



Executive Summary

Casemix and patient classification systems are important building blocks for contemporary health systems and crucial transparency enablers.

One of the most important tools, and what is known as one of the most successful health care financing systems, Diagnosis Related Groups (DRGs), have been present in Saudi Arabia since 2009. However, the most considerable progress in their implementation has been achieved in the past five years as a result of Vision 2030 transformation efforts.

Being part of Vision 2030, the health insurance sector in Saudi Arabia is spearheading the implementation of new and innovative ways toward more transparency in healthcare financing and provision such as National Platform for Health Information Exchange Services (NPHIES) Saudi Billing System (SBS), and Minimum Data Set (MDS). The implementation of AR-DRG is one of the most important projects as part of CHI's 2020-2024 strategy and through this white paper CHI will explain the concepts of casemix, patient classification and plans for AR-DRG implementation in the Saudi health insurance market.

AR-DRG has already been implemented through Article 11 and is part of the already up and running NPHIES. However, in order to scale up DRG usage and implementation, significant market preparedness and readiness is required.

As part of these requirements, CHI plans a series of educational and knowledge-sharing sessions for the market, followed up by pilot implementation plans and support.

CHI's implementation framework has a comprehensive approach to introducing casemix, by tackling all areas deemed as prerequisite for AR-DRG implementation (clinical coding, clinical documentation, episode grouping, technology, and financial impact).

As per CHI's implementation plan, AR-DRG will be implemented in three phases:

- 1. Phase 1: Market preparedness
- 2. Phase 2: Testing and implementation with selected payers and providers
- 3. Phase 3: First AR-DRG reporting and billing activities

These phases will enable subsequent scaling up of AR-DRG as a reporting and reimbursement tool for the market in 2025 and are more explained further in this document.

This will require significant communication efforts and change management in the market.

The successful planning and implementation of AR-DRG in CHI will enable seamless utilization of this system via NPHIES and pave the way to more transparency and value-based health care in the market.



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Foreword

Transparency has long been the Achilles heel of health systems. Health care, as one of the leading sectors of society around the globe, is gaining more importance and priority and with it the resources committed to the sector are ever increasing. At a stage where around 10 trillion US dollars are spent on healthcare worldwide (equivalent to around 10 per cent of the global economy), there is even more need for transparency and understanding of value for money spent on healthcare.



Following the white paper on Value-Based

Health Care (VBHC) published by CHI at the beginning of this year, the CHI team has produced this white paper on how to introduce and implement a particularly valuable tool in achieving the much required transparency and, at the same time, an enabler for VBHC - Diagnosis Related Groups (DRGs).

DRGs, as the most ubiquitous admitted patient classification system, have been part of Saudi health system for over a decade now and are a well-known and utilized tool. Globally, DRGs have been adopted by many countries over the past five decades and are being used for different purposes (planning, budgeting, research, and reimbursement of services).

CHI plans to make more, and better, use of this already well-established patient classification system in the Kingdom, not only as a provider payment system, but also as a performance

measurement tool in order to better understand the variation in patient care.

The evidence from DRG implementation shows that hospital activity is better measured, and performance comparison is possible.

In addition, efficiency gains can be positive if unintended consequences are addressed accordingly. Finally, increased transparency in the provision of health care should lead to improved quality due to the right incentives.

In alignment with Vision 2030 and health sector transformation plans, CHI is keen to support the market by establishing the required prerequisites to introduce DRGs.

Significant work for DRG preparedness has already been put in place as part of NPHIES including data standardization, clinical coding capacity, and patient classification development.

Further prerequisites are being planned and, through this document, CHI would like to disseminate the strategic direction as well technical requirements for DRG implementation in the market.

Sincerely yours in bringing more transparency to healthcare.

Dr. Shabab Alghamdi, Secretary General



Introduction

This white paper aims to provide guidance to the market on CHI's plans and requirements for Australian Refined - Diagnosis Related Groups (AR-DRG) implementation in the Saudi private health insurance market as part of the Value-Based Health Care (VBHC) agenda and plans.

The focus of this paper is the strategic direction and timelines for AR-DRG implementation.

This paper is part of a series of guidance documents and is in line with the VBHC strategy outlined in the earlier published white paper on VBHC in the Saudi health insurance market [1].

The content of this paper is articulated in the following sections:

- Introduction to casemix
- Patient classification systems
- Admitted patient classification systems
- DRG: history and main elements
- AR-DRGs in CHI: requirements and enablers
- CHI roadmap for AR-DRG implementation
- Next steps

Disseminating CHI plans for AR-DRG implementation as part of 2020-2024 strategy and VBHC agenda is a first step in our journey.

CHI aims to provide guidance and support in implementing this patient classification system.

Education and awareness on casemix, patient classification systems and how AR-DRG works is an important aspect of implementation.

Therefore, good understanding of concepts, definitions and implementation plans is crucial for the introduction of AR-DRG.

While there has been considerable progress with implementing AR-DRG in the Kingdom, especially in the public health care sector, there remains much to be done in the private health care sector to initiate implementation.

This document will provide the required guidance and information on the best approach and roadmap for AR-DRG implementation in the private health care sector. Whilst this document is not exhaustive in terms of all technical and implementation aspects of AR-DRG, it should be considered as the sole source of CHI's strategic direction for AR-DRG implementation.



What is casemix and why is it important?

Casemix is a novel concept that describes patient populations based on any number of specific patient characteristics such as age, gender, diagnoses, risk factors, treatment received, and resources used [2]. It is a consistent method of classifying types of patients, treatments received, and resources utilized and it refers to the mix of types of patients treated by health care providers.

Through casemix we can describe better, and group patient population based on some characteristics (see figure 1).

Figure 1. Illustrative depiction of casemix concept



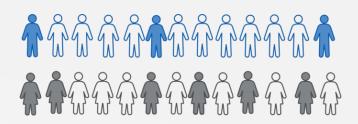












Casemix is a building block for many health system functions and can be used for:

- 1. Research purposes
- 2. Service planning
- 3. Budgeting for providers
- 4. Performance measurement
- 5. Reimbursement
- 6. Monitoring the quality of healthcare and patient safety
- 7. Benchmarking

What is casemix? What is it used for?

- Casemix refers to the mix of types of patient-
- It is a consistent method of classifying patients
- (planning, peformance measurement, budgeting

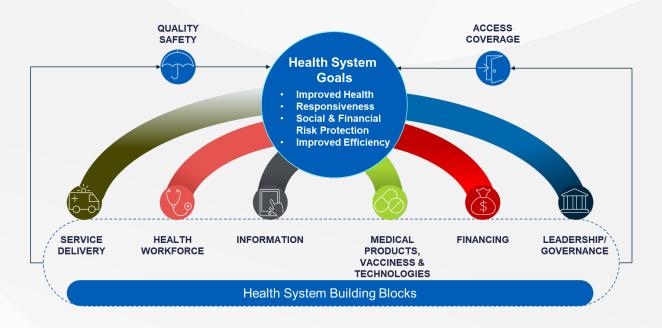
The same concept applies in population health management where population cohorts are stratified and grouped based on risk factors and managed accordingly in the health system. This enables health authorities to build health profiles of their population and predict future morbidity and expected utilization of population groups.



Why is casemix so important to health care and health systems?

Health systems are complex and abstract constructions that are difficult to manage and transform. While the goals and building blocks are clearly defined as per the World Health Organization (WHO) definition, consistent and standard capture of health system activity and resource utilization is challenging and often ambiguous [3].

Figure 2. Health system goals and building blocks (World Health Organization)



Source: Adopted from WHO [3]

Casemix, through consistent patient classification, the definition of health care events (encounter, service event, episode of care) and subsequent recording of resource utilization, enables us to measure patient activity and mix accordingly. Standardization and easier administration of vast health data generated from health systems make it easier to manage things.

This, as a corollary, enables improvement of care delivery, funding of health care services, and benchmarking both within the system and with other health systems internationally.

As health care financing is one of the most important building blocks of a health system, and the main contributor to health system sustainability, the benefits casemix brings in achieving effective health care at efficient cost are crucial. Without casemix and the supporting tools available, it is difficult to bring the required transparency to health systems and understand the value they bring.



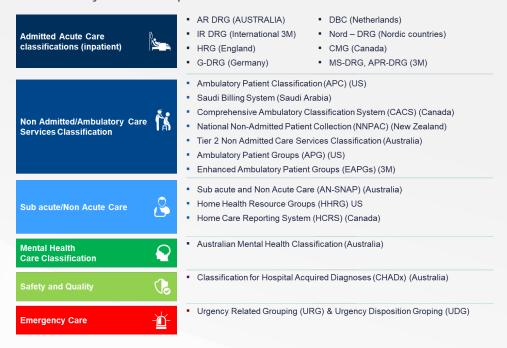
Patient Classification Systems

As mentioned earlier, health systems generate vast data that can lead to an infinite variety of information based on all possible combinations of patient data and characteristics (diagnoses, age, categories, procedures, and others). Making sense of this huge amount of data and extracting the relevant information that will improve our understanding and knowledge of provided care is the first key step towards transparency.

Since the first attempts to classify patients to specific wards based on severity in the early 19th century by Florence Nightingale in the Crimean war and the initially unintended grouping of ten thousand hospital episodes into 383 classes similar by patterns of utilization and clinical coherence, by Fetter and Thompson at Yale, patient classifications have made considerable progress around the globe.

The diffusion of admitted acute care classification has been the most widespread with different modifications at national levels, while other classifications have remained more or less localized (non-admitted, sub-acute, mental health, other).

Figure 3. Types of patient classification systems and examples



Admitted acute care patient classification systems

Admitted care classification systems are used to classify inpatient, and in some cases same day encounters, based on routinely collected data. DRGs or Diagnosis Related Groups is a classification that groups and describes episodes of acute care received by patients admitted to hospital and underpins healthcare funding and reimbursement systems.

At the same time DRGs provide a means for analysis of hospital outputs which can then be used for various clinical, administrative, and financial purposes.



By applying DRGs hospital performance can be measured through linking the characteristics of the patients treated (hospital output) with the resources consumed in treating the patients (hospital input). DRGs classify patients into manageable numbers of diagnosis-based classes that are differentiated based on clinical content and resource consumption (similar but not necessarily identical) [4].

DRGs are dependent on the availability of high-quality coded diagnosis and procedures and other data variables in the minimum data set (MDS). In Saudi Arabia, the diagnoses and procedures are coded using ICD-10-AM/ACHI/ACS, 10th Edition and the Saudi Billing System in Saudi health insurance market.

The advent of DRGs was as a result of pure research efforts by two researchers from the University of Yale in 1976 – Robert B. Fetter and John D. Thompson [5]. At that time, the cost of health care in the United States was escalating with huge variations in cost of health care delivery. Fetter and Thompson were asked by a local University Hospital to analyze 10,000 hospital cases coded with ICD-9-CM diagnoses and procedure codes.

Figure 4. Fetter and Thompson paper on their findings on patient classification









John D. Thompson

Photos source: Wikipedia

Fetter and Thompson came to the conclusion that three variables were strongly associated with resource consumption:

- 1. Surgical procedure.
- 2. Presence of complications and comorbidity and Age
- 3.This finding allowed them to cluster 10,000 episodes into 383 clinically coherent cases with similar patterns of utilization. This method of grouping patient episodes was later coined into Diagnoses Related Groups (DRGs) and their findings were published in the Yale Journal of Biology and Medicine in 1976 titled "A system for cost and reimbursement control in hospitals" [6].



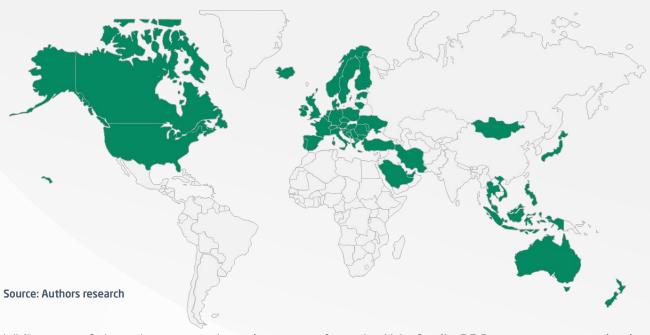
What Fetter and Thompson achieved, effectively, was that they made significant improvements from moving to manage and understand hundreds of thousands of episodes based on vast combination of episode variables to several hundreds of DRGs that are easily managed and understood.

This improvement paved the way for better understanding and management of patient casemix in hospital care.

DRG expansion around the globe and adoption in Saudi Arabia

Since the Yale DRG took off in 1977 and consequent adoption by Centers for Medicare and Medicaid Services (CMS) in 1983, it took a decade for DRGs to cross the Atlantic and branch out in different adoptions and/or adaptations.

Figure 5. DRG global distribution around the world



While most of the subsequent adaptations came from the Yale family DRG tree, some countries introduced their own classification systems with their own logic, but the concept remained the same – grouping inpatient episodes. For instance, the English, Austrian and Polish classifications are driven by procedures compared to the rest which are diagnoses driven [7].

There are examples where countries have taken their own way with DRGs (e.g. Netherlands, Germany, Austria, Poland), but there is also an example where regional collaboration has led to a regional classification – Nordic DRG [8]. Nordic DRG is a good example of how Gulf Cooperation Council (GCC) could emulate a similar system under the auspices of Gulf Health Council.



While there is a clear trend of localization of DRG family adaptations in the last couple of decades around the globe, it remains to be seen whether and how the forthcoming ICD 11 classification will impact the proliferation of admitted patient classification systems [9].

| France | Spain | US | Portugal | US | Iteland | Australia | Germany | KSA | US | Finland | Estonia | Nordic | Countries | Sweden | England | Poland | Australia | Australia | Methedated | Australia | Methedated |

Figure 6. DRG development and adoptions through years and countries

Source: Adopted and adapted from Busse et al 2011

Saudi Arabia was one of the first countries in the Gulf region to introduce a patient classification system, as a result of the Saudi Health Council mandate to adopt ICD-10-AM/ACHI/ACS system in 2009.

Since then, the introduction of AR-DRG and clinical coding has been continuous, but the real impetus came in 2017 with the Vision 2030 Health Realization efforts with implementation of the first Minimum Data Set (MDS) and establishment of an activity data portal at MOH.

Subsequently, this MDS was the foundation for NPHIES requirements and wider country data collection standards.

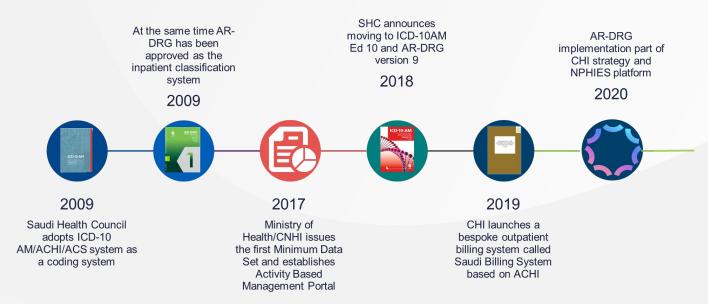
As of 2020 Saudi Arabia moved to ICD-10-AM 10th Edition and AR-DRG version 9.0 as per Saudi Health Council guidance.

Why so many classifications?

- Each health system has its own specificities and context which has led to development or adaption of different patient classification systems
- Saudi Arabia was one of the first countries in the GCC to adopt patient classification system and first in AR-DRG introduction
- As the country became more experienced it is adapting and modifying existing systems to fit local context



Figure 7. DRG introduction timelines in Saudi Arabia



While historically the introduction of DRGs around the globe has been for different purposes in different countries, due to the context of reforms, in most instances reimbursement objectives have come after several years of initial testing and piloting for payment purposes.

Table 1. Original purpose of introducing DRG in different countries

| Country | Year of introduction | Original purpose(s) | Principal purpose(s) (2010) |
|-------------------|----------------------|----------------------------------|---|
| Austria | 1997 | Budgetary allocation | Budgetary allocation, planning |
| England | 1992 | Patient classification | Payment |
| Estonia | 2003 | Payment | Payment |
| Finland | 1995 | Hospital activity & benchmarking | Planning & management, benchmarking, billing |
| France | 1991 | Hospital activity | Payment |
| Germany | 2003 | Payment | Payment |
| Ireland | 1992 | Budgetary allocation | Budgetary allocation |
| Netherlands | 2005 | Payment | Payment |
| Poland | 2008 | Payment | Payment |
| Portugal | 1984 | Hospital output measurement | Budgetary allocation |
| Spain (Catalonia) | 1996 | Payment | Payment, benchmarking |
| Sweden | 1995 | Payment | Benchmarking, performance measurement |

Source: Busse et al 2011

This approach has been reasonable as the maturity of DRGs, as for any other patient classification system, evolves with time as the data improves. In parallel, data improves with more systematic and consistent usage of DRG information.

CHI foresees a similar approach for introducing AR-DRG (more details available in the implementation section).



The introduction of DRGs has had a profound impact on health system financing around the world. There is a good reason that it has been claimed as "the most far-reaching and influential health services research projects of the twentieth century" that has shaped many reforms and improvements introduced in health systems around the world [5].

For instance, a majority of European countries reported a reduction in length of stay between 1995 and 2008 - some more (Estonia 45%) and some less (France 2%), as a result of introducing DRGs [7]. The effect of impact of DRG in different countries is not uniform as the length of stay has been affected by other reforms as well (e.g. referral system, different models of care and purchaser provider split).

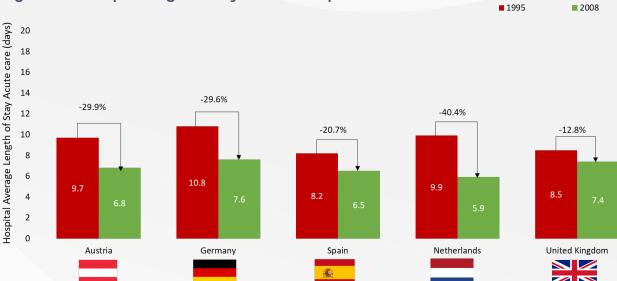


Figure 8. DRG impact length of stay in some European countries

Source: Adapted from Busse et al 2011

In general, there is a wide consensus that DRGs have had a positive impact on transparency and improved productivity of hospitals due to better measurement of hospital activity and cost which enables performance comparison.

When it comes to efficiency and quality of care, there is evidence that the positive impact of DRGs has been affected by some unintended consequences (upcoding, supplier induced demand) for the former, while for the latter there is a need for more inclusion of quality elements into casemix models.

Overall, the general impact is that DRGs have been the patient classification of choice in many health systems around the globe. This explains the relative success of this system and its widespread utilization for different purposes.

AR-DRG in Council of Health Insurance



The Council of Health Insurance (CHI) 2020-2024 strategy calls for a more value-based health care approach to delivery and funding of health care in the market. Value-Based Health Care (VBHC) is CHI's main strategic objective. More details on what VBHC is and CHI strategy is available in the VBHC white paper [1].

This is also in line with the recent Saudi Arabia Health Sector Transformation Program (HSTP) objective of a sustainable health system with value for money, i.e. effective care delivered efficiently is one of the aspirations of the health sector [10].

As part of this important strategic objective, one of the key initiatives is the introduction and implementation of the AR-DRG patient classification system in the Saudi health insurance market. This initiative is in line with the country's overall strategy of delivering effective care in an efficient way and the SHC mandate for using AR-DRGs as the only patient classification system for admitted care.

CHI, following this strategic objective and mandate, is working on establishing the required prerequisites for market utilization of this system. This entails education and dissemination to the market, publishing the market average price and relative resource weights, length of stay norms, determination of funding rules as well as other elements (coding standards, episode definitions, MDS).

Starting in 2021, CHI introduced AR-DRG as a payment system for Article 11 provision of care and this system is now a standard reimbursement mechanism, along with the Saudi Billing System (SBS), for Article 11 health care delivery and funding.

The experience so far shows that the implementation is smooth and that lessons learned are important for scaling up this system to the rest of CHI. As part of this process, CHI is continuously working on maintaining SBS and updating the fee structure and schedule through a methodological approach and robust process.

At the same time, by understanding the casemix of patients via AR-DRG, hospitals will be able to better classify their patients based on the severity of the case and resource utilization and subsequently bill payers accordingly.

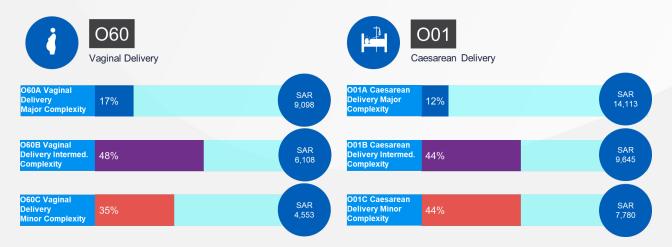
For instance, consider normal delivery and C-section interventions as patient episodes grouped to AR-DRGs. AR-DRGs allow distinction among cases based on principal diagnosis and additional diagnoses, and procedures performed. This enables us to classify normal deliveries into three distinct AR-DRGs:

- **1. 060C Vaginal Delivery, Minor Complexity which,** on average, accounts for approximately one-third of cases (Article 11 fee SAR 4,553)
- 2. O60B Vaginal Delivery, Intermediate Complexity which accounts for the majority of cases (almost half) (Article 11 fee SAR 6,108)
- **3. O60A Vaginal Delivery, Major Complexity which** are less in the overall distribution of cases and costs more than the other AR-DRGs.

The same applies to Caesarean delivery AR-DRGs (001A, 001B and 001C).



Figure 9. Example of AR-DRG severity levels and fees



If hospitals are not aware of their casemix and the actual distribution of patients according to their grouping into relevant AR-DRGs, they will not have a clear picture of the types of cases treated and the clinical and financial implications of the same.

How does AR-DRG work?

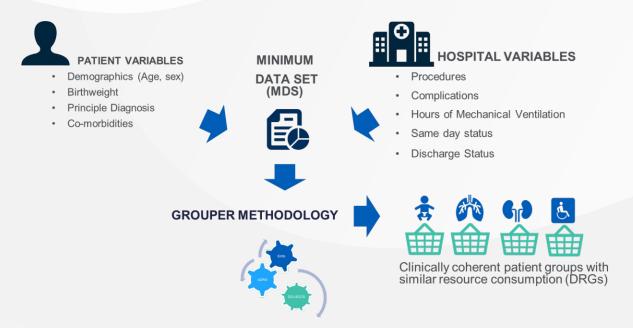
The AR-DRG is a classification system that provides a clinically meaningful way to relate or group the number and types of admitted care patients treated in a hospital to the resources required by the hospital. In CHI, the admitted patient episodes are classified using ICD-10-AM diagnoses codes and SBS interventions along with other routinely collected MDS data including age, gender, birth weight, length of stay, admission weight, hours of mechanical ventilation, discharge status, and encounter type. The grouping process consists of the following steps:

- · Demographic and clinical edits;
- Major Diagnostic Category (MDC) assignment;
- Pre-MDC processing with potential MDC reassignment;
- ADRG assignment;
- Diagnosis Complexity Level (DCL) assignment and Episode Clinical Complexity Level (ECCL) scoring; and finally,
- DRG assignment.

AR DRG v9.0 contains 803 AR-DRGs, including 3 error DRGs.



Figure 10. Example of DRG grouping process



The first step in the classification is the application of demographic and clinical edits to ensure the validity of the data. For example, all Principal Diagnoses or first listed diagnoses are validated against the list of Unacceptable Principal Diagnoses and all diagnoses and ACHI intervention codes are checked in combination with a patient's age and gender. Flags are generated for review of potential errors and any fatal errors result in the assignment to one of three error DRGs 960Z, 961Z, or 963Z.

The second step is the assignment to one of 23 Major Diagnostic Categories (MDCs) based on the Principal Diagnosis (reason for admission). The MDCs are based mainly on body systems (see appendix 1).

If an encounter cannot be assigned to an MDC it will be classified to DRG 960Z Ungroupable.

Thirdly, some cases may have MDC assignment changes based on identification of very high- cost episodes (i.e. long-term mechanical ventilation, tracheostomy and ECMO) or other specific factors which override the principal diagnosis (bone marrow transplants, artificial heart implants, newborn and neonatal encounters, significant trauma in multiple body sites or encounters for para/quadriplegia without a general intervention).

The next step is the assignment to a broad category or Adjacent DRG (ADRG) which is partitioned based on the presence of either general interventions (GI) or, specific interventions (SI). In the absence of either GIs or SIs the ADRG is assigned on the basis of the medical condition/diagnosis. Occasionally ADRGs may also be defined by other variables such as age, length of stay (i.e. same day), or discharge status (e.g. died or transfer). ADRGs may contain one or more splits into end classes, or DRGs.



Table 2. Assignment of adjacent DRG

AR-DRG

AR-DRG

DRG B70A Stroke and Other Cerebrovascular Disorders, Major Complexity

DRG B70B Stroke and Other Cerebrovascular Disorders, Major Complexity

DRG B70C Stroke and Other Cerebrovascular Disorders, Minor Complexity

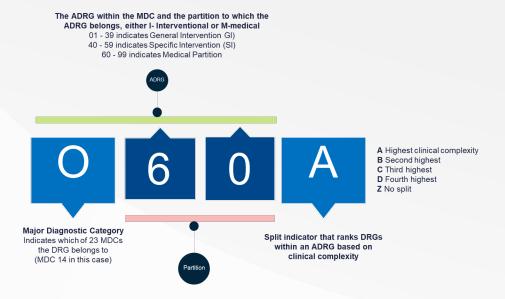
DRG B70D Stroke and Other Cerebrovascular Disorders, Transferred less than 5 Days

The fourth step is the assignment of Diagnosis Complexity levels (DCLs), ranging from 1-5, to each of the principal and additional diagnoses that have been coded for the encounter. The DCLs for each encounter are combined to give the Episode Clinical Complexity Score (ECCS). ECCS values (ranging from 0-31.25) determine the final ADRG splits (A, B, C, D, Z) and are specific to each ADRG.

Table 3. Assignment of DCL/ECCL

| ADRG | AR-DRG | ECCS |
|-----------------------|--|---------------|
| | O60A Vaginal Delivery, Major Complication | 4.0 or higher |
| O60A Vaginal Delivery | O60B Vaginal Delivery, Intermediate Complexity | 2.0 or higher |
| | O60B Vaginal Delivery, Minor Complexity | less than 2.0 |

Figure 12. AR-DRG version 9.0 structure example (Vaginal Delivery)



AR-DRG v9.0 has 399 ADRGs including 3 error ADRGs, which comprise a total of 803 DRGs.

- 1.87 have no split (Z) including the 3 error ADRGS
- 2. 225 have one split (A, B)
- 3.82 have two splits (A, B, C)
- 4. 5 have three splits (A, B, C, D)

As with all DRG classifications, the AR-DRG classification methodology is fully described in the AR-DRG Definitions Manual affording full transparency to the process. However accurate assignment of the DRG is only possible with DRG grouper software [4].



AR-DRG requirements in CHI

As part of standardization and digitization efforts, CHI has launched the National Platform for Health Information Exchange Services (NPHIES) and the ICD-10-AM/ACHI/ACS system and AR-DRG v 9.0 are key data standard requirements for claims submission.

Figure 11. High level depiction of NPHIES



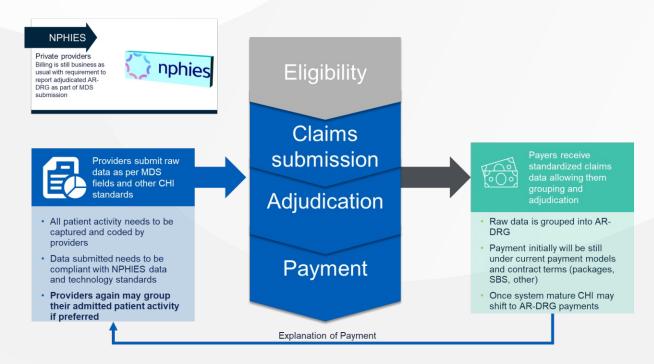
As part of this process the health insurance part of NPHIES (Health Insurance Bus) will accept claims submission and adjudication based only on the above-mentioned standards and other standards applicable in the country.

To ensure that admitted patient activity submitted as part of the claim submission follows these standards and can be grouped into AR-DRGs, providers and payers need to ensure that the submitted data follows NPHIES Minimum Data Set requirements.

NPHIES will capture the entire health insurance value chain and will become the nexus of all health information as we progress to the health information exchange part. This will bring the much needed standardization of data as well as improved interoperability in the ecosystem.



Figure 12. High level business processes for claims submission and adjudication via NPHIES



CHI implementation roadmap

CHI has established a strategy that introduces casemix concepts and tools as part of its strategic objective of moving from volume to value, i.e. VBHC agenda. Casemix is a foundation for the sustainability of health systems and, as such, is an important enabler for VBHC.

AR-DRG is the inpatient classification system mandated by the Saudi Health Council as a nationwide system and CHI has made all required system and design planning requirements around this classification (Article 11, NPHIES, MDS).

AR-DRG is already being implemented as part of Article 11 implementation.

CHI is now looking at moving forward with AR-DRG introduction in the private sector and, as part of this, has devised a plan for implementation of this system.

DRG implementation should be gradual with significant knowledge building and a multidisciplinary approach. Many countries took several years to reach to maturity with DRGs implementation and CHI plans to take a similar approach with this plan.

While significant work has been done in this direction with several milestones achieved, additional work is required to reach the desired level of AR-DRG maturity. CHI has worked on several areas to introduce AR-DRG – from enforcement of ICD-10-AM/ACH/ACS standards to building capacity for clinical coding, mapping, and revenue cycle management capabilities.

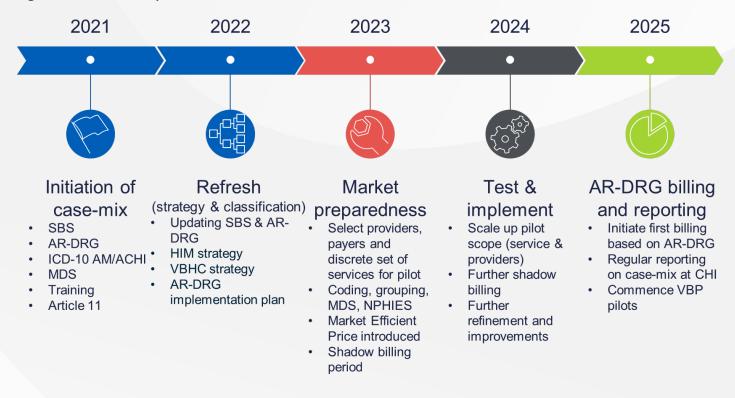
The next phases will focus on preparing the market for AR-DRG implementation via market preparedness engagement and testing on implementation aspects.



Selected payers and providers will be part of the testing period where participants will apply AR-DRGs in a shadow billing format to better understand the casemix of services provided and potential financial implications of introducing AR-DRG prior to full implementation.

The selection will be based on a set of pre-requisites and preparedness evaluation by CHI.

Figure 13. CHI AR-DRG implementation timelines



The lessons learned from this stage will pave the road to full and seamless implementation of AR-DRGs in the private health insurance market for different purposes.

Through the shadow billing exercise providers and payers will have a better understanding of:

- 1. Quality of clinical coding
- Patient casemix
- 3. Potential gaps (processes, standards, codes); and
- 4. Revenue Cycle Management improvements

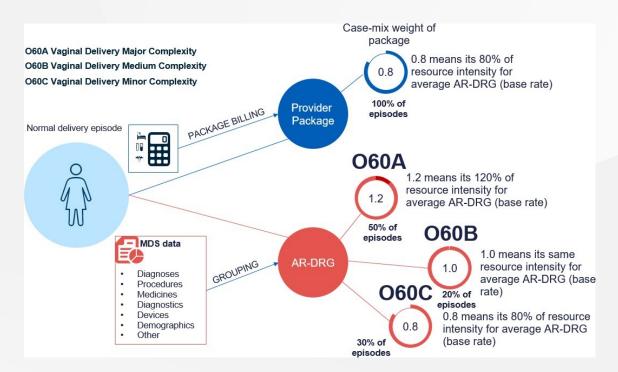
This will enable them to be ready for the last phase when AR-DRGs will be used for performance measurement and value-based payment models.

This stage is particularly important for all stakeholders as a preparation stage to get to the billing and reporting phase of AR-DRG implementation process.

The depiction below (see figure 14) provides an example of shadow billing practice with reference to a specific AR-DRG (060A, 060B and 060C).



Figure 14. Shadow billing process example



As market non-standard billing packages are not based on casemix concept and data, providers may miss important casemix information if their inpatient activity is not grouped in AR-DRG codes and potentially underestimate the resources and efforts it has employed. Shadow billing will provide better insights and more transparency for both payers and providers as the example above shows.

In parallel, CHI will be working on determining and publishing market pricing framework as part of the last phase of this project.

It should be noted that healthcare providers are highly encouraged to utilize DRGs, and will be supported to use this system, for performance measurement and improvement efforts within their organizations as well as regional and international comparison.

The AR-DRG initiative should not be seen as a payment system only, but also as a performance tool for continuous improvement of health care delivery through better understanding of casemix and resource utilization.

For these purposes, health care providers will need to build their own patient level information and costing systems following national costing standards published by the Saudi National Casemix Center of Excellence. CHI and other Saudi health system regulators will provide the required guidance and support on this subject.



Next steps

CHI is committed to supporting payers and providers on their journey towards value-based health care.

To achieve the required transparency, the health insurance market will need to implement casemix tools.

As part of this initiative, CHI will launch an AR-DRG preparedness initiative to support the implementation in the market and improve transparency, efficiency, and quality of healthcare financing in the country. As part of this commitment CHI is planning a pilot implementation initiative with selected payers and providers that meet minimum technical and capability requirements.

CHI will support through knowledge dissemination, expert input and technical assistance where required.

Technical requirement and preparedness will be part of the project to ensure transparent and fair involvement of all stakeholders.

In parallel, CHI will work on establishing a pricing framework that will provide guidance to the market on market efficient prices, as indicative and reference prices once the AR-DRG system and claims data are mature enough. This will be as part of CHI's open data platform initiative where market data will enable and support market players in their tariff negotiation process.

The AR-DRG implementation initiative will be an important building block towards more transparency, efficiency, and quality in the sector.



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APPENDIX 1: MDC list

| MDC | MDC Long Description |
|--------|--|
| MDC 00 | Unassignable to MDC |
| MDC 01 | Diseases and Disorders of the Nervous System |
| MDC 02 | Diseases and Disorders of the Eye |
| MDC 03 | Diseases and Disorders of the Ear, Nose, Mouth and Throat |
| MDC 04 | Diseases and Disorders of the Respiratory System |
| MDC 05 | Diseases and Disorders of the Circulatory System |
| MDC 06 | Diseases and Disorders of the Digestive System |
| MDC 07 | Diseases and Disorders of the Hepatobiliary System and Pancreas |
| MDC 08 | Diseases and Disorders of the Musculoskeletal System and Connective Tissue |
| MDC 09 | Diseases and Disorders of the Skin, Subcutaneous Tissue and Breast |
| MDC 10 | Endocrine, Nutritional and Metabolic Diseases and Disorders |
| MDC 11 | Diseases and Disorders of the Kidney and Urinary Tract |
| MDC 12 | Diseases and Disorders of the Male Reproductive System |
| MDC 13 | Diseases and Disorders of the Female Reproductive System |
| MDC 14 | Pregnancy, Childbirth and the Puerperium |
| MDC 15 | Newborns and Other Neonates |
| MDC 16 | Diseases and Disorders of the Blood and Blood Forming Organs and Immunological Disorders |
| MDC 17 | Neoplastic Disorders (Haematological and Solid Neoplasms) |
| MDC 18 | Infectious and Parasitic Diseases |
| MDC 19 | Mental Diseases and Disorders |
| MDC 20 | Alcohol /Drug Use and Alcohol /Drug Induced Organic Mental Disorder |
| MDC 21 | Injuries, Poisoning and Toxic Effects of Drugs |
| MDC 22 | Burns |
| MDC 23 | Factors Influencing Health Status and Other Contacts with Health Services |



APPENDIX 2: AR-DRG Version 9.0 list with ADRG partitions and AR-DRG

Note 1: Includes Ungroupable and Error DRGsNote 2: I = Intervention; M = Medical

| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| MDC - 00 U | nassignable to MDC | | | |
| A13 | Ventilation >=336hours | I | A13A | VENTILATION >=336HRS, MAJC |
| A13 | Ventilation >=336hours | I | A13B | VENTILATION >=336HRS, MINC |
| A14 | Ventilation >=96hours & <336hours | I | A14A | VENTILATION >=96&<336HRS, MAJO |
| A14 | Ventilation >=96hours & <336hours | I | A14B | VENTILATION >=96&<336HRS, INTC |
| A14 | Ventilation >=96hours & <336hours | I | A14C | VENTILATION >=96&<336HRS, MINC |
| A15 | Tracheostomy | I | A15A | TRACHEOSTOMY, MAJC |
| A15 | Tracheostomy | I | A15B | TRACHEOSTOMY, INTC |
| A15 | Tracheostomy | I | A15C | TRACHEOSTOMY, MINC |
| A40 | ECMO | I | A40Z | ECMO |
| IDC - 01 Di | seases and Disorders of the Nervous System | | | |
| B01 | Ventricular Shunt Revision | I | B01Z | VENTRICULAR SHUNT REV |
| B02 | Cranial Procedures | I | B02A | CRANIAL PROCEDURES, MAJC |
| B02 | Cranial Procedures | I | B02B | CRANIAL PROCEDURES, INTC |
| B02 | Cranial Procedures | I | B02C | CRANIAL PROCEDURES, MINC |
| B03 | Spinal Procedures | I | B03A | SPINAL PROCEDURES, MAJC |
| B03 | Spinal Procedures | I | B03B | SPINAL PROCEDURES, INTC |
| B03 | Spinal Procedures | I | B03C | SPINAL PROCEDURES, MINC |
| B04 | Extracranial Vascular Procedures | 1 | B04A | EXTRACRANIAL VASCULAR PR, MA |
| B04 | Extracranial Vascular Procedures | I | B04B | EXTRACRANIAL VASCULAR PR, INT |
| B04 | Extracranial Vascular Procedures | I | B04C | EXTRACRANIAL VASCULAR PR, MIN |
| B05 | Carpal Tunnel Release | I | B05Z | CARPAL TUNNEL RELEASE |
| B06 | Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy | I | B06A | CBL PSY,MUS DYSY,NPTHY PR,MAJ |
| B06 | Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy | I | B06B | CBL PSY,MUS DYSY,NPTHY PR,INTO |
| B06 | Procedures for Cerebral Palsy, Muscular Dystrophy and Neuropathy | ı | B06C | CBL PSY,MUS DYSY,NPTHY PR,MINO |



| Adjacent DRG | ADRG Description | ADRG Parti- tion | AR- DRG | AR-DRG Description |
|-----------------|---|------------------------|------------|--------------------------------|
| B07 | Cranial or Peripheral Nerve and Other Nervous System Procedures | 1 | B07A | CRANL/PRPHL NERV&OTH PR, MAJC |
| B07 | Cranial or Peripheral Nerve and Other Nervous System Procedures | I | B07B | CRANL/PRPHL NERV&OTH PR, MINC |
| B40 | Plasmapheresis W Neurological Disease, Sameday | I | B40Z | PLASMAPHERESIS + NEURO DIS, SD |
| B41 | Telemetric EEG Monitoring | | B41A | TELEMETRIC EEG MONITOR, MAJC |
| B41 | Telemetric EEG Monitoring | I | B41B | TELEMETRIC EEG MONITOR, MINC |
| B42 | Nervous System Disorders W Ventilator Support | I | B42A | NERV SYS DIS +VENT SUPP, MAJC |
| B42 | Nervous System Disorders W Ventilator Support | I | B42B | NERV SYS DIS +VENT SUPP, INTC |
| B42 | Nervous System Disorders W Ventilator Support | I | B42C | NERV SYS DIS +VENT SUPP, MINC |
| B62 | Apheresis | М | B62Z | APHERESIS |
| B63 | Dementia and Other Chronic Disturbances of Cerebral Function | М | B63A | DMNTIA&CHRNIC DIST CBL FN,MAJC |
| B63 | Dementia and Other Chronic Disturbances of Cerebral Function | М | B63B | DMNTIA&CHRNIC DIST CBL FN,MINC |
| B64 | Delirium | M | B64A | DELIRIUM, MAJC |
| B64 | Delirium | M | B64B | DELIRIUM, MINC |
| B65 | Cerebral Palsy | M | B65Z | CEREBRAL PALSY |
| B66 | Nervous System Neoplasms | M | B66A | NERVOUS SYSTEM NEOPLASM, MAJC |
| B66 | Nervous System Neoplasms | M | B66B | NERVOUS SYSTEM NEOPLASM, MINC |
| B67 | Degenerative Nervous System Disorders | M | B67A | DEGNRTV NERV SYS DIS, MAJC |
| B67 | Degenerative Nervous System Disorders | M | B67B | DEGNRTV NERV SYS DIS, INTC |
| B67 | Degenerative Nervous System Disorders | M | B67C | DEGNRTV NERV SYS DIS, MINC |
| B68 | Multiple Sclerosis and Cerebellar Ataxia | М | B68A | MLT SCLROSIS&CBL ATAXIA, MAJC |
| B68 | Multiple Sclerosis and Cerebellar Ataxia | М | B68B | MLT SCLROSIS&CBL ATAXIA, MINC |
| B69 | TIA and Precerebral Occlusion | М | B69A | TIA & PRECEREBRL OCCLUSN, MAJC |
| B69 | TIA and Precerebral Occlusion | М | B69B | TIA & PRECEREBRL OCCLUSN, MINC |
| B70 | Stroke and Other Cerebrovascular Disorders | М | B70A | STROKE & OTH CEREB DIS, MAJC |
| B70 | Stroke and Other Cerebrovascular Disorders | М | B70B | STROKE & OTH CEREB DIS, INTC |
| B70 | Stroke and Other Cerebrovascular Disorders | М | B70C | STROKE & OTH CEREB DIS, MINC |
| B70 | Stroke and Other Cerebrovascular Disorders | М | B70D | STROKE & OTH CEREB DIS, TR<5D |
| B71 | Cranial and Peripheral Nerve Disorders | М | B71A | CRANIAL&PERIPHL NERV DIS, MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| B71 | Cranial and Peripheral Nerve Disorders | М | B71B | CRANIAL&PERIPHL NERV DIS, MINC |
| B72 | Nervous System Infection Except Viral Meningitis | М | B72A | NRVS SYS INF EX VRL MNGTS,MAJC |
| B72 | Nervous System Infection Except Viral Meningitis | M | B72B | NRVS SYS INF EX VRL MNGTS,MINC |
| B73 | Viral Meningitis | М | B73A | VIRAL MENINGITIS, MAJC |
| B73 | Viral Meningitis | М | B73B | VIRAL MENINGITIS, MINC |
| B74 | Nontraumatic Stupor and Coma | М | B74A | NONTRAUMATIC STUPOR&COMA, MAJC |
| B74 | Nontraumatic Stupor and Coma | М | B74B | NONTRAUMATIC STUPOR&COMA, MINC |
| B75 | Febrile Convulsions | М | B75Z | FEBRILE CONVULSIONS |
| B76 | Seizures | М | B76A | SEIZURES, MAJC |
| B76 | Seizures | М | B76B | SEIZURES, MINC |
| B77 | Headaches | М | B77A | HEADACHES, MAJC |
| B77 | Headaches | М | B77B | HEADACHES, MINC |
| B78 | Intracranial Injuries | М | B78A | INTRACRANIAL INJURIES, MAJC |
| B78 | Intracranial Injuries | M | B78B | INTRACRANIAL INJURIES, MINC |
| B78 | Intracranial Injuries | М | B78C | INTRACRANIAL INJURIES, TR<5D |
| B79 | Skull Fractures | М | B79A | SKULL FRACTURES, MAJC |
| B79 | Skull Fractures | М | B79B | SKULL FRACTURES, MINC |
| B80 | Other Head Injuries | М | B80A | OTHER HEAD INJURIES, MAJC |
| B80 | Other Head Injuries | М | B80B | OTHER HEAD INJURIES, MINC |
| B81 | Other Disorders of the Nervous System | М | B81A | OTHER DIS OF NERVOUS SYS, MAJC |
| B81 | Other Disorders of the Nervous System | М | B81B | OTHER DIS OF NERVOUS SYS, MINC |
| B82 | Chronic and Unspecified Paraplegia/Quadriplegia | М | B82A | CHRONIC & UNSP PARA/QUAD, MAJC |
| B82 | Chronic and Unspecified Paraplegia/Quadriplegia | М | B82B | CHRONIC & UNSP PARA/QUAD, INTC |
| B82 | Chronic and Unspecified Paraplegia/Quadriplegia | М | B82C | CHRONIC & UNSP PARA/QUAD, MINC |
| B83 | Acute Paraplegia and Quadriplegia and Spinal Cord Conditions | M | B83A | AC PARA/QUAD&SPINAL CORD, MAJC |
| B83 | Acute Paraplegia and Quadriplegia and Spinal Cord Conditions | M | B83B | AC PARA/QUAD&SPINAL CORD, INTC |
| B83 | Acute Paraplegia and Quadriplegia and Spinal Cord Conditions | М | B83C | AC PARA/QUAD&SPINAL CORD, MINC |
| MDC - 02 Di | seases and Disorders of the Eye | | | |
| C01 | Procedures for Penetrating Eye Injury | I | C01A | PR FOR PENETRTNG EYE INJ, MAJC |



| Adjacent DRG | ADRG Description | ADRG Parti- tion | AR- DRG | AR-DRG Description |
|-----------------|---|------------------------|------------|--------------------------------|
| C01 | Procedures for Penetrating Eye Injury | I | C01B | PR FOR PENETRTNG EYE INJ, MINC |
| C02 | Enucleations and Orbital Procedures | I | C02A | ENUCLE & ORBITAL PROCS, MAJC |
| C02 | Enucleations and Orbital Procedures | I | C02B | ENUCLE & ORBITAL PROCS, MINC |
| C03 | Retinal Procedures | I | C03A | RETINAL PROCEDURES, MAJC |
| C03 | Retinal Procedures | | C03B | RETINAL PROCEDURES, MINC |
| C04 | Major Corneal, Scleral and Conjunctival Procedures | I | C04A | MJR CORN,SCLERL&CNJNCT PR,MAJO |
| C04 | Major Corneal, Scleral and Conjunctival Procedures | I | C04B | MJR CORN,SCLERL&CNJNCT PR,MINC |
| C05 | Dacryocystorhinostomy | I | C05Z | DACRYOCYSTORHINOSTOMY |
| C10 | Strabismus Procedures | I | C10Z | STRABISMUS PROCEDURES |
| C11 | Eyelid Procedures | I | C11Z | EYELID PROCEDURES |
| C12 | Other Corneal, Scleral and Conjunctival Procedures | I | C12B | OTH CORN SCLERAL&CONJ PR, MINC |
| C13 | Lacrimal Procedures | I | C13Z | LACRIMAL PROCEDURES |
| C14 | Other Eye Procedures | I | C14A | OTHER EYE PROCEDURES, MAJC |
| C14 | Other Eye Procedures | 1 | C14B | OTHER EYE PROCEDURES, MINC |
| C15 | Glaucoma and Complex Cataract Procedures | I | C15Z | GLAUCOMA/CMPLX CATARACT PROC |
| C16 | Lens Procedures | I | C16Z | LENS PROCEDURES |
| C60 | Acute and Major Eye Infections | M | C60A | AC & MJR EYE INFECTIONS, MAJC |
| C60 | Acute and Major Eye Infections | M | C60B | AC & MJR EYE INFECTIONS, MINC |
| C61 | Neurological and Vascular Disorders of the Eye | M | C61A | NEURO & VASCLR DIS EYE, MAJC |
| C61 | Neurological and Vascular Disorders of the Eye | M | C61B | NEURO & VASCLR DIS EYE, MINC |
| C62 | Hyphaema and Medically Managed Trauma to the Eye | М | C62A | HYPH & MED M TRAUMA EYE, MAJC |
| C62 | Hyphaema and Medically Managed Trauma to the Eye | М | C62B | HYPH & MED M TRAUMA EYE, MINC |
| C63 | Other Disorders of the Eye | M | C63A | OTH DIS OF THE EYE, MAJC |
| C63 | Other Disorders of the Eye | M | C63B | OTH DIS OF THE EYE, MINC |
| MDC - 03 Dis | seases and Disorders of the Ear, Nose, Mouth and | Throat | | |
| D01 | Cochlear Implant | I | D01Z | COCHLEAR IMPLANT |
| D02 | Head and Neck Procedures | I | D02A | HEAD & NECK PROCEDURES, MAJC |
| D02 | Head and Neck Procedures | I | D02B | HEAD & NECK PROCEDURES, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|------------------------------------|
| D03 | Surgical Repair for Cleft Lip and Palate Disorders | I | D03A | REPR CLEFT LIP/PALATE, MAJC |
| D03 | Surgical Repair for Cleft Lip and Palate Disorders | I | D03B | REPR CLEFT LIP/PALATE, MINC |
| D04 | Maxillo Surgery | I | D04A | MAXILLO SURGERY, MAJC |
| D04 | Maxillo Surgery | I | D04B | MAXILLO SURGERY, MINC |
| D05 | Parotid Gland Procedures | I | D05Z | PAROTID GLAND PROCEDURES |
| D06 | Sinus and Complex Middle Ear Procedures | I | D06Z | SINUS & COMPLEX MIDDLE EAR PR |
| D10 | Nasal Procedures | I | D10Z | NASAL PROCEDURES |
| D12 | Other Ear, Nose, Mouth and Throat Procedures | I | D12A | OTH EAR,NOSE,MTH&THRT PR, MAJC |
| D12 | Other Ear, Nose, Mouth and Throat Procedures | I | D12B | OTH EAR,NOSE,MTH&THRT PR, MINC |
| D13 | Myringotomy W Tube Insertion | I | D13Z | MYRINGOTOMY + TUBE INSERTION |
| D14 | Mouth and Salivary Gland Procedures | I | D14A | MOUTH&SALIVRY GLAND PR, MAJO |
| D14 | Mouth and Salivary Gland Procedures | I | D14B | MOUTH&SALIVRY GLAND PR, MINO |
| D15 | Mastoid Procedures | I | D15Z | MASTOID PROCEDURES |
| D40 | Dental Extractions and Restorations | I | D40Z | DENTAL EXTRACT & RESTORATION |
| D60 | Ear, Nose, Mouth and Throat Malignancy | М | D60A | EAR,NOSE,MTH&THRT MALIG, MA |
| D60 | Ear, Nose, Mouth and Throat Malignancy | М | D60B | EAR,NOSE,MTH&THRT MALIG, MIN |
| D61 | Dysequilibrium | М | D61A | DYSEQUILIBRIUM, MAJC |
| D61 | Dysequilibrium | М | D61B | DYSEQUILIBRIUM, MINC |
| D62 | Epistaxis | М | D62A | EPISTAXIS, MAJC |
| D62 | Epistaxis | М | D62B | EPISTAXIS, MINC |
| D63 | Otitis Media and Upper Respiratory Infections | М | D63A | OTITIS MEDIA&UPP RESP INF,MAJ |
| D63 | Otitis Media and Upper Respiratory Infections | М | D63B | OTITIS MEDIA&UPP RESP INF,MING |
| D64 | Laryngotracheitis and Epiglottitis | М | D64A | LARYNGOTRTIS&EPIGLOTTITIS,MA |
| D64 | Laryngotracheitis and Epiglottitis | М | D64B | LARYNGOTRTIS&EPIGLOTTITIS,MII |
| D65 | Nasal Trauma and Deformity | М | D65A | NASAL TRAUMA & DEFORMITY, MA |
| D65 | Nasal Trauma and Deformity | М | D65B | NASAL TRAUMA & DEFORMITY, MIN |
| D66 | Other Ear, Nose, Mouth and Throat Disorders | М | D66A | OTH EAR,NOSE,MTH&THRT DIS,M/ JC |
| D66 | Other Ear, Nose, Mouth and Throat Disorders | М | D66B | OTH EAR,NOSE,MTH&THRT DIS,MINC |
| D67 | Oral and Dental Disorders | М | D67A | ORAL & DENTAL DISORDERS, MAJ |
| D67 | Oral and Dental Disorders | М | D67B | ORAL & DENTAL DISORDERS, MINO |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| E01 | Major Chest Procedures | 1 | E01A | MAJOR CHEST PROCEDURES, MAJC |
| E01 | Major Chest Procedures | I | E01B | MAJOR CHEST PROCEDURES, INTC |
| E01 | Major Chest Procedures | I | E01C | MAJOR CHEST PROCEDURES, MINC |
| E02 | Other Respiratory System Gls | I | E02A | OTHER RESPIRATORY SYS GI, MAJC |
| E02 | Other Respiratory System Gls | I | E02B | OTHER RESPIRATORY SYS GI, INTC |
| E02 | Other Respiratory System Gls | I | E02C | OTHER RESPIRATORY SYS GI, MINC |
| E03 | Lung or Heart-Lung Transplant | I | E03Z | LUNG OR HEART-LUNG TRANSPLANT |
| E40 | Respiratory System Disorders W Ventilator Support | I | E40A | RESP SYS DIS, VENT SUPP, MAJC |
| E40 | Respiratory System Disorders W Ventilator Support | I | E40B | RESP SYS DIS, VENT SUPP, MINC |
| E41 | Respiratory System Disorders W Non-Invasive Ventilation | ı | E41A | RESP SYS DIS,NON-INV VENT,MAJC |
| E41 | Respiratory System Disorders W Non-Invasive Ventilation | I | E41B | RESP SYS DIS,NON-INV VENT,MINC |
| E42 | Bronchoscopy | I | E42A | BRONCHOSCOPY, MAJC |
| E42 | Bronchoscopy | I | E42B | BRONCHOSCOPY, INTC |
| E42 | Bronchoscopy | I | E42C | BRONCHOSCOPY, MINC |
| E60 | Cystic Fibrosis | M | E60A | CYSTIC FIBROSIS, MAJC |
| E60 | Cystic Fibrosis | M | E60B | CYSTIC FIBROSIS, MINC |
| E61 | Pulmonary Embolism | M | E61A | PULMONARY EMBOLISM, MAJC |
| E61 | Pulmonary Embolism | M | E61B | PULMONARY EMBOLISM, MINC |
| E62 | Respiratory Infections and Inflammations | M | E62A | RESPIR INFECTN/INFLAMM, MAJC |
| E62 | Respiratory Infections and Inflammations | M | E62B | RESPIR INFECTN/INFLAMM, MINC |
| E63 | Sleep Apnoea | M | E63A | SLEEP APNOEA, MAJC |
| E63 | Sleep Apnoea | M | E63B | SLEEP APNOEA, MINC |
| E64 | Pulmonary Oedema and Respiratory Failure | M | E64A | PULM OEDEMA & RESP FAIL, MAJC |
| E64 | Pulmonary Oedema and Respiratory Failure | M | E64B | PULM OEDEMA & RESP FAIL, MINC |
| E65 | Chronic Obstructive Airways Disease | M | E65A | CHRONIC OBSTR AIRWAY DIS, MAJC |
| E65 | Chronic Obstructive Airways Disease | M | E65B | CHRONIC OBSTR AIRWAY DIS, MINC |
| E66 | Major Chest Trauma | М | E66A | MAJOR CHEST TRAUMA, MAJC |
| E66 | Major Chest Trauma | M | E66B | MAJOR CHEST TRAUMA, INTC |
| E66 | Major Chest Trauma | M | E66C | MAJOR CHEST TRAUMA, MINC |
| E67 | Respiratory Signs and Symptoms | M | E67A | RESP SIGNS & SYMPTOMS, MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|-------------------------------------|
| E67 | Respiratory Signs and Symptoms | M | E67B | RESP SIGNS & SYMPTOMS, MINC |
| E68 | Pneumothorax | M | E68A | PNEUMOTHORAX, MAJC |
| E68 | Pneumothorax | M | E68B | PNEUMOTHORAX, MINC |
| E69 | Bronchitis and Asthma | M | E69A | BRONCHITIS & ASTHMA, MAJC |
| E69 | Bronchitis and Asthma | M | E69B | BRONCHITIS & ASTHMA, MINC |
| E70 | Whooping Cough and Acute Bronchiolitis | M | E70A | WHOOPNG CGH&ACTE BRNCHIO, MAJC |
| E70 | Whooping Cough and Acute Bronchiolitis | M | E70B | WHOOPNG CGH&ACTE BRNCHIO, MINC |
| E71 | Respiratory Neoplasms | M | E71A | RESPIRATORY NEOPLASMS, MAJC |
| E71 | Respiratory Neoplasms | M | E71B | RESPIRATORY NEOPLASMS, MINC |
| E72 | Respiratory Problems Arising from Neonatal Period | M | E72Z | RESP PROBS FROM NEONATL PERI- OD |
| E73 | Pleural Effusion | M | E73A | PLEURAL EFFUSION, MAJC |
| E73 | Pleural Effusion | M | E73B | PLEURAL EFFUSION, INTC |
| E73 | Pleural Effusion | M | E73C | PLEURAL EFFUSION, MINC |
| E74 | Interstitial Lung Disease | M | E74A | INTERSTITIAL LUNG DIS, MAJC |
| E74 | Interstitial Lung Disease | M | E74B | INTERSTITIAL LUNG DIS, MINC |
| E75 | Other Respiratory System Disorders | M | E75A | OTHER RESP SYS DIS, MAJC |
| E75 | Other Respiratory System Disorders | M | E75B | OTHER RESP SYS DIS, MINC |
| E76 | Respiratory Tuberculosis | M | E76Z | RESPIRATORY TUBERCULOSIS |
| E77 | Bronchiectasis | M | E77A | BRONCHIECTASIS, MAJC |
| E77 | Bronchiectasis | M | E77B | BRONCHIECTASIS, MINC |
| MDC - 05 D | iseases and Disorders of the Circulatory System | | | |
| F01 | Implantation and Replacement of AICD, Total System | I | F01A | IMPL/REPLAICD, TOT SYS, MAJC |
| F01 | Implantation and Replacement of AICD, Total System | ı | F01B | IMPL/REPLAICD, TOT SYS, MINC |
| F02 | Other AICD Procedures | | F02Z | OTHER AICD PROCEDURES |
| F03 | Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation | ı | F03A | CRD VLV PR+PMP+INV INVES, MAJO |
| F03 | Cardiac Valve Procedures W CPB Pump W Invasive Cardiac Investigation | I | F03B | CRD VLV PR+PMP+INV INVES, MINC |
| F04 | Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Investigation | ı | F04A | CRD VLV PR+PMP-INV INVES, MAJC |



| djacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|----------------|--|-------------------|------------|--------------------------------|
| F04 | Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Investigation | ı | F04B | CRD VLV PR+PMP-INV INVES, INTC |
| F04 | Cardiac Valve Procedures W CPB Pump W/O Invasive Cardiac Investigation | ı | F04C | CRD VLV PR+PMP-INV INVES, MINC |
| F05 | Coronary Bypass W Invasive Cardiac Investigation | I | F05A | CRNRY BYPSS+INV INVES, MAJC |
| F05 | Coronary Bypass W Invasive Cardiac Investigation | I | F05B | CRNRY BYPSS+INV INVES, MINC |
| F06 | Coronary Bypass W/O Invasive Cardiac Investigation | I | F06A | CRNRY BYPSS-INV INVES, MAJC |
| F06 | Coronary Bypass W/O Invasive Cardiac Investigation | I | F06B | CRNRY BYPSS-INV INVES, INTC |
| F06 | Coronary Bypass W/O Invasive Cardiac Investigation | I | F06C | CRNRY BYPSS-INV INVES, MINC |
| F07 | Other Cardiothoracic/Vascular Procedures W CPB Pump | I | F07A | OTH CARDTHOR/VASC PR+PMP, MAJC |
| F07 | Other Cardiothoracic/Vascular Procedures W CPB Pump | I | F07B | OTH CARDTHOR/VASC PR+PMP, MINC |
| F08 | Major Reconstructive Vascular Procedures W/O CPB Pump | I | F08A | MJR RECNSTR VASC PR-PUMP, MAJC |
| F08 | Major Reconstructive Vascular Procedures W/O CPB Pump | I | F08B | MJR RECNSTR VASC PR-PUMP, INTC |
| F08 | Major Reconstructive Vascular Procedures W/O CPB Pump | I | F08C | MJR RECNSTR VASC PR-PUMP, MINC |
| F09 | Other Cardiothoracic Procedures W/O CPB Pump | I | F09A | OTH CARDIOTHR PR-CPB PMP, MAJC |
| F09 | Other Cardiothoracic Procedures W/O CPB Pump | I | F09B | OTH CARDIOTHR PR-CPB PMP, INTC |
| F09 | Other Cardiothoracic Procedures W/O CPB Pump | I | F09C | OTH CARDIOTHR PR-CPB PMP, MINC |
| F10 | Interventional Coronary Procedures, Admitted for AMI | I | F10A | INTERVENT CRNRY PR + AMI, MAJC |
| F10 | Interventional Coronary Procedures, Admitted for AMI | | F10B | INTERVENT CRNRY PR + AMI, MINC |
| F11 | Amputation, Except Upper Limb and Toe, for Circulatory Disorders | I | F11A | AMP CIRC DIS-UP LMB&TOE, MAJC |
| F11 | Amputation, Except Upper Limb and Toe, for Circulatory Disorders | I | F11B | AMP CIRC DIS-UP LMB&TOE, MINC |
| F12 | Implantation and Replacement of Pacemaker, Total System | I | F12A | IMPL/REPL PM, TOT SYS, MAJC |
| F12 | Implantation and Replacement of Pacemaker, Total System | | F12B | IMPL/REPL PM, TOT SYS, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|-----------------------------------|
| F13 | Amputation, Upper Limb and Toe, for Circulatory Disorders | ı | F13A | AMP CIRC DIS,UPP LMB&TOE, MAJC |
| F13 | Amputation, Upper Limb and Toe, for Circulatory Disorders | I | F13B | AMP CIRC DIS,UPP LMB&TOE, MINC |
| F14 | Vascular Procedures, Except Major Reconstruction, W/O CPB Pump | I | F14A | VASC PR-MJR RECONSTR-PMP, MAJC |
| F14 | Vascular Procedures, Except Major Reconstruction, W/O CPB Pump | I | F14B | VASC PR-MJR RECONSTR-PMP, INTO |
| F14 | Vascular Procedures, Except Major Reconstruction, W/O CPB Pump | I | F14C | VASC PR-MJR RECONSTR-PMP, MINC |
| F17 | Insertion and Replacement of Pacemaker Generator | I | F17A | INSERT/REPLACE PACEM GEN, MAJC |
| F17 | Insertion and Replacement of Pacemaker Generator | I | F17B | INSERT/REPLACE PACEM GEN, MINC |
| F18 | Other Pacemaker Procedures | ı | F18Z | OTHER PACEMAKER PR |
| F19 | Trans-Vascular Percutaneous Cardiac Intervention | I | F19A | TRNS-VSCLR PERC CRDC INT, MAJO |
| F19 | Trans-Vascular Percutaneous Cardiac Intervention | I | F19B | TRNS-VSCLR PERC CRDC INT, MINC |
| F20 | Vein Ligation and Stripping | I | F20Z | VEIN LIGATION & STRIPPING |
| F21 | Other Circulatory System Gls | I | F21A | OTH CIRCULATORY SYS GI, MAJC |
| F21 | Other Circulatory System Gls | 1 | F21B | OTH CIRCULATORY SYS GI, INTC |
| F21 | Other Circulatory System Gls | I | F21C | OTH CIRCULATORY SYS GI, MINC |
| F22 | Insertion of Artificial Heart Device | I | F22Z | INSERT ARTIFICIAL HEART DEVICE |
| F23 | Heart Transplant | I | F23Z | HEART TRANSPLANT |
| F24 | Interventional Coronary Procedures, Not Admitted for AMI | 1 | F24A | INTERV CRNRY PR-AMI, MAJC |
| F24 | Interventional Coronary Procedures, Not Admitted for AMI | I | F24B | INTERV CRNRY PR-AMI, MINC |
| F40 | Circulatory Disorders W Ventilator Support | I | F40A | CIRC DIS +VENT SUPP, MAJC |
| F40 | Circulatory Disorders W Ventilator Support | 1 | F40B | CIRC DIS +VENT SUPP, MINC |
| F41 | Circulatory Disorders, Admitted for AMI W Invasive Cardiac Investigative Procs | ı | F41A | CRC DSRD+AMI+INVA INV PR, MAJC |
| F41 | Circulatory Disorders, Admitted for AMI W Invasive Cardiac Investigative Procs | ı | F41B | CRC DSRD+AMI+INVA INV PR, MINC |
| F42 | Circulatory Disorders, Not Admitted for AMI W Invasive Cardiac Investig Procs | ı | F42A | CIRC DIS-AMI+INVA INV PR, MAJC |



| djacent DRG | ADRG Description | ADRG Partition | AR-DRG | AR-DRG Description |
|----------------|--|-------------------|--------|--------------------------------|
| F42 | Circulatory Disorders, Not Admitted for AMI W Invasive Cardiac Investig Procs | I | F42B | CIRC DIS-AMI+INVA INV PR, MINC |
| F43 | Circulatory Disorders W Non-Invasive Ventilation | I | F43A | CIRC DIS +N-INVAS VENT, MAJC |
| F43 | Circulatory Disorders W Non-Invasive Ventilation | I | F43B | CIRC DIS +N-INVAS VENT, MINC |
| F60 | Circulatory Disorders, Admitted for AMI W/O Invasive Cardiac Investigative Procs | М | F60A | CIRC DIS+AMI-INVA INV PR |
| F60 | Circulatory Disorders, Admitted for AMI W/O Invasive Cardiac Investigative Procs | М | F60B | CIRC DIS+AMI-INVA INV PR,T<5D |
| F61 | Infective Endocarditis | M | F61A | INFECTIVE ENDOCARDITIS, MAJO |
| F61 | Infective Endocarditis | M | F61B | INFECTIVE ENDOCARDITIS, INTC |
| F61 | Infective Endocarditis | M | F61C | INFECTIVE ENDOCARDITIS, MINC |
| F62 | Heart Failure and Shock | M | F62A | HEART FAILURE & SHOCK, MAJC |
| F62 | Heart Failure and Shock | M | F62B | HEART FAILURE & SHOCK, MINC |
| F62 | Heart Failure and Shock | M | F62C | HEART FAILURE & SHOCK, TR<50 |
| F63 | Venous Thrombosis | M | F63A | VENOUS THROMBOSIS, MAJC |
| F63 | Venous Thrombosis | M | F63B | VENOUS THROMBOSIS, MINC |
| F64 | Skin Ulcers in Circulatory Disorders | M | F64A | SKN ULCERS IN CIRC DIS, MAJC |
| F64 | Skin Ulcers in Circulatory Disorders | M | F64B | SKN ULCERS IN CIRC DIS, INTC |
| F64 | Skin Ulcers in Circulatory Disorders | M | F64C | SKN ULCERS IN CIRC DIS, MINC |
| F65 | Peripheral Vascular Disorders | M | F65A | PERIPHERAL VASCULAR DIS, MA |
| F65 | Peripheral Vascular Disorders | M | F65B | PERIPHERAL VASCULAR DIS, MIN |
| F66 | Coronary Atherosclerosis | M | F66A | CORONARY ATHEROSCLEROSIS, MAJC |
| F66 | Coronary Atherosclerosis | М | F66B | CORONARY ATHEROSCLEROSIS, MINC |
| F67 | Hypertension | М | F67A | HYPERTENSION, MAJC |
| F67 | Hypertension | М | F67B | HYPERTENSION, MINC |
| F68 | Congenital Heart Disease | M | F68Z | CONGENITAL HEART DISEASE |
| F69 | Valvular Disorders | M | F69A | VALVULAR DISORDERS, MAJC |
| F69 | Valvular Disorders | М | F69B | VALVULAR DISORDERS, MINC |
| F72 | Unstable Angina | М | F72A | UNSTABLE ANGINA, MAJC |
| F72 | Unstable Angina | М | F72B | UNSTABLE ANGINA, MINC |
| F73 | Syncope and Collapse | M | F73A | SYNCOPE & COLLAPSE, MAJC |
| F73 | Syncope and Collapse | M | F73B | SYNCOPE & COLLAPSE, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR-DRG | AR-DRG Description |
|-----------------|---|-------------------|--------|--------------------------------|
| F74 | Chest Pain | М | F74A | CHEST PAIN, MAJC |
| F74 | Chest Pain | M | F74B | CHEST PAIN, MINC |
| F75 | Other Circulatory Disorders | М | F75A | OTHER CIRCULATORY DIS, MAJC |
| F75 | Other Circulatory Disorders | М | F75B | OTHER CIRCULATORY DIS, INTC |
| F75 | Other Circulatory Disorders | М | F75C | OTHER CIRCULATORY DIS, MINC |
| F76 | Arrhythmia, Cardiac Arrest and Conduction Disorders | М | F76A | ARRHY,CARD ARRST&COND DIS,MAJC |
| F76 | Arrhythmia, Cardiac Arrest and Conduction Disorders | М | F76B | ARRHY,CARD ARRST&COND DIS,MINC |
| MDC - 06 Di | seases and Disorders of the Digestive System | | | |
| G01 | Rectal Resection | I | G01A | RECTAL RESECTION, MAJC |
| G01 | Rectal Resection | I | G01B | RECTAL RESECTION, INTC |
| G01 | Rectal Resection | I | G01C | RECTAL RESECTION, MINC |
| G02 | Major Small and Large Bowel Procedures | I | G02A | MJR SMALL&LARGE BOWEL PR, MAJC |
| G02 | Major Small and Large Bowel Procedures | I | G02B | MJR SMALL&LARGE BOWEL PR, INTC |
| G02 | Major Small and Large Bowel Procedures | I | G02C | MJR SMALL&LARGE BOWEL PR, MINC |
| G03 | Stomach, Oesophageal and Duodenal Procedures | I | G03A | STOMCH,OESHPGL&DUODNLPR, MAJ |
| G03 | Stomach, Oesophageal and Duodenal Procedures | I | G03B | STOMCH,OESHPGL&DUODNLPR, INTO |
| G03 | Stomach, Oesophageal and Duodenal Procedures | I | G03C | STOMCH,OESHPGL&DUODNL PR, MIN |
| G04 | Peritoneal Adhesiolysis | I | G04A | PERITONEAL ADHESOLYSIS, MAJC |
| G04 | Peritoneal Adhesiolysis | I | G04B | PERITONEAL ADHESOLYSIS, INTC |
| G04 | Peritoneal Adhesiolysis | I | G04C | PERITONEAL ADHESOLYSIS, MINC |
| G05 | Minor Small and Large Bowel Procedures | I | G05A | MNR SMALL&LARGE BOWEL PR, MAJO |
| G05 | Minor Small and Large Bowel Procedures | I | G05B | MNR SMALL&LARGE BOWEL PR, MINO |
| G06 | Pyloromyotomy | | G06Z | PYLOROMYOTOMY |
| G07 | Appendicectomy | | G07A | APPENDICECTOMY, MAJC |
| G07 | Appendicectomy | I | G07B | APPENDICECTOMY, MINC |
| G10 | Hernia Procedures | I | G10A | HERNIA PROCEDURES, MAJC |
| G10 | Hernia Procedures | I | G10B | HERNIA PROCEDURES, MINC |
| G11 | Anal and Stomal Procedures | | G11A | ANAL & STOMAL PROCEDURES, MAJO |
| G11 | Anal and Stomal Procedures | I | G11B | ANAL & STOMAL PROCEDURES, MINC |
| G12 | Other Digestive System Gls | I | G12A | OTH DIGESTIVE SYS GI, MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| G12 | Other Digestive System Gls | I | G12B | OTH DIGESTIVE SYS GI, INTC |
| G12 | Other Digestive System Gls | I | G12C | OTH DIGESTIVE SYS GI, MINC |
| G46 | Complex Endoscopy | I | G46A | COMPLEX ENDOSCOPY, MAJC |
| G46 | Complex Endoscopy | I | G46B | COMPLEX ENDOSCOPY, MINC |
| G47 | Gastroscopy | I | G47A | GASTROSCOPY, MAJC |
| G47 | Gastroscopy | I | G47B | GASTROSCOPY&COLONOSCOPY, INTO |
| G47 | Gastroscopy | I | G47C | GASTROSCOPY, MINC |
| G48 | Colonoscopy | I | G48A | COLONOSCOPY, MAJC |
| G48 | Colonoscopy | I | G48B | COLONOSCOPY, MINC |
| G60 | Digestive Malignancy | M | G60A | DIGESTIVE MALIGNANCY, MAJC |
| G60 | Digestive Malignancy | M | G60B | DIGESTIVE MALIGNANCY, MINC |
| G61 | Gastrointestinal Haemorrhage | M | G61A | GASTROINT HAEMORRHAGE, MAJC |
| G61 | Gastrointestinal Haemorrhage | M | G61B | GASTROINT HAEMORRHAGE, MINC |
| G64 | Inflammatory Bowel Disease | M | G64A | INFLAM BOWEL DISEASE, MAJC |
| G64 | Inflammatory Bowel Disease | M | G64B | INFLAM BOWEL DISEASE, MINC |
| G65 | Gastrointestinal Obstruction | M | G65A | GASTROINT OBSTRUCTION, MAJC |
| G65 | Gastrointestinal Obstruction | M | G65B | GASTROINT OBSTRUCTION, MINC |
| G66 | Abdominal Pain and Mesenteric Adenitis | M | G66A | ABDMNL PAIN/MESENT ADNTS, MAJC |
| G66 | Abdominal Pain and Mesenteric Adenitis | M | G66B | ABDMNL PAIN/MESENT ADNTS, MINC |
| G67 | Oesophagitis and Gastroenteritis | M | G67A | OESOPHS & GASTROENTS, MAJC |
| G67 | Oesophagitis and Gastroenteritis | M | G67B | OESOPHS & GASTROENTS, MINC |
| G70 | Other Digestive System Disorders | M | G70A | OTHER DIGESTIVE SYS DIS, MAJC |
| G70 | Other Digestive System Disorders | M | G70B | OTHER DIGESTIVE SYS DIS, INTC |
| G70 | Other Digestive System Disorders | M | G70C | OTHER DIGESTIVE SYS DIS, MINC |
| MDC - 07 D | iseases and Disorders of the Hepatobiliary Syste | em and Pancreas | | |
| H01 | Pancreas, Liver and Shunt Procedures | I | H01A | PANCREAS,LIVER&SHUNT PR, MAJC |
| H01 | Pancreas, Liver and Shunt Procedures | I | H01B | PANCREAS,LIVER&SHUNT PR, INTC |
| H01 | Pancreas, Liver and Shunt Procedures | I | H01C | PANCREAS,LIVER&SHUNT PR, MINC |
| H02 | Major Biliary Tract Procedures | I | H02A | MJR BILIARY TRACT PR, MAJC |
| H02 | Major Biliary Tract Procedures | I | H02B | MJR BILIARY TRACT PR, INTC |
| H02 | Major Biliary Tract Procedures | I | H02C | MJR BILIARY TRACT PR, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|-------------|--------------------------------|
| H05 | Hepatobiliary Diagnostic Procedures | ı | H05A | HEPATOBILIARY DIAG PR, MAJC |
| H05 | Hepatobiliary Diagnostic Procedures | I | H05B | HEPATOBILIARY DIAG PR, INTC |
| H05 | Hepatobiliary Diagnostic Procedures | I | H05C | HEPATOBILIARY DIAG PR, MINC |
| H06 | Other Hepatobiliary and Pancreas Gls | I | H06A | OTH HEPTOBILRY&PANCRS GI, MAJO |
| H06 | Other Hepatobiliary and Pancreas Gls | I | H06B | OTH HEPTOBILRY&PANCRS GI, INTC |
| H06 | Other Hepatobiliary and Pancreas Gls | I | H06C | OTH HEPTOBILRY&PANCRS GI, MINC |
| H07 | Open Cholecystectomy | I | H07A | OPEN CHOLECYSTECTOMY, MAJC |
| H07 | Open Cholecystectomy | I | H07B | OPEN CHOLECYSTECTOMY, INTC |
| H07 | Open Cholecystectomy | ı | H07C | OPEN CHOLECYSTECTOMY, MINC |
| H08 | Laparoscopic Cholecystectomy | ı | H08A | LAP CHOLECYSTECTOMY, MAJC |
| H08 | Laparoscopic Cholecystectomy | I | H08B | LAP CHOLECYSTECTOMY, MINC |
| H09 | Liver Transplant | I | H09Z | LIVER TRANSPLANT |
| H60 | Cirrhosis and Alcoholic Hepatitis | М | H60A | CIRRHOSIS&ALC HEPATITIS, MAJC |
| H60 | Cirrhosis and Alcoholic Hepatitis | M | H60B | CIRRHOSIS&ALC HEPATITIS, INTC |
| H60 | Cirrhosis and Alcoholic Hepatitis | М | H60C | CIRRHOSIS&ALC HEPATITIS, MINC |
| H61 | Malignancy of Hepatobiliary System and Pancreas | М | H61A | MALG HEPATOBIL SYS&PANCR, MAJO |
| H61 | Malignancy of Hepatobiliary System and Pancreas | М | H61B | MALG HEPATOBIL SYS&PANCR, MINO |
| H62 | Disorders of Pancreas, Except Malignancy | M | H62A | PANCREAS DIS -MALIG, MAJC |
| H62 | Disorders of Pancreas, Except Malignancy | М | H62B | PANCREAS DIS -MALIG, MINC |
| H63 | Other Disorders of Liver | М | H63A | OTH DISORDERS OF LIVER, MAJC |
| H63 | Other Disorders of Liver | M | H63B | OTH DISORDERS OF LIVER, INTC |
| H63 | Other Disorders of Liver | M | H63C | OTH DISORDERS OF LIVER, MINC |
| H64 | Disorders of the Biliary Tract | М | H64A | BILIARY TRACT DISORDERS, MAJC |
| H64 | Disorders of the Biliary Tract | M | H64B | BILIARY TRACT DISORDERS, INTC |
| H64 | Disorders of the Biliary Tract | М | H64C | BILIARY TRACT DISORDERS, MINC |
| H65 | Bleeding Oesophageal Varices | М | H65A | BLEED OESOPHAGEAL VARICES,MA |
| H65 | Bleeding Oesophageal Varices | M | H65B | BLEED OESOPHAGEAL VARICES,INT |
| H65 | Bleeding Oesophageal Varices | М | H65C | BLEED OESOPHAGEAL VARICES,MIN |
| IDC - 08 D | iseases and Disorders of the Musculoskeletal Systen | n and Connec | tive Tissue | |
| I01 | Bilateral and Multiple Major Joint Procedures of Lower Limb | ı | 101A | BL&MLT MJR JNT PR LWR LMB,MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| I01 | Bilateral and Multiple Major Joint Procedures of Lower Limb | I | I01B | BL&MLT MJR JNT PR LWR LMB,MINC |
| 102 | Microvascular Tissue Transfers or Skin Grafts, Excluding Hand | I | 102A | MCRVAS TT/SKIN GRAFT-HAND,MAJC |
| 102 | Microvascular Tissue Transfers or Skin Grafts, Excluding Hand | I | 102B | MCRVAS TT/SKIN GRAFT-HAND,INTC |
| 102 | Microvascular Tissue Transfers or Skin Grafts, Excluding Hand | I | 102C | MCRVAS TT/SKIN GRAFT-HAND,MINC |
| 103 | Hip Replacement for Trauma | I | 103A | HIP REPLACEMENT, TRAUMA, MAJC |
| 103 | Hip Replacement for Trauma | I | 103B | HIP REPLACEMENT, TRAUMA, MINC |
| 104 | Knee Replacement | I | 104A | KNEE REPLACEMENT, MAJC |
| 104 | Knee Replacement | I | I04B | KNEE REPLACEMENT, MINC |
| 105 | Other Joint Replacement | I | 105A | OTHER JOINT REPLACEMENT, MAJC |
| 105 | Other Joint Replacement | I | 105B | OTHER JOINT REPLACEMENT, MINC |
| 106 | Spinal Fusion for Deformity | I | 106Z | SPINAL FUSION FOR DEFORMITY |
| 107 | Amputation | I | 107Z | AMPUTATION |
| 108 | Other Hip and Femur Procedures | I | 108A | OTHER HIP & FEMUR PR, MAJC |
| 108 | Other Hip and Femur Procedures | ļ | 108B | OTHER HIP & FEMUR PR, INTC |
| 108 | Other Hip and Femur Procedures | I | 108C | OTHER HIP & FEMUR PR, MINC |
| 109 | Spinal Fusion | I | 109A | SPINAL FUSION, MAJC |
| 109 | Spinal Fusion | ļ | 109B | SPINAL FUSION, INTC |
| 109 | Spinal Fusion | I | 109C | SPINAL FUSION, MINC |
| I10 | Other Back and Neck Procedures | I | I10A | OTHER BACK & NECK PR, MAJC |
| I10 | Other Back and Neck Procedures | I | I10B | OTHER BACK & NECK PR, MINC |
| l11 | Limb Lengthening Procedures | I | I11Z | LIMB LENGTHENING PROCEDURES |
| l12 | Miscellaneous Musculoskeletal Procs for Infection/ Inflammation of Bone and Joint | I | I12A | MISC PR INFC/INFM BNE/JNT,MAJC |
| l12 | Miscellaneous Musculoskeletal Procs for Infection/ Inflammation of Bone and Joint | I | I12B | MISC PR INFC/INFM BNE/JNT,INTC |
| l12 | Miscellaneous Musculoskeletal Procs for Infection/ Inflammation of Bone and Joint | I | I12C | MISC PR INFC/INFM BNE/JNT,MINC |
| I13 | Humerus, Tibia, Fibula and Ankle Procedures | I | I13A | HUMER,TIBIA,FIBUL,ANKL PR,MAJC |
| I13 | Humerus, Tibia, Fibula and Ankle Procedures | I | I13B | HUMER,TIBIA,FIBUL,ANKL PR,INTC |
| I13 | Humerus, Tibia, Fibula and Ankle Procedures | I | I13C | HUMER,TIBIA,FIBUL,ANKL PR,MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|--------------------------------|
| l15 | Cranio-Facial Surgery | I | I15Z | CRANIO-FACIAL SURGERY |
| I16 | Other Shoulder Procedures | I | I16Z | OTHER SHOULDER PROCEDURES |
| l17 | Maxillo-Facial Surgery | I | I17A | MAXILLO-FACIAL SURGERY, MAJC |
| l17 | Maxillo-Facial Surgery | I | I17B | MAXILLO-FACIAL SURGERY, MINC |
| I18 | Other Knee Procedures | I | I18A | OTHER KNEE PROCEDURES, MAJC |
| I18 | Other Knee Procedures | I | I18B | OTHER KNEE PROCEDURES, MINC |
| I19 | Other Elbow and Forearm Procedures | I | I19A | OTHER ELBOW & FOREARM PR, MAJC |
| I19 | Other Elbow and Forearm Procedures | I | I19B | OTHER ELBOW & FOREARM PR, MINC |
| 120 | Other Foot Procedures | I | I20A | OTHER FOOT PROCEDURES, MAJC |
| 120 | Other Foot Procedures | I | I20B | OTHER FOOT PROCEDURES, MINC |
| l21 | Local Excision and Removal of Internal Fixation Devices of Hip and Femur | I | I21A | LOC EX&REM DEV HP&FMR, MAJC |
| I21 | Local Excision and Removal of Internal Fixation Devices of Hip and Femur | 1 | I21B | LOC EX&REM DEV HP&FMR, MINC |
| 123 | Local Excision and Removal of Internal Fixation Devices, Except Hip and Femur | ı | I23A | LOC EX&REM INT DEV-HP&FMR,MAJC |
| 123 | Local Excision and Removal of Internal Fixation Devices, Except Hip and Femur | ı | 123B | LOC EX&REM INT DEV-HP&FMR,MINC |
| 124 | Arthroscopy | 1 | I24A | ARTHROSCOPY, MAJC |
| 124 | Arthroscopy | 1 | I24B | ARTHROSCOPY, MINC |
| 125 | Bone and Joint Diagnostic Procedures Including Biopsy | 1 | I25A | BONE&JNT DIAG PR INC BIOP,MAJC |
| 125 | Bone and Joint Diagnostic Procedures Including Biopsy | I | 125B | BONE&JNT DIAG PR INC BIOP,MINC |
| 127 | Soft Tissue Procedures | I | I27A | SOFT TISSUE PROCEDURES, MAJC |
| 127 | Soft Tissue Procedures | I | I27B | SOFT TISSUE PROCEDURES, MINC |
| 128 | Other Musculoskeletal Procedures | I | 128A | OTH MUSCULOSKELETAL PR, MAJC |
| 128 | Other Musculoskeletal Procedures | I | I28B | OTH MUSCULOSKELETAL PR, INTC |
| 128 | Other Musculoskeletal Procedures | 1 | 128C | OTH MUSCULOSKELETAL PR, MINC |
| 129 | Knee Reconstructions, and Revisions of Reconstructions | 1 | 129Z | KNEE RECONSTRUCTION/REVISION |
| 130 | Hand Procedures | I | 130Z | HAND PROCEDURES |
| I31 | Revision of Hip Replacement | 1 | I31A | REV OF HIP REPLACEMENT, MAJC |
| I31 | Revision of Hip Replacement | 1 | I31B | REV OF HIP REPLACEMENT, INTC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| I31 | Revision of Hip Replacement | I | I31C | REV OF HIP REPLACEMENT, MINC |
| 132 | Revision of Knee Replacement | ı | I32A | REV OF KNEE REPLACEMENT, MAJC |
| 132 | Revision of Knee Replacement | I | I32B | REV OF KNEE REPLACEMENT, MINC |
| 133 | Hip Replacement for Non-Trauma | I | I33A | HIP REPLACE, NON-TRAUMA, MAJC |
| 133 | Hip Replacement for Non-Trauma | I | I33B | HIP REPLACE, NON-TRAUMA, MINC |
| 160 | Femoral Shaft Fractures | M | I60Z | FEMORAL SHAFT FRACTURES |
| I61 | Distal Femoral Fractures | M | I61A | DISTAL FEMORAL FRACTURES, MAJO |
| I61 | Distal Femoral Fractures | M | I61B | DISTAL FEMORAL FRACTURES, MINC |
| 163 | Sprains, Strains and Dislocations of Hip, Pelvis and Thigh | M | I63A | SPR,STR&DSL HIP,PEL&THIGH,MAJC |
| I63 | Sprains, Strains and Dislocations of Hip, Pelvis and Thigh | M | I63B | SPR,STR&DSL HIP,PEL&THIGH,MINC |
| 164 | Osteomyelitis | M | I64A | OSTEOMYELITIS, MAJC |
| 164 | Osteomyelitis | M | I64B | OSTEOMYELITIS, MINC |
| 165 | Musculoskeletal Malignant Neoplasms | M | 165A | MUSCULOSK MALIG NEOPLASM, MA |
| 165 | Musculoskeletal Malignant Neoplasms | M | I65B | MUSCULOSK MALIG NEOPLASM, MIN |
| 166 | Inflammatory Musculoskeletal Disorders | M | I66A | INFLAM MUSCULOSK DIS, MAJC |
| 166 | Inflammatory Musculoskeletal Disorders | M | I66B | INFLAM MUSCULOSK DIS, MINC |
| 167 | Septic Arthritis | M | I67A | SEPTIC ARTHRITIS, MAJC |
| 167 | Septic Arthritis | М | I67B | SEPTIC ARTHRITIS, MINC |
| 168 | Non-surgical Spinal Disorders | M | I68A | NON-SURG SPINAL DIS, MAJC |
| 168 | Non-surgical Spinal Disorders | M | I68B | NON-SURG SPINAL DIS, MINC |
| 169 | Bone Diseases and Arthropathies | M | I69A | BONE DISEASES & ARTHROP, MAJC |
| 169 | Bone Diseases and Arthropathies | M | I69B | BONE DISEASES & ARTHROP, MINC |
| I71 | Other Musculotendinous Disorders | M | I71A | OTH MUSCULOTENDINOUS DIS, MAJ |
| I71 | Other Musculotendinous Disorders | M | I71B | OTH MUSCULOTENDINOUS DIS, MINO |
| 172 | Specific Musculotendinous Disorders | М | 172A | SPECIFIC MUSCTENDIN DIS, MAJC |
| 172 | Specific Musculotendinous Disorders | M | 172B | SPECIFIC MUSCTENDIN DIS, MINC |
| 173 | Aftercare of Musculoskeletal Implants or Prostheses | M | 173A | AFTCARE MUSCSK IMPL/PROS, MAJO |
| 173 | Aftercare of Musculoskeletal Implants or Prostheses | М | 173B | AFTCARE MUSCSK IMPL/PROS, INTC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|------------------------------------|
| 173 | Aftercare of Musculoskeletal Implants or Prostheses | M | 173C | AFTCARE MUSCSK IMPL/PROS, MINC |
| 174 | Injuries to Forearm, Wrist, Hand and Foot | М | 174A | INJ FOREARM, WRIST, HAND, FT, MAJC |
| 174 | Injuries to Forearm, Wrist, Hand and Foot | М | I74B | INJ FOREARM, WRIST, HAND, FT, MINC |
| 175 | Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle | M | 175A | INJ SH,ARM,ELB,KN,LEG,ANK,MAJC |
| 175 | Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle | M | 175B | INJ SH,ARM,ELB,KN,LEG,ANK,INTC |
| 175 | Injuries to Shoulder, Arm, Elbow, Knee, Leg and Ankle | М | 175C | INJ SH,ARM,ELB,KN,LEG,ANK,MINC |
| 176 | Other Musculoskeletal Disorders | М | 176A | OTH MUSCULOSKELETAL DIS, MAJC |
| 176 | Other Musculoskeletal Disorders | М | I76B | OTH MUSCULOSKELETAL DIS, MINC |
| 177 | Fractures of Pelvis | М | 177A | FRACTURES OF PELVIS, MAJC |
| 177 | Fractures of Pelvis | М | 177B | FRACTURES OF PELVIS, MINC |
| 178 | Fractures of Neck of Femur | М | 178A | FRACTURES NECK OF FEMUR, MAJC |
| 178 | Fractures of Neck of Femur | М | 178B | FRACTURES NECK OF FEMUR, MINC |
| 179 | Pathological Fractures | М | 179A | PATHOLOGICAL FRACTURES, MAJC |
| 179 | Pathological Fractures | М | 179B | PATHOLOGICAL FRACTURES, INTC |
| 179 | Pathological Fractures | М | 179C | PATHOLOGICAL FRACTURES, MINC |
| 180 | Femoral Fractures, Transferred to Acute Facility <2 Days | M | 180Z | FEMORAL FRACT, TRANSFERRED <2 |
| IDC - 09 D | iseases and Disorders of the Skin, Subcutaneous Ti | ssue and Bre | ast | |
| J01 | Microvascular Tissue Transfers for Skin, Subcutaneous Tissue & Breast Disorders | 1 | J01A | MICRVS TSS TRNS SKN/BRST, MAJC |
| J01 | Microvascular Tissue Transfers for Skin, Subcutaneous Tissue & Breast Disorders | 1 | J01B | MICRVS TSS TRNS SKN/BRST, MINC |
| J06 | Major Procedures for Breast Disorders | I | J06A | MAJOR PR FOR BREAST DIS, MAJC |
| J06 | Major Procedures for Breast Disorders | I | J06B | MAJOR PR FOR BREAST DIS, MINC |
| J07 | Minor Procedures for Breast Disorders | | J07Z | MINOR PR FOR BREAST DIS |
| J08 | Other Skin Grafts and Debridement Procedures | I | J08A | OTH SKN GRF& DBRDMNT PR, MAJC |
| J08 | Other Skin Grafts and Debridement Procedures | I | J08B | OTH SKN GRF& DBRDMNT PR, INTC |
| J08 | Other Skin Grafts and Debridement Procedures | I | J08C | OTH SKN GRF& DBRDMNT PR, MINC |
| J09 | Perianal and Pilonidal Procedures | I | J09Z | PERIANAL & PILONIDAL PROCS |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|----------------------------------|
| J10 | Plastic GIs for Skin, Subcutaneous Tissue and Breast Disorders | ı | J10A | SKN,TIS&BRST PLASTIC GI, MAJC |
| J10 | Plastic GIs for Skin, Subcutaneous Tissue and Breast Disorders | I | J10B | SKN,TIS&BRST PLASTIC GI, MINC |
| J11 | Other Skin, Subcutaneous Tissue and Breast Procedures | I | J11A | OTH SKN,SUBC TIS&BRST PR, MAJC |
| J11 | Other Skin, Subcutaneous Tissue and Breast Procedures | I | J11B | OTH SKN,SUBC TIS&BRST PR, MINC |
| J12 | Lower Limb Procedures W Ulcer or Cellulitis | I | J12A | LWR LMB PR +ULC/CEL, MAJC |
| J12 | Lower Limb Procedures W Ulcer or Cellulitis | I | J12B | LWR LMB PR +ULC/CEL, MINC |
| J13 | Lower Limb Procedures W/O Ulcer or Cellulitis | I | J13A | LWR LMB PR -ULC/CEL, MAJC |
| J13 | Lower Limb Procedures W/O Ulcer or Cellulitis | I | J13B | LWR LMB PR -ULC/CEL, MINC |
| J14 | Major Breast Reconstructions | I | J14Z | MAJOR BREAST RECONSTRUCTIONS |
| J60 | Skin Ulcers | М | J60A | SKIN ULCERS, MAJC |
| J60 | Skin Ulcers | М | J60B | SKIN ULCERS, INTC |
| J60 | Skin Ulcers | М | J60C | SKIN ULCERS, MINC |
| J62 | Malignant Breast Disorders | М | J62A | MALIGNANT BREAST DIS, MAJC |
| J62 | Malignant Breast Disorders | М | J62B | MALIGNANT BREAST DIS, MINC |
| J63 | Non-Malignant Breast Disorders | М | J63A | NON-MALIGNANT BREAST DIS, MAJO |
| J63 | Non-Malignant Breast Disorders | М | J63B | NON-MALIGNANT BREAST DIS, MINC |
| J64 | Cellulitis | М | J64A | CELLULITIS, MAJC |
| J64 | Cellulitis | М | J64B | CELLULITIS, MINC |
| J65 | Trauma to Skin, Subcutaneous Tissue and Breast | М | J65A | TRAUMA TO SKN, SUB TIS&BST, MAJC |
| J65 | Trauma to Skin, Subcutaneous Tissue and Breast | М | J65B | TRAUMA TO SKN, SUB TIS&BST, MINC |
| J67 | Minor Skin Disorders | М | J67A | MINOR SKIN DISORDERS, MAJC |
| J67 | Minor Skin Disorders | М | J67B | MINOR SKIN DISORDERS, MINC |
| J68 | Major Skin Disorders | М | J68A | MAJOR SKIN DISORDERS, MAJC |
| J68 | Major Skin Disorders | М | J68B | MAJOR SKIN DISORDERS, MINC |
| J69 | Skin Malignancy | М | J69A | SKIN MALIGNANCY, MAJC |
| J69 | Skin Malignancy | М | J69B | SKIN MALIGNANCY, MINC |
| IDC - 10 | Endocrine, Nutritional and Metabolic Diseases and [| Disorders | | |
| K01 | Gls for Diabetic Complications | I | K01A | GI FOR DIABETIC COMPL, MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|--------------------------------|
| K01 | Gls for Diabetic Complications | I | K01B | GI FOR DIABETIC COMPL, INTC |
| K01 | Gls for Diabetic Complications | I | K01C | GI FOR DIABETIC COMPL, MINC |
| K02 | Pituitary Procedures | 1 | K02Z | PITUITARY PROCEDURES |
| K03 | Adrenal Procedures | 1 | K03Z | ADRENAL PROCEDURES |
| K05 | Parathyroid Procedures | I | K05A | PARATHYROID PROCEDURES, MAJC |
| K05 | Parathyroid Procedures | I | K05B | PARATHYROID PROCEDURES, MINC |
| K06 | Thyroid Procedures | I | K06A | THYROID PROCEDURES, MAJC |
| K06 | Thyroid Procedures | I | K06B | THYROID PROCEDURES, MINC |
| K08 | Thyroglossal Procedures | I | K08Z | THYROGLOSSAL PROCEDURES |
| K09 | Other Endocrine, Nutritional and Metabolic Gls | I | K09A | OTH ENDCRN,NUTR&METAB GI, MAJC |
| K09 | Other Endocrine, Nutritional and Metabolic Gls | I | K09B | OTH ENDCRN,NUTR&METAB GI, MINC |
| K10 | Revisional and Open Bariatric Procedures | I | K10Z | REV & OPEN BARIATRIC PR |
| K11 | Major Laparoscopic Bariatric Procedures | I | K11Z | MAJOR LAP BARIATRIC PR |
| K12 | Other Bariatric Procedures | I | K12Z | OTHER BARIATRIC PROCS |
| K13 | Plastic GIs for Endocrine, Nutritional and Metabolic Disorders | I | K13Z | PLAS GI - END,NUT,MET DIS |
| K40 | Endoscopic and Investigative Procedures for Metabolic Disorders | ı | K40A | ENDO&INVEST PR METAB DIS, MAJC |
| K40 | Endoscopic and Investigative Procedures for Metabolic Disorders | 1 | K40B | ENDO&INVEST PR METAB DIS, MINC |
| K60 | Diabetes | М | K60A | DIABETES, MAJC |
| K60 | Diabetes | М | K60B | DIABETES, MINC |
| K61 | Severe Nutritional Disturbance | М | K61A | SEV NUTRIT DISTURBANCE, MAJC |
| K61 | Severe Nutritional Disturbance | М | K61B | SEV NUTRIT DISTURBANCE, MINC |
| K62 | Miscellaneous Metabolic Disorders | М | K62A | MISC METABOLIC DISORDERS, MAJC |
| K62 | Miscellaneous Metabolic Disorders | М | K62B | MISC METABOLIC DISORDERS, INTC |
| K62 | Miscellaneous Metabolic Disorders | М | K62C | MISC METABOLIC DISORDERS, MINC |
| K63 | Inborn Errors of Metabolism | М | K63A | INBORN ERR OF METABOLISM, MAJC |
| K63 | Inborn Errors of Metabolism | М | K63B | INBORN ERR OF METABOLISM, MINC |
| K64 | Endocrine Disorders | М | K64A | ENDOCRINE DISORDERS, MAJC |
| K64 | Endocrine Disorders | М | K64B | ENDOCRINE DISORDERS, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|----------------------------------|
| L02 | Operative Insertion of Peritoneal Catheter for Dialysis | I | L02A | OP INS PERI CTH DIALYSIS, MAJC |
| L02 | Operative Insertion of Peritoneal Catheter for Dialysis | I | L02B | OP INS PERI CTH DIALYSIS, MINC |
| L03 | Kidney, Ureter and Major Bladder Procedures for Neoplasm | I | L03A | KDNY,URT&MJR BLDR PR NPSM,MAJC |
| L03 | Kidney, Ureter and Major Bladder Procedures for Neoplasm | ı | L03B | KDNY,URT&MJR BLDR PR NPSM,INTC |
| L03 | Kidney, Ureter and Major Bladder Procedures for Neoplasm | ı | L03C | KDNY,URT&MJR BLDR PR NPSM,MINC |
| L04 | Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm | ı | L04A | KDY,URT&MJR BLDR PR N-NPM,MAJC |
| L04 | Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm | ı | L04B | KDY,URT&MJR BLDR PR N-NPM,INTC |
| L04 | Kidney, Ureter and Major Bladder Procedures for Non-Neoplasm | ı | L04C | KDY,URT&MJR BLDR PR N-NPM,MINC |
| L05 | Transurethral Prostatectomy for Urinary Disorder | I | L05A | TRANSURTH PROSTMY,URI DIS,MAJC |
| L05 | Transurethral Prostatectomy for Urinary Disorder | I | L05B | TRANSURTH PROSTMY, URI DIS, MINC |
| L06 | Minor Bladder Procedures | I | L06A | MINOR BLADDER PROCEDURES, MAJ |
| L06 | Minor Bladder Procedures | I | L06B | MINOR BLADDER PROCEDURES, INTO |
| L06 | Minor Bladder Procedures | I | L06C | MINOR BLADDER PROCEDURES, MIN |
| L07 | Other Transurethral Procedures | I | L07A | OTH TRANSURETHRAL PROCS, MAJO |
| L07 | Other Transurethral Procedures | I | L07B | OTH TRANSURETHRAL PROCS, MINC |
| L08 | Urethral Procedures | I | L08A | URETHRAL PROCEDURES, MAJC |
| L08 | Urethral Procedures | I | L08B | URETHRAL PROCEDURES, MINC |
| L09 | Other Procedures for Kidney and Urinary Tract Disorders | ı | L09A | OTH PR KIDNY&URNRY TR DIS,MAJC |
| L09 | Other Procedures for Kidney and Urinary Tract Disorders | ı | L09B | OTH PR KIDNY&URNRY TR DIS,INTC |
| L09 | Other Procedures for Kidney and Urinary Tract Disorders | ı | L09C | OTH PR KIDNY&URNRY TR DIS,MINC |
| L10 | Kidney Transplant | I | L10A | KDNY TRANSPLNT, AGE<=16Y/MAJC |
| L10 | Kidney Transplant | I | L10B | KDNY TRANSPLNT, AGE>=17Y+MINC |
| L40 | Ureteroscopy | I | L40Z | URETEROSCOPY |
| L41 | Cystourethroscopy for Urinary Disorder, Sameday | I | L41Z | CYSTOURETHROSCOPY URI DIS, SD |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|----------------------------------|
| L42 | ESW Lithotripsy | I | L42Z | ESW LITHOTRIPSY |
| L60 | Kidney Failure | M | L60A | KIDNEY FAILURE, MAJC |
| L60 | Kidney Failure | M | L60B | KIDNEY FAILURE, INTC |
| L60 | Kidney Failure | M | L60C | KIDNEY FAILURE, MINC |
| L61 | Haemodialysis | M | L61Z | HAEMODIALYSIS |
| L62 | Kidney and Urinary Tract Neoplasms | М | L62A | KDNY&UNRY TR NEOPLASMS, MAJC |
| L62 | Kidney and Urinary Tract Neoplasms | М | L62B | KDNY&UNRY TR NEOPLASMS, INTC |
| L62 | Kidney and Urinary Tract Neoplasms | М | L62C | KDNY&UNRY TR NEOPLASMS, MINC |
| L63 | Kidney and Urinary Tract Infections | М | L63A | KDNY&UNRY TR INFECTIONS, MAJC |
| L63 | Kidney and Urinary Tract Infections | М | L63B | KDNY&UNRY TR INFECTIONS, MINC |
| L64 | Urinary Stones and Obstruction | М | L64A | URINARY STONES & OBSTR, MAJC |
| L64 | Urinary Stones and Obstruction | М | L64B | URINARY STONES & OBSTR, MINC |
| L65 | Kidney and Urinary Tract Signs and Symptoms | М | L65A | KDNY&UNRY TR SGNS&SYMPS, MAJO |
| L65 | Kidney and Urinary Tract Signs and Symptoms | М | L65B | KDNY&UNRY TR SGNS&SYMPS, MINC |
| L66 | Urethral Stricture | М | L66Z | URETHRAL STRICTURE |
| L67 | Other Kidney and Urinary Tract Disorders | М | L67A | OTH KIDNY&URNRY TRCT DIS, MAJC |
| L67 | Other Kidney and Urinary Tract Disorders | М | L67B | OTH KIDNY&URNRY TRCT DIS, INTC |
| L67 | Other Kidney and Urinary Tract Disorders | М | L67C | OTH KIDNY&URNRY TRCT DIS, MINC |
| L68 | Peritoneal Dialysis | М | L68Z | PERITONEAL DIALYSIS |
| MDC - 12 D | iseases and Disorders of the Male Reproductive Sy | /stem | | |
| M01 | Major Male Pelvic Procedures | I | M01A | MAJOR MALE PELVIC PROCS, MAJC |
| M01 | Major Male Pelvic Procedures | I | M01B | MAJOR MALE PELVIC PROCS, MINC |
| M02 | Transurethral Prostatectomy for Reproductive System Disorder | ı | M02A | TRANSURTH PROSTMY, REP DIS, MAJO |
| M02 | Transurethral Prostatectomy for Reproductive System Disorder | ı | M02B | TRANSURTH PROSTMY, REP DIS, MINO |
| M03 | Penis Procedures | 1 | M03A | PENIS PROCEDURES, MAJC |
| M03 | Penis Procedures | I | M03B | PENIS PROCEDURES, MINC |
| M04 | Testes Procedures | I | M04Z | TESTES PROCEDURES |
| M05 | Circumcision | I | M05Z | CIRCUMCISION |
| M06 | Other Male Reproductive System Gls | I | M06A | OTH MALE REPROD SYS GI,MAJC |
| M06 | Other Male Reproductive System GIs | I | M06B | OTH MALE REPROD SYS GI,MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|-------------------------------------|
| M40 | Cystourethroscopy for Male Reproductive System Disorder, Sameday | ı | M40Z | CYSTURTHRSCPY,MALE REPR DIS,SD |
| M60 | Male Reproductive System Malignancy | М | M60A | MALE REPR SYS MALIG, MAJC |
| M60 | Male Reproductive System Malignancy | М | M60B | MALE REPR SYS MALIG, MINC |
| M61 | Benign Prostatic Hypertrophy | М | M61A | BENIGN PROSTATIC HYPERTR, MAJC |
| M61 | Benign Prostatic Hypertrophy | М | M61B | BENIGN PROSTATIC HYPERTR, MINC |
| M62 | Male Reproductive System Inflammation | М | M62A | MALE REPROD SYS INFLAMM, MAJC |
| M62 | Male Reproductive System Inflammation | M | M62B | MALE REPROD SYS INFLAMM, MINC |
| M63 | Male Sterilisation Procedures | М | M63Z | MALE STERILISATION PROCS |
| M64 | Other Male Reproductive System Disorders | M | M64A | OTHER MALE REPROD SYS DIS,MAJC |
| M64 | Other Male Reproductive System Disorders | М | M64B | OTHER MALE REPROD SYS DIS,MINC |
| MDC - 13 | Diseases and Disorders of the Female Reproductive | System | | |
| N01 | Pelvic Evisceration and Radical Vulvectomy | I | N01Z | PELVIC EVISC & RAD VLVMY |
| N04 | Hysterectomy for Non-Malignancy | I | N04A | HYSTERECTOMY FOR N-MAL, MAJC |
| N04 | Hysterectomy for Non-Malignancy | I | N04B | HYSTERECTOMY FOR N-MAL, MINC |
| N05 | Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy | ı | N05A | OOPH&COM FAL TBE PR N-MAL,MAJO |
| N05 | Oophorectomy and Complex Fallopian Tube Procedures for Non-Malignancy | ı | N05B | OOPH&COM FAL TBE PR N-MAL,MINC |
| N06 | Female Reproductive System Reconstructive Procedures | ı | N06A | FEM REP SYS RECON PROC, MAJC |
| N06 | Female Reproductive System Reconstructive Procedures | ı | N06B | FEM REP SYS RECON PROC, MINC |
| N07 | Other Uterus and Adnexa Procedures for Non- Malignancy | ı | N07A | OTH UTRS & ADNX PR N-MAL, MAJC |
| N07 | Other Uterus and Adnexa Procedures for Non- Malignancy | ı | N07B | OTH UTRS & ADNX PR N-MAL, MINC |
| N08 | Endoscopic and Laparoscopic Procedures, Female Reproductive System | 1 | N08Z | ENDOS & LAPAR PR, FEM REPR SYS |
| N09 | Other Vagina, Cervix and Vulva Procedures | ı | N09A | OTH VAG,CERVIX&VULVA PR, MAJC |
| N09 | Other Vagina, Cervix and Vulva Procedures | I | N09B | OTH VAG,CERVIX&VULVA PR, MINC |
| N10 | Diagnostic Curettage and Diagnostic Hysteroscopy | I | N10Z | DXC CURETTGE, DXC HYSTEROSCO- PY |
| N11 | Other Female Reproductive System Gls | I | N11A | OTH FEM REPROD SYS GI, MAJC |
| N11 | Other Female Reproductive System Gls | ı | N11B | OTH FEM REPROD SYS GI, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| N12 | Uterus and Adnexa Procedures for Malignancy | I | N12A | UTERUS & ADNEXA PR MALIG, MAJC |
| N12 | Uterus and Adnexa Procedures for Malignancy | I | N12B | UTERUS & ADNEXA PR MALIG, INTC |
| N12 | Uterus and Adnexa Procedures for Malignancy | I | N12C | UTERUS & ADNEXA PR MALIG, MINC |
| N60 | Female Reproductive System Malignancy | M | N60A | FEMALE REPROD SYS MALIG, MAJC |
| N60 | Female Reproductive System Malignancy | М | N60B | FEMALE REPROD SYS MALIG, MINC |
| N61 | Female Reproductive System Infections | М | N61A | FEM REPROD SYS INFECT, MAJC |
| N61 | Female Reproductive System Infections | М | N61B | FEM REPROD SYS INFECT, MINC |
| N62 | Menstrual and Other Female Reproductive System Disorders | M | N62A | MNSTRL&OTH FEM REPR DIS, MAJC |
| N62 | Menstrual and Other Female Reproductive System Disorders | M | N62B | MNSTRL&OTH FEM REPR DIS, MINC |
| MDC - 14 | Pregnancy, Childbirth and the Puerperium | | | |
| O01 | Caesarean Delivery | ı | O01A | CAESAREAN DELIVERY, MAJC |
| O01 | Caesarean Delivery | I | O01B | CAESAREAN DELIVERY, INTC |
| O01 | Caesarean Delivery | ı | O01C | CAESAREAN DELIVERY, MINC |
| O02 | Vaginal Delivery W Gls | I | O02A | VAGINAL DELIVERY +GI, MAJC |
| O02 | Vaginal Delivery W Gls | I | O02B | VAGINAL DELIVERY +GI, MINC |
| O03 | Ectopic Pregnancy | I | O03Z | ECTOPIC PREGNANCY |
| O04 | Postpartum and Post Abortion W Gls | I | O04A | POSTPARTUM&POST ABORTN+GI,MAJ |
| O04 | Postpartum and Post Abortion W Gls | I | O04B | POSTPARTUM&POST ABORTN+GI,MIN |
| O05 | Abortion W Gls | I | O05Z | ABORTION WITH GI |
| O60 | Vaginal Delivery | М | O60A | VAGINAL DELIVERY, MAJC |
| O60 | Vaginal Delivery | М | O60B | VAGINAL DELIVERY, INTC |
| O60 | Vaginal Delivery | М | O60C | VAGINAL DELIVERY, MINC |
| O61 | Postpartum and Post Abortion W/O Gls | М | O61A | POSTPART&POST ABORTN -GI, MAJC |
| O61 | Postpartum and Post Abortion W/O Gls | М | O61B | POSTPART&POST ABORTN -GI, MINC |
| O63 | Abortion W/O Gls | М | O63A | ABORTION W/O GI, MAJC |
| O63 | Abortion W/O Gls | М | O63B | ABORTION W/O GI, MINC |
| O66 | Antenatal and Other Obstetric Admissions | М | O66A | ANTENATAL&OTH OBS ADM, MAJC |
| O66 | Antenatal and Other Obstetric Admissions | М | O66B | ANTENATAL&OTH OBS ADM, INTC |
| O66 | Antenatal and Other Obstetric Admissions | М | O66C | ANTENATAL&OTH OBS ADM, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--------------------------------|
| P01 | Neonate W Sig GI or Vent>=96hrs, Died or Transfer to Acute Facility <5 Days | ı | P01Z | NEONATE W SIG GI/VENT, D/TR<5D |
| P02 | Cardiothoracic and Vascular Procedures for Neonates | ı | P02Z | NEO,CARDIOTHORACIC/VASCULAR PR |
| P03 | Neonate, AdmWt 1000-1499g W Significant GI or Ventilation >=96hours | 1 | P03A | NEO,ADMWT 1000-1499G+GI/V,MAJC |
| P03 | Neonate, AdmWt 1000-1499g W Significant GI or Ventilation >=96hours | 1 | P03B | NEO,ADMWT 1000-1499G+GI/V,MINC |
| P04 | Neonate, AdmWt 1500-1999g W Significant GI or Ventilation >=96hours | ı | P04A | NEO,ADMWT 1500-1999G+GI/V,MAJC |
| P04 | Neonate, AdmWt 1500-1999g W Significant GI or Ventilation >=96hours | I | P04B | NEO,ADMWT 1500-1999G+GI/V,MINC |
| P05 | Neonate, AdmWt 2000-2499g W Significant GI or Ventilation >=96hours | I | P05A | NEO,ADMWT 2000-2499G+GI/V,MAJC |
| P05 | Neonate, AdmWt 2000-2499g W Significant GI or Ventilation >=96hours | ı | P05B | NEO,ADMWT 2000-2499G+GI/V,MINC |
| P06 | Neonate, AdmWt >=2500g W Significant GI or Ventilation >=96hours | 1 | P06A | NEO,ADMWT >=2500G+GI/VENT,MAJC |
| P06 | Neonate, AdmWt >=2500g W Significant GI or Ventilation >=96hours | I | P06B | NEO,ADMWT >=2500G+GI/VENT,MINC |
| P07 | Neonate, AdmWt <750g W Significant GI | ı | P07Z | NEONATE, ADMWT <750G +GI |
| P08 | Neonate, AdmWt 750-999g W Significant GI | I | P08Z | NEONATE, ADMWT 750-999G +GI |
| P60 | Neonate W/O Sig GI or Vent>=96hrs, Died or Transferred to Acute Facility <5Days | М | P60A | NEONATE -GI/V, D/TR<5D, MAJC |
| P60 | Neonate W/O Sig GI or Vent>=96hrs, Died or Transferred to Acute Facility <5Days | М | P60B | NEONATE -GI/V, D/TR<5D, MINC |
| P61 | Neonate, AdmWt <750g W/O Significant GI | М | P61Z | NEONATE, ADMWT <750G -GI |
| P62 | Neonate, AdmWt 750-999g W/O Significant GI | М | P62A | NEO, ADMWT 750-999G -GI, MAJC |
| P62 | Neonate, AdmWt 750-999g W/O Significant GI | М | P62B | NEO, ADMWT 750-999G -GI, MINC |
| P63 | Neonate, AdmWt 1000-1249g W/O Significant GI or Ventilation >=96hours | М | P63A | NEO,ADMWT 1000-1249G-GI/V,MAJC |
| P63 | Neonate, AdmWt 1000-1249g W/O Significant GI or Ventilation >=96hours | М | P63B | NEO,ADMWT 1000-1249G-GI/V,MINC |
| P64 | Neonate, AdmWt 1250-1499g W/O Significant GI or Ventilation >=96hours | М | P64A | NEO,ADMWT 1250-1499G-GI/V,MAJC |
| P64 | Neonate, AdmWt 1250-1499g W/O Significant GI or Ventilation >=96hours | М | P64B | NEO,ADMWT 1250-1499G-GI/V,MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|--------------------------------|
| P65 | Neonate, AdmWt 1500-1999g W/O Significant GI or Ventilation >=96hours | M | P65A | NEO,ADMWT 1500-1999G-GI/V,EXTC |
| P65 | Neonate, AdmWt 1500-1999g W/O Significant GI or Ventilation >=96hours | М | P65B | NEO,ADMWT 1500-1999G-GI/V,MAJC |
| P65 | Neonate, AdmWt 1500-1999g W/O Significant GI or Ventilation >=96hours | M | P65C | NEO,ADMWT 1500-1999G-GI/V,INTC |
| P65 | Neonate, AdmWt 1500-1999g W/O Significant GI or Ventilation >=96hours | М | P65D | NEO,ADMWT 1500-1999G-GI/V,MINC |
| P66 | Neonate, AdmWt 2000-2499g W/O Significant GI or Ventilation >=96hours | М | P66A | NEO,ADMWT 2000-2499G-GI/V,EXTC |
| P66 | Neonate, AdmWt 2000-2499g W/O Significant GI or Ventilation >=96hours | M | P66B | NEO,ADMWT 2000-2499G-GI/V,MAJC |
| P66 | Neonate, AdmWt 2000-2499g W/O Significant GI or Ventilation >=96hours | М | P66C | NEO,ADMWT 2000-2499G-GI/V,INTC |
| P66 | Neonate, AdmWt 2000-2499g W/O Significant GI or Ventilation >=96hours | М | P66D | NEO,ADMWT 2000-2499G-GI/V,MINC |
| P67 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, <37 Completed Wks Gestation | М | P67A | NEO,WT>=2500G-GI/V,<37WKS,EXTC |
| P67 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, <37 Completed Wks Gestation | М | P67B | NEO,WT>=2500G-GI/V,<37WKS,MAJC |
| P67 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, <37 Completed Wks Gestation | М | P67C | NEO,WT>=2500G-GI/V,<37WKS,INTC |
| P67 | Neonate, AdmWt >=2500g W/O Sig `GI/Vent>=96hrs, <37 Completed Wks Gestation | M | P67D | NEO,WT>=2500G-GI/V,<37WKS,MINC |
| P68 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, >=37 Completed Wks Gestation | M | P68A | NEO,W>=2500G-GI/V,>=37WKS,EXTC |
| P68 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, >=37 Completed Wks Gestation | M | P68B | NEO,W>=2500G-GI/V,>=37WKS,MAJC |
| P68 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, >=37 Completed Wks Gestation | М | P68C | NEO,W>=2500G-GI/V,>=37WKS,INTC |
| P68 | Neonate, AdmWt >=2500g W/O Sig GI/ Vent>=96hrs, >=37 Completed Wks Gestation | M | P68D | NEO,W>=2500G-GI/V,>=37WKS,MINC |
| MDC - 16 | Diseases and Disorders of the Blood and Blood For | ming Organs | and Immuno | ological Disorders |
| Q01 | Splenectomy | I | Q01Z | SPLENECTOMY |
| Q02 | Blood and Immune System Disorders W Other Gls | I | Q02A | BLD&IMM SYS DIS+OTH GI,MAJC |
| Q02 | Blood and Immune System Disorders W Other Gls | I | Q02B | BLD&IMM SYS DIS+OTH GI,MINC |
| Q60 | Reticuloendothelial and Immunity Disorders | М | Q60A | RETICLENDO&IMMUNITY DIS, MAJC |
| Q60 | Reticuloendothelial and Immunity Disorders | М | Q60B | RETICLENDO&IMMUNITY DIS, MINC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description | | | | |
|--|--|-------------------|------------|--------------------------------|--|--|--|--|
| Q61 | Red Blood Cell Disorders | M | Q61A | RED BLOOD CELL DISORDERS, MAJC | | | | |
| Q61 | Red Blood Cell Disorders | M | Q61B | RED BLOOD CELL DISORDERS, INTC | | | | |
| Q61 | Red Blood Cell Disorders | M | Q61C | RED BLOOD CELL DISORDERS, MINC | | | | |
| Q62 | Coagulation Disorders | M | Q62A | COAGULATION DISORDERS, MAJC | | | | |
| Q62 | Coagulation Disorders | M | Q62B | COAGULATION DISORDERS, MINC | | | | |
| MDC - 17 Neoplastic Disorders (Haematological and Solid Neoplasms) | | | | | | | | |
| R01 | Lymphoma and Leukaemia W Major Gls | I | R01A | LYMPHMA&LEUKMA+MJR GI, MAJC | | | | |
| R01 | Lymphoma and Leukaemia W Major Gls | I | R01B | LYMPHMA&LEUKMA+MJR GI, MINC | | | | |
| R02 | Other Neoplastic Disorders W Major Gls | I | R02A | OTH NPLSTC DIS+MJR GI, MAJC | | | | |
| R02 | Other Neoplastic Disorders W Major Gls | I | R02B | OTH NPLSTC DIS+MJR GI, INTC | | | | |
| R02 | Other Neoplastic Disorders W Major Gls | I | R02C | OTH NPLSTC DIS+MJR GI, MINC | | | | |
| R03 | Lymphoma and Leukaemia W Other Gls | I | R03A | LYMPHMA&LEUKMA+OTH GI, MAJC | | | | |
| R03 | Lymphoma and Leukaemia W Other Gls | I | R03B | LYMPHMA&LEUKMA+OTH GI, INTC | | | | |
| R03 | Lymphoma and Leukaemia W Other Gls | I | R03C | LYMPHMA&LEUKMA+OTH GI, MINC | | | | |
| R04 | Other Neoplastic Disorders W Other Gls | I | R04A | OTH NPLSTC DIS+OTH GI, MAJC | | | | |
| R04 | Other Neoplastic Disorders W Other Gls | I | R04B | OTH NPLSTC DIS+OTH GI, MINC | | | | |
| R05 | Allogeneic Bone Marrow Transplant | I | R05A | ALLOGENEIC BMT, AGE<=16Y/MAJC | | | | |
| R05 | Allogeneic Bone Marrow Transplant | I | R05B | ALLOGENEIC BMT, AGE>=17Y+MINC | | | | |
| R06 | Autologous Bone Marrow Transplant | I | R06A | AUTOLOGOUS BMT, MAJC | | | | |
| R06 | Autologous Bone Marrow Transplant | I | R06B | AUTOLOGOUS BMT, MINC | | | | |
| R60 | Acute Leukaemia | M | R60A | ACUTE LEUKAEMIA, MAJC | | | | |
| R60 | Acute Leukaemia | M | R60B | ACUTE LEUKAEMIA, INTC | | | | |
| R60 | Acute Leukaemia | M | R60C | ACUTE LEUKAEMIA, MINC | | | | |
| R61 | Lymphoma and Non-Acute Leukaemia | M | R61A | LYMPHOMA&N-ACUTE LEUK, MAJC | | | | |
| R61 | Lymphoma and Non-Acute Leukaemia | M | R61B | LYMPHOMA&N-ACUTE LEUK, INTC | | | | |
| R61 | Lymphoma and Non-Acute Leukaemia | M | R61C | LYMPHOMA&N-ACUTE LEUK, MINC | | | | |
| R62 | Other Neoplastic Disorders | M | R62A | OTHER NEOPLASTIC DIS, MAJC | | | | |
| R62 | Other Neoplastic Disorders | M | R62B | OTHER NEOPLASTIC DIS, INTC | | | | |
| R62 | Other Neoplastic Disorders | M | R62C | OTHER NEOPLASTIC DIS, MINC | | | | |
| R63 | Chemotherapy | M | R63Z | CHEMOTHERAPY | | | | |



| Adja- cent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|----------------------|---|-------------------|------------|--------------------------------|
| T01 | Infectious and Parasitic Diseases W Gls | I | T01A | INFECT&PARAS DIS +GI, MAJC |
| T01 | Infectious and Parasitic Diseases W Gls | I | T01B | INFECT&PARAS DIS +GI, INTC |
| T01 | Infectious and Parasitic Diseases W Gls | I | T01C | INFECT&PARAS DIS +GI, MINC |
| T40 | Infectious and Parasitic Diseases W Ventilator Support | I | T40Z | INFECT&PARASTIC DIS +VENT SUPP |
| T60 | Septicaemia | M | T60A | SEPTICAEMIA, MAJC |
| T60 | Septicaemia | M | T60B | SEPTICAEMIA, INTC |
| T60 | Septicaemia | M | T60C | SEPTICAEMIA, MINC |
| T61 | Postoperative Infections | M | T61A | POSTOP INFECT, MAJC |
| T61 | Postoperative Infections | M | T61B | POSTOP INFECT, MINC |
| T62 | Fever of Unknown Origin | M | T62A | FEVER OF UNKNOWN ORIGIN, MAJC |
| T62 | Fever of Unknown Origin | M | T62B | FEVER OF UNKNOWN ORIGIN, MINC |
| T63 | Viral Illnesses | M | T63A | VIRAL ILLNESS, MAJC |
| T63 | Viral Illnesses | M | T63B | VIRAL ILLNESS, MINC |
| T64 | Other Infectious and Parasitic Diseases | M | T64A | OTH INFECT&PARASITIC DIS, MAJC |
| T64 | Other Infectious and Parasitic Diseases | M | T64B | OTH INFECT&PARASITIC DIS, INTC |
| T64 | Other Infectious and Parasitic Diseases | M | T64C | OTH INFECT&PARASITIC DIS, MINC |
| MDC - 19 | Mental Diseases and Disorders | | | |
| U40 | Mental Health Treatment W ECT, Sameday | I | U40A | MTL HEALTH TREAT+ECT, SD, MAJC |
| U40 | Mental Health Treatment W ECT, Sameday | 1 | U40B | MTL HEALTH TREAT+ECT, SD, MINC |
| U60 | Mental Health Treatment W/O ECT, Sameday | M | U60Z | MENTAL HEALTH -ECT, SD |
| U61 | Schizophrenia Disorders | M | U61A | SCHIZOPHRENIA DISORDERS, MAJC |
| U61 | Schizophrenia Disorders | M | U61B | SCHIZOPHRENIA DISORDERS, MINC |
| U62 | Paranoia and Acute Psychotic Disorders | M | U62A | PARA&ACUTE PSYCH DIS, MAJC |
| U62 | Paranoia and Acute Psychotic Disorders | M | U62B | PARA&ACUTE PSYCH DIS, MINC |
| U63 | Major Affective Disorders | M | U63A | MAJOR AFFECTIVE DIS, MAJC |
| U63 | Major Affective Disorders | M | U63B | MAJOR AFFECTIVE DIS, MINC |
| U64 | Other Affective and Somatoform Disorders | M | U64A | OTH AFFECT&SOMATOFRM DIS, MAJO |
| U64 | Other Affective and Somatoform Disorders | M | U64B | OTH AFFECT&SOMATOFRM DIS, MINO |
| U65 | Anxiety Disorders | M | U65A | ANXIETY DISORDERS, MAJC |
| U65 | Anxiety Disorders | M | U65B | ANXIETY DISORDERS, MINC |
| U66 | Eating and Obsessive-Compulsive Disorders | M | U66A | EATNG&OBSESSV-COMPLSV DIS,MAJ |
| U66 | Eating and Obsessive-Compulsive Disorders | M | U66B | EATNG&OBSESSV-COMPLSV DIS,MIN |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|---------------------------------|
| U67 | Personality Disorders and Acute Reactions | M | U67A | PERSONLTY DIS&ACUTE REACT, MAJC |
| U67 | Personality Disorders and Acute Reactions | М | U67B | PERSONLTY DIS&ACUTE REACT,MINC |
| U68 | Childhood Mental Disorders | М | U68A | CHILDHOOD MENTAL DIS, MAJC |
| U68 | Childhood Mental Disorders | М | U68B | CHILDHOOD MENTAL DIS, MINC |
| MDC - 20 A | Icohol /Drug Use and Alcohol /Drug Induced Organic | : Mental Diso | rder | |
| V60 | Alcohol Intoxication and Withdrawal | М | V60A | ALCOHOL INTOX & WITHDRWL, MAJC |
| V60 | Alcohol Intoxication and Withdrawal | М | V60B | ALCOHOL INTOX & WITHDRWL, MINC |
| V61 | Drug Intoxication and Withdrawal | М | V61A | DRUG INTOXN&WITHDRAWAL, MAJC |
| V61 | Drug Intoxication and Withdrawal | М | V61B | DRUG INTOXN&WITHDRAWAL, MINC |
| V62 | Alcohol Use and Dependence | М | V62A | ALCOHOL USE & DEPENDENCE, MAJC |
| V62 | Alcohol Use and Dependence | М | V62B | ALCOHOL USE & DEPENDENCE, MINC |
| V63 | Opioid Use and Dependence | М | V63Z | OPIOID USE & DEPENDENCE |
| V64 | Other Drug Use and Dependence | М | V64A | OTH DRUG USE&DEPENDENCE, MAJC |
| V64 | Other Drug Use and Dependence | М | V64B | OTH DRUG USE&DEPENDENCE, MINC |
| MDC - 21 Ir | njuries, Poisoning and Toxic Effects of Drugs | | | |
| W01 | Ventilation, Tracheostomy and Cranial Procedures for Multiple Significant Trauma | I | W01A | VENT/TRACH/CRA PR FOR MT, MAJC |
| W01 | Ventilation, Tracheostomy and Cranial Procedures for Multiple Significant Trauma | ı | W01B | VENT/TRACH/CRA PR FOR MT, INTC |
| W01 | Ventilation, Tracheostomy and Cranial Procedures for Multiple Significant Trauma | ı | W01C | VENT/TRACH/CRA PR FOR MT, MINC |
| W02 | Hip, Femur and Lower Limb Procedures for Multiple Significant Trauma | ı | W02A | HIP,FMR&LWR LMB PR FOR MT,MAJC |
| W02 | Hip, Femur and Lower Limb Procedures for Multiple Significant Trauma | ı | W02B | HIP,FMR&LWR LMB PR FOR MT,MINC |
| W03 | Abdominal Procedures for Multiple Significant Trauma | ı | W03Z | ABDOMINAL PR MULT SIG TRAUMA |
| W04 | Multiple Significant Trauma W Other Gls | I | W04A | MULT SIG TRAUMA+OTH GI,MAJC |
| W04 | Multiple Significant Trauma W Other Gls | I | W04B | MULT SIG TRAUMA+OTH GI,MINC |
| W60 | Multiple Significant Trauma, Transferred to Acute Facility <5 Days | М | W60Z | MULT SIG TRAUMA, TRAN<5D |
| W61 | Multiple Significant Trauma W/O Gls | М | W61A | MULT SIG TRAUMA -GI, MAJC |
| W61 | Multiple Significant Trauma W/O Gls | М | W61B | MULT SIG TRAUMA -GI, MINC |
| X02 | Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand | I | X02A | MVSCLR TT/SKN GR INJ HAND,MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|--------------------------------|
| X02 | Microvascular Tissue Transfer and Skin Grafts for Injuries to Hand | ı | X02B | MVSCLR TT/SKN GR INJ HAND,MINC |
| X04 | Other Procedures for Injuries to Lower Limb | I | X04A | OTH PR INJURIES LWR LIMB, MAJC |
| X04 | Other Procedures for Injuries to Lower Limb | I | X04B | OTH PR INJURIES LWR LIMB, MINC |
| X05 | Other Procedures for Injuries to Hand | | X05A | OTH PR FOR INJ TO HAND, MAJC |
| X05 | Other Procedures for Injuries to Hand | I | X05B | OTH PR FOR INJ TO HAND, MINC |
| X06 | Other Procedures for Other Injuries | I | X06A | OTH PR FOR OTH INJURIES, MAJC |
| X06 | Other Procedures for Other Injuries | I | X06B | OTH PR FOR OTH INJURIES, INTC |
| X06 | Other Procedures for Other Injuries | I | X06C | OTH PR FOR OTH INJURIES, MINC |
| X07 | Skin Grafts for Injuries Excluding Hand | I | X07A | SKIN GRAFT, INJ EXCL HAND,MAJC |
| X07 | Skin Grafts for Injuries Excluding Hand | I | X07B | SKIN GRAFT, INJ EXCL HAND,INTC |
| X07 | Skin Grafts for Injuries Excluding Hand | I | X07C | SKIN GRAFT, INJ EXCL HAND,MINC |
| X40 | Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support | 1 | X40A | INJ,POIS,TOX EF+VENT SUPP,MAJC |
| X40 | Injuries, Poisoning and Toxic Effects of Drugs W Ventilator Support | ı | X40B | INJ,POIS,TOX EF+VENT SUPP,MINC |
| X60 | Injuries | М | X60A | INJURIES, MAJC |
| X60 | Injuries | М | X60B | INJURIES, MINC |
| X61 | Allergic Reactions | М | X61A | ALLERGIC REACTIONS, MAJC |
| X61 | Allergic Reactions | М | X61B | ALLERGIC REACTIONS, MINC |
| X62 | Poisoning/Toxic Effects of Drugs and Other Substances | М | X62A | POISON/TOXIC EFF DRUGS, MAJC |
| X62 | Poisoning/Toxic Effects of Drugs and Other Substances | М | X62B | POISON/TOXIC EFF DRUGS, MINC |
| X63 | Sequelae of Treatment | М | X63A | SEQUELAE OF TREATMENT, MAJC |
| X63 | Sequelae of Treatment | М | X63B | SEQUELAE OF TREATMENT, MINC |
| X64 | Other Injuries, Poisonings and Toxic Effects | М | X64A | OTH INJ,POIS&TOXIC EFFCTS,MAJC |
| X64 | Other Injuries, Poisonings and Toxic Effects | М | X64B | OTH INJ,POIS&TOXIC EFFCTS,INTC |
| X64 | Other Injuries, Poisonings and Toxic Effects | М | X64C | OTH INJ,POIS&TOXIC EFFCTS,MINC |
| IDC - 22 B | urns | | | |
| Y01 | Ventilation or Tracheostomy for Burns or GI for Severe Full Thickness Burns | I | Y01Z | VENT/TRACH/GI SEV BURN |
| Y02 | Skin Grafts for Other Burns | 1 | Y02A | SKIN GRAFT OTHER BURNS, MAJC |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|---|-------------------|------------|-------------------------------------|
| Y02 | Skin Grafts for Other Burns | I | Y02B | SKIN GRAFT OTHER BURNS, INTC |
| Y02 | Skin Grafts for Other Burns | I | Y02C | SKIN GRAFT OTHER BURNS, MINC |
| Y03 | Other GIs for Other Burns | I | Y03A | OTH GI FOR OTHER BURNS,MAJC |
| Y03 | Other GIs for Other Burns | I | Y03B | OTH GI FOR OTHER BURNS,MINC |
| Y60 | Burns, Transferred to Acute Facility <5 Days | M | Y60Z | BURNS, TR<5D |
| Y61 | Severe Burns | M | Y61Z | SEVERE BURNS |
| Y62 | Other Burns | M | Y62A | OTHER BURNS, MAJC |
| Y62 | Other Burns | M | Y62B | OTHER BURNS, MINC |
| MDC - 23 F | actors Influencing Health Status and Other Contacts | with Health S | Services | |
| Z01 | Other Contacts W Health Services W Gls | I | Z01A | OTH CNT HLTH SRV +GI, MAJC |
| Z01 | Other Contacts W Health Services W Gls | I | Z01B | OTH CNT HLTH SRV +GI, MINC |
| Z40 | Other Contacts W Health Services W Endoscopy | I | Z40Z | OTH CONTCT HLTH SRV +ENDOS- COPY |
| Z60 | Rehabilitation | M | Z60A | REHABILITATION, MAJC |
| Z60 | Rehabilitation | M | Z60B | REHABILITATION, MINC |
| Z61 | Signs and Symptoms | M | Z61A | SIGNS & SYMPTOMS, MAJC |
| Z61 | Signs and Symptoms | M | Z61B | SIGNS & SYMPTOMS, MINC |
| Z63 | Other Follow Up After Surgery or Medical Care | М | Z63A | OTH FLLW UP SURG/MED CARE,MA JC |
| Z63 | Other Follow Up After Surgery or Medical Care | M | Z63B | OTH FLLW UP SURG/MED CARE,MINC |
| Z64 | Other Factors Influencing Health Status | M | Z64A | OTH FACTORS INFL HLTH ST, MAJC |
| Z64 | Other Factors Influencing Health Status | M | Z64B | OTH FACTORS INFL HLTH ST, MINC |
| Z65 | Congenital Anomalies and Problems Arising from Neonatal Period | М | Z65Z | CONGNTL ANML&PROB FR NEO PERD |
| Z66 | Sleep Disorders | M | Z66Z | SLEEP DISORDERS |
| Jnrelated a | nd Error | | | |
| 801 | Gls Unrelated to Principal Diagnosis | I | 801A | GI UNREL TO PDX, MAJC |
| 801 | Gls Unrelated to Principal Diagnosis | I | 801B | GI UNREL TO PDX, INTC |
| 801 | Gls Unrelated to Principal Diagnosis | I | 801C | GI UNREL TO PDX, MINC |
| 960 | Ungroupable | M | 960Z | UNGROUPABLE |
| 961 | Unacceptable Principal Diagnosis | М | 961Z | UNACCEPTABLE PRINCIPAL DIAGNOSIS |



| Adjacent DRG | ADRG Description | ADRG Partition | AR- DRG | AR-DRG Description |
|-----------------|--|-------------------|------------|--|
| 963 | Neonatal Diagnosis Not Consistent W Age/Weight | M | 963Z | NEONATAL DIAGNOSIS NOT CONSISTENT W AGE/WEIGHT |