

**LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES  
RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER  
PAYOR CONTRACT - SHOPPABLE BUNDLED INPATIENT SERVICES BY MS-DRG\*  
EFFECTIVE JANUARY 1, 2022  
UPDATED AS OF 12/15/2021**

| <b>SHOPPABLE BUNDLED INPATIENT SERVICES<br/>(MS-DRG)</b>                                      |                        | <b>KAISER<br/>(Medicare Advantage)</b> |                        | <b>BLUE SHIELD OF CALIFORNIA<br/>- FOR VETERANS<br/>(Veterans/TriWest)</b> |                        | <b>Maximum Negotiated<br/>Rate</b> | <b>Minimum Negotiated<br/>Rate</b> |
|---|------------------------|--|------------------------|--|------------------------|------------------------------------|------------------------------------|
| <b>Service Categories</b>   | <b>MS-DRG<br/>Code</b> | <b>Facility**</b>                      | <b>Professional***</b> | <b>Facility**</b>  | <b>Professional***</b> | <b>Facility**</b>                  | <b>Facility**</b>                  |
| DEGENERATIVE NERVOUS SYSTEM DISORDERS WITH MCC  | 056                    | \$ 50,299.55                           | not contracted         | \$ 50,299.55   | not contracted         | \$ 50,299.55                       | \$ 50,299.55                       |
| DEGENERATIVE NERVOUS SYSTEM DISORDERS WITHOUT MCC   | 057                    | \$ 41,464.77                           | not contracted         | \$ 41,464.77   | not contracted         | \$ 41,464.77                       | \$ 41,464.77                       |
| SEIZURES WITHOUT MCC  | 101                    | \$ 37,789.23                           | not contracted         | \$ 37,789.23   | not contracted         | \$ 37,789.23                       | \$ 37,789.23                       |
| RESPIRATORY INFECTIONS AND INFLAMMATIONS WITH MCC   | 177                    | \$ 47,018.57                           | not contracted         | \$ 47,018.57   | not contracted         | \$ 47,018.57                       | \$ 47,018.57                       |
| CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETERIZATION WITH MCC | 216                    | \$ 128,923.77                          | not contracted         | \$ 128,923.77  | not contracted         | \$ 128,923.77                      | \$ 128,923.77                      |
| MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC  | 330                    | \$ 53,612.74                           | not contracted         | \$ 53,612.74   | not contracted         | \$ 53,612.74                       | \$ 53,612.74                       |
| MAJOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC   | 331                    | \$ 45,643.42                           | not contracted         | \$ 45,643.42   | not contracted         | \$ 45,643.42                       | \$ 45,643.42                       |
| SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC   | 460                    | \$ 66,741.00                           | not contracted         | \$ 66,741.00   | not contracted         | \$ 66,741.00                       | \$ 66,741.00                       |
| MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC           | 470                    | \$ 47,387.65                           | not contracted         | \$ 47,387.65   | not contracted         | \$ 47,387.65                       | \$ 47,387.65                       |
| CERVICAL SPINAL FUSION WITHOUT CC/MCC   | 473                    | \$ 53,474.22                           | not contracted         | \$ 53,474.22   | not contracted         | \$ 53,474.22                       | \$ 53,474.22                       |
| LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT, FEMUR WITHOUT CC/MCC                 | 494                    | \$ 46,961.35                           | not contracted         | \$ 46,961.35   | not contracted         | \$ 46,961.35                       | \$ 46,961.35                       |
| AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC                              | 559                    | \$ 47,233.40                           | not contracted         | \$ 47,233.40   | not contracted         | \$ 47,233.40                       | \$ 47,233.40                       |
| AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC                               | 560                    | \$ 39,649.58                           | not contracted         | \$ 39,649.58   | not contracted         | \$ 39,649.58                       | \$ 39,649.58                       |
| AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT CC/MCC                        | 561                    | \$ 36,907.60                           | not contracted         | \$ 36,907.60   | not contracted         | \$ 36,907.60                       | \$ 36,907.60                       |
| OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITHOUT CC/MCC                          | 581                    | \$ 41,333.91                           | not contracted         | \$ 41,333.91   | not contracted         | \$ 41,333.91                       | \$ 41,333.91                       |
| AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL, AND METABOLIC DISORDERS WITH CC          | 617                    | \$ 48,813.26                           | not contracted         | \$ 48,813.26   | not contracted         | \$ 48,813.26                       | \$ 48,813.26                       |

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| <b>SHOPPABLE BUNDLED INPATIENT SERVICES<br/>(MS-DRG)</b>            |                        | <b>KAISER<br/>(Medicare Advantage)</b> |                        | <b>BLUE SHIELD OF CALIFORNIA<br/>- FOR VETERANS<br/>(Veterans/TriWest)</b> |                        | <b>Maximum Negotiated<br/>Rate</b> | <b>Minimum Negotiated<br/>Rate</b> |
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| <b>Service Categories</b>   | <b>MS-DRG<br/>Code</b> | <b>Facility**</b>                      | <b>Professional***</b> | <b>Facility**</b>  | <b>Professional***</b> | <b>Facility**</b>                  | <b>Facility**</b>                  |
| THYROID, PARATHYROID AND THYROGLOSSAL PROCEDURES WITHOUT CC/MCC     | 627                    | \$ 40,561.53                           | not contracted         | \$ 40,561.53   | not contracted         | \$ 40,561.53                       | \$ 40,561.53                       |
| KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC        | 661                    | \$ 39,445.55                           | not contracted         | \$ 39,445.55   | not contracted         | \$ 39,445.55                       | \$ 39,445.55                       |
| MAJOR MALE PELVIC PROCEDURES WITHOUT CC/MCC                         | 708                    | \$ 43,504.51                           | not contracted         | \$ 43,504.51   | not contracted         | \$ 43,504.51                       | \$ 43,504.51                       |
| UTERINE AND ADNEXA PROCEDURES FOR NONMALIGNANCY WITH CC/MCC         | 742                    | \$ 45,709.02                           | not contracted         | \$ 45,709.02   | not contracted         | \$ 45,709.02                       | \$ 45,709.02                       |
| UTERINE AND ADNEXA PROCEDURES FOR NONMALIGNANCY WITHOUT CC/MCC      | 743                    | \$ 40,090.99                           | not contracted         | \$ 40,090.99   | not contracted         | \$ 40,090.99                       | \$ 40,090.99                       |
| CESAREAN SECTION WITHOUT STERILIZATION WITH MCC                     | 786                    | n/a                                    | n/a                    | n/a  | n/a                    | n/a                                | n/a                                |
| CESAREAN SECTION WITHOUT STERILIZATION WITH CC                      | 787                    | n/a                                    | n/a                    | n/a  | n/a                    | n/a                                | n/a                                |
| CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC/MCC               | 788                    | n/a                                    | n/a                    | n/a  | n/a                    | n/a                                | n/a                                |
| VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH CC               | 806                    | n/a                                    | n/a                    | n/a  | n/a                    | n/a                                | n/a                                |
| VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC/MCC        | 807                    | n/a                                    | n/a                    | n/a  | n/a                    | n/a                                | n/a                                |
| CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH MCC | 846                    | \$ 54,887.03                           | not contracted         | \$ 54,887.03   | not contracted         | \$ 54,887.03                       | \$ 54,887.03                       |
| CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH CC  | 847                    | \$ 42,079.71                           | not contracted         | \$ 42,079.71   | not contracted         | \$ 42,079.71                       | \$ 42,079.71                       |
| PSYCHOSES   | 885                    | \$ 41,297.11                           | not contracted         | \$ 41,297.11   | not contracted         | \$ 41,297.11                       | \$ 41,297.11                       |
| REHABILITATION WITH CC/MCC  | 945                    | \$ 43,590.79                           | not contracted         | \$ 43,590.79   | not contracted         | \$ 43,590.79                       | \$ 43,590.79                       |
| AFTERCARE WITH CC/MCC   | 949                    | \$ 39,971.42                           | not contracted         | \$ 39,971.42   | not contracted         | \$ 39,971.42                       | \$ 39,971.42                       |

Footnotes:

\* Inpatient services presented are commonly provided by Health Services hospital, excluding services which are not considered "shoppable".

\*\* Facility Rates are calculated using National Average Payment rate in accordance with the contract term. Optum360 EncoderPro is used for such calculations for each respective DHS Hospital Medicare Provider Number. For example, the Hospital Medicare Provider Number for Rancho Los Amigos National Rehabilitation Center is 050717.

\*\*\* Physician services are not contracted.