE BOWEL PR-CCC	3.16	5,545	34,929	6	15,518	12,131	3,386	1,533	126	2,187	284	670	452	43
G03A	STOMCH,OESPH&DUODNL PR+MAL/CCC	7.62	1,410	20,538	15	37,429	29,733	7,696	3,168	252	5,110	575	1,481	1,283	128
G03B	STMCH,OESPHGL&DDNL PR-MAL+SMCC	3.07	590	3,291	6	15,071	11,757	3,313	1,398	122	2,139	250	649	324	33
G03C	STMCH,OESPHGL&DDNL PR-MAL-CC	2.14	1,262	4,005	3	10,501	8,257	2,244	887	80	1,264	162	422	132	13
G04A	PERITONEAL ADHESOLYSIS +CCC	5.75	1,282	17,413	14	28,274	22,287	5,987	2,916	249	4,539	549	1,344	872	80
G04B	PRTNL ADHLY +SMCC	3.07	1,647	11,002	7	15,089	11,711	3,378	1,563	128	2,397	307	714	325	31
G04C	PERITONEAL ADHESOLYSIS -CC	1.88	4,206	14,044	3	9,216	7,184	2,032	906	89	1,146	165	391	138	12
G05A	MNR SMALL&LARGE BOWEL PR +CCC	5.01	246	3,202	13	24,622	19,361	5,262	2,911	209	4,500	517	1,320	922	92
G05B	MNR SMALL&LARGE BOWEL PR +SMCC	2.50	277	1,663	6	12,294	9,515	2,780	1,350	115	2,019	265	638	341	34
G05C	MNR SMALL & LARGE BOWEL PR -CC	1.65	780	2,756	4	8,129	6,308	1,821	920	72	1,186	157	391	235	23
G06Z	PYLOROMYOTOMY PROCEDURE	1.86	200	723	4	9,163	7,099	2,064	1,257	89	1,823	89	528	113	16
G07A	APPENDCTMY +MALIG/PERITON/CSCC	2.00	6,837	27,721	4	9,808	7,565	2,243	973	102	1,516	175	490	191	18
G07B	APPENDCTMY -MALIG-PERITON-CSCC	1.34	18,467	39,647	2	6,580	5,087	1,493	598	66	784	98	282	102	9
G10A	HERNIA PROCEDURES +CC	2.19	3,557	15,564	4	10,769	8,404	2,365	1,080	88	1,560	183	502	191	19
G10B	HERNIA PROCEDURES -CC	1.01	25,203	33,423	1	4,955	3,860	1,095	449	34	382	63	189	22	2
G11Z	ANAL & STOMAL PROCEDURES	0.68	23,539	37,239	2	3,331	2,549	783	348	28	350	50	154	59	6
G12A	OTH DIGEST SYS OR PR+CCC	5.05	1,103	14,430	13	24,813	19,497	5,316	2,529	270	4,483	512	1,365	988	100
G12B	OTH DIGEST SYS OR PR+SMCC	2.28	989	5,769	6	11,208	8,627	2,581	1,216	117	1,946	225	615	364	31
G12C	OTH DIGEST SYS OR PR-CC	1.35	1,827	5,512	3	6,624	5,065	1,559	666	66	873	121	348	164	14
G46A	COMPLEX GASTROSCOPY+CCC	3.77	1,882	20,769	11	18,539	14,398	4,142	2,063	255	3,748	386	1,118	812	83
G46B	COMPLEX GASTROSCOPY-CCC	1.53	6,343	26,476	4	7,497	5,671	1,827	908	87	1,440	171	469	307	32
G46C	COMPLEX GASTROSCOPY,SD	0.37	26,277	26,277	1	1,797	1,371	426	165	13	52	10	60	88	9
G47A	OTH GASTROSCOPY +CCC	2.99	2,485	23,707	10	14,711	11,287	3,424	1,705	201	3,160	359	953	603	61
G47B	OTH GASTROSCOPY -CCC	1.15	11,372	36,990	3	5,675	4,248	1,427	698	68	914	124	364	201	23
G47C	OTH GASTROSCOPY, SD	0.29	33,027	33,027	1	1,411	1,067	344	121	10	59	12	56	75	8
G48A	COLONSCOPY +CSCC	2.51	2,500	20,593	8	12,315	9,489	2,826	1,516	170	2,887	342	849	539	54

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
F69B	63	11	52	13	32	3	90	29	48	11	445	124	92	82	51	11	27	118	49	57	243
F72A	164	28	183	52	166	22	472	152	30	5	758	199	202	239	12	3	9	380	173	141	187
F72B	81	15	50	16	51	7	220	73	13	2	621	169	105	93	5	1	5	151	64	67	249
F73A	179	32	280	79	142	17	182	52	17	4	839	213	185	295	14	3	15	414	207	144	230
F73B	87	16	74	22	35	5	63	21	7	2	640	171	69	98	35	5	48	144	67	60	280
F74Z	100	18	32	9	25	3	60	19	4	1	593	162	45	55	4	1	2	93	39	44	298
F75A	417	74	404	107	897	68	1,260	307	140	27	696	172	526	540	43	7	25	925	426	330	172
F75B	229	41	147	42	295	24	347	97	123	25	546	145	260	250	33	5	27	365	176	162	230
F75C	133	24	66	19	104	9	173	52	77	16	475	129	105	119	72	14	29	182	80	96	255
F76A	158	27	220	62	185	23	826	240	36	7	814	202	224	290	22	4	42	495	232	172	245
F76B	55	10	55	16	59	8	236	76	43	10	544	149	97	102	41	8	19	167	70	76	292
G01A	651	116	741	238	964	74	3,190	710	7,860	1,646	328	80	866	1,043	51	8	987	2,528	1,038	847	131
G01B	149	27	269	127	319	28	498	117	6,901	1,440	147	38	405	557	16	3	980	1,236	598	525	133
G02A	735	130	724	241	1,089	89	3,393	758	5,718	1,180	571	141	858	1,024	52	10	723	2,214	966	796	146
G02B	176	32	212	91	247	25	419	98	4,414	927	332	87	336	464	25	6	555	912	456	408	155
G03A	745	140	835	289	1,136	87	4,746	1,037	7,147	1,448	381	90	914	961	77	16	926	2,541	997	918	117
G03B	192	38	272	104	231	21	688	163	4,193	861	328	93	389	448	36	9	324	935	415	411	108
G03C	75	16	121	56	104	11	194	42	3,901	786	142	41	214	266	20	4	325	652	293	279	113
G04A	593	103	608	194	888	73	2,891	630	4,713	960	645	154	736	862	28	5	334	1,890	789	628	129
G04B	217	41	198	86	290	27	543	128	3,713	792	510	128	347	492	11	2	333	960	432	374	146
G04C	86	16	87	40	91	10	73	17	3,040	642	442	117	180	252	7	1	247	537	241	242	173
G05A	477	86	599	165	897	61	1,624	325	3,799	794	249	67	726	904	30	6	382	1,631	786	544	96
G05B	128	25	147	64	196	19	178	42	3,243	692	87	27	312	432	19	4	381	798	410	329	96
G05C	25	5	72	38	92	10	39	7	2,600	558	40	11	174	266	3	0	224	497	260	225	124
G06Z	78	18	68	43	54	6	309	68	1,673	336	629	187	235	354	-	-	18	635	272	264	17
G07A	132	26	90	43	122	13	182	42	2,503	523	682	180	213	321	18	2	99	624	268	259	159
G07B	56	12	38	22	48	6	6	1	2,125	455	601	167	108	179	6	1	82	386	164	179	171
G10A	118	22	159	62	170	15	479	108	2,942	623	220	56	221	336	16	2	318	709	308	263	174
G10B	10	2	29	22	30	4	14	3	2,143	481	54	15	64	116	6	1	251	299	128	141	203
G11Z	16	3	29	13	60	8	25	5	1,135	271	117	33	61	93	21	7	43	210	92	94	211
G12A	1,069	184	599	181	1,078	78	2,165	467	2,354	494	728	174	755	849	119	24	253	1,658	730	605	121
G12B	512	90	172	70	247	23	343	78	1,872	400	502	126	288	411	58	11	125	692	347	326	133
G12C	236	47	64	34	91	9	47	11	1,719	379	340	87	147	224	49	11	83	415	189	192	163
G46A	493	83	606	153	837	65	1,295	289	1,080	243	719	178	583	722	207	50	170	1,257	591	454	130
G46B	152	28	136	52	199	19	129	33	839	200	437	118	214	321	145	40	89	471	250	211	172
G46C	8	2	11	5	12	1	0	0	748	186	3	1	26	32	86	33	23	108	52	64	187
G47A	403	69	515	143	572	42	820	182	629	142	786	190	475	635	125	32	32	1,018	504	355	132
G47B	141	26	118	40	121	12	73	20	575	135	636	170	157	238	84	24	22	350	185	157	182
G47C	10	2	8	5	16	2	0	0	494	129	17	5	26	30	95	32	13	88	43	55	195
G48A	354	62	287	87	614	45	250	58	576	137	659	165	434	536	126	32	23	812	404	299	144

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
G48B	COLONSCOPY - CSCC	1.14	6,374	21,015	3	5,595	4,222	1,374	751	79	1,090	158	371	211	20
G48C	COLONSCOPY, SD	0.32	48,018	48,018	1	1,584	1,204	381	144	11	55	12	56	50	4
G60A	DIGESTIVE MALIGNANCY + CCC	2.24	1,841	14,823	8	10,998	8,226	2,772	1,367	209	2,810	361	880	336	33
G60B	DIGESTIVE MALIGNANCY - CCC	0.83	4,622	14,041	3	4,064	3,034	1,030	539	82	846	126	343	97	9
G61A	GI HAEMORRHAGE +CSCC	1.33	3,200	14,454	5	6,525	4,935	1,591	831	88	1,433	190	458	251	23
G61B	GI HAEMORRHAGE - CSCC	0.57	7,787	15,917	2	2,818	2,099	718	372	39	501	76	204	93	8
G62Z	COMPLICATED PEPTIC ULCER	1.40	304	1,405	5	6,878	5,192	1,686	931	69	1,519	211	465	194	17
G63Z	UNCOMPLICATED PEPTIC ULCER	0.59	440	904	2	2,888	2,159	729	366	53	500	111	208	79	7
G64A	INFLAMMATORY BOWEL DISEASE +CC	1.45	1,168	5,838	5	7,109	5,510	1,599	941	110	1,586	203	529	265	28
G64B	INFLAMMATORY BOWEL DISEASE-CC	0.60	11,417	14,695	1	2,963	2,571	392	169	25	225	33	105	68	10
G65A	GI OBSTRUCTION + CSCC	1.73	3,856	23,007	6	8,480	6,412	2,068	1,098	100	2,034	257	621	231	22
G65B	GI OBSTRUCTION - CSCC	0.84	8,631	23,764	3	4,133	3,093	1,040	567	54	831	125	297	82	6
G66Z	ABDMNL PAIN/MESENTRC ADENTS	0.48	46,854	75,028	2	2,371	1,780	591	284	34	382	52	160	53	4
G67A	OESPHS, GASTR +CSCC	1.40	11,271	53,941	5	6,872	5,172	1,700	884	105	1,660	203	515	244	25
G67B	OESPHS, GASTR -CSCC	0.49	39,666	66,242	2	2,419	1,800	619	337	43	457	63	179	63	5
G70A	OTHER DIGESTIVE SYS DIAG +CSCC	1.44	13,711	69,254	5	7,091	5,349	1,742	903	109	1,638	214	530	215	20
G70B	OTHER DIGESTIVE SYS DIAG -CSCC	0.54	56,144	104,980	2	2,652	1,975	677	344	44	468	71	190	53	4
H01A	PANCREAS, LIVER & SHUNT PR+CCC	7.34	1,221	17,093	14	36,073	28,737	7,336	2,784	201	4,560	447	1,404	1,513	157
H01B	PANCREAS, LIVER &SHUNT PR-CCC	3.53	943	5,386	6	17,345	13,723	3,621	1,223	87	1,926	216	620	638	71
H02A	MJR BILIARY TRACT PR +CCC	6.28	604	10,006	17	30,880	24,170	6,710	2,857	233	5,902	641	1,739	1,106	109
H02B	MJR BILIARY TRACT PR +SCC	3.27	247	1,906	8	16,059	12,480	3,579	1,776	118	2,596	302	822	503	39
H02C	MJR BILIARY TRACT PR -CSCC	2.39	557	2,736	5	11,767	9,162	2,605	1,226	116	1,629	176	581	304	28
H05A	HEPATOBILIARY DIAGNTIC PR +CCC	5.07	220	2,642	12	24,899	19,648	5,251	2,362	196	4,341	605	1,299	1,117	93
H05B	HEPATOBILIARY DIAGNTIC PR -CCC	1.41	708	2,230	3	6,940	5,333	1,607	642	57	953	130	333	265	20
H06A	OTH HEPTOBILRY & PANCRS PR+CCC	4.63	498	6,417	13	22,736	17,857	4,879	2,341	230	4,230	477	1,322	1,012	99
H06B	OTH HEPTOBILRY &PANCRS PR-CCC	1.44	1,134	3,365	3	7,053	5,510	1,543	635	58	905	102	379	178	18
H07A	OPEN CHOLECYSTECTOMY+CDE/+CCC	5.28	460	5,571	12	25,923	20,241	5,682	2,601	192	3,780	408	1,191	844	90
H07B	OPEN CHOLECYSTECTOMY-CDE-CCC	2.64	817	4,127	5	12,979	9,896	3,084	1,274	114	1,728	236	581	261	28
H08A	LAP CHOLECYSTECTMY+CDE/+CSCC	2.66	5,252	27,512	5	13,050	10,278	2,772	1,215	107	1,752	225	583	333	33
H08B	LAP CHOLECYSTECTMY-CDE-CSCC	1.46	20,414	38,528	2	7,178	5,620	1,559	646	53	662	100	269	120	11
H40A	ENDO PR BLEED OES VARICES +CCC	4.00	339	3,012	9	19,663	15,474	4,190	1,730	170	3,112	355	917	1,213	98
H40B	ENDO PR BLEED OES VARICES -CCC	1.66	412	1,609	4	8,181	6,279	1,902	820	83	1,382	166	383	454	39
H43A	ERCP PROCEDURE +CSCC	3.07	2,256	20,579	9	15,094	11,637	3,457	1,663	146	3,004	314	926	566	63
H43B	ERCP PROCEDURE -CSCC	0.97	6,258	16,707	3	4,754	3,600	1,154	504	38	725	80	274	126	13
H60A	CIRRHOSIS & ALC HEPATITIS +CCC	2.91	2,444	22,972	9	14,311	11,078	3,233	1,821	216	3,187	421	977	783	78
H60B	CIRRHOSIS & ALC HEPATITIS+SMCC	0.82	3,155	8,932	3	4,050	3,024	1,025	493	55	769	127	279	190	18
H60C	CIRRHOSIS & ALC HEPATITIS -CC	0.36	786	952	1	1,745	1,312	432	140	13	166	31	94	75	9
H61A	MALG HEPATOBILIARY SYS PAN+CCC	2.39	1,461	11,963	8	11,767	8,909	2,857	1,515	162	2,972	314	889	415	46
H61B	MALG HEPATOBILIAY SYS PANC-CCC	0.96	3,363	10,715	3	4,736	3,522	1,214	561	82	948	134	366	161	16
H62A	DISORDERS PANCREAS-MALIG+CSCC	2.17	3,273	22,156	7	10,674	8,176	2,498	1,249	122	2,219	286	689	393	40

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
G48B	131	26	75	31	166	14	16	4	608	151	351	95	175	240	104	27	19	345	182	154	190
G48C	8	2	9	5	17	1	0	0	642	163	2	0	26	29	93	35	15	95	48	61	196
G60A	391	69	472	121	514	38	89	19	74	19	523	132	435	580	16	10	18	799	394	290	176
G60B	182	30	117	37	233	23	17	5	112	27	224	59	162	209	44	9	21	267	119	126	238
G61A	139	25	178	59	198	19	262	62	35	9	768	198	209	299	7	1	12	415	214	141	214
G61B	62	12	45	20	48	6	27	8	20	5	592	160	88	128	3	1	4	152	81	64	272
G62Z	289	55	164	62	188	18	280	60	64	15	657	158	269	334	11	3	12	417	246	171	110
G63Z	109	21	50	18	58	8	19	5	33	7	558	155	95	108	4	1	1	163	78	72	147
G64A	174	31	149	40	752	60	36	10	53	10	607	153	239	314	6	1	6	437	206	164	147
G64B	20	4	14	7	1,709	76	1	0	33	8	99	26	51	57	36	6	2	104	37	41	191
G65A	308	55	235	74	325	28	198	45	55	16	833	208	283	412	9	1	7	535	290	199	214
G65B	171	33	65	27	85	9	9	2	21	6	771	201	137	186	2	0	3	221	124	97	263
G66Z	123	24	32	13	34	4	6	2	20	5	579	156	61	98	3	1	3	127	58	55	298
G67A	132	25	209	61	226	22	166	38	17	4	759	198	218	338	5	1	4	436	220	156	256
G67B	44	9	37	15	37	4	6	2	5	1	524	149	70	109	2	1	2	134	63	57	299
G70A	213	39	248	70	260	25	164	40	48	11	695	178	239	332	15	2	7	466	236	171	270
G70B	88	17	46	17	50	6	6	2	89	25	491	133	81	112	11	3	4	154	74	68	311
H01A	1,073	185	602	239	999	79	4,135	888	7,545	1,505	190	47	842	969	70	14	1,247	2,452	970	958	82
H01B	413	76	214	103	262	21	1,306	298	5,105	1,052	60	17	322	431	42	9	792	1,083	448	510	78
H02A	1,958	341	648	239	1,311	101	1,945	459	3,169	660	493	120	1,066	1,138	128	22	617	2,058	971	850	87
H02B	760	117	193	109	376	28	412	88	3,168	647	394	94	465	580	135	20	299	993	539	488	72
H02C	572	98	118	58	173	17	209	46	2,800	569	262	70	446	409	127	28	267	709	350	379	97
H05A	907	160	445	162	811	55	1,996	440	3,682	790	498	116	712	812	96	22	267	1,661	693	560	76
H05B	189	32	71	40	98	9	42	11	1,865	411	137	34	153	235	173	49	119	454	203	214	105
H06A	1,835	307	505	172	1,073	81	1,766	375	1,047	222	567	128	748	853	186	37	218	1,589	693	622	76
H06B	1,749	269	64	39	340	25	39	9	332	73	136	37	186	255	111	18	144	447	194	311	80
H07A	661	115	431	151	710	53	2,608	572	4,868	1,025	585	152	636	820	60	14	225	1,722	769	640	109
H07B	200	39	147	69	148	15	276	57	4,034	906	302	82	276	427	14	2	161	817	414	372	146
H08A	316	54	129	53	172	17	485	109	3,647	746	466	117	283	370	44	9	250	886	343	306	163
H08B	120	20	41	23	53	7	22	5	2,885	620	196	53	103	168	11	2	182	431	183	197	178
H40A	354	77	464	125	767	47	3,245	733	1,322	300	815	209	509	627	78	20	119	1,226	556	476	73
H40B	122	28	134	46	325	25	645	149	769	186	569	157	231	295	109	28	61	477	265	233	83
H43A	624	105	307	107	487	35	923	202	958	234	618	156	495	617	256	59	286	1,028	499	414	82
H43B	216	38	49	24	82	8	12	3	721	193	241	66	162	182	196	50	140	303	152	154	88
H60A	372	68	471	129	548	43	886	182	167	40	789	190	504	613	35	9	24	966	460	331	156
H60B	118	22	103	32	142	13	33	9	230	63	346	92	131	182	65	19	17	249	136	115	194
H60C	92	21	30	10	45	4	15	3	373	99	74	19	52	53	68	20	16	119	47	59	115
H61A	529	90	413	121	534	36	120	25	77	18	639	162	470	636	21	4	17	832	402	307	154
H61B	426	73	111	40	203	20	18	4	81	20	317	85	184	239	19	4	13	314	145	150	209
H62A	433	78	256	83	324	30	990	230	80	20	826	205	362	444	17	4	9	704	321	259	181

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
H62B	DISORDERS PANCREAS-MALIG-CSCC	0.88	10,606	31,075	3	4,336	3,225	1,111	586	55	889	130	318	120	10
H63A	DSRD LVR-MAL,CIRR,ALC HEP+CSCC	2.10	2,741	18,403	7	10,322	7,947	2,375	1,280	142	2,224	279	709	513	54
H63B	DSRD LVR-MAL,CIRR,ALC HEP-CSCC	0.73	4,895	11,695	2	3,591	2,748	843	444	58	634	86	244	216	22
H64A	DISORDERS OF BILIARY TRACT +CC	1.54	4,520	23,398	5	7,553	5,721	1,832	974	106	1,668	239	543	254	26
H64B	DISORDERS OF BILIARY TRACT -CC	0.59	11,338	23,544	2	2,923	2,183	740	391	42	528	89	215	76	6
I01A	BL/MLT MJ JT PR LWR EXT+RV/CCC	11.98	191	4,588	24	58,860	47,650	11,210	4,712	701	8,591	752	2,300	1,404	125
I01B	BL/MLT MJ JT PR LWR EXT-RV-CCC	6.09	453	2,881	6	29,933	25,228	4,705	1,636	212	2,462	219	731	316	29
I02A	MCRVAS TT/SKIN GRAFT+CSCC-HAND	10.99	844	21,716	26	54,013	42,429	11,584	4,709	765	9,333	769	2,943	1,062	118
I02B	SKIN GRAFT -CSCC -HAND	3.43	588	3,980	7	16,858	13,205	3,653	1,433	202	2,437	224	789	186	15
I03A	HIP REPLACEMENT + CCC	5.23	3,407	39,925	12	25,686	20,687	4,999	2,144	355	4,149	343	1,142	575	63
I03B	HIP REPLACEMENT - CCC	3.93	9,742	56,787	6	19,313	16,022	3,292	1,345	200	2,077	193	619	214	22
I04A	KNEE REPLACEMT +CSCC	4.64	3,026	23,680	8	22,818	18,928	3,890	1,772	256	2,767	254	817	339	32
I04B	KNEE REPLACEMT -CSCC	3.74	9,330	47,264	5	18,390	15,354	3,036	1,325	195	1,854	179	553	149	14
I05A	OTH JNT REPLACEMENT +CSCC	5.63	313	2,923	9	27,652	22,924	4,728	1,893	328	3,208	276	908	447	42
I05B	OTH JNT REPLACEMENT -CSCC	3.79	1,185	4,453	4	18,624	15,667	2,957	1,008	157	1,357	132	434	130	13
I06Z	SPINAL FUSION + DEFORMITY	9.47	403	3,201	8	46,549	39,878	6,672	2,786	154	3,718	226	1,219	565	74
I07Z	AMPUTATION	7.56	344	7,154	21	37,150	28,870	8,280	3,884	588	7,667	626	2,203	990	105
I08A	OTHER HIP & FEMUR PROC +CCC	4.90	5,086	65,821	13	24,068	18,982	5,086	2,271	383	4,683	356	1,248	611	69
I08B	OTHER HIP & FEMUR PR -CCC	3.09	8,512	58,168	7	15,198	11,964	3,234	1,399	215	2,450	212	700	240	25
I09A	SPINAL FUSION +CCC	9.98	664	9,436	14	49,054	40,783	8,271	2,382	321	5,431	385	1,628	876	120
I09B	SPINAL FUSION -CCC	5.59	2,071	11,863	6	27,484	23,212	4,272	1,115	128	2,282	181	684	229	31
I10A	OTHER BACK & NECK PROCS + CSCC	4.02	870	7,611	9	19,773	15,440	4,333	1,519	229	3,338	284	1,035	360	45
I10B	OTHER BACK & NECK PROCS - CSCC	2.14	3,180	10,894	3	10,540	8,227	2,313	703	79	1,259	121	449	103	11
I11Z	LIMB LENGTHENING PROCEDURES	3.89	118	589	5	19,099	16,011	3,088	1,239	136	1,973	163	669	63	9
I12A	INFC/INFM BONE/JNT+MISC PR+CCC	6.06	1,575	33,135	21	29,758	22,963	6,795	3,520	548	6,511	618	2,037	799	79
I12B	INFC/INFM BNE/JNT+MISC PR+SMCC	3.58	1,481	17,796	12	17,569	13,512	4,056	2,318	349	3,604	344	1,165	376	40
I12C	INFC/INFM BNE/JNT+MISC PR-CC	1.92	2,777	15,015	5	9,441	7,306	2,134	1,068	169	1,597	156	529	177	17
I13A	HUMER,TIBIA,FIBUL,ANKL PR+CC	4.01	3,371	30,768	9	19,690	15,523	4,168	1,741	290	3,150	268	970	255	26
I13B	HUMER,TIBIA,FIBUL,ANKL PR-CC	1.95	14,548	46,724	3	9,583	7,546	2,037	729	116	1,094	110	393	45	5
I15Z	CRANIO-FACIAL SURGERY	4.02	492	2,776	6	19,746	15,605	4,141	1,699	112	2,127	205	861	298	56
I16Z	OTHER SHOULDER PROCEDURES	1.49	6,246	8,557	1	7,346	5,841	1,504	633	68	557	74	220	24	2
I17A	MAXILLO-FACIAL SURGERY +CC	2.86	318	1,110	3	14,038	11,120	2,919	979	96	1,242	126	494	85	13
I17B	MAXILLO-FACIAL SURGERY -CC	1.62	540	898	2	7,936	6,316	1,620	568	48	614	78	287	30	4
I18Z	OTHER KNEE PROCEDURES	0.81	14,954	20,238	1	3,986	3,100	886	421	47	276	38	141	19	2
I19A	OTHER ELBOW, FOREARM PROCS +CC	2.74	1,497	7,878	5	13,459	10,595	2,864	1,043	130	1,847	173	579	152	19
I19B	OTHER ELBOW, FOREARM PROCS -CC	1.60	11,290	20,831	2	7,879	6,333	1,547	472	63	630	69	252	22	2
I20Z	OTHER FOOT PROCEDURES	1.45	6,618	14,829	2	7,135	5,626	1,510	582	77	791	83	290	32	4
I21Z	LOC EX, REM INT FIX DEV HP&FMR	1.23	794	1,757	2	6,030	4,719	1,311	477	83	815	101	264	40	5
I23Z	LOC EX,REM INT FIX-HP&FMR	0.65	11,705	13,898	1	3,186	2,483	703	214	26	209	29	119	23	3
I24Z	ARTHROSCOPY	0.87	1,718	2,689	2	4,283	3,329	953	386	50	352	44	177	37	4

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
H62B	185	36	64	28	88	10	31	9	51	14	669	182	142	200	15	4	4	244	135	118	256
H63A	334	60	288	84	465	33	598	132	132	33	691	175	371	450	19	5	13	671	320	248	179
H63B	208	41	52	20	130	10	36	8	169	43	341	88	112	143	41	15	10	223	101	97	216
H64A	321	58	175	61	215	22	231	55	80	19	742	189	311	347	18	3	9	464	243	179	227
H64B	127	24	42	19	45	5	9	2	44	11	539	146	104	129	11	2	7	155	83	73	276
I01A	689	130	1,303	801	1,632	143	1,641	386	8,293	1,828	274	70	1,654	1,871	41	8	13,628	2,884	1,810	1,187	77
I01B	185	33	498	600	268	43	219	57	5,248	1,194	14	2	369	533	8	1	12,742	1,003	586	724	72
I02A	1,026	205	1,411	434	1,629	131	1,553	380	11,464	2,467	598	159	1,741	1,875	111	20	2,581	3,436	1,753	1,339	81
I02B	245	47	359	118	178	23	128	26	4,952	1,094	322	82	391	525	32	4	1,082	1,017	487	463	99
I03A	441	74	728	287	408	46	793	177	3,933	802	641	154	648	787	29	5	4,263	1,510	669	519	116
I03B	173	31	443	261	215	27	103	25	3,736	797	207	53	327	443	19	3	6,080	861	436	399	119
I04A	218	37	503	261	264	32	376	92	4,136	871	19	4	429	560	29	6	6,693	1,111	515	422	115
I04B	93	17	371	254	173	24	70	17	3,826	796	8	1	283	382	18	3	6,229	763	410	386	116
I05A	319	58	646	297	395	40	579	125	5,227	1,124	384	96	509	653	46	7	7,482	1,369	629	561	89
I05B	141	27	245	282	117	18	87	20	4,411	953	144	37	203	304	22	4	6,882	736	355	406	110
I06Z	439	97	1,404	423	243	53	2,537	598	8,742	1,945	7	1	469	770	24	17	16,226	2,106	771	936	25
I07Z	687	128	1,388	403	1,447	112	1,476	389	5,353	1,147	405	105	1,400	1,468	80	12	536	2,476	1,129	947	76
I08A	534	97	766	242	486	51	744	161	3,646	719	868	213	714	855	18	4	1,593	1,510	698	528	110
I08B	330	63	406	156	202	23	71	16	3,239	680	658	170	358	482	6	1	1,412	871	440	374	125
I09A	1,066	188	1,326	581	551	69	2,183	480	8,642	1,966	523	124	938	1,199	97	50	13,286	2,471	1,053	1,120	44
I09B	453	86	513	382	188	27	359	84	6,371	1,375	188	47	384	496	35	17	9,430	1,212	524	664	50
I10A	464	78	577	185	316	39	392	87	4,949	1,109	240	60	553	695	21	5	787	1,362	560	484	52
I10B	203	32	216	74	100	12	32	8	4,008	863	95	25	210	308	17	3	343	661	298	308	61
I11Z	252	52	450	153	241	51	119	18	4,565	1,097	40	9	253	401	16	12	5,536	919	311	354	39
I12A	795	144	844	254	1,608	121	614	155	3,141	682	493	125	1,238	1,352	76	11	334	1,952	1,008	701	128
I12B	322	64	386	129	845	61	51	11	2,571	567	378	104	694	788	18	3	294	1,089	557	442	133
I12C	142	26	160	59	245	22	19	5	2,250	489	199	57	265	350	25	4	316	572	274	248	145
I13A	428	83	501	181	286	33	286	64	4,302	918	715	183	480	644	22	5	1,680	1,170	555	452	128
I13B	187	35	187	80	86	11	11	2	2,998	646	415	114	167	251	14	2	845	545	251	245	142
I15Z	199	40	329	116	183	19	1,165	255	5,611	1,195	28	8	339	651	7	3	1,901	1,282	519	538	39
I16Z	23	5	109	57	48	8	30	6	2,911	651	12	3	82	141	12	2	862	407	194	205	142
I17A	242	64	254	106	104	14	489	114	4,449	966	338	98	422	361	3	1	1,389	858	352	380	56
I17B	90	20	76	29	52	7	104	25	3,134	710	101	28	96	172	19	3	755	496	188	200	68
I18Z	22	5	61	21	27	4	8	2	1,706	385	44	12	47	84	8	1	138	242	108	117	161
I19A	368	71	285	120	142	19	257	56	3,068	675	718	190	230	417	13	4	1,434	766	352	331	108
I19B	159	28	79	63	41	6	6	1	2,692	584	327	91	88	158	9	2	1,248	408	178	201	142
I20Z	93	17	151	61	68	9	24	6	2,469	525	143	39	105	181	15	2	575	423	189	181	160
I21Z	79	15	137	43	74	7	10	2	2,144	456	30	9	116	155	3	1	233	385	176	168	116
I23Z	30	6	32	13	17	2	5	1	1,499	340	7	2	38	66	2	0	119	204	85	96	169
I24Z	32	6	67	22	31	5	12	4	1,717	381	69	19	63	105	15	2	179	275	112	114	143

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
I25A	BNE,JNT DXTIC PR INC BIOPSY+CC	3.75	309	3,681	12	18,404	14,004	4,400	1,919	360	4,688	375	1,249	722	79
I25B	BNE,JNT DXTIC PR INC BIOPSY-CC	1.10	410	1,008	2	5,382	4,261	1,121	450	42	790	59	286	348	42
I27A	SOFT TISSUE PROCEDURES +CC	3.24	1,713	14,719	9	15,924	12,270	3,654	1,710	210	2,970	286	904	415	46
I27B	SOFT TISSUE PROCEDURES -CC	1.08	6,715	13,057	2	5,310	4,109	1,201	457	61	604	68	230	81	8
I28A	OTH MUSCULOSKELETAL PR+CC	3.21	1,063	9,116	9	15,765	12,206	3,559	1,547	232	2,926	288	920	340	36
I28B	OTH MUSCULOSKELETAL PR-CC	1.36	3,598	7,127	2	6,703	5,263	1,440	487	77	647	73	255	40	4
I29Z	KNEE RECONSTRUCTION/REVISION	1.64	3,542	4,559	1	8,077	6,508	1,569	552	80	569	79	236	15	2
I30Z	HAND PROCEDURES	0.93	26,416	35,754	1	4,566	3,542	1,024	304	36	303	41	153	17	2
I31A	HIP REVISION +CCC	9.64	463	9,752	21	47,381	38,645	8,736	3,861	779	6,602	558	1,947	1,331	115
I31B	HIP REVISION -CCC	5.56	882	8,407	10	27,339	22,436	4,904	2,084	345	2,710	265	940	558	51
I32A	KNEE REVISION +CCC	8.64	165	3,378	20	42,457	34,686	7,771	3,822	566	5,851	437	1,842	1,116	111
I32B	KNEE REVISION +SCC	6.67	163	2,185	13	32,763	26,814	5,950	2,701	280	3,379	340	1,182	673	71
I32C	KNEE REVISION -CSCC	4.89	475	3,424	7	24,015	20,137	3,878	1,811	259	1,648	195	698	367	33
I60Z	FEMORAL SHAFT FRACTURES	2.23	695	4,606	7	10,948	8,115	2,833	1,434	215	3,610	258	770	72	9
I61A	DISTAL FEMORAL FRACTURES +CC	2.86	261	2,761	11	14,044	10,381	3,664	2,180	192	3,935	455	1,039	243	24
I61B	DISTAL FEMORAL FRACTURES -CC	0.99	370	1,206	3	4,854	3,556	1,298	639	84	1,194	131	363	40	3
I63A	SPR,STR&DSLC HIP,PELV&THIGH+CC	1.37	487	2,274	5	6,715	5,124	1,590	834	123	1,469	179	450	139	12
I63B	SPR,STR&DSLC HIP,PELV&THIGH-CC	0.54	1,999	3,290	2	2,640	2,017	623	298	48	420	54	159	21	2
I64A	OSTEOMYELITIS +CSCC	3.00	1,375	18,222	13	14,726	11,099	3,627	2,345	264	3,492	415	1,181	373	42
I64B	OSTEOMYELITIS -CSCC	1.42	1,861	12,150	7	6,973	5,227	1,746	1,203	135	1,664	182	567	120	12
I65A	MUSCSKEL MALIG NEO+CCC	3.23	1,339	14,305	11	15,891	11,937	3,954	1,901	362	4,099	377	1,266	420	46
I65B	MUSCSKEL MALIG NEO -CCC	1.51	3,715	16,686	4	7,431	5,666	1,766	823	166	1,796	189	566	165	19
I66A	INFLM MUSCL DSR +CSCC	3.01	1,146	10,701	9	14,794	11,489	3,305	1,921	282	3,230	410	1,083	813	81
I66B	INFLM MUSCULSKTL DSR -CSCC	0.57	13,354	20,141	2	2,778	2,310	468	258	33	298	41	143	79	11
I67A	SEPTIC ARTHRITIS + CSCC	3.65	312	4,552	15	17,947	13,579	4,368	2,829	388	4,562	563	1,337	458	47
I67B	SEPTIC ARTHRITIS - CSCC	1.10	1,027	5,338	5	5,384	4,059	1,325	850	100	1,308	173	441	115	9
I68A	NON-SURG SPINAL DISORDERS +CC	2.01	9,314	67,531	7	9,860	7,368	2,492	1,213	143	2,493	302	770	205	22
I68B	NON-SURG SPINAL DISORDERS -CC	0.89	16,328	48,662	3	4,375	3,221	1,154	528	70	960	136	345	49	4
I68C	NON-SURG SPINAL DISORDERS, SD	0.29	16,504	16,504	1	1,424	1,101	323	142	19	86	13	63	9	1
I69A	BONE DISEASES AND ARTHRO +CSCC	1.86	2,180	15,683	7	9,121	6,812	2,310	1,237	138	2,218	285	742	358	33
I69B	BONE DISEASES AND ARTHROP-CSCC	0.60	11,065	24,966	2	2,943	2,208	735	417	44	531	82	225	102	8
I71A	OTH MUSCTENDIN DISRD +CSCC	1.62	1,278	7,767	6	7,970	5,889	2,081	1,003	143	1,911	257	651	204	20
I71B	OTH MUSCTENDIN DISRD -CSCC	0.51	10,330	18,603	2	2,498	1,868	630	302	37	435	56	174	43	4
I72A	SPEC MUSCTEND DISRD +CSCC	2.32	934	8,038	9	11,418	8,667	2,751	1,498	188	2,864	338	865	365	46
I72B	SPEC MUSCTEND DISRD -CSCC	0.64	5,091	12,545	2	3,123	2,304	819	449	51	630	82	246	60	6
I73A	AFTCARE MUSCSK IMPL +CSCC	2.19	923	9,106	10	10,770	7,696	3,073	1,361	151	2,695	405	930	257	23
I73B	AFTCARE MUSCSK IMPL -CSCC	0.75	3,959	14,252	4	3,661	2,706	955	542	60	692	104	291	58	5
I74Z	INJ FOREARM, WRIST, HAND, FOOT	0.51	25,031	38,022	2	2,487	1,870	617	254	35	354	45	150	17	2
I75A	INJ SH,ARM,ELB,KN,LEG,ANKL +CC	1.64	5,338	34,111	6	8,079	5,980	2,099	983	128	1,950	240	675	167	16
I75B	INJ SH,ARM,ELB,KN,LEG,ANKL -CC	0.56	17,062	32,193	2	2,742	2,033	708	322	46	486	69	192	20	2

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
I25A	1,256	206	782	202	873	49	151	28	581	123	385	100	653	933	24	6	116	1,264	699	579	75
I25B	633	110	118	36	113	9	5	1	1,037	207	92	24	94	172	2	0	60	353	123	171	67
I27A	571	102	480	140	401	37	528	116	2,528	541	471	125	437	639	39	7	225	1,003	503	488	135
I27B	60	12	93	32	50	6	7	2	1,849	410	227	66	97	143	4	1	120	321	147	152	197
I28A	515	97	538	147	375	37	338	74	2,424	522	563	148	439	607	26	4	682	1,028	509	403	124
I28B	128	25	105	50	51	7	18	5	2,209	492	232	66	123	164	10	2	682	381	183	190	167
I29Z	46	9	130	66	52	9	10	2	3,363	712	16	4	79	133	10	2	1,061	439	186	217	138
I30Z	50	10	38	18	28	4	6	1	2,013	465	146	42	52	90	6	1	194	280	127	137	197
I31A	804	126	1,092	544	1,133	120	1,987	429	7,452	1,454	486	116	1,356	1,267	49	8	9,088	2,546	1,187	943	84
I31B	280	47	514	336	338	37	545	143	5,375	1,123	193	51	719	690	40	7	7,373	1,351	628	595	100
I32A	612	104	1,011	473	1,127	109	1,451	339	6,003	1,209	245	69	1,178	1,282	28	10	9,213	2,311	1,047	890	65
I32B	253	45	566	418	736	66	393	107	5,710	1,182	90	26	736	941	30	11	9,633	1,609	856	728	70
I32C	143	24	400	342	290	32	114	25	5,001	1,003	46	13	431	493	21	3	8,633	994	494	501	94
I60Z	188	43	278	126	119	11	13	3	557	115	554	161	343	601	0	0	65	631	435	337	158
I61A	305	50	474	144	259	27	376	81	103	21	725	190	456	788	9	2	77	896	643	353	122
I61B	167	36	187	64	55	7	0	-	146	34	489	139	184	275	-	-	8	294	154	161	160
I63A	222	37	272	76	139	15	127	27	266	60	773	193	214	277	1	0	12	438	222	139	122
I63B	105	20	103	31	29	4	2	0	151	33	583	155	66	86	0	0	9	142	62	57	198
I64A	545	101	435	124	930	99	199	47	163	39	431	111	590	796	80	12	25	989	501	397	178
I64B	255	48	134	48	372	30	9	2	141	34	300	84	280	393	70	19	16	454	202	198	194
I65A	627	100	896	195	839	59	92	22	68	15	528	139	648	837	58	21	17	1,227	520	511	131
I65B	289	46	319	78	784	58	5	1	107	23	283	74	275	363	46	8	9	488	228	223	199
I66A	472	83	499	129	1,029	81	614	133	159	35	575	144	539	629	36	7	17	1,012	454	328	147
I66B	42	8	36	12	1,145	49	6	1	77	20	87	24	60	82	26	3	4	135	47	51	229
I67A	576	98	444	137	739	55	349	73	347	76	623	160	779	913	43	6	38	1,236	642	427	123
I67B	144	33	92	35	225	16	16	3	188	44	331	93	225	271	7	1	13	343	153	157	203
I68A	410	76	471	129	240	30	131	29	52	13	827	209	320	497	5	1	11	654	366	241	259
I68B	211	41	171	52	71	10	9	2	26	6	630	171	136	212	0	0	6	267	145	116	286
I68C	85	17	43	7	19	2	0	0	286	70	263	75	24	36	3	1	8	93	24	38	253
I69A	264	48	424	116	283	31	41	9	37	8	715	181	288	469	6	1	27	618	333	211	196
I69B	76	15	93	28	231	16	8	2	60	15	307	85	87	140	7	1	15	178	91	76	281
I71A	305	51	380	102	202	24	70	17	50	10	683	176	261	401	4	1	4	549	290	203	181
I71B	100	19	92	26	43	5	11	3	116	28	416	114	64	105	10	2	5	153	71	66	276
I72A	336	63	444	127	396	37	369	82	122	27	716	175	386	555	12	2	8	781	360	257	159
I72B	107	21	73	27	65	7	7	2	111	27	399	111	95	157	4	1	6	195	97	86	250
I73A	263	56	321	116	449	56	121	31	182	48	294	80	486	727	18	3	167	726	503	302	162
I73B	67	15	99	34	124	11	10	3	363	84	203	57	129	187	18	4	42	242	116	101	221
I74Z	91	19	53	17	22	3	5	1	400	90	381	108	54	87	1	0	17	144	67	69	282
I75A	238	46	385	115	160	21	104	23	93	21	763	196	280	416	3	1	21	541	290	203	250
I75B	96	21	102	31	32	5	2	1	142	33	476	135	81	115	2	0	24	156	82	69	292

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
I76A	OTH MUSCULOSKELETL DSRD +CSCC	1.83	1,552	10,269	7	8,984	6,772	2,212	1,088	140	2,142	250	663	235	25
I76B	OTH MUSCULOSKELETAL DSRD -CSCC	0.51	6,940	11,373	2	2,514	1,906	608	293	40	393	46	163	45	5
I77A	FRACTURE OF PELVIS+CSCC	2.37	2,280	21,609	9	11,636	8,627	3,009	1,440	209	3,257	383	909	252	25
I77B	FRACTURE OF PELVIS -CSCC	1.16	2,612	11,735	4	5,702	4,170	1,532	716	108	1,308	191	468	82	8
I78A	FRACTURE NECK FEMUR+CSCC	1.92	1,020	7,770	8	9,433	6,962	2,471	1,130	152	2,526	283	784	222	21
I78B	FRACTURE OF NECK FEMUR-CSCC	0.66	2,423	5,777	2	3,239	2,376	863	373	56	680	104	250	49	4
I79A	PATHOLOGICAL FRACTURE +CCC	3.81	327	4,568	14	18,700	14,491	4,209	2,084	242	6,244	577	1,446	507	56
I79B	PATHOLOGICAL FRACTURE -CCC	1.52	1,888	11,091	6	7,486	5,504	1,982	918	111	2,026	268	596	158	14
J01A	MICRVS TSS TRNSF SKN/BRST+CSCC	8.22	209	2,804	13	40,399	32,389	8,011	3,096	208	5,069	358	1,532	863	117
J01B	MICRVS TSS TRNSF SKN/BRST-CSCC	5.64	186	1,460	8	27,699	21,826	5,873	2,051	171	3,516	324	1,093	441	49
J06A	MAJOR PR MALIG BREAST CONDTNS	1.77	7,784	22,695	3	8,673	6,818	1,855	758	48	828	114	369	551	44
J06B	MAJOR PR NON-MALIG BREAST CNDS	1.78	2,089	5,118	2	8,747	6,839	1,907	844	44	848	108	350	114	16
J07A	MINOR PR MALIG BREAST CONDNS	0.84	2,225	2,673	1	4,148	3,249	899	284	19	254	41	152	317	27
J07B	MINOR PR NON-MALIG BREAST CNDS	0.63	4,076	4,247	1	3,083	2,395	688	200	13	125	23	97	140	15
J08A	OTH SKN GRF&/DBRDMNT PR +CC	2.92	3,290	27,592	8	14,373	10,983	3,390	1,668	192	2,899	318	906	344	32
J08B	OTH SKN GRF&/DBRDMNT PR -CC	0.92	9,725	17,539	2	4,529	3,493	1,036	456	44	447	58	202	113	10
J09Z	PERIANAL & PILONIDAL PR	0.88	2,363	4,739	2	4,337	3,302	1,034	484	37	475	72	219	76	7
J10Z	SKN,SUBC TIS & BRST PLASTIC PR	0.74	8,428	10,685	1	3,618	2,808	810	323	27	210	35	134	97	9
J11Z	OTHER SKIN, SUBC TIS & BRST PR	0.52	33,883	41,709	1	2,543	1,958	586	239	22	163	26	104	97	9
J12A	L LMB PR +ULCR/CELS+CCC	5.35	578	10,203	18	26,300	20,111	6,190	3,115	314	6,023	630	1,906	698	80
J12B	L LMB PR+ULCR/CELS-CCC+GRAFT	3.19	243	2,652	11	15,681	12,102	3,579	2,525	250	3,975	371	1,215	234	28
J12C	L LMB PR+ULCR/CELS-CCC-GRAFT	1.92	747	4,872	7	9,432	7,102	2,330	1,264	151	2,040	269	661	199	21
J13A	L LMB PR-ULC/CEL+CCC/(GFT+SCC)	3.10	450	4,338	10	15,231	11,782	3,449	2,097	204	3,379	382	1,070	381	42
J13B	L LMB PR-ULC/CEL-CCC-(GFT+SCC)	1.19	2,301	6,713	3	5,857	4,453	1,404	772	61	927	126	352	142	12
J14Z	MAJOR BREAST RECONSTRUCTIONS	4.77	435	3,178	7	23,424	18,297	5,127	2,383	112	2,679	268	906	399	43
J60A	SKIN ULCERS +CCC	3.04	933	11,674	13	14,961	11,094	3,866	2,074	201	4,066	480	1,255	453	48
J60B	SKIN ULCERS -CCC	1.49	2,365	16,654	7	7,346	5,251	2,095	1,188	139	1,517	325	711	171	19
J60C	SKIN ULCERS, SAMEDAY	0.19	1,356	1,356	1	931	725	207	32	9	68	13	51	15	1
J62A	MALIGNANT BREAST DISORDERS +CC	1.66	875	4,819	6	8,180	6,067	2,113	1,142	137	1,968	274	802	197	23
J62B	MALIGNANT BREAST DISORDERS -CC	0.66	209	429	2	3,255	2,552	703	418	45	439	56	206	111	10
J63A	NON-MALIGNANT BREAST DISORD+CC	1.21	404	1,685	4	5,943	4,412	1,531	786	153	1,296	214	441	139	11
J63B	NON-MALIGNANT BREAST DISORD-CC	0.62	1,668	3,406	2	3,047	2,275	773	408	46	463	75	211	85	7
J64A	CELLULITIS +CSCC	1.91	8,931	64,817	7	9,410	7,069	2,340	1,299	160	2,310	317	725	281	28
J64B	CELLULITIS -CSCC	0.80	41,545	126,829	3	3,946	2,938	1,008	600	74	850	121	308	72	7
J65A	TRAUMA TO SKN,SUB TIS&BST+CSCC	1.41	2,751	14,207	5	6,936	5,106	1,830	821	94	1,604	209	525	173	18
J65B	TRAUMA TO SKN,SUB TIS&BST-CSCC	0.46	14,099	21,221	2	2,263	1,692	571	236	29	321	45	141	27	2
J67A	MINOR SKIN DISORDERS	0.92	4,776	14,198	3	4,539	3,403	1,136	711	87	1,041	119	359	124	13
J67B	MINOR SKIN DISORDERS, SAMEDAY	0.24	8,389	8,389	1	1,185	899	286	129	14	80	12	61	30	4
J68A	MAJOR SKIN DISORDERS +CSCC	2.23	912	7,070	8	10,949	8,170	2,779	1,439	199	2,756	314	915	402	43
J68B	MAJOR SKIN DISORDERS -CSCC	1.05	3,015	11,156	4	5,137	3,735	1,402	963	116	1,034	145	471	142	15

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
I76A	298	55	405	115	197	24	257	60	69	16	884	219	294	433	16	4	8	588	287	212	175
I76B	124	29	78	21	53	6	8	2	236	53	351	93	63	96	12	3	15	150	63	71	253
I77A	328	63	513	151	262	30	86	19	28	6	900	225	411	599	1	0	24	761	487	269	185
I77B	179	35	263	77	95	12	10	2	22	5	755	195	178	294	0	0	9	350	201	138	224
I78A	236	44	388	117	197	21	99	24	115	23	720	185	365	521	4	1	42	617	377	216	173
I78B	116	27	97	32	49	8	5	1	31	7	492	141	127	156	1	0	53	179	108	94	243
I79A	583	96	944	239	590	71	225	42	58	12	828	206	596	847	21	3	26	1,165	631	358	106
I79B	274	52	300	94	209	28	20	4	34	9	596	162	238	390	2	0	5	472	308	197	212
J01A	278	54	639	208	390	61	1,408	298	14,931	2,908	32	7	810	979	18	7	1,130	2,914	1,172	914	35
J01B	85	17	377	158	195	29	496	95	11,152	2,334	17	4	450	690	7	2	629	1,728	816	775	33
J06A	220	35	123	48	80	8	52	11	3,139	682	5	1	125	226	5	1	165	582	213	242	135
J06B	11	2	43	57	58	8	7	1	3,197	701	5	1	120	255	21	3	894	534	245	258	133
J07A	114	22	23	10	23	3	16	3	1,773	397	5	2	37	88	8	1	41	271	96	122	130
J07B	63	13	9	5	14	2	1	0	1,522	348	5	2	24	57	2	0	35	197	74	98	171
J08A	140	29	342	111	368	32	276	61	2,670	597	293	84	468	620	18	4	116	945	464	377	177
J08B	17	3	41	17	42	5	7	1	1,789	405	61	18	68	122	15	4	48	285	122	129	204
J09Z	6	2	31	16	51	5	3	1	1,561	367	92	25	84	140	5	1	40	294	121	123	188
J10Z	8	2	17	9	23	3	13	3	1,704	392	3	1	42	77	13	4	43	225	90	110	201
J11Z	19	4	18	8	25	3	5	1	1,062	254	24	7	34	63	16	6	28	159	65	82	228
J12A	541	90	879	251	1,152	106	744	135	2,395	503	527	125	1,165	1,229	118	15	202	1,739	893	728	108
J12B	104	18	306	105	382	41	22	3	2,100	444	141	39	692	677	24	5	80	990	559	351	92
J12C	144	29	233	80	291	30	38	10	1,195	264	380	104	332	438	12	1	90	570	318	268	160
J13A	168	26	411	135	368	41	179	38	2,443	515	125	33	550	602	36	4	91	1,042	517	353	102
J13B	35	5	96	36	64	8	3	0	1,652	370	24	7	128	218	18	5	52	374	195	173	175
J14Z	97	15	263	112	201	19	96	20	8,847	1,966	8	2	380	652	30	6	855	1,592	792	684	54
J60A	332	56	614	170	483	52	162	36	106	29	685	181	528	813	56	8	11	1,086	614	361	149
J60B	152	30	249	79	270	28	9	3	56	13	448	131	327	450	5	1	6	508	273	238	243
J60C	13	2	13	4	10	1	0	0	33	9	79	22	14	15	337	70	1	65	20	33	117
J62A	349	58	265	78	435	31	37	9	36	10	340	85	297	479	16	3	7	601	274	227	157
J62B	148	24	55	16	599	43	5	1	315	76	76	20	77	139	8	1	8	201	63	94	83
J63A	168	33	142	34	199	17	26	9	381	87	425	116	210	285	10	1	7	406	174	170	132
J63B	83	17	41	15	51	7	3	1	448	101	315	92	82	136	0	0	12	183	78	89	199
J64A	223	40	292	86	362	35	248	62	136	33	627	166	338	461	9	2	9	610	322	232	263
J64B	56	11	68	25	94	11	5	1	260	58	401	117	141	192	4	1	8	238	113	111	303
J65A	216	45	310	83	167	18	109	24	61	14	803	214	191	352	3	1	8	445	255	173	214
J65B	110	25	67	19	22	3	12	3	79	18	571	157	52	84	1	0	5	118	57	59	280
J67A	65	14	93	34	147	17	31	8	135	30	452	126	145	227	6	2	6	299	137	114	252
J67B	16	4	8	4	29	2	0	0	363	88	77	22	17	36	27	7	10	77	27	38	249
J68A	169	32	332	97	596	58	302	75	48	12	627	163	373	607	10	1	5	725	370	277	154
J68B	47	10	88	36	219	25	22	5	36	8	457	130	182	312	3	1	2	352	162	154	222

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
J68C	MAJOR SKIN DISORDERS, SAMEDAY	0.24	4,788	4,788	1	1,163	994	169	78	7	56	10	42	34	4
J69A	SKIN MALIGNANCY +CCC	3.00	210	2,285	11	14,738	10,849	3,890	1,980	360	3,448	454	1,237	409	38
J69B	SKIN MALIGNANCY -CCC	1.44	380	1,916	5	7,099	5,192	1,907	1,125	221	1,373	265	601	181	19
J69C	SKIN MALIGNANCY, SAMEDAY	0.19	1,206	1,206	1	931	713	218	117	11	59	13	65	71	7
K01A	OR PR DIABETIC COMPLICATNS+CCC	7.26	1,069	23,802	22	35,679	27,873	7,806	3,977	481	8,218	779	2,395	981	105
K01B	OR PR DIABETIC COMPLICATNS-CCC	3.33	1,704	18,789	11	16,354	12,408	3,947	2,117	250	3,625	398	1,136	353	37
K02A	PITUITARY PROCEDURES +CC	6.19	210	2,287	11	30,436	23,900	6,536	2,066	256	4,323	463	1,308	1,405	189
K02B	PITUITARY PROCEDURES -CC	3.64	109	611	6	17,887	14,231	3,656	1,210	96	1,790	230	610	924	113
K03Z	ADRENAL PROCEDURES	3.62	255	1,427	6	17,798	14,329	3,469	1,653	211	2,095	249	701	688	60
K04A	MAJOR PROCS FOR OBESITY +CC	2.98	375	1,433	4	14,637	11,780	2,857	903	62	1,416	169	578	261	21
K04B	MAJOR PROCS FOR OBESITY -CC	2.13	581	1,362	2	10,450	8,318	2,132	668	55	780	115	402	104	10
K05A	PARATHYROID PROCEDURES +CSCC	3.11	223	1,353	6	15,306	12,119	3,187	1,280	90	2,187	206	719	770	71
K05B	PARATHYROID PROCEDURES -CSCC	1.39	1,082	1,584	1	6,818	5,324	1,495	632	35	549	66	252	308	36
K06A	THYROID PROCEDURES +CSCC	3.10	676	2,833	4	15,251	12,138	3,113	1,211	102	1,413	153	571	528	48
K06B	THYROID PROCEDURES -CSCC	1.74	3,966	6,992	2	8,551	6,778	1,773	680	50	616	84	277	291	28
K07Z	OBESITY PROCEDURES	1.83	356	1,401	4	8,993	6,709	2,284	1,247	82	1,140	147	375	82	18
K08Z	THYROGLOSSAL PROCEDURES	1.12	220	300	1	5,522	4,242	1,280	483	44	515	53	227	119	17
K09A	OTH ENDCRN, NUTR& META PR +CCC	6.46	202	3,644	18	31,761	24,899	6,862	3,211	356	7,104	686	2,050	1,242	145
K09B	OTH ENDCRN, NUTR& META PR+SMCC	3.04	143	1,063	7	14,948	11,764	3,184	1,690	211	2,881	238	817	446	61
K09C	OTH ENDCRN, NUTR & META PR -CC	2.03	264	1,015	4	10,000	7,789	2,211	1,020	101	1,470	130	481	275	29
K40A	ENDO/INVEST PR METAB DIS +CCC	5.47	235	3,967	17	26,884	20,842	6,042	3,182	395	6,271	623	1,650	1,204	142
K40B	ENDO/INVEST PR METAB DIS -CCC	2.02	500	2,805	6	9,909	7,458	2,451	1,549	126	2,111	244	692	344	38
K40C	ENDO/INVEST PR METAB DIS, SD	0.35	2,439	2,439	1	1,704	1,259	445	166	9	70	11	61	80	7
K60A	DIABETES + CSCC	2.32	4,598	32,023	7	11,410	8,710	2,700	1,708	161	2,283	308	840	359	38
K60B	DIABETES - CSCC	0.98	15,855	46,072	3	4,827	3,634	1,194	776	90	928	128	371	116	11
K61Z	SEVERE NUTRITIONAL DISTURBANCE	3.02	703	7,119	10	14,853	11,113	3,740	2,005	196	4,577	449	1,127	408	45
K62A	MISC METABOLIC DISORDERS +CSCC	1.65	6,936	38,857	6	8,121	6,124	1,997	1,031	127	1,923	236	595	261	29
K62B	MISC METABOLIC DISORDERS -CSCC	0.53	15,752	29,192	2	2,620	1,966	653	359	52	559	70	200	84	11
K63A	INBORN ERRORS OF METABOLISM+CC	2.01	490	2,441	5	9,858	7,459	2,399	1,811	211	1,942	161	683	400	53
K63B	INBORN ERRORS OF METABOLISM-CC	0.28	2,637	2,927	1	1,385	1,112	273	386	40	210	18	82	45	7
K64A	ENDOCRINE DISORDERS + CSCC	2.24	1,396	9,748	7	10,988	8,418	2,570	1,390	168	2,485	241	794	393	43
K64B	ENDOCRINE DISORDERS - CSCC	0.79	5,698	11,999	2	3,894	3,012	882	524	84	664	70	245	201	23
L02A	OP INS PERI CATH DIALYSIS+CSCC	3.60	396	3,381	9	17,685	13,722	3,964	2,036	358	3,587	353	1,110	560	55
L02B	OP INS PERI CATH DIALYSIS-CSCC	1.08	587	884	2	5,289	4,245	1,044	465	99	596	70	218	100	10
L03A	KDNY,URT&MJR BLDR PR NPSM +CCC	7.14	786	10,332	13	35,077	27,995	7,082	3,158	321	4,992	401	1,474	1,263	133
L03B	KDNY,URT&MJR BLDR PR NPSM +SCC	4.23	488	3,307	7	20,807	16,590	4,216	1,947	210	2,638	255	797	670	66
L03C	KDNY,URT&MJR BLDR PR NPSM-CSCC	3.12	1,075	4,721	4	15,356	12,219	3,137	1,324	157	1,638	171	563	505	49
L04A	KDY,URT&MJR BLDR PR N-NPM+CCC	5.00	1,251	14,755	12	24,566	19,287	5,279	2,562	345	4,310	363	1,356	833	89
L04B	KDY,URT&MJR BLDR PR N-NPM+SCC	2.47	1,021	5,116	5	12,152	9,520	2,632	1,166	140	1,944	179	612	287	31
L04C	KDY,URT&MJR BLDR PR N-NPM-CSCC	1.38	8,029	15,807	2	6,780	5,346	1,434	588	57	694	73	261	79	9

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
J68C	3	1	3	2	670	24	0	0	11	3	43	12	15	22	21	24	1	41	15	21	144
J69A	444	83	774	161	594	41	17	2	78	17	546	147	741	830	105	16	4	1,144	531	539	79
J69B	262	57	217	58	255	20	15	6	262	64	242	67	277	363	161	17	10	502	228	232	116
J69C	28	6	11	4	21	1	0	0	246	66	9	2	13	31	22	7	6	67	18	31	136
K01A	973	172	1,222	343	1,377	118	1,352	315	3,581	721	527	126	1,598	1,599	112	14	370	2,380	1,080	764	104
K01B	422	75	502	153	600	51	62	14	1,880	432	389	107	755	826	41	5	139	986	543	455	137
K02A	805	145	575	193	416	37	2,580	542	6,735	1,612	118	27	855	987	18	8	1,033	1,986	932	819	28
K02B	561	99	175	69	197	20	1,519	351	5,330	1,151	61	15	360	439	5	2	521	1,072	447	519	24
K03Z	203	38	216	72	304	26	1,257	272	5,404	1,064	23	5	374	395	36	5	361	1,213	425	447	55
K04A	111	20	190	109	234	26	660	134	4,901	888	10	2	260	329	37	6	1,693	885	423	312	32
K04B	51	7	79	76	91	15	183	39	3,893	774	2	0	154	223	11	2	1,584	595	323	213	36
K05A	177	29	226	74	481	40	889	232	3,970	803	106	21	390	457	7	2	205	1,067	430	376	60
K05B	15	2	34	21	60	7	161	33	2,832	600	6	2	71	174	13	2	102	430	174	204	93
K06A	81	14	140	57	187	19	1,142	248	5,545	1,112	41	9	220	336	15	2	216	1,086	394	360	102
K06B	10	2	35	22	69	8	185	43	3,910	807	7	2	93	172	14	2	164	537	214	229	132
K07Z	19	4	92	30	85	16	105	15	2,939	790	9	2	155	309	31	4	144	577	352	224	55
K08Z	7	1	17	14	32	3	57	17	2,366	523	6	1	77	155	20	3	60	374	154	176	80
K09A	1,911	290	959	287	1,265	101	1,400	304	2,068	408	578	142	1,128	1,294	182	13	604	2,273	969	793	57
K09B	1,185	186	276	101	324	36	249	59	2,135	432	277	67	461	552	100	11	323	1,026	402	403	51
K09C	855	148	168	67	174	16	75	18	2,065	437	159	38	273	347	107	7	244	673	285	340	72
K40A	710	116	1,125	284	1,306	90	1,757	393	651	145	741	192	884	1,165	231	51	55	2,033	799	690	81
K40B	225	45	321	96	269	25	241	54	684	168	288	76	314	478	107	31	48	679	360	295	135
K40C	12	2	16	7	21	2	-	-	594	171	2	1	26	36	109	45	20	105	63	68	151
K60A	222	42	399	104	363	40	1,042	243	54	12	751	188	341	517	12	2	11	761	336	271	237
K60B	58	12	170	47	137	14	225	56	24	5	504	139	160	230	27	6	32	309	127	127	292
K61Z	269	54	756	188	397	37	273	55	70	15	564	155	471	1,051	8	2	7	807	479	388	159
K62A	171	31	349	91	250	26	379	84	18	4	688	178	258	392	12	2	5	531	256	195	250
K62B	45	10	83	24	97	9	69	16	21	6	292	81	90	123	8	1	5	164	71	69	290
K63A	158	31	295	90	684	53	585	141	56	11	366	90	273	561	9	2	28	674	244	245	103
K63B	15	4	44	11	130	12	10	2	39	10	40	10	52	60	0	0	3	106	20	28	95
K64A	394	65	387	101	491	40	615	142	78	16	637	154	364	520	20	3	27	767	360	291	155
K64B	546	91	64	20	171	12	41	11	36	8	202	55	102	162	16	3	15	253	101	174	200
L02A	369	68	433	140	1,031	62	406	103	2,327	481	187	51	883	793	23	4	190	1,126	518	432	56
L02B	75	16	69	22	168	14	45	8	1,874	391	12	3	153	111	22	3	161	329	122	134	64
L03A	834	147	556	162	751	62	3,074	654	8,164	1,581	136	34	894	980	83	12	955	2,481	912	861	75
L03B	266	45	206	87	361	35	859	195	6,493	1,256	32	9	466	561	59	9	860	1,319	549	557	77
L03C	161	30	155	68	150	18	356	83	5,680	1,103	16	4	265	376	53	7	671	924	397	432	87
L04A	1,150	198	494	143	991	81	1,706	374	3,175	650	481	114	782	851	85	10	337	1,755	688	642	94
L04B	466	82	140	60	267	24	215	51	2,944	605	287	64	294	395	53	6	326	838	340	336	96
L04C	189	34	41	25	68	8	23	6	2,554	522	85	22	103	170	64	6	296	421	175	206	126

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
L05A	TRANURETH PROSTATECTOMY +CSCC	2.59	330	2,327	7	12,731	9,826	2,906	1,477	123	2,739	280	822	411	40
L05B	TRANURETH PROSTATECTOMY -CSCC	1.30	1,113	2,689	2	6,371	4,896	1,475	1,001	70	806	101	321	146	15
L06A	MINOR BLADDER PROCEDURES+CSCC	3.43	568	4,942	9	16,839	13,013	3,826	1,932	193	3,401	297	964	505	55
L06B	MINOR BLADDER PROCEDURES -CSCC	1.10	1,270	2,711	2	5,413	4,134	1,278	617	61	712	95	274	88	7
L07A	TRANSURETHRAL PROCS +CC	1.44	2,520	8,494	3	7,053	5,414	1,639	785	91	1,124	126	397	240	25
L07B	TRANSURETHRAL PROCS -CC	0.75	8,799	11,569	1	3,688	2,857	832	345	34	308	49	157	103	10
L08A	URETHRAL PROCEDURES + CC	1.34	250	734	3	6,608	5,095	1,514	678	75	928	103	372	119	9
L08B	URETHRAL PROCEDURES - CC	0.80	1,166	1,666	1	3,910	2,998	911	421	46	373	53	182	28	3
L09A	OTH KIDNY & URNRY TRACT PR+CCC	5.14	669	9,068	14	25,249	19,826	5,424	2,468	272	5,271	439	1,498	990	113
L09B	OTH KIDNY & URNRY TRACT PR+SCC	1.77	561	1,705	3	8,696	6,830	1,866	747	92	1,244	106	391	208	22
L09C	OTH KIDNY & URNRY TRCT PR-CSCC	1.15	2,032	3,038	1	5,667	4,489	1,178	405	50	431	51	199	67	7
L40Z	URETEROSCOPY	0.85	498	769	2	4,156	3,223	933	402	39	386	48	188	45	7
L41Z	CYSTOURETHROSCOPY, SAMEDAY	0.24	24,465	24,465	1	1,198	912	286	108	11	48	8	47	12	1
L42Z	ESW LITHOTRIPSY+URINARY STONES	0.73	1,659	1,815	1	3,597	3,108	489	169	10	118	14	65	11	1
L60A	RENAL FAILURE +CCC	3.14	4,447	44,705	10	15,418	11,917	3,501	1,623	214	3,527	401	1,045	654	67
L60B	RENAL FAILURE +SCC	1.44	4,091	19,393	5	7,065	5,387	1,679	824	115	1,631	206	500	303	25
L60C	RENAL FAILURE -CSCC	0.79	5,538	14,220	3	3,869	2,952	917	441	63	831	117	281	185	17
L61Z	HAEMODIALYSIS	0.11	982,822	983,127	1	543	412	131	33	16	143	13	57	12	1
L62A	KDNY&UNRY TRCT NEOPLASMS +CSCC	2.09	852	5,953	7	10,294	7,816	2,478	1,294	247	2,530	259	767	329	35
L62B	KDNY&UNRY TRCT NEOPLASMS -CSCC	0.67	1,154	2,225	2	3,302	2,497	806	374	68	585	88	235	112	11
L63A	KDNY & UNRY TRCT INF +CSCC	1.82	13,504	88,647	7	8,948	6,765	2,183	1,109	151	2,234	301	645	271	29
L63B	KDNY & UNRY TRCT INF -CSCC	0.71	32,041	79,129	2	3,496	2,606	890	473	64	784	109	260	82	7
L64Z	URINARY STONES & OBSTRUCTION	0.54	25,179	38,101	2	2,677	2,056	621	276	33	348	49	152	43	4
L65A	KDNY & UNRY TR SGNS&SYMPS+CSCC	1.42	3,352	16,683	5	6,998	5,277	1,722	900	115	1,794	214	544	234	21
L65B	KDNY & UNRY TR SGNS&SYMPS-CSCC	0.53	10,357	19,321	2	2,617	1,954	663	335	39	485	66	195	96	9
L66Z	URETHRAL STRICTURE	0.64	575	1,057	2	3,155	2,334	821	352	35	470	58	234	34	4
L67A	OTH KIDNY & URNRY TRCT DX+CSCC	1.67	4,578	24,631	5	8,207	6,288	1,920	1,023	143	1,918	225	597	319	34
L67B	OTH KIDNY & URNRY TRCT DX-CSCC	0.40	20,455	30,521	1	1,945	1,481	464	234	35	375	43	137	74	8
L68Z	PERITONEAL DIALYSIS	0.18	5,781	5,783	1	893	749	143	40	57	255	12	45	33	4
M01A	MAJOR MALE PELVIC PROCS +CSCC	4.26	524	3,428	7	20,945	16,835	4,110	1,917	153	2,535	256	790	726	47
M01B	MAJOR MALE PELVIC PROCS -CSCC	4.03	1,496	5,244	4	19,828	16,585	3,243	1,403	145	1,367	177	461	479	32
M02A	TRANSURETHRAL PROSTECTOMY+CSCC	2.20	1,001	5,478	5	10,807	8,305	2,502	1,390	147	1,906	233	677	354	35
M02B	TRANSURETHRAL PROSTECTOMY-CSCC	1.34	4,628	11,983	3	6,598	5,081	1,517	929	89	915	125	340	158	15
M03Z	PENIS PROCEDURES	0.96	1,919	2,807	1	4,710	3,685	1,025	439	56	429	45	178	48	6
M04Z	TESTES PROCEDURES	0.80	6,787	8,532	1	3,956	3,076	879	340	33	313	39	140	63	7
M05Z	CIRCUMCISION	0.57	3,925	4,108	1	2,797	2,158	639	263	22	149	21	91	28	4
M06A	OTH MALE REPROD SYS OR PR +CC	2.54	264	1,398	5	12,477	9,595	2,882	1,550	263	1,885	205	785	316	30
M06B	OTH MALE REPROD SYS OR PR -CC	0.83	1,238	1,540	1	4,075	3,104	971	519	38	284	46	193	65	4
M40Z	CYSTOURETHROSCOPY, SAMEDAY	0.26	2,215	2,215	1	1,262	969	293	125	9	44	7	49	43	3
M60A	MALIGNANCY, MALE REPR SYS+CSCC	2.06	739	5,484	7	10,112	7,574	2,538	1,236	235	2,504	356	797	297	31

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
L05A	176	33	201	71	313	33	96	20	2,349	499	202	54	480	537	9	1	112	980	405	266	82
L05B	25	5	42	25	75	10	12	3	2,039	441	27	7	123	217	12	2	68	429	190	161	111
L06A	343	56	351	119	396	39	737	180	2,631	537	398	109	495	683	49	7	237	1,185	521	418	107
L06B	44	8	46	26	70	8	26	6	1,621	363	118	33	99	194	14	3	236	333	159	151	149
L07A	161	27	96	34	152	15	105	23	1,681	373	132	37	168	258	34	5	80	486	204	192	135
L07B	59	10	21	11	45	5	3	1	1,453	324	41	11	49	94	40	4	73	234	95	106	151
L08A	54	10	121	38	120	12	81	21	1,979	447	113	29	146	231	16	2	94	462	178	170	80
L08B	12	3	22	12	35	5	2	1	1,581	344	26	7	58	111	32	3	54	268	111	118	131
L09A	861	151	664	204	1,390	109	1,376	303	2,394	480	500	128	1,189	1,038	37	7	277	1,731	762	600	91
L09B	169	29	128	43	292	21	18	6	2,702	557	74	19	281	300	24	4	184	558	233	244	78
L09C	80	14	57	20	104	9	35	7	2,522	518	27	7	101	123	13	2	172	348	136	163	131
L40Z	136	22	19	12	50	6	24	7	1,495	318	84	22	58	116	81	7	83	285	93	122	89
L41Z	23	4	5	3	19	2	0	0	516	129	4	1	13	33	42	7	20	80	28	36	164
L42Z	125	19	13	5	17	1	1	0	1,797	278	34	8	64	30	379	7	45	216	55	114	58
L60A	396	66	538	147	682	58	1,429	312	115	25	786	187	563	629	21	4	19	1,064	500	347	193
L60B	179	31	222	63	324	30	259	62	55	12	639	164	265	311	7	2	8	432	233	163	214
L60C	120	23	94	30	218	24	84	18	51	12	374	101	167	166	8	2	8	230	114	91	250
L61Z	3	1	14	5	51	3	0	0	1	0	1	0	97	31	0	0	0	33	15	15	136
L62A	434	77	348	99	486	33	189	34	187	35	451	116	415	514	27	4	20	761	356	245	157
L62B	268	48	64	22	157	16	10	2	326	75	127	36	99	135	5	1	29	217	87	104	159
L63A	206	38	355	98	287	32	292	63	41	9	793	202	280	405	7	1	7	596	297	199	258
L63B	95	18	72	25	70	9	11	3	18	4	567	157	108	160	1	0	3	203	104	88	302
L64Z	168	32	26	13	36	4	24	6	271	60	533	142	60	85	5	0	38	144	59	67	280
L65A	164	32	205	63	257	25	88	25	85	20	585	159	267	357	6	1	10	443	231	157	220
L65B	89	15	42	17	62	6	8	2	97	22	410	117	83	123	5	1	6	148	71	67	268
L66Z	33	7	36	17	48	6	20	5	784	179	120	34	80	142	11	1	19	228	93	103	115
L67A	231	43	221	63	469	41	294	71	150	34	499	134	316	373	13	2	14	534	256	189	217
L67B	78	14	29	12	106	9	12	3	131	31	142	40	69	83	34	8	12	122	51	51	276
L68Z	4	1	22	5	171	9	1	0	0	0	1	0	144	17	1	0	0	46	12	11	40
M01A	229	40	158	70	288	29	712	175	7,603	1,367	16	4	453	493	30	4	477	1,308	579	487	73
M01B	35	7	96	40	143	17	124	34	10,829	1,447	5	1	258	307	21	3	641	959	371	424	77
M02A	142	26	141	57	231	25	227	56	2,430	526	72	20	303	422	30	4	70	727	315	244	100
M02B	15	3	47	23	85	11	19	5	2,143	463	7	2	131	220	16	2	61	408	199	167	118
M03Z	11	2	30	15	43	6	35	10	1,978	416	51	16	70	116	8	1	122	319	117	144	154
M04Z	19	4	21	11	33	4	17	4	1,682	366	154	45	49	87	4	1	44	256	99	120	189
M05Z	2	1	13	7	12	2	1	0	1,361	320	13	4	26	59	4	1	51	175	73	96	188
M06A	514	63	568	80	315	26	149	43	2,032	449	205	50	377	455	181	110	245	862	356	363	72
M06B	190	20	139	18	43	4	0	-	1,135	279	7	2	122	144	94	38	149	278	115	150	100
M40Z	9	2	4	2	7	1	-	-	541	138	4	1	12	29	75	8	11	74	30	37	126
M60A	426	75	350	94	658	55	45	8	154	40	428	112	357	516	15	4	16	684	334	286	151

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
M60B	MALIGNANCY, MALE REPR SYS-CSCC	0.45	4,028	5,613	1	2,204	1,695	509	253	26	212	38	117	144	11
M61Z	BENIGN PROSTATIC HYPERTROPHY	0.55	1,239	2,340	2	2,711	2,044	667	325	41	412	66	183	135	11
M62Z	INFLAMMATION MALE REPRD SYSTEM	0.73	4,595	11,793	3	3,601	2,717	884	509	66	679	100	267	93	8
M63Z	STERILISATION, MALE	0.42	3,151	3,157	1	2,081	1,535	546	246	18	88	15	65	29	4
M64Z	OTHER MALE REPRODUCTIVE SYS DX	0.44	2,362	3,284	1	2,170	1,617	553	263	33	277	37	140	42	4
N01Z	PELVIC EVSCRTN & RADCL VLVCTMY	3.74	255	1,870	7	18,393	14,259	4,134	1,945	189	2,853	450	936	686	44
N04A	HYSTERECTOMY FOR NON-MALG+CSCC	2.86	1,674	7,798	5	14,051	10,766	3,284	1,460	247	1,935	287	598	308	13
N04B	HYSTERECTOMY FOR NON-MALG-CSCC	2.00	7,904	22,837	3	9,832	7,433	2,399	1,049	188	1,060	178	405	171	10
N05A	OOPH&COM FAL TUBE PR NMAL+CSCC	2.77	500	2,324	5	13,598	10,512	3,086	1,296	196	1,776	285	569	399	21
N05B	OOPH&COM FAL TUBE PR NMAL-CSCC	1.56	2,625	4,950	2	7,673	5,849	1,824	664	119	737	126	287	208	12
N06A	FEM REP SYS RECONSTRCT PR+CSCC	2.11	934	3,508	4	10,370	7,908	2,462	1,157	161	1,666	230	507	114	4
N06B	FEM REP SYS RECONSTRCT PR-CSCC	1.35	4,816	9,369	2	6,636	5,052	1,584	698	117	769	128	288	36	0
N07Z	OTH UTERN & ADNEXA PR FOR NMAL	0.86	19,078	24,510	1	4,226	3,176	1,050	375	62	263	43	146	105	6
N08Z	ENDOS & LAPAR PR, FEM REPR SYS	0.90	9,222	11,796	1	4,418	3,336	1,082	362	65	253	40	147	70	5
N09Z	CONISTN,VAGINA,CERVIX&VULVA PR	0.56	16,694	19,942	1	2,749	2,066	683	261	39	187	32	110	120	9
N10Z	DXC CURETTGE, DXC HYSTEROSCOPY	0.49	17,037	18,158	1	2,421	1,802	619	193	35	99	21	81	81	6
N11Z	OTH FEMALE REPRODUCTIVE SYS PR	0.57	2,930	4,335	1	2,781	1,911	870	347	55	478	43	345	83	3
N12A	UTRN & ADNX PR FOR MAL+CCC	4.28	586	4,770	8	21,018	16,391	4,627	2,284	227	3,751	534	1,035	931	41
N12B	UTRN & ADNX PR FOR MAL-CCC	2.45	1,809	6,405	4	12,020	9,297	2,724	1,217	154	1,532	231	540	514	28
N60A	MALIGNANCY FEM REPROD SYS +CCC	2.71	441	3,910	9	13,309	9,924	3,386	1,716	264	3,356	316	1,072	390	30
N60B	MALIGNANCY FEM REPROD SYS -CCC	1.05	1,181	3,747	3	5,171	3,850	1,321	677	120	1,119	118	396	155	12
N61Z	INFECTIONS, FEMALE REPROD SYST	0.69	3,086	7,026	2	3,370	2,488	882	446	63	680	99	248	104	6
N62Z	MNSTRL & OTH FEM REPR SYS DIS	0.41	14,652	19,829	1	2,004	1,508	496	244	32	314	42	125	48	2
O01A	CAESAREAN DELIVERY +CCC	3.33	4,612	40,338	9	16,365	11,877	4,488	1,603	498	4,342	531	1,049	474	7
O01B	CAESAREAN DELIVERY +SCC	2.33	11,862	58,784	5	11,425	8,242	3,183	1,210	410	2,904	338	739	214	8
O01C	CAESAREAN DELIVERY -CSCC	1.98	43,284	157,946	4	9,723	7,033	2,690	1,083	342	2,375	267	625	109	6
O02A	VAGINAL DELIVERY +OR PR +CSCC	2.27	1,777	7,596	4	11,134	8,125	3,009	1,121	340	3,078	345	765	292	9
O02B	VAGINAL DELIVERY +OR PR -CSCC	1.56	4,794	14,486	3	7,651	5,539	2,112	871	235	2,293	242	566	102	4
O03A	ECTOPIC PREGNANCY +CC	1.71	679	1,737	3	8,395	6,368	2,027	678	119	969	135	338	317	8
O03B	ECTOPIC PREGNANCY -CC	1.09	2,651	4,401	2	5,345	4,081	1,264	450	87	524	74	211	135	4
O04A	POSTPARTUM&POST ABORTN+PR+CSCC	2.35	341	1,561	5	11,546	8,743	2,803	947	260	1,813	230	553	529	34
O04B	POSTPARTUM&POST ABORTN+PR-CSCC	0.94	1,234	2,404	2	4,610	3,428	1,182	471	98	674	81	226	146	9
O05Z	ABORTION+ OR PROC	0.51	22,873	24,639	1	2,502	1,866	637	230	34	173	22	96	103	10
O60A	VAGINAL DELIVERY +CSCC	1.56	17,795	69,821	4	7,670	5,501	2,169	882	219	2,693	298	652	196	5
O60B	VAGINAL DELIVERY -CSCC	1.04	100,551	238,082	2	5,109	3,664	1,445	670	170	1,919	218	459	72	3
O60C	VAGINAL DEL SINGLE UNCOMPL	0.76	24,140	40,650	2	3,755	2,734	1,021	549	153	1,439	164	338	36	3
O61Z	POSTPARTUM & POST ABORTN-OR PR	0.68	12,564	31,451	3	3,353	2,409	944	461	98	924	105	285	76	1
O63Z	ABORTION-OR PROC	0.36	5,450	6,507	1	1,785	1,333	452	186	33	357	45	125	118	9
O64A	FALSE LABOUR <37 WK/+CCC	0.51	8,495	17,093	2	2,519	1,806	713	336	77	841	87	234	76	3
O64B	FALSE LABOUR >=37 WK -CCC	0.17	3,652	3,903	1	848	609	239	131	31	280	32	87	20	1

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
M60B	41	7	24	8	101	7	0	0	605	146	21	6	39	71	44	11	13	138	53	67	166
M61Z	43	8	35	13	42	5	15	5	527	136	144	41	71	105	23	4	9	168	71	71	158
M62Z	84	17	55	21	91	10	45	8	184	39	505	139	110	154	11	2	6	214	97	86	236
M63Z	4	1	7	6	11	2	-	-	934	265	1	0	22	51	0	0	26	120	73	94	152
M64Z	65	13	40	12	31	3	10	2	304	71	329	95	50	92	3	1	11	124	52	64	205
N01Z	202	32	361	110	363	36	400	84	5,149	1,082	9	3	334	597	20	2	98	1,425	477	508	27
N04A	121	21	112	45	160	18	244	57	4,669	1,122	32	7	284	497	4	1	150	989	363	308	139
N04B	15	3	67	30	97	13	14	3	3,828	943	6	2	167	327	1	0	117	624	261	253	157
N05A	157	27	130	46	200	19	508	104	4,254	1,000	163	41	251	448	-	-	102	974	335	299	111
N05B	22	4	47	20	81	10	18	4	3,167	783	80	21	97	218	1	0	72	491	190	195	151
N06A	51	9	76	38	122	14	76	17	2,989	774	8	2	221	399	3	0	493	723	274	241	128
N06B	7	1	45	29	62	9	5	0	2,375	594	4	1	105	219	0	0	397	402	178	167	165
N07Z	38	8	27	9	39	5	9	2	1,818	486	47	12	45	139	1	0	53	266	100	121	186
N08Z	17	4	25	12	38	4	12	2	1,961	519	82	22	45	122	2	0	112	276	102	119	185
N09Z	13	3	25	9	27	3	4	1	1,086	299	49	14	32	88	5	3	19	172	64	76	197
N10Z	6	1	14	6	28	3	4	1	1,112	318	13	3	22	71	2	1	33	150	53	63	179
N11Z	31	6	113	23	56	5	18	3	329	80	29	8	71	325	1	0	11	203	56	60	127
N12A	349	52	516	147	431	38	471	94	4,921	1,089	52	14	380	712	3	1	144	1,672	604	526	49
N12B	60	11	173	56	193	20	41	9	4,205	912	26	7	174	409	0	0	59	808	327	313	125
N60A	473	75	580	150	750	65	243	56	84	26	374	100	506	734	19	6	15	1,027	468	414	96
N60B	186	33	142	44	340	28	105	31	231	57	171	48	152	267	26	5	7	364	149	189	151
N61Z	100	22	43	18	81	9	37	10	66	22	505	140	106	181	2	0	2	195	91	94	224
N62Z	65	13	19	8	32	4	8	2	182	48	358	96	49	89	3	1	8	112	49	49	269
O01A	147	37	175	81	267	29	249	52	2,421	635	25	7	516	936	1	0	34	1,228	604	415	125
O01B	33	8	100	52	137	15	57	11	2,087	551	12	4	364	652	0	0	28	830	368	292	145
O01C	15	3	89	50	99	12	17	2	1,998	513	7	3	292	544	0	0	38	673	300	260	151
O02A	47	12	129	65	160	19	133	30	1,586	414	14	4	443	643	-	-	26	799	358	299	133
O02B	9	2	99	48	97	11	19	3	996	281	9	3	287	465	0	0	13	547	251	199	141
O03A	48	11	48	23	86	9	225	53	2,527	679	568	146	133	285	0	0	42	529	222	195	116
O03B	33	8	27	14	60	6	5	1	1,826	456	463	123	79	156	0	0	39	312	126	126	136
O04A	261	47	157	63	167	23	961	216	2,083	541	390	89	254	451	21	1	86	795	284	290	97
O04B	74	15	32	15	46	6	31	6	1,204	340	218	58	89	189	3	0	47	284	120	126	150
O05Z	9	2	24	7	36	3	4	1	910	277	103	27	40	85	0	0	21	159	57	68	171
O60A	26	7	115	59	110	12	37	8	292	91	13	4	334	549	0	0	3	586	282	199	156
O60B	8	2	66	36	60	6	9	1	84	23	9	3	237	373	0	0	1	376	174	130	186
O60C	8	2	48	25	42	5	8	1	22	6	7	2	173	261	-	-	1	257	112	92	190
O61Z	50	11	64	21	45	5	95	26	63	19	174	47	106	215	1	0	2	247	115	97	242
O63Z	42	10	43	13	23	2	6	2	44	13	297	82	52	90	-	-	1	106	42	44	223
O64A	42	12	41	17	36	4	0	0	13	9	21	6	118	192	0	0	0	187	91	74	173
O64B	6	1	9	4	12	2	-	-	6	2	7	3	38	62	-	-	0	63	24	26	161

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
O66A	ANTENATAL&OTH OBSTETRIC ADM	0.65	28,447	65,448	2	3,200	2,297	903	430	89	885	98	277	101	4
O66B	ANTENATAL&OTH OBSTETRIC ADM,SD	0.11	43,429	43,429	1	560	423	136	83	23	130	16	52	25	2
P01Z	NEONATE,D/T<5DAY ADM+SIG OR PR	1.28	254	355	1	6,305	5,100	1,205	484	42	180	10	120	204	25
P02Z	NEO,CARDIOTHORACIC/VASCULAR PR	25.75	158	4,470	28	126,538	101,494	25,044	11,755	194	7,335	340	3,872	5,669	1,211
P03Z	NEO,ADMWT 1000-1499G+SIG OR PR	19.63	746	36,113	48	96,460	73,983	22,477	6,746	499	3,801	380	1,415	1,648	80
P04Z	NEO,ADMWT 1500-1999G+SIG OR PR	11.74	369	11,923	32	57,713	45,343	12,369	4,849	413	2,939	218	1,224	1,304	91
P05Z	NEO,ADMWT 2000-2499G+SIG OR PR	11.43	295	7,696	26	56,156	44,065	12,092	5,273	460	4,222	201	1,635	1,543	218
P06A	NEO,ADMWT >2499G+SIG OR PR+MMP	13.31	561	13,735	24	65,425	51,852	13,574	6,790	231	4,828	217	2,098	2,213	427
P06B	NEO,ADMWT >2499G+SIG OR PR-MMP	5.13	416	4,375	11	25,188	19,494	5,694	2,167	235	2,401	121	821	683	85
P60A	NEO,D/TR<5D ADM-SIG PR+NEWBORN	0.59	2,808	4,805	2	2,918	2,298	620	387	60	440	40	152	175	11
P60B	NEO,D/TR<5D ADM-SIG PR-NEWBORN	0.87	1,669	3,212	2	4,275	3,273	1,002	547	55	575	32	225	184	21
P61Z	NEONATE, ADMISSION WT <750 G	40.49	231	16,680	72	198,945	152,599	46,345	10,668	505	5,126	519	1,943	3,834	352
P62Z	NEONATE, ADMISSION WT 750-999G	30.42	481	29,650	62	149,461	114,941	34,520	8,131	307	3,259	408	1,729	2,524	240
P63Z	NEO,ADMWT 1000-1249G-SIG OR PR	7.87	309	7,950	26	38,687	29,461	9,226	3,785	369	4,213	371	1,195	544	31
P64Z	NEO,ADMWT 1250-1499G-SIG OR PR	7.47	771	20,171	26	36,728	28,215	8,513	4,661	770	5,821	463	1,376	468	13
P65A	NEO,ADMWT 1500-1999G-SG OR+MMP	6.51	339	7,723	23	32,006	24,948	7,058	3,895	649	4,138	252	1,132	653	48
P65B	NEO,ADMWT 1500-1999G-SG OR+MJP	5.46	979	20,663	21	26,830	20,676	6,154	3,645	697	5,162	383	1,176	401	6
P65C	NEO,ADMWT 1500-1999G-SG OR+OTP	4.47	1,287	23,390	18	21,948	16,571	5,376	3,340	580	5,191	438	1,230	282	7
P65D	NEO,ADMWT 1500-1999G-SG OR-PRB	4.12	1,093	16,726	15	20,224	15,204	5,019	3,812	599	6,356	494	1,358	116	6
P66A	NEO,ADMWT 2000-2499G-SG OR+MMP	4.82	420	7,030	17	23,690	18,541	5,150	3,605	420	3,885	273	1,038	552	53
P66B	NEO,ADMWT 2000-2499G-SG OR+MJP	3.75	1,326	18,083	14	18,409	14,055	4,354	2,781	559	3,901	293	934	302	18
P66C	NEO,ADMWT 2000-2499G-SG OR+OTP	2.68	4,272	44,198	10	13,151	9,888	3,263	2,260	419	3,527	287	784	167	10
P66D	NEO,ADMWT 2000-2499G-SG OR-PRB	1.21	2,289	10,440	5	5,949	4,289	1,660	1,073	175	1,662	146	478	58	5
P67A	NEO,ADMWT >2499G-SIG OR PR+MMP	3.29	1,967	19,491	10	16,143	12,576	3,567	2,149	292	2,691	177	775	464	52
P67B	NEO,ADMWT >2499G-SIG OR PR+MJP	1.90	6,744	41,480	6	9,335	7,121	2,214	1,403	266	2,146	163	565	204	16
P67C	NEO,ADMWT >2499G-SIG OR PR+OTP	1.26	14,952	60,042	4	6,171	4,634	1,538	982	194	1,718	135	409	144	13
P67D	NEO,ADMWT >2499G-SIG OR PR-PRB	0.73	17,357	42,055	2	3,571	2,583	987	616	91	1,086	91	322	51	4
Q01Z	SPLENECTOMY	3.79	275	1,853	7	18,631	14,814	3,817	1,414	253	2,208	258	747	829	72
Q02A	OTH OR PR BLD&BLD FRM ORG+CSCC	4.47	621	7,154	12	21,962	16,996	4,966	2,296	252	4,391	395	1,282	948	117
Q02B	OTH OR PR BLD&BLD FRM ORG-CSCC	0.97	1,618	3,032	2	4,762	3,706	1,056	438	52	493	55	215	312	37
Q60A	RETICLENDO&IMNTY DIS+CSCC	2.50	4,801	32,779	7	12,304	9,638	2,666	1,141	242	2,980	263	791	652	86
Q60B	RETICLENDO&IMNTY DIS-CSCC+MAL	0.89	1,616	4,716	3	4,369	3,341	1,028	462	106	1,110	128	311	238	26
Q60C	RETICLENDO&IMNTY DIS-CSCC-MAL	0.29	19,727	27,041	1	1,445	1,102	343	196	27	250	31	116	107	17
Q61A	RED BLOOD CELL DISDERS + CSCC	1.37	7,776	35,575	5	6,744	5,130	1,614	784	107	1,467	187	481	347	38
Q61B	RED BLOOD CELL DISDERS - CSCC	0.31	47,869	59,271	1	1,514	1,162	352	161	21	241	32	110	86	11
Q62Z	COAGULATION DISORDERS	0.64	7,652	18,185	2	3,154	2,389	766	401	65	646	77	238	195	25
R01A	LYMPHMA&LEUKMA+MJR OR PR +CSCC	9.96	345	7,169	21	48,946	39,142	9,805	3,690	742	8,475	776	2,441	2,600	307
R01B	LYMPHMA&LEUKMA+MJR OR PR -CSCC	2.41	301	1,337	4	11,837	9,367	2,470	978	134	1,594	147	497	861	88
R02A	OTH NPLSTC DSRD+MJR OR PR+CCC	5.85	281	3,754	13	28,747	22,741	6,006	2,648	234	4,473	398	1,361	972	96
R02B	OTH NPLSTC DSRD+MJR OR PR+SMCC	3.56	333	2,357	7	17,473	13,638	3,835	1,587	141	2,282	260	834	518	46

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
O66A	65	16	57	22	51	6	17	4	89	26	146	43	121	220	1	0	3	224	113	93	255
O66B	12	3	9	4	8	1	0	0	9	2	42	12	38	27	0	0	1	36	10	12	265
P01Z	83	21	38	18	40	3	775	171	2,683	466	8	3	45	116	-	-	29	363	106	273	20
P02Z	2,452	508	3,309	479	1,509	170	40,484	8,405	13,023	2,651	82	28	2,879	2,446	559	199	1,221	9,425	1,859	4,470	5
P03Z	1,156	243	676	192	1,330	146	49,394	13,408	175	35	39	11	684	1,206	0	-	18	7,845	2,393	2,936	38
P04Z	951	169	506	165	978	103	27,418	6,882	437	89	24	7	602	900	0	-	38	4,612	1,127	1,669	32
P05Z	947	194	1,030	251	1,105	111	22,323	5,195	1,477	277	39	9	732	1,253	64	23	93	4,437	1,113	1,930	38
P06A	1,379	283	1,184	299	1,487	187	24,121	5,311	2,652	514	75	21	850	1,669	-	-	264	5,379	1,089	1,862	31
P06B	409	92	381	98	353	38	8,684	2,050	1,510	307	215	59	332	596	0	-	65	1,867	600	1,020	46
P60A	98	21	21	9	29	3	513	132	12	4	5	1	341	118	0	0	2	207	62	75	137
P60B	95	20	47	25	53	4	997	248	67	13	118	39	198	174	-	-	4	310	79	147	161
P61Z	2,562	509	1,499	314	2,601	257	108,228	29,290	296	55	63	20	1,360	1,924	-	-	36	16,252	4,740	5,991	28
P62Z	2,348	389	1,093	234	1,878	195	81,816	21,491	208	40	67	20	777	1,508	0	0	24	12,305	3,799	4,671	33
P63Z	399	103	295	109	525	75	15,556	4,322	20	4	77	24	583	1,005	0	-	6	3,140	787	1,148	69
P64Z	333	81	310	114	477	57	11,917	3,117	14	3	16	4	816	1,085	0	0	3	3,070	786	952	82
P65A	388	82	381	83	457	53	11,203	2,969	38	7	13	4	675	778	0	-	4	2,764	578	763	56
P65B	238	56	241	95	296	36	7,456	1,976	12	2	11	3	682	865	0	-	2	2,152	575	663	84
P65C	91	26	162	89	216	26	4,503	1,201	13	3	9	3	704	971	0	-	1	1,780	500	583	99
P65D	47	10	149	71	168	24	1,981	516	7	2	10	3	708	1,065	0	0	1	1,632	578	512	119
P66A	316	60	477	104	276	32	6,439	1,608	36	6	22	6	547	757	0	-	2	2,206	430	539	76
P66B	125	28	206	75	179	22	4,240	1,101	8	2	25	8	561	684	23	8	1	1,434	411	480	106
P66C	33	9	107	50	100	13	2,027	521	11	4	17	5	450	639	0	0	0	1,013	341	360	137
P66D	13	3	49	34	42	7	509	121	23	8	42	12	232	372	0	-	1	481	199	205	150
P67A	283	55	318	86	212	24	4,200	1,007	63	11	73	19	438	537	44	16	3	1,396	324	436	105
P67B	93	19	158	51	85	11	1,688	403	31	7	113	32	287	393	0	0	1	727	221	250	140
P67C	32	7	56	27	47	6	822	190	22	9	51	14	194	305	1	0	1	451	169	171	143
P67D	14	3	32	21	28	3	159	36	8	4	117	32	129	232	1	0	0	264	122	104	195
Q01Z	282	44	283	88	480	37	2,059	515	4,383	912	455	108	337	414	9	2	443	1,124	446	429	85
Q02A	760	144	532	184	1,701	131	1,105	236	1,660	345	565	143	715	924	127	25	262	1,411	722	590	111
Q02B	134	24	42	19	65	6	47	14	1,397	299	91	28	87	137	107	23	71	306	118	145	161
Q60A	250	46	301	93	1,831	108	285	62	71	14	613	160	391	504	13	3	7	761	355	280	188
Q60B	81	14	89	31	361	23	6	2	20	4	421	113	144	186	5	1	4	259	125	98	157
Q60C	26	5	19	9	117	7	15	3	44	10	113	29	60	63	11	2	2	90	37	37	238
Q61A	154	27	210	63	409	35	154	36	132	32	567	142	220	304	28	7	10	428	216	158	242
Q61B	17	3	23	10	174	11	3	1	122	30	108	29	49	61	28	7	4	96	40	38	286
Q62Z	59	10	62	22	211	15	54	14	38	9	303	83	101	142	8	2	8	197	93	77	224
R01A	1,828	305	1,414	434	5,388	360	2,651	603	4,671	1,015	517	133	1,431	1,492	90	20	1,990	3,077	1,327	1,171	77
R01B	444	73	189	71	444	36	136	38	2,750	592	153	42	249	369	17	3	590	685	301	358	82
R02A	526	92	709	182	614	58	1,961	388	6,718	1,373	154	33	647	841	75	16	457	2,164	859	699	65
R02B	165	32	255	89	223	24	566	126	5,648	1,144	33	11	402	532	20	4	311	1,212	514	495	77

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
R02C	OTH NPLSTC DSRD+MJR OR PR-CC	2.45	967	4,664	5	12,049	9,460	2,589	1,090	96	1,515	168	527	359	28
R03A	LYMPHMA LEUKMA+OTH OR PR +CSCC	7.51	725	13,280	18	36,905	29,177	7,728	3,026	737	7,387	642	2,024	2,476	269
R03B	LYMPHMA LEUKMA+OTH OR PR -CSCC	1.32	1,338	3,499	3	6,504	5,143	1,361	457	74	795	99	284	691	69
R04A	OTH NPLSTC DSRD+OTH OR PR +CC	2.26	619	3,580	6	11,094	8,587	2,507	1,167	126	1,960	213	625	484	40
R04B	OTH NPLSTC DSRD+OTH OR PR -CC	0.94	1,029	1,517	1	4,632	3,497	1,135	695	20	215	30	168	121	9
R60A	ACUTE LEUKAEMIA + CCC	8.60	1,542	33,562	22	42,241	34,079	8,162	3,284	903	10,096	692	2,475	2,793	326
R60B	ACUTE LEUKAEMIA - CCC	0.89	8,287	19,911	2	4,379	3,475	903	339	62	1,003	67	288	367	56
R61A	LYMPHMA &N-ACUTE LEUKAEMIA+CCC	5.21	1,827	27,874	15	25,618	20,126	5,492	2,111	569	5,953	556	1,672	1,571	158
R61B	LYMPHMA &N-ACUTE LEUKAEMIA-CCC	1.82	6,594	30,658	5	8,923	7,024	1,898	697	160	1,787	191	580	479	53
R61C	LYMPHOMA/N-A LEUKAEMIA,SAMEDAY	0.25	18,568	18,568	1	1,212	962	250	75	11	124	13	93	182	31
R62A	OTHER NEOPLASTIC DISORDERS +CC	1.64	1,425	7,642	5	8,042	6,120	1,922	1,016	153	1,860	191	622	245	28
R62B	OTHER NEOPLASTIC DISORDERS -CC	0.63	844	1,592	2	3,089	2,355	734	325	48	459	64	198	120	11
R63Z	CHEMOTHERAPY	0.30	127,907	127,916	1	1,482	1,262	220	90	20	123	17	75	19	2
R64Z	RADIOTHERAPY	0.54	1,654	1,658	1	2,653	1,965	688	135	71	150	14	159	11	0
S60Z	HIV, SAMEDAY	0.29	622	622	1	1,401	1,174	227	243	24	111	11	152	76	7
S65A	HIV-RELATED DISEASES +CCC	7.28	254	4,512	18	35,784	28,302	7,482	5,002	516	6,377	549	2,336	2,513	377
S65B	HIV-RELATED DISEASES +SCC	3.73	205	2,086	10	18,311	14,397	3,914	2,576	362	3,726	339	1,408	1,249	167
S65C	HIV-RELATED DISEASES -CSCC	2.22	308	1,716	6	10,893	8,597	2,296	1,530	173	2,097	170	854	744	91
T01A	OR PROC INFECT& PARAS DIS+CCC	7.89	1,874	39,544	21	38,774	30,636	8,138	3,987	513	7,494	667	2,151	1,391	150
T01B	OR PROC INFECT& PARAS DIS+SMCC	3.11	1,135	11,088	10	15,274	11,787	3,487	2,000	239	3,216	314	945	377	37
T01C	OR PROC INFECT & PARAS DIS-CC	1.96	1,260	7,342	6	9,629	7,375	2,254	1,261	154	1,864	203	598	212	20
T40Z	INFECT&PARAS DIS+VENT SUPPORT	7.56	284	3,150	11	37,140	29,667	7,473	2,076	197	2,525	259	916	1,806	192
T60A	SEPTICAEMIA + CCC	3.11	7,622	74,637	10	15,278	11,786	3,492	1,648	188	3,304	358	981	613	61
T60B	SEPTICAEMIA - CCC	1.56	6,638	34,393	5	7,690	5,793	1,896	929	116	1,809	231	537	259	24
T61A	POSTOP & POSTTRAUM INFECT+CSCC	1.93	2,030	15,065	7	9,488	7,195	2,293	1,317	166	2,285	279	720	291	27
T61B	POSTOP & POSTTRAUM INFECT-CSCC	0.94	6,096	23,319	4	4,600	3,436	1,164	743	89	1,086	138	377	100	8
T62A	FEVER OF UNKNOWN ORIGIN + CC	1.38	4,098	17,913	4	6,801	5,216	1,585	795	134	1,647	192	490	296	31
T62B	FEVER OF UNKNOWN ORIGIN - CC	0.66	5,004	10,323	2	3,262	2,451	811	432	57	700	87	236	118	11
T63Z	VIRAL ILLNESS	0.64	16,789	31,519	2	3,128	2,360	768	449	59	670	72	222	97	9
T64A	OTH INFECTOUS&PARSTIC DIS +CCC	4.34	1,061	14,314	13	21,311	16,780	4,531	2,451	365	4,669	537	1,408	818	80
T64B	OTH INFECTOUS&PARSTIC DIS+SMCC	1.85	1,245	8,081	6	9,083	7,000	2,083	1,267	196	2,087	263	659	313	30
T64C	OTH INFECTOUS & PARSTIC DIS-CC	0.91	1,748	5,903	3	4,472	3,411	1,061	670	109	1,014	141	341	148	12
U40Z	MENTAL HEALTH TREAT,SAMEDY+ECT	0.18	11,279	11,279	1	902	655	247	73	14	103	13	89	1	0
U60Z	MENTAL HEALTH TREAT,SAMEDY-ECT	0.17	18,833	18,833	1	833	539	294	105	18	95	14	141	11	1
U61A	SCHIZOPHRENIA DISORDERS+MHLS	4.88	13,004	287,366	22	23,989	17,682	6,307	3,208	1,437	7,836	518	2,331	259	68
U61B	SCHIZOPHRENIA DISORDERS-MHLS	3.30	10,080	144,025	14	16,196	11,601	4,595	2,036	432	4,812	349	1,663	185	74
U62A	PAR&ACUTE PSYCH DSRD+CSCC/MHLS	3.61	2,477	37,736	15	17,758	13,225	4,533	2,257	707	6,246	421	1,761	160	16
U62B	PAR&ACUTE PSYCH DSRD-CSCC-MHLS	2.18	2,338	20,024	9	10,706	7,751	2,955	1,383	246	3,325	245	1,064	92	13
U63A	MJR AFFECT DSRD A>69/+CSCC	5.53	2,573	62,763	24	27,178	20,179	6,999	3,197	1,131	8,923	624	2,417	293	29
U63B	MAJOR AFFECTIVE DSRD A<70-CSCC	3.37	15,357	206,395	13	16,553	12,160	4,393	2,094	689	5,510	379	1,597	140	18

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
R02C	74	13	139	51	132	13	222	50	4,399	917	13	3	224	332	8	1	196	789	343	346	111
R03A	1,635	264	1,032	319	4,977	281	966	190	2,024	420	508	123	1,062	1,359	91	11	725	2,336	1,075	947	99
R03B	340	58	86	30	413	28	35	8	1,457	309	91	26	114	179	14	3	83	410	158	193	140
R04A	471	76	305	83	344	25	211	45	1,889	408	220	52	312	433	42	18	107	768	344	325	105
R04B	157	18	130	45	30	3	4	1	1,499	409	17	4	54	114	95	81	64	409	111	129	120
R60A	960	162	1,029	305	8,794	376	1,061	220	438	88	436	104	1,364	1,439	84	10	55	2,558	1,222	967	86
R60B	51	9	83	32	867	47	12	2	149	31	60	15	139	181	4	1	13	273	115	112	137
R61A	818	132	799	219	4,095	238	796	165	143	32	499	121	809	996	60	8	25	1,675	794	604	146
R61B	240	42	194	65	2,248	140	26	6	84	18	220	58	250	355	20	8	12	515	248	225	205
R61C	30	4	7	6	267	15	1	0	54	14	5	1	62	41	41	6	2	76	23	29	197
R62A	292	48	350	85	506	38	132	35	153	33	285	74	316	387	63	28	12	594	246	250	141
R62B	191	38	69	24	225	20	7	1	408	100	99	28	86	114	34	7	22	195	88	105	162
R63Z	15	2	15	8	840	50	0	0	10	3	1	0	50	37	2	0	1	69	18	15	133
R64Z	390	8	34	8	51	3	-	-	200	46	2	1	45	92	654	218	2	176	37	144	17
S60Z	8	2	12	6	417	10	-	-	81	14	27	8	41	39	6	4	1	60	27	17	42
S65A	789	158	1,330	301	4,782	266	1,299	274	378	80	826	186	1,173	1,425	72	18	103	2,567	1,293	796	46
S65B	323	69	582	120	2,110	129	132	23	286	52	780	185	628	761	3	1	11	1,202	660	428	44
S65C	221	45	253	64	1,400	67	29	10	159	30	735	164	277	449	6	1	14	660	425	223	60
T01A	1,194	206	964	279	2,772	201	3,551	776	3,204	675	701	166	1,327	1,403	78	12	373	2,515	1,137	888	129
T01B	324	59	287	107	608	48	340	82	2,056	435	476	129	556	644	45	8	136	923	492	389	135
T01C	185	34	141	57	258	22	71	14	1,753	370	353	98	310	393	5	1	93	579	312	264	146
T40Z	985	179	849	178	1,010	54	15,179	3,282	586	54	1,143	253	404	590	33	5	52	2,559	766	1,008	80
T60A	431	70	451	125	791	66	1,623	367	100	20	902	222	438	601	23	4	15	1,021	508	347	215
T60B	207	38	170	57	293	28	361	87	58	13	740	195	250	351	8	1	8	459	260	197	269
T61A	267	49	219	71	470	34	283	67	184	42	515	134	386	461	12	2	16	647	321	223	195
T61B	104	19	78	32	135	12	7	2	131	30	423	119	177	239	6	1	7	274	144	119	266
T62A	209	38	166	50	387	32	69	15	28	6	709	178	233	290	8	2	4	422	208	163	218
T62B	73	14	46	19	77	11	9	2	10	3	580	153	105	149	5	2	5	184	89	88	268
T63Z	47	10	40	18	90	9	22	5	34	2	548	154	85	141	1	0	2	180	83	78	270
T64A	626	108	594	168	2,500	179	1,129	248	165	38	816	182	812	889	40	7	18	1,426	589	448	141
T64B	253	45	183	63	716	48	175	44	94	22	568	148	384	410	22	4	17	589	268	213	172
T64C	105	19	69	31	252	18	22	7	68	15	407	113	193	203	12	3	6	264	123	108	212
U40Z	1	0	13	7	6	0	-	-	255	71	0	0	52	48	40	7	8	66	17	18	71
U60Z	13	4	16	7	13	2	1	0	12	3	164	49	24	40	1	0	1	59	23	16	261
U61A	53	11	1,002	235	610	74	344	120	83	22	325	89	804	1,263	23	3	3	1,776	826	668	104
U61B	42	8	500	129	373	46	657	252	47	13	332	95	520	1,050	7	1	3	1,338	635	595	213
U62A	97	18	656	171	370	54	210	55	50	17	416	111	536	962	5	1	2	1,322	655	482	123
U62B	72	14	324	89	175	25	230	90	12	3	484	138	366	703	4	1	2	873	389	343	209
U63A	191	36	1,666	370	488	71	308	102	564	130	336	89	848	1,355	68	9	23	2,120	1,104	686	175
U63B	52	10	762	178	259	39	285	95	136	32	336	94	503	940	17	2	6	1,243	597	539	228

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
U64Z	OTH AFFECT & SOMATOFORM DSRD	1.91	8,550	61,804	7	9,395	6,877	2,518	1,231	276	3,051	244	914	82	5
U65Z	ANXIETY DISORDERS	1.21	7,139	30,629	4	5,927	4,421	1,506	675	155	1,822	330	561	61	5
U66Z	EATING & OBSESSV-COMPULSV DSRD	5.07	2,223	39,227	18	24,931	18,675	6,255	3,379	1,016	8,600	444	2,167	336	48
U67Z	PERSONLTY DSRD&ACUTE REACTIONS	1.50	18,657	99,439	5	7,386	5,406	1,980	935	251	2,385	165	672	70	12
U68Z	CHILDHOOD MENTAL DISORDERS	3.29	656	5,523	8	16,164	12,366	3,798	1,932	689	6,492	351	1,348	86	10
V60A	ALCOHOL INTOXICATN&WITHDRWL+CC	1.03	2,728	9,398	3	5,081	3,755	1,326	600	80	1,128	135	386	120	12
V60B	ALCOHOL INTOXICATN&WITHDRWL-CC	0.46	11,261	19,340	2	2,283	1,620	663	272	40	452	55	205	32	3
V61Z	DRUG INTOXICTN & WITHDRAWAL	1.62	6,538	39,225	6	7,938	5,911	2,027	963	307	2,519	173	719	94	9
V62A	ALCOHOL USE DSRD & DEPENDENCE	1.50	5,167	29,730	6	7,377	5,525	1,853	866	278	2,527	163	733	168	8
V62B	ALCOHOL USE DSRD & DEPENDNC+SD	0.23	932	932	1	1,154	895	259	287	143	292	25	64	8	0
V63Z	OPIOID USE DSRD & DEPENDENCE	0.98	1,194	5,738	5	4,803	3,558	1,246	674	260	1,443	71	543	169	7
V64Z	OTHER DRUG USE DISORD & DEPEND	0.95	2,729	12,027	4	4,670	3,430	1,240	629	162	1,343	76	534	96	6
W01Z	VENTILN/CRANIA MULT SIG TRAUMA	12.07	499	9,109	18	59,293	47,042	12,251	3,641	420	5,391	456	1,813	1,319	166
W02A	HIP,FEMR&LIMB PR MLT TRMA+CSCC	8.64	515	8,677	17	42,475	33,640	8,836	3,105	574	6,175	499	1,815	825	103
W02B	HIP,FEMR&LIMB PR MLT TRMA-CSCC	5.92	220	2,215	10	29,081	22,642	6,439	2,201	335	3,723	337	1,118	329	47
W03Z	ABDOMINAL PR MULT SIG TRAUMA	6.15	249	2,676	11	30,219	23,792	6,427	2,277	224	3,782	422	1,209	782	76
W04A	OTH OR PR MULT SIG TRAUMA+CSCC	9.52	304	5,434	18	46,772	37,466	9,306	3,203	575	6,658	554	1,928	892	104
W04B	OTH OR PR MULT SIG TRAUMA-CSCC	5.18	288	2,570	9	25,465	20,071	5,394	1,825	251	3,129	264	955	250	31
W60Z	MULTIPLE TRAUMA, DIED/TRANSF<5	1.93	631	1,086	2	9,509	7,614	1,895	501	58	380	48	205	371	30
W61A	MULTIPLE TRAUMA-SIGNIF PR+CSCC	4.23	595	7,229	12	20,771	15,863	4,908	2,125	277	4,441	454	1,282	494	53
W61B	MULTIPLE TRAUMA-SIGNIF PR-CSCC	2.29	834	5,118	6	11,245	8,455	2,790	1,101	157	2,201	271	624	154	16
X02A	MVTT/SKIN GFT+CSCC INJUR HAND	2.30	861	3,431	4	11,322	8,957	2,365	790	81	1,304	99	461	85	10
X02B	SKIN GRAFT INJURIES HAND -CSCC	0.86	1,245	1,888	2	4,224	3,249	974	330	21	373	38	164	13	2
X04A	OTHER PR INJ LWR LMB +CSCC	3.36	606	5,689	9	16,535	12,681	3,854	1,809	273	3,210	308	985	398	32
X04B	OTHER PR INJ LOWR LIMB -CSCC	1.08	2,397	4,960	2	5,292	4,058	1,234	463	60	680	69	240	30	3
X05A	OTH PR FOR INJURIES TO HAND+CC	1.69	1,104	4,436	4	8,289	6,257	2,032	808	126	1,328	126	471	106	9
X05B	OTH PR FOR INJURIES TO HAND-CC	0.73	6,398	8,487	1	3,609	2,755	854	277	30	305	36	143	10	1
X06A	OTHER PR OTHER INJURIES + CSCC	2.94	3,489	27,424	8	14,453	11,167	3,286	1,549	175	2,594	266	807	360	42
X06B	OTHER PR OTHER INJURIES - CSCC	1.04	8,926	18,528	2	5,104	3,917	1,188	491	55	609	69	238	49	4
X07A	SK GRAFT INJ-HAND+MIC TT/+CSCC	4.46	915	12,046	13	21,923	16,786	5,137	2,570	327	4,444	383	1,470	362	44
X07B	SK GRAFT INJ-HAND-MIC TT-CSCC	2.12	838	5,210	6	10,414	7,942	2,472	1,311	134	2,091	166	696	95	10
X40Z	INJ,POIS,TOX EFF DRUG W VENT	4.37	903	5,856	6	21,451	17,018	4,433	1,308	162	1,361	158	569	698	73
X60A	INJURIES + CSCC	1.36	7,022	36,626	5	6,703	4,936	1,767	824	91	1,559	194	526	149	16
X60B	INJURIES - CSCC	0.45	38,624	58,201	2	2,229	1,662	566	239	31	307	45	146	25	2
X61Z	ALLERGIC REACTIONS	0.36	6,290	7,582	1	1,783	1,362	421	206	23	232	31	99	34	3
X62A	POISNG/TOXC EFF DRUGS +CSCC	1.74	6,092	30,306	5	8,534	6,550	1,984	949	201	1,583	158	526	212	19
X62B	POISNG/TOXC EFF DRUGS -CSCC	0.61	27,183	53,542	2	3,015	2,264	750	370	79	572	56	218	51	4
X63A	SEQUELAE OF TREATMNT+CSCC	1.61	3,575	19,547	5	7,924	6,022	1,902	1,049	119	1,733	200	569	247	24
X63B	SEQUELAE OF TREATMNT-CSCC	0.61	11,928	25,364	2	2,997	2,242	755	414	43	585	71	215	61	5
X64A	OTH INJ, POIS & TOX EF DX+CSCC	1.62	957	5,376	6	7,963	5,912	2,051	868	101	1,694	194	566	185	24

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
U64Z	48	11	354	97	124	18	75	26	40	9	383	113	306	562	9	1	4	727	373	311	277
U65Z	71	15	254	56	75	10	82	22	22	6	367	101	189	263	29	7	1	404	199	146	269
U66Z	69	15	1,648	549	356	42	212	43	31	8	336	87	763	1,208	4	1	19	1,979	793	778	140
U67Z	24	5	303	86	101	15	102	31	37	6	362	105	210	423	4	1	2	551	274	255	256
U68Z	49	10	791	109	136	24	218	64	43	9	393	105	514	752	1	0	2	1,071	511	454	108
V60A	93	19	208	60	87	10	191	47	21	5	648	175	147	251	4	1	6	341	166	140	207
V60B	25	6	67	25	27	4	24	7	5	1	418	127	64	122	0	0	1	162	70	69	269
V61Z	38	8	278	68	129	16	189	57	7	2	467	132	271	408	3	0	0	565	273	243	217
V62A	42	8	421	83	114	18	36	10	6	2	245	67	261	393	1	0	1	481	247	197	220
V62B	4	1	9	2	14	4	1	0	1	0	133	38	24	13	0	0	0	59	16	14	103
V63Z	16	3	218	36	69	13	57	22	13	2	102	29	202	240	2	0	1	343	157	113	116
V64Z	16	3	205	36	63	10	49	17	6	1	215	62	188	257	2	0	0	356	163	173	181
W01Z	2,391	551	2,211	528	904	90	13,139	2,902	7,295	1,466	1,721	437	1,070	1,171	62	17	2,902	3,747	1,755	1,726	53
W02A	1,235	280	1,276	396	1,063	87	2,113	474	8,003	1,785	1,341	342	1,130	1,248	51	17	3,787	2,470	1,222	1,062	81
W02B	1,261	335	909	264	318	35	1,214	263	6,147	1,381	1,439	395	542	804	16	3	2,200	1,688	923	854	64
W03Z	1,074	273	842	206	535	48	3,624	812	5,394	1,072	1,349	353	589	773	17	7	842	1,952	895	793	59
W04A	1,363	296	1,517	462	846	84	3,775	747	8,053	1,670	1,557	388	1,301	1,341	51	16	4,222	2,764	1,258	1,147	49
W04B	1,111	267	755	183	237	32	1,953	419	4,880	1,038	1,498	402	701	687	17	5	1,610	1,488	762	716	57
W60Z	598	162	158	50	73	7	1,420	303	1,547	309	1,053	282	331	142	4	2	488	493	189	302	143
W61A	857	187	1,076	260	351	46	2,437	540	106	28	1,244	307	644	835	6	1	45	1,385	758	532	104
W61B	515	116	410	111	148	17	1,123	248	105	27	1,182	311	437	461	19	3	68	688	416	316	117
X02A	54	10	151	54	122	15	29	6	4,692	994	342	88	186	260	5	1	154	769	294	267	58
X02B	12	3	37	17	29	6	2	1	1,706	375	286	78	57	107	7	1	44	285	114	116	105
X04A	293	63	461	144	416	37	351	76	2,745	611	571	158	540	677	46	5	345	1,011	495	475	118
X04B	47	10	94	33	51	7	6	1	1,605	351	479	141	91	152	5	1	86	296	145	147	147
X05A	46	12	157	54	125	13	62	11	2,121	494	466	137	203	313	17	2	64	510	271	234	100
X05B	13	3	31	14	25	4	1	0	1,424	319	289	85	45	84	2	0	37	215	101	113	138
X06A	328	65	293	98	467	40	795	191	2,274	500	524	141	408	540	40	7	193	964	427	365	178
X06B	52	11	56	23	60	7	35	9	1,553	346	370	105	104	154	8	1	99	309	145	143	198
X07A	223	45	555	204	511	57	288	72	4,140	882	425	114	750	928	15	3	250	1,546	746	573	99
X07B	61	12	239	92	149	19	25	6	2,204	479	355	99	302	453	35	4	64	673	346	294	108
X40Z	375	76	542	113	209	22	9,211	2,021	292	49	852	211	203	344	13	3	16	1,575	440	555	96
X60A	204	41	327	87	143	18	66	16	61	14	753	199	202	350	3	0	4	434	247	174	252
X60B	89	20	59	18	25	4	8	2	145	33	497	140	56	83	7	1	4	120	58	64	302
X61Z	16	3	21	8	44	4	164	37	9	2	441	128	43	56	1	0	1	99	40	39	256
X62A	114	22	247	66	142	17	1,373	297	63	11	792	201	210	308	8	2	7	582	222	202	212
X62B	19	4	72	20	33	4	192	44	18	4	539	155	84	125	12	2	1	183	73	80	280
X63A	212	40	205	64	333	25	297	67	226	51	530	137	298	384	64	13	46	541	263	186	199
X63B	66	13	53	20	68	6	23	6	153	35	382	108	97	147	49	10	18	185	90	76	258
X64A	184	35	430	116	133	17	565	135	45	9	817	216	202	367	43	8	5	506	288	208	174

DRG	DRG Description	Cost Weight	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
									Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
						Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
X64B	OTH INJ, POIS &TOX EFF DX-CSCC	0.44	4,597	6,576	1	2,149	1,604	546	220	42	383	50	148	29	2
Y01Z	VENT BURN&SEV FULL THICK BURN	35.07	116	4,015	35	172,335	138,753	33,582	5,903	1,051	15,385	866	3,411	5,326	824
Y02A	OTHER BURNS + SKIN GRAFT +CC	6.39	765	10,596	14	31,404	24,308	7,096	2,252	428	7,391	394	1,702	621	50
Y02B	OTHER BURNS + SKIN GRAFT -CC	1.88	1,693	6,543	4	9,230	6,961	2,269	641	115	1,939	136	460	106	7
Y03Z	OTHER OR PROCS FOR OTHER BURNS	1.72	993	3,966	4	8,451	6,320	2,131	620	81	1,817	134	518	95	11
Y60Z	BURNS,TRANS OTH ACUT CARE <5 D	0.55	437	550	1	2,715	2,129	586	209	36	289	52	138	33	3
Y61Z	SEVERE BURNS	1.10	413	1,266	3	5,401	3,755	1,646	651	139	1,276	182	409	79	9
Y62A	OTHER BURNS +CC	1.48	594	2,673	5	7,278	5,415	1,863	828	155	1,830	154	562	151	12
Y62B	OTHER BURNS -CC	0.57	2,271	4,155	2	2,808	2,118	690	310	57	636	58	197	33	2
Z01A	OR PR+DX OTH CNT HLTH SRV+CSCC	1.58	974	4,116	4	7,781	5,939	1,842	767	84	1,210	151	454	204	26
Z01B	OR PR+DX OTH CNT HLTH SRV-CSCC	0.64	3,445	4,106	1	3,142	2,428	714	277	26	214	36	128	88	7
Z40Z	ENDO+DX OTH CNT HLTH SRV SD	0.25	35,381	35,381	1	1,215	918	297	125	9	49	9	51	27	2
Z60A	REHABILITATION + CCC	1.66	364	3,276	9	8,150	6,026	2,125	997	66	2,259	330	958	173	19
Z60B	REHABILITATION - CCC	1.56	444	3,678	8	7,655	5,552	2,103	804	113	2,391	436	850	81	8
Z60C	REHABILITATION, SAMEDAY	0.50	32	32	1	2,463	1,974	489	58	1	137	6	52	13	4
Z61A	SIGNS AND SYMPTOMS	1.10	7,184	28,867	4	5,392	3,991	1,402	690	73	1,188	169	454	167	19
Z61B	SIGNS AND SYMPTOMS, SAMEDAY	0.24	6,451	6,451	1	1,183	920	262	121	18	94	15	82	126	7
Z63A	OTH SURG FU & MED CARE + CCC	2.43	1,557	15,539	10	11,946	8,409	3,537	1,709	254	3,129	760	1,151	251	23
Z63B	OTH SURG FU & MED CARE - CCC	1.02	5,813	26,083	4	4,990	3,491	1,499	724	111	1,100	294	531	85	8
Z64A	OTH FACTOR INFL HEALTH STATUS	0.99	8,120	29,996	4	4,864	3,598	1,266	671	91	1,227	216	432	95	10
Z64B	OTH FCTR INFL HEALTH STATUS,SD	0.23	39,009	39,009	1	1,147	908	239	130	24	95	10	65	32	4
Z65Z	CNGNTL & PRB ARISING FRM NNT	0.82	249	586	2	4,007	3,046	961	632	93	792	75	273	99	11
801A	OR PR UNREL TO PDX+CCC	7.15	1,787	32,897	18	35,124	27,451	7,673	3,586	425	6,844	625	1,869	1,133	121
801B	OR PR UNREL TO PDX+SMCC	3.01	881	6,158	7	14,799	11,422	3,376	1,720	193	2,524	261	793	352	36
801C	OR PR UNREL TO PDX-CC	1.34	1,791	4,280	2	6,575	5,098	1,477	627	71	701	106	284	137	14
960Z	UNGROUPABLE	1.23	660	1,994	3	6,037	4,264	1,774	504	21	461	58	273	161	13
961Z	UNACCEPTABLE PRINCIPAL DX	0.62	1	4	4	3,036	1,998	1,038	441	5	145	11	505	75	1
963Z	NEONATAL DX NOT CONSNT AGE/WGT	0.31	1	1	1	1,543	1,075	468	222	1	372	13	251	-	-
Total		1.00	4,753,338	13,239,818	3	4,914	3,778	1,136	510	80	873	97	289	118	12

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprc	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
X64B	61	14	54	17	22	3	53	12	12	3	410	120	60	88	87	15	1	121	53	70	265
Y01Z	1,431	265	10,766	2,317	4,049	515	50,762	10,499	20,770	3,711	750	183	8,483	2,458	42	7	1,472	11,943	4,181	4,966	17
Y02A	171	39	1,636	450	591	76	927	179	4,356	889	402	108	2,806	1,343	34	6	183	1,975	1,422	972	49
Y02B	9	2	377	115	117	14	39	11	1,752	417	144	46	906	419	2	0	92	609	411	344	56
Y03Z	27	8	321	88	120	10	89	24	1,690	416	227	73	512	498	0	0	78	462	262	270	99
Y60Z	28	6	40	13	23	3	160	33	168	42	379	124	585	116	1	0	4	103	43	82	158
Y61Z	33	9	217	71	82	14	131	27	158	31	357	108	267	292	1	0	13	330	187	324	120
Y62A	50	12	293	93	160	21	339	55	102	18	472	138	432	399	13	3	7	446	284	247	145
Y62B	8	2	98	35	38	4	64	11	127	27	370	105	155	125	0	0	11	156	94	85	204
Z01A	176	32	223	71	221	26	221	59	1,633	377	35	10	193	291	59	6	278	534	214	227	152
Z01B	58	12	26	12	40	4	8	1	1,256	294	7	2	43	85	26	5	120	189	78	98	179
Z40Z	7	1	9	4	20	1	0	0	472	123	1	0	22	29	67	21	11	74	36	44	203
Z60A	124	45	711	185	376	29	27	8	30	11	20	6	306	339	5	12	1	710	299	104	41
Z60B	41	18	595	164	250	32	58	8	20	8	16	5	320	348	-	-	3	617	311	159	54
Z60C	11	6	1,172	254	448	22	-	-	-	-	1	0	14	19	-	-	0	127	15	102	10
Z61A	158	28	228	62	140	14	67	14	33	7	574	147	167	282	7	2	5	379	182	137	259
Z61B	61	9	24	8	28	2	1	0	183	50	113	31	29	35	14	3	10	71	23	26	204
Z63A	169	35	375	130	411	54	344	90	79	22	109	31	528	742	3	0	38	755	456	297	198
Z63B	67	14	136	50	136	19	89	25	50	13	52	16	337	314	43	10	98	338	170	159	284
Z64A	81	16	152	42	126	12	33	11	219	49	197	58	177	255	31	6	22	362	143	131	283
Z64B	71	12	17	5	103	6	3	1	208	48	13	4	45	32	44	11	25	81	22	36	266
Z65Z	224	52	165	39	117	10	98	39	175	39	193	51	114	174	56	9	2	259	97	119	69
801A	1,176	226	1,225	339	1,338	107	3,282	735	2,509	511	745	182	1,156	1,302	235	48	971	2,409	1,105	917	135
801B	452	90	362	122	308	30	725	170	2,048	422	508	135	442	577	122	18	566	950	464	407	135
801C	151	30	94	33	99	13	79	21	1,968	440	175	49	136	198	46	7	325	402	175	195	173
960Z	69	8	1,427	433	176	38	379	100	219	43	193	64	157	251	7	2	46	362	222	347	48
961Z	1	0	88	69	5	2	-	-	-	-	798	174	30	219	-	-	-	263	20	186	1
963Z	-	-	-	-	200	8	-	-	-	-	2	1	94	86	-	-	-	133	87	72	1
Total	100	19	119	37	168	14	296	69	549	123	258	69	153	187	38	8	146	314	139	130	

Appendix C
Cost Weights (Estimated) for AR-DRG version 6.0x, Round 17 (2012-13)

Notes:

Please note the Round 17 (2012-13) National Hospital Cost Data Collection (NHCDC) cost weights are not the Activity Based Funding (ABF) Cost Weights that will be used to fund public hospitals. The ABF Cost Weights are developed by the Independent Hospital Pricing Authority (IHPA) and further information about the ABF Cost Weights can be obtained from the IHPA website http://www.ihpa.gov.au/internet/ihpa/publishing.nsf.

Introductory Notes to Cost Weights:

These notes provide assistance in interpreting the cost weight tables that follow. For further information, see Glossary of the National Hospital Cost Data Collection Cost Report Round 17 (2012-13) for detailed definitions of NHCDC terms or the National Hospital Cost Data Collection Hospital Reference Manual for a detailed explanation of each of the 'cost buckets' described below.

Additional notes:

- The sample separations submitted to the NHCDC have been population adjusted in all tables and cost weights except where noted.
- Care should be taken when comparing average costs between the public and private sectors as cost components differ between sectors.
- Slight differences may occur between figures in the tables displayed in the Round 16 Cost Report and figures displayed in the attached Cost Weight reports due to rounding.

Cost Weight Table Columns

The following is a brief explanation of each of the 25 columns including 'cost bucket' columns displayed in the Cost Weight Report.

1. **AR-DRG:** AR-DRGs or Australian Refined Diagnosis Related Groups is a patient classification scheme that provides a clinically meaningful way of relating the number and types of patients treated in a hospital to the resources required by the hospital.
2. **AR-DRG Description:** Descriptive text for the AR-DRG code.
3. **Cost Weight**: A measure of the average cost of an DRG, compared with the average cost of all DRGs. The average cost of all DRGs is given a cost weight of 1.0.
4. **Relative Standard Error (only applies where the cost weights are displayed have been population adjusted)**: Relative standard errors indicate the reliability of cost weights in terms of variation in costs and variation from the sample design.
5. **Number of Seps**: This column displays the number of separations. A separation is termed to be one complete episode of care for a given patient.
6. **Number of Days**: Number of Days is the sum of lengths of stay of the separations for a given DRG.
7. **ALOS**: The ALOS is calculated by dividing the number of days by the number of separations for each DRG. There may be minor variations at decimal place level for some DRGs with low volumes.
8. **Average Cost per DRG ($)**: The following gives a break down of the average cost for each DRG.
    a. **Total**: The Total column displays the total average cost for each DRG.
    b. **Direct**: The Direct column displays the total direct average cost for each DRG.
    c. **Ohead**: The Ohead column displays the total overhead average cost for each DRG.
9. **No. of Hosps**: This column displays the number of sample hospitals which reported data for a particular AR-DRG. Average Component Cost per DRG ($): The following are the average component (or bucket) costs for each DRG.

10. **Ward Medical**: Also known as Medical Clinical Services, this bucket includes the salaries and wages of all medical officers including sessional payments.
11. **Ward Nursing**: Also known as Nursing Clinical Services, this bucket includes all costs associated with nursing care in general ward areas.
12. **Non Clinical Salaries**: This bucket was renamed 'Non-clinical Salaries' from 'Other' in Round 4. This bucket contains all other costs of service provision for each inpatient separation during the Round. These costs are primarily other salaries and wages such as patient care assistants.
13. **Pathology**: This column reports costs recorded from diagnostic clinical laboratory tests for the diagnosis and treatment of patients.
14. **Imaging**: This bucket contains costs for diagnostic and therapeutic images produced under the direction of a qualified radiographer or suitably qualified technician and reported by a medical practitioner (radiologist).
15. **Allied**: 'Allied' is an abbreviation for the Allied Health cost bucket. The Allied Health cost bucket reports costs delivered to clinical services by qualified health professionals (exclusive of medical and nurse trained personnel) who have direct patient contact and provide services in Audiology, Dietetics/Nutrition, Occupational Therapy, Optometry, Orthotics, Physiotherapy, Podiatry, Social Work, Psychology, Speech Pathology and other Allied Health.
16. **Pharmacy**: This column reports costs associated with the provision of pharmaceuticals including purchasing, production, distribution, supply and storage of drug products and clinical pharmacy services.
17. **Critical Care**: The Critical Care cost bucket is the combination of intensive care and coronary care costs.
18. **Oper Rooms**: 'Oper Rooms' is an abbreviation for the Operating Rooms cost bucket and reports costs for a health care facility under sterile conditions, where significant surgical procedures are carried out under the direction of suitably qualified medical practitioners.
19. **Emerg Depts**: This column displays costs reported for health care facilities designed and equipped specifically to provide an environment where patients presenting in an unscheduled manner can be triaged, assessed and treated.
20. **Supplies**: 'Supplies' is an abbreviation for the Supplies and Ward Overheads cost bucket. It includes costs for goods and services, medical and surgical supplies, ward overheads and clinical department overheads.
21. **Spec Proc Suites (or SPS)**: 'Spec Proc Suites' is an abbreviation for the Specialist Procedure Suites cost bucket. This includes costs equipped specifically to provide an environment where diagnostic and therapeutic procedures can be performed under the direction of suitably qualified medical practitioners. Does not include Operating Room costs.
22. **Prosthesis**: This column displays costs of prostheses and includes prostheses appearing on hospital accounts as well as a best estimate of the prostheses whose costs were missed because of acquisition by the patient or doctor.
23. **On-Costs**: The On-Costs cost bucket includes indirect salary costs like superannuation, termination payments, lump sum payments, fringe benefits tax, long service leave, worker's compensation and recruitment costs.
24. **Hotel**: The Hotel cost bucket reports costs of hotel services and is a grouping of the following overhead costs: cleaning, linen and laundry, food services, general hotel, porters and orderlies.
25. **Deprec**: The 'Deprec' bucket reports depreciation costs. Note that depreciation is not reported consistently between jurisdictions.

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
A01Z	LIVER TRANSPLANT	26.93	0.05	279	8,037	29	136,036	112,912	23,124	17,714	2,311	16,878	937	6,201	7,442	910
A03Z	LUNG OR HEART/LUNG TRANSPLANT	27.16	0.07	178	5,528	31	137,207	120,387	16,820	8,466	768	10,180	510	3,207	5,911	660
A05Z	HEART TRANSPLANT	40.57	0.11	83	3,506	42	204,969	178,519	26,450	14,452	1,045	13,997	362	4,949	7,231	1,246
A06A	TRACHEOSTOMY W VENT>95 +CCC	44.07	0.02	2,193	105,693	48	222,617	178,543	44,074	8,641	769	11,511	1,182	3,526	5,971	764
A06B	TRCH&VNT-CCC OR TRCH/VNT+CCC	18.69	0.01	7,483	183,258	24	94,418	75,695	18,724	4,954	434	5,552	548	2,023	3,547	442
A06C	VENTILATION>95 - CCC	10.45	0.04	231	2,947	13	52,795	42,222	10,573	2,947	170	2,385	252	1,075	1,992	248
A06D	TRACHEOSTOMY -CCC	7.21	0.04	260	3,626	14	36,445	28,481	7,963	3,477	302	3,411	402	1,600	887	82
A07Z	ALLOG BONE MARROW TRANSPLANT	18.03	0.05	636	20,387	32	91,083	76,811	14,272	5,702	2,003	19,603	687	4,018	4,519	937
A08A	AUTO BONE MARROW TRANSPLNT+CCC	7.96	0.04	749	16,417	22	40,209	31,852	8,357	3,234	756	10,025	661	2,618	2,212	293
A08B	AUTO BONE MARROW TRANSPLNT-CCC	2.43	0.05	338	2,388	7	12,269	9,379	2,890	830	162	3,526	325	809	572	97
A09A	RENAL TRANSPLANT+PANCREAS/+CCC	9.20	0.03	503	5,759	11	46,469	39,218	7,251	3,760	599	6,116	281	1,597	1,991	348
A09B	RENAL TRANSPLANT -PANCREAS-CCC	7.27	0.02	454	3,382	7	36,729	30,639	6,090	4,091	990	4,878	251	1,168	1,514	204
A10Z	INSERTION OF VAD	74.21	0.08	50	2,693	54	374,908	336,622	38,286	18,175	1,674	15,851	480	5,372	9,454	1,385
A11A	INS IMPLNT SP INFUS DEV+CCC	13.54	0.34	11	163	14	68,419	55,668	12,751	7,029	1,583	7,489	1,005	1,827	1,295	38
A11B	INS IMPLNT SP INFUS DEV-CCC	3.85	0.13	34	147	4	19,463	16,241	3,223	1,530	103	2,418	227	803	55	9
A12Z	INS NEUROSTIMULATOR DEV	4.87	0.05	285	778	3	24,616	21,788	2,828	623	51	946	107	373	70	15
A40Z	ECMO	34.37	0.07	224	6,642	30	173,631	140,717	32,914	7,699	221	4,725	266	2,813	8,489	1,678
B01A	VENTRICULAR SHUNT REV+CSCC	3.59	0.06	250	1,900	8	18,115	14,357	3,758	1,723	122	3,170	285	929	280	38
B01B	VENTRICULAR SHUNT REV-CSCC	2.46	0.04	180	839	5	12,436	9,791	2,645	1,074	82	1,800	154	574	150	19
B02A	CRANIAL PROCEDURES + CCC	8.83	0.03	3,216	52,025	16	44,613	35,726	8,888	3,131	307	6,149	527	1,742	1,179	165
B02B	CRANIAL PROCEDURES + SCC	5.41	0.01	2,033	19,163	9	27,353	21,698	5,655	2,110	190	3,548	340	1,037	643	79
B02C	CRANIAL PROCEDURES - CSCC	4.02	0.01	3,902	24,065	6	20,290	16,145	4,145	1,555	123	2,287	220	706	440	54
B03A	SPINAL PROCEDURES + CSCC	5.81	0.03	376	4,561	12	29,327	23,383	5,943	2,326	243	4,487	311	1,339	652	wq
B03B	SPINAL PROCEDURES - CSCC	3.15	0.02	918	3,821	4	15,910	12,897	3,014	890	103	1,700	138	519	197	25
B04A	EXTRACRANIAL VASCULAR PR +CCC	5.07	0.03	459	4,827	11	25,630	20,376	5,254	2,047	176	3,588	287	1,152	610	66
B04B	EXTRACRANIAL VASCULAR PR -CCC	2.68	0.01	1,468	5,634	4	13,526	10,816	2,709	942	89	1,209	104	436	235	27
B05Z	CARPAL TUNNEL RELEASE	0.45	0.01	10,266	10,758	1	2,275	1,727	547	215	19	96	18	83	7	1
B06A	CBL PSY,MUS DYSY,NPTHY PR +CC	4.09	0.05	490	5,270	11	20,658	16,061	4,597	2,169	195	3,905	316	1,192	531	66
B06B	CBL PSY,MUS DYSY,NPTHY PR -CC	1.04	0.02	2,010	3,024	2	5,249	4,103	1,145	406	36	441	50	187	80	10
B07A	PRPHL & CRANL NERV & OTH PR+CC	3.54	0.05	768	7,033	9	17,865	13,780	4,086	1,654	198	3,220	305	1,016	310	39
B07B	PRPHL & CRANL NERV & OTH PR-CC	1.14	0.02	3,702	6,174	2	5,778	4,447	1,331	404	45	465	55	202	37	4
B40Z	PLASMAPHERESIS + NEURO DIS SD	0.21	0.03	1,134	1,134	1	1,057	809	248	125	28	169	13	107	41	7
B41Z	TELEMETRIC EEG MONITORING	1.66	0.03	1,153	5,110	4	8,376	6,683	1,693	1,432	179	2,062	124	912	93	14
B42A	NERV SYS DX W VENT SUPPORT+CCC	7.54	0.03	528	6,960	13	38,109	30,557	7,552	2,474	249	4,327	360	1,163	1,225	148
B42B	NERV SYS DX W VENT SUPPORT-CCC	4.06	0.03	594	3,215	5	20,513	16,249	4,264	1,126	106	1,178	150	454	701	68
B60A	ACUTE PARA/QUAD+/-OR PR +CCC	8.77	0.10	97	2,022	21	44,290	35,004	9,286	3,188	1,076	11,997	976	2,790	890	100
B60B	ACUTE PARA/QUAD+/-OR PR -CCC	3.32	0.16	125	907	7	16,770	13,369	3,400	1,114	484	3,483	284	921	332	16
B61A	SPINAL CORD COND+/-OR PR +CSCC	6.79	0.05	612	9,453	15	34,284	26,272	8,012	2,841	412	7,280	618	1,982	654	86
B61B	SPINAL CORD COND+/-OR PR -CSCC	2.23	0.05	799	3,598	5	11,242	8,772	2,469	907	98	2,246	194	625	167	20
B62Z	APHERESIS	0.26	0.08	332	338	1	1,315	1,003	311	94	13	163	14	114	318	57

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
A01Z	2,737	488	3,222	975	10,231	708	17,743	3,564	14,912	2,371	508	94	5,435	3,304	34	7	4,403	7,865	1,842	3,199	9
A03Z	1,995	404	4,268	751	18,153	451	37,860	3,678	16,920	2,029	327	63	4,149	1,444	69	10	1,316	7,586	3,963	2,067	4
A05Z	2,305	449	5,065	936	16,929	874	57,393	8,234	31,150	3,142	351	74	8,109	2,164	594	128	5,137	11,853	3,585	3,214	5
A06A	4,106	802	6,248	1,306	4,226	297	105,768	22,186	8,326	1,634	904	221	1,941	2,421	341	60	2,278	16,278	4,791	6,119	89
A06B	2,218	418	2,503	593	2,367	170	36,940	7,929	5,579	1,106	801	198	1,226	1,357	276	46	1,784	6,702	2,055	2,647	108
A06C	1,044	214	1,193	268	942	61	23,546	4,942	1,803	325	747	185	590	733	134	18	440	3,707	1,174	1,660	65
A06D	305	56	1,668	359	497	41	2,818	634	9,953	2,148	191	45	1,088	1,076	17	4	929	2,367	1,030	1,059	52
A07Z	1,341	234	2,844	558	26,167	1,281	5,760	937	632	121	71	17	3,208	2,160	21	5	94	4,651	1,788	1,725	19
A08A	800	122	1,217	337	6,751	352	2,058	352	243	48	27	7	1,363	1,586	161	16	59	2,727	1,187	999	37
A08B	165	27	274	108	2,383	189	20	6	74	13	15	4	484	626	15	4	9	722	414	398	34
A09A	1,162	206	759	237	12,359	595	1,145	231	6,558	1,171	63	12	1,206	972	34	5	423	2,768	924	945	20
A09B	807	167	685	162	8,432	498	301	75	5,858	1,232	112	18	813	724	1	0	438	1,817	706	786	20
A10Z	3,126	608	7,084	2,308	16,469	1,136	125,100	14,459	16,444	2,680	220	52	9,833	2,692	502	71	93,922	15,323	5,783	4,705	7
A11A	1,115	191	2,936	557	1,071	121	11,843	2,018	4,913	1,253	37	13	5,351	2,123	50	6	6,698	4,786	1,616	1,457	7
A11B	149	21	496	240	542	57	-	-	2,392	579	10	2	360	703	33	4	6,964	960	320	484	17
A12Z	222	33	254	364	126	26	134	38	3,903	927	19	3	221	321	33	24	14,364	705	313	400	32
A40Z	2,909	611	3,947	671	3,951	329	74,275	15,159	13,623	2,590	604	132	2,992	1,832	561	103	3,512	12,622	3,153	4,163	29
B01A	546	109	365	130	284	28	603	142	3,206	681	551	134	719	724	4	2	1,167	1,209	501	459	30
B01B	335	69	257	95	114	12	51	17	3,161	640	432	125	343	447	1	1	991	772	345	375	28
B02A	2,108	395	1,521	409	2,036	135	5,621	1,167	6,034	1,366	642	155	1,173	1,335	120	25	1,962	2,893	1,164	1,151	41
B02B	1,358	274	703	226	373	33	2,482	584	5,244	1,143	437	110	693	816	114	22	1,624	1,645	707	815	43
B02C	1,028	212	409	154	204	21	1,267	298	4,810	1,020	276	71	479	571	103	18	1,614	1,174	541	634	55
B03A	870	125	803	310	544	68	996	233	6,076	1,303	396	94	864	1,000	35	11	2,778	1,804	792	785	39
B03B	282	46	301	190	146	17	341	74	4,755	1,018	127	32	273	368	14	4	2,686	842	365	455	51
B04A	978	175	889	242	312	37	2,553	592	4,547	907	691	142	572	702	250	33	924	1,796	721	642	43
B04B	515	93	195	82	92	11	1,001	227	4,207	827	169	43	245	292	87	13	832	835	325	392	62
B05Z	4	1	15	7	11	2	2	1	1,126	270	4	1	22	53	4	1	30	141	63	79	199
B06A	629	126	1,026	281	422	59	823	215	2,546	504	501	118	596	799	126	20	881	1,383	684	545	98
B06B	34	7	130	40	41	6	55	9	2,199	473	15	4	63	122	16	1	181	333	140	169	156
B07A	457	91	646	188	307	34	671	151	2,980	656	834	220	425	645	62	33	466	1,223	577	458	108
B07B	35	8	68	28	35	5	76	13	2,368	534	282	82	74	133	8	1	110	362	163	181	151
B40Z	5	1	12	11	232	47	-	-	2	2	0	0	109	40	1	0	0	69	16	21	20
B41Z	341	55	686	49	136	22	90	21	47	9	76	19	416	384	0	0	3	681	232	291	27
B42A	1,014	189	1,255	288	512	46	14,058	2,818	417	97	1,105	284	512	747	38	6	38	2,961	858	920	85
B42B	583	122	526	121	217	21	8,561	1,878	400	88	974	250	230	291	12	2	35	1,376	464	580	93
B60A	1,657	298	2,521	701	1,294	86	2,671	531	2,166	435	612	153	1,356	1,613	99	21	1,396	3,297	1,196	1,170	24
B60B	469	91	1,067	256	186	21	1,742	398	1,415	306	302	76	447	483	73	14	846	1,021	477	446	37
B61A	888	162	1,948	607	441	52	2,231	549	2,718	638	640	159	1,079	1,500	25	6	2,179	2,322	1,180	1,088	89
B61B	459	90	549	171	127	22	355	82	1,125	254	555	148	458	456	27	5	802	636	330	333	148
B62Z	9	1	16	12	133	11	33	0	11	2	0	0	94	65	4	0	0	83	35	34	17

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
B63Z	DMNTIA&CHRNIC DISTURB CRBRL FN	2.71	0.02	8,259	101,106	12	13,669	9,733	3,936	1,597	252	4,264	481	1,232	215	52
B64A	DELIRIUM+CCC	2.55	0.02	3,180	35,482	11	12,901	9,639	3,262	1,583	174	3,556	346	1,114	347	35
B64B	DELIRIUM-CCC	1.35	0.01	7,084	37,936	5	6,816	5,017	1,799	824	102	1,761	203	549	146	14
B65Z	CEREBRAL PALSY	0.52	0.04	2,060	2,699	1	2,647	2,166	480	278	46	390	26	182	19	3
B66A	NERVOUS SYSTEM NEOPLASM+CSCC	2.38	0.02	2,607	21,899	8	11,999	8,929	3,071	1,408	211	3,104	363	966	216	22
B66B	NERVOUS SYSTEM NEOPLASM-CSCC	0.98	0.02	3,004	9,359	3	4,952	3,710	1,242	550	87	1,056	117	364	91	11
B67A	DEGNRTV NERV SYS DIS+CSCC	2.77	0.02	2,708	29,487	11	14,001	10,467	3,535	1,759	216	3,904	427	1,093	291	35
B67B	DEGNRTV NERV SYS DIS+MCC	1.54	0.05	1,589	9,696	6	7,775	5,644	2,132	1,034	133	1,920	266	658	151	14
B67C	DEGNRTV NERV SYS DIS-CC	0.40	0.02	9,222	16,787	2	2,017	1,534	483	277	38	412	62	151	118	9
B68A	MLT SCLROSIS&CEREBEL ATAXIA+CC	2.18	0.04	788	6,082	8	11,012	8,467	2,545	1,389	184	2,925	335	882	288	29
B68B	MLT SCLROSIS&CEREBEL ATAXIA-CC	0.39	0.01	15,215	18,954	1	1,970	1,710	261	123	13	159	20	73	32	5
B69A	TIA & PRECEREBRAL OCCLUSN+CSCC	1.42	0.02	2,847	13,798	5	7,179	5,439	1,739	844	105	1,582	205	480	162	15
B69B	TIA & PRECEREBRAL OCCLUSN-CSCC	0.70	0.01	9,832	22,133	2	3,547	2,682	866	377	45	592	87	219	66	6
B70A	STROKE & OTH CEREB DIS +CCC	3.53	0.01	7,715	98,710	13	17,808	13,584	4,223	1,881	230	4,851	478	1,242	379	45
B70B	STROKE & OTH CEREB DIS +SCC	1.95	0.01	7,488	49,064	7	9,852	7,427	2,425	1,107	130	2,251	262	652	184	18
B70C	STROKE & OTH CEREB DIS -CSCC	1.35	0.01	8,412	36,998	4	6,807	5,134	1,672	802	83	1,354	167	449	122	12
B70D	STRKE&OTH CEREB DIS DIE/TRN<5D	0.72	0.02	4,466	8,169	2	3,617	2,789	828	295	40	503	59	200	66	6
B71A	CRANIAL & PERIPHL NERV DSRD+CC	1.61	0.02	3,077	17,673	6	8,140	6,154	1,986	1,000	120	1,919	227	610	274	33
B71B	CRANIAL & PERIPHL NERV DSRD-CC	0.29	0.02	17,210	23,994	1	1,479	1,121	359	210	26	259	33	114	68	9
B72A	NRVS SYS INF EX VRL MNGTS+CSCC	3.73	0.03	1,037	13,363	13	18,849	14,514	4,335	2,430	319	4,647	449	1,306	623	67
B72B	NRVS SYS INF EX VRL MNGTS-CSCC	1.46	0.02	2,287	10,703	5	7,381	5,650	1,731	1,021	136	1,831	183	510	239	21
B73Z	VIRAL MENINGITIS	0.95	0.01	3,109	9,214	3	4,803	3,625	1,177	667	86	1,116	106	340	145	13
B74A	NONTRAUMATIC STUPOR & COMA +CC	1.16	0.03	1,098	4,174	4	5,858	4,410	1,448	638	74	1,292	152	399	135	16
B74B	NONTRAUMATIC STUPOR & COMA -CC	0.47	0.04	773	1,167	2	2,388	1,829	559	232	30	365	49	139	45	4
B75Z	FEBRILE CONVULSIONS	0.49	0.02	2,036	2,687	1	2,474	1,865	608	384	51	512	44	158	42	4
B76A	SEIZURE + CSCC	1.82	0.02	5,152	28,956	6	9,169	7,004	2,165	1,086	122	2,083	224	618	212	21
B76B	SEIZURE - CSCC	0.63	0.01	24,411	45,345	2	3,200	2,409	791	414	54	594	69	217	61	6
B77Z	HEADACHE	0.46	0.01	24,601	39,617	2	2,309	1,756	554	258	33	378	48	152	44	4
B78A	INTRACRANIAL INJURY+CSCC	2.70	0.02	2,277	20,410	9	13,637	10,425	3,212	1,418	170	3,484	357	892	305	35
B78B	INTRACRANIAL INJURY-CSCC	1.12	0.01	4,444	14,513	3	5,638	4,271	1,367	602	70	1,176	134	346	84	9
B79A	SKULL FRACTURES+CSCC	1.94	0.07	220	1,303	6	9,825	7,375	2,450	1,079	113	1,926	262	610	163	18
B79B	SKULL FRACTURES-CSCC	0.74	0.03	1,587	3,127	2	3,756	2,851	905	422	49	675	68	221	31	3
B80Z	OTHER HEAD INJURY	0.40	0.01	16,450	22,000	1	2,030	1,525	506	218	28	280	38	122	19	2
B81A	OTHER DSRD OF NERVOUS SYS+CSCC	2.12	0.02	4,792	39,990	8	10,720	8,017	2,703	1,322	145	2,775	312	857	259	28
B81B	OTHER DSRD OF NERVOUS SYS-CSCC	0.81	0.01	12,178	31,694	3	4,105	3,105	999	518	65	725	92	270	87	12
B82A	CHR UNSP PARA/QUAD+/-OR PR+CCC	6.82	0.04	1,357	27,910	21	34,459	26,586	7,873	3,446	589	9,565	941	2,443	801	94
B82B	CHR UNSP PARA/QUAD+/-PR+SCC	2.68	0.04	1,305	10,853	8	13,551	10,189	3,362	1,510	236	3,266	382	979	244	24
B82C	CHR UNSP PARA/QUAD+/- PR -CSCC	1.53	0.04	2,250	10,253	5	7,716	5,771	1,946	874	126	1,691	200	572	110	11
C01Z	PROC FOR PENETRATNG EYE INJURY	1.84	0.04	690	2,057	3	9,293	7,086	2,207	1,163	142	1,043	180	421	53	4
C02Z	ENUCLEATIONS & ORBITAL PROCS	1.83	0.05	665	2,072	3	9,264	7,075	2,189	1,228	115	1,165	169	452	298	35
C03Z	RETINAL PROCEDURES	0.71	0.01	10,559	13,998	1	3,573	2,660	913	422	51	316	69	160	15	2

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
B63Z	165	32	621	177	231	32	82	21	17	5	598	159	445	870	4	1	4	1,052	645	416	261
B64A	292	46	683	175	342	37	141	29	25	7	901	214	428	693	3	1	4	927	510	287	176
B64B	155	28	302	86	123	16	68	17	14	3	762	191	204	363	1	0	3	441	273	167	262
B65Z	58	17	269	30	62	7	3	0	578	70	15	4	104	97	6	2	94	177	46	65	66
B66A	436	74	708	169	467	37	72	16	44	15	627	158	480	658	35	9	10	902	434	358	178
B66B	295	57	198	56	224	19	13	3	190	43	365	96	213	249	4	1	18	322	151	160	194
B67A	289	52	892	220	408	42	193	47	98	17	686	173	453	741	40	20	11	1,002	538	355	189
B67B	191	36	453	110	197	21	48	11	81	15	476	126	245	451	22	4	6	542	327	239	190
B67C	58	11	88	22	115	11	10	2	40	9	124	34	72	91	11	3	4	130	62	52	222
B68A	365	64	696	155	444	38	94	20	100	17	567	138	384	508	2	1	10	757	373	248	126
B68B	38	7	30	8	1,122	52	1	0	15	5	44	12	40	42	1	0	2	72	28	27	167
B69A	354	61	443	101	152	19	93	26	19	5	915	231	205	309	6	1	14	432	227	173	183
B69B	251	46	159	40	55	8	22	7	11	3	751	194	90	132	6	2	5	191	98	88	248
B70A	586	101	1,638	364	402	39	380	90	49	18	1,014	236	544	819	34	7	26	1,270	661	422	194
B70B	480	86	818	191	199	22	195	49	18	6	942	233	290	445	18	4	15	621	356	263	204
B70C	451	81	410	100	134	15	123	33	29	9	841	209	197	305	18	3	28	418	227	186	217
B70D	180	35	167	44	45	5	208	47	38	8	788	196	177	122	5	1	10	199	81	91	250
B71A	286	48	421	99	246	24	237	54	121	25	506	131	280	393	13	3	8	573	277	210	197
B71B	47	9	51	13	55	5	5	2	88	19	116	31	51	68	14	2	4	102	41	39	241
B72A	656	105	749	189	1,002	89	896	207	162	34	793	189	637	851	13	2	22	1,315	617	482	140
B72B	203	41	187	53	311	25	272	64	89	19	549	143	257	335	1	0	6	451	225	207	214
B73Z	102	17	51	24	106	13	41	10	20	5	847	223	127	223	5	2	2	277	130	105	175
B74A	149	29	238	60	148	18	320	72	13	2	745	200	169	258	7	1	7	396	184	135	159
B74B	74	17	58	15	24	3	139	29	13	3	577	156	58	71	25	9	10	136	58	49	155
B75Z	23	5	27	11	19	3	51	12	17	4	531	154	62	108	-	-	1	141	54	56	172
B76A	234	42	415	93	243	27	618	140	40	8	902	222	259	411	5	1	6	622	288	226	209
B76B	109	25	93	23	57	7	90	22	38	9	564	157	89	133	3	1	4	192	85	88	272
B77Z	123	23	47	14	40	4	8	2	44	9	542	146	58	87	2	0	4	128	58	53	286
B78A	510	98	836	196	271	31	765	171	52	24	1,028	255	413	599	9	2	12	890	481	334	148
B78B	289	59	247	67	72	9	234	54	26	9	880	232	157	229	1	0	8	316	176	153	193
B79A	473	106	622	126	176	19	480	105	100	47	1,245	305	220	411	-	-	11	609	333	266	83
B79B	173	37	123	32	39	7	88	24	74	18	789	222	124	143	-	-	5	199	91	98	174
B80Z	105	24	46	14	16	2	36	8	7	2	577	164	48	68	0	0	1	101	48	56	272
B81A	324	57	639	159	260	29	168	39	48	13	770	191	333	561	9	2	9	758	395	259	200
B81B	332	67	170	40	66	8	49	15	104	23	476	125	140	177	14	3	34	255	116	122	267
B82A	628	109	1,490	428	1,074	94	1,897	410	1,571	345	692	181	1,189	1,570	94	18	483	2,305	1,115	889	148
B82B	261	49	526	152	442	37	439	120	711	170	552	152	467	658	39	21	321	907	497	391	162
B82C	150	28	272	88	202	21	105	32	611	136	397	108	320	387	43	9	192	495	284	252	187
C01Z	84	17	113	50	191	28	66	19	2,702	678	358	106	267	278	4	1	253	559	234	278	73
C02Z	96	16	103	48	220	22	62	17	2,536	625	122	37	241	320	3	0	234	591	219	288	68
C03Z	8	1	22	10	97	11	4	1	1,255	338	26	8	120	112	0	0	90	227	82	128	75

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
C04Z	MAJOR CORN, SCLERAL&CONJNCT PR	1.46	0.03	982	2,277	2	7,392	5,519	1,873	725	76	844	164	341	62	5
C05Z	DACRYOCYSTORHINOSTOMY	0.91	0.02	927	1,052	1	4,607	3,468	1,139	516	41	276	63	153	15	2
C10Z	STRABISMUS PROCEDURES	0.77	0.02	1,942	1,986	1	3,885	2,940	945	447	26	154	34	115	6	1
C11Z	EYELID PROCEDURES	0.66	0.01	3,670	4,160	1	3,336	2,530	806	412	28	174	35	114	16	2
C12Z	OTHER CORN, SCLERAL&CONJNCT PR	0.72	0.02	3,151	4,308	1	3,613	2,696	918	489	35	286	58	152	43	6
C13Z	LACRIMAL PROCEDURES	0.45	0.04	638	734	1	2,260	1,697	563	317	17	123	26	92	27	3
C14Z	OTHER EYE PROCEDURES	0.57	0.05	2,072	3,259	2	2,873	2,166	706	511	38	305	72	149	61	7
C15A	GLAUCOMA/CX CATARACT PROCS	1.29	0.03	950	2,275	2	6,492	4,776	1,716	902	91	880	161	338	34	4
C15B	GLAUCOMA/CX CATARACT PROCS, SD	0.61	0.01	2,176	2,176	1	3,097	2,297	800	279	28	80	20	78	5	1
C16Z	LENS PROCEDURES	0.53	0.00	64,076	64,724	1	2,676	2,088	587	475	23	97	20	83	4	1
C60A	AC & MJR EYE INFECTN +CC	2.25	0.06	439	3,235	7	11,387	8,477	2,909	2,264	210	2,898	337	964	192	17
C60B	AC & MJR EYE INFECTN -CC	1.33	0.04	831	3,546	4	6,738	4,957	1,781	1,483	119	1,754	229	627	74	8
C61A	NEUROLOGICAL&VASCLR EYE DIS+CC	1.29	0.04	534	2,443	5	6,513	4,912	1,601	860	109	1,303	175	477	190	20
C61B	NEUROLOGICAL&VASCLR EYE DIS-CC	0.56	0.03	1,573	2,922	2	2,819	2,126	693	346	35	436	63	179	88	9
C62Z	HYPHEMA &MED MANAGD EYE TRAUMA	0.49	0.02	4,029	7,030	2	2,493	1,855	638	337	37	427	58	171	29	3
C63Z	OTHER DISORDERS OF THE EYE	0.54	0.02	4,877	9,306	2	2,752	2,044	708	475	46	465	62	209	53	6
D01Z	COCHLEAR IMPLANT	6.44	0.02	554	692	1	32,516	28,994	3,521	703	76	643	134	294	19	3
D02A	HEAD & NECK PR +CSCC	5.92	0.03	507	5,145	10	29,928	23,953	5,975	2,467	212	3,593	309	1,189	751	84
D02B	HEAD & NECK PR+MALIGNANCY/MCC	2.99	0.06	290	1,327	5	15,111	12,034	3,077	1,356	137	1,646	155	604	369	45
D02C	HEAD & NECK PR -MALIGNANCY -CC	1.80	0.04	526	1,098	2	9,096	7,203	1,893	749	60	851	93	357	114	13
D03Z	SURGCL RPR CLEFT LIP/PALATE DX	1.79	0.02	607	1,329	2	9,035	7,111	1,924	800	57	1,320	87	458	19	4
D04A	MAXILLO SURGERY + CC	2.42	0.02	1,172	3,677	3	12,234	9,823	2,411	1,075	87	1,048	115	435	80	9
D04B	MAXILLO SURGERY - CC	1.68	0.01	3,133	5,795	2	8,485	6,796	1,689	665	52	650	81	286	23	3
D05Z	PAROTID GLAND PROCEDURES	2.18	0.02	812	1,844	2	11,021	8,716	2,305	812	65	846	100	341	230	25
D06Z	SINUS &CMPLX MDDL EAR PR	1.32	0.01	4,263	5,288	1	6,686	5,175	1,511	870	57	430	74	227	70	9
D10Z	NASAL PROCEDURES	0.92	0.01	6,861	7,265	1	4,645	3,577	1,068	509	39	366	62	172	18	2
D11Z	TONSILLECTOMY, ADENOIDECTOMY	0.70	0.00	19,701	21,907	1	3,543	2,701	842	412	39	532	65	176	24	3
D12Z	OTH EAR,NOSE,MOUTH & THROAT PR	1.04	0.01	8,830	13,690	2	5,273	4,074	1,199	481	38	467	56	216	65	7
D13Z	MYRINGOTOMY +TUBE INSERTION	0.41	0.01	7,159	7,701	1	2,050	1,571	478	284	20	142	20	80	10	1
D14Z	MOUTH & SALIVARY GLAND PROCS	0.92	0.02	4,688	7,714	2	4,668	3,640	1,028	444	37	399	51	202	118	12
D15Z	MASTOID PROCEDURES	2.27	0.03	1,104	2,406	2	11,471	8,969	2,502	986	92	788	127	341	99	12
D40Z	DENTAL EXTRACT & RESTORATIONS	0.59	0.01	21,016	22,914	1	2,994	2,235	759	179	37	162	24	118	12	1
D60A	EAR NOSE MOUTH&THROAT MAL+CSCC	2.58	0.04	926	7,380	8	13,047	9,895	3,152	1,475	396	3,280	331	962	295	28
D60B	EAR NOSE MOUTH&THROAT MAL-CSCC	0.69	0.02	2,420	4,283	2	3,500	2,688	811	356	68	505	67	220	110	9
D61Z	DYSEQUILIBRIUM	0.55	0.01	18,639	37,659	2	2,792	2,084	707	316	33	508	75	197	46	4
D62Z	EPISTAXIS	0.48	0.02	5,391	9,358	2	2,432	1,821	612	360	32	446	54	179	56	5
D63Z	OTITIS MEDIA AND URI	0.58	0.01	34,778	63,589	2	2,938	2,194	744	422	61	630	73	212	71	6
D64Z	LARYNGOTRACHEITIS&EPIGLOTTITIS	0.42	0.02	5,113	6,524	1	2,146	1,627	519	304	39	354	32	125	18	2
D65Z	NASAL TRAUMA & DEFORMITY	0.42	0.02	4,141	5,718	1	2,146	1,635	511	226	20	235	30	126	19	2
D66A	OTH EAR,NOSE,MOUTH&THRT DX +CC	1.16	0.03	2,025	7,644	4	5,869	4,454	1,414	773	92	1,157	140	384	134	13
D66B	OTH EAR,NOSE,MOUTH&THRT DX -CC	0.39	0.01	12,990	17,413	1	1,983	1,502	482	265	28	239	32	137	32	3

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
C04Z	11	4	46	30	202	28	10	3	2,178	591	14	4	194	239	0	0	760	432	176	254	45
C05Z	7	1	13	12	63	9	10	3	1,994	515	27	7	110	119	-	-	84	303	110	154	69
C10Z	1	0	19	8	48	7	7	2	1,820	474	1	0	100	102	-	-	25	253	82	152	75
C11Z	13	3	22	9	34	4	3	1	1,417	363	59	17	89	86	2	0	32	200	88	115	165
C12Z	13	3	44	17	64	11	14	4	1,293	351	12	4	113	111	1	0	46	211	100	132	118
C13Z	5	1	13	6	16	2	6	1	873	232	20	7	87	74	-	-	29	149	53	80	86
C14Z	8	2	22	10	61	8	0	0	788	207	30	11	107	102	2	0	22	179	75	96	144
C15A	28	4	54	30	175	23	2	1	1,799	536	53	17	169	230	3	1	165	416	180	197	53
C15B	1	0	18	8	65	10	-	-	1,369	436	3	1	134	73	2	0	140	201	51	95	94
C16Z	2	1	20	12	32	5	0	0	960	270	1	0	64	63	3	1	271	133	58	77	133
C60A	164	26	273	93	536	51	66	24	15	3	525	139	507	603	1	0	4	745	420	308	116
C60B	47	11	98	37	291	35	8	3	49	12	273	84	276	388	1	0	3	398	216	215	143
C61A	425	75	219	52	198	19	69	22	75	19	721	186	186	304	15	5	7	404	207	172	111
C61B	236	46	66	18	50	6	5	2	119	28	372	100	79	115	50	11	6	187	78	87	130
C62Z	94	21	69	22	31	5	12	3	69	16	495	139	69	104	0	0	3	136	76	69	243
C63Z	74	17	52	19	107	11	18	5	204	49	225	66	95	137	2	1	10	179	78	89	233
D01Z	45	10	309	271	114	27	67	19	3,901	990	10	1	146	214	0	0	23,330	587	232	370	25
D02A	326	62	859	203	352	33	1,698	369	9,772	1,857	64	15	648	749	71	13	553	2,143	795	741	60
D02B	82	14	405	78	152	16	525	119	5,552	1,140	49	10	292	403	24	4	281	924	339	388	61
D02C	86	18	70	31	83	11	364	84	3,544	739	47	14	127	202	12	3	358	593	214	259	88
D03Z	5	1	111	40	53	12	284	66	3,435	680	1	0	145	266	-	-	53	636	220	283	27
D04A	244	50	198	71	116	14	379	77	3,903	855	412	114	179	286	20	3	1,142	718	287	317	59
D04B	105	23	86	38	64	8	88	22	3,219	711	196	57	107	176	13	3	858	527	202	223	86
D05Z	10	2	48	28	63	9	67	16	5,318	1,112	8	2	163	230	15	2	153	774	281	301	94
D06Z	22	4	37	17	88	10	42	10	2,892	650	18	4	81	173	11	3	97	436	150	203	124
D10Z	4	1	16	10	46	7	22	5	2,090	477	7	2	51	115	2	0	60	308	112	138	139
D11Z	7	2	22	10	40	7	26	6	1,176	274	36	11	59	121	18	2	47	225	97	108	167
D12Z	43	10	48	18	55	7	120	28	2,035	467	104	29	81	144	11	2	94	354	132	163	178
D13Z	5	1	11	6	21	3	3	0	828	197	10	3	24	55	0	0	66	127	56	77	141
D14Z	55	10	55	16	50	6	200	47	1,604	359	126	35	74	119	10	2	71	314	121	130	185
D15Z	50	11	66	25	178	27	72	18	5,410	1,232	34	9	157	243	8	1	159	766	249	312	93
D40Z	10	3	36	9	25	4	22	5	1,407	372	28	8	43	75	1	0	30	188	85	112	166
D60A	308	53	971	165	698	56	273	57	288	64	238	61	489	613	104	21	20	948	391	464	119
D60B	101	19	138	32	218	19	10	2	683	159	48	13	90	116	36	10	28	238	91	114	142
D61Z	116	21	102	27	42	6	19	6	6	1	595	164	71	113	6	1	6	162	83	65	276
D62Z	17	3	37	14	49	5	20	5	77	17	459	136	76	113	0	0	7	145	65	54	226
D63Z	36	8	44	17	71	7	46	11	29	7	486	140	89	135	3	1	2	174	79	76	297
D64Z	12	3	19	9	14	2	197	43	19	4	449	130	53	83	4	1	1	135	46	49	219
D65Z	65	14	47	14	17	3	16	3	453	98	317	85	37	69	2	0	9	129	53	57	208
D66A	161	31	145	47	214	19	338	68	343	73	410	114	180	257	18	5	17	391	180	166	183
D66B	44	10	26	9	27	3	20	5	365	83	160	46	47	73	55	14	20	127	49	64	250

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
D67A	ORAL&DNTAL DIS-EXTRCT&RESTN	0.86	0.01	6,386	16,145	3	4,364	3,271	1,093	594	80	885	101	319	74	7
D67B	ORAL&DNTAL DIS-EXTRCT&RESTN,SD	0.23	0.01	7,690	7,690	1	1,163	888	275	91	13	80	13	53	11	1
E01A	MAJOR CHEST PROCEDURE + CCC	5.70	0.02	2,440	32,463	13	28,783	22,890	5,893	2,704	239	4,517	353	1,449	1,052	126
E01B	MAJOR CHEST PROCEDURE - CCC	3.14	0.01	2,613	17,251	7	15,842	12,485	3,356	1,688	165	2,402	202	729	518	52
E02A	OTHER RESPIRATRY SYS OR PR+CCC	4.45	0.03	1,098	13,398	12	22,474	17,524	4,950	2,225	253	3,923	374	1,290	879	96
E02B	OTH RESPIRATRY SYS OR PR+SMCC	1.98	0.04	902	3,736	4	10,005	7,797	2,208	974	116	1,495	145	500	293	38
E02C	OTHER RESPIRATY SYS OR PR -CC	0.87	0.01	6,156	7,965	1	4,412	3,391	1,021	485	41	646	71	216	53	6
E40A	RESP DX W VENTILATOR SUPPT+CCC	6.79	0.02	1,057	11,632	11	34,298	26,990	7,308	2,012	161	2,171	225	893	1,374	163
E40B	RESP DX W VENTILATOR SUPPT-CCC	4.77	0.04	325	2,151	7	24,105	19,250	4,855	1,328	136	1,332	163	553	817	84
E41Z	RESP SYS DX +NON-INVAS VENTILN	4.48	0.01	6,228	62,932	10	22,609	17,605	5,004	2,067	218	3,769	333	1,000	653	69
E42A	BRONCHOSCOPY +CCC	4.62	0.02	1,163	17,017	15	23,327	18,253	5,074	2,764	367	5,007	485	1,519	1,147	124
E42B	BRONCHOSCOPY -CCC	2.12	0.02	2,806	18,412	7	10,728	8,296	2,432	1,356	153	2,019	211	704	613	52
E42C	BRONCHOSCOPY SAMEDAY	0.40	0.01	7,266	7,266	1	2,003	1,625	378	124	10	53	10	56	263	16
E60A	CYSTIC FIBROSIS +CSCC	4.32	0.02	1,997	24,336	12	21,834	17,569	4,265	2,919	566	4,622	307	1,347	398	45
E60B	CYSTIC FIBROSIS -CSCC	3.09	0.02	1,724	15,766	9	15,595	12,102	3,493	1,843	321	3,304	218	1,009	257	43
E61A	PULMONARY EMBOLISM + CCC	2.70	0.02	1,428	13,384	9	13,660	10,479	3,181	1,659	213	3,009	369	931	451	49
E61B	PULMONARY EMBOLISM - CCC	1.21	0.01	7,659	36,790	5	6,116	4,658	1,458	797	96	1,200	151	413	188	19
E62A	RESPIRATRY INFECTN/INFLAMM+CCC	2.23	0.01	20,667	169,405	8	11,277	8,551	2,726	1,317	163	2,861	336	795	366	41
E62B	RESPIRATRY INFECTN/INFLAM+SMCC	1.33	0.01	22,473	104,763	5	6,719	4,981	1,737	824	106	1,609	223	496	200	19
E62C	RESPIRATORY INFECTN/INFLAMM-CC	0.81	0.01	23,096	62,982	3	4,102	3,017	1,085	549	73	953	129	310	100	8
E63Z	SLEEP APNOEA	0.37	0.02	6,874	9,570	1	1,893	1,433	460	182	15	184	18	162	16	2
E64A	PULMONRY OEDEMA &RESP FAIL+CCC	2.14	0.03	1,120	7,516	7	10,831	8,173	2,657	1,180	137	2,095	214	667	357	42
E64B	PULMONRY OEDEMA &RESP FAIL-CCC	1.14	0.04	1,273	4,333	3	5,783	4,276	1,506	614	75	1,003	133	345	150	15
E65A	CHRNIC OBSTRCT AIRWAY DIS +CCC	2.02	0.01	11,916	90,235	8	10,206	7,712	2,495	1,287	161	2,445	312	756	309	35
E65B	CHRNIC OBSTRCT AIRWAY DIS -CCC	1.11	0.01	36,587	153,199	4	5,627	4,141	1,486	739	95	1,271	206	442	140	12
E66A	MAJOR CHEST TRAUMA +CCC	2.83	0.03	779	8,031	10	14,301	10,910	3,391	1,778	144	3,171	345	1,014	355	41
E66B	MJR CHEST TRMA +SMCC	1.37	0.02	1,980	8,848	4	6,922	5,201	1,721	840	84	1,322	172	456	120	11
E66C	MAJOR CHEST TRAUMA -CC	0.76	0.02	2,366	5,548	2	3,832	2,867	965	450	38	608	82	252	43	4
E67A	RESPIRATRY SIGNS & SYMPTM+CSCC	1.10	0.02	2,282	8,463	4	5,563	4,192	1,370	674	77	1,110	134	394	162	19
E67B	RESPIRTRY SIGNS & SYMPTM -CSCC	0.46	0.01	11,280	16,138	1	2,321	1,721	600	272	32	334	38	141	44	4
E68A	PNEUMOTHORAX +CC	1.76	0.03	1,974	10,429	5	8,899	6,802	2,097	1,053	135	1,774	244	570	162	12
E68B	PNEUMOTHORAX -CC	0.84	0.02	2,121	5,611	3	4,252	3,169	1,083	551	64	844	119	292	47	3
E69A	BRONCHITIS & ASTHMA +CC	1.06	0.01	6,386	21,378	3	5,335	4,025	1,310	673	84	1,072	140	369	134	13
E69B	BRNCHTS&ASTHMA -CC	0.52	0.01	29,444	46,599	2	2,625	1,940	684	368	46	545	61	183	30	3
E70A	WHOOPNG CGH &ACTE BRNCHIO+CC	1.54	0.02	2,592	9,709	4	7,761	5,803	1,958	1,148	147	2,220	147	571	89	12
E70B	WHOOPNG CGH &ACTE BRNCHIO-CC	0.83	0.04	14,610	29,235	2	4,175	3,142	1,033	642	103	1,178	92	278	37	4
E71A	RESPIRATORY NEOPLASMS +CCC	2.33	0.02	3,268	28,243	9	11,764	8,796	2,968	1,497	219	2,970	349	910	357	34
E71B	RESPIRATORY NEOPLASMS -CCC	1.09	0.02	6,207	24,099	4	5,514	4,107	1,407	687	104	1,223	176	428	175	15
E72Z	RESP PROBS FROM NEONATL PERIOD	1.01	0.12	305	996	3	5,125	3,861	1,263	882	120	1,204	85	344	65	4
E73A	PLEURAL EFFUSION + CCC	2.53	0.02	1,254	11,594	9	12,799	9,829	2,970	1,564	169	3,133	336	930	517	55
E73B	PLEURAL EFFUSN + SMCC	1.34	0.02	1,738	8,437	5	6,764	5,091	1,673	826	91	1,489	183	489	255	23

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
D67A	98	21	113	37	120	13	69	15	210	47	542	152	137	203	3	1	17	255	122	127	256
D67B	23	5	11	4	10	2	1	0	269	64	139	40	16	26	117	25	8	72	29	39	238
E01A	963	184	817	200	737	60	3,106	656	4,183	734	345	88	826	924	153	37	678	2,137	834	680	86
E01B	440	89	343	113	257	22	968	230	3,371	613	189	51	419	515	20	4	504	1,004	477	458	90
E02A	945	165	829	217	668	66	2,203	474	1,773	332	696	162	679	850	98	23	375	1,598	711	570	116
E02B	353	63	229	69	179	19	710	170	1,847	360	237	62	241	338	81	25	221	686	259	295	101
E02C	29	6	44	18	50	9	124	30	1,389	300	19	4	77	145	11	2	75	304	124	136	133
E40A	687	133	931	226	635	60	14,924	3,242	180	36	683	174	369	603	37	6	35	2,593	802	943	103
E40B	386	71	479	113	284	31	11,264	2,422	421	51	583	147	190	332	31	5	59	1,674	437	711	78
E41Z	326	59	737	179	575	49	5,836	1,315	72	11	841	214	508	700	135	29	9	1,655	662	588	148
E42A	833	138	929	225	1,782	98	1,014	237	681	128	744	176	888	1,037	126	23	32	1,539	735	550	97
E42B	369	60	316	87	516	34	147	39	809	158	441	110	398	482	198	54	44	718	346	293	110
E42C	45	9	15	5	30	3	0	0	745	154	4	1	31	27	113	32	24	131	43	59	105
E60A	330	66	1,747	374	3,106	154	61	13	201	38	208	48	1,031	771	642	214	22	1,537	639	429	61
E60B	184	55	1,237	225	2,139	144	7	1	289	60	117	31	624	738	575	200	17	1,091	455	411	81
E61A	604	101	453	118	575	56	894	209	46	9	960	228	419	578	26	6	14	931	439	312	150
E61B	317	53	116	37	240	24	194	51	11	2	827	207	203	261	10	2	8	374	169	147	227
E62A	252	45	524	130	389	40	485	111	31	7	863	217	355	518	14	3	8	765	386	256	247
E62B	138	27	227	67	211	24	156	38	19	4	749	199	217	332	5	1	4	415	230	180	284
E62C	75	15	82	30	84	11	48	12	6	2	618	176	129	203	2	1	2	240	130	116	291
E63Z	11	2	100	9	26	3	29	6	7	1	26	7	124	74	475	141	0	173	48	51	131
E64A	224	42	432	122	268	33	1,372	338	24	6	873	223	299	451	27	4	10	759	340	291	139
E64B	132	26	161	48	132	16	626	162	22	4	618	178	164	243	104	58	3	402	173	174	186
E65A	198	35	402	106	349	37	459	109	22	5	871	221	341	474	16	2	6	682	343	223	229
E65B	93	18	180	55	185	22	98	25	12	3	677	186	195	280	12	3	3	339	192	145	299
E66A	466	79	647	164	365	43	1,041	203	86	19	1,200	294	412	631	3	1	10	947	508	336	127
E66B	323	67	257	75	116	14	305	68	66	12	1,056	273	192	296	2	0	6	401	213	176	189
E66C	210	44	122	34	54	8	66	19	14	4	867	227	115	160	2	0	2	202	103	103	231
E67A	253	45	179	48	182	18	167	41	32	8	674	175	191	260	35	8	8	361	165	143	188
E67B	103	17	37	13	32	4	24	7	22	5	511	148	61	94	76	19	9	138	60	77	263
E68A	413	87	263	75	175	17	590	134	247	39	949	241	295	347	4	1	16	554	274	227	181
E68B	237	50	81	28	65	8	93	29	24	7	680	185	142	188	1	0	18	243	128	124	199
E69A	79	16	132	40	166	20	350	81	17	3	721	191	159	227	17	5	4	345	159	120	232
E69B	19	4	32	14	59	7	62	15	3	1	532	156	71	123	3	1	1	151	69	65	278
E70A	43	12	111	45	117	13	553	123	6	1	614	189	210	439	16	5	3	513	205	211	153
E70B	15	4	34	18	31	5	77	16	189	1	489	146	124	216	2	1	0	242	110	119	219
E71A	520	89	502	129	457	37	123	30	38	10	596	151	442	642	36	5	12	867	421	322	177
E71B	393	69	168	50	244	21	21	6	44	10	367	94	196	282	20	3	8	358	186	165	247
E72Z	35	9	157	38	310	9	308	49	7	1	136	41	192	306	94	30	0	379	160	156	75
E73A	594	94	435	118	517	42	446	102	42	11	806	196	435	596	17	3	24	875	430	312	142
E73B	355	60	198	57	216	20	142	39	50	12	629	158	243	327	26	8	19	438	229	184	182

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
E73C	PLEURAL EFFUSION - CC	0.68	0.03	1,523	3,833	3	3,443	2,595	848	437	50	602	82	227	163	13
E74A	INTERSTITAL LUNG DIS +CCC	2.43	0.04	655	6,112	9	12,276	9,192	3,085	1,639	175	2,878	337	909	380	49
E74B	INTERSTITIAL LUNG DIS +SMCC	1.45	0.04	730	3,850	5	7,337	5,446	1,891	963	116	1,702	221	537	241	24
E74C	INTERSTITIAL LUNG DIS -CC	0.81	0.03	940	2,767	3	4,105	3,045	1,060	514	59	755	117	280	131	12
E75A	OTHER RESP SYS DX +CCC	1.92	0.02	3,172	22,489	7	9,679	7,207	2,472	1,216	140	2,351	284	703	301	33
E75B	OT RESP SYS DX +SMCC	1.16	0.01	8,038	31,159	4	5,870	4,328	1,542	696	88	1,325	175	428	157	15
E75C	OTHER RESP SYS DX - CC	0.59	0.01	14,842	28,295	2	2,994	2,208	786	365	58	622	78	207	60	5
E76Z	RESPIRATORY TUBERCULOSIS	3.24	0.07	543	7,329	13	16,382	12,105	4,277	2,466	250	4,291	447	1,520	509	59
F01A	IMPLNTN/REPLCMNT AICD TTL+CCC	9.17	0.02	711	7,579	11	46,313	39,619	6,693	2,280	294	2,540	181	1,082	694	93
F01B	IMPLNTN/REPLCMNT AICD TTL-CCC	4.36	0.02	2,267	5,891	3	22,013	19,640	2,373	759	112	634	64	355	115	13
F02Z	OTHER AICD PROCEDURES	2.35	0.09	252	936	4	11,867	9,841	2,026	834	96	1,071	75	402	219	24
F03A	CRDC VALV PR+PMP+INV INVES+CCC	12.41	0.02	496	9,743	20	62,668	51,417	11,251	4,477	552	5,110	437	1,859	2,005	252
F03B	CRDC VALV PR+PMP+INV INVES-CCC	7.98	0.04	144	1,248	9	40,307	35,261	5,046	2,493	378	2,748	188	916	847	67
F04A	CRD VLV PR+PMP-INV INVES+CCC	9.67	0.01	2,666	32,986	12	48,841	40,518	8,322	3,093	363	3,751	296	1,424	1,560	217
F04B	CRD VLV PR+PMP-INV INVES-CCC	6.67	0.01	898	7,061	8	33,670	28,039	5,631	2,220	293	2,761	226	918	1,058	124
F05A	CRNRY BYPSS+INV INVES+REOP/CCC	10.20	0.01	1,191	20,619	17	51,534	41,005	10,529	3,977	423	4,780	396	1,713	1,797	223
F05B	CRNRY BYPSS+INV INVES-REOP-CCC	7.76	0.01	543	6,961	13	39,211	30,934	8,277	3,282	478	4,136	344	1,301	1,275	156
F06A	CRNRY BYPSS-INV INVS+REOP/CSCC	7.00	0.01	3,506	35,088	10	35,352	28,851	6,501	2,495	256	2,833	229	1,117	1,299	172
F06B	CRNRY BYPSS-INV INVS-REOP-CSCC	5.21	0.01	794	5,755	7	26,328	21,231	5,097	2,097	247	2,571	211	868	997	120
F07A	OTHER CARDTHOR/VASC PR+PMP+CCC	10.11	0.02	747	8,903	12	51,062	41,142	9,920	4,061	223	4,466	248	1,896	1,585	296
F07B	OTH CARDTHOR/VASC PR+PMP+SMCC	7.30	0.03	211	1,617	8	36,877	29,243	7,634	3,767	254	3,224	200	1,468	945	156
F07C	OTHER CARDTHOR/VASC PR+PMP-CC	5.62	0.03	180	1,044	6	28,394	23,007	5,388	2,656	179	2,128	129	1,121	804	138
F08A	MJR RECONSTRC VASC PR-PUMP+CCC	7.75	0.02	1,937	26,986	14	39,133	31,849	7,284	2,886	292	4,520	356	1,394	1,108	132
F08B	MJR RECONSTRC VASC PR-PUMP-CCC	4.39	0.01	2,344	12,998	6	22,154	18,338	3,816	1,430	142	1,976	177	621	346	34
F09A	OTH CARDIOTHOR PR-PMP+CCC	5.40	0.04	959	8,299	9	27,257	22,048	5,208	1,928	225	2,043	154	961	850	113
F09B	OTH CARDIOTHOR PR-PMP +SMCC	2.80	0.03	572	2,280	4	14,143	11,530	2,612	1,058	156	1,185	86	512	295	35
F09C	OTH CARDIOTHOR PR-PMP -CC	2.38	0.03	750	2,273	3	12,007	9,817	2,190	886	131	910	70	391	209	23
F10A	INTERVENTN CORONARY PR+AMI+CCC	3.63	0.02	1,943	14,036	7	18,313	14,655	3,658	1,396	181	1,443	139	652	498	57
F10B	INTERVENTN CORONARY PR+AMI-CCC	2.10	0.01	9,882	32,412	3	10,588	8,587	2,001	685	95	585	56	329	201	20
F11A	AMPUTN CIRC SYS-UP LMB&TOE+CCC	9.21	0.04	500	13,298	27	46,509	36,584	9,925	5,161	616	10,626	790	2,666	1,486	175
F11B	AMPUTN CIRC SYS-UP LMB&TOE-CCC	4.85	0.05	225	3,283	15	24,484	18,782	5,702	3,141	274	5,299	418	1,423	704	53
F12A	IMPLANT/REPLACE PM,TOT SYS+CCC	4.61	0.02	1,293	12,121	9	23,287	18,945	4,343	1,889	246	2,586	209	937	530	60
F12B	IMPLANT/REPLACE PM,TOT SYS-CCC	2.40	0.01	5,484	17,408	3	12,127	10,223	1,904	774	106	853	77	375	135	14
F13A	UP LIMB&TOE AMP CIRC DIS +CSCC	5.11	0.05	459	6,831	15	25,789	20,081	5,708	3,158	316	5,850	576	1,556	634	62
F13B	UP LIMB&TOE AMP CIRC DIS -CSCC	2.13	0.05	269	1,750	7	10,740	8,154	2,586	1,361	109	2,056	234	653	220	23
F14A	VASC PR-MJR RECONSTRC-PUMP+CCC	3.97	0.02	2,690	23,613	9	20,062	16,023	4,038	1,781	247	3,127	265	966	603	54
F14B	VASC PR-MJR RECONSTR-PUMP+SMCC	1.81	0.02	3,357	9,806	3	9,126	7,341	1,784	651	73	988	85	341	147	13
F14C	VASC PR-MJR RECONSTR-PUMP-CC	1.39	0.01	4,659	8,351	2	7,004	5,703	1,301	445	36	534	54	220	75	7
F15A	INTER CORONARY PR-AMI+STN+CSCC	2.31	0.02	2,268	8,637	4	11,691	9,641	2,050	777	108	868	68	384	260	27
F15B	INTER CORONRY PR-AMI+STNT-CSCC	1.62	0.01	6,062	10,748	2	8,190	6,883	1,307	421	63	463	35	225	105	12
F16A	INTERVN CORONARY PR-AMI-STN+CC	2.06	0.06	183	783	4	10,420	8,409	2,011	874	155	1,032	86	409	243	36

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
E73C	256	44	77	25	76	9	37	13	51	15	456	119	108	150	10	3	11	205	108	97	168
E74A	287	51	542	129	371	37	502	125	23	5	897	234	423	607	27	4	5	845	462	333	126
E74B	216	41	314	81	259	23	139	40	20	4	614	163	260	371	18	3	4	480	284	202	144
E74C	172	39	122	36	376	26	29	10	27	6	386	111	124	199	35	4	11	246	155	121	157
E75A	242	44	403	112	361	33	243	65	26	6	794	208	316	487	9	1	12	668	372	251	200
E75B	151	32	195	57	230	20	119	31	22	5	688	188	183	292	24	7	5	358	210	172	269
E75C	81	18	61	21	61	6	28	7	13	3	550	155	98	133	11	3	2	165	92	89	288
E76Z	249	48	604	167	1,071	83	77	24	19	6	381	98	696	1,076	1	0	9	1,166	693	372	96
F01A	631	103	1,360	816	405	54	5,237	1,337	1,115	242	450	120	767	652	2,444	440	19,216	1,877	773	1,109	43
F01B	194	30	681	412	71	16	553	184	813	140	96	25	436	235	1,792	306	12,730	518	215	514	46
F02Z	213	34	431	150	134	19	1,204	300	977	138	156	44	426	265	787	105	2,583	573	231	376	48
F03A	1,088	181	1,300	452	901	97	10,768	2,409	8,308	1,331	336	83	2,137	1,284	3,403	378	6,543	3,824	1,499	1,653	26
F03B	594	87	652	282	283	27	3,655	803	5,737	605	150	34	1,473	618	4,000	320	9,931	1,789	709	922	23
F04A	644	123	1,032	349	576	58	8,403	1,688	9,700	1,517	86	20	1,326	922	450	79	5,941	3,072	970	1,183	29
F04B	363	76	624	285	264	23	4,165	920	7,572	1,172	28	6	985	593	213	37	5,294	1,763	663	1,026	28
F05A	809	138	1,061	263	618	58	10,308	2,432	8,280	1,438	444	108	1,505	1,227	1,418	221	1,287	3,913	1,334	1,360	25
F05B	601	103	831	229	388	31	6,366	1,702	6,879	1,229	355	90	1,375	991	1,109	172	1,006	2,488	1,011	1,285	24
F06A	500	95	751	172	354	35	6,754	1,368	8,202	1,314	71	18	914	711	464	62	1,012	2,464	788	903	24
F06B	337	64	584	138	214	18	3,752	851	6,884	1,226	59	14	709	579	111	15	671	1,578	603	810	23
F07A	714	144	1,573	248	580	61	8,387	1,763	11,367	2,085	112	30	1,501	1,194	281	44	2,081	3,625	983	1,513	29
F07B	380	99	1,091	175	248	36	5,402	1,213	8,035	1,314	54	19	1,705	961	89	15	1,204	2,301	786	1,736	27
F07C	412	82	904	132	257	27	4,132	854	6,564	927	26	5	1,704	668	44	6	838	1,688	571	1,399	26
F08A	1,248	226	734	266	660	61	4,305	942	7,816	1,460	336	77	1,023	894	143	24	3,873	2,430	1,010	916	60
F08B	827	156	234	200	191	21	836	199	5,615	1,099	160	38	449	427	84	12	4,752	1,108	465	553	72
F09A	623	108	671	158	555	53	6,367	1,477	1,536	261	510	110	807	575	1,710	249	1,966	1,869	617	762	55
F09B	266	44	291	72	289	33	1,897	518	1,114	198	467	104	392	284	1,418	245	1,676	801	288	418	59
F09C	168	27	237	54	202	20	1,384	378	855	161	376	87	476	242	1,544	244	1,598	688	250	393	60
F10A	454	65	433	115	408	41	3,354	926	268	34	726	160	341	400	1,962	314	1,763	1,181	450	554	60
F10B	218	31	169	65	230	23	1,384	443	183	23	504	125	226	191	1,600	271	1,779	553	233	369	63
F11A	1,334	233	1,745	430	1,538	127	1,834	355	5,238	1,056	555	146	2,100	1,804	183	24	596	3,026	1,457	1,209	70
F11B	529	101	880	260	550	51	275	81	3,730	816	382	112	1,030	1,081	17	3	271	1,435	873	697	53
F12A	463	76	701	245	283	37	2,549	755	624	105	643	158	582	584	1,573	267	4,709	1,311	565	601	58
F12B	215	35	294	145	79	13	686	227	439	86	309	77	319	238	1,218	198	4,171	498	207	339	64
F13A	1,168	192	741	234	903	76	299	90	2,555	551	396	99	1,374	1,100	91	22	575	1,679	843	647	76
F13B	418	76	222	84	228	24	17	5	1,718	384	212	61	415	468	19	6	390	659	377	301	78
F14A	1,705	297	400	134	541	47	1,044	247	2,751	548	399	99	679	594	168	18	956	1,288	552	552	77
F14B	1,309	218	106	56	172	16	125	33	1,787	364	150	37	222	224	156	16	799	505	221	311	86
F14C	1,326	210	70	47	76	7	50	13	1,422	273	56	13	136	144	201	21	779	374	154	259	110
F15A	266	36	166	72	174	22	1,298	369	233	36	318	77	301	213	2,077	345	1,938	624	247	385	58
F15B	210	22	88	62	87	11	457	155	186	26	196	50	247	124	1,817	298	2,030	346	146	308	62
F16A	306	47	187	49	126	15	1,216	343	274	58	415	101	353	229	1,760	250	660	630	217	348	47

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
F16B	INTERV CORONARY PR-AMI-STNT-CC	1.24	0.05	297	546	2	6,281	5,153	1,127	402	69	444	39	212	84	10
F17A	INSERT/REPLACE PM GENERTR+CSCC	2.67	0.07	196	954	5	13,504	11,152	2,352	1,028	167	1,238	100	459	195	22
F17B	INSERT/REPLACE PM GENERTR-CSCC	1.40	0.02	1,640	1,973	1	7,080	6,201	879	266	32	220	25	143	24	4
F18A	OTHER PACEMAKER PROCEDURES+CC	3.06	0.09	181	1,301	7	15,449	12,734	2,715	1,649	264	1,882	132	721	452	54
F18B	OTHER PACEMAKER PROCEDURES-CC	1.18	0.06	211	423	2	5,954	4,790	1,164	461	51	635	52	260	81	19
F19Z	TRNS-VSCLR PERC CRDC INTRV	3.23	0.03	918	3,399	4	16,308	13,873	2,435	1,145	140	1,451	95	495	252	30
F20Z	VEIN LIGATION & STRIPPING	0.94	0.01	4,970	5,687	1	4,737	3,628	1,109	386	39	298	44	170	18	2
F21A	OTH CIRC SYS OR PR+CCC	4.68	0.04	759	10,769	14	23,641	18,497	5,144	2,651	373	4,609	491	1,485	790	88
F21B	OTH CIRC SYS OR PR -CCC	1.75	0.04	970	4,152	4	8,837	6,844	1,993	992	113	1,361	161	502	152	16
F40A	CIRC SYS DX+VENTILTR SUPPT+CCC	6.41	0.04	546	5,222	10	32,356	25,637	6,720	1,708	155	1,658	150	753	1,248	138
F40B	CIRC SYS DX+VENTILTR SUPPT-CCC	3.77	0.05	221	1,006	5	19,029	14,996	4,033	1,069	52	516	71	269	700	71
F41A	CRC DSRD+AMI+INVA INVE PR+CSCC	2.73	0.01	2,289	16,981	7	13,810	10,653	3,157	1,470	205	1,781	167	704	444	42
F41B	CRC DSRD+AMI+INVA INVE PR-CSCC	1.44	0.01	5,441	18,713	3	7,276	5,621	1,655	679	91	707	64	332	179	16
F42A	CRC DSRD-AMI+IC IN PR +CSCC	2.55	0.01	4,201	29,918	7	12,866	10,091	2,775	1,465	213	1,827	145	694	417	39
F42B	CRC DSRD-AMI+IC IN PR -CSCC	1.39	0.01	13,219	38,820	3	7,040	5,553	1,487	673	89	741	62	330	139	15
F42C	CRC DSRD-AMI+IC IN PR SD	0.59	0.01	15,155	15,155	1	3,003	2,408	595	133	22	162	9	110	16	3
F43Z	CIRC SYS DIAG W NIV	4.73	0.03	1,060	12,888	12	23,904	18,351	5,553	2,264	206	3,705	389	1,116	834	79
F60A	CRC DSRD+AMI-INVA INVE PR+CCC	2.18	0.01	3,828	28,644	7	11,019	8,347	2,672	1,287	158	2,251	296	714	360	34
F60B	CRC DSRD+AMI-INVA INVE PR-CCC	0.92	0.01	16,030	43,650	3	4,637	3,505	1,132	488	73	671	117	267	119	9
F61A	INFECTIVE ENDOCARDITIS +CCC	6.15	0.04	470	10,188	22	31,075	23,990	7,086	4,488	558	6,993	737	2,102	1,102	111
F61B	INFECTIVE ENDOCARDITIS -CCC	2.27	0.05	677	7,420	11	11,459	8,665	2,794	1,869	216	2,571	343	860	315	29
F62A	HEART FAILURE & SHOCK + CCC	2.30	0.01	12,471	108,968	9	11,637	8,775	2,862	1,447	163	2,754	330	866	381	42
F62B	HEART FAILURE & SHOCK - CCC	1.14	0.01	22,813	95,394	4	5,763	4,242	1,521	721	86	1,257	190	432	159	15
F63A	VENOUS THROMBOSIS + CSCC	1.73	0.02	1,498	10,603	7	8,740	6,606	2,134	1,130	148	2,062	250	676	306	33
F63B	VENOUS THROMBOSIS - CSCC	0.82	0.01	5,484	25,583	5	4,153	3,140	1,013	735	71	873	100	328	99	11
F64A	SKN ULCERS CIRC DISORD +CSCC	2.30	0.04	850	8,149	10	11,620	8,786	2,835	1,627	215	3,107	421	918	348	32
F64B	SKN ULCERS CIRC DISORD -CSCC	0.98	0.04	1,333	5,892	4	4,974	3,652	1,322	787	84	1,103	167	401	112	11
F65A	PERIPHERAL VASCULAR DSRD +CSCC	2.02	0.03	1,919	13,489	7	10,192	7,835	2,357	1,290	156	2,300	265	739	345	36
F65B	PERIPHERAL VASCULAR DSRD -CSCC	0.65	0.02	6,329	13,054	2	3,308	2,553	755	358	41	472	58	210	73	7
F66A	CORONARY ATHEROSCLEROSIS +CSCC	1.22	0.03	1,639	6,777	4	6,184	4,675	1,509	767	122	1,231	162	432	183	19
F66B	CORONARY ATHEROSCLEROSIS -CSCC	0.49	0.01	10,124	15,905	2	2,489	1,865	624	260	40	366	61	160	56	4
F67A	HYPERTENSION + CSCC	1.35	0.04	1,026	4,703	5	6,838	5,212	1,626	731	92	1,386	199	460	227	20
F67B	HYPERTENSION - CSCC	0.61	0.02	4,764	8,996	2	3,098	2,395	702	317	45	492	89	205	85	5
F68A	CONGENITAL HEART DISEASE +CC	1.74	0.09	190	824	4	8,802	6,759	2,043	1,742	148	1,766	101	390	143	17
F68B	CONGENITAL HEART DISEASE -CC	0.52	0.05	576	780	1	2,621	1,934	687	391	43	337	23	173	49	7
F69A	VALVULAR DISORDERS + CSCC	1.65	0.03	1,321	7,934	6	8,316	6,320	1,996	1,112	133	1,706	187	574	257	26
F69B	VALVULAR DISORDERS - CSCC	0.45	0.02	6,919	10,920	2	2,257	1,711	546	254	36	314	43	143	50	4
F72A	UNSTABLE ANGINA + CSCC	1.22	0.02	2,295	9,202	4	6,174	4,652	1,522	733	112	1,149	182	404	177	17
F72B	UNSTABLE ANGINA - CSCC	0.56	0.01	12,951	22,648	2	2,837	2,140	697	290	46	396	69	167	65	5
F73A	SYNCOPE & COLLAPSE + CSCC	1.29	0.01	8,101	38,236	5	6,536	4,883	1,653	769	91	1,470	197	472	167	18

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
F16B	143	18	72	26	79	8	495	159	153	27	194	43	197	101	1,576	274	769	308	134	245	51
F17A	172	28	392	134	135	11	897	315	388	71	309	75	307	301	1,366	259	3,783	633	264	455	38
F17B	69	9	161	63	26	5	87	23	428	72	26	7	186	93	1,090	216	3,281	222	83	219	54
F18A	361	55	668	129	397	31	1,703	433	994	128	319	78	878	401	613	86	1,406	933	307	378	38
F18B	160	22	141	41	46	8	271	88	642	125	125	36	291	189	592	101	906	324	101	187	38
F19Z	723	76	291	83	153	17	1,079	288	1,414	223	77	15	614	312	1,982	250	3,534	749	298	525	35
F20Z	52	8	27	12	22	3	17	4	2,278	511	7	2	58	111	20	3	60	313	129	142	161
F21A	551	92	693	191	1,097	101	1,617	375	2,315	450	451	106	1,002	868	85	14	176	1,673	773	524	99
F21B	199	34	176	57	222	22	61	18	2,205	449	135	35	270	312	61	7	216	557	257	247	119
F40A	670	124	780	172	528	46	14,267	3,151	183	38	914	204	521	511	202	32	99	2,443	775	887	86
F40B	403	82	346	80	161	16	8,808	1,963	117	26	1,063	280	151	242	165	22	36	1,388	336	598	75
F41A	392	54	336	71	272	29	2,447	731	86	18	694	163	428	416	812	152	152	925	413	407	68
F41B	197	26	150	34	122	14	1,181	371	59	11	491	131	318	200	711	139	163	431	193	264	68
F42A	448	59	307	71	342	29	1,641	446	146	26	656	160	503	409	879	153	175	831	379	406	73
F42B	235	28	133	29	90	10	579	188	245	43	470	124	286	198	1,047	172	279	402	170	263	80
F42C	166	13	40	8	13	1	7	2	110	24	13	3	185	52	1,123	240	163	160	61	164	56
F43Z	433	75	606	155	538	47	5,694	1,362	90	15	1,186	273	574	824	104	15	52	1,814	780	673	123
F60A	234	40	378	103	286	32	1,170	338	42	9	884	220	341	444	20	5	13	737	366	256	181
F60B	85	16	99	31	94	12	589	192	24	3	652	176	226	163	12	2	12	273	123	110	269
F61A	1,070	173	850	293	1,684	139	2,441	606	247	54	720	183	1,128	1,244	112	17	78	2,131	1,046	770	112
F61B	265	50	330	69	772	49	361	101	149	34	365	102	525	572	47	10	25	737	352	340	145
F62A	227	38	422	120	342	41	754	199	23	5	823	205	396	539	10	2	15	806	414	274	231
F62B	106	20	174	53	142	19	223	68	9	2	694	192	190	280	6	1	7	357	202	155	286
F63A	374	66	267	80	447	41	107	27	39	8	686	179	310	428	6	1	15	571	277	206	167
F63B	149	26	66	24	173	15	18	5	12	3	462	124	166	220	3	0	5	278	91	98	226
F64A	345	61	424	129	409	45	79	19	124	30	517	140	473	556	101	17	15	778	441	250	143
F64B	236	40	136	45	121	14	3	1	68	18	228	64	212	278	124	21	16	330	185	167	167
F65A	518	87	347	92	520	35	240	64	180	43	587	141	407	473	34	4	24	683	335	247	168
F65B	437	74	55	18	89	6	30	8	203	43	252	67	143	133	88	11	29	208	84	112	238
F66A	201	34	180	52	173	19	375	103	16	4	688	182	217	262	13	3	7	390	196	155	185
F66B	87	16	48	15	46	6	95	33	9	2	538	152	97	93	21	4	7	141	63	70	264
F67A	222	43	200	56	199	24	486	112	142	20	645	165	228	274	57	4	21	444	217	165	171
F67B	102	20	49	16	50	7	60	19	41	6	451	124	98	107	307	24	50	167	78	82	267
F68A	158	29	386	77	133	12	559	130	173	32	222	60	521	447	84	22	79	763	210	396	58
F68B	148	31	89	15	52	4	57	12	225	45	76	18	91	143	139	36	18	181	49	169	72
F69A	227	38	270	74	187	19	671	195	56	11	634	164	317	386	27	5	28	556	251	205	166
F69B	63	11	51	13	32	3	86	28	47	11	446	125	92	85	52	11	27	120	51	60	241
F72A	166	28	182	52	168	21	454	148	28	5	756	201	206	249	12	3	9	386	178	147	185
F72B	82	15	49	16	51	7	209	71	10	1	616	171	108	96	5	1	5	153	66	70	247
F73A	181	32	282	80	143	17	181	51	17	4	835	214	187	307	14	3	15	423	214	151	229

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
F73B	SYNCOPE & COLLAPSE - CSCC	0.54	0.01	24,246	43,579	2	2,731	2,062	669	299	34	427	66	171	50	4
F74Z	CHEST PAIN	0.39	0.00	98,087	126,256	1	1,962	1,491	472	174	24	251	40	110	40	3
F75A	OTHER CIRCULATRY SYSTEM DX+CCC	2.80	0.02	2,917	25,680	9	14,166	11,013	3,153	1,600	240	3,065	300	902	542	55
F75B	OTH CIRCULATRY SYSTEM DX+SMCC	1.23	0.01	6,625	25,457	4	6,190	4,744	1,445	743	105	1,240	135	396	187	17
F75C	OTHER CIRCULATY SYSTEM DX-CC	0.65	0.02	7,557	14,967	2	3,278	2,501	777	373	48	519	61	204	88	9
F76A	ARRHY, CARD & COND DISDR +CSCC	1.51	0.01	9,514	49,211	5	7,627	5,770	1,857	875	105	1,413	185	502	224	21
F76B	ARRHY, CARD & COND DISDR -CSCC	0.58	0.01	35,793	72,751	2	2,920	2,187	733	336	43	385	60	180	68	6
G01A	RECTAL RESECTION +CCC	7.29	0.01	2,755	45,641	17	36,847	29,085	7,763	3,487	242	5,407	624	1,557	1,308	131
G01B	RECTAL RESECTION -CCC	4.14	0.01	2,322	18,683	8	20,889	16,478	4,411	1,937	139	2,730	332	806	633	61
G02A	MJR SMALL & LARGE BOWEL PR+CCC	6.67	0.01	6,890	106,157	15	33,698	26,459	7,239	3,232	266	5,179	605	1,496	1,174	118
G02B	MJR SMALL & LARGE BOWEL PR-CCC	3.08	0.01	6,149	39,027	6	15,559	12,133	3,427	1,581	124	2,214	279	675	452	45
G03A	STOMCH,OESPH&DUODNL PR+MAL/CCC	7.48	0.02	1,581	23,485	15	37,794	29,981	7,813	3,265	251	5,239	571	1,506	1,289	132
G03B	STMCH,OESPHGL&DDNL PR-MAL+SMCC	2.99	0.03	649	3,647	6	15,111	11,762	3,349	1,446	121	2,161	246	654	325	34
G03C	STMCH,OESPHGL&DDNL PR-MAL-CC	2.08	0.01	1,365	4,369	3	10,513	8,249	2,264	908	79	1,277	159	425	133	13
G04A	PERITONEAL ADHESOLYSIS +CCC	5.62	0.02	1,427	19,539	14	28,402	22,356	6,046	2,982	247	4,592	544	1,358	878	83
G04B	PRTNL ADHLY +SMCC	3.00	0.02	1,831	12,330	7	15,165	11,746	3,419	1,611	127	2,424	304	719	326	32
G04C	PERITONEAL ADHESOLYSIS -CC	1.83	0.01	4,630	15,553	3	9,222	7,169	2,053	940	88	1,154	162	393	138	12
G05A	MNR SMALL&LARGE BOWEL PR +CCC	4.91	0.06	269	3,527	13	24,814	19,475	5,339	2,974	205	4,570	509	1,330	925	95
G05B	MNR SMALL&LARGE BOWEL PR +SMCC	2.43	0.04	309	1,867	6	12,276	9,484	2,791	1,377	112	2,031	258	641	341	35
G05C	MNR SMALL & LARGE BOWEL PR -CC	1.61	0.02	862	3,076	4	8,147	6,307	1,840	944	71	1,200	153	393	236	23
G06Z	PYLOROMYOTOMY PROCEDURE	1.82	0.03	215	784	4	9,210	7,135	2,075	1,268	88	1,833	89	531	113	17
G07A	APPENDCTMY +MALIG/PERITON/CSCC	1.95	0.01	7,549	30,759	4	9,829	7,566	2,263	1,002	99	1,529	173	492	189	18
G07B	APPENDCTMY -MALIG-PERITON-CSCC	1.30	0.00	20,300	43,716	2	6,591	5,084	1,507	629	64	789	97	283	100	9
G10A	HERNIA PROCEDURES +CC	2.14	0.02	3,918	17,310	4	10,823	8,430	2,392	1,115	87	1,582	182	505	192	20
G10B	HERNIA PROCEDURES -CC	0.98	0.00	27,810	36,996	1	4,945	3,841	1,104	466	33	383	62	187	23	2
G11Z	ANAL & STOMAL PROCEDURES	0.66	0.01	26,176	41,371	2	3,336	2,548	788	368	28	348	49	153	59	6
G12A	OTH DIGEST SYS OR PR+CCC	4.98	0.03	1,238	16,542	13	25,137	19,726	5,411	2,595	266	4,601	511	1,392	992	104
G12B	OTH DIGEST SYS OR PR+SMCC	2.25	0.03	1,087	6,494	6	11,385	8,744	2,641	1,255	116	1,996	225	626	367	32
G12C	OTH DIGEST SYS OR PR-CC	1.32	0.02	2,017	6,118	3	6,649	5,074	1,575	691	64	877	118	349	163	14
G46A	COMPLEX GASTROSCOPY+CCC	3.74	0.02	2,117	23,920	11	18,878	14,643	4,234	2,121	251	3,830	386	1,139	814	85
G46B	COMPLEX GASTROSCOPY-CCC	1.50	0.01	7,015	29,558	4	7,567	5,712	1,855	935	84	1,451	168	472	303	32
G46C	COMPLEX GASTROSCOPY,SD	0.36	0.00	29,448	29,448	1	1,830	1,393	437	194	14	53	10	59	86	9
G47A	OTH GASTROSCOPY +CCC	2.94	0.02	2,765	26,739	10	14,853	11,377	3,477	1,735	196	3,200	356	963	601	62
G47B	OTH GASTROSCOPY -CCC	1.13	0.01	12,641	41,250	3	5,721	4,273	1,448	722	66	916	121	365	197	23
G47C	OTH GASTROSCOPY, SD	0.28	0.01	36,741	36,741	1	1,433	1,082	351	140	10	59	12	56	74	8
G48A	COLONSCOPY +CSCC	2.48	0.02	2,763	23,228	8	12,534	9,633	2,901	1,559	165	2,950	340	864	540	56
G48B	COLONSCOPY - CSCC	1.11	0.01	7,056	23,319	3	5,628	4,233	1,396	770	76	1,091	154	371	207	21
G48C	COLONSCOPY, SD	0.32	0.00	53,931	53,931	1	1,609	1,219	391	165	11	56	12	55	49	4
G60A	DIGESTIVE MALIGNANCY + CCC	2.21	0.02	2,029	16,693	8	11,169	8,340	2,829	1,401	203	2,859	359	893	338	34
G60B	DIGESTIVE MALIGNANCY - CCC	0.81	0.02	5,059	15,524	3	4,088	3,046	1,043	548	80	852	124	343	96	9

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
F73B	87	16	74	22	36	5	62	20	6	2	640	173	70	102	34	5	48	147	70	62	279
F74Z	101	18	31	9	26	3	58	18	4	1	592	163	46	58	4	1	2	95	42	46	297
F75A	421	74	406	108	908	69	1,259	307	138	27	697	173	527	557	44	7	25	941	438	339	171
F75B	230	42	147	43	294	24	343	96	120	25	549	147	261	260	32	5	27	372	182	169	228
F75C	133	24	66	19	103	9	168	51	76	16	476	130	106	123	71	14	28	185	83	98	254
F76A	160	27	219	63	186	23	817	238	34	7	811	204	228	300	22	4	42	502	239	179	244
F76B	55	10	54	16	59	8	225	74	42	10	542	150	99	106	41	8	19	169	74	79	290
G01A	667	118	750	243	987	76	3,211	719	7,773	1,633	333	82	888	1,079	52	8	977	2,558	1,067	872	130
G01B	150	27	267	129	321	28	502	118	6,752	1,415	151	40	412	573	16	3	969	1,236	611	534	133
G02A	753	132	733	246	1,118	91	3,424	769	5,675	1,176	574	143	878	1,063	54	11	715	2,252	998	823	146
G02B	178	32	211	92	250	25	414	97	4,349	919	336	89	340	479	25	6	546	916	467	418	155
G03A	762	142	843	295	1,171	90	4,725	1,036	7,075	1,434	387	93	938	995	79	16	927	2,571	1,021	940	116
G03B	195	38	272	104	231	22	678	162	4,138	853	335	96	393	461	38	10	318	939	421	422	108
G03C	76	16	121	57	104	11	194	42	3,863	780	147	42	217	274	20	4	317	655	297	283	112
G04A	598	103	610	197	900	74	2,862	624	4,669	955	644	155	744	882	29	5	321	1,902	804	642	129
G04B	220	41	198	87	291	27	546	129	3,671	788	511	129	351	505	11	2	323	966	442	384	146
G04C	86	16	85	40	91	11	73	17	2,995	638	442	118	182	260	7	1	241	538	247	247	173
G05A	489	88	600	165	913	62	1,611	321	3,761	791	257	69	731	931	31	7	369	1,647	802	561	96
G05B	127	25	145	65	199	19	179	42	3,188	683	86	27	316	440	19	4	370	797	417	334	97
G05C	25	5	70	38	94	10	39	7	2,568	554	40	11	177	274	3	0	219	498	267	231	124
G06Z	79	18	67	43	53	6	315	69	1,677	337	631	187	234	359	-	-	19	638	275	265	17
G07A	132	26	88	43	122	13	181	42	2,473	519	682	182	216	329	18	2	94	626	275	264	159
G07B	56	12	36	22	48	6	6	1	2,097	451	601	169	109	183	6	1	77	388	169	184	171
G10A	119	22	158	63	170	16	478	107	2,915	620	220	56	223	345	16	2	314	712	314	270	173
G10B	10	2	28	22	31	4	14	3	2,113	478	54	15	64	119	7	1	248	299	132	146	202
G11Z	17	3	29	13	59	8	25	5	1,125	270	116	33	60	94	21	7	41	210	94	97	210
G12A	1,091	186	609	185	1,105	80	2,116	456	2,344	490	729	175	770	882	123	24	254	1,686	750	622	120
G12B	523	91	173	71	252	23	344	79	1,861	400	512	130	294	427	57	11	122	703	357	338	133
G12C	241	47	63	34	90	9	45	10	1,705	378	340	88	147	229	47	10	80	416	193	198	163
G46A	505	84	616	156	854	66	1,311	293	1,082	243	723	181	589	748	215	52	171	1,283	607	471	130
G46B	155	28	135	52	199	19	129	33	843	201	438	119	214	329	147	40	89	476	255	219	171
G46C	9	2	10	5	12	1	0	0	750	188	3	1	25	34	81	31	22	108	56	68	186
G47A	407	69	519	144	575	42	815	181	632	143	788	192	479	653	128	33	32	1,031	514	367	132
G47B	143	26	116	40	120	12	71	19	580	137	636	172	158	244	84	24	21	353	189	164	182
G47C	11	2	8	5	16	2	0	0	500	131	16	5	26	31	90	30	13	88	45	58	194
G48A	362	63	291	88	618	45	247	58	580	138	659	167	438	559	131	33	22	828	418	315	143
G48B	134	27	73	31	164	14	15	4	614	153	349	95	174	247	104	27	18	348	187	161	189
G48C	8	2	9	5	16	1	0	0	644	166	1	0	26	30	87	33	14	95	52	65	196
G60A	397	69	474	122	517	38	91	20	75	20	523	133	442	599	16	9	19	814	405	300	174
G60B	183	31	116	38	233	23	17	4	111	27	224	60	162	214	46	9	20	270	122	127	238

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
G61A	GI HAEMORRHAGE +CSCC	1.30	0.02	3,526	16,122	5	6,587	4,968	1,619	844	86	1,449	188	462	249	23
G61B	GI HAEMORRHAGE - CSCC	0.56	0.01	8,493	17,445	2	2,846	2,113	733	381	38	507	75	205	92	8
G62Z	COMPLICATED PEPTIC ULCER	1.38	0.06	333	1,561	5	6,986	5,259	1,727	942	67	1,543	209	470	193	17
G63Z	UNCOMPLICATED PEPTIC ULCER	0.58	0.05	476	986	2	2,919	2,175	743	374	51	502	107	209	79	7
G64A	INFLAMMATORY BOWEL DISEASE +CC	1.43	0.03	1,287	6,600	5	7,244	5,603	1,642	965	107	1,624	203	541	266	29
G64B	INFLAMMATORY BOWEL DISEASE-CC	0.59	0.01	12,188	15,824	1	2,969	2,571	399	170	25	229	33	106	69	10
G65A	GI OBSTRUCTION + CSCC	1.69	0.02	4,274	25,786	6	8,562	6,464	2,099	1,123	97	2,058	254	626	232	23
G65B	GI OBSTRUCTION - CSCC	0.82	0.01	9,541	26,404	3	4,164	3,104	1,060	577	52	838	122	298	82	6
G66Z	ABDMNL PAIN/MESENTRC ADENTS	0.48	0.00	50,832	82,174	2	2,408	1,802	606	293	33	389	51	162	52	4
G67A	OESPHS, GASTR +CSCC	1.37	0.01	12,358	60,023	5	6,931	5,202	1,728	893	102	1,678	201	520	244	26
G67B	OESPHS, GASTR -CSCC	0.49	0.00	43,027	72,457	2	2,452	1,817	635	343	42	464	62	181	62	5
G70A	OTHER DIGESTIVE SYS DIAG +CSCC	1.42	0.01	15,061	77,285	5	7,171	5,397	1,774	919	106	1,659	211	536	216	21
G70B	OTHER DIGESTIVE SYS DIAG -CSCC	0.53	0.01	60,963	115,301	2	2,693	1,998	695	354	42	476	70	192	53	4
H01A	PANCREAS, LIVER & SHUNT PR+CCC	7.31	0.02	1,356	19,696	15	36,931	29,377	7,554	2,921	204	4,745	450	1,450	1,544	166
H01B	PANCREAS, LIVER &SHUNT PR-CCC	3.45	0.02	1,019	5,898	6	17,451	13,787	3,664	1,254	87	1,957	213	625	641	74
H02A	MJR BILIARY TRACT PR +CCC	6.22	0.03	680	11,514	17	31,402	24,557	6,845	2,942	232	6,040	637	1,773	1,122	114
H02B	MJR BILIARY TRACT PR +SCC	3.22	0.04	276	2,169	8	16,273	12,619	3,654	1,833	118	2,646	300	834	510	40
H02C	MJR BILIARY TRACT PR -CSCC	2.36	0.04	610	3,066	5	11,919	9,262	2,657	1,272	114	1,661	176	593	311	29
H05A	HEPATOBILIARY DIAGNTIC PR +CCC	4.97	0.06	240	2,910	12	25,104	19,784	5,320	2,413	195	4,392	598	1,311	1,122	96
H05B	HEPATOBILIARY DIAGNTIC PR -CCC	1.37	0.04	759	2,393	3	6,927	5,313	1,615	648	56	952	127	333	262	20
H06A	OTH HEPTOBILRY & PANCRS PR+CCC	4.65	0.04	554	7,438	13	23,476	18,405	5,070	2,447	231	4,390	483	1,367	1,050	105
H06B	OTH HEPTOBILRY &PANCRS PR-CCC	1.40	0.03	1,238	3,717	3	7,071	5,517	1,554	645	57	912	100	381	179	18
H07A	OPEN CHOLECYSTECTOMY+CDE/+CCC	5.19	0.03	536	6,603	12	26,194	20,411	5,783	2,694	194	3,877	409	1,215	853	92
H07B	OPEN CHOLECYSTECTOMY-CDE-CCC	2.56	0.02	920	4,667	5	12,935	9,837	3,098	1,320	112	1,740	232	580	262	28
H08A	LAP CHOLECYSTECTMY+CDE/+CSCC	2.59	0.01	5,761	30,471	5	13,085	10,287	2,798	1,246	106	1,768	222	585	333	34
H08B	LAP CHOLECYSTECTMY-CDE-CSCC	1.42	0.00	22,458	42,525	2	7,162	5,592	1,570	670	53	665	98	269	120	11
H40A	ENDO PR BLEED OES VARICES +CCC	3.90	0.04	369	3,294	9	19,678	15,471	4,208	1,740	165	3,122	347	913	1,188	100
H40B	ENDO PR BLEED OES VARICES -CCC	1.62	0.04	449	1,758	4	8,203	6,283	1,920	824	81	1,385	163	382	447	40
H43A	ERCP PROCEDURE +CSCC	3.04	0.02	2,488	23,155	9	15,341	11,815	3,527	1,702	144	3,061	313	942	572	65
H43B	ERCP PROCEDURE -CSCC	0.95	0.01	6,715	18,163	3	4,809	3,638	1,171	515	38	737	79	277	127	14
H60A	CIRRHOSIS & ALC HEPATITIS +CCC	2.88	0.02	2,714	26,064	10	14,562	11,248	3,315	1,859	212	3,260	418	993	785	81
H60B	CIRRHOSIS & ALC HEPATITIS+SMCC	0.82	0.02	3,459	10,014	3	4,127	3,071	1,056	505	54	788	125	285	190	19
H60C	CIRRHOSIS & ALC HEPATITIS -CC	0.35	0.04	853	1,039	1	1,750	1,313	436	141	13	167	29	94	75	9
H61A	MALG HEPATOBILIARY SYS PAN+CCC	2.37	0.03	1,653	13,837	8	11,978	9,054	2,924	1,550	159	3,035	314	901	417	47
H61B	MALG HEPATOBILIAY SYS PANC-CCC	0.95	0.02	3,703	12,078	3	4,808	3,564	1,244	572	80	967	133	371	161	17
H62A	DISORDERS PANCREAS-MALIG+CSCC	2.14	0.02	3,623	24,843	7	10,796	8,257	2,539	1,287	120	2,247	283	696	394	41
H62B	DISORDERS PANCREAS-MALIG-CSCC	0.87	0.01	11,663	34,449	3	4,389	3,257	1,132	606	53	899	128	320	120	10
H63A	DSRD LVR-MAL,CIRR,ALC HEP+CSCC	2.06	0.02	3,011	20,484	7	10,409	8,001	2,408	1,294	138	2,245	275	714	513	56
H63B	DSRD LVR-MAL,CIRR,ALC HEP-CSCC	0.72	0.02	5,342	12,914	2	3,613	2,756	857	448	56	639	84	246	215	22
H64A	DISORDERS OF BILIARY TRACT +CC	1.50	0.01	4,987	25,928	5	7,575	5,723	1,852	987	103	1,675	234	544	252	26

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
G61A	142	26	178	59	199	19	269	64	32	8	765	199	211	307	7	1	13	422	219	147	213
G61B	63	12	44	19	48	6	28	8	18	5	593	162	89	132	3	1	5	155	84	67	272
G62Z	302	61	164	63	189	18	284	61	62	15	665	161	275	342	11	3	12	425	254	178	109
G63Z	111	22	49	17	58	8	19	5	34	7	565	158	95	113	4	1	1	166	81	74	146
G64A	178	32	151	40	762	61	35	10	53	10	609	154	243	328	6	1	6	448	213	170	146
G64B	20	4	14	7	1,702	77	1	0	31	7	101	27	51	59	34	6	2	105	38	42	190
G65A	311	55	234	74	325	28	197	45	52	15	834	210	285	422	9	1	7	542	297	205	213
G65B	172	34	63	27	85	9	9	2	19	5	769	203	138	193	2	0	3	225	130	102	262
G66Z	124	24	31	13	34	4	6	2	19	5	583	158	62	102	3	1	3	130	61	58	298
G67A	134	25	210	61	226	22	165	38	15	4	758	199	218	347	5	1	4	444	228	161	255
G67B	45	9	37	15	38	4	6	2	4	1	527	151	71	114	2	1	2	138	66	60	299
G70A	216	39	248	71	261	25	167	41	47	11	695	179	241	343	15	2	7	474	244	177	270
G70B	89	18	45	18	50	6	6	2	89	25	494	135	82	117	11	3	4	158	77	71	312
H01A	1,120	191	620	249	1,044	82	4,187	902	7,549	1,504	198	49	875	1,018	72	15	1,265	2,513	1,003	996	81
H01B	418	75	217	105	265	22	1,290	297	5,098	1,049	60	17	327	443	43	9	796	1,094	453	520	76
H02A	1,989	342	661	245	1,359	104	1,948	459	3,161	660	497	121	1,088	1,177	130	23	617	2,096	993	873	86
H02B	768	117	195	112	380	29	415	89	3,157	649	404	97	470	598	132	19	298	1,005	553	504	71
H02C	580	98	119	59	173	17	210	46	2,798	570	265	71	450	422	128	28	261	720	359	390	97
H05A	919	160	449	165	821	56	1,993	438	3,677	791	501	117	715	836	98	22	265	1,678	703	570	76
H05B	189	32	69	40	97	9	42	11	1,855	409	137	34	152	240	173	49	116	454	204	217	105
H06A	1,867	309	524	178	1,109	84	1,805	384	1,063	226	577	132	768	900	189	39	220	1,648	724	655	75
H06B	1,748	268	63	39	340	25	38	9	329	72	140	38	186	259	108	17	141	448	196	313	80
H07A	669	115	434	154	726	53	2,594	579	4,780	1,011	592	156	664	846	62	15	211	1,746	793	658	108
H07B	199	38	142	69	150	15	269	56	3,941	894	301	83	283	435	13	2	153	816	422	379	146
H08A	317	54	128	54	172	17	483	108	3,615	742	469	119	285	379	45	9	245	889	348	312	163
H08B	118	19	40	23	53	7	21	4	2,845	616	196	53	104	172	11	2	175	430	187	201	177
H40A	353	76	461	125	768	47	3,268	736	1,311	296	813	209	508	632	80	20	120	1,235	562	482	72
H40B	122	27	134	46	320	25	651	151	765	185	573	159	234	301	112	29	61	480	268	239	82
H43A	635	105	312	109	496	36	936	204	961	234	615	156	505	636	264	61	288	1,049	510	429	81
H43B	219	38	50	24	83	8	12	4	721	192	243	67	164	188	201	51	139	307	154	159	87
H60A	379	68	479	132	558	44	891	183	165	39	789	191	514	639	36	9	25	991	476	346	155
H60B	120	23	104	32	144	13	34	9	227	62	353	95	133	191	65	19	17	256	143	121	192
H60C	93	21	30	10	45	4	14	3	373	99	75	20	51	54	66	20	16	120	48	60	115
H61A	540	91	417	122	538	36	121	25	78	19	640	164	481	656	22	4	17	849	414	319	153
H61B	431	75	112	41	204	20	18	4	80	20	320	86	185	247	19	4	13	320	152	156	207
H62A	440	78	255	83	326	31	992	230	78	20	826	206	365	457	17	4	9	716	330	268	179
H62B	187	36	63	28	88	10	32	9	48	13	670	184	143	207	15	4	4	249	140	123	254
H63A	339	61	289	84	468	33	600	133	131	32	693	176	375	461	20	5	13	680	326	255	178
H63B	209	41	51	20	130	10	35	8	167	43	342	89	113	147	41	15	10	226	104	100	215
H64A	324	58	173	60	215	22	225	54	76	19	740	190	312	355	18	3	9	468	249	184	226

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
H64B	DISORDERS OF BILIARY TRACT -CC	0.59	0.01	12,346	25,878	2	2,969	2,209	759	405	40	535	87	216	76	6
I01A	BL/MLT MJ JT PR LWR EXT+RV/CCC	12.14	0.05	224	5,817	26	61,343	49,367	11,976	5,113	734	9,266	819	2,471	1,474	134
I01B	BL/MLT MJ JT PR LWR EXT-RV-CCC	5.98	0.01	497	3,168	6	30,189	25,361	4,828	1,682	203	2,470	220	742	318	30
I02A	MCRVAS TT/SKIN GRAFT+CSCC-HAND	11.07	0.03	981	26,463	27	55,935	43,853	12,081	4,958	773	9,751	793	3,058	1,102	124
I02B	SKIN GRAFT -CSCC -HAND	3.36	0.04	646	4,435	7	16,964	13,273	3,691	1,464	197	2,471	224	795	187	15
I03A	HIP REPLACEMENT + CCC	5.12	0.01	3,848	45,724	12	25,876	20,792	5,084	2,196	345	4,214	350	1,157	576	65
I03B	HIP REPLACEMENT - CCC	3.84	0.00	10,675	62,446	6	19,388	16,026	3,363	1,394	197	2,083	197	628	216	23
I04A	KNEE REPLACEMT +CSCC	4.56	0.01	3,301	26,128	8	23,040	19,028	4,011	1,860	257	2,799	263	838	343	34
I04B	KNEE REPLACEMT -CSCC	3.68	0.00	10,059	51,036	5	18,594	15,454	3,140	1,390	194	1,853	185	568	152	14
I05A	OTH JNT REPLACEMENT +CSCC	5.56	0.03	344	3,312	10	28,084	23,198	4,886	1,976	323	3,306	287	932	453	44
I05B	OTH JNT REPLACEMENT -CSCC	3.74	0.01	1,261	4,777	4	18,889	15,830	3,059	1,068	158	1,364	137	445	132	13
I06Z	SPINAL FUSION + DEFORMITY	9.27	0.03	445	3,567	8	46,805	40,080	6,725	2,824	151	3,763	226	1,229	567	76
I07Z	AMPUTATION	7.55	0.05	386	8,301	21	38,117	29,586	8,531	4,054	583	7,915	641	2,270	1,006	111
I08A	OTHER HIP & FEMUR PROC +CCC	4.82	0.01	5,752	76,005	13	24,353	19,162	5,191	2,331	372	4,780	364	1,268	615	72
I08B	OTHER HIP & FEMUR PR -CCC	3.01	0.01	9,433	65,123	7	15,230	11,965	3,265	1,426	207	2,471	213	704	239	25
I09A	SPINAL FUSION +CCC	9.80	0.02	740	10,794	15	49,486	41,041	8,445	2,449	316	5,573	396	1,663	887	125
I09B	SPINAL FUSION -CCC	5.46	0.01	2,261	13,110	6	27,561	23,242	4,320	1,136	125	2,310	182	689	231	32
I10A	OTHER BACK & NECK PROCS + CSCC	3.94	0.02	954	8,473	9	19,912	15,522	4,390	1,551	223	3,384	286	1,047	363	47
I10B	OTHER BACK & NECK PROCS - CSCC	2.08	0.01	3,465	11,914	3	10,529	8,206	2,322	713	76	1,261	119	450	103	12
I11Z	LIMB LENGTHENING PROCEDURES	3.79	0.09	128	642	5	19,141	16,030	3,111	1,253	131	1,971	160	673	64	9
I12A	INFC/INFM BONE/JNT+MISC PR+CCC	6.01	0.02	1,781	38,506	22	30,347	23,388	6,959	3,618	537	6,644	628	2,078	810	82
I12B	INFC/INFM BNE/JNT+MISC PR+SMCC	3.53	0.02	1,632	20,023	12	17,846	13,704	4,142	2,402	341	3,665	347	1,187	383	41
I12C	INFC/INFM BNE/JNT+MISC PR-CC	1.91	0.02	3,007	16,800	6	9,669	7,463	2,206	1,130	167	1,645	160	546	182	18
I13A	HUMER,TIBIA,FIBUL,ANKL PR+CC	3.93	0.01	3,751	34,954	9	19,876	15,637	4,239	1,802	284	3,211	271	984	259	27
I13B	HUMER,TIBIA,FIBUL,ANKL PR-CC	1.90	0.01	15,939	51,626	3	9,600	7,543	2,057	750	112	1,101	110	394	46	5
I15Z	CRANIO-FACIAL SURGERY	3.94	0.03	541	3,099	6	19,885	15,682	4,203	1,752	113	2,142	207	876	298	58
I16Z	OTHER SHOULDER PROCEDURES	1.45	0.01	6,930	9,369	1	7,304	5,786	1,518	679	68	547	74	219	26	2
I17A	MAXILLO-FACIAL SURGERY +CC	2.81	0.06	338	1,211	4	14,175	11,205	2,970	1,011	96	1,272	127	503	85	14
I17B	MAXILLO-FACIAL SURGERY -CC	1.58	0.03	574	970	2	7,959	6,320	1,639	586	48	626	79	290	30	4
I18Z	OTHER KNEE PROCEDURES	0.79	0.01	16,730	22,594	1	3,997	3,100	898	454	46	276	37	141	20	2
I19A	OTHER ELBOW, FOREARM PROCS +CC	2.67	0.02	1,656	8,828	5	13,500	10,607	2,893	1,074	128	1,869	173	582	152	19
I19B	OTHER ELBOW, FOREARM PROCS -CC	1.56	0.00	12,357	22,864	2	7,869	6,312	1,558	488	61	631	68	250	22	2
I20Z	OTHER FOOT PROCEDURES	1.42	0.01	7,119	16,033	2	7,169	5,639	1,530	600	76	793	84	290	33	4
I21Z	LOC EX, REM INT FIX DEV HP&FMR	1.21	0.04	856	1,945	2	6,096	4,759	1,336	491	81	834	103	268	41	5
I23Z	LOC EX,REM INT FIX-HP&FMR	0.63	0.01	12,650	15,006	1	3,196	2,484	712	224	26	208	29	119	22	3
I24Z	ARTHROSCOPY	0.85	0.02	1,897	2,975	2	4,278	3,318	961	408	49	351	44	177	37	5
I25A	BNE,JNT DXTIC PR INC BIOPSY+CC	3.72	0.07	345	4,223	12	18,772	14,256	4,516	1,968	353	4,798	379	1,275	730	83
I25B	BNE,JNT DXTIC PR INC BIOPSY-CC	1.10	0.07	427	1,090	3	5,537	4,368	1,169	481	43	813	61	301	343	44
I27A	SOFT TISSUE PROCEDURES +CC	3.27	0.04	1,889	17,047	9	16,521	12,715	3,806	1,818	211	3,102	294	940	430	49
I27B	SOFT TISSUE PROCEDURES -CC	1.05	0.01	7,268	14,172	2	5,326	4,109	1,217	474	60	604	68	230	78	9

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
H64B	128	24	41	19	46	5	9	2	43	11	544	149	106	134	10	2	7	159	87	77	276
I01A	730	137	1,334	836	1,795	155	1,709	400	8,460	1,877	284	74	1,802	2,042	42	8	13,356	3,056	1,972	1,261	77
I01B	191	34	497	621	273	45	217	56	5,269	1,214	14	2	376	554	9	1	12,787	1,011	604	749	70
I02A	1,055	209	1,463	454	1,738	136	1,632	402	11,646	2,512	604	161	1,814	1,980	115	21	2,611	3,569	1,843	1,411	80
I02B	244	46	362	120	178	23	128	26	4,945	1,091	324	82	394	536	32	4	1,082	1,027	496	470	100
I03A	448	75	729	292	412	47	796	178	3,894	800	642	155	656	810	30	6	4,256	1,529	685	535	116
I03B	177	32	433	266	219	28	103	25	3,733	805	209	54	334	458	20	4	6,022	871	451	408	119
I04A	225	39	499	266	273	33	382	94	4,164	887	20	4	444	585	30	6	6,589	1,135	537	432	115
I04B	96	17	367	262	179	25	71	18	3,851	814	8	2	293	400	19	3	6,206	780	430	395	116
I05A	329	59	634	306	407	42	587	127	5,242	1,134	400	101	522	689	47	7	7,490	1,397	655	588	89
I05B	146	28	243	294	121	19	90	21	4,450	969	151	38	211	319	23	4	6,904	753	371	418	110
I06Z	441	97	1,422	432	244	53	2,570	603	8,717	1,941	7	1	469	782	24	17	16,305	2,123	774	947	25
I07Z	713	131	1,401	414	1,509	116	1,488	391	5,408	1,157	418	109	1,436	1,528	83	12	520	2,561	1,169	972	75
I08A	542	98	774	247	493	52	761	165	3,617	717	867	214	719	882	19	4	1,582	1,536	718	546	108
I08B	329	62	407	159	203	23	72	16	3,209	675	660	171	360	491	6	1	1,393	876	448	381	125
I09A	1,091	190	1,359	600	566	70	2,207	487	8,584	1,952	528	125	958	1,241	98	49	13,235	2,508	1,079	1,152	45
I09B	455	86	514	388	190	27	367	85	6,353	1,369	190	47	390	508	35	17	9,408	1,221	531	674	50
I10A	469	79	583	188	320	39	402	89	4,916	1,098	242	60	559	713	22	5	787	1,375	569	495	53
I10B	200	32	217	75	99	12	32	8	3,981	855	96	25	211	314	17	3	344	661	300	312	60
I11Z	249	51	448	155	242	51	124	19	4,567	1,098	41	10	252	409	16	12	5,543	925	311	358	40
I12A	818	146	855	257	1,657	124	634	162	3,143	682	495	126	1,265	1,393	79	11	333	1,999	1,044	726	128
I12B	329	65	389	131	862	62	52	11	2,555	565	378	106	710	813	19	3	287	1,111	576	457	133
I12C	147	27	161	61	254	23	20	5	2,256	492	205	59	274	369	25	4	308	588	288	259	145
I13A	431	83	502	185	290	34	287	64	4,264	911	718	185	489	665	22	5	1,679	1,186	572	467	128
I13B	185	35	187	81	86	11	10	2	2,973	643	417	115	168	257	14	2	839	548	257	251	141
I15Z	202	41	331	118	184	19	1,183	258	5,600	1,190	29	8	343	672	7	3	1,883	1,299	522	548	39
I16Z	23	5	103	57	49	8	29	6	2,855	646	12	3	82	146	12	2	832	406	202	212	141
I17A	247	65	261	111	105	14	496	116	4,432	964	348	100	413	372	3	2	1,395	875	360	388	55
I17B	91	20	77	30	53	7	103	25	3,108	705	105	29	99	179	19	3	746	502	192	204	68
I18Z	22	5	59	21	27	4	7	2	1,680	383	44	12	47	86	9	1	134	242	113	123	160
I19A	369	71	287	122	143	19	251	55	3,038	670	720	191	233	425	13	4	1,421	773	360	340	108
I19B	157	28	78	65	41	6	6	1	2,668	581	330	92	89	161	9	2	1,238	408	182	206	142
I20Z	93	17	152	62	68	10	24	6	2,464	527	146	40	105	185	16	2	570	427	193	185	159
I21Z	81	16	140	44	76	7	10	2	2,138	456	31	9	118	161	3	1	234	391	181	173	116
I23Z	30	6	32	13	17	2	5	1	1,493	340	7	2	38	68	2	0	117	205	88	99	168
I24Z	32	6	66	22	31	5	11	4	1,698	379	68	19	63	107	15	2	173	275	115	117	142
I25A	1,281	209	797	208	875	49	149	27	574	121	396	103	668	967	25	6	112	1,294	720	601	75
I25B	662	114	121	38	118	10	5	1	1,033	209	98	26	100	184	2	1	56	368	129	177	66
I27A	616	110	497	146	421	39	553	121	2,536	543	474	127	454	675	41	7	223	1,046	530	518	134
I27B	61	12	93	32	51	6	7	2	1,840	411	230	67	96	147	5	1	115	324	151	156	196

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
I28A	OTH MUSCULOSKELETAL PR+CC	3.16	0.03	1,175	10,266	9	15,951	12,333	3,618	1,587	226	2,977	291	932	343	37
I28B	OTH MUSCULOSKELETAL PR-CC	1.33	0.01	3,905	7,773	2	6,727	5,273	1,454	501	75	650	73	255	40	4
I29Z	KNEE RECONSTRUCTION/REVISION	1.61	0.01	3,816	4,927	1	8,120	6,525	1,594	581	79	570	79	236	16	2
I30Z	HAND PROCEDURES	0.90	0.03	28,721	38,859	1	4,548	3,521	1,027	316	35	302	40	153	17	2
I31A	HIP REVISION +CCC	9.50	0.03	528	11,368	22	47,970	39,036	8,934	3,981	758	6,714	567	1,991	1,333	119
I31B	HIP REVISION -CCC	5.50	0.02	964	9,481	10	27,801	22,695	5,106	2,193	348	2,800	276	979	562	54
I32A	KNEE REVISION +CCC	8.63	0.05	190	4,134	22	43,593	35,452	8,141	4,075	572	6,139	457	1,937	1,154	120
I32B	KNEE REVISION +SCC	6.57	0.04	181	2,535	14	33,167	27,057	6,109	2,822	282	3,489	350	1,210	688	72
I32C	KNEE REVISION -CSCC	4.83	0.02	510	3,798	7	24,380	20,356	4,024	1,926	259	1,695	200	723	374	35
I60Z	FEMORAL SHAFT FRACTURES	2.23	0.05	770	5,212	7	11,244	8,324	2,921	1,490	208	3,730	266	789	73	9
I61A	DISTAL FEMORAL FRACTURES +CC	2.85	0.11	293	3,192	11	14,412	10,628	3,784	2,242	189	4,062	464	1,069	251	25
I61B	DISTAL FEMORAL FRACTURES -CC	1.01	0.10	406	1,392	3	5,093	3,711	1,383	678	82	1,267	137	378	42	3
I63A	SPR,STR&DSLC HIP,PELV&THIGH+CC	1.35	0.05	535	2,528	5	6,805	5,181	1,624	856	118	1,484	178	455	138	12
I63B	SPR,STR&DSLC HIP,PELV&THIGH-CC	0.53	0.03	2,175	3,614	2	2,684	2,042	642	307	46	428	54	161	21	2
I64A	OSTEOMYELITIS +CSCC	3.02	0.03	1,549	21,492	14	15,278	11,491	3,788	2,448	261	3,623	421	1,224	386	44
I64B	OSTEOMYELITIS -CSCC	1.42	0.03	2,040	13,914	7	7,194	5,383	1,811	1,250	132	1,717	186	586	125	12
I65A	MUSCSKEL MALIG NEO+CCC	3.21	0.03	1,498	16,362	11	16,192	12,147	4,045	1,942	350	4,189	381	1,289	425	47
I65B	MUSCSKEL MALIG NEO -CCC	1.49	0.02	4,062	18,564	5	7,503	5,698	1,805	833	159	1,815	187	573	165	19
I66A	INFLM MUSCL DSR +CSCC	2.98	0.04	1,265	12,132	10	15,073	11,685	3,388	1,961	276	3,304	410	1,103	824	84
I66B	INFLM MUSCULSKTL DSR -CSCC	0.55	0.01	14,396	21,951	2	2,790	2,313	477	263	32	303	41	144	78	11
I67A	SEPTIC ARTHRITIS + CSCC	3.60	0.05	353	5,241	15	18,187	13,742	4,445	2,868	374	4,612	558	1,356	467	48
I67B	SEPTIC ARTHRITIS - CSCC	1.09	0.04	1,112	5,901	5	5,493	4,136	1,357	880	97	1,325	172	444	117	9
I68A	NON-SURG SPINAL DISORDERS +CC	1.97	0.01	10,316	76,067	7	9,968	7,431	2,537	1,228	139	2,530	300	779	207	22
I68B	NON-SURG SPINAL DISORDERS -CC	0.88	0.01	17,977	54,419	3	4,430	3,247	1,183	534	67	976	134	348	50	4
I68C	NON-SURG SPINAL DISORDERS, SD	0.28	0.02	17,650	17,650	1	1,435	1,107	328	143	18	87	13	63	9	1
I69A	BONE DISEASES AND ARTHRO +CSCC	1.83	0.02	2,428	17,926	7	9,267	6,899	2,368	1,254	135	2,269	283	755	355	33
I69B	BONE DISEASES AND ARTHROP-CSCC	0.59	0.01	12,041	27,692	2	2,985	2,229	756	424	43	543	82	228	100	8
I71A	OTH MUSCTENDIN DISRD +CSCC	1.61	0.03	1,416	8,856	6	8,109	5,983	2,126	1,025	139	1,953	256	663	208	21
I71B	OTH MUSCTENDIN DISRD -CSCC	0.50	0.01	11,215	20,372	2	2,520	1,880	640	306	36	440	56	175	43	4
I72A	SPEC MUSCTEND DISRD +CSCC	2.30	0.04	1,049	9,252	9	11,635	8,814	2,821	1,535	183	2,930	337	881	368	47
I72B	SPEC MUSCTEND DISRD -CSCC	0.63	0.02	5,559	13,961	3	3,186	2,343	843	462	50	645	82	250	61	6
I73A	AFTCARE MUSCSK IMPL +CSCC	2.16	0.04	1,045	10,499	10	10,908	7,766	3,143	1,386	144	2,733	400	943	262	24
I73B	AFTCARE MUSCSK IMPL -CSCC	0.75	0.02	4,330	16,394	4	3,784	2,788	996	574	59	722	106	301	60	5
I74Z	INJ FOREARM, WRIST, HAND, FOOT	0.50	0.01	27,178	41,630	2	2,529	1,897	632	263	34	358	45	151	17	2
I75A	INJ SH,ARM,ELB,KN,LEG,ANKL +CC	1.63	0.02	5,914	38,936	7	8,247	6,091	2,156	1,007	125	2,003	241	690	172	17
I75B	INJ SH,ARM,ELB,KN,LEG,ANKL -CC	0.55	0.01	18,582	35,558	2	2,797	2,068	728	332	45	496	68	193	21	2
I76A	OTH MUSCULOSKELETL DSRD +CSCC	1.82	0.03	1,717	11,733	7	9,188	6,909	2,279	1,116	138	2,208	250	679	240	26
I76B	OTH MUSCULOSKELETAL DSRD -CSCC	0.51	0.02	7,499	12,439	2	2,552	1,928	624	299	39	401	46	165	46	5
I77A	FRACTURE OF PELVIS+CSCC	2.34	0.02	2,548	24,708	10	11,825	8,747	3,078	1,465	203	3,321	384	926	255	26
I77B	FRACTURE OF PELVIS -CSCC	1.14	0.02	2,875	13,114	5	5,768	4,202	1,566	727	104	1,326	188	473	84	8

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
I28A	523	98	546	150	379	37	341	74	2,417	521	565	148	444	623	26	4	684	1,044	521	414	125
I28B	128	25	105	50	51	7	17	5	2,204	492	233	66	121	167	9	2	684	382	186	194	166
I29Z	47	9	130	67	53	9	10	2	3,352	715	16	4	80	138	10	2	1,055	443	192	222	138
I30Z	50	10	37	18	28	4	6	1	1,990	461	146	42	52	92	7	1	190	280	129	139	196
I31A	819	127	1,099	560	1,158	124	2,003	433	7,443	1,457	493	119	1,379	1,315	54	9	9,139	2,588	1,222	969	83
I31B	293	49	516	350	350	39	545	144	5,454	1,149	207	55	738	731	44	7	7,253	1,396	654	616	100
I32A	648	111	1,019	491	1,200	116	1,496	346	6,007	1,216	258	74	1,228	1,371	29	10	9,076	2,404	1,093	948	65
I32B	262	46	563	427	781	68	392	107	5,732	1,193	97	28	777	976	30	11	9,493	1,646	880	746	70
I32C	147	25	392	355	303	33	113	25	5,034	1,022	51	15	447	521	23	3	8,603	1,023	516	519	94
I60Z	190	43	279	130	122	11	13	3	551	114	557	163	353	626	0	0	67	649	457	349	158
I61A	309	50	483	147	264	27	388	83	100	20	717	191	468	820	8	2	75	924	668	365	122
I61B	173	38	195	68	58	7	0	-	146	34	494	141	192	298	-	-	9	311	168	174	160
I63A	224	37	271	76	140	15	130	28	277	63	772	195	215	287	2	0	12	446	228	147	121
I63B	106	21	104	31	29	4	2	0	153	34	585	157	67	90	0	0	9	146	66	60	197
I64A	566	104	443	127	973	98	206	50	164	40	433	112	612	841	76	11	25	1,029	537	423	178
I64B	263	49	135	50	384	31	9	2	142	35	305	86	290	412	69	19	16	471	212	207	194
I65A	641	101	909	199	846	59	91	22	67	15	526	139	666	867	59	21	17	1,255	536	532	131
I65B	293	46	318	79	778	57	5	1	106	23	283	75	277	377	50	8	10	495	238	231	200
I66A	482	83	507	131	1,035	82	622	134	162	36	578	146	545	653	38	7	18	1,038	472	342	146
I66B	43	8	36	12	1,134	49	6	1	76	19	88	24	60	85	28	4	4	138	48	52	228
I67A	584	96	444	138	742	55	358	75	359	79	632	163	789	939	44	6	39	1,260	664	437	124
I67B	148	33	93	35	232	16	16	3	189	45	338	96	227	281	7	1	13	351	160	165	203
I68A	415	77	472	130	241	30	131	29	51	13	824	210	320	512	5	1	11	664	378	250	259
I68B	215	42	170	52	73	10	9	2	25	6	629	172	137	220	0	0	6	273	154	122	286
I68C	85	17	43	7	19	2	0	0	289	71	262	75	24	37	3	1	8	95	25	39	253
I69A	269	48	429	118	285	31	42	10	35	7	715	182	291	487	6	1	27	632	347	221	196
I69B	78	15	94	29	232	16	7	2	58	14	310	86	88	146	7	1	15	182	96	80	281
I71A	311	52	386	104	204	24	70	17	49	10	682	176	263	416	4	1	4	561	301	209	180
I71B	101	19	92	26	43	5	11	3	115	28	418	115	64	108	10	2	6	155	73	68	276
I72A	342	64	450	130	400	38	372	83	123	27	718	176	393	575	12	2	8	801	372	268	158
I72B	108	21	73	27	66	7	7	2	110	27	404	114	97	163	4	1	6	201	102	90	248
I73A	270	57	319	117	459	58	112	30	179	47	285	78	487	753	18	3	170	736	525	312	162
I73B	69	15	100	35	129	11	10	3	357	83	207	59	135	200	17	4	43	251	123	107	220
I74Z	91	19	53	17	22	3	5	1	408	93	385	110	54	90	1	0	16	147	71	72	282
I75A	242	46	391	118	163	21	105	24	92	21	762	197	285	431	3	1	21	557	303	210	250
I75B	97	21	103	31	32	5	2	1	147	35	480	137	82	120	2	0	24	161	87	73	292
I76A	303	56	414	118	201	24	260	61	69	16	881	219	300	452	15	4	8	607	301	222	173
I76B	126	30	79	22	53	6	8	2	236	54	354	95	64	100	13	3	15	153	66	74	252
I77A	333	63	519	153	264	30	89	20	26	6	894	226	413	619	1	0	25	778	503	280	185
I77B	181	35	264	78	96	12	10	2	20	5	754	197	179	305	0	0	9	357	209	144	224

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
I78A	FRACTURE NECK FEMUR+CSCC	1.89	0.03	1,128	8,789	8	9,565	7,037	2,529	1,156	146	2,579	286	800	222	22
I78B	FRACTURE OF NECK FEMUR-CSCC	0.65	0.03	2,692	6,466	2	3,274	2,392	882	377	53	685	101	250	49	4
I79A	PATHOLOGICAL FRACTURE +CCC	3.79	0.05	377	5,412	14	19,149	14,829	4,320	2,131	235	6,456	580	1,474	519	58
I79B	PATHOLOGICAL FRACTURE -CCC	1.51	0.02	2,120	12,800	6	7,636	5,590	2,046	931	107	2,085	266	607	161	14
J01A	MICRVS TSS TRNSF SKN/BRST+CSCC	8.07	0.04	232	3,171	14	40,742	32,640	8,102	3,161	208	5,195	361	1,550	869	119
J01B	MICRVS TSS TRNSF SKN/BRST-CSCC	5.47	0.05	206	1,632	8	27,609	21,717	5,892	2,078	168	3,582	321	1,085	437	50
J06A	MAJOR PR MALIG BREAST CONDTNS	1.72	0.01	8,530	25,161	3	8,666	6,796	1,870	786	49	839	113	370	543	45
J06B	MAJOR PR NON-MALIG BREAST CNDS	1.73	0.02	2,299	5,652	2	8,756	6,835	1,921	863	45	853	107	350	114	16
J07A	MINOR PR MALIG BREAST CONDNS	0.82	0.01	2,407	2,900	1	4,153	3,245	909	297	19	258	40	152	314	28
J07B	MINOR PR NON-MALIG BREAST CNDS	0.61	0.01	4,475	4,670	1	3,078	2,387	691	209	13	126	22	97	139	15
J08A	OTH SKN GRF&/DBRDMNT PR +CC	2.92	0.02	3,657	31,800	9	14,741	11,243	3,498	1,751	190	2,997	323	931	350	33
J08B	OTH SKN GRF&/DBRDMNT PR -CC	0.90	0.01	10,670	19,282	2	4,528	3,483	1,046	474	44	448	57	201	111	10
J09Z	PERIANAL & PILONIDAL PR	0.86	0.02	2,602	5,299	2	4,358	3,310	1,049	501	37	483	71	221	76	7
J10Z	SKN,SUBC TIS & BRST PLASTIC PR	0.71	0.01	9,205	11,681	1	3,607	2,791	816	339	26	210	34	134	96	9
J11Z	OTHER SKIN, SUBC TIS & BRST PR	0.50	0.01	37,202	45,879	1	2,542	1,950	592	249	22	163	26	103	95	9
J12A	L LMB PR +ULCR/CELS+CCC	5.29	0.04	663	11,939	18	26,709	20,417	6,292	3,184	307	6,131	630	1,932	709	83
J12B	L LMB PR+ULCR/CELS-CCC+GRAFT	3.26	0.06	274	3,179	12	16,493	12,716	3,778	2,709	256	4,225	387	1,280	242	30
J12C	L LMB PR+ULCR/CELS-CCC-GRAFT	1.88	0.03	825	5,478	7	9,483	7,129	2,354	1,296	145	2,058	264	663	200	21
J13A	L LMB PR-ULC/CEL+CCC/(GFT+SCC)	3.03	0.04	506	4,907	10	15,286	11,807	3,478	2,131	197	3,392	377	1,071	379	43
J13B	L LMB PR-ULC/CEL-CCC-(GFT+SCC)	1.17	0.02	2,536	7,466	3	5,896	4,465	1,431	807	60	937	125	354	141	12
J14Z	MAJOR BREAST RECONSTRUCTIONS	4.68	0.03	475	3,529	7	23,638	18,445	5,192	2,449	115	2,730	268	914	405	45
J60A	SKIN ULCERS +CCC	3.00	0.03	1,068	13,611	13	15,153	11,214	3,939	2,096	197	4,128	476	1,273	461	49
J60B	SKIN ULCERS -CCC	1.47	0.02	2,665	19,091	7	7,404	5,268	2,136	1,209	133	1,525	312	712	174	19
J60C	SKIN ULCERS, SAMEDAY	0.18	0.02	1,432	1,432	1	927	718	209	32	8	67	13	49	15	1
J62A	MALIGNANT BREAST DISORDERS +CC	1.64	0.12	966	5,432	6	8,277	6,128	2,149	1,163	134	1,995	271	807	199	23
J62B	MALIGNANT BREAST DISORDERS -CC	0.65	0.08	230	475	2	3,273	2,558	714	420	43	442	55	207	109	11
J63A	NON-MALIGNANT BREAST DISORD+CC	1.18	0.06	444	1,864	4	5,969	4,411	1,557	796	146	1,298	208	445	137	11
J63B	NON-MALIGNANT BREAST DISORD-CC	0.61	0.02	1,819	3,756	2	3,081	2,291	789	420	45	466	73	212	84	7
J64A	CELLULITIS +CSCC	1.89	0.01	9,829	72,933	7	9,544	7,154	2,390	1,323	155	2,351	314	734	284	29
J64B	CELLULITIS -CSCC	0.79	0.01	45,353	140,099	3	4,000	2,970	1,031	616	71	859	119	309	72	7
J65A	TRAUMA TO SKN,SUB TIS&BST+CSCC	1.40	0.02	3,047	16,168	5	7,071	5,188	1,883	842	92	1,643	208	538	176	19
J65B	TRAUMA TO SKN,SUB TIS&BST-CSCC	0.46	0.01	15,197	23,118	2	2,299	1,712	587	242	29	327	45	143	27	2
J67A	MINOR SKIN DISORDERS	0.90	0.02	5,273	15,760	3	4,560	3,408	1,152	719	83	1,045	116	359	123	14
J67B	MINOR SKIN DISORDERS, SAMEDAY	0.24	0.01	9,116	9,116	1	1,207	913	294	137	14	80	12	61	30	4
J68A	MAJOR SKIN DISORDERS +CSCC	2.19	0.04	1,013	7,984	8	11,058	8,243	2,815	1,455	193	2,791	312	918	401	44
J68B	MAJOR SKIN DISORDERS -CSCC	1.02	0.02	3,333	12,404	4	5,145	3,730	1,415	976	111	1,028	141	471	141	15
J68C	MAJOR SKIN DISORDERS, SAMEDAY	0.23	0.02	5,239	5,239	1	1,141	971	171	77	6	54	9	41	33	4
J69A	SKIN MALIGNANCY +CCC	3.00	0.10	234	2,625	11	15,173	11,131	4,041	2,061	345	3,552	453	1,267	415	39
J69B	SKIN MALIGNANCY -CCC	1.41	0.06	417	2,109	5	7,113	5,193	1,920	1,153	214	1,357	256	597	179	19
J69C	SKIN MALIGNANCY, SAMEDAY	0.19	0.03	1,273	1,273	1	936	713	222	118	11	60	13	66	70	7

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
I78A	241	44	391	118	198	21	90	22	111	23	712	185	366	539	4	1	41	631	393	225	175
I78B	119	28	97	32	49	8	5	1	31	7	501	145	127	160	1	0	51	183	113	96	243
I79A	590	97	962	243	602	73	230	43	56	12	826	207	606	877	22	3	26	1,190	661	372	106
I79B	277	52	301	96	210	28	17	4	33	9	593	164	245	409	2	0	5	483	327	209	211
J01A	284	55	648	212	395	61	1,433	302	14,909	2,906	33	7	826	1,000	18	7	1,124	2,943	1,185	929	35
J01B	88	18	375	160	194	29	491	93	11,007	2,307	18	4	451	703	7	2	602	1,729	823	785	32
J06A	219	34	124	49	81	8	51	11	3,097	676	5	1	126	232	5	1	159	583	217	245	134
J06B	10	2	43	58	58	8	7	1	3,174	699	5	1	120	259	22	3	896	535	246	261	133
J07A	112	22	23	11	23	3	18	4	1,760	395	5	2	38	90	8	1	37	272	98	124	128
J07B	62	12	9	5	14	2	1	0	1,510	346	5	2	24	58	1	0	33	196	76	100	171
J08A	145	29	350	114	377	33	284	62	2,672	599	295	85	480	646	18	4	117	976	485	394	177
J08B	17	3	41	17	42	5	7	1	1,769	403	60	18	68	125	15	4	45	285	125	133	204
J09Z	6	2	30	16	50	5	2	1	1,547	366	93	26	85	144	5	1	39	295	125	127	188
J10Z	8	2	17	9	23	3	13	3	1,682	389	3	1	42	79	12	4	40	224	92	112	200
J11Z	20	4	18	8	24	3	5	1	1,052	253	24	7	34	65	15	6	27	159	67	85	227
J12A	555	92	889	254	1,181	108	758	137	2,393	503	532	126	1,185	1,252	120	15	202	1,775	915	740	108
J12B	112	19	323	111	403	43	24	4	2,116	450	152	42	732	724	25	5	75	1,035	597	373	91
J12C	147	30	230	80	294	30	35	9	1,183	262	373	103	333	446	12	1	89	577	329	274	160
J13A	171	26	408	134	369	41	185	40	2,425	512	129	35	551	612	36	4	88	1,045	526	359	102
J13B	36	5	96	37	64	9	2	0	1,632	369	23	7	128	226	18	5	46	377	201	180	174
J14Z	99	15	267	113	200	19	99	20	8,875	1,973	8	2	386	667	30	6	816	1,616	804	698	53
J60A	338	57	616	172	489	52	165	37	106	29	682	181	534	834	55	8	12	1,104	631	370	149
J60B	157	31	247	79	272	28	9	3	53	13	445	131	323	466	5	1	6	516	290	245	243
J60C	13	2	13	4	10	1	0	0	32	9	79	22	14	15	334	72	1	65	20	34	115
J62A	356	58	268	79	433	31	35	9	37	10	342	86	300	490	16	3	8	610	279	234	155
J62B	147	25	55	16	601	43	5	1	316	77	77	20	77	142	9	1	7	203	65	97	83
J63A	167	33	137	33	201	17	24	8	381	88	425	117	210	295	10	1	7	413	183	177	132
J63B	83	17	40	15	51	7	3	1	449	103	318	93	82	140	0	0	11	186	82	93	199
J64A	227	40	294	87	365	35	248	62	133	33	627	167	341	477	9	2	10	623	334	241	262
J64B	56	12	67	25	94	11	5	1	263	59	405	119	140	198	4	1	8	244	119	116	304
J65A	220	46	316	85	166	18	109	24	60	15	802	216	193	368	3	1	8	458	265	181	212
J65B	113	26	67	19	22	3	11	3	80	18	574	159	53	88	1	0	5	121	60	61	280
J67A	66	14	92	34	146	17	31	8	133	30	452	126	145	233	6	1	6	302	142	118	250
J67B	16	4	8	4	29	2	0	0	371	91	77	22	17	37	26	7	10	78	29	40	248
J68A	173	32	333	97	599	58	307	76	48	13	629	164	376	618	10	2	5	740	381	284	153
J68B	48	10	86	36	218	24	22	5	35	8	457	131	181	317	3	1	2	355	165	158	222
J68C	3	1	3	2	653	24	0	0	11	3	42	11	15	22	23	26	1	41	16	21	145
J69A	455	85	779	165	603	42	16	2	78	17	545	147	778	879	110	17	4	1,180	568	573	79
J69B	261	57	216	58	256	20	15	6	258	63	244	68	273	371	174	18	10	503	231	236	117
J69C	28	6	11	4	21	1	0	0	244	66	9	2	13	33	21	7	6	69	18	32	137

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
K01A	OR PR DIABETIC COMPLICATNS+CCC	7.31	0.03	1,248	28,925	23	36,940	28,824	8,116	4,157	480	8,557	793	2,484	1,015	111
K01B	OR PR DIABETIC COMPLICATNS-CCC	3.28	0.02	1,885	21,162	11	16,581	12,567	4,015	2,185	243	3,683	396	1,147	358	38
K02A	PITUITARY PROCEDURES +CC	6.08	0.06	230	2,534	11	30,705	24,075	6,629	2,105	252	4,359	458	1,323	1,414	194
K02B	PITUITARY PROCEDURES -CC	3.53	0.04	119	666	6	17,832	14,163	3,669	1,216	94	1,779	223	606	923	117
K03Z	ADRENAL PROCEDURES	3.53	0.05	277	1,566	6	17,844	14,348	3,496	1,676	207	2,122	246	709	693	63
K04A	MAJOR PROCS FOR OBESITY +CC	2.92	0.04	409	1,580	4	14,737	11,836	2,901	923	62	1,432	167	584	261	22
K04B	MAJOR PROCS FOR OBESITY -CC	2.08	0.02	641	1,521	2	10,485	8,326	2,159	683	55	790	112	403	107	11
K05A	PARATHYROID PROCEDURES +CSCC	3.06	0.05	244	1,517	6	15,456	12,215	3,241	1,308	90	2,244	206	733	779	74
K05B	PARATHYROID PROCEDURES -CSCC	1.35	0.02	1,182	1,736	1	6,806	5,305	1,501	641	35	553	65	251	307	37
K06A	THYROID PROCEDURES +CSCC	3.02	0.03	739	3,127	4	15,232	12,107	3,126	1,237	102	1,432	152	574	526	49
K06B	THYROID PROCEDURES -CSCC	1.69	0.01	4,313	7,621	2	8,522	6,743	1,778	695	50	619	82	277	291	28
K07Z	OBESITY PROCEDURES	1.77	0.03	419	1,653	4	8,945	6,661	2,284	1,260	83	1,138	145	372	84	19
K08Z	THYROGLOSSAL PROCEDURES	1.09	0.04	241	331	1	5,518	4,232	1,286	495	44	524	53	228	119	17
K09A	OTH ENDCRN, NUTR& META PR +CCC	6.53	0.07	236	4,432	19	32,967	25,807	7,160	3,336	355	7,446	712	2,124	1,284	155
K09B	OTH ENDCRN, NUTR& META PR+SMCC	3.03	0.08	158	1,225	8	15,320	12,036	3,284	1,750	208	2,998	242	840	457	65
K09C	OTH ENDCRN, NUTR & META PR -CC	1.99	0.06	285	1,101	4	10,031	7,806	2,225	1,028	99	1,484	129	482	274	30
K40A	ENDO/INVEST PR METAB DIS +CCC	5.42	0.07	262	4,527	17	27,401	21,194	6,206	3,273	395	6,447	624	1,684	1,200	146
K40B	ENDO/INVEST PR METAB DIS -CCC	1.99	0.05	566	3,218	6	10,029	7,524	2,505	1,586	122	2,137	242	700	343	39
K40C	ENDO/INVEST PR METAB DIS, SD	0.34	0.01	2,764	2,764	1	1,739	1,281	458	201	10	71	11	62	77	7
K60A	DIABETES + CSCC	2.29	0.02	5,093	36,179	7	11,546	8,789	2,757	1,740	158	2,326	306	847	362	39
K60B	DIABETES - CSCC	0.97	0.01	17,385	51,402	3	4,887	3,666	1,221	793	87	945	127	375	115	11
K61Z	SEVERE NUTRITIONAL DISTURBANCE	2.98	0.05	775	8,021	10	15,043	11,235	3,807	2,025	195	4,629	447	1,138	412	46
K62A	MISC METABOLIC DISORDERS +CSCC	1.63	0.01	7,631	43,543	6	8,212	6,177	2,035	1,045	124	1,954	234	603	262	29
K62B	MISC METABOLIC DISORDERS -CSCC	0.52	0.01	17,278	32,230	2	2,626	1,966	660	363	50	560	69	199	83	11
K63A	INBORN ERRORS OF METABOLISM+CC	2.01	0.11	526	2,697	5	10,133	7,631	2,503	1,889	205	1,982	164	714	406	56
K63B	INBORN ERRORS OF METABOLISM-CC	0.28	0.04	2,801	3,109	1	1,390	1,115	275	389	38	210	18	82	45	7
K64A	ENDOCRINE DISORDERS + CSCC	2.21	0.03	1,544	10,985	7	11,145	8,510	2,635	1,405	163	2,532	240	805	395	44
K64B	ENDOCRINE DISORDERS - CSCC	0.78	0.02	6,155	13,148	2	3,942	3,041	901	534	81	675	70	249	200	23
L02A	OP INS PERI CATH DIALYSIS+CSCC	3.55	0.07	428	3,728	9	17,936	13,902	4,034	2,098	348	3,616	352	1,128	573	58
L02B	OP INS PERI CATH DIALYSIS-CSCC	1.04	0.04	624	943	2	5,273	4,223	1,050	470	95	595	69	217	101	10
L03A	KDNY,URT&MJR BLDR PR NPSM +CCC	6.98	0.02	881	11,742	13	35,236	28,097	7,139	3,154	314	5,095	405	1,495	1,270	137
L03B	KDNY,URT&MJR BLDR PR NPSM +SCC	4.13	0.02	531	3,657	7	20,855	16,583	4,273	1,976	205	2,684	253	807	672	69
L03C	KDNY,URT&MJR BLDR PR NPSM-CSCC	3.03	0.02	1,168	5,139	4	15,309	12,162	3,148	1,326	151	1,645	168	564	503	51
L04A	KDY,URT&MJR BLDR PR N-NPM+CCC	4.93	0.03	1,391	16,779	12	24,900	19,529	5,371	2,609	335	4,407	364	1,378	844	93
L04B	KDY,URT&MJR BLDR PR N-NPM+SCC	2.41	0.03	1,109	5,631	5	12,191	9,538	2,653	1,174	136	1,968	178	617	287	32
L04C	KDY,URT&MJR BLDR PR N-NPM-CSCC	1.34	0.01	8,761	17,374	2	6,771	5,330	1,441	597	55	700	72	262	79	9
L05A	TRANURETH PROSTATECTOMY +CSCC	2.57	0.06	374	2,722	7	12,971	9,995	2,975	1,523	124	2,819	288	843	424	42
L05B	TRANURETH PROSTATECTOMY -CSCC	1.27	0.02	1,253	3,062	2	6,399	4,908	1,491	1,025	71	814	100	323	148	15
L06A	MINOR BLADDER PROCEDURES+CSCC	3.49	0.05	640	5,886	9	17,648	13,614	4,033	2,050	198	3,605	308	1,010	528	60
L06B	MINOR BLADDER PROCEDURES -CSCC	1.07	0.02	1,399	3,010	2	5,425	4,134	1,291	631	60	717	94	276	87	7

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
K01A	1,007	176	1,260	357	1,427	122	1,376	319	3,638	732	528	127	1,664	1,678	118	14	378	2,477	1,139	804	103
K01B	432	76	499	154	611	52	65	15	1,872	430	391	108	761	845	41	5	138	1,007	563	467	136
K02A	817	146	585	197	421	38	2,610	550	6,734	1,608	120	28	873	1,014	18	8	1,038	2,009	948	838	28
K02B	562	99	174	69	193	20	1,502	352	5,302	1,141	61	15	365	446	5	2	520	1,073	450	524	24
K03Z	208	39	216	73	307	27	1,225	267	5,386	1,059	24	5	380	407	35	5	359	1,221	430	456	54
K04A	111	20	191	111	239	26	656	132	4,909	893	10	2	265	338	37	6	1,699	893	431	318	31
K04B	50	7	79	77	93	15	179	38	3,877	776	2	0	160	229	11	2	1,582	598	331	217	36
K05A	182	30	232	76	485	41	893	234	3,934	797	111	22	397	473	7	2	205	1,079	439	383	60
K05B	15	2	33	21	59	7	166	34	2,804	594	6	2	71	177	13	2	100	430	174	207	93
K06A	81	14	139	57	189	19	1,134	246	5,487	1,102	41	9	222	343	15	2	214	1,088	399	362	101
K06B	10	2	34	22	69	9	184	42	3,871	802	7	2	93	175	14	2	158	537	216	231	132
K07Z	18	4	90	30	85	15	100	14	2,900	787	8	2	156	310	31	4	135	574	354	225	57
K08Z	7	1	17	14	33	3	53	15	2,341	519	6	1	79	158	19	3	59	373	158	178	80
K09A	1,965	293	990	299	1,337	106	1,468	318	2,065	407	588	146	1,181	1,364	191	13	619	2,355	1,014	834	57
K09B	1,208	190	284	106	335	37	261	61	2,116	427	287	69	470	579	106	11	322	1,059	413	420	51
K09C	869	148	167	67	173	16	73	18	2,046	434	159	38	273	352	112	7	245	677	285	342	71
K40A	723	117	1,141	288	1,326	91	1,716	384	656	146	748	196	897	1,216	242	54	56	2,092	823	719	80
K40B	235	48	318	96	269	25	242	55	682	169	291	78	313	494	104	30	45	687	373	308	133
K40C	13	3	15	7	20	2	-	-	593	173	2	1	25	39	101	41	19	104	67	73	150
K60A	227	42	402	105	366	40	1,031	242	52	11	749	189	344	535	12	2	12	776	349	282	236
K60B	60	12	169	47	138	14	220	55	23	5	506	141	161	239	26	6	32	315	133	132	293
K61Z	277	54	761	192	405	38	278	55	70	15	564	155	476	1,062	8	2	7	827	505	400	158
K62A	173	31	351	92	250	26	377	83	17	4	686	180	260	404	12	2	5	541	264	202	248
K62B	47	10	83	24	96	9	68	15	21	6	291	82	90	126	8	1	5	166	73	71	290
K63A	161	31	295	93	692	54	588	144	55	11	375	93	276	594	9	2	29	700	255	258	101
K63B	16	4	44	11	129	12	10	3	39	10	41	10	52	61	0	0	3	107	20	29	93
K64A	395	65	388	102	492	41	626	146	74	15	636	156	368	539	20	3	27	783	381	303	154
K64B	549	91	65	21	170	12	41	11	36	8	206	56	102	168	16	3	15	257	104	179	198
L02A	384	70	443	144	1,058	62	411	105	2,318	479	192	53	891	811	24	4	187	1,150	530	448	55
L02B	77	16	68	22	168	15	43	7	1,860	388	13	3	150	114	22	3	155	330	124	138	63
L03A	852	147	563	164	760	63	3,027	647	8,142	1,574	139	35	916	999	87	12	939	2,503	925	874	74
L03B	269	45	204	89	360	36	849	194	6,422	1,246	32	9	481	581	63	10	840	1,327	564	570	76
L03C	162	30	152	69	150	18	344	81	5,641	1,094	16	4	268	383	56	8	665	925	401	436	86
L04A	1,166	198	497	146	1,015	84	1,724	376	3,154	646	486	115	801	877	88	11	336	1,782	707	659	93
L04B	469	81	139	60	268	24	215	51	2,926	602	285	64	297	403	54	6	326	843	345	341	95
L04C	190	34	40	26	67	8	23	6	2,531	517	86	23	104	174	66	6	290	421	178	209	126
L05A	180	34	208	72	317	33	95	20	2,332	499	205	55	498	555	10	1	110	992	419	274	81
L05B	25	5	41	26	76	10	12	3	2,013	441	28	8	131	220	12	2	55	429	199	168	110
L06A	365	59	371	126	416	41	800	196	2,659	545	407	112	523	729	52	8	234	1,250	550	444	107
L06B	44	8	45	26	71	8	27	6	1,603	361	119	34	100	198	14	3	232	335	163	155	150

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
L07A	TRANSURETHRAL PROCS +CC	1.42	0.02	2,747	9,523	3	7,160	5,483	1,677	806	90	1,156	127	405	243	27
L07B	TRANSURETHRAL PROCS -CC	0.73	0.01	9,651	12,738	1	3,673	2,837	836	354	33	307	48	157	102	10
L08A	URETHRAL PROCEDURES + CC	1.30	0.06	272	794	3	6,550	5,043	1,506	678	72	917	101	367	118	9
L08B	URETHRAL PROCEDURES - CC	0.77	0.03	1,277	1,824	1	3,888	2,977	911	429	44	369	51	181	28	3
L09A	OTH KIDNY & URNRY TRACT PR+CCC	5.11	0.04	745	10,428	14	25,815	20,243	5,572	2,580	267	5,418	446	1,534	1,013	118
L09B	OTH KIDNY & URNRY TRACT PR+SCC	1.73	0.05	609	1,880	3	8,731	6,846	1,885	781	89	1,247	106	394	210	23
L09C	OTH KIDNY & URNRY TRCT PR-CSCC	1.12	0.02	2,192	3,293	2	5,661	4,474	1,187	419	49	432	50	200	67	7
L40Z	URETEROSCOPY	0.82	0.03	545	846	2	4,143	3,206	937	409	39	386	47	190	45	7
L41Z	CYSTOURETHROSCOPY, SAMEDAY	0.24	0.01	27,084	27,084	1	1,191	905	286	115	11	47	8	48	12	1
L42Z	ESW LITHOTRIPSY+URINARY STONES	0.71	0.02	1,772	1,933	1	3,587	3,096	491	171	11	119	14	64	11	1
L60A	RENAL FAILURE +CCC	3.10	0.02	4,976	51,065	10	15,660	12,087	3,572	1,654	209	3,595	399	1,061	659	69
L60B	RENAL FAILURE +SCC	1.41	0.02	4,475	21,496	5	7,103	5,403	1,700	838	113	1,643	203	502	302	26
L60C	RENAL FAILURE -CSCC	0.77	0.02	6,025	15,658	3	3,898	2,966	932	448	61	837	115	282	184	17
L61Z	HAEMODIALYSIS	0.11	0.00	1,065,617	1,065,938	1	542	409	132	33	15	143	13	56	12	1
L62A	KDNY&UNRY TRCT NEOPLASMS +CSCC	2.07	0.04	940	6,716	7	10,449	7,907	2,542	1,321	239	2,575	258	778	330	37
L62B	KDNY&UNRY TRCT NEOPLASMS -CSCC	0.66	0.04	1,243	2,408	2	3,311	2,496	816	378	65	586	86	236	112	11
L63A	KDNY & UNRY TRCT INF +CSCC	1.79	0.01	14,914	99,583	7	9,047	6,824	2,223	1,119	147	2,269	296	653	272	30
L63B	KDNY & UNRY TRCT INF -CSCC	0.70	0.01	34,885	87,383	3	3,542	2,631	911	481	62	796	107	263	82	7
L64Z	URINARY STONES & OBSTRUCTION	0.53	0.01	27,180	41,367	2	2,697	2,065	632	280	32	351	48	153	43	4
L65A	KDNY & UNRY TR SGNS&SYMPS+CSCC	1.40	0.02	3,656	18,537	5	7,097	5,335	1,762	918	112	1,823	213	552	234	22
L65B	KDNY & UNRY TR SGNS&SYMPS-CSCC	0.52	0.01	11,225	21,282	2	2,652	1,973	679	342	38	496	66	198	95	9
L66Z	URETHRAL STRICTURE	0.63	0.05	621	1,149	2	3,172	2,341	831	349	34	475	58	235	35	4
L67A	OTH KIDNY & URNRY TRCT DX+CSCC	1.65	0.02	5,005	27,535	6	8,344	6,379	1,965	1,040	140	1,956	225	606	322	35
L67B	OTH KIDNY & URNRY TRCT DX-CSCC	0.39	0.01	21,981	33,120	2	1,968	1,495	473	238	34	382	43	138	74	8
L68Z	PERITONEAL DIALYSIS	0.18	0.01	6,029	6,031	1	892	748	145	40	55	252	12	45	33	4
M01A	MAJOR MALE PELVIC PROCS +CSCC	4.18	0.02	576	3,848	7	21,135	16,966	4,169	1,969	150	2,605	257	803	731	48
M01B	MAJOR MALE PELVIC PROCS -CSCC	3.94	0.02	1,644	5,774	4	19,895	16,643	3,252	1,418	140	1,373	171	459	472	33
M02A	TRANSURETHRAL PROSTECTOMY+CSCC	2.14	0.03	1,089	5,991	6	10,831	8,309	2,522	1,404	145	1,912	231	680	353	35
M02B	TRANSURETHRAL PROSTECTOMY-CSCC	1.31	0.01	5,085	13,291	3	6,609	5,076	1,533	943	88	923	124	342	158	15
M03Z	PENIS PROCEDURES	0.93	0.03	2,064	3,030	1	4,701	3,672	1,029	442	55	431	44	178	48	6
M04Z	TESTES PROCEDURES	0.78	0.01	7,387	9,298	1	3,959	3,072	887	353	32	314	39	141	63	7
M05Z	CIRCUMCISION	0.56	0.01	4,341	4,543	1	2,816	2,168	648	283	21	149	21	91	27	3
M06A	OTH MALE REPROD SYS OR PR +CC	2.44	0.09	288	1,514	5	12,322	9,465	2,857	1,562	245	1,857	198	774	308	30
M06B	OTH MALE REPROD SYS OR PR -CC	0.81	0.04	1,363	1,695	1	4,091	3,114	978	534	37	283	46	193	65	4
M40Z	CYSTOURETHROSCOPY, SAMEDAY	0.25	0.02	2,444	2,444	1	1,268	973	295	132	9	44	7	50	42	3
M60A	MALIGNANCY, MALE REPR SYS+CSCC	2.01	0.04	824	6,206	8	10,174	7,603	2,571	1,248	224	2,529	349	801	298	32
M60B	MALIGNANCY, MALE REPR SYS-CSCC	0.44	0.02	4,424	6,183	1	2,244	1,721	522	274	26	214	37	119	142	11
M61Z	BENIGN PROSTATIC HYPERTROPHY	0.55	0.04	1,340	2,604	2	2,762	2,073	689	336	41	429	66	189	136	11
M62Z	INFLAMMATION MALE REPRD SYSTEM	0.72	0.02	4,986	12,914	3	3,631	2,730	901	518	63	686	98	269	92	9
M63Z	STERILISATION, MALE	0.42	0.01	3,804	3,811	1	2,143	1,581	562	275	17	88	15	62	28	4

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
L07A	165	28	96	35	154	16	110	25	1,670	371	138	39	173	269	35	5	77	496	209	198	136
L07B	59	10	20	11	45	5	3	1	1,435	321	41	11	50	97	41	4	70	233	97	108	152
L08A	53	10	116	37	118	12	79	20	1,962	444	113	29	144	231	16	2	95	459	179	169	80
L08B	12	3	20	12	35	5	2	1	1,563	341	27	8	58	112	32	3	53	267	112	119	132
L09A	895	155	687	211	1,426	111	1,342	297	2,389	478	500	130	1,219	1,077	39	7	279	1,776	791	626	90
L09B	175	30	128	43	292	21	19	7	2,671	552	77	19	281	307	25	4	180	563	236	251	77
L09C	83	14	57	20	103	9	35	7	2,498	516	27	7	100	127	14	2	165	350	138	167	130
L40Z	135	22	18	12	48	6	24	7	1,478	314	85	22	58	119	82	7	83	284	94	123	88
L41Z	23	4	5	3	18	2	0	0	507	127	4	1	13	33	41	6	19	79	29	36	165
L42Z	124	19	12	5	16	1	1	0	1,782	280	32	8	66	30	383	8	43	216	56	114	58
L60A	403	67	545	149	692	59	1,446	315	114	25	785	188	571	649	22	4	20	1,086	516	360	191
L60B	181	31	222	64	324	30	249	60	53	12	637	166	267	320	7	2	8	438	238	170	213
L60C	121	23	95	30	215	23	86	18	50	12	376	103	167	171	9	2	8	234	118	94	249
L61Z	3	1	14	5	51	3	0	0	0	0	1	0	96	32	0	0	0	33	15	15	134
L62A	442	79	350	101	486	34	190	35	182	34	451	117	420	536	29	5	20	775	371	255	158
L62B	269	48	63	22	155	16	10	2	327	75	126	36	99	140	5	1	29	218	89	107	158
L63A	208	38	359	100	289	32	296	64	39	9	790	203	281	419	7	1	7	607	306	206	258
L63B	97	19	72	25	71	9	11	3	17	4	570	159	109	167	1	0	3	208	109	92	303
L64Z	169	32	25	12	36	4	24	6	269	59	537	143	61	88	5	0	38	146	61	69	280
L65A	168	33	206	64	256	25	88	25	84	20	584	160	268	368	6	1	10	453	240	165	219
L65B	89	15	42	17	62	6	8	2	96	22	412	118	84	128	5	1	6	152	74	70	268
L66Z	33	7	36	17	48	6	20	5	787	179	120	34	80	145	12	1	20	231	94	106	114
L67A	237	43	224	64	475	41	298	72	149	34	503	135	320	386	13	2	14	546	268	197	216
L67B	79	14	29	12	105	9	13	3	131	31	144	41	70	86	35	9	12	124	52	53	276
L68Z	4	1	23	5	173	9	1	0	0	0	2	0	143	18	1	0	0	46	12	12	40
M01A	240	42	157	71	294	30	707	174	7,585	1,362	17	5	472	511	30	5	465	1,316	597	494	72
M01B	35	7	92	40	142	17	121	33	10,936	1,434	5	1	263	314	22	4	603	955	378	428	77
M02A	143	26	139	57	231	25	231	56	2,419	526	72	20	306	427	30	4	62	732	318	246	99
M02B	15	3	46	23	85	11	18	5	2,124	463	8	2	133	225	17	2	53	409	203	170	119
M03Z	11	2	29	15	43	6	36	10	1,967	414	50	16	70	119	8	1	118	320	118	145	154
M04Z	19	4	20	11	33	4	17	4	1,668	365	154	46	49	89	4	1	41	256	102	123	189
M05Z	2	1	13	7	12	2	1	0	1,355	321	12	4	26	61	4	1	49	176	77	101	188
M06A	508	64	547	79	307	26	144	41	1,999	442	205	51	375	456	180	109	243	850	359	362	73
M06B	187	19	134	18	42	4	0	-	1,144	282	7	2	121	144	92	37	148	277	118	152	100
M40Z	9	2	4	2	7	1	-	-	540	137	4	1	11	29	74	8	11	73	31	38	127
M60A	428	76	352	95	652	55	46	8	152	39	424	113	358	530	15	4	16	693	346	294	149
M60B	41	6	24	8	101	7	0	0	609	148	21	6	40	74	43	11	14	140	57	71	165
M61Z	43	8	36	13	44	5	15	5	519	134	147	43	74	112	23	4	10	172	76	73	157
M62Z	85	17	54	21	91	10	44	8	182	39	507	141	111	160	11	2	6	217	101	89	235
M63Z	4	1	7	5	11	2	-	-	950	271	0	0	20	51	0	0	26	122	81	104	150

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
M64Z	OTHER MALE REPRODUCTIVE SYS DX	0.43	0.04	2,537	3,536	1	2,186	1,626	560	270	32	278	37	141	42	4
N01Z	PELVIC EVSCRTN & RADCL VLVCTMY	3.63	0.06	284	2,077	7	18,361	14,231	4,130	1,951	180	2,855	442	932	686	46
N04A	HYSTERECTOMY FOR NON-MALG+CSCC	2.78	0.02	1,851	8,665	5	14,046	10,738	3,308	1,502	248	1,940	285	600	306	14
N04B	HYSTERECTOMY FOR NON-MALG-CSCC	1.93	0.00	8,835	25,439	3	9,739	7,347	2,391	1,086	185	1,054	174	402	168	11
N05A	OOPH&COM FAL TUBE PR NMAL+CSCC	2.70	0.04	554	2,609	5	13,617	10,510	3,107	1,333	194	1,799	284	575	395	22
N05B	OOPH&COM FAL TUBE PR NMAL-CSCC	1.51	0.01	2,891	5,462	2	7,616	5,794	1,822	681	117	737	124	285	204	13
N06A	FEM REP SYS RECONSTRCT PR+CSCC	2.04	0.02	1,025	3,829	4	10,308	7,852	2,456	1,182	162	1,647	227	503	115	4
N06B	FEM REP SYS RECONSTRCT PR-CSCC	1.31	0.01	5,344	10,418	2	6,616	5,024	1,591	727	116	769	126	286	37	0
N07Z	OTH UTERN & ADNEXA PR FOR NMAL	0.83	0.01	21,170	27,118	1	4,200	3,153	1,047	392	62	262	42	145	103	6
N08Z	ENDOS & LAPAR PR, FEM REPR SYS	0.87	0.01	10,279	13,108	1	4,403	3,321	1,082	385	64	252	39	147	69	5
N09Z	CONISTN,VAGINA,CERVIX&VULVA PR	0.55	0.01	18,268	21,825	1	2,762	2,072	689	272	39	186	31	110	119	9
N10Z	DXC CURETTGE, DXC HYSTEROSCOPY	0.48	0.01	18,693	19,922	1	2,420	1,798	622	203	36	99	20	81	80	6
N11Z	OTH FEMALE REPRODUCTIVE SYS PR	0.56	0.04	3,183	4,749	1	2,809	1,931	878	359	57	482	43	345	83	3
N12A	UTRN & ADNX PR FOR MAL+CCC	4.20	0.03	656	5,423	8	21,233	16,542	4,691	2,319	221	3,828	537	1,046	935	44
N12B	UTRN & ADNX PR FOR MAL-CCC	2.38	0.01	1,987	7,075	4	12,025	9,298	2,727	1,229	149	1,546	230	539	510	29
N60A	MALIGNANCY FEM REPROD SYS +CCC	2.68	0.05	495	4,473	9	13,537	10,080	3,458	1,772	256	3,412	320	1,090	391	30
N60B	MALIGNANCY FEM REPROD SYS -CCC	1.03	0.04	1,285	4,132	3	5,215	3,873	1,342	686	116	1,133	118	400	153	12
N61Z	INFECTIONS, FEMALE REPROD SYST	0.68	0.02	3,308	7,650	2	3,414	2,514	900	454	61	692	99	252	104	6
N62Z	MNSTRL & OTH FEM REPR SYS DIS	0.40	0.01	15,875	21,590	1	2,032	1,524	508	251	32	318	42	126	47	2
O01A	CAESAREAN DELIVERY +CCC	3.26	0.01	5,114	45,538	9	16,478	11,942	4,536	1,629	489	4,384	536	1,060	473	8
O01B	CAESAREAN DELIVERY +SCC	2.26	0.00	13,079	65,234	5	11,433	8,239	3,193	1,232	399	2,910	338	741	211	8
O01C	CAESAREAN DELIVERY -CSCC	1.92	0.00	47,729	174,940	4	9,712	7,016	2,696	1,093	331	2,381	267	625	107	6
O02A	VAGINAL DELIVERY +OR PR +CSCC	2.21	0.02	1,944	8,401	4	11,154	8,127	3,027	1,141	330	3,091	343	768	287	10
O02B	VAGINAL DELIVERY +OR PR -CSCC	1.52	0.01	5,276	16,030	3	7,671	5,548	2,123	897	227	2,297	240	568	100	4
O03A	ECTOPIC PREGNANCY +CC	1.66	0.02	739	1,891	3	8,371	6,341	2,030	705	117	970	134	339	305	8
O03B	ECTOPIC PREGNANCY -CC	1.05	0.01	2,876	4,767	2	5,324	4,059	1,265	461	86	521	73	209	133	4
O04A	POSTPARTUM&POST ABORTN+PR+CSCC	2.26	0.06	371	1,681	5	11,417	8,640	2,777	961	252	1,789	227	545	513	33
O04B	POSTPARTUM&POST ABORTN+PR-CSCC	0.91	0.02	1,380	2,673	2	4,605	3,417	1,188	499	94	664	80	225	140	9
O05Z	ABORTION+ OR PROC	0.50	0.00	25,484	27,413	1	2,515	1,875	640	245	33	174	22	96	99	10
O60A	VAGINAL DELIVERY +CSCC	1.52	0.01	19,651	77,757	4	7,687	5,505	2,181	893	212	2,700	296	652	193	5
O60B	VAGINAL DELIVERY -CSCC	1.01	0.00	110,599	263,646	2	5,120	3,666	1,454	677	164	1,924	216	460	71	3
O60C	VAGINAL DEL SINGLE UNCOMPL	0.75	0.00	26,366	44,732	2	3,766	2,733	1,033	553	146	1,443	161	339	36	3
O61Z	POSTPARTUM & POST ABORTN-OR PR	0.66	0.01	13,922	35,071	3	3,352	2,401	951	465	94	929	104	285	74	1
O63Z	ABORTION-OR PROC	0.36	0.01	5,872	7,040	1	1,804	1,343	461	190	32	361	45	126	116	9
O64A	FALSE LABOUR <37 WK/+CCC	0.50	0.02	9,331	18,816	2	2,524	1,805	720	340	74	839	86	233	75	3
O64B	FALSE LABOUR >=37 WK -CCC	0.17	0.02	3,994	4,277	1	857	612	245	136	30	281	32	87	19	1
O66A	ANTENATAL&OTH OBSTETRIC ADM	0.63	0.01	31,240	72,201	2	3,206	2,295	911	434	86	886	97	276	100	4
O66B	ANTENATAL&OTH OBSTETRIC ADM,SD	0.11	0.01	46,366	46,366	1	562	423	139	83	23	130	16	52	25	2
P01Z	NEONATE,D/T<5DAY ADM+SIG OR PR	1.25	0.06	267	376	1	6,305	5,092	1,213	482	43	183	10	121	205	25
P02Z	NEO,CARDIOTHORACIC/VASCULAR PR	26.54	0.08	185	5,598	30	134,062	107,728	26,334	12,455	202	7,628	355	4,034	6,026	1,277

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
M64Z	65	13	40	12	31	3	10	2	303	71	332	96	50	95	3	1	11	125	53	65	206
N01Z	206	32	358	110	361	35	385	82	5,149	1,068	9	3	330	600	20	2	98	1,422	477	523	27
N04A	122	21	111	45	160	18	249	60	4,601	1,110	31	7	287	505	4	1	143	990	369	316	138
N04B	15	3	66	30	97	13	14	3	3,739	922	6	2	167	330	1	0	109	619	264	259	156
N05A	159	27	130	46	201	19	510	103	4,189	984	166	42	254	459	-	-	100	980	340	307	110
N05B	22	4	46	20	81	10	18	4	3,113	771	80	22	97	221	0	0	67	489	193	199	150
N06A	51	9	75	38	120	14	76	17	2,949	764	7	2	221	400	3	0	479	721	276	247	127
N06B	7	2	44	29	63	9	5	0	2,334	586	3	1	107	223	0	0	383	402	184	173	164
N07Z	38	7	26	9	39	5	8	2	1,791	478	46	12	44	139	1	0	51	264	103	125	186
N08Z	16	4	24	12	37	4	12	2	1,933	511	82	22	45	123	2	0	108	275	106	123	185
N09Z	13	3	25	9	26	3	4	1	1,085	298	50	14	32	89	5	2	19	173	66	80	197
N10Z	6	1	14	6	27	3	4	1	1,102	315	12	3	22	72	2	1	31	150	55	66	177
N11Z	32	6	112	23	58	6	18	4	330	80	30	8	72	325	1	0	11	205	57	61	126
N12A	365	53	524	151	435	37	478	96	4,901	1,078	53	14	384	730	4	1	147	1,690	614	548	49
N12B	60	11	174	57	193	20	40	8	4,188	901	26	7	175	413	0	0	58	810	330	320	124
N60A	485	76	587	154	750	65	231	53	85	26	377	102	521	758	19	6	15	1,045	480	429	96
N60B	189	33	143	45	339	28	98	29	231	57	171	48	154	275	27	5	7	369	153	195	149
N61Z	101	22	43	18	81	9	37	10	67	22	508	141	107	186	2	0	2	201	94	97	223
N62Z	66	13	18	8	32	4	8	2	187	50	360	98	49	91	3	1	8	115	51	51	268
O01A	150	38	175	83	270	30	246	51	2,409	628	25	7	520	953	1	0	32	1,243	615	426	124
O01B	33	8	98	52	137	15	54	11	2,069	543	12	4	365	659	0	0	26	834	374	298	143
O01C	15	3	87	50	100	12	16	2	1,978	507	7	3	292	548	0	0	36	675	306	266	149
O02A	48	13	129	66	161	19	131	29	1,570	409	14	5	442	651	-	-	23	804	364	306	131
O02B	10	2	98	48	97	11	18	3	984	276	9	3	287	471	0	0	11	549	254	206	139
O03A	49	11	47	23	85	9	222	52	2,498	666	566	147	133	290	0	0	41	530	225	200	115
O03B	33	8	26	14	59	6	5	1	1,806	450	465	124	79	158	0	0	35	312	127	129	135
O04A	262	47	153	62	164	22	935	210	2,062	533	390	88	252	450	21	1	84	786	284	291	96
O04B	75	16	31	15	45	6	28	5	1,196	338	215	58	88	191	3	0	45	283	124	134	149
O05Z	9	2	24	7	36	3	4	1	910	275	101	27	40	85	0	0	20	160	59	72	169
O60A	26	7	114	59	111	12	36	8	288	90	13	4	334	555	0	0	3	589	285	203	154
O60B	8	2	65	35	61	6	8	1	82	23	9	3	237	376	0	0	1	378	177	133	184
O60C	8	2	47	25	43	5	7	1	21	6	7	2	173	267	-	-	1	260	116	96	188
O61Z	50	11	62	20	45	5	88	24	61	19	171	47	107	219	1	0	2	249	119	100	241
O63Z	42	10	43	14	23	2	7	2	44	13	299	83	52	93	-	-	1	108	44	45	221
O64A	42	12	40	18	36	4	0	0	13	9	22	7	119	194	0	0	0	188	92	76	171
O64B	6	1	9	4	12	2	-	-	6	2	8	3	38	63	-	-	0	64	25	27	159
O66A	64	15	56	22	51	6	17	4	88	26	148	44	122	223	1	0	3	225	115	95	254
O66B	11	2	9	4	8	1	0	0	9	2	42	12	39	28	0	0	1	37	11	13	264
P01Z	85	21	39	19	42	3	795	174	2,647	461	8	3	46	118	-	-	30	364	106	275	20
P02Z	2,641	540	3,517	509	1,638	185	43,538	8,958	13,380	2,698	80	27	3,008	2,557	601	214	1,289	9,990	1,971	4,744	5

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
P03Z	NEO,ADMWT 1000-1499G+SIG OR PR	19.58	0.02	929	46,157	50	98,915	75,900	23,014	6,988	499	3,874	387	1,430	1,670	86
P04Z	NEO,ADMWT 1500-1999G+SIG OR PR	11.95	0.04	434	14,685	34	60,386	47,524	12,862	5,091	417	3,004	221	1,277	1,363	97
P05Z	NEO,ADMWT 2000-2499G+SIG OR PR	12.04	0.06	347	9,764	28	60,842	47,757	13,085	5,781	490	4,682	209	1,822	1,674	242
P06A	NEO,ADMWT >2499G+SIG OR PR+MMP	13.57	0.04	656	16,970	26	68,568	54,376	14,192	7,143	240	5,113	230	2,187	2,301	447
P06B	NEO,ADMWT >2499G+SIG OR PR-MMP	5.09	0.05	470	5,086	11	25,738	19,936	5,803	2,230	230	2,441	123	831	705	89
P60A	NEO,D/TR<5D ADM-SIG PR+NEWBORN	0.57	0.02	3,127	5,348	2	2,903	2,285	617	386	58	446	40	154	170	11
P60B	NEO,D/TR<5D ADM-SIG PR-NEWBORN	0.85	0.03	1,810	3,501	2	4,273	3,268	1,005	550	54	583	32	226	182	20
P61Z	NEONATE, ADMISSION WT <750 G	43.99	0.05	333	26,925	81	222,227	170,831	51,396	11,993	577	5,945	585	2,105	4,196	385
P62Z	NEONATE, ADMISSION WT 750-999G	31.48	0.03	625	40,731	65	159,029	122,507	36,522	8,810	320	3,460	431	1,800	2,700	284
P63Z	NEO,ADMWT 1000-1249G-SIG OR PR	7.70	0.04	358	9,292	26	38,874	29,602	9,272	3,826	363	4,371	377	1,211	547	34
P64Z	NEO,ADMWT 1250-1499G-SIG OR PR	7.48	0.02	912	24,685	27	37,790	29,027	8,763	4,839	758	6,024	490	1,434	472	15
P65A	NEO,ADMWT 1500-1999G-SG OR+MMP	6.48	0.04	392	9,201	23	32,727	25,491	7,236	4,010	640	4,266	263	1,177	658	50
P65B	NEO,ADMWT 1500-1999G-SG OR+MJP	5.38	0.02	1,133	24,415	22	27,180	20,944	6,236	3,702	680	5,315	401	1,208	402	7
P65C	NEO,ADMWT 1500-1999G-SG OR+OTP	4.38	0.02	1,489	27,431	18	22,129	16,696	5,434	3,394	561	5,289	453	1,252	282	9
P65D	NEO,ADMWT 1500-1999G-SG OR-PRB	4.04	0.03	1,255	19,423	15	20,422	15,334	5,088	3,858	572	6,446	508	1,389	117	6
P66A	NEO,ADMWT 2000-2499G-SG OR+MMP	4.71	0.04	467	7,904	17	23,795	18,628	5,166	3,647	410	3,961	284	1,057	554	53
P66B	NEO,ADMWT 2000-2499G-SG OR+MJP	3.65	0.02	1,498	20,556	14	18,427	14,055	4,373	2,811	534	3,926	303	950	301	19
P66C	NEO,ADMWT 2000-2499G-SG OR+OTP	2.63	0.01	4,794	50,242	10	13,298	9,982	3,316	2,294	402	3,602	298	803	166	10
P66D	NEO,ADMWT 2000-2499G-SG OR-PRB	1.18	0.02	2,557	11,747	5	5,985	4,310	1,675	1,075	166	1,686	147	484	59	5
P67A	NEO,ADMWT >2499G-SIG OR PR+MMP	3.23	0.02	2,182	22,036	10	16,329	12,719	3,610	2,193	286	2,735	183	787	467	53
P67B	NEO,ADMWT >2499G-SIG OR PR+MJP	1.86	0.02	7,450	46,308	6	9,388	7,155	2,233	1,423	256	2,170	168	573	204	16
P67C	NEO,ADMWT >2499G-SIG OR PR+OTP	1.23	0.01	16,553	67,230	4	6,230	4,670	1,560	1,000	186	1,749	140	416	143	13
P67D	NEO,ADMWT >2499G-SIG OR PR-PRB	0.72	0.01	19,250	46,961	2	3,613	2,609	1,004	623	88	1,107	93	326	51	4
Q01Z	SPLENECTOMY	3.69	0.04	304	2,058	7	18,618	14,772	3,846	1,452	248	2,226	254	751	822	74
Q02A	OTH OR PR BLD&BLD FRM ORG+CSCC	4.52	0.05	694	8,344	12	22,842	17,662	5,180	2,386	252	4,596	403	1,333	979	125
Q02B	OTH OR PR BLD&BLD FRM ORG-CSCC	0.95	0.02	1,762	3,349	2	4,783	3,713	1,070	452	51	501	55	218	308	37
Q60A	RETICLENDO&IMNTY DIS+CSCC	2.47	0.02	5,292	36,779	7	12,488	9,768	2,720	1,158	234	3,033	265	802	652	89
Q60B	RETICLENDO&IMNTY DIS-CSCC+MAL	0.87	0.02	1,749	5,160	3	4,401	3,353	1,048	465	102	1,121	126	314	235	26
Q60C	RETICLENDO&IMNTY DIS-CSCC-MAL	0.29	0.01	21,352	29,457	1	1,459	1,109	350	199	26	254	31	117	105	17
Q61A	RED BLOOD CELL DISDERS + CSCC	1.35	0.02	8,602	40,023	5	6,818	5,168	1,650	797	103	1,491	185	486	343	39
Q61B	RED BLOOD CELL DISDERS - CSCC	0.30	0.01	52,416	65,215	1	1,524	1,167	358	167	20	242	31	109	84	11
Q62Z	COAGULATION DISORDERS	0.63	0.02	8,317	20,028	2	3,185	2,404	780	407	63	655	76	241	193	25
R01A	LYMPHMA&LEUKMA+MJR OR PR +CSCC	9.95	0.04	391	8,425	22	50,261	40,172	10,089	3,827	752	8,780	788	2,511	2,644	317
R01B	LYMPHMA&LEUKMA+MJR OR PR -CSCC	2.36	0.06	331	1,493	5	11,921	9,408	2,513	1,009	130	1,617	147	504	852	91
R02A	OTH NPLSTC DSRD+MJR OR PR+CCC	5.76	0.04	313	4,293	14	29,122	23,009	6,113	2,714	232	4,599	398	1,384	988	100
R02B	OTH NPLSTC DSRD+MJR OR PR+SMCC	3.44	0.03	365	2,606	7	17,387	13,542	3,845	1,606	138	2,294	256	838	513	47
R02C	OTH NPLSTC DSRD+MJR OR PR-CC	2.36	0.02	1,076	5,211	5	11,934	9,351	2,582	1,108	94	1,522	164	524	352	29
R03A	LYMPHMA LEUKMA+OTH OR PR +CSCC	7.61	0.03	829	15,924	19	38,427	30,333	8,093	3,162	739	7,748	664	2,112	2,542	285
R03B	LYMPHMA LEUKMA+OTH OR PR -CSCC	1.29	0.03	1,453	3,843	3	6,508	5,133	1,375	468	72	803	97	286	678	71
R04A	OTH NPLSTC DSRD+OTH OR PR +CC	2.21	0.06	676	3,954	6	11,175	8,641	2,534	1,185	124	1,984	213	630	481	41

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
P03Z	1,220	250	678	194	1,368	149	50,674	13,698	176	35	39	11	691	1,234	0	-	18	8,077	2,462	3,005	38
P04Z	1,025	177	533	172	1,024	108	28,750	7,151	484	98	24	7	625	938	0	-	41	4,853	1,175	1,731	32
P05Z	1,030	210	1,098	276	1,248	124	23,948	5,511	1,620	306	39	9	787	1,408	56	20	100	4,863	1,203	2,087	38
P06A	1,445	293	1,252	314	1,578	199	25,294	5,534	2,720	527	72	20	886	1,760	-	-	280	5,658	1,140	1,936	31
P06B	424	94	399	101	363	39	8,916	2,090	1,508	306	211	57	335	610	0	-	68	1,914	611	1,043	46
P60A	96	20	20	9	30	3	494	127	11	4	5	1	352	120	0	0	2	205	64	75	135
P60B	96	20	46	25	53	4	984	243	65	13	120	40	197	176	-	-	4	312	81	148	161
P61Z	2,903	565	1,742	358	2,880	279	121,017	32,467	343	64	66	21	1,345	2,072	-	-	39	18,418	5,314	6,549	28
P62Z	2,605	423	1,173	249	2,068	214	86,897	22,600	239	46	69	21	795	1,600	0	0	26	13,229	4,039	4,930	33
P63Z	408	104	292	109	527	74	15,458	4,279	20	4	79	25	596	1,035	0	-	7	3,174	796	1,156	69
P64Z	346	83	319	118	488	59	12,184	3,171	13	2	15	4	847	1,136	0	0	3	3,169	821	980	81
P65A	403	85	392	82	467	54	11,385	3,012	38	7	13	4	690	817	0	-	4	2,833	597	781	56
P65B	247	57	244	97	302	36	7,444	1,964	11	2	11	3	695	897	0	-	2	2,192	590	671	82
P65C	93	26	161	90	217	27	4,445	1,183	12	3	8	3	713	999	0	-	1	1,804	512	593	98
P65D	48	10	149	71	172	25	1,936	510	5	2	9	3	720	1,094	0	0	1	1,653	598	520	117
P66A	326	60	487	103	280	32	6,362	1,579	34	6	22	6	558	775	0	-	2	2,226	436	536	75
P66B	127	28	205	74	181	23	4,177	1,081	8	2	25	8	566	703	22	8	1	1,445	418	483	105
P66C	33	9	106	51	102	14	1,988	512	10	4	16	4	460	662	0	0	0	1,029	353	369	135
P66D	13	3	47	34	43	7	502	119	22	8	40	12	236	381	0	-	1	486	206	208	149
P67A	290	55	324	87	217	25	4,212	1,005	63	12	73	19	444	550	43	15	3	1,415	332	441	104
P67B	95	20	159	51	86	11	1,671	397	31	7	112	32	289	403	0	0	2	734	226	253	140
P67C	33	8	55	27	48	6	806	187	21	9	49	13	198	315	1	0	1	458	174	175	142
P67D	14	3	31	21	29	3	155	35	7	4	114	32	132	238	1	0	0	268	126	108	194
Q01Z	290	45	283	88	491	38	2,031	516	4,314	901	449	108	339	426	9	2	436	1,131	456	439	84
Q02A	781	147	553	192	1,811	139	1,152	246	1,684	350	574	146	743	973	131	26	270	1,471	757	619	110
Q02B	136	24	42	19	65	6	47	14	1,389	298	94	28	88	141	100	22	70	308	120	148	160
Q60A	255	47	302	94	1,863	110	290	64	71	14	616	162	394	519	13	3	7	776	364	289	186
Q60B	83	14	89	31	359	24	6	2	19	4	425	115	145	193	5	1	4	263	129	102	155
Q60C	26	5	19	9	118	7	14	3	44	10	115	30	60	65	11	2	2	92	39	38	237
Q61A	157	28	210	64	409	35	154	36	132	32	567	144	222	315	29	7	10	435	224	166	241
Q61B	17	3	23	10	172	11	3	1	124	30	108	29	49	63	28	7	4	97	42	40	286
Q62Z	60	11	62	22	211	15	53	14	38	9	305	84	101	147	8	2	8	201	96	80	224
R01A	1,882	310	1,463	451	5,626	376	2,732	622	4,642	1,003	517	133	1,474	1,556	92	20	1,998	3,149	1,379	1,216	76
R01B	445	72	190	72	444	36	143	40	2,741	590	156	44	252	382	17	3	577	691	307	368	82
R02A	545	95	724	186	631	59	1,988	392	6,662	1,363	158	34	660	868	74	15	462	2,192	881	716	65
R02B	165	31	254	90	223	25	548	122	5,561	1,128	33	11	402	543	20	4	310	1,211	518	498	77
R02C	73	13	137	51	131	13	218	49	4,301	900	13	3	224	337	7	1	193	782	347	347	110
R03A	1,690	271	1,072	335	5,238	294	1,015	200	2,039	422	515	125	1,101	1,442	94	11	736	2,440	1,132	1,002	98
R03B	343	58	86	30	412	29	34	8	1,442	307	93	26	114	184	14	3	79	411	162	196	140
R04A	477	76	305	84	347	25	211	45	1,884	407	222	53	318	442	42	18	108	776	349	328	105

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
R04B	OTH NPLSTC DSRD+OTH OR PR -CC	0.92	0.03	1,112	1,663	1	4,667	3,520	1,147	703	20	222	30	170	121	9
R60A	ACUTE LEUKAEMIA + CCC	8.59	0.02	1,763	39,552	22	43,402	34,993	8,408	3,360	883	10,411	706	2,540	2,844	342
R60B	ACUTE LEUKAEMIA - CCC	0.87	0.02	9,173	22,218	2	4,389	3,477	912	340	60	1,010	67	288	362	57
R61A	LYMPHMA &N-ACUTE LEUKAEMIA+CCC	5.20	0.02	2,098	33,011	16	26,276	20,610	5,666	2,163	556	6,136	566	1,716	1,591	165
R61B	LYMPHMA &N-ACUTE LEUKAEMIA-CCC	1.76	0.01	7,310	34,099	5	8,888	6,977	1,911	697	152	1,786	188	577	470	53
R61C	LYMPHOMA/N-A LEUKAEMIA,SAMEDAY	0.24	0.01	20,376	20,376	1	1,208	956	253	75	11	124	13	93	179	31
R62A	OTHER NEOPLASTIC DISORDERS +CC	1.60	0.04	1,575	8,562	5	8,101	6,152	1,949	1,028	148	1,881	191	627	245	28
R62B	OTHER NEOPLASTIC DISORDERS -CC	0.63	0.04	916	1,781	2	3,164	2,400	764	339	47	476	66	203	122	12
R63Z	CHEMOTHERAPY	0.29	0.00	139,593	139,603	1	1,490	1,267	223	90	19	124	17	75	19	2
R64Z	RADIOTHERAPY	0.54	0.03	1,749	1,753	1	2,703	2,003	700	132	68	153	14	162	11	0
S60Z	HIV, SAMEDAY	0.28	0.05	661	661	1	1,415	1,183	231	247	24	111	11	155	77	7
S65A	HIV-RELATED DISEASES +CCC	7.22	0.06	288	5,206	18	36,472	28,755	7,718	5,129	500	6,465	557	2,386	2,552	391
S65B	HIV-RELATED DISEASES +SCC	3.64	0.08	227	2,331	10	18,373	14,439	3,934	2,580	347	3,742	332	1,413	1,261	171
S65C	HIV-RELATED DISEASES -CSCC	2.18	0.06	337	1,909	6	11,026	8,696	2,330	1,548	167	2,132	171	867	756	94
T01A	OR PROC INFECT& PARAS DIS+CCC	7.88	0.02	2,136	46,735	22	39,827	31,437	8,390	4,147	511	7,764	679	2,224	1,421	157
T01B	OR PROC INFECT& PARAS DIS+SMCC	3.08	0.03	1,258	12,597	10	15,572	11,997	3,576	2,076	235	3,292	317	966	384	38
T01C	OR PROC INFECT & PARAS DIS-CC	1.94	0.03	1,399	8,331	6	9,787	7,479	2,307	1,310	150	1,901	203	611	216	21
T40Z	INFECT&PARAS DIS+VENT SUPPORT	7.34	0.05	311	3,460	11	37,063	29,568	7,494	2,082	195	2,534	254	922	1,799	196
T60A	SEPTICAEMIA + CCC	3.05	0.01	8,448	84,074	10	15,409	11,872	3,537	1,667	184	3,360	356	994	614	62
T60B	SEPTICAEMIA - CCC	1.53	0.01	7,313	38,331	5	7,732	5,811	1,921	939	113	1,829	228	540	259	24
T61A	POSTOP & POSTTRAUM INFECT+CSCC	1.89	0.02	2,226	16,773	8	9,570	7,243	2,327	1,344	161	2,306	276	728	294	27
T61B	POSTOP & POSTTRAUM INFECT-CSCC	0.92	0.01	6,688	26,016	4	4,653	3,465	1,188	758	86	1,097	137	379	101	8
T62A	FEVER OF UNKNOWN ORIGIN + CC	1.35	0.02	4,466	19,695	4	6,826	5,225	1,600	800	128	1,655	190	491	294	31
T62B	FEVER OF UNKNOWN ORIGIN - CC	0.65	0.01	5,451	11,356	2	3,298	2,471	827	440	55	709	86	238	116	11
T63Z	VIRAL ILLNESS	0.63	0.01	18,416	34,821	2	3,164	2,381	783	457	57	679	72	224	96	9
T64A	OTH INFECTOUS&PARSTIC DIS +CCC	4.28	0.03	1,165	16,029	14	21,614	17,018	4,597	2,494	360	4,736	537	1,427	826	82
T64B	OTH INFECTOUS&PARSTIC DIS+SMCC	1.81	0.03	1,355	8,939	7	9,152	7,040	2,111	1,279	189	2,100	259	662	313	30
T64C	OTH INFECTOUS & PARSTIC DIS-CC	0.89	0.03	1,874	6,434	3	4,518	3,440	1,077	680	105	1,026	139	343	147	12
U40Z	MENTAL HEALTH TREAT,SAMEDY+ECT	0.18	0.01	12,162	12,162	1	895	648	247	72	13	104	13	88	1	0
U60Z	MENTAL HEALTH TREAT,SAMEDY-ECT	0.17	0.01	20,358	20,358	1	844	543	301	105	17	94	14	142	10	1
U61A	SCHIZOPHRENIA DISORDERS+MHLS	5.03	0.01	15,144	355,750	23	25,432	18,670	6,762	3,409	1,423	8,238	554	2,458	274	78
U61B	SCHIZOPHRENIA DISORDERS-MHLS	3.35	0.01	11,648	173,864	15	16,933	12,093	4,840	2,136	432	5,045	365	1,737	197	82
U62A	PAR&ACUTE PSYCH DSRD+CSCC/MHLS	3.64	0.02	2,827	44,484	16	18,373	13,650	4,723	2,349	691	6,438	435	1,810	161	16
U62B	PAR&ACUTE PSYCH DSRD-CSCC-MHLS	2.18	0.03	2,666	23,391	9	11,013	7,949	3,064	1,429	244	3,422	251	1,094	94	14
U63A	MJR AFFECT DSRD A>69/+CSCC	5.76	0.02	3,075	80,704	26	29,073	21,542	7,531	3,426	1,140	9,586	666	2,581	306	31
U63B	MAJOR AFFECTIVE DSRD A<70-CSCC	3.38	0.01	17,609	244,029	14	17,060	12,497	4,562	2,159	667	5,667	392	1,641	144	19
U64Z	OTH AFFECT & SOMATOFORM DSRD	1.90	0.01	9,737	71,463	7	9,597	7,006	2,591	1,262	266	3,122	247	927	85	5
U65Z	ANXIETY DISORDERS	1.21	0.02	7,760	34,002	4	6,116	4,541	1,575	709	156	1,876	320	573	63	5
U66Z	EATING & OBSESSV-COMPULSV DSRD	5.06	0.02	2,556	46,329	18	25,541	19,023	6,518	3,415	1,015	8,763	460	2,231	340	50
U67Z	PERSONLTY DSRD&ACUTE REACTIONS	1.49	0.01	21,047	113,258	5	7,539	5,498	2,040	966	244	2,427	167	684	71	12

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
R04B	157	18	130	45	31	3	4	1	1,504	410	18	4	55	117	95	81	63	411	113	131	119
R60A	992	166	1,046	313	9,092	387	1,072	223	445	90	439	106	1,389	1,498	84	10	57	2,635	1,262	1,011	85
R60B	52	10	83	32	863	47	13	2	151	32	60	16	138	185	4	1	13	275	116	114	136
R61A	842	135	814	226	4,194	244	818	170	146	33	497	121	826	1,042	62	9	26	1,724	823	633	145
R61B	244	44	191	65	2,220	139	26	6	84	18	222	59	248	361	20	8	12	515	253	230	204
R61C	30	5	7	6	263	14	1	0	55	14	5	1	61	42	42	6	2	76	23	29	196
R62A	294	48	350	86	500	38	132	35	150	33	286	74	319	396	63	28	12	601	251	256	140
R62B	194	39	70	24	227	21	1	0	409	101	101	28	89	122	36	8	23	200	95	111	160
R63Z	15	2	15	9	846	51	0	0	10	3	1	0	50	37	2	0	1	69	18	16	132
R64Z	398	8	33	8	51	3	-	-	198	45	2	1	45	94	682	224	2	180	38	148	17
S60Z	8	2	12	6	418	10	-	-	82	15	27	8	41	40	6	4	1	60	27	17	42
S65A	809	162	1,347	305	4,867	271	1,299	274	387	82	828	188	1,193	1,490	77	20	107	2,620	1,324	841	46
S65B	325	69	579	120	2,113	130	130	23	282	51	787	187	633	774	3	1	11	1,209	664	437	44
S65C	223	45	256	65	1,410	67	29	10	158	30	736	165	282	461	6	1	15	671	433	228	59
T01A	1,229	208	990	287	2,882	208	3,549	780	3,230	682	704	168	1,366	1,466	81	12	375	2,596	1,186	927	128
T01B	329	60	291	110	628	50	328	80	2,055	436	481	132	568	670	46	8	134	943	513	404	134
T01C	189	35	140	58	264	23	71	14	1,746	371	356	100	315	408	5	1	91	592	323	275	146
T40Z	995	178	859	180	1,023	54	15,096	3,263	559	52	1,109	248	409	602	34	5	52	2,564	773	1,025	79
T60A	440	71	456	127	799	66	1,600	363	97	20	899	223	443	616	23	4	16	1,034	520	356	214
T60B	209	38	170	58	293	28	353	85	55	13	738	197	252	361	8	1	8	465	268	203	267
T61A	272	49	220	71	476	34	274	65	177	41	510	134	387	475	12	2	16	657	329	231	194
T61B	105	20	77	32	136	12	7	2	130	30	425	121	178	246	6	1	7	280	150	124	266
T62A	212	38	165	51	385	32	70	15	28	6	710	179	232	296	8	2	4	426	212	166	216
T62B	75	14	45	19	76	11	9	2	10	3	584	155	104	153	5	2	5	188	93	90	266
T63Z	48	10	40	18	91	9	22	5	37	2	550	156	86	145	1	0	2	184	86	80	268
T64A	639	107	608	172	2,569	184	1,123	247	160	38	814	183	805	909	43	7	19	1,461	603	462	139
T64B	257	46	183	63	725	48	172	43	93	22	568	150	383	421	23	5	17	601	277	222	170
T64C	106	19	68	31	253	18	22	7	69	15	414	115	191	208	12	3	6	270	127	111	210
U40Z	1	0	13	7	6	0	-	-	251	70	0	0	52	48	41	7	8	66	17	18	71
U60Z	13	4	16	7	13	2	1	0	12	3	169	51	24	42	1	0	1	60	24	17	260
U61A	56	11	1,069	255	632	77	433	149	86	23	324	90	852	1,383	24	3	3	1,900	887	742	103
U61B	43	8	519	136	382	47	667	258	47	13	335	97	548	1,114	7	1	3	1,410	670	634	210
U62A	99	18	685	179	378	55	259	69	49	17	414	111	551	1,011	5	1	2	1,374	681	514	122
U62B	73	14	331	91	180	26	230	91	10	3	483	139	381	733	4	1	2	905	406	361	207
U63A	200	37	1,798	398	512	74	311	103	609	139	333	89	904	1,479	74	10	23	2,291	1,195	758	173
U63B	53	10	783	186	263	39	311	103	139	33	336	95	523	989	18	2	6	1,289	625	569	226
U64Z	50	11	356	98	128	18	71	24	40	9	385	114	315	585	9	1	4	744	392	328	276
U65Z	74	16	259	59	78	10	82	22	21	6	375	104	196	284	29	7	1	420	212	159	269
U66Z	72	16	1,677	586	368	42	233	46	31	8	335	88	779	1,264	5	1	20	2,033	831	833	140
U67Z	25	5	308	88	102	15	102	31	36	6	364	107	219	439	4	1	2	566	284	265	254

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
U68Z	CHILDHOOD MENTAL DISORDERS	3.32	0.05	731	6,377	9	16,762	12,809	3,953	1,994	673	6,797	377	1,390	86	10
V60A	ALCOHOL INTOXICATN&WITHDRWL+CC	1.02	0.03	2,965	10,387	4	5,148	3,798	1,349	611	78	1,147	133	389	120	12
V60B	ALCOHOL INTOXICATN&WITHDRWL-CC	0.46	0.02	12,282	21,290	2	2,312	1,637	675	277	38	454	54	205	33	3
V61Z	DRUG INTOXICTN & WITHDRAWAL	1.61	0.02	7,308	44,767	6	8,136	6,043	2,092	995	294	2,570	176	733	95	9
V62A	ALCOHOL USE DSRD & DEPENDENCE	1.48	0.02	5,749	33,493	6	7,499	5,608	1,891	886	262	2,577	164	745	165	8
V62B	ALCOHOL USE DSRD & DEPENDNC+SD	0.23	0.02	969	969	1	1,153	891	263	279	138	284	25	64	8	0
V63Z	OPIOID USE DSRD & DEPENDENCE	0.96	0.03	1,310	6,342	5	4,831	3,569	1,262	679	244	1,446	72	552	164	7
V64Z	OTHER DRUG USE DISORD & DEPEND	0.93	0.02	3,077	13,674	4	4,712	3,449	1,263	638	153	1,349	77	539	95	6
W01Z	VENTILN/CRANIA MULT SIG TRAUMA	11.92	0.03	560	10,558	19	60,225	47,702	12,523	3,782	417	5,550	459	1,860	1,325	171
W02A	HIP,FEMR&LIMB PR MLT TRMA+CSCC	8.46	0.04	580	9,926	17	42,729	33,780	8,949	3,183	559	6,263	503	1,834	823	105
W02B	HIP,FEMR&LIMB PR MLT TRMA-CSCC	5.85	0.04	242	2,498	10	29,544	22,967	6,576	2,282	331	3,849	344	1,142	330	50
W03Z	ABDOMINAL PR MULT SIG TRAUMA	6.02	0.04	279	3,045	11	30,422	23,907	6,515	2,368	219	3,827	415	1,220	768	77
W04A	OTH OR PR MULT SIG TRAUMA+CSCC	9.42	0.05	341	6,327	19	47,580	38,003	9,577	3,331	574	6,925	577	1,985	904	108
W04B	OTH OR PR MULT SIG TRAUMA-CSCC	5.05	0.04	309	2,765	9	25,486	20,071	5,415	1,852	242	3,139	262	952	247	32
W60Z	MULTIPLE TRAUMA, DIED/TRANSF<5	1.83	0.05	699	1,192	2	9,259	7,387	1,872	495	55	374	47	199	345	29
W61A	MULTIPLE TRAUMA-SIGNIF PR+CSCC	4.16	0.03	663	8,224	12	21,035	16,036	5,000	2,174	270	4,545	456	1,307	496	54
W61B	MULTIPLE TRAUMA-SIGNIF PR-CSCC	2.25	0.03	914	5,701	6	11,350	8,517	2,834	1,123	153	2,242	269	631	155	16
X02A	MVTT/SKIN GFT+CSCC INJUR HAND	2.25	0.04	941	3,781	4	11,367	8,986	2,381	802	78	1,315	99	463	85	10
X02B	SKIN GRAFT INJURIES HAND -CSCC	0.84	0.03	1,356	2,053	2	4,221	3,246	976	333	22	374	38	163	13	2
X04A	OTHER PR INJ LWR LMB +CSCC	3.27	0.05	672	6,320	9	16,529	12,654	3,875	1,856	264	3,188	303	982	399	32
X04B	OTHER PR INJ LOWR LIMB -CSCC	1.05	0.02	2,618	5,398	2	5,299	4,054	1,245	482	58	679	68	240	29	3
X05A	OTH PR FOR INJURIES TO HAND+CC	1.64	0.03	1,202	4,879	4	8,306	6,257	2,049	827	122	1,334	126	472	106	10
X05B	OTH PR FOR INJURIES TO HAND-CC	0.71	0.01	6,963	9,231	1	3,597	2,741	857	281	29	305	36	143	10	1
X06A	OTHER PR OTHER INJURIES + CSCC	2.92	0.02	3,836	30,977	8	14,747	11,380	3,366	1,617	174	2,668	269	825	366	44
X06B	OTHER PR OTHER INJURIES - CSCC	1.01	0.01	9,739	20,345	2	5,126	3,926	1,200	510	54	613	68	239	49	4
X07A	SK GRAFT INJ-HAND+MIC TT/+CSCC	4.43	0.03	1,030	13,931	14	22,398	17,115	5,283	2,661	322	4,548	389	1,504	371	46
X07B	SK GRAFT INJ-HAND-MIC TT-CSCC	2.07	0.03	911	5,688	6	10,441	7,952	2,489	1,334	130	2,095	165	698	96	10
X40Z	INJ,POIS,TOX EFF DRUG W VENT	4.25	0.02	978	6,416	7	21,478	17,017	4,461	1,332	159	1,382	156	573	696	75
X60A	INJURIES + CSCC	1.35	0.01	7,781	41,660	5	6,819	5,006	1,813	839	89	1,594	193	535	152	16
X60B	INJURIES - CSCC	0.45	0.01	41,687	63,618	2	2,266	1,685	581	245	30	312	44	147	25	2
X61Z	ALLERGIC REACTIONS	0.36	0.02	6,822	8,251	1	1,800	1,369	431	210	22	235	31	100	33	3
X62A	POISNG/TOXC EFF DRUGS +CSCC	1.71	0.02	6,686	33,941	5	8,638	6,609	2,028	972	194	1,619	158	535	212	20
X62B	POISNG/TOXC EFF DRUGS -CSCC	0.60	0.01	29,691	59,010	2	3,051	2,282	769	376	75	579	55	220	50	4
X63A	SEQUELAE OF TREATMNT+CSCC	1.60	0.02	3,895	21,741	6	8,063	6,117	1,946	1,082	117	1,770	201	579	249	25
X63B	SEQUELAE OF TREATMNT-CSCC	0.60	0.01	13,032	28,074	2	3,042	2,270	772	428	42	593	71	217	61	5
X64A	OTH INJ, POIS & TOX EF DX+CSCC	1.60	0.04	1,052	6,065	6	8,067	5,974	2,093	886	97	1,734	194	573	185	24
X64B	OTH INJ, POIS &TOX EFF DX-CSCC	0.43	0.03	4,916	7,140	1	2,182	1,622	560	224	41	393	50	149	29	2
Y01Z	VENT BURN&SEV FULL THICK BURN	36.52	0.07	140	5,204	37	184,495	148,206	36,289	6,412	1,020	16,807	963	3,657	5,732	937
Y02A	OTHER BURNS + SKIN GRAFT +CC	6.41	0.03	858	12,254	14	32,394	25,042	7,352	2,339	419	7,652	410	1,761	640	53
Y02B	OTHER BURNS + SKIN GRAFT -CC	1.85	0.03	1,851	7,261	4	9,343	7,032	2,311	653	112	1,976	138	471	107	7

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
U68Z	50	10	804	113	138	24	218	64	44	9	395	106	534	797	1	0	2	1,104	541	481	108
V60A	94	19	209	61	88	10	192	47	21	5	653	177	150	259	5	1	6	347	171	143	205
V60B	25	5	66	25	28	4	25	7	5	1	427	130	65	125	0	0	1	165	73	71	268
V61Z	39	8	285	70	130	16	209	64	6	2	470	134	280	427	2	0	0	582	282	255	215
V62A	43	9	428	85	115	18	36	10	6	2	245	68	266	409	1	0	1	491	256	205	218
V62B	5	1	9	2	14	4	1	0	1	0	145	42	24	14	0	0	0	59	17	15	102
V63Z	16	3	222	37	70	14	57	22	13	2	102	29	204	248	2	0	1	348	159	118	114
V64Z	17	3	205	37	64	10	49	18	6	1	216	64	192	266	2	0	0	362	168	177	179
W01Z	2,424	555	2,249	542	938	93	13,207	2,916	7,373	1,484	1,726	439	1,100	1,222	64	18	2,906	3,824	1,802	1,779	52
W02A	1,244	280	1,285	404	1,082	88	2,102	470	7,942	1,775	1,337	343	1,138	1,279	52	18	3,788	2,498	1,250	1,086	80
W02B	1,285	340	937	275	322	35	1,217	263	6,139	1,381	1,445	398	552	834	15	3	2,218	1,728	947	879	63
W03Z	1,096	277	842	209	538	49	3,625	812	5,327	1,059	1,353	356	599	798	18	7	853	1,974	917	816	59
W04A	1,380	298	1,545	479	894	87	3,701	733	8,090	1,677	1,562	389	1,335	1,412	52	17	4,193	2,836	1,302	1,194	48
W04B	1,115	267	752	183	236	32	1,988	423	4,857	1,032	1,493	401	684	691	17	5	1,590	1,500	770	724	56
W60Z	595	162	153	50	71	7	1,350	288	1,490	300	1,056	286	310	139	4	2	474	485	193	300	142
W61A	864	187	1,090	264	356	46	2,409	533	103	27	1,240	306	656	867	6	1	45	1,411	777	546	104
W61B	523	117	412	112	151	18	1,119	247	102	26	1,179	311	430	475	17	2	69	699	426	324	118
X02A	55	10	150	54	122	15	29	6	4,695	994	342	88	187	264	5	1	154	775	298	270	58
X02B	12	3	37	17	29	5	2	1	1,703	374	287	78	57	107	7	1	43	285	114	116	106
X04A	294	62	458	144	411	36	348	75	2,719	608	570	159	536	684	46	5	349	1,014	500	487	118
X04B	46	10	94	34	51	7	6	1	1,590	349	481	143	91	154	5	1	78	298	149	152	147
X05A	47	12	156	54	125	13	63	12	2,105	491	465	138	203	320	17	2	61	513	275	239	100
X05B	13	3	30	14	25	4	1	0	1,413	317	289	86	45	86	2	0	34	215	102	114	139
X06A	336	66	297	100	482	41	802	193	2,273	500	526	142	418	561	40	7	193	990	441	378	179
X06B	52	11	55	23	60	7	34	8	1,543	345	371	106	105	157	8	1	96	311	148	146	197
X07A	230	46	561	209	529	59	305	77	4,159	887	426	114	769	965	15	3	251	1,583	772	595	100
X07B	61	12	238	93	149	19	25	6	2,194	478	353	99	303	460	36	4	60	676	350	297	109
X40Z	376	75	545	114	210	22	9,160	2,008	290	49	851	210	207	355	14	3	16	1,589	447	564	95
X60A	209	42	330	89	145	18	67	16	59	14	754	200	205	363	3	0	4	445	258	182	250
X60B	91	21	59	18	25	4	8	2	146	34	504	142	56	87	6	1	4	123	61	67	303
X61Z	16	3	21	8	44	4	161	37	8	1	445	131	43	59	1	0	1	102	42	41	254
X62A	116	22	252	68	143	17	1,358	294	61	11	794	203	215	324	8	2	7	594	229	210	210
X62B	20	4	72	20	33	4	190	44	17	4	545	158	85	131	12	2	1	188	77	84	278
X63A	215	40	208	65	339	25	292	66	227	52	532	138	303	397	64	13	47	553	271	193	199
X63B	67	13	53	20	68	6	23	6	153	35	385	110	98	152	48	9	18	188	93	79	258
X64A	186	36	443	118	134	18	551	131	43	9	821	218	203	381	40	7	5	517	299	212	173
X64B	62	15	55	17	22	3	50	11	11	2	414	121	60	92	87	15	1	125	57	72	264
Y01Z	1,508	280	11,174	2,425	4,521	563	54,683	11,300	21,327	3,852	749	183	9,290	2,721	48	8	1,420	13,006	4,500	5,410	17
Y02A	178	41	1,671	463	608	78	969	187	4,393	896	409	111	2,938	1,401	35	6	184	2,050	1,490	1,013	49
Y02B	9	2	382	116	119	15	40	11	1,729	413	146	47	932	433	2	0	91	622	417	353	56

DRG	DRG Description	Cost Weight	Relative Standard Error	Number of Seps	Number of Days	ALOS (Days)	Average Cost per DRG ($)			Average Component Cost per DRG ($)						
										Ward Medical		Ward Nursing		Non Clinical Salaries	Pathology	
							Total	Direct	Ohead	Direct	Ohead	Direct	Ohead		Direct	Ohead
Y03Z	OTHER OR PROCS FOR OTHER BURNS	1.71	0.05	1,078	4,438	4	8,623	6,438	2,185	649	82	1,866	138	532	97	11
Y60Z	BURNS,TRANS OTH ACUT CARE <5 D	0.53	0.12	492	617	1	2,668	2,077	591	207	34	284	49	132	31	3
Y61Z	SEVERE BURNS	1.09	0.14	451	1,440	3	5,510	3,828	1,682	674	135	1,318	182	418	82	10
Y62A	OTHER BURNS +CC	1.47	0.04	662	3,082	5	7,418	5,502	1,916	854	148	1,877	156	571	154	13
Y62B	OTHER BURNS -CC	0.56	0.03	2,457	4,548	2	2,824	2,122	702	316	54	642	58	198	33	2
Z01A	OR PR+DX OTH CNT HLTH SRV+CSCC	1.55	0.05	1,065	4,569	4	7,829	5,965	1,864	784	82	1,224	151	457	205	26
Z01B	OR PR+DX OTH CNT HLTH SRV-CSCC	0.62	0.02	3,739	4,465	1	3,136	2,418	718	284	26	213	35	127	87	7
Z40Z	ENDO+DX OTH CNT HLTH SRV SD	0.24	0.00	39,475	39,475	1	1,233	929	305	141	9	49	9	51	27	2
Z60A	REHABILITATION + CCC	1.63	0.07	412	3,739	9	8,211	6,081	2,130	993	68	2,291	346	952	173	19
Z60B	REHABILITATION - CCC	1.52	0.08	510	4,238	8	7,696	5,599	2,098	799	111	2,432	445	840	80	8
Z60C	REHABILITATION, SAMEDAY	0.47	0.16	34	34	1	2,354	1,903	451	56	1	142	6	47	8	1
Z61A	SIGNS AND SYMPTOMS	1.08	0.01	8,011	32,863	4	5,476	4,040	1,436	708	71	1,211	166	458	167	19
Z61B	SIGNS AND SYMPTOMS, SAMEDAY	0.23	0.01	6,880	6,880	1	1,182	919	264	120	18	93	14	81	122	7
Z63A	OTH SURG FU & MED CARE + CCC	2.37	0.04	1,701	17,225	10	11,986	8,399	3,586	1,698	249	3,167	758	1,165	259	23
Z63B	OTH SURG FU & MED CARE - CCC	1.00	0.02	6,299	28,721	5	5,042	3,511	1,531	732	107	1,122	288	533	88	8
Z64A	OTH FACTOR INFL HEALTH STATUS	0.97	0.02	8,914	33,621	4	4,925	3,631	1,295	684	87	1,245	212	434	93	10
Z64B	OTH FCTR INFL HEALTH STATUS,SD	0.23	0.01	41,928	41,928	1	1,160	914	246	135	23	94	10	66	32	4
Z65Z	CNGNTL & PRB ARISING FRM NNT	0.82	0.10	277	658	2	4,127	3,119	1,008	694	90	805	78	286	97	11
801A	OR PR UNREL TO PDX+CCC	7.11	0.02	2,064	39,178	19	35,905	28,018	7,887	3,691	422	7,085	634	1,919	1,156	126
801B	OR PR UNREL TO PDX+SMCC	2.95	0.03	968	6,860	7	14,909	11,481	3,428	1,750	188	2,558	260	801	351	37
801C	OR PR UNREL TO PDX-CC	1.30	0.02	1,970	4,734	2	6,570	5,078	1,493	656	69	701	103	284	137	14
960Z	UNGROUPABLE	1.17	0.07	761	2,249	3	5,896	4,161	1,735	489	19	443	53	263	161	13
961Z	UNACCEPTABLE PRINCIPAL DX	0.60	.	1	5	4	3,036	1,998	1,038	441	5	145	11	505	75	1
963Z	NEONATAL DX NOT CONSNT AGE/WGT	0.31	.	1	1	1	1,543	1,075	468	222	1	372	13	251	-	-
Total		1.00	0.00	5,204,534	14,926,012	3	5,052	3,875	1,176	530	79	900	98	296	121	13

DRG	Average Component Cost per DRG ($)																				No. of Hosps
	Imaging		Allied		Pharmacy		Critical Care		Oper Rooms		Emerg Depts		Ward Supplies		Spec Proc Suites		Prostheses	On-Costs	Hotel	Deprec	
	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead	Direct	Ohead					
Y03Z	27	8	321	89	123	10	87	23	1,686	414	228	73	534	513	0	0	77	480	272	280	100
Y60Z	29	7	38	12	22	3	151	32	163	41	399	132	545	112	1	0	4	107	48	84	157
Y61Z	36	9	217	71	84	14	130	27	153	30	357	109	273	305	1	0	13	340	195	327	120
Y62A	52	12	293	93	163	21	338	55	96	17	475	139	438	414	12	3	6	460	302	258	144
Y62B	8	2	97	35	38	4	63	11	122	26	370	106	156	129	0	0	10	158	97	87	203
Z01A	178	32	225	72	221	27	219	59	1,619	375	35	10	195	298	60	6	279	540	217	231	152
Z01B	58	12	26	13	39	4	7	1	1,247	292	6	2	44	87	26	5	119	189	79	99	178
Z40Z	7	2	8	4	20	1	0	0	473	124	1	0	21	30	64	20	11	74	38	46	203
Z60A	127	45	713	184	377	29	31	10	32	11	20	6	312	335	5	12	1	714	304	102	41
Z60B	41	17	596	165	250	32	60	8	20	8	16	5	323	345	-	-	3	618	317	156	54
Z60C	1	1	1,113	236	460	22	-	-	-	-	1	0	14	19	-	-	0	111	14	100	9
Z61A	162	29	228	62	142	14	66	14	32	7	572	148	170	292	6	2	6	387	190	144	259
Z61B	62	9	24	8	28	2	1	0	186	51	115	32	29	34	14	3	10	71	24	26	205
Z63A	175	35	377	131	409	54	305	83	68	21	107	31	519	760	3	0	39	759	482	307	198
Z63B	69	14	137	50	137	20	86	25	46	12	49	16	331	327	44	10	99	344	182	165	285
Z64A	83	17	154	42	125	12	33	11	219	49	199	58	177	264	30	6	22	369	149	136	283
Z64B	72	13	17	5	100	6	3	1	213	49	13	4	44	34	44	11	25	81	23	38	266
Z65Z	232	52	163	40	113	10	100	40	171	37	192	51	114	188	55	8	2	266	100	131	69
801A	1,197	228	1,257	349	1,377	110	3,297	739	2,501	512	751	185	1,183	1,356	236	48	976	2,471	1,145	954	133
801B	460	91	364	125	309	30	727	173	2,031	420	508	136	447	592	120	18	562	961	473	418	135
801C	152	30	92	33	99	13	78	21	1,944	438	175	50	136	204	45	7	307	403	179	200	172
960Z	67	8	1,419	437	175	38	365	96	206	41	188	63	151	245	7	2	40	355	218	336	47
961Z	1	0	88	69	5	2	-	-	-	-	798	174	30	219	-	-	-	263	20	186	1
963Z	-	-	-	-	200	8	-	-	-	-	2	1	94	86	-	-	-	133	87	72	1
Total	**103**	**19**	**122**	**39**	**171**	**14**	**317**	**74**	**550**	**124**	**259**	**70**	**157**	**196**	**37**	**8**	**146**	**325**	**146**	**136**	**354**

Appendix D
Total reported cost by jurisdiction by peer group

Jurisdiction	Acute			Emergency Department			Non-admitted			Sub-acute			Other			Total	
	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total
NSW	7,215	30.9%	1,365,084	1,213	32.3%	1,954,569	876	21.9%	3,318,642	621	30.2%	52,313	1	1.2%	127	9,307	29.5%
A1 - Principal referral	5,500	23.5%	1,018,378	848	22.6%	1,275,603	650	16.3%	2,390,772	277	13.5%	22,924	1	0.9%	92	6,813	21.6%
A2 - Specialist women's and children's	367	1.6%	56,867	47	1.3%	88,840	83	2.1%	285,253	0	0.0%	9	0	0.2%	30	480	1.5%
B1 - Large major city	689	2.9%	144,085	169	4.5%	313,947	66	1.7%	299,641	51	2.4%	2,957	0	0.1%	5	897	2.8%
B2 - Large regional	146	0.6%	31,897	39	1.0%	63,430	11	0.3%	47,505	12	0.6%	1,044	-	0.0%	-	191	0.6%
C1 - Medium	346	1.5%	81,674	95	2.5%	180,537	35	0.9%	150,254	43	2.1%	3,196	-	0.0%	-	480	1.5%
C2 - Medium other	91	0.4%	24,806	15	0.4%	32,212	8	0.2%	14,583	20	1.0%	1,327	-	0.0%	-	129	0.4%
D2 - Small non-acute	4	0.0%	2,064	-	-	-	0	0.0%	768	11	0.5%	868	-	0.0%	-	15	0.0%
E4 - Rehabilitation	1	0.0%	101	-	-	-	4	0.1%	25,570	36	1.7%	1,482	-	0.0%	-	42	0.1%
E9 - Other non-acute	8	0.0%	1,301	-	-	-	2	0.0%	9,162	67	3.2%	5,768	-	0.0%	-	77	0.2%
F - Psychiatric	63	0.3%	3,873	-	-	-	-	0.0%	-	8	0.4%	131	-	0.0%	-	71	0.2%
G - Subacute and non-acute	0	0.0%	38	-	-	-	16	0.4%	95,134	98	4.7%	11,869	-	0.0%	-	114	0.4%
Vic	5,246	22.5%	1,258,612	760	20.2%	1,470,350	579	14.5%	2,140,149	495	24.0%	35,959	0	0.7%	44	6,722	21.3%
A1 - Principal referral	3,973	17.0%	886,385	561	14.9%	1,005,593	393	9.9%	1,364,341	114	5.8%	10,033	0	0.6%	38	4,739	15.0%
A2 - Specialist women's and children's	394	1.7%	59,084	40	1.1%	96,796	60	1.5%	282,364	4	0.2%	127	0	0.1%	3	480	1.5%
B1 - Large major city	361	1.5%	115,335	59	1.6%	147,579	82	2.1%	253,002	19	0.9%	1,347	-	0.0%	-	506	1.6%
B2 - Large regional	270	1.2%	76,736	60	1.6%	126,874	-	0.0%	-	10	0.5%	1,099	0	0.0%	3	326	1.0%
C1 - Medium	135	0.6%	66,449	34	0.9%	79,628	33	0.8%	164,688	52	2.6%	3,734	-	0.0%	-	247	0.8%
C2 - Medium other	65	0.3%	37,767	6	0.2%	13,880	3	0.1%	13,946	80	4.0%	5,667	-	0.0%	-	153	0.5%
D1 - Small regional	5	0.0%	1,836	-	-	-	0	0.0%	56	2	0.1%	139	-	0.0%	-	7	0.0%
D2 - Small non-acute	14	0.1%	1,852	-	-	-	0	0.0%	604	121	6.1%	7,766	-	0.0%	-	135	0.4%
G - Subacute and non-acute	29	0.1%	13,168	-	-	-	7	0.2%	61,148	93	4.7%	6,047	-	0.0%	-	129	0.4%
Qld	4,769	20.4%	989,758	899	23.9%	1,575,813	1,735	43.5%	4,628,166	487	23.7%	46,367	41	73.8%	11,955	7,634	24.2%
A1 - Principal referral	3,727	16.0%	729,526	594	15.8%	906,833	1,334	33.4%	3,242,995	341	17.3%	33,935	31	55.9%	5,694	5,802	18.4%
A2 - Specialist women's and children's	330	1.4%	47,611	38	1.0%	68,512	50	1.3%	96,681	5	0.3%	173	1	1.5%	749	411	1.3%
B1 - Large major city	163	0.7%	44,824	46	1.2%	87,558	18	0.4%	146,233	15	0.7%	4,165	0	0.1%	108	229	0.7%
B2 - Large regional	115	0.5%	27,142	40	1.1%	68,655	29	0.7%	90,725	2	0.1%	332	1	1.6%	803	178	0.6%
C1 - Medium	69	0.3%	32,742	30	0.8%	85,008	31	0.8%	110,880	24	1.2%	1,554	0	0.2%	610	147	0.5%
C2 - Medium other	102	0.4%	39,299	42	1.1%	97,021	50	1.2%	177,644	36	1.8%	2,701	0	0.6%	1,484	222	0.7%
D1 - Small regional	81	0.3%	29,062	44	1.2%	105,476	61	1.5%	225,311	9	0.4%	753	2	2.9%	975	186	0.6%
D2 - Small non-acute	44	0.2%	17,206	33	0.9%	78,123	19	0.5%	77,174	25	1.3%	1,451	1	1.6%	620	115	0.4%
D3 - Small remote	99	0.4%	11,446	10	0.3%	44,613	57	1.4%	170,539	4	0.2%	150	1	1.1%	244	169	0.5%
E2 - Multi-purpose services	20	0.1%	5,593	9	0.2%	16,280	15	0.4%	72,598	3	0.1%	163	1	1.6%	238	45	0.1%
E5 - Mothercraft	8	0.0%	2,260	-	-	-	-	0.0%	-	-	0.0%	-	0	0.0%	1	8	0.0%
F - Psychiatric	0	0.0%	8	-	-	-	0	0.0%	802	10	0.5%	347	-	0.0%	-	10	0.0%
G - Subacute and non-acute	12	0.1%	3,039	13	0.3%	17,734	71	1.8%	216,584	13	0.7%	641	0	0.7%	93	108	0.3%
U - Ungroupable	-	0.0%	-	-	0.0%	-	-	0.0%	-	0	0.0%	2	3	6.0%	336	3	0.0%

State / Territory with peer groups	Acute			Emergency Department			Non-admitted			Sub-acute			Other			Total	
	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total	Encounters	Total cost ($m)	% of Total
SA	1,958	8.4%	338,929	239	6.4%	437,258	-	0.0%	-	118	6.0%	11,916	-	0.0%	-	2,210	7.0%
A1 - Principal referral	1,373	5.9%	218,504	148	3.9%	246,644	-	0.0%	-	27	1.4%	1,956	-	0.0%	-	1,472	4.7%
A2 - Specialist women's and children's	195	0.8%	31,863	17	0.5%	45,399	-	0.0%	-	1	0.0%	15	-	0.0%	-	205	0.7%
B1 - Large major city	152	0.7%	27,797	25	0.7%	35,274	-	0.0%	-	74	3.7%	8,995	-	0.0%	-	241	0.8%
C1 - Medium	144	0.6%	40,969	40	1.1%	82,509	-	0.0%	-	10	0.5%	764	-	0.0%	-	186	0.6%
C2 - Medium other	41	0.2%	11,179	6	0.2%	19,587	-	0.0%	-	2	0.1%	122	-	0.0%	-	48	0.2%
D3 - Small remote	17	0.1%	5,365	2	0.1%	7,845	-	0.0%	-	0	0.0%	21	-	0.0%	-	19	0.1%
F - Psychiatric	31	0.1%	1,292	-	-	-	-	0.0%	-	4	0.2%	43	-	0.0%	-	35	0.1%
G - Subacute and non-acute	4	0.0%	1,960	-	-	-	-	0.0%	-	-	0.0%	-	-	0.0%	-	4	0.0%
WA	2,595	11.1%	491,104	373	9.9%	627,582	402	10.1%	1,229,279	217	10.5%	14,099	3	4.9%	9,254	3,453	10.9%
A1 - Principal referral	1,452	6.2%	268,093	137	3.6%	231,807	248	6.2%	592,369	62	3.1%	6,219	1	1.0%	1,699	1,827	5.8%
A2 - Specialist women's and children's	332	1.4%	43,758	32	0.9%	82,883	82	2.1%	227,464	1	0.0%	63	0	0.1%	5	436	1.4%
B1 - Large major city	313	1.3%	72,570	100	2.7%	157,857	27	0.7%	140,978	39	2.0%	2,125	0	0.3%	2,060	453	1.4%
B2 - Large regional	105	0.4%	26,293	30	0.8%	60,567	6	0.1%	41,794	5	0.3%	241	0	0.7%	1,640	139	0.4%
C1 - Medium	119	0.5%	29,036	-	-	-	12	0.3%	92,711	52	2.7%	2,673	0	0.0%	4	184	0.6%
C2 - Medium other	28	0.1%	8,197	7	0.2%	19,540	1	0.0%	14,530	4	0.2%	235	0	0.2%	367	39	0.1%
D1 - Small regional	17	0.1%	3,880	1	0.0%	1850	0	0.0%	5,127	2	0.1%	79	0	0.1%	230	18	0.1%
D2 - Small non-acute	14	0.1%	4,004	1	0.0%	940	1	0.0%	13,024	7	0.4%	512	0	0.0%	40	22	0.1%
D3 - Small remote	173	0.7%	29,995	65	1.7%	70,860	16	0.4%	72,184	7	0.3%	253	1	2.3%	3,017	245	0.8%
E2 - Multi-purpose services	11	0.0%	2,650	1	0.0%	1278	0	0.0%	6,753	2	0.1%	139	0	0.1%	192	13	0.0%
E4 - Rehabilitation	30	0.1%	2,534	-	-	-	9	0.2%	22,345	35	1.8%	1,400	-	0.0%	-	73	0.2%
G - Subacute and non-acute	1	0.0%	94	-	-	-	-	0.0%	-	2	0.1%	160	-	0.0%	-	3	0.0%
Tas	547	2.3%	103,345	84	2.2%	160,556	102	2.6%	363,020	31	1.5%	1,888	0	0.2%	8	732	2.3%
A1 - Principal referral	407	1.7%	79,965	54	1.4%	95,453	83	2.1%	290,470	24	1.2%	1,578	-	0.0%	-	543	1.7%
B2 - Large regional	61	0.3%	8,715	12	0.3%	24,191	14	0.3%	43,793	2	0.1%	109	0	0.1%	2	84	0.3%
C1 - Medium	41	0.2%	10,463	14	0.4%	28,134	5	0.1%	28,757	1	0.0%	72	0	0.1%	2	58	0.2%
D1 - Small regional	23	0.1%	2,471	3	0.1%	7,148	-	0.0%	-	3	0.1%	84	0	0.0%	3	28	0.1%
D2 - Small non-acute	5	0.0%	532	-	-	-	-	0.0%	-	0	0.0%	8	-	0.0%	-	6	0.0%
D3 - Small remote	2	0.0%	236	0	0.0%	654	-	0.0%	-	-	0.0%	-	-	0.0%	-	3	0.0%
G - Subacute and non-acute	8	0.0%	963	2	0.1%	4,976	-	0.0%	-	1	0.0%	37	0	0.0%	1	11	0.0%
NT	445	1.9%	116,915	88	2.3%	145,446	107	2.7%	256,656	25	1.2%	806	11	19.1%	7,735	646	2.1%
A1 - Principal referral	393	1.7%	99,539	72	1.9%	107,434	99	2.5%	236,914	24	1.2%	759	8	15.0%	5,588	571	1.8%
D3 - Small remote	52	0.2%	17,376	16	0.4%	38,012	8	0.2%	19,742	1	0.0%	47	2	4.1%	2,147	76	0.2%
ACT	582	2.5%	89,591	99	2.6%	118,975	190	4.8%	674,859	64	3.1%	4,315	0	0.1%	7	890	2.8%
A1 - Principal referral	582	2.5%	89,591	99	2.6%	118,975	190	4.8%	674,859	64	3.2%	4,315	0	0.1%	7	890	2.8%
Total	23,358	100.0%	4,753,338	3,754	100.0%	6,490,549	3,990	100.0%	12,610,771	2057	100.0%	167,663	55	100.0%	29,130	31,595	100.0%

Appendix E
Proportion of costs attributed to each product by jurisdiction

Product	NSW	Vic	Qld	SA	WA	Tas	NT	ACT	National
Acute	77.5%	78.0%	62.5%	88.6%	75.2%	74.7%	68.9%	65.3%	73.9%
ED	6.4%	6.0%	7.9%	6.1%	6.8%	7.1%	9.1%	6.1%	6.8%
Non-admitted	9.4%	8.6%	22.7%	0.0%	11.6%	13.9%	16.5%	21.3%	12.6%
Subacute	6.7%	7.4%	6.4%	5.3%	6.3%	4.3%	3.8%	7.2%	6.5%
Other	0.0%	0.0%	0.5%	0.0%	0.1%	0.0%	1.6%	0.0%	0.2%
Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

Appendix F
AIHW peer group classification for Australian public hospitals

The Public Hospital Peer Group Classification was developed by the AIHW in 1999 to explain variability in the average cost per casemix-adjusted separation. This allows for more meaningful analysis of public hospital data than comparison at the jurisdiction level would allow.

The classification groups public hospitals into similar groups in terms of their range of admitted patient activities, and geographical location. The peer groups are allocated names that are broadly descriptive of the types of hospitals included in each category, as outlined below.

Table 60: AIHW Public Hospital Peer Group Classification

Peer Group	Peer Group Description	Peer Group Code
Principal referral	Major city hospitals with more than 20,000 and regional hospitals with more than 16,000 acute (casemix-adjusted) separations per year.	A1
Specialist women's & children's	Specialised acute womens' and childrens' hospitals with more than 10,000 (casemix-adjusted) separations per year.	A2
Large major city	Major city acute hospitals with more than 10,000 (casemix-adjusted) separations per year.	B1
Large regional	Includes large rural hospitals which are regional acute hospitals with more than 8,000 (casemix-adjusted) separations per year and remote acute hospitals which are regional acute hospitals with more than 5,000 (casemix-adjusted) separations per year.	B2
Medium	Medium acute hospitals in regional and major city areas treating between 5,000 and 10,000 acute (casemix-adjusted) separations per year.	C1
Medium Other	Medium acute hospitals in regional and major city areas treating between 2,000 and 5,000 acute (casemix-adjusted) separations per year, and acute hospitals treating less than 2,000 (casemix-adjusted) separations per year but with more than 2,000 non-casemix-adjusted separations per year.	C2
Small regional	Small, regional non-acute hospitals treating less than 2,000 (casemix-adjusted) separations per year and with more than 40 per cent non-acute and outlier patient days of total patient days.	D1
Small non-acute	Small non-acute hospitals treating <2,000 separations per annum, and with more than 40% non-acute and outlier patient days of total patient days.	D2
Small remote	Small remote hospitals treating less than 5,000 acute (casemix-adjusted) separations but not classified as multi-purpose and not classified as small non-acute. Most have less than 2,000 separations per year.	D3

Peer Group	Peer Group Description	Peer Group Code
Multi-purpose services (MPSs)	Services that provide integrated acute health, nursing home, hostel, community health and aged care services under one organisational structure. In most cases, these services involve the pooling of State and Commonwealth program funds, however, some services are functionally MPSs but are not funded according to a pooled arrangement. MPSs provide a range of services that are negotiated with the community, the service providers and the relevant Departments.	E2
Rehabilitation	Establishments with a primary role in providing services to persons with an impairment, disability or handicap where the primary goal is improvement in functional status.	E4
Mothercraft	Establishments where the primary role is to help mothers acquire mothercraft skills in an inpatient setting.	E5
Other non-acute	For example, geriatric treatment centres combining rehabilitation and palliative care with <2,000 acute casemix-weighted separations with <200 separations, etc.	E9
Psychiatric	Establishments devoted primarily to the treatment and care of inpatients with psychiatric, mental, or behavioural disorders. Private hospitals formerly approved by the Commonwealth Department of Health under the Health Insurance Act 1973 (Cwlth) (now licensed/approved by each state health authority), catering primarily for patients with psychiatric or behavioural disorders are included in this category.	F
Subacute and non-acute	Small non-acute hospitals, treating less than 2,000 (casemix-adjusted) separations per year and with more than 40 per cent non-acute and outlier patient days of total patient days.	G
Ungroupable	Hospitals that do not have a peer group classification	U

Appendix G
Reference tables

Table 61: AHPCS prescribed line items for allocation of hospital general ledger accounts

#	Code	Description
1	SWNurs	Nursing salaries and wages
2	SWMed	Medical salaries and wages (non VMO)
3	SWVMO	Medical salaries and wages (VMO)
4	SWAH	Allied Health salaries and wages
5	SWOther	Other staff types salaries and wages
6	OnCosts	Labour (staff) oncosts, all staff types
7	Path	Pathology
8	Imag	Imaging
9	Pros	Prostheses (surgically implanted)
10	MS	All other medical and surgical supplies (excluding prostheses and drugs)
11	GS	All other goods and services
12	PharmPBS	Drugs PBS (eg high cost and S100)
13	PharmNPBS	Drugs non PBS
14	Blood	Blood products
15	DeprecB	Building depreciation
16	DeprecE	Equipment depreciation
17	Hotel	Hotel goods and services
18	Corp	Corporate costs (from outside the hospital GL and not otherwise specified)
19	Lease	Leasing costs
20	Cap	Capital works - not in scope
21	Exclude	Excluded costs – not in scope

Table 62: AHPCS prescribed groups for allocation of cost centres

#	Group	Description
1	Allied	Allied health
2	Clinical	Clinical services
3	ED	Emergency department
4	Imag	Imaging
5	OR	Operating theatres
6	Path	Pathology
7	Pharm	Pharmacy
8	OtherServ	Other services such as research and training
9	SPS	Special procedure suites

#	Group	Description
10	Overhead	Overhead cost centres

Table 63: NHCDC reported cost buckets

#	Cost Bucket	Description
1	Ward medical	Also known as Medical Clinical Services, this bucket includes the salaries and wages of all medical officers including sessional payments.
2	Ward nursing	Also known as Nursing Clinical Services, this bucket includes all costs associated with nursing care in general ward areas.
3	Non clinical salaries	This bucket was renamed 'Non-clinical Salaries' from 'Other' in Round 4. This bucket contains all other costs of service provision for each inpatient separation during the Round. These costs are primarily other salaries and wages such as patient care assistants.
4	Pathology	This column reports costs recorded from diagnostic clinical laboratory tests for the diagnosis and treatment of patients.
5	Imaging	This bucket contains costs for diagnostic and therapeutic images produced under the direction of a qualified radiographer or suitably qualified technician and reported by a medical practitioner (radiologist).
6	Allied	'Allied' is an abbreviation for the Allied Health cost bucket. The Allied Health cost bucket reports costs delivered to clinical services by qualified health professionals (exclusive of medical and nurse trained personnel) who have direct patient contact and provide services in Audiology, Dietetics/Nutrition, Occupational Therapy, Optometry, Orthotics, Physiotherapy, Podiatry, Social Work, Psychology, Speech Pathology and other Allied Health.
7	Pharmacy	This column reports costs associated with the provision of pharmaceuticals including purchasing, production, distribution, supply and storage of drug products and clinical pharmacy services.
8	Critical care	The Critical Care cost bucket is the combination of intensive care and coronary care costs.
9	Oper rooms	'Oper Rooms' is an abbreviation for the Operating Rooms cost bucket and reports costs for a health care facility under sterile conditions, where significant surgical procedures are carried out under the direction of suitably qualified medical practitioners.
10	Emerg depts	This column displays costs reported for health care facilities designed and equipped specifically to provide an environment where patients presenting in an unscheduled manner can be triaged, assessed and treated.
11	Supplies	'Supplies' is an abbreviation for the Supplies and Ward Overheads cost bucket. It includes costs for goods and services, medical and surgical supplies, ward overheads and clinical department overheads.
12	SPS	'Spec Proc Suites' is an abbreviation for the Specialist Procedure Suites cost bucket. This includes costs equipped specifically to provide an environment where diagnostic and therapeutic procedures can be performed under the direction of suitably qualified medical practitioners. Does not include Operating Room costs.
13	Prosthesis	This column displays costs of prostheses and includes prostheses appearing on hospital accounts as well as a best estimate of the prostheses whose costs were missed because of acquisition by the patient or doctor.

#	Cost Bucket	Description
14	On-Costs	The On-Costs cost bucket includes indirect salary costs like superannuation, termination payments, lump sum payments, fringe benefits tax, long service leave, worker's compensation and recruitment costs.
15	Hotel	The Hotel cost bucket reports costs of hotel services and is a grouping of the following overhead costs: cleaning, linen and laundry, food services, general hotel, porters and orderlies.
16	Deprec	The 'Deprec' bucket reports depreciation costs.

Table 64: Specialist Children's Hospitals used to identify paediatric separations

Jurisdiction	Hospital
NSW	The Children's Hospital at Westmead
NSW	Sydney Children's Hospital
NSW	John Hunter Children's Hospital
Vic	Monash Medical Centre
Vic	The Royal Children's Hospital
Qld	Mater Children's Hospital
Qld	Royal Children's Hospital
SA	Women's and Children's Hospital
WA	Princess Margaret Hospital for Children

Table 65: Remoteness Categories

Remoteness Category	Receives Adjustment
Major cities of Australia	No
Inner regional Australia	No
Outer regional Australia	Yes
Remote Australia	Yes
Very remote Australia	Yes
Migratory	N/A
Not stated / Inadequately described	N/A

Table 66: Remoteness Categories

ABS Publication	URL
3101.0 - Australian Demographic Statistics, June 2013	http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/3101.0Main+Features1Jun%202013?OpenDocument
1270.0.55.006 - Australian Statistical Geography Standard (ASGS): Correspondences (31/1/2013 release) – Statistical Area Level 2 2011 to Remoteness Area 2011	http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/1270.0.55.006July%202011?OpenDocument
1270.0.55.006 - Australian Statistical Geography Standard (ASGS): Correspondences (15/2/2013 release) - Postcode 2012 to Remoteness Area	http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/1270.0.55.006July%202011?OpenDocument

ABS Publication	URL
2011	

Appendix H Glossary

Actual data	The hospital data received by the NHCDC that is used as the sample data to produce national average costs. Actual data (or sample data) is used in the estimation process as defined by the NHCDC (*see* Estimated). Note: As actual data is a sample only; caution should be taken when comparing this data as it is not necessarily representative of the population.
Acute inpatient	An episode of acute care for an admitted patient is one in which the principal clinical intent is to do one or more of the following: • manage labour (obstetric), • cure illness or provide definitive treatment of injury, • perform surgery, • relieve symptoms of illness or injury (excluding palliative care), • reduce severity of illness or injury, • protect against exacerbation and/or complication of an illness and/or injury which could threaten life or normal functions, • perform diagnostic or therapeutic procedures.
Admitted patient	A patient who has been formally admitted to a hospital.
Adjacent DRGs	'Adjacent DRGs' (ADRGs) are a grouping of one or more DRGs defined by the same diagnosis or procedure code list. Adjacent DRGs (DRGs) re-aggregate the DRGs that have been split on the basis of Patient Care Complexity Level (PCCL), malignancy, same day status, mental health status and mode of separation (that is, the last split in the DRG hierarchy). The ADRG number is the first three characters of the DRG number.
ALOS	*See* average length of stay.
AR-DRG	Australian Refined Diagnosis Related Groups. A variant of the DRG system designed specifically for use in Australia. The national standard. The version in use in this report is Version 6.0x, which recognises 708 categories of DRG.
Average cost	In the costing context, the total cost of production divided by the number of products in a period. Also known as full average cost. In contrast, marginal cost is the estimated cost of producing one additional unit of output.
Average length of stay	The average (or mean) number of days of stay in hospital for a group of patients. Abbreviated to ALOS.
Care type	The overall nature of a clinical service provided to an admitted patient during an episode of care (admitted care), or the type of service provided by the hospital for boarders or posthumous organ procurement (care other than admitted care), as represented by a code.

Cost buckets	Cost buckets were developed as a reporting tool in the NHCDC to estimate the costs on a per patient and aggregate (per hospital or per jurisdiction) basis that are attributable to interim products such as ward costs, pathology costs, imaging costs, ICU costs and allied health costs. There are 16 cost buckets that are described in Table 63 in 0[25].
Cost centre	An accounting entity where all costs associated with a particular type of activity can be recorded.
Cost weight	A measure of the average cost of an AR–DRG, compared with the average cost of a reference AR–DRG. Usually the average cost across all AR–DRGs is chosen as the reference value, and given a weight of 1.
Direct cost centre	Direct products are those able to be delivered directly to the customer. Direct cost centres include wards, pathology and allied health where a patient receives a specified service or product directly. Other direct products include research and teaching.
Indirect costs	Indirect products are those that provide products/services for costs centres that deliver services directly to patients. Indirect cost centres include finance, cleaning, and equipment maintenance. Indirect costs are allocated to patients based on some reasonable method of measuring consumption of that resource by each patient (for example, cleaning costs are often allocated based on the square metre area of a ward). There are cost buckets which may initially be solely indirect costs – hotel costs, on-costs and depreciation costs. However these can be mapped to direct and indirect cost centres in the hospital general ledger. Depreciation is typically reported as a separate cost centre, but sometimes it is allocated as an overhead or indirect cost and sometimes it is allocated to virtual patients which can result in depreciation being reported as a direct cost.
Inpatient	*See* admitted patient.
ICD-10-AM	International Classification of Diseases, 10th Revision, Australian Modification A modification of the international standard classification of diagnoses and procedures (ICD–9), which was developed by the US government. It has been clinically modified for morbidity coding, and especially for use in acute care.

[25] Payroll tax is reported as a separate cost bucket but is not included in any of the results presented in this report due to the substantial differences between jurisdictional arrangements for payroll tax that would affect the validity of comparisons.

Line item	Line items are groups of general ledger expenditure account codes that describe the input type of the expense (rather than the function of the expense), which define the resources being used by a cost centre. For example, a hospital might have line items for drugs, prostheses, nursing salaries or medical labour. They are different to cost buckets, which typically accumulate costs of interim products provided directly to patients. There is a standard set of line items defined in the Australian Hospital Patient Costing Standards v2.0 – 1 March 2011 (AHPCS)[26]. These are listed in Table 61 of 0 Attachment A of the AHPCS provides the full definition of costs prescribed as included in each line item.
Length of stay (LOS)	The number of days an inpatient spends in hospital (i.e. the total number of days– usually measured in multiples of a 24-hr day that a patient occupies a hospital bed). The most common methodology for deriving length of stay involves subtracting the admission date from the discharge date.
Overhead costs	In the product costing context, cost centres are generally classified as either overhead or direct products (patient care). An overhead cost centre accumulates costs that have an incidental rather than a direct relationship to a specific product category. Overhead costs centres typically accumulate costs for services that are provided to organisational units in the hospital rather than to producing end-products (e.g. patients). One of the aims of the costing process is to redistribute all overhead cost centre costs across the final cost centres.
Peer group	A classification assigning public hospitals into broadly similar groups in terms of their range of admitted patient activity and their geographical location. See 0.
Product costing	A process whereby the costs of inputs (supplies, labour, etc) are allocated among the products (patient care episodes by type, research, teaching, etc).
Same-day patient	A same-day patient is a patient who is admitted and separates on the same date, and who meets one of the following minimum criteria: • that the patient receive same-day surgical and diagnostic services as specified in bands 1A, 1B, 2, 3, and 4 but excluding uncertified type C Professional Attention Procedures within the Health Insurance Basic Table as defined in s.4 (1) of the National Health Act 1953 (Commonwealth), • that the patient receive type C Professional Attention Procedures as specified in the Health Insurance Basic Table as defined in s.4 (1) of the National Health Act 1953 (Commonwealth) with accompanying certification from a medical practitioner that an admission was necessary on the grounds of the medical condition of the patient or other special circumstances that relate to the patient.

[26] Australian Hospital Patient Costing Standards v2.0 – 1 March 2011. URL: http://www.ihpa.gov.au/internet/ihpa/publishing.nsf/content/EC0666091A19EBB1CA257B9B0083827A/$File/HospitalPatientCostingStandards_v2_Final_June%202011.doc, accessed 26/11/2014.

Separations

The process by which an episode of care for an admitted patient ceases. A separation may be formal or statistical.

- Formal separation: The administrative process by which a hospital records the cessation of treatment and/or care and/or accommodation of a patient.
- Statistical separation: The administrative process by which a hospital records the cessation of an episode of care for a patient within the one hospital stay.

Weighted separation

A weighted separation (or 'casemix-adjusted separation') is an indicator of the efficiency of public acute care hospitals. It is a measure of the average recurrent expense for each admitted patient, adjusted using AR-DRG cost weights for the resources expected to be used for each separation. The formula to calculate weighted separations:

$$WSeps = \sum_{i=1}^{k} n_i \times CW_i$$

where:

WSeps is the weighted separations

n_i is the number of separations in the *ith* DRG

k is the number of DRGs (in AR-DRG v5.2 it is 665)

CW_i is the cost weight for the *ith* DRG