

PCS RATE SHEET

Facility Name: St. Joseph Hospital - Orange 1107-MCS						
Tax ID: 951643359	Med ID: 050069		Effective Date: 1/1/2011			
				Anthem Use Only		
Services	Method of Reimbursement	Anthem Rate	Criteria	Priority Score	NST	IRF
COB				Anthem Use Only		
COB Percent	Pay [] % of Secondary Liability	90%	Pay 90% of Secondary Liability	996	NST010	IRF077
Inpatient Bed Types				Anthem Use Only		
Inpatient Trauma	No Rate Negotiated	N/A	Rev Codes 0681 or 0682	893	NSTC66	IRF074
Kidney Transplant	Case Rate \$ () per Admission/Global	\$109147	ICD-9 Procedure Codes: 5560, 5561, 5569 and Rev Code 0367	880	NST477	IRF003
Cardiovascular Surgery Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$8100	DRG 215-238, 242-245, 252-254, 258-265	879	NSTU34	IRF051
PTCA Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$8100	DRGs 246-251	860	NSTU35	IRF051
Cardiac Cath Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$7000	DRGs 286-287	855	NSTD82	IRF051
Prostatectomy Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$5000	DRGs 665-667, 708, 713-714 or ICD-9 procedure codes: 60.3, 60.5, 60.69	876	NSTD77	IRF051
Spinal Fusion Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$6500	DRGs 453-460, 471-473	875	NSTD76	IRF051
IntraCardiac Ablation (EPS Studies Included) Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$18000	ICD-9 procedure codes: 37.34	881	NSTU41	IRF051
Electro-Physiology Services (EPS performed separately) Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$6800	ICD-9 procedure codes: 37.26, 37.27 or 37.20	850	NSTU42	IRF051
Robotic Assisted Surgery Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$9500	ICD-9 procedure codes: 17.41-17.45 or 17.49	880	NSTJ80	IRF051
Bariatric Surgery Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$6200	ICD-9 procedure codes: 44.38, 44.39, 44.69, 45.91, 44.95, 44.96 or 44.97	849	NSTU29	IRF051
Joint Replacement Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$5300	DRGs 466-470 or ICD-9 procedure codes: 00.7-00.85, 81.51-81.56	819	NSTD79	IRF051
Orthopedic Surgery Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$5300	DRGs 461-462, 480-499, 503-517	821	NSTD78	IRF051
Cholesystectomy Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$5000	DRGs 411-419 or ICD-9 procedure codes: 51.22-51.24	810	NSTD81	IRF051
Hysterectomy Per Diem	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$5500	DRGs 734-743	800	NSTD80	IRF051
Level II Neonatal Intensive Care Unit [Intermediate Care]	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$3140	Revenue Code: 0173 subject to Article II of the PCS	750	NST641	IRF051
Maternity - C Section	\$__ Case Rate For The First __ Days, \$__ Per Diem Thereafter	\$11000/4D/\$2650	DRGs 765-766 or ICD-9 procedure codes: 74.0-74.99	730	NSTD75	IRF416
Maternity - Normal	\$__ Case Rate For The First __ Days, \$__ Per Diem Thereafter	\$8000/2D/\$2650	DRGs 767-768, 774-775 or ICD-9 procedure codes: 72.0-73.99, 75.50-75.52, 75.61-75.62, 75.69	725	NSTD74	IRF416
Level I Surveillance [I.E., Special Care Nursery/Continuing Care]	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$2094	Revenue Code: 0172, subject to Article II of the PCS	725	NST692	IRF051
General Nursery/Boarder Baby	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$873	Revenue Codes: 0170, 0171, or 0179, subject to Article II of the PCS	700	NSTR61	IRF051
Chemical Dependency Inpatient	Pay Lesser of \$ [] Per Diem or eligible billed charges	\$1484	Revenue Codes: 0116, 0126, 0136, 0146, 0156 AND DRG 894-897 OR DRG 894-897	675	NSTJ69	IRF051