

LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES  
 LOS ANGELES GENERAL MEDICAL CENTER  
 MEDICARE PAYOR CONTRACTS - COMPREHENSIVE BUNDLED INPATIENT SERVICES BY MS-DRG<sup>1</sup>  
 EFFECTIVE JANUARY 1, 2026  
 UPDATED AS OF 12/23/2025

SHOPPABLE BUNDLED INPATIENT SERVICES (MS-DRG)		KAISER <sup>2</sup> (Medicare Advantage)		L.A. CARE (Medicare Advantage)		MOLINA (Medicare Advantage)		ANTHEM BLUE CROSS (Commercial)		BLUE SHIELD TRIWEST (Commercial)		KAISER <sup>3</sup> (Commercial)		L.A. CARE (Covered CA)		MOLINA (Covered CA)		Maximum Negotiated Rate	Minimum Negotiated Rate
Service Categories	MS-DRG	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Facility <sup>4</sup>
SPINAL DISORDERS AND INJURIES WITH CC/MCC	052	\$ 41,980.66	not contracted	\$ 41,980.66	not contracted	\$ 48,277.76	not contracted	\$ 41,980.66	See footnote <sup>5</sup>	\$ 41,980.66	See footnote <sup>5</sup>	\$ 71,367.12	not contracted	\$ 41,980.66	not contracted	\$ 75,565.19	not contracted	\$ 75,565.19	\$ 41,980.66
DEGENERATIVE NERVOUS SYSTEM DISORDERS WITH MCC	056	\$ 53,202.38	not contracted	\$ 53,202.38	not contracted	\$ 61,182.74	not contracted	\$ 53,202.38	See footnote <sup>5</sup>	\$ 53,202.38	See footnote <sup>5</sup>	\$ 90,444.05	not contracted	\$ 53,202.38	not contracted	\$ 95,764.28	not contracted	\$ 95,764.28	\$ 53,202.38
DEGENERATIVE NERVOUS SYSTEM DISORDERS WITHOUT MCC	057	\$ 34,352.45	not contracted	\$ 34,352.45	not contracted	\$ 39,505.32	not contracted	\$ 34,352.45	See footnote <sup>5</sup>	\$ 34,352.45	See footnote <sup>5</sup>	\$ 58,399.17	not contracted	\$ 34,352.45	not contracted	\$ 61,834.41	not contracted	\$ 61,834.41	\$ 34,352.45
INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION WITH CC OR TPA IN 24 HOURS	065	\$ 27,698.17	not contracted	\$ 27,698.17	not contracted	\$ 31,852.90	not contracted	\$ 27,698.17	See footnote <sup>5</sup>	\$ 27,698.17	See footnote <sup>5</sup>	\$ 47,086.89	not contracted	\$ 27,698.17	not contracted	\$ 49,856.71	not contracted	\$ 49,856.71	\$ 27,698.17
SEIZURES WITHOUT MCC	101	\$ 24,888.01	not contracted	\$ 24,888.01	not contracted	\$ 28,621.21	not contracted	\$ 24,888.01	See footnote <sup>5</sup>	\$ 24,888.01	See footnote <sup>5</sup>	\$ 42,309.62	not contracted	\$ 24,888.01	not contracted	\$ 44,798.42	not contracted	\$ 44,798.42	\$ 24,888.01
MAJOR HEAD AND NECK PROCEDURES WITHOUT CC/MCC	142	\$ 35,150.66	not contracted	\$ 35,150.66	not contracted	\$ 40,423.26	not contracted	\$ 35,150.66	See footnote <sup>5</sup>	\$ 35,150.66	See footnote <sup>5</sup>	\$ 59,756.12	not contracted	\$ 35,150.66	not contracted	\$ 63,271.19	not contracted	\$ 63,271.19	\$ 35,150.66
OTHER EAR, NOSE, MOUTH AND THROAT O.R. PROCEDURES WITH CC	144	\$ 38,386.82	not contracted	\$ 38,386.82	not contracted	\$ 44,144.84	not contracted	\$ 38,386.82	See footnote <sup>5</sup>	\$ 38,386.82	See footnote <sup>5</sup>	\$ 65,257.59	not contracted	\$ 38,386.82	not contracted	\$ 69,096.28	not contracted	\$ 69,096.28	\$ 38,386.82
OTHER EAR, NOSE, MOUTH AND THROAT O.R. PROCEDURES WITHOUT CC/MCC	145	\$ 28,104.08	not contracted	\$ 28,104.08	not contracted	\$ 32,319.69	not contracted	\$ 28,104.08	See footnote <sup>5</sup>	\$ 28,104.08	See footnote <sup>5</sup>	\$ 47,776.94	not contracted	\$ 28,104.08	not contracted	\$ 50,587.34	not contracted	\$ 50,587.34	\$ 28,104.08
CARDIAC VALVE AND OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETERIZATION WITH MCC	216	\$ 169,631.17	not contracted	\$ 169,631.17	not contracted	\$ 195,075.85	not contracted	\$ 169,631.17	See footnote <sup>5</sup>	\$ 169,631.17	See footnote <sup>5</sup>	\$ 288,372.99	not contracted	\$ 169,631.17	not contracted	\$ 305,336.11	not contracted	\$ 305,336.11	\$ 169,631.17
STOMACH, ESOPHAGEAL AND DUODENAL PROCEDURES WITHOUT CC/MCC	328	\$ 35,237.93	not contracted	\$ 35,237.93	not contracted	\$ 40,523.62	not contracted	\$ 35,237.93	See footnote <sup>5</sup>	\$ 35,237.93	See footnote <sup>5</sup>	\$ 59,904.48	not contracted	\$ 35,237.93	not contracted	\$ 63,428.27	not contracted	\$ 63,428.27	\$ 35,237.93
MAJOR SMALL AND LARGE BOWEL PROCEDURES WITH CC	330	\$ 50,647.25	not contracted	\$ 50,647.25	not contracted	\$ 58,244.34	not contracted	\$ 50,647.25	See footnote <sup>5</sup>	\$ 50,647.25	See footnote <sup>5</sup>	\$ 86,100.33	not contracted	\$ 50,647.25	not contracted	\$ 91,165.05	not contracted	\$ 91,165.05	\$ 50,647.25
MAJOR SMALL AND LARGE BOWEL PROCEDURES WITHOUT CC/MCC	331	\$ 36,430.16	not contracted	\$ 36,430.16	not contracted	\$ 41,894.68	not contracted	\$ 36,430.16	See footnote <sup>5</sup>	\$ 36,430.16	See footnote <sup>5</sup>	\$ 61,931.27	not contracted	\$ 36,430.16	not contracted	\$ 65,574.29	not contracted	\$ 65,574.29	\$ 36,430.16
SINGLE LEVEL SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC	451	\$ 59,320.69	not contracted	\$ 59,320.69	not contracted	\$ 68,218.79	not contracted	\$ 59,320.69	See footnote <sup>5</sup>	\$ 59,320.69	See footnote <sup>5</sup>	\$ 100,845.17	not contracted	\$ 59,320.69	not contracted	\$ 106,777.24	not contracted	\$ 106,777.24	\$ 59,320.69

LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES  
 LOS ANGELES GENERAL MEDICAL CENTER  
 MEDICARE PAYOR CONTRACTS - COMPREHENSIVE BUNDLED INPATIENT SERVICES BY MS-DRG<sup>1</sup>  
 EFFECTIVE JANUARY 1, 2026  
 UPDATED AS OF 12/23/2025

SHOPPABLE BUNDLED INPATIENT SERVICES (MS-DRG)		KAISER <sup>2</sup> (Medicare Advantage)		L.A. CARE (Medicare Advantage)		MOLINA (Medicare Advantage)		ANTHEM BLUE CROSS (Commercial)		BLUE SHIELD TRIWEST (Commercial)		KAISER <sup>3</sup> (Commercial)		L.A. CARE (Covered CA)		MOLINA (Covered CA)		Maximum Negotiated Rate	Minimum Negotiated Rate
Service Categories	MS-DRG	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Facility <sup>4</sup>
SPINAL FUSION EXCEPT CERVICAL WITHOUT MCC	460	n/a	not contracted	n/a	not contracted	n/a	not contracted	n/a	See footnote <sup>5</sup>	n/a	See footnote <sup>5</sup>	n/a	not contracted	n/a	not contracted	n/a	not contracted	n/a	n/a
MAJOR HIP AND KNEE JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY WITHOUT MCC	470	\$ 38,851.91	not contracted	\$ 38,851.91	not contracted	\$ 44,679.70	not contracted	\$ 38,851.91	See footnote <sup>5</sup>	\$ 38,851.91	See footnote <sup>5</sup>	\$ 66,048.25	not contracted	\$ 38,851.91	not contracted	\$ 69,933.44	not contracted	\$ 69,933.44	\$ 38,851.91
CERVICAL SPINAL FUSION WITH CC	472	\$ 56,332.41	not contracted	\$ 56,332.41	not contracted	\$ 64,782.27	not contracted	\$ 56,332.41	See footnote <sup>5</sup>	\$ 56,332.41	See footnote <sup>5</sup>	\$ 95,765.10	not contracted	\$ 56,332.41	not contracted	\$ 101,398.34	not contracted	\$ 101,398.34	\$ 56,332.41
CERVICAL SPINAL FUSION WITHOUT CC/MCC	473	\$ 46,431.30	not contracted	\$ 46,431.30	not contracted	\$ 53,396.00	not contracted	\$ 46,431.30	See footnote <sup>5</sup>	\$ 46,431.30	See footnote <sup>5</sup>	\$ 78,933.21	not contracted	\$ 46,431.30	not contracted	\$ 83,576.34	not contracted	\$ 83,576.34	\$ 46,431.30
LOWER EXTREMITY AND HUMERUS PROCEDURES EXCEPT HIP, FOOT AND FEMUR WITHOUT CC/MCC	494	\$ 41,216.83	not contracted	\$ 41,216.83	not contracted	\$ 47,399.35	not contracted	\$ 41,216.83	See footnote <sup>5</sup>	\$ 41,216.83	See footnote <sup>5</sup>	\$ 70,068.61	not contracted	\$ 41,216.83	not contracted	\$ 74,190.29	not contracted	\$ 74,190.29	\$ 41,216.83
AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH MCC	559	\$ 43,990.57	not contracted	\$ 43,990.57	not contracted	\$ 50,589.16	not contracted	\$ 43,990.57	See footnote <sup>5</sup>	\$ 43,990.57	See footnote <sup>5</sup>	\$ 74,783.97	not contracted	\$ 43,990.57	not contracted	\$ 79,183.03	not contracted	\$ 79,183.03	\$ 43,990.57
AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITH CC	560	\$ 30,628.14	not contracted	\$ 30,628.14	not contracted	\$ 35,222.36	not contracted	\$ 30,628.14	See footnote <sup>5</sup>	\$ 30,628.14	See footnote <sup>5</sup>	\$ 52,067.84	not contracted	\$ 30,628.14	not contracted	\$ 55,130.65	not contracted	\$ 55,130.65	\$ 30,628.14
AFTERCARE, MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE WITHOUT CC/MCC	561	\$ 24,645.11	not contracted	\$ 24,645.11	not contracted	\$ 28,341.88	not contracted	\$ 24,645.11	See footnote <sup>5</sup>	\$ 24,645.11	See footnote <sup>5</sup>	\$ 41,896.69	not contracted	\$ 24,645.11	not contracted	\$ 44,361.20	not contracted	\$ 44,361.20	\$ 24,645.11
OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITH CC	580	\$ 40,748.48	not contracted	\$ 40,748.48	not contracted	\$ 46,860.75	not contracted	\$ 40,748.48	See footnote <sup>5</sup>	\$ 40,748.48	See footnote <sup>5</sup>	\$ 69,272.42	not contracted	\$ 40,748.48	not contracted	\$ 73,347.26	not contracted	\$ 73,347.26	\$ 40,748.48
OTHER SKIN, SUBCUTANEOUS TISSUE AND BREAST PROCEDURES WITHOUT CC/MCC	581	\$ 32,883.05	not contracted	\$ 32,883.05	not contracted	\$ 37,815.51	not contracted	\$ 32,883.05	See footnote <sup>5</sup>	\$ 32,883.05	See footnote <sup>5</sup>	\$ 55,901.19	not contracted	\$ 32,883.05	not contracted	\$ 59,189.49	not contracted	\$ 59,189.49	\$ 32,883.05
AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITIONAL AND METABOLIC DISORDERS WITH CC	617	\$ 44,070.45	not contracted	\$ 44,070.45	not contracted	\$ 50,681.02	not contracted	\$ 44,070.45	See footnote <sup>5</sup>	\$ 44,070.45	See footnote <sup>5</sup>	\$ 74,919.77	not contracted	\$ 44,070.45	not contracted	\$ 79,326.81	not contracted	\$ 79,326.81	\$ 44,070.45
O.R. PROCEDURES FOR OBESITY WITHOUT CC/MCC	621	\$ 31,414.82	not contracted	\$ 31,414.82	not contracted	\$ 36,127.04	not contracted	\$ 31,414.82	See footnote <sup>5</sup>	\$ 31,414.82	See footnote <sup>5</sup>	\$ 53,405.19	not contracted	\$ 31,414.82	not contracted	\$ 56,546.68	not contracted	\$ 56,546.68	\$ 31,414.82

LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES  
LOS ANGELES GENERAL MEDICAL CENTER  
MEDICARE PAYOR CONTRACTS - COMPREHENSIVE BUNDLED INPATIENT SERVICES BY MS-DRG<sup>1</sup>  
EFFECTIVE JANUARY 1, 2026  
UPDATED AS OF 12/23/2025

SHOPPABLE BUNDLED INPATIENT SERVICES (MS-DRG)		KAISER <sup>2</sup> (Medicare Advantage)		L.A. CARE (Medicare Advantage)		MOLINA (Medicare Advantage)		ANTHEM BLUE CROSS (Commercial)		BLUE SHIELD TRIWEST (Commercial)		KAISER <sup>3</sup> (Commercial)		L.A. CARE (Covered CA)		MOLINA (Covered CA)		Maximum Negotiated Rate	Minimum Negotiated Rate
Service Categories	MS-DRG	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Facility <sup>4</sup>
THYROID, PARATHYROID AND THYROIDECTOMY PROCEDURES WITHOUT CC/MCC	627	\$ 29,967.86	not contracted	\$ 29,967.86	not contracted	\$ 34,463.04	not contracted	\$ 29,967.86	See footnote <sup>5</sup>	\$ 29,967.86	See footnote <sup>5</sup>	\$ 50,945.36	not contracted	\$ 29,967.86	not contracted	\$ 53,942.15	not contracted	\$ 53,942.15	\$ 29,967.86
KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITH CC	660	\$ 32,304.38	not contracted	\$ 32,304.38	not contracted	\$ 37,150.04	not contracted	\$ 32,304.38	See footnote <sup>5</sup>	\$ 32,304.38	See footnote <sup>5</sup>	\$ 54,917.45	not contracted	\$ 32,304.38	not contracted	\$ 58,147.88	not contracted	\$ 58,147.88	\$ 32,304.38
KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC/MCC	661	\$ 25,635.30	not contracted	\$ 25,635.30	not contracted	\$ 29,480.60	not contracted	\$ 25,635.30	See footnote <sup>5</sup>	\$ 25,635.30	See footnote <sup>5</sup>	\$ 43,580.01	not contracted	\$ 25,635.30	not contracted	\$ 46,143.54	not contracted	\$ 46,143.54	\$ 25,635.30
TRANSURETHRAL PROSTATECTOMY WITHOUT CC/MCC	714	\$ 25,960.73	not contracted	\$ 25,960.73	not contracted	\$ 29,854.84	not contracted	\$ 25,960.73	See footnote <sup>5</sup>	\$ 25,960.73	See footnote <sup>5</sup>	\$ 44,133.24	not contracted	\$ 25,960.73	not contracted	\$ 46,729.31	not contracted	\$ 46,729.31	\$ 25,960.73
UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITH CC/MCC	742	\$ 39,894.12	not contracted	\$ 39,894.12	not contracted	\$ 45,878.24	not contracted	\$ 39,894.12	See footnote <sup>5</sup>	\$ 39,894.12	See footnote <sup>5</sup>	\$ 67,820.00	not contracted	\$ 39,894.12	not contracted	\$ 71,809.42	not contracted	\$ 71,809.42	\$ 39,894.12
UTERINE AND ADNEXA PROCEDURES FOR NON-MALIGNANCY WITHOUT CC/MCC	743	\$ 28,672.09	not contracted	\$ 28,672.09	not contracted	\$ 32,972.90	not contracted	\$ 28,672.09	See footnote <sup>5</sup>	\$ 28,672.09	See footnote <sup>5</sup>	\$ 48,742.55	not contracted	\$ 28,672.09	not contracted	\$ 51,609.76	not contracted	\$ 51,609.76	\$ 28,672.09
VAGINAL DELIVERY WITH O.R. PROCEDURES EXCEPT STERILIZATION AND/OR D&C	768	\$ 27,387.85	not contracted	\$ 27,387.85	not contracted	\$ 31,496.03	not contracted	\$ 27,387.85	See footnote <sup>5</sup>	\$ 27,387.85	See footnote <sup>5</sup>	\$ 46,559.35	not contracted	\$ 27,387.85	not contracted	\$ 49,298.13	not contracted	\$ 49,298.13	\$ 27,387.85
CESAREAN SECTION WITH STERILIZATION WITH CC	784	\$ 28,434.81	not contracted	\$ 28,434.81	not contracted	\$ 32,700.03	not contracted	\$ 28,434.81	See footnote <sup>5</sup>	\$ 28,434.81	See footnote <sup>5</sup>	\$ 48,339.18	not contracted	\$ 28,434.81	not contracted	\$ 51,182.66	not contracted	\$ 51,182.66	\$ 28,434.81
CESAREAN SECTION WITHOUT STERILIZATION WITH MCC	786	\$ 39,587.32	not contracted	\$ 39,587.32	not contracted	\$ 45,525.42	not contracted	\$ 39,587.32	See footnote <sup>5</sup>	\$ 39,587.32	See footnote <sup>5</sup>	\$ 67,298.44	not contracted	\$ 39,587.32	not contracted	\$ 71,257.18	not contracted	\$ 71,257.18	\$ 39,587.32
CESAREAN SECTION WITHOUT STERILIZATION WITH CC	787	\$ 29,273.51	not contracted	\$ 29,273.51	not contracted	\$ 33,664.54	not contracted	\$ 29,273.51	See footnote <sup>5</sup>	\$ 29,273.51	See footnote <sup>5</sup>	\$ 49,764.97	not contracted	\$ 29,273.51	not contracted	\$ 52,692.32	not contracted	\$ 52,692.32	\$ 29,273.51
CESAREAN SECTION WITHOUT STERILIZATION WITHOUT CC/MCC	788	\$ 25,719.31	not contracted	\$ 25,719.31	not contracted	\$ 29,577.21	not contracted	\$ 25,719.31	See footnote <sup>5</sup>	\$ 25,719.31	See footnote <sup>5</sup>	\$ 43,722.83	not contracted	\$ 25,719.31	not contracted	\$ 46,294.76	not contracted	\$ 46,294.76	\$ 25,719.31
VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH MCC	805	\$ 29,934.41	not contracted	\$ 29,934.41	not contracted	\$ 34,424.57	not contracted	\$ 29,934.41	See footnote <sup>5</sup>	\$ 29,934.41	See footnote <sup>5</sup>	\$ 50,888.50	not contracted	\$ 29,934.41	not contracted	\$ 53,881.94	not contracted	\$ 53,881.94	\$ 29,934.41

LOS ANGELES COUNTY - DEPARTMENT OF HEALTH SERVICES  
LOS ANGELES GENERAL MEDICAL CENTER  
MEDICARE PAYOR CONTRACTS - COMPREHENSIVE BUNDLED INPATIENT SERVICES BY MS-DRG<sup>1</sup>  
EFFECTIVE JANUARY 1, 2026  
UPDATED AS OF 12/23/2025

SHOPPABLE BUNDLED INPATIENT SERVICES (MS-DRG)		KAISER <sup>2</sup> (Medicare Advantage)		L.A. CARE (Medicare Advantage)		MOLINA (Medicare Advantage)		ANTHEM BLUE CROSS (Commercial)		BLUE SHIELD TRIWEST (Commercial)		KAISER <sup>3</sup> (Commercial)		L.A. CARE (Covered CA)		MOLINA (Covered CA)		Maximum Negotiated Rate	Minimum Negotiated Rate
Service Categories	MS-DRG	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>5</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Professional <sup>6</sup>	Facility <sup>4</sup>	Facility <sup>4</sup>
VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITH CC	806	\$ 22,689.93	not contracted	\$ 22,689.93	not contracted	\$ 26,093.42	not contracted	\$ 22,689.93	See footnote <sup>5</sup>	\$ 22,689.93	See footnote <sup>5</sup>	\$ 38,572.88	not contracted	\$ 22,689.93	not contracted	\$ 40,841.87	not contracted	\$ 40,841.87	\$ 22,689.93
VAGINAL DELIVERY WITHOUT STERILIZATION OR D&C WITHOUT CC/MCC	807	\$ 20,292.46	not contracted	\$ 20,292.46	not contracted	\$ 23,336.33	not contracted	\$ 20,292.46	See footnote <sup>5</sup>	\$ 20,292.46	See footnote <sup>5</sup>	\$ 34,497.18	not contracted	\$ 20,292.46	not contracted	\$ 36,526.43	not contracted	\$ 36,526.43	\$ 20,292.46
OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITH CC	832	\$ 23,427.73	not contracted	\$ 23,427.73	not contracted	\$ 26,941.89	not contracted	\$ 23,427.73	See footnote <sup>5</sup>	\$ 23,427.73	See footnote <sup>5</sup>	\$ 39,827.14	not contracted	\$ 23,427.73	not contracted	\$ 42,169.91	not contracted	\$ 42,169.91	\$ 23,427.73
OTHER ANTEPARTUM DIAGNOSES WITHOUT O.R. PROCEDURES WITHOUT CC/MCC	833	\$ 18,054.44	not contracted	\$ 18,054.44	not contracted	\$ 20,762.61	not contracted	\$ 18,054.44	See footnote <sup>5</sup>	\$ 18,054.44	See footnote <sup>5</sup>	\$ 30,692.55	not contracted	\$ 18,054.44	not contracted	\$ 32,497.99	not contracted	\$ 32,497.99	\$ 18,054.44
CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH MCC	846	\$ 55,970.25	not contracted	\$ 55,970.25	not contracted	\$ 64,365.79	not contracted	\$ 55,970.25	See footnote <sup>5</sup>	\$ 55,970.25	See footnote <sup>5</sup>	\$ 95,149.43	not contracted	\$ 55,970.25	not contracted	\$ 100,746.45	not contracted	\$ 100,746.45	\$ 55,970.25
CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS WITH CC	847	\$ 32,104.69	not contracted	\$ 32,104.69	not contracted	\$ 36,920.39	not contracted	\$ 32,104.69	See footnote <sup>5</sup>	\$ 32,104.69	See footnote <sup>5</sup>	\$ 54,577.97	not contracted	\$ 32,104.69	not contracted	\$ 57,788.44	not contracted	\$ 57,788.44	\$ 32,104.69
REHABILITATION WITH CC/MCC	945	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided	service is not provided
AFTERCARE WITH CC/MCC	949	\$ 34,003.05	not contracted	\$ 34,003.05	not contracted	\$ 39,103.51	not contracted	\$ 34,003.05	See footnote <sup>5</sup>	\$ 34,003.05	See footnote <sup>5</sup>	\$ 57,805.19	not contracted	\$ 34,003.05	not contracted	\$ 61,205.49	not contracted	\$ 61,205.49	\$ 34,003.05

Footnotes:

- Inpatient services presented are commonly provided by Health Services hospitals, excluding services which are not considered "shoppable".
- Stop Loss Threshold: 20 days, Per Diem of \$3,025 for days 21 through discharge
- Stop Loss Threshold: 20 days, Per Diem of \$3,350 for days 21 through discharge
- Facility Rates are calculated using National Average Payment rate in accordance with the contract terms. Optum360 EncoderPro is used for such calculations for each respective DHS Hospital Medicare Provider Number. For example, the Hospital Medicare Provider Number for Los Angeles General Medical Center is 050373.
- Professional services can be found in schedule "Consumer Shoppable Services\_Los Angeles General Medical Center\_Commercial Payor contracts - Shoppable Professional Services by Procedure for Anthem Blue Cross and Blue Shield Triwest".
- Professional services are not contracted.