

Zuckerberg San Francisco General Hospital and Trauma Center
Medicare MS-DRG Average Charge per Case
FYE 6/30/2022

In compliance with Section 2718(e) of the Public Health Service Act for hospitals to make public a list of the hospital's standard charges, the table below represents Zuckerberg San Francisco General Hospital and Trauma Center's average charges for the listed MS-DRG's for services provided to Traditional Medicare patients.

Data represents Average Traditional Medicare Charge per MS-DRG Case
Discharges Between 7/1/2021 - 6/30/2022
Run Date: 7/21/2022

MS-DRG	MS-DRG DESCRIPTION	GROSS CHARGES	CASES	AVG CHARGE PER CASE
003	ECMO OR TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITH	16,768,388.48	10	\$ 1,676,839
004	TRACHEOSTOMY WITH MV >96 HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK WITHOUT MAJO	9,921,857.72	5	\$ 1,984,372
011	TRACHEOSTOMY FOR FACE, MOUTH AND NECK DIAGNOSES OR LARYNGECTOMY WITH MCC	1,535,233.39	1	\$ 1,535,233
012	TRACHEOSTOMY FOR FACE, MOUTH AND NECK DIAGNOSES OR LARYNGECTOMY WITH CC	1,736,492.39	2	\$ 868,246
022	INTRACRANIAL VASCULAR PROCEDURES WITH PRINCIPAL DIAGNOSIS HEMORRHAGE WITHOUT CC/MCC	62,323.39	1	\$ 62,323
023	CRANIOTOMY WITH MAJOR DEVICE IMPLANT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS WITH MCC OR CHEM	4,305,832.79	9	\$ 478,426
024	CRANIOTOMY WITH MAJOR DEVICE IMPLANT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS WITHOUT MCC	228,712.84	1	\$ 228,713
025	CRANIOTOMY AND ENDOVASCULAR INTRACRANIAL PROCEDURES WITH MCC	4,184,105.16	9	\$ 464,901
026	CRANIOTOMY AND ENDOVASCULAR INTRACRANIAL PROCEDURES WITH CC	919,866.03	5	\$ 183,973
027	CRANIOTOMY AND ENDOVASCULAR INTRACRANIAL PROCEDURES WITHOUT CC/MCC	169,227.80	2	\$ 84,614
028	SPINAL PROCEDURES WITH MCC	2,647,114.06	4	\$ 661,779
029	SPINAL PROCEDURES WITH CC OR SPINAL NEUROSTIMULATORS	550,734.29	2	\$ 275,367
030	SPINAL PROCEDURES WITHOUT CC/MCC	641,099.16	3	\$ 213,700
040	PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITH MCC	103,892.29	1	\$ 103,892
041	PERIPHERAL, CRANIAL NERVE AND OTHER NERVOUS SYSTEM PROCEDURES WITH CC OR PERIPHERAL NEUROSTIMUL	81,429.52	1	\$ 81,430
052	SPINAL DISORDERS AND INJURIES WITH CC/MCC	621,380.17	4	\$ 155,345
054	NERVOUS SYSTEM NEOPLASMS WITH MCC	1,093,219.32	6	\$ 182,203
055	NERVOUS SYSTEM NEOPLASMS WITHOUT MCC	643,757.43	5	\$ 128,751
056	DEGENERATIVE NERVOUS SYSTEM DISORDERS WITH MCC	1,050,982.71	8	\$ 131,373
057	DEGENERATIVE NERVOUS SYSTEM DISORDERS WITHOUT MCC	3,473,855.63	17	\$ 204,344
059	MULTIPLE SCLEROSIS AND CEREBELLAR ATAXIA WITH CC	217,154.25	2	\$ 108,577
061	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITH MCC	1,281,537.83	6	\$ 213,590
062	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITH CC	696,237.85	4	\$ 174,059
063	ISCHEMIC STROKE, PRECEREBRAL OCCLUSION OR TRANSIENT ISCHEMIA WITH THROMBOLYTIC AGENT WITHOUT CC,	86,801.59	1	\$ 86,802
064	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH MCC	8,474,236.15	37	\$ 229,033
065	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	3,997,209.10	36	\$ 111,034
066	INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITHOUT CC/MCC	634,418.38	9	\$ 70,491
070	NONSPECIFIC CEREBROVASCULAR DISORDERS WITH MCC	913,248.19	3	\$ 304,416
071	NONSPECIFIC CEREBROVASCULAR DISORDERS WITH CC	566,815.24	4	\$ 141,704
072	NONSPECIFIC CEREBROVASCULAR DISORDERS WITHOUT CC/MCC	69,604.68	1	\$ 69,605
073	CRANIAL AND PERIPHERAL NERVE DISORDERS WITH MCC	452,136.54	5	\$ 90,427
074	CRANIAL AND PERIPHERAL NERVE DISORDERS WITHOUT MCC	816,626.23	8	\$ 102,078
075	VIRAL MENINGITIS WITH CC/MCC	146,161.55	1	\$ 146,162
077	HYPERTENSIVE ENCEPHALOPATHY WITH MCC	78,406.21	1	\$ 78,406
082	TRAUMATIC STUPOR AND COMA >1 HOUR WITH MCC	1,765,730.23	11	\$ 160,521
083	TRAUMATIC STUPOR AND COMA >1 HOUR WITH CC	2,523,003.68	13	\$ 194,077
084	TRAUMATIC STUPOR AND COMA >1 HOUR WITHOUT CC/MCC	463,693.79	6	\$ 77,282
085	TRAUMATIC STUPOR AND COMA <1 HOUR WITH MCC	1,671,717.84	10	\$ 167,172
086	TRAUMATIC STUPOR AND COMA <1 HOUR WITH CC	2,463,858.80	21	\$ 117,327
087	TRAUMATIC STUPOR AND COMA <1 HOUR WITHOUT CC/MCC	776,750.30	12	\$ 64,729
089	CONCUSSION WITH CC	174,179.41	2	\$ 87,090
090	CONCUSSION WITHOUT CC/MCC	79,155.91	1	\$ 79,156
091	OTHER DISORDERS OF NERVOUS SYSTEM WITH MCC	797,520.64	5	\$ 159,504
092	OTHER DISORDERS OF NERVOUS SYSTEM WITH CC	726,976.68	7	\$ 103,854
093	OTHER DISORDERS OF NERVOUS SYSTEM WITHOUT CC/MCC	58,423.17	1	\$ 58,423
094	BACTERIAL AND TUBERCULOUS INFECTIONS OF NERVOUS SYSTEM WITH MCC	600,366.19	1	\$ 600,366
097	NON-BACTERIAL INFECTION OF NERVOUS SYSTEM EXCEPT VIRAL MENINGITIS WITH MCC	583,033.13	1	\$ 583,033
100	SEIZURES WITH MCC	3,102,565.43	11	\$ 282,051
101	SEIZURES WITHOUT MCC	869,211.79	8	\$ 108,651
115	EXTRAOCULAR PROCEDURES EXCEPT ORBIT	135,037.73	1	\$ 135,038
121	ACUTE MAJOR EYE INFECTIONS WITH CC/MCC	249,555.01	2	\$ 124,778
123	NEUROLOGICAL EYE DISORDERS	36,007.60	1	\$ 36,008

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Data represents Average Traditional Medicare Charge per MS-DRG Case
Discharges Between 7/1/2021 - 6/30/2022
Run Date: 7/21/2022

MS-DRG	MS-DRG DESCRIPTION	GROSS CHARGES	CASES	AVG CHARGE PER CASE
124	OTHER DISORDERS OF THE EYE WITH MCC	239,312.31	1	\$ 239,312
125	OTHER DISORDERS OF THE EYE WITHOUT MCC	63,864.37	1	\$ 63,864
139	SALIVARY GLAND PROCEDURES	104,001.05	1	\$ 104,001
141	MAJOR HEAD AND NECK PROCEDURES WITH CC	235,226.44	1	\$ 235,226
145	OTHER EAR, NOSE, MOUTH AND THROAT O.R. PROCEDURES WITHOUT CC/MCC	190,073.86	1	\$ 190,074
146	EAR, NOSE, MOUTH AND THROAT MALIGNANCY WITH MCC	59,682.74	1	\$ 59,683
149	DYSEQUILIBRIUM	477,229.10	2	\$ 238,615
155	OTHER EAR, NOSE, MOUTH AND THROAT DIAGNOSES WITH CC	132,999.17	2	\$ 66,500
159	DENTAL AND ORAL DISEASES WITHOUT CC/MCC	48,294.55	1	\$ 48,295
163	MAJOR CHEST PROCEDURES WITH MCC	548,869.72	1	\$ 548,870
166	OTHER RESPIRATORY SYSTEM O.R. PROCEDURES WITH MCC	125,994.24	2	\$ 62,997
175	PULMONARY EMBOLISM WITH MCC OR ACUTE COR PULMONALE	897,102.82	8	\$ 112,138
176	PULMONARY EMBOLISM WITHOUT MCC	513,983.51	7	\$ 73,426
177	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC	6,504,048.14	52	\$ 125,078
178	RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH CC	2,649,104.16	19	\$ 139,427
180	RESPIRATORY NEOPLASMS WITH MCC	1,068,861.93	5	\$ 213,772
181	RESPIRATORY NEOPLASMS WITH CC	1,126,924.69	10	\$ 112,692
183	MAJOR CHEST TRAUMA WITH MCC	1,418,494.14	9	\$ 157,610
184	MAJOR CHEST TRAUMA WITH CC	1,252,532.12	11	\$ 113,867
185	MAJOR CHEST TRAUMA WITHOUT CC/MCC	392,036.95	4	\$ 98,009
186	PLEURAL EFFUSION WITH MCC	313,458.43	3	\$ 104,486
187	PLEURAL EFFUSION WITH CC	134,891.54	2	\$ 67,446
188	PLEURAL EFFUSION WITHOUT CC/MCC	69,306.56	1	\$ 69,307
189	PULMONARY EDEMA AND RESPIRATORY FAILURE	1,023,842.66	11	\$ 93,077
190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH MCC	4,602,374.73	30	\$ 153,412
191	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH CC	711,605.28	11	\$ 64,691
192	CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITHOUT CC/MCC	137,302.84	3	\$ 45,768
193	SIMPLE PNEUMONIA AND PLEURISY WITH MCC	2,567,669.15	15	\$ 171,178
194	SIMPLE PNEUMONIA AND PLEURISY WITH CC	591,381.22	8	\$ 73,923
195	SIMPLE PNEUMONIA AND PLEURISY WITHOUT CC/MCC	68,440.39	2	\$ 34,220
196	INTERSTITIAL LUNG DISEASE WITH MCC	82,060.68	1	\$ 82,061
199	PNEUMOTHORAX WITH MCC	2,171,026.95	11	\$ 197,366
200	PNEUMOTHORAX WITH CC	2,166,298.05	16	\$ 135,394
202	BRONCHITIS AND ASTHMA WITH CC/MCC	507,226.67	5	\$ 101,445
203	BRONCHITIS AND ASTHMA WITHOUT CC/MCC	128,031.57	2	\$ 64,016
204	RESPIRATORY SIGNS AND SYMPTOMS	102,982.95	2	\$ 51,491
205	OTHER RESPIRATORY SYSTEM DIAGNOSES WITH MCC	606,836.44	5	\$ 121,367
206	OTHER RESPIRATORY SYSTEM DIAGNOSES WITHOUT MCC	332,375.14	3	\$ 110,792
207	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT >96 HOURS	5,018,771.04	9	\$ 557,641
208	RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT <=96 HOURS	2,221,746.58	10	\$ 222,175
239	AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE WITHMCC	855,442.11	3	\$ 285,147
240	AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB AND TOE WITHCC	512,406.32	2	\$ 256,203
242	PERMANENT CARDIAC PACEMAKER IMPLANT WITH MCC	1,663,587.36	7	\$ 237,655
243	PERMANENT CARDIAC PACEMAKER IMPLANT WITH CC	428,978.41	3	\$ 142,993
246	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH DRUG-ELUTING STENT WITH MCC OR4+ ARTERIES OR STENT	2,023,536.25	8	\$ 252,942
247	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH DRUG-ELUTING STENT WITHOUT MCC	1,310,369.66	9	\$ 145,597
248	PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH NON-DRUG-ELUTING STENT WITH MCC OR 4+ ARTERIES OR	209,547.56	1	\$ 209,548
252	OTHER VASCULAR PROCEDURES WITH MCC	6,000,300.01	18	\$ 333,350
253	OTHER VASCULAR PROCEDURES WITH CC	1,378,699.22	6	\$ 229,783
254	OTHER VASCULAR PROCEDURES WITHOUT CC/MCC	872,180.76	4	\$ 218,045
257	UPPER LIMB AND TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS WITHOUT CC/MCC	260,345.77	1	\$ 260,346
258	CARDIAC PACEMAKER DEVICE REPLACEMENT WITH MCC	215,005.95	1	\$ 215,006

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259	CARDIAC PACEMAKER DEVICE REPLACEMENT WITHOUT MCC	71,537.68	1	\$ 71,538
260	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT WITH MCC	392,568.41	1	\$ 392,568
268	AORTIC AND HEART ASSIST PROCEDURES EXCEPT PULSATION BALLOON WITH MCC	434,873.87	1	\$ 434,874
269	AORTIC AND HEART ASSIST PROCEDURES EXCEPT PULSATION BALLOON WITHOUT MCC	782,807.07	4	\$ 195,702
270	OTHER MAJOR CARDIOVASCULAR PROCEDURES WITH MCC	3,876,851.29	8	\$ 484,606
271	OTHER MAJOR CARDIOVASCULAR PROCEDURES WITH CC	300,672.81	1	\$ 300,673
272	OTHER MAJOR CARDIOVASCULAR PROCEDURES WITHOUT CC/MCC	252,627.18	1	\$ 252,627
280	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH MCC	5,392,310.50	40	\$ 134,808
281	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITH CC	1,273,996.35	17	\$ 74,941
282	ACUTE MYOCARDIAL INFARCTION, DISCHARGED ALIVE WITHOUT CC/MCC	387,981.60	5	\$ 77,596
283	ACUTE MYOCARDIAL INFARCTION, EXPIRED WITH MCC	803,442.24	5	\$ 160,688
286	CIRCULATORY DISORDERS EXCEPT AMI, WITH CARDIAC CATHETERIZATION WITH MCC	2,743,325.89	18	\$ 152,407
287	CIRCULATORY DISORDERS EXCEPT AMI, WITH CARDIAC CATHETERIZATION WITHOUT MCC	1,112,749.45	12	\$ 92,729
291	HEART FAILURE AND SHOCK WITH MCC	10,525,903.25	93	\$ 113,182
292	HEART FAILURE AND SHOCK WITH CC	1,165,721.46	14	\$ 83,266
296	CARDIAC ARREST, UNEXPLAINED WITH MCC	68,719.53	1	\$ 68,720
299	PERIPHERAL VASCULAR DISORDERS WITH MCC	857,112.47	7	\$ 122,445
300	PERIPHERAL VASCULAR DISORDERS WITH CC	461,656.87	9	\$ 51,295
301	PERIPHERAL VASCULAR DISORDERS WITHOUT CC/MCC	79,495.83	1	\$ 79,496
302	ATHEROSCLEROSIS WITH MCC	100,891.08	2	\$ 50,446
303	ATHEROSCLEROSIS WITHOUT MCC	145,053.90	4	\$ 36,263
304	HYPERTENSION WITH MCC	632,513.12	4	\$ 158,128
305	HYPERTENSION WITHOUT MCC	178,327.91	3	\$ 59,443
306	CARDIAC CONGENITAL AND VALVULAR DISORDERS WITH MCC	422,394.02	3	\$ 140,798
307	CARDIAC CONGENITAL AND VALVULAR DISORDERS WITHOUT MCC	81,840.59	2	\$ 40,920
308	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH MCC	936,728.25	11	\$ 85,157
309	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITH CC	829,012.96	10	\$ 82,901
310	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS WITHOUT CC/MCC	259,015.82	5	\$ 51,803
312	SYNCOPE AND COLLAPSE	1,901,082.35	25	\$ 76,043
313	CHEST PAIN	182,899.80	4	\$ 45,725
314	OTHER CIRCULATORY SYSTEM DIAGNOSES WITH MCC	853,155.59	9	\$ 94,795
315	OTHER CIRCULATORY SYSTEM DIAGNOSES WITH CC	57,850.83	1	\$ 57,851
316	OTHER CIRCULATORY SYSTEM DIAGNOSES WITHOUT CC/MCC	83,592.19	1	\$ 83,592
326	STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITH MCC	1,904,229.33	5	\$ 380,846
327	STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITH CC	422,869.88	2	\$ 211,435
329	MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH MCC	2,699,757.58	7	\$ 385,680
330	MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	2,833,991.34	12	\$ 236,166
331	MAJOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC	146,878.65	1	\$ 146,879
336	PERITONEAL ADHESIOLYSIS WITH CC	514,668.85	3	\$ 171,556
353	HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITH MCC	356,885.44	1	\$ 356,885
355	HERNIA PROCEDURES EXCEPT INGUINAL AND FEMORAL WITHOUT CC/MCC	283,090.41	2	\$ 141,545
356	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITH MCC	2,115,779.70	5	\$ 423,156
357	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITH CC	132,066.25	1	\$ 132,066
358	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES WITHOUT CC/MCC	204,820.06	1	\$ 204,820
368	MAJOR ESOPHAGEAL DISORDERS WITH MCC	782,982.24	5	\$ 156,596
369	MAJOR ESOPHAGEAL DISORDERS WITH CC	83,235.90	1	\$ 83,236
370	MAJOR ESOPHAGEAL DISORDERS WITHOUT CC/MCC	85,614.55	1	\$ 85,615
371	MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITH MCC	230,487.18	3	\$ 76,829
372	MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITH CC	143,772.65	2	\$ 71,886
373	MAJOR GASTROINTESTINAL DISORDERS AND PERITONEAL INFECTIONS WITHOUT CC/MCC	138,546.67	1	\$ 138,547
374	DIGESTIVE MALIGNANCY WITH MCC	498,618.75	4	\$ 124,655
375	DIGESTIVE MALIGNANCY WITH CC	900,766.15	7	\$ 128,681

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376	DIGESTIVE MALIGNANCY WITHOUT CC/MCC	18,581.21	1	\$ 18,581
377	GASTROINTESTINAL HEMORRHAGE WITH MCC	2,488,347.43	21	\$ 118,493
378	GASTROINTESTINAL HEMORRHAGE WITH CC	2,451,534.57	27	\$ 90,798
379	GASTROINTESTINAL HEMORRHAGE WITHOUT CC/MCC	124,805.88	2	\$ 62,403
380	COMPLICATED PEPTIC ULCER WITH MCC	369,693.44	3	\$ 123,231
381	COMPLICATED PEPTIC ULCER WITH CC	115,955.07	2	\$ 57,978
383	UNCOMPLICATED PEPTIC ULCER WITH MCC	215,875.11	2	\$ 107,938
384	UNCOMPLICATED PEPTIC ULCER WITHOUT MCC	81,453.72	1	\$ 81,454
386	INFLAMMATORY BOWEL DISEASE WITH CC	69,561.53	1	\$ 69,562
388	GASTROINTESTINAL OBSTRUCTION WITH MCC	921,497.41	4	\$ 230,374
389	GASTROINTESTINAL OBSTRUCTION WITH CC	687,173.83	9	\$ 76,353
390	GASTROINTESTINAL OBSTRUCTION WITHOUT CC/MCC	242,565.05	4	\$ 60,641
391	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITH MCC	1,392,933.39	15	\$ 92,862
392	ESOPHAGITIS, GASTROENTERITIS AND MISCELLANEOUS DIGESTIVE DISORDERS WITHOUT MCC	1,733,142.24	23	\$ 75,354
393	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH MCC	955,546.45	7	\$ 136,507
394	OTHER DIGESTIVE SYSTEM DIAGNOSES WITH CC	601,465.89	8	\$ 75,183
405	PANCREAS, LIVER AND SHUNT PROCEDURES WITH MCC	715,856.87	2	\$ 357,928
408	BILIARY TRACT PROCEDURES EXCEPT ONLY CHOLECYSTECTOMY WITH OR WITHOUT C.D.E. WITH MCC	418,380.13	1	\$ 418,380
417	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH MCC	721,068.93	3	\$ 240,356
418	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITH CC	271,056.97	2	\$ 135,528
419	LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT C.D.E. WITHOUT CC/MCC	892,418.43	5	\$ 178,484
423	OTHER HEPATOBILIARY OR PANCREAS O.R. PROCEDURES WITH MCC	422,433.63	2	\$ 211,217
432	CIRRHOUS AND ALCOHOLIC HEPATITIS WITH MCC	1,418,433.06	9	\$ 157,604
433	CIRRHOUS AND ALCOHOLIC HEPATITIS WITH CC	321,480.07	5	\$ 64,296
435	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH MCC	750,259.58	6	\$ 125,043
436	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITH CC	69,832.48	1	\$ 69,832
437	MALIGNANCY OF HEPATOBILIARY SYSTEM OR PANCREAS WITHOUT CC/MCC	57,524.09	1	\$ 57,524
438	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH MCC	1,797,586.99	18	\$ 99,866
439	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITH CC	555,059.42	8	\$ 69,382
440	DISORDERS OF PANCREAS EXCEPT MALIGNANCY WITHOUT CC/MCC	60,233.10	1	\$ 60,233
441	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOUS OR ALCOHOLIC HEPATITIS WITH MCC	722,055.24	1	\$ 722,055
442	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOUS OR ALCOHOLIC HEPATITIS WITH CC	74,207.80	1	\$ 74,208
444	DISORDERS OF THE BILIARY TRACT WITH MCC	314,541.25	2	\$ 157,271
445	DISORDERS OF THE BILIARY TRACT WITH CC	509,700.49	6	\$ 84,950
446	DISORDERS OF THE BILIARY TRACT WITHOUT CC/MCC	85,411.64	1	\$ 85,412
453	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH MCC	606,422.93	1	\$ 606,423
454	COMBINED ANTERIOR AND POSTERIOR SPINAL FUSION WITH CC	253,451.11	1	\$ 253,451
459	SPINAL FUSION EXCEPT CERVICAL WITH MCC	653,761.58	2	\$ 326,881
460	SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC	718,458.83	2	\$ 359,229
463	WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS	946,458.03	3	\$ 315,486
464	WOUND DEBRIDEMENT AND SKIN GRAFT EXCEPT HAND FOR MUSCULOSKELETAL AND CONNECTIVE TISSUE DISORDERS	698,406.42	4	\$ 174,602
466	REVISION OF HIP OR KNEE REPLACEMENT WITH MCC	266,046.54	1	\$ 266,047
467	REVISION OF HIP OR KNEE REPLACEMENT WITH CC	730,963.28	3	\$ 243,654
469	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITH MCC OR TOTAL ANKLE	1,080,248.01	4	\$ 270,062
470	MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	4,468,619.23	32	\$ 139,644
472	CERVICAL SPINAL FUSION WITH CC	2,111,773.79	8	\$ 263,972
473	CERVICAL SPINAL FUSION WITHOUT CC/MCC	15,435.91	1	\$ 15,436
477	BIOPSIES OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	483,573.58	1	\$ 483,574
480	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH MCC	4,052,906.93	13	\$ 311,762
481	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITH CC	4,290,173.70	19	\$ 225,799
482	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT WITHOUT CC/MCC	237,967.35	1	\$ 237,967
483	MAJOR JOINT OR LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITIES	924,773.30	5	\$ 184,955

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FYE 6/30/2022

In compliance with Section 2718(e) of the Public Health Service Act for hospitals to make public a list of the hospital's standard charges, the table below represents Zuckerberg San Francisco General Hospital and Trauma Center's average charges for the listed MS-DRG's for services provided to Traditional Medicare patients.

Data represents Average Traditional Medicare Charge per MS-DRG Case
Discharges Between 7/1/2021 - 6/30/2022
Run Date: 7/21/2022

MS-DRG	MS-DRG DESCRIPTION	GROSS CHARGES	CASES	AVG CHARGE PER CASE
485	KNEE PROCEDURES WITH PRINCIPAL DIAGNOSIS OF INFECTION WITH MCC	298,181.11	1	\$ 298,181
488	KNEE PROCEDURES WITHOUT PRINCIPAL DIAGNOSIS OF INFECTION WITH CC/MCC	107,614.00	1	\$ 107,614
492	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH MCC	1,603,200.20	5	\$ 320,640
493	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITH CC	3,391,950.73	11	\$ 308,359
494	LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITHOUTCC/MCC	388,247.89	3	\$ 129,416
495	LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITH MCC	1,698,921.80	1	\$ 1,698,922
500	SOFT TISSUE PROCEDURES WITH MCC	132,975.29	1	\$ 132,975
501	SOFT TISSUE PROCEDURES WITH CC	668,740.60	3	\$ 222,914
503	FOOT PROCEDURES WITH MCC	102,877.66	1	\$ 102,878
506	MAJOR THUMB OR JOINT PROCEDURES	103,888.17	1	\$ 103,888
507	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES WITH CC/MCC	112,297.74	1	\$ 112,298
510	SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITHMCC	286,264.68	2	\$ 143,132
511	SHOULDER, ELBOW OR FOREARM PROCEDURES, EXCEPT MAJOR JOINT PROCEDURES WITHCC	1,515,810.27	6	\$ 252,635
513	HAND OR WRIST PROCEDURES, EXCEPT MAJOR THUMB OR JOINT PROCEDURES WITH CC/MCC	70,024.50	1	\$ 70,025
515	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITH MCC	99,254.59	1	\$ 99,255
516	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITH CC	1,294,749.90	7	\$ 184,964
517	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE O.R. PROCEDURES WITHOUTCC/MCC	199,380.01	1	\$ 199,380
518	BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITH MCC OR DISC DEVICE OR NEUROSTIMULATOR	1,567,001.92	2	\$ 783,501
519	BACK AND NECK PROCEDURES EXCEPT SPINAL FUSION WITH CC	300,467.54	1	\$ 300,468
521	HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITH MCC	817,322.17	3	\$ 272,441
522	HIP REPLACEMENT WITH PRINCIPAL DIAGNOSIS OF HIP FRACTURE WITHOUT MCC	1,657,632.81	9	\$ 184,181
533	FRACTURES OF FEMUR WITH MCC	235,752.34	2	\$ 117,876
535	FRACTURES OF HIP AND PELVIS WITH MCC	50,509.32	1	\$ 50,509
536	FRACTURES OF HIP AND PELVIS WITHOUT MCC	883,275.32	7	\$ 126,182
539	OSTEOMYELITIS WITH MCC	706,850.60	4	\$ 176,713
540	OSTEOMYELITIS WITH CC	467,259.23	5	\$ 93,452
543	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITH CC	775,909.55	7	\$ 110,844
544	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY WITHOUT CC/MCC	60,018.47	1	\$ 60,018
545	CONNECTIVE TISSUE DISORDERS WITH MCC	622,306.29	4	\$ 155,577
546	CONNECTIVE TISSUE DISORDERS WITH CC	261,218.73	1	\$ 261,219
547	CONNECTIVE TISSUE DISORDERS WITHOUT CC/MCC	121,084.57	1	\$ 121,085
551	MEDICAL BACK PROBLEMS WITH MCC	1,697,118.77	8	\$ 212,140
552	MEDICAL BACK PROBLEMS WITHOUT MCC	1,831,926.26	17	\$ 107,760
553	BONE DISEASES AND ARTHROPATHIES WITH MCC	694,883.62	3	\$ 231,628
554	BONE DISEASES AND ARTHROPATHIES WITHOUT MCC	176,287.32	3	\$ 58,762
555	SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	188,917.16	2	\$ 94,459
556	SIGNS AND SYMPTOMS OF MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUTMCC	106,148.82	1	\$ 106,149
557	TENDONITIS, MYOSITIS AND BURSITIS WITH MCC	96,573.78	1	\$ 96,574
558	TENDONITIS, MYOSITIS AND BURSITIS WITHOUT MCC	150,004.44	3	\$ 50,001
559	AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	73,588.44	1	\$ 73,588
560	AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC	171,371.91	2	\$ 85,686
561	AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT CC/MCC	89,571.43	1	\$ 89,571
562	FRACTURE, SPRAIN, STRAIN AND DISLOCATION EXCEPT FEMUR, HIP, PELVIS AND THIGH WITH MCC	347,571.71	4	\$ 86,893
563	FRACTURE, SPRAIN, STRAIN AND DISLOCATION EXCEPT FEMUR, HIP, PELVIS AND THIGH WITHOUT MCC	2,186,153.61	19	\$ 115,061
564	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITH MCC	421,041.58	2	\$ 210,521
565	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITH CC	152,998.75	2	\$ 76,499
566	OTHER MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE DIAGNOSES WITHOUT CC/MCC	170,270.62	5	\$ 34,054
570	SKIN DEBRIDEMENT WITH MCC	2,419,560.83	3	\$ 806,520
571	SKIN DEBRIDEMENT WITH CC	387,873.42	2	\$ 193,937
574	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS WITH CC	107,978.48	1	\$ 107,978
579	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH MCC	138,970.48	2	\$ 69,485
580	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH CC	604,614.79	6	\$ 100,769

Zuckerberg San Francisco General Hospital and Trauma Center
Medicare MS-DRG Average Charge per Case
FYE 6/30/2022

In compliance with Section 2718(e) of the Public Health Service Act for hospitals to make public a list of the hospital's standard charges, the table below represents Zuckerberg San Francisco General Hospital and Trauma Center's average charges for the listed MS-DRG's for services provided to Traditional Medicare patients.

*Data represents Average Traditional Medicare Charge per MS-DRG Case
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Run Date: 7/21/2022*

MS-DRG	MS-DRG DESCRIPTION	GROSS CHARGES	CASES	AVG CHARGE PER CASE
581	OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITHOUT CC/MCC	66,408.71	1	\$ 66,409
592	SKIN ULCERS WITH MCC	279,185.23	2	\$ 139,593
593	SKIN ULCERS WITH CC	236,209.62	2	\$ 118,105
596	MAJOR SKIN DISORDERS WITHOUT MCC	105,275.66	1	\$ 105,276
598	MALIGNANT BREAST DISORDERS WITH CC	166,615.49	1	\$ 166,615
602	CELLULITIS WITH MCC	434,183.81	6	\$ 72,364
603	CELLULITIS WITHOUT MCC	1,534,426.50	23	\$ 66,714
604	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST WITH MCC	547,949.67	5	\$ 109,590
605	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE AND BREAST WITHOUT MCC	1,088,436.75	13	\$ 83,726
606	MINOR SKIN DISORDERS WITH MCC	328,308.63	3	\$ 109,436
607	MINOR SKIN DISORDERS WITHOUT MCC	203,527.55	2	\$ 101,764
615	ADRENAL AND PITUITARY PROCEDURES WITHOUT CC/MCC	121,794.60	1	\$ 121,795
616	AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH MCC	884,409.40	1	\$ 884,409
617	AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	1,146,159.81	7	\$ 163,737
622	SKIN GRAFTS AND WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH MCC	435,164.44	2	\$ 217,582
626	THYROID, PARATHYROID AND THYROID PROCEDURES WITH CC	80,231.75	1	\$ 80,232
627	THYROID, PARATHYROID AND THYROID PROCEDURES WITHOUT CC/MCC	176,306.40	2	\$ 88,153
628	OTHER ENDOCRINE, NUTRITIONAL AND METABOLIC O.R. PROCEDURES WITH MCC	476,312.89	3	\$ 158,771
629	OTHER ENDOCRINE, NUTRITIONAL AND METABOLIC O.R. PROCEDURES WITH CC	413,069.48	2	\$ 206,535
637	DIABETES WITH MCC	1,505,010.17	12	\$ 125,418
638	DIABETES WITH CC	837,633.72	9	\$ 93,070
639	DIABETES WITHOUT CC/MCC	151,037.94	3	\$ 50,346
640	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITH MCC	4,607,992.28	35	\$ 131,657
641	MISCELLANEOUS DISORDERS OF NUTRITION, METABOLISM, FLUIDS AND ELECTROLYTES WITHOUT MCC	2,550,194.93	16	\$ 159,387
643	ENDOCRINE DISORDERS WITH MCC	1,672,004.14	8	\$ 209,001
644	ENDOCRINE DISORDERS WITH CC	791,288.56	9	\$ 87,921
645	ENDOCRINE DISORDERS WITHOUT CC/MCC	243,006.24	4	\$ 60,752
656	KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITH MCC	353,272.57	1	\$ 353,273
657	KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITH CC	350,753.08	2	\$ 175,377
658	KIDNEY AND URETER PROCEDURES FOR NEOPLASM WITHOUT CC/MCC	205,843.22	1	\$ 205,843
659	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH MCC	118,596.59	1	\$ 118,597
660	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH CC	807,019.76	5	\$ 161,404
661	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC	331,027.23	3	\$ 110,342
666	PROSTATECTOMY WITH CC	248,268.89	2	\$ 124,134
669	TRANSURETHRAL PROCEDURES WITH CC	244,340.90	2	\$ 122,170
673	OTHER KIDNEY AND URINARY TRACT PROCEDURES WITH MCC	337,503.86	3	\$ 112,501
674	OTHER KIDNEY AND URINARY TRACT PROCEDURES WITH CC	261,309.99	1	\$ 261,310
682	RENAL FAILURE WITH MCC	2,538,477.80	16	\$ 158,655
683	RENAL FAILURE WITH CC	1,908,538.00	23	\$ 82,980
686	KIDNEY AND URINARY TRACT NEOPLASMS WITH MCC	118,281.28	1	\$ 118,281
687	KIDNEY AND URINARY TRACT NEOPLASMS WITH CC	163,711.92	1	\$ 163,712
689	KIDNEY AND URINARY TRACT INFECTIONS WITH MCC	1,671,141.50	14	\$ 119,367
690	KIDNEY AND URINARY TRACT INFECTIONS WITHOUT MCC	1,505,998.26	22	\$ 68,454
694	URINARY STONES WITHOUT MCC	127,833.95	1	\$ 127,834
696	KIDNEY AND URINARY TRACT SIGNS AND SYMPTOMS WITHOUT MCC	83,863.92	2	\$ 41,932
698	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH MCC	1,310,926.60	13	\$ 100,841
699	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITH CC	874,543.23	10	\$ 87,454
700	OTHER KIDNEY AND URINARY TRACT DIAGNOSES WITHOUT CC/MCC	210,334.88	2	\$ 105,167
711	TESTES PROCEDURES WITH CC/MCC	147,936.24	1	\$ 147,936
713	TRANSURETHRAL PROSTATECTOMY WITH CC/MCC	758,500.96	2	\$ 379,250
714	TRANSURETHRAL PROSTATECTOMY WITHOUT CC/MCC	291,338.15	3	\$ 97,113
715	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES FOR MALIGNANCY WITH CC/MCC	112,033.34	1	\$ 112,033

Zuckerberg San Francisco General Hospital and Trauma Center
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FYE 6/30/2022

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MS-DRG	MS-DRG DESCRIPTION	GROSS CHARGES	CASES	AVG CHARGE PER CASE
717	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES EXCEPT MALIGNANCY WITH CC/MCC	110,910.79	1	\$ 110,911
722	MALIGNANCY, MALE REPRODUCTIVE SYSTEM WITH MCC	689,517.47	2	\$ 344,759
726	BENIGN PROSTATIC HYPERTROPHY WITHOUT MCC	254,038.14	3	\$ 84,679
728	INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM WITHOUT MCC	189,931.92	2	\$ 94,966
737	UTERINE AND ADNEXA PROCEDURES FOR OVARIAN OR ADNEXAL MALIGNANCY WITH CC	153,529.92	1	\$ 153,530
740	UTERINE AND ADNEXA PROCEDURES FOR NON-OVARIAN AND NON-ADNEXAL MALIGNANCY WITH CC	118,161.15	1	\$ 118,161
741	UTERINE AND ADNEXA PROCEDURES FOR NON-OVARIAN AND NON-ADNEXAL MALIGNANCY WITHOUT CC/MCC	230,506.31	1	\$ 230,506
742	UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITH CC/MCC	501,032.92	2	\$ 250,516
744	D&C, CONIZATION, LAPAROSCOPY AND TUBAL INTERRUPTION WITH CC/MCC	134,846.10	1	\$ 134,846
748	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES	91,505.42	1	\$ 91,505
749	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES WITH CC/MCC	186,180.99	1	\$ 186,181
755	MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITH CC	60,149.64	2	\$ 30,075
758	INFECTIONS, FEMALE REPRODUCTIVE SYSTEM WITH CC	270,198.50	2	\$ 135,099
760	MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS WITH CC/MCC	31,867.79	1	\$ 31,868
761	MENSTRUAL AND OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS WITHOUT CC/MCC	130,859.33	4	\$ 32,715
776	POSTPARTUM AND POST ABORTION DIAGNOSES WITHOUT O.R. PROCEDURES	28,119.05	1	\$ 28,119
802	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS WITH MCC	563,597.90	1	\$ 563,598
803	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS WITH CC	123,852.21	1	\$ 123,852
806	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH CC	126,403.84	2	\$ 63,202
807	VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC/MCC	52,805.22	1	\$ 52,805
808	MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISISAND COAGULATION DISORI	122,302.64	1	\$ 122,303
809	MAJOR HEMATOLOGICAL AND IMMUNOLOGICAL DIAGNOSES EXCEPT SICKLE CELL CRISISAND COAGULATION DISORI	300,552.70	2	\$ 150,276
811	RED BLOOD CELL DISORDERS WITH MCC	572,935.21	4	\$ 143,234
812	RED BLOOD CELL DISORDERS WITHOUT MCC	1,009,156.57	13	\$ 77,627
813	COAGULATION DISORDERS	1,048,539.87	8	\$ 131,067
815	RETICULOENDOTHELIAL AND IMMUNITY DISORDERS WITH CC	147,843.94	2	\$ 73,922
820	LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURES WITH MCC	1,613,044.24	1	\$ 1,613,044
823	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH OTHER PROCEDURES WITH MCC	694,042.16	1	\$ 694,042
829	MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASMS WITH OTHERPROCEDURES WITH CC/M	250,161.46	1	\$ 250,161
832	OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITH CC	27,152.66	1	\$ 27,153
834	ACUTE LEUKEMIA WITHOUT MAJOR O.R. PROCEDURES WITH MCC	228,403.25	1	\$ 228,403
840	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH MCC	815,567.07	4	\$ 203,892
841	LYMPHOMA AND NON-ACUTE LEUKEMIA WITH CC	228,374.04	2	\$ 114,187
842	LYMPHOMA AND NON-ACUTE LEUKEMIA WITHOUT CC/MCC	193,882.48	2	\$ 96,941
843	OTHER MYELOPROLIFERATIVE DISORDERS OR POORLY DIFFERENTIATED NEOPLASTIC DIAGNOSES WITH MCC	185,656.43	2	\$ 92,828
847	CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH CC	493,301.14	4	\$ 123,325
853	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH MCC	17,564,361.60	31	\$ 566,592
854	INFECTIOUS AND PARASITIC DISEASES WITH O.R. PROCEDURES WITH CC	486,716.31	3	\$ 162,239
862	POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITH MCC	124,742.77	1	\$ 124,743
863	POSTOPERATIVE AND POST-TRAUMATIC INFECTIONS WITHOUT MCC	80,560.59	2	\$ 40,280
865	VIRAL ILLNESS WITH MCC	84,435.22	1	\$ 84,435
866	VIRAL ILLNESS WITHOUT MCC	69,176.54	1	\$ 69,177
868	OTHER INFECTIOUS AND PARASITIC DISEASES DIAGNOSES WITH CC	32,295.54	1	\$ 32,296
870	SEPTICEMIA OR SEVERE SEPSIS WITH MV >96 HOURS	7,514,835.38	13	\$ 578,064
871	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITH MCC	28,650,542.56	155	\$ 184,842
872	SEPTICEMIA OR SEVERE SEPSIS WITHOUT MV >96 HOURS WITHOUT MCC	2,769,085.36	29	\$ 95,486
876	O.R. PROCEDURES WITH PRINCIPAL DIAGNOSIS OF MENTAL ILLNESS	451,036.52	1	\$ 451,037
884	ORGANIC DISTURBANCES AND INTELLECTUAL DISABILITY	1,400,222.68	10	\$ 140,022
885	PSYCHOSES	2,590,977.07	10	\$ 259,098
886	BEHAVIORAL AND DEVELOPMENTAL DISORDERS	184,122.50	2	\$ 92,061
894	ALCOHOL, DRUG ABUSE OR DEPENDENCE, LEFT AMA	317,934.45	4	\$ 79,484
896	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITH MCC	1,826,011.54	15	\$ 121,734

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MS-DRG	MS-DRG DESCRIPTION	GROSS CHARGES	CASES	AVG CHARGE PER CASE
897	ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC	1,310,749.43	17	\$ 77,103
907	OTHER O.R. PROCEDURES FOR INJURIES WITH MCC	2,684,753.21	8	\$ 335,594
908	OTHER O.R. PROCEDURES FOR INJURIES WITH CC	604,764.63	4	\$ 151,191
909	OTHER O.R. PROCEDURES FOR INJURIES WITHOUT CC/MCC	127,657.60	1	\$ 127,658
914	TRAUMATIC INJURY WITHOUT MCC	36,708.06	1	\$ 36,708
915	ALLERGIC REACTIONS WITH MCC	173,300.56	2	\$ 86,650
916	ALLERGIC REACTIONS WITHOUT MCC	38,311.35	1	\$ 38,311
917	POISONING AND TOXIC EFFECTS OF DRUGS WITH MCC	8,517,487.11	58	\$ 146,853
918	POISONING AND TOXIC EFFECTS OF DRUGS WITHOUT MCC	942,746.34	11	\$ 85,704
919	COMPLICATIONS OF TREATMENT WITH MCC	573,742.06	2	\$ 286,871
920	COMPLICATIONS OF TREATMENT WITH CC	407,636.75	5	\$ 81,527
921	COMPLICATIONS OF TREATMENT WITHOUT CC/MCC	65,816.36	1	\$ 65,816
922	OTHER INJURY, POISONING AND TOXIC EFFECT DIAGNOSES WITH MCC	256,710.57	2	\$ 128,355
940	O.R. PROCEDURES WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH SERVICES WITHCC	111,865.71	1	\$ 111,866
947	SIGNS AND SYMPTOMS WITH MCC	171,463.94	2	\$ 85,732
948	SIGNS AND SYMPTOMS WITHOUT MCC	343,396.04	6	\$ 57,233
955	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA	1,421,112.49	3	\$ 473,704
956	LIMB REATTACHMENT, HIP AND FEMUR PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA	7,521,672.57	12	\$ 626,806
957	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITH MCC	2,166,564.24	5	\$ 433,313
958	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA WITH CC	1,279,927.74	4	\$ 319,982
963	OTHER MULTIPLE SIGNIFICANT TRAUMA WITH MCC	1,666,564.07	8	\$ 208,321
964	OTHER MULTIPLE SIGNIFICANT TRAUMA WITH CC	1,307,680.86	11	\$ 118,880
970	HIV WITH EXTENSIVE O.R. PROCEDURES WITHOUT MCC	580,544.04	1	\$ 580,544
974	HIV WITH MAJOR RELATED CONDITION WITH MCC	2,883,674.32	12	\$ 240,306
975	HIV WITH MAJOR RELATED CONDITION WITH CC	1,021,844.82	10	\$ 102,184
976	HIV WITH MAJOR RELATED CONDITION WITHOUT CC/MCC	171,369.31	2	\$ 85,685
977	HIV WITH OR WITHOUT OTHER RELATED CONDITION	439,752.71	3	\$ 146,584
981	EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH MCC	4,539,208.04	10	\$ 453,921
982	EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH CC	980,223.86	4	\$ 245,056
987	NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH MCC	3,474,716.07	7	\$ 496,388
988	NON-EXTENSIVE O.R. PROCEDURES UNRELATED TO PRINCIPAL DIAGNOSIS WITH CC	484,568.91	5	\$ 96,914
Grand Total		432,308,912	2,441	\$ 177,103