**Lucile Salter Packard Children’s Hospital at Stanford**

**OSHPD Facility # 106434040**

**Chargemaster and 25 Common Outpatient Procedures**

In accordance with California Health and Safety Code Section 1339.51, Lucile Salter Packard Children’s Hospital at Stanford (LPCH) has made available to the public its CDM and a list of 25 common services or procedures and calculation of percentage change in gross revenue. Requests to view the CDM and related patient questions regarding the Hospital Chargemaster Program should be directed to:

CDM and Revenue Capture Department: CDM@stanfordchildrens.org

300 Pasteur Drive, MC 5582, Palo Alto, CA 94305

Our board approved a 7% price increase for Fiscal Year 2019 (effective 9/1/18). Our prices were adjusted to achieve an approximately 7% overall gross charge revenue increase.

METHODOLOGY-

Increase in gross revenue (as IGR): ∑[Price (9/1/18) – Price (9/1/17)] X [YTD usage (annualized for 12 months)]

% change in revenue: IGR / annualized gross revenue

*The estimated change in revenue using the above calculations is:*

**$287,124,296 / $4,268,248,204 = 7.00%**

**Notice Regarding the Hospital Chargemaster and 25 Common Outpatient Procedures:**

Many charges contained in these documents are subject to various periodic changes in the cost of items subject to vendors, manufacturers and others who supply these items to LPCH. The information provided herein was effective on June 1, 2019. These charges may have changed since this date due to new technology, added or eliminated services, goods and/ or procedures, etc. The information contained in these documents is specific to this facility.

The pharmacy prices do not exist in the chargemaster as they are calculated based on a formula and the current reference cost in our pharmacy module. The pharmacy prices may vary depending on when new reference costs from our formulary service vendor are loaded into our system. The pharmacy price listed in the chargemaster is the average price based on year to date revenue and usage.

The charges contained in these documents are the same for all patients of this facility regardless of insurance program or coverage. *However, they do not reflect expected reimbursement*, since health plans negotiate reimbursement rates based on a number of factors. Other issues affecting reimbursement could include whether a procedure was done on inpatient or outpatient basis, physician orders, complications, and/or medical necessity.

The physician orders, based on his/her examination and treatment of the patient, are the key components to which services and procedures are charged to an individual patient. There are many components that comprise one hospital bill. For example, one stay could include surgical procedures, supplies, pharmaceuticals, numerous tests, (i.e., x-rays, laboratory), respiratory and physical therapy and so forth (all based on a physician’s orders). Please note that these charges do not include professional fee (eg. physicians’) charges.

**Therefore, this document should not be used to estimate the final patient cost of a given hospital visit. It is provided for informational purposes only.**