

**Medicare Short-Stay Hospital DRGs Ranked by Discharges
Fiscal Year 2005**

Rank	DRG No.	Discharges ¹		Average Length of Stay	Average Charge Per Discharge	Total Payments ² (in thousands)	Total Medicare Payments (in thousands)	Other Third Party Payer (OTPP) Payments (in thousands)	Beneficiary Liability ³ (in thousands)	Average Payments and Liabilities ⁴			
		Number	Percent							Total	Medicare	OTPP	Beneficiary
		12,979,767	100.0	5.7	28,067	\$121,234,357	\$107,047,042	\$5,584,839	\$8,602,477	\$9,340	\$8,247	\$430	\$663
1	127	673,992	5.2	5.1	19,358	4,097,519	3,623,617	96,855	377,046	6,079	5,376	144	559
2	089	558,987	4.3	5.5	18,951	3,360,687	2,877,787	108,006	374,895	6,012	5,148	193	671
3	209	493,188	3.8	4.5	36,670	5,839,488	5,088,018	345,241	406,230	11,840	10,317	700	824
4	088	431,977	3.3	4.9	16,394	2,263,824	1,893,040	89,941	280,843	5,241	4,382	208	650
5	430	350,893	2.7	10.6	18,129	2,496,767	2,199,996	47,201	249,570	7,115	6,270	135	711
6	182	300,109	2.3	4.5	16,119	1,477,232	1,237,762	57,838	181,632	4,922	4,124	193	605
7	416	291,112	2.2	7.5	33,279	2,924,742	2,643,754	95,839	185,148	10,047	9,082	329	636
8	462	288,946	2.2	12.1	26,274	3,931,860	3,816,373	68,435	47,052	13,608	13,208	237	163
9	014	285,679	2.2	5.5	22,762	2,131,488	1,857,993	70,862	202,633	7,461	6,504	248	709
10	174	263,425	2.0	4.7	19,315	1,586,022	1,374,064	42,156	169,803	6,021	5,216	160	645
11	296	250,431	1.9	4.6	15,423	1,247,952	1,070,562	33,397	143,993	4,983	4,275	133	575
12	527	241,502	1.9	2.2	43,130	3,411,270	3,013,598	228,256	169,416	14,125	12,479	945	702
13	143	240,835	1.9	2.1	10,990	823,962	614,726	38,683	170,553	3,421	2,552	161	708
14	320	227,814	1.8	5.0	16,141	1,155,307	991,443	20,422	143,443	5,071	4,352	90	630
15	138	207,938	1.6	3.9	15,607	1,036,063	872,056	30,490	133,517	4,983	4,194	147	642
16	316	206,790	1.6	6.2	23,537	1,641,012	1,471,322	50,926	118,765	7,936	7,115	246	574
17	079	161,545	1.2	8.1	29,255	1,520,465	1,391,301	34,835	94,329	9,412	8,612	216	584
18	121	151,412	1.2	6.2	28,806	1,366,168	1,241,022	33,050	92,096	9,023	8,196	218	608
19	148	134,249	1.0	11.9	63,568	2,896,509	2,683,923	111,914	100,671	21,576	19,992	834	750
20	210	127,449	1.0	6.6	34,412	1,371,671	1,247,800	30,003	93,868	10,763	9,791	235	737
21	141	124,447	1.0	3.4	14,563	573,633	474,124	15,559	83,951	4,609	3,810	125	675
22	475	121,328	0.9	10.7	65,989	2,772,963	2,588,757	98,003	86,203	22,855	21,337	808	710
23	124	121,152	0.9	4.4	27,512	1,061,572	927,503	54,727	79,342	8,762	7,656	452	655
24	277	120,992	0.9	5.4	16,450	640,760	533,029	25,430	82,301	5,296	4,405	210	680
25	395	117,580	0.9	4.3	16,424	592,129	497,517	23,528	71,084	5,036	4,231	200	605

¹ Based on the stay records for 100% of Medicare aged and disabled beneficiaries as recorded in the MEDPAR file.

² Total payments represent total hospital revenue for Medicare enrollee utilization, including Medicare payments, other third party payer payments, and potential beneficiary liability. Excluded bills for no-pay, at-risk managed care utilization and no-pay Medicare secondary payer bills.

³ Beneficiary liability is the responsibility of the beneficiary or some other third payer on behalf of the beneficiary. It represents potential revenue to the provider.

⁴ Average payments are calculated using actual dollar amount, not rounded data as shown.

SOURCE: CMS/ORDI

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