



SWEDISH HEALTHCARE IN TRANSITION

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Health Care Treatment Prices In Swedish Hospitals

DRGs are a key to performance-based health reform

By Johan Hjertqvist



Among the important reforms to the Medicare model in Stockholm, no single step has been of greater importance than the restoration of prices for health care procedures in hospitals. The acronym for the price tag per treatment is known as "Diagnostic Related Group". The DRG price mechanism, introduced in 1990,

underpins the remarkable increases in productivity and efficiency in the delivery of publicly funded Swedish health care. By attaching an official price tag to every hospital treatment, government budget makers enabled providers both to improve their performance and to shift the system's focus to the needs of health-care consumers.

In a single-payer model without prices, providers and consumers both act out a classic "tragedy of the commons." Health-care workers do everything possible to treat patients successfully, which is their mission, and people

who need treatment tend to swamp the system with demand. Funders constricted by budgets try to control runaway costs by putting a ceiling on the volume of care, an action which creates shortages and waiting lists. When compensation beyond the limit is reduced or withdrawn, the production of services slows down and even stops.

Putting prices back into the equation in Sweden changed incentives. The system was told not only that hospital funding could be improved by the increased production of services, but also that private providers were available to perform treatments on an equal basis. This stimulus to productivity required that reimbursement levels be transparent, stable and reliable. The fairness implicit in the DRG pricing system and the information it conveyed enabled purchasers to be split from providers within publicly funded healthcare.

Provider Pluralism Triggers Service Market

Gradually the Swedish DRG system has been adapted to reflect changing conditions, but this fundamental remains: providers can affect their income and adjust to the forecast. Provider pluralism triggered a service market, and shifted the health-care culture, from one conditioned by global costs and waiting lists to one that focused on income by means of improved public access. In technical terms, the DRG format *moves the focus from "resource consumption" to "hospital performance in terms of quantified patient benefits"*.

Some sample DRG data is presented on the following page in a simplified manner which reports only the standard prices per treatment. The DRG system includes a mechanism to adjust compensation for unusually complicated or easy cases, when longer or shorter periods of treatment than standard may be requested. These exceptions are not generally controversial and the fine-tuning continues by means of

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APPENDIX - COMPREHENSIVE DESCRIPTION

SWEDEN DRG PRICE LIST (1999) - Canadian Dollars

Swedish Kronor/Cdn. \$ = 0.1700

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Diagnosis/ Related Group Numbers	DIAGNOSIS DESCRIPTION	Diagnosis/ treatment weight	DRG price		DRG price within the healthcare region	DRG price outside the region (includes premium)	Limit (in days) for in- hospital	The limit between extreme and ordinary cases
			Price per DRG Point	within the healthcare region				
001	Craniotomy age > 17 except for trauma	4.1421	\$3,352.40	\$13,885.94	\$15,463.37	29	\$43,775.00	
002	Craniotomy for trauma age >17	2.8088	\$3,352.40	\$9,416.30	\$10,485.77	24	\$35,434.97	
004	Spinal procedures	3.2610	\$3,352.40	\$10,932.19	\$12,174.04	32	\$42,573.10	
005	Extracranial vascular procedures	2.1880	\$3,352.40	\$7,334.99	\$8,168.16	14	\$17,823.65	
006	Carpal tunnel release	0.7395	\$3,352.40	\$2,479.11	\$2,760.63	8	\$7,632.66	
007	Periph & cranial nerve & other nerve sys proc w cc	1.5895	\$3,352.40	\$5,328.65	\$5,933.85	33	\$29,564.19	
008	Periph & cranial nerve & other nerve sys proc w/o cc	0.8116	\$3,352.40	\$2,720.85	\$3,029.91	9	\$11,196.54	
009	Spinal disorders & injuries	0.8409	\$3,352.40	\$2,819.11	\$3,139.22	25	\$14,460.54	
010	Nervous system neoplasm w cc	1.0693	\$3,352.40	\$3,584.79	\$3,991.94	32	\$18,076.95	
011	Nervous system neoplasm w/o cc	0.1840	\$3,352.40	\$2,728.84	\$3,038.75	22	\$13,358.26	
012	Degenerative nervous system disorders	0.8635	\$3,352.40	\$2,894.76	\$3,223.54	26	\$12,832.11	
013	Multiple sclerosis and cerebellar ataxia	1.3945	\$3,352.40	\$4,675.00	\$5,205.91	35	\$22,329.33	
014	Specific cerebrovascular disorders except TIA	1.1327	\$3,352.40	\$3,797.29	\$4,228.58	32	\$15,050.61	
015	Transient ischemic attac & precerebral occlusions	0.6282	\$3,352.40	\$2,105.96	\$2,345.15	15	\$8,517.34	
016	Non-specific cerebrovascular disorders w cc	1.0059	\$3,352.40	\$3,372.12	\$3,755.30	33	\$13,455.67	
017	Non-specific cerebrovascular disorders w/o cc	0.9270	\$3,352.40	\$3,107.60	\$3,460.69	26	\$13,936.26	
018	Cranial & peripheral nerve disorders w cc	0.9848	\$3,352.40	\$3,301.40	\$3,676.42	30	\$13,539.14	
019	Cranial & peripheral nerve disorders w/o cc	0.6459	\$3,352.40	\$2,165.29	\$2,411.28	16	\$9,623.02	
020	Nervous system infection except vital meningitis	1.5558	\$3,352.40	\$5,215.60	\$5,808.05	35	\$29,774.31	
021	Viral meningitis	0.4648	\$3,352.40	\$1,558.22	\$1,735.19	9	\$5,657.09	
022	Hypertensive encephalopathy	0.8150	\$3,352.40	\$2,732.24	\$3,042.49	35	\$43,775.00	
023	Nontraumatic stupor & coma	0.5302	\$3,352.40	\$1,777.52	\$1,979.31	12	\$7,287.39	
024	Seizure & headache age > 17 w cc	0.5897	\$3,352.40	\$1,976.93	\$2,201.50	17	\$8,633.45	
025	Seizure & headache age > 17 w/o cc	0.4358	\$3,352.40	\$1,460.98	\$1,626.90	11	\$6,425.49	
034	Other disorders of nervous system w cc	0.8352	\$3,352.40	\$2,799.90	\$3,117.97	20	\$12,596.49	
035	Other disorders of nervous system w/o cc	0.5216	\$3,352.40	\$1,748.62	\$1,947.18	11	\$9,132.06	
036	Retinal procedures	1.1435	\$3,352.40	\$3,833.50	\$4,268.87	12	\$11,447.63	
037	Orbital procedures	1.0472	\$3,352.40	\$3,510.67	\$3,909.49	16	\$9,629.48	
038	Primary iris procedures	0.5278	\$3,352.40	\$1,769.36	\$1,970.30	11	\$5,269.83	
039	Lens procedures with or without vitrectomy	0.5717	\$3,352.40	\$1,916.58	\$2,134.35	8	\$5,798.19	
040	Extra ocular procedures except orbit age > 17	0.6077	\$3,352.40	\$2,037.28	\$2,268.65	8	\$7,197.63	
041	Extra ocular procedures except orbit age 0 - 17	0.5423	\$3,352.40	\$1,817.98	\$2,024.53	7	\$4,747.25	
042	Intraocular procedures except retina iris & lens	0.8790	\$3,352.40	\$2,946.78	\$3,281.51	14	\$8,863.97	
043	HypHEMA	0.2929	\$3,352.40	\$981.92	\$1,093.44	8	\$4,363.56	
044	Acute major eye infections	1.3175	\$3,352.40	\$4,416.77	\$4,918.44	24	\$12,753.23	
045	Neurological eye disorders	0.6752	\$3,352.40	\$2,263.55	\$2,520.59	15	\$9,340.65	
046	Other disorders of the eye, age > 17 w cc	0.7490	\$3,352.40	\$2,510.90	\$2,796.16	25	\$10,110.92	
047	Other disorders of the eye, age > 17 w/o cc	0.4286	\$3,352.40	\$1,436.84	\$1,600.04	11	\$6,717.89	
048	Other disorders of the eye, age 0 - 17	0.4635	\$3,352.40	\$1,553.80	\$1,730.26	8	\$7,046.16	

049	Major head & neck procedures	0.5115	\$3,352.40	\$1,714.79	\$1,909.61	7	\$3,706.51
050	Sialoadanectomy	1.1754	\$3,352.40	\$3,940.43	\$4,388.04	11	\$9,971.18
051	Salivary gland procedures except sialoadanectomy	1.1308	\$3,352.40	\$3,790.83	\$4,221.44	10	\$9,584.77
052	Cleft lip & palate repair	0.9423	\$3,352.40	\$3,158.94	\$3,517.81	10	\$8,145.72
053	Sinus & mastoid procedure, age > 17	0.8665	\$3,352.40	\$2,904.79	\$3,234.76	9	\$9,473.76
054	Sinus & mastoid procedure, age 0 - 17	1.1215	\$3,352.40	\$3,759.72	\$4,186.76	11	\$15,554.49
055	Miscellaneous ear, nose, mouth & throat procedures	0.7866	\$3,352.40	\$2,637.04	\$2,936.58	8	\$8,858.70
056	Rhinoplasty	0.6641	\$3,352.40	\$2,226.32	\$2,479.28	8	\$5,146.07
057	T & A proc except tonsillectomy &/or adenoidectomy only age > 17	0.6394	\$3,352.40	\$2,143.53	\$2,386.97	12	\$8,858.70
058	T & A proc except tonsillectomy &/or adenoidectomy only age 0 - 17	0.6104	\$3,352.40	\$2,046.29	\$2,278.68	8	\$4,692.68
059	Tonsillectomy &/or adenoidectomy only age > 17	0.5052	\$3,352.40	\$1,693.71	\$1,885.98	8	\$3,948.59
060	Tonsillectomy &/or adenoidectomy only age 0 - 17	0.4886	\$3,352.40	\$1,637.95	\$1,824.10	8	\$3,636.30
061	Myringotomy w tube insertion age > 17	0.6736	\$3,352.40	\$2,258.11	\$2,514.64	9	\$7,286.54
062	Myringotomy w tube insertion age 0 - 17	0.5225	\$3,352.40	\$1,751.68	\$1,950.58	8	\$3,963.21
063	Other ear, nose, mouth & throat o.r. procedures	0.9926	\$3,352.40	\$3,327.58	\$3,705.49	10	\$11,301.77
064	Ear, nose & throat malignancy	1.1062	\$3,352.40	\$3,708.38	\$4,129.64	24	\$18,549.38
065	Dysequilibrium	0.4097	\$3,352.40	\$1,373.43	\$1,529.49	12	\$5,341.23
066	Epistaxis	0.4025	\$3,352.40	\$1,349.29	\$1,502.63	9	\$5,072.80
067	Epi-glottitis	1.2004	\$3,352.40	\$4,024.24	\$4,481.37	13	\$13,910.59
068	Otitis media & uri, age > 17 w cc	0.6598	\$3,352.40	\$2,211.87	\$2,463.13	16	\$8,438.46
069	Otitis media & uri, age > 17 w/o cc	0.3911	\$3,352.40	\$1,311.04	\$1,460.13	9	\$4,743.17
070	Otitis media & uri, age 0 - 17	0.3830	\$3,352.40	\$1,284.01	\$1,429.87	8	\$5,015.34
071	Laryngotracheitis	0.2095	\$3,352.40	\$702.27	\$782.17	7	\$2,452.59
072	Nasal trauma & deformity	0.3144	\$3,352.40	\$1,054.00	\$1,173.68	7	\$3,406.63
073	Other ear, nose, mouth & throat diagnoses age > 17	0.4372	\$3,352.40	\$1,465.74	\$1,632.17	9	\$4,901.78
074	Other ear, nose, mouth & throat diagnoses age 0 - 17	0.3665	\$3,352.40	\$1,228.59	\$1,368.16	7	\$4,241.84
075	Major chest procedures	2.8481	\$3,352.40	\$9,548.05	\$10,632.48	21	\$28,693.62
076	Other resp system o.r. procedures w cc	1.5655	\$3,352.40	\$5,248.24	\$5,844.26	34	\$16,297.05
077	Other resp system o.r. procedures w/o cc	1.1887	\$3,352.40	\$3,984.97	\$4,437.68	18	\$15,286.57
078	Pulmonary embolism	1.2739	\$3,352.40	\$4,270.57	\$4,755.75	25	\$14,302.44
079	Respiratory infections & inflammations, age > 17 w cc	1.6171	\$3,352.40	\$5,421.13	\$6,037.04	35	\$25,546.41
080	Respiratory infections & inflammations, age > 17 w/o cc	1.2255	\$3,352.40	\$4,108.39	\$4,575.04	35	\$20,026.51
082	Respiratory neoplasms	1.0107	\$3,352.40	\$3,388.27	\$3,773.15	33	\$16,233.81
083	Major chest trauma w cc	0.7600	\$3,352.40	\$2,547.79	\$2,837.30	35	\$17,187.85
084	Major chest trauma w/o cc	0.5617	\$3,352.40	\$1,883.09	\$2,096.95	15	\$8,371.48
085	Pleural effusion w cc	1.0563	\$3,352.40	\$3,541.10	\$3,943.32	29	\$15,963.34
086	Pleural effusion w/o cc	0.7446	\$3,352.40	\$2,496.28	\$2,779.67	20	\$11,663.19
087	Pulmonary edema & respiratory failure	1.2218	\$3,352.40	\$4,095.98	\$4,561.27	35	\$17,427.04
088	Chronic obstructive pulmonary disease	0.7846	\$3,352.40	\$2,630.24	\$2,929.10	24	\$10,516.37
089	Simple pneumonia & pleurisy, age > w cc	0.9673	\$3,352.40	\$3,242.75	\$3,611.14	26	\$12,550.08
090	Simple pneumonia & pleurisy, age > w/o cc	0.6607	\$3,352.40	\$2,214.93	\$2,466.53	18	\$8,726.78
092	Interstitial lung disease w cc	1.0702	\$3,352.40	\$3,587.68	\$3,995.34	32	\$18,695.41
093	Interstitial lung disease w/o cc	0.9129	\$3,352.40	\$3,060.34	\$3,407.99	26	\$13,564.98
094	Pneumothorax w cc	1.4106	\$3,352.40	\$4,728.89	\$5,266.09	29	\$18,158.89
095	Pneumothorax w/o cc	1.0089	\$3,352.40	\$3,382.32	\$3,766.35	18	\$14,831.82
096	Bronchitis & asthma, age > 17 w cc	0.7832	\$3,352.40	\$2,558.50	\$2,849.20	23	\$9,546.18
097	Bronchitis & asthma, age > 17 w/o cc	0.4906	\$3,352.40	\$1,644.75	\$1,831.58	14	\$6,591.07
099	Respiratory signs & symptoms w cc	0.5293	\$3,352.40	\$1,774.46	\$1,975.91	18	\$8,357.71
100	Respiratory signs & symptoms w/o cc	0.1980	\$3,352.40	\$663.85	\$739.16	7	\$2,501.38
101	Other respiratory system diagnoses w cc	1.1750	\$3,352.40	\$3,939.07	\$4,386.51	35	\$17,708.22
102	Other respiratory system diagnoses w/o cc	0.5383	\$3,352.40	\$1,804.55	\$2,009.57	12	\$8,126.34

103	Heart Transplant	25.7187	\$3,352.40	\$86,219.41	\$96,013.11	50	\$150,901.18
104	Cardiac valve procedures w cardiac cath	12.1917	\$3,352.40	\$40,871.40	\$45,514.10	35	\$56,496.10
105	Cardiac valve procedures w/o cardiac cath	5.5248	\$3,352.40	\$18,521.33	\$20,625.25	23	\$43,775.00
106	Coronary bypass w cardiac cath	6.6767	\$3,352.40	\$22,383.05	\$25,265.40	35	\$43,775.00
107	Coronary bypass w/o cardiac cath	4.2240	\$3,352.40	\$14,160.49	\$15,769.03	18	\$30,407.73
108	Other cardiothoracic procedures	3.9186	\$3,352.40	\$13,136.75	\$14,628.84	24	\$43,775.00
110	Major cardiovascular procedures w cc	5.1851	\$3,352.40	\$17,382.50	\$19,357.05	35	\$43,775.00
111	Major cardiovascular procedures w/o cc	4.2048	\$3,352.40	\$14,096.23	\$15,697.29	35	\$43,775.00
112	Percutaneous cardiovascular procedures	0.0000	\$3,352.40	\$8,286.65	\$8,286.65		\$0.00
113	Amputation for circulatory system disorders except upper limb and toe	2.4581	\$3,352.40	\$8,240.58	\$9,176.60	35	\$35,661.92
114	Upper limb & toe amputation for circulatory system disorder	1.9968	\$3,352.40	\$6,694.09	\$7,454.50	35	\$26,791.66
115	Perm cardiac pacemaker implant w ami, heart failure or shock	3.1157	\$3,352.40	\$10,445.14	\$11,631.57	35	\$29,724.33
116	Oth perm cardiac pacemaker implant or aiod lead or generator	1.9464	\$3,352.40	\$6,525.11	\$7,266.31	13	\$23,549.76
117	Cardiac pacemaker revision except device replacement	1.2515	\$3,352.40	\$4,195.60	\$4,672.11	12	\$15,292.69
118	Cardiac pacemaker device replacement	1.5835	\$3,352.40	\$5,308.59	\$5,911.58	8	\$16,113.79
119	Vein ligation & stripping	0.6049	\$3,352.40	\$2,027.93	\$2,258.28	7	\$6,091.44
120	Other circulatory system o.r. procedures	1.9577	\$3,352.40	\$6,563.02	\$7,308.47	35	\$28,559.83
121	Other circulatory disorders with acute myocardial infarct and cardiovascular complication alive at 4th day of care	1.3756	\$3,352.40	\$4,611.59	\$5,135.36	25	\$16,396.33
122	Other circulatory disorders with acute myocardial infarct without cardiovascular complication alive at 4th day of care	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
123	Other circ disorders w acute myocardial infarc death within first 3 days of care	1.1205	\$3,352.40	\$3,756.32	\$4,183.02	17	\$12,638.82
124	Circulatory disorders except ami, w card cath & complex diagnosis	0.8007	\$3,352.40	\$2,684.30	\$2,989.11	19	\$0.00
125	Circulatory disorders except ami, w card cath w/o complex diagnosis	1.2483	\$3,352.40	\$4,184.72	\$4,660.21	20	\$13,716.96
126	Acute & sub acute endocarditis	0.0000	\$3,352.40	\$2,968.88	\$2,968.88		\$0.00
127	Heart failure & shock	2.6677	\$3,352.40	\$8,943.19	\$9,959.11	35	\$43,775.00
128	Deep vein thrombophlebitis	0.8126	\$3,352.40	\$2,724.08	\$3,033.65	24	\$10,890.37
129	Cardiac arrest, unexplained	0.7694	\$3,352.40	\$2,579.41	\$2,872.32	20	\$9,576.27
130	Peripheral vascular disorders w cc	0.4587	\$3,352.40	\$1,537.82	\$1,712.41	9	\$8,381.68
131	Peripheral vascular disorders w/o cc	1.0648	\$3,352.40	\$3,569.66	\$3,975.11	29	\$15,024.09
132	Atherosclerosis w cc	0.6788	\$3,352.40	\$2,275.62	\$2,534.02	18	\$8,802.94
133	Atherosclerosis w/o cc	0.7904	\$3,352.40	\$2,649.79	\$2,950.69	24	\$11,623.07
134	Hypertension	0.4279	\$3,352.40	\$1,434.46	\$1,597.49	11	\$6,572.54
135	Cardiac congenital & valvular disorders age > 17 w cc	0.4723	\$3,352.40	\$1,583.38	\$1,763.24	13	\$6,016.13
136	Cardiac congenital & valvular disorders age > 17 w/o cc	0.9542	\$3,352.40	\$3,198.89	\$3,562.18	25	\$13,696.56
137	Cardiac congenital & valvular disorders age 0 - 17	0.6546	\$3,352.40	\$2,194.53	\$2,443.75	15	\$10,000.93
138	Cardiac arrhythmia & conduction disorders w cc	1.0474	\$3,352.40	\$3,511.35	\$3,910.17	18	\$25,016.86
139	Cardiac arrhythmia & conduction disorders w/o cc	0.5972	\$3,352.40	\$2,002.09	\$2,229.55	19	\$8,969.54
140	Angina pectoris	0.2975	\$3,352.40	\$997.39	\$1,110.61	8	\$4,030.70
141	Syncope & collapse w cc	0.5109	\$3,352.40	\$1,712.75	\$1,907.23	13	\$7,305.75
142	Syncope & collapse w/o cc	0.5121	\$3,352.40	\$1,716.83	\$1,911.82	16	\$7,165.50
143	Chest pain	0.3201	\$3,352.40	\$1,073.04	\$1,194.93	8	\$4,408.78
144	Other circulatory system diagnoses w cc	0.2715	\$3,352.40	\$910.18	\$1,013.54	7	\$3,395.07
145	Other circulatory system diagnoses w/o cc	1.2556	\$3,352.40	\$4,209.20	\$4,687.41	28	\$18,780.24
146	Rectal resection w/o cc	0.7514	\$3,352.40	\$2,519.06	\$2,805.17	15	\$11,304.49
147	Rectal resection w cc	4.0379	\$3,352.40	\$13,536.59	\$15,074.24	35	\$38,284.68
148	Major small & large bowel procedures w cc	3.4240	\$3,352.40	\$11,478.57	\$12,782.47	31	\$27,565.16
149	Major small & large bowel procedures w/o cc	3.6409	\$3,352.40	\$12,205.83	\$13,592.18	35	\$42,214.91
150	Peritoneal adhesiolysis w cc	2.7445	\$3,352.40	\$9,200.74	\$10,249.13	31	\$26,516.60
151	Peritoneal adhesiolysis w/o cc	2.5267	\$3,352.40	\$8,470.59	\$9,432.62	32	\$27,497.33
152	Small & large bowel procedures w cc	1.9531	\$3,352.40	\$6,547.55	\$7,291.30	25	\$18,737.74
		2.0371	\$3,352.40	\$6,829.24	\$7,604.95	35	\$28,038.44

153	Small & large bowel procedures w/o cc	1.5406	\$3,352.40	\$5,164.77	\$5,751.44	19	\$15,328.00
154	Stomach, oesophageal & duodenal procedures, age > 17 w cc	3.5646	\$3,352.40	\$11,949.98	\$13,307.43	35	\$43,775.00
155	Stomach, oesophageal & duodenal procedures, age > 17 w/o cc	2.7038	\$3,352.40	\$9,064.23	\$10,093.75	34	\$36,134.01
156	Stomach, oesophageal & duodenal procedures, age 0 - 17	1.8871	\$3,352.40	\$6,326.38	\$7,044.97	26	\$29,404.56
157	Minor intestinal procedure w cc	0.9841	\$3,352.40	\$3,299.02	\$3,673.87	21	\$14,751.07
158	Minor intestinal procedure w/o cc	0.6043	\$3,352.40	\$2,025.89	\$2,255.90	11	\$6,830.09
159	Hernia procedures except inguinal & femoral, age > 17 w cc	1.2303	\$3,352.40	\$4,124.54	\$4,592.89	18	\$13,212.40
160	Hernia procedures except inguinal & femoral, age > 17 w/o cc	0.9930	\$3,352.40	\$3,328.94	\$3,707.02	15	\$11,005.46
161	Inguinal & femoral hernia procedures, age > 17 w cc	1.0378	\$3,352.40	\$3,479.05	\$3,874.30	23	\$11,483.84
162	Inguinal & femoral hernia procedures, age > 17 w/o cc	0.6971	\$3,352.40	\$2,336.99	\$2,602.36	8	\$6,504.71
163	Hernia procedures, age 0 - 17	0.5501	\$3,352.40	\$1,844.16	\$2,053.60	7	\$5,664.06
164	Appendectomy w complicated principal diag w cc	2.1325	\$3,352.40	\$7,149.01	\$7,961.10	33	\$20,454.40
165	Appendectomy w complicated principal diag w/o cc	1.2107	\$3,352.40	\$4,058.75	\$4,519.79	15	\$11,002.23
166	Appendectomy w/o complicated principal diag w cc	1.2391	\$3,352.40	\$4,153.95	\$4,625.87	19	\$11,056.29
167	Appendectomy w/o complicated principal diag w/o cc	0.7987	\$3,352.40	\$2,677.50	\$2,981.63	8	\$6,613.34
168	Mouth procedures w cc	0.4773	\$3,352.40	\$1,600.04	\$1,781.94	21	\$15,033.78
169	Mouth procedures w/o cc	0.7828	\$3,352.40	\$2,624.29	\$2,922.30	14	\$10,296.90
170	Other digestive system o.r. procedures w cc	2.6859	\$3,352.40	\$9,004.22	\$10,026.94	35	\$42,594.69
171	Other digestive system o.r. procedures w/o cc	1.2849	\$3,352.40	\$4,307.46	\$4,796.72	24	\$17,315.52
172	Digestive malignancy w cc	0.8522	\$3,352.40	\$2,856.85	\$3,181.38	22	\$11,806.33
173	Digestive malignancy w/o cc	0.8775	\$3,352.40	\$2,941.68	\$3,275.90	24	\$13,031.69
174	G.I. Haemorrhage w cc	1.0280	\$3,352.40	\$3,446.24	\$3,837.75	24	\$14,885.20
175	G.I. Haemorrhage w/o cc	0.6058	\$3,352.40	\$2,030.82	\$2,261.51	13	\$7,675.16
176	Complicated peptic ulcer	0.8669	\$3,352.40	\$2,302.14	\$2,563.60	17	\$9,991.75
177	Uncomplicated peptic ulcer w cc	0.6669	\$3,352.40	\$2,906.15	\$3,236.29	24	\$10,566.86
178	Uncomplicated peptic ulcer w/o cc	0.5426	\$3,352.40	\$1,819.00	\$2,025.55	13	\$6,916.79
179	Inflammatory bowel disease	0.7855	\$3,352.40	\$2,633.30	\$2,932.50	24	\$11,630.72
180	G.I. Obstruction w cc	0.7796	\$3,352.40	\$2,613.58	\$2,910.40	19	\$10,258.14
181	G.I. Obstruction w/o cc	0.4620	\$3,352.40	\$1,548.87	\$1,724.82	9	\$5,067.87
182	Esophagitis, gastroent & misc digest disorders, age > 17 w cc	0.6501	\$3,352.40	\$2,179.40	\$2,426.92	18	\$8,634.47
183	Esophagitis, gastroent & misc digest disorders, age > 17 w/o cc	0.3546	\$3,352.40	\$1,188.81	\$1,323.79	9	\$4,335.51
185	Dental & oral dis except extractions & restorations age > 17	0.5458	\$3,352.40	\$1,829.71	\$2,037.62	11	\$7,156.49
186	Dental & oral dis except extractions & restorations age 0 - 17	0.3533	\$3,352.40	\$1,184.39	\$1,318.86	7	\$4,761.70
187	Dental extractions & restorations	0.6225	\$3,352.40	\$2,086.92	\$2,323.90	8	\$6,661.45
188	Other digestive system diagnoses, age > 17 w cc	0.7306	\$3,352.40	\$2,449.19	\$2,727.48	23	\$12,021.55
189	Other digestive system diagnoses, age > 17 w/o cc	0.4492	\$3,352.40	\$1,505.86	\$1,676.88	8	\$5,946.43
191	Pancreas, liver & shunt procedures w cc	4.0955	\$3,352.40	\$13,729.71	\$15,289.29	35	\$43,775.00
192	Pancreas, liver & shunt procedures w/o cc	4.1411	\$3,352.40	\$13,882.54	\$15,459.63	35	\$43,775.00
193	Biliary tract proc except only cholecys w or w/o c.d.e. w cc	2.6098	\$3,352.40	\$8,749.05	\$9,742.87	35	\$43,775.00
194	Biliary tract proc except only cholecys w or w/o c.d.e. w/o cc	2.3634	\$3,352.40	\$7,923.02	\$8,823.00	35	\$33,761.15
195	Cholecystectomy w c.d.e. w cc	3.2526	\$3,352.40	\$10,903.97	\$12,142.59	35	\$38,036.65
196	Cholecystectomy w c.d.e. w/o cc	2.5480	\$3,352.40	\$8,541.99	\$9,512.18	30	\$19,729.52
197	Cholecystectomy except by laparoscope w/o cde w cc	2.5791	\$3,352.40	\$8,646.20	\$9,628.29	34	\$24,475.07
198	Cholecystectomy except by laparoscope w/o cde w cc	1.5228	\$3,352.40	\$5,105.10	\$5,684.97	18	\$14,648.90
199	Hepatobiliary diagnostic procedure for malignancy	2.6688	\$3,352.40	\$8,946.93	\$9,963.19	35	\$36,533.17
200	Hepatobiliary diagnostic procedure for non-malignancy	2.1782	\$3,352.40	\$7,302.18	\$8,131.61	35	\$36,785.11
201	Other Hepatobiliary or pancreas o.r. procedures	3.5642	\$3,352.40	\$11,948.69	\$13,305.90	35	\$43,775.00
202	Cirrhosis & alcoholic hepatitis	1.0947	\$3,352.40	\$3,669.79	\$4,086.80	33	\$17,258.06
203	Malignancy of Hepatobiliary system or pancreas	0.9996	\$3,352.40	\$3,351.04	\$3,731.67	28	\$14,822.30
204	Disorders of pancreas except malignancy	0.7693	\$3,352.40	\$2,579.07	\$2,871.98	19	\$9,431.94
205	Disorders of liver except malig. Cirr, a/c hepa w cc	0.8359	\$3,352.40	\$2,802.28	\$3,120.52	23	\$14,584.13

206	Disorders of liver except malign. Cirr, a/c hepa w/o cc	0.5483	\$3,352.40	\$1,838.04	\$2,046.97	13	\$8,092.34
207	Disorders of biliary tract w cc	1.0122	\$3,352.40	\$3,393.37	\$3,778.76	24	\$14,177.15
208	Disorders of biliary tract w/o cc	0.6096	\$3,352.40	\$2,043.57	\$2,275.79	15	\$7,979.97
209	Major joint & limb reattachment procedures of lower extremity	2.9532	\$3,352.40	\$9,900.29	\$11,024.84	24	\$19,701.13
210	Hip & femur procedures except major joint, age > 17, w cc	1.9764	\$3,352.40	\$6,625.75	\$7,378.34	30	\$19,426.58
211	Hip & femur procedures except major joint, age > 17, w/o cc	1.6809	\$3,352.40	\$5,634.99	\$6,275.21	25	\$15,996.15
212	Hip & femur procedures except major joint, age 0 - 17	1.6629	\$3,352.40	\$5,574.64	\$6,207.89	20	\$19,978.74
213	Amputation for musculoskeletal sys & conn tissue disorder	2.2421	\$3,352.40	\$7,516.38	\$8,370.29	35	\$26,118.46
216	Biopsies of musculoskeletal system & connective tissue	0.8697	\$3,352.40	\$2,915.50	\$3,246.83	15	\$13,936.26
217	Wnd debrid & skin graft except hand, for musculoskeletal & conn tissue diseases	1.7588	\$3,352.40	\$5,896.28	\$6,565.91	34	\$26,440.10
218	Lower extrem & humer proc except hip. Foot, femur age > 17, with cc	2.1619	\$3,352.40	\$7,247.61	\$8,070.75	32	\$23,158.76
219	Lower extrem & humer proc except hip. Foot, femur age > 17, w/o cc	1.2569	\$3,352.40	\$4,213.62	\$4,692.34	18	\$13,305.22
220	Lower extrem & humer proc except hip, foot, femur age 0 - 17	0.7962	\$3,352.40	\$2,669.17	\$2,972.45	9	\$9,383.32
221	Knee procedures w cc	1.3868	\$3,352.40	\$4,649.16	\$5,177.18	35	\$20,196.00
222	Knee procedures w/o cc	0.7217	\$3,352.40	\$2,419.44	\$2,694.33	8	\$8,013.29
223	Major shoulder/elbow proc, or other upper extremity proc w cc	1.1696	\$3,352.40	\$3,921.05	\$4,366.28	18	\$12,781.62
224	Shoulder, elbow or forearm proc, exc major joint proc, w/o cc	0.7825	\$3,352.40	\$2,556.29	\$2,846.65	8	\$9,348.30
225	Foot procedures	0.8327	\$3,352.40	\$2,791.57	\$3,108.62	12	\$7,925.06
226	Soft tissue procedures w cc	0.8031	\$3,352.40	\$2,692.29	\$2,998.12	10	\$8,438.46
227	Soft tissue procedures w/o cc	0.7644	\$3,352.40	\$2,562.58	\$2,853.62	10	\$8,452.23
228	Major thumb or joint proc, or oth hand or wrist proc. w cc	0.9879	\$3,352.40	\$3,311.77	\$3,687.98	9	\$9,209.58
229	Hand or wrist proc, except major joint proc. w cc	0.6551	\$3,352.40	\$2,196.23	\$2,445.62	7	\$6,521.37
230	Local excision & removal of int fix devices hip & femur	0.7376	\$3,352.40	\$2,472.65	\$2,753.66	12	\$8,598.43
231	Local excision & removal of int fix devices except hip & femur	0.6314	\$3,352.40	\$2,116.67	\$2,357.22	9	\$8,101.86
232	Arthroscopy	0.4268	\$3,352.40	\$1,430.72	\$1,593.41	7	\$3,970.52
233	Other musculoskeletal sys & conn tiss o.r. proc w cc	3.0365	\$3,352.40	\$10,179.60	\$11,335.94	35	\$36,666.62
234	Other musculoskeletal sys & conn tiss o.r. proc w/o cc	1.4279	\$3,352.40	\$4,786.86	\$5,330.69	23	\$18,642.71
235	Fractures of femur	1.3764	\$3,352.40	\$4,614.31	\$5,138.42	35	\$22,981.45
236	Fractures of hip & pelvis	0.8993	\$3,352.40	\$3,014.78	\$3,357.33	27	\$11,671.01
237	Sprains, strains, & dislocations of hip, pelvis & thigh	0.5337	\$3,352.40	\$1,789.25	\$1,992.40	14	\$6,526.98
238	Osteomyelitis	1.2559	\$3,352.40	\$4,210.22	\$4,688.60	27	\$16,894.94
239	Pathological fractures & musculoskeletal & conn tiss malign	0.8817	\$3,352.40	\$2,955.79	\$3,291.54	19	\$13,947.14
240	Connective tissue disorders w cc	1.1110	\$3,352.40	\$3,724.53	\$4,147.66	35	\$12,918.47
241	Connective tissue disorders w/o cc	0.9048	\$3,352.40	\$3,033.31	\$3,377.73	26	\$12,918.47
242	Septic arthritis	0.9593	\$3,352.40	\$3,215.89	\$3,581.22	25	\$14,514.43
243	Medical back problems	0.6102	\$3,352.40	\$2,045.61	\$2,278.00	19	\$8,479.09
244	Bone diseases & specific arthropathies w cc	0.8101	\$3,352.40	\$2,715.75	\$3,024.30	27	\$11,776.41
245	Bone diseases & specific arthropathies w/o cc	0.4642	\$3,352.40	\$1,556.18	\$1,732.98	15	\$7,648.13
246	Non-specific arthropathies	0.6549	\$3,352.40	\$2,195.55	\$2,444.94	18	\$9,292.20
247	Signs & symptoms of musculoskeletal system & conn tissue	0.4555	\$3,352.40	\$1,526.94	\$1,700.51	12	\$6,226.25
248	Tendonitis, myositis & bursitis	0.4809	\$3,352.40	\$1,612.11	\$1,795.37	12	\$6,660.60
249	Aftercare, musculoskeletal system & connective tissue	0.4807	\$3,352.40	\$1,611.43	\$1,794.52	12	\$6,885.68
250	Fx, spm, stm & disl of forearm, hand, foot age > 17 w cc	0.7005	\$3,352.40	\$2,348.38	\$2,615.11	23	\$10,983.53
251	Fx, spm, stm & disl of forearm, hand, foot age > 17 w/o cc	0.4675	\$3,352.40	\$1,567.23	\$1,745.22	11	\$6,811.56
252	Fx, spm, stm & disl of forearm, hand, foot age 0 - 17	0.3470	\$3,352.40	\$1,163.31	\$1,295.40	6	\$3,071.39
253	Fx, spm, stm, & disl of uparm, lowleg ex foot age > 17 w cc	1.0292	\$3,352.40	\$3,450.32	\$3,842.17	28	\$13,481.68
254	Fx, spm, stm & disl of uparm, lowleg ex foot age > 17 w/o cc	0.5687	\$3,352.40	\$1,906.55	\$2,123.13	17	\$7,726.84
255	Fx, spm, stm & disl of up arm, lowleg ex foot age 0 - 17	0.4163	\$3,352.40	\$1,395.53	\$1,554.14	7	\$4,536.28
256	Other musculoskeletal system & connective tissue diagnoses	0.3903	\$3,352.40	\$1,308.49	\$1,457.07	7	\$5,509.36
257	Total mastectomy for malignancy w cc	1.1841	\$3,352.40	\$3,969.50	\$4,420.51	16	\$10,675.15
258	Total mastectomy for malignancy w/o cc	1.1063	\$3,352.40	\$3,708.72	\$4,129.98	13	\$9,746.78

259	Subtotal mastectomy for malignancy w cc	0.8893	\$3,352.40	\$2,981.29	\$3,319.93	11	\$8,286.93
260	Subtotal mastectomy for malignancy w/o cc	0.8618	\$3,352.40	\$2,889.15	\$3,217.25	10	\$7,692.84
261	Breast proc for non-malignancy except biopsy & local excision	0.9489	\$3,352.40	\$3,181.04	\$3,542.46	9	\$9,506.40
262	Breast biopsy & local excision for non-malignancy	0.5622	\$3,352.40	\$1,884.79	\$2,098.82	8	\$4,875.43
263	Skin graft &/or debrid for skin ulcer or cellulitis w cc	3.3464	\$3,352.40	\$11,218.47	\$12,492.79	35	\$43,775.00
264	Skin graft &/or debrid for skin ulcer or cellulitis w/o cc	2.4406	\$3,352.40	\$8,181.93	\$9,111.32	35	\$34,443.53
265	Skin graft &/or debrid except for skin ulcer or cellulitis w cc	1.7160	\$3,352.40	\$5,752.80	\$6,406.11	35	\$25,505.10
266	Skin graft &/or debrid except for skin ulcer or cellulitis w/o cc	0.7071	\$3,352.40	\$2,370.48	\$2,639.76	12	\$9,423.95
267	Perianal & pilonidal procedures	0.4563	\$3,352.40	\$1,529.66	\$1,703.40	9	\$5,143.01
268	Skin, subcutaneous tissue & breast plastic procedures	0.8086	\$3,352.40	\$2,710.82	\$3,018.69	10	\$9,619.28
269	Other skin, subcut tiss & breast proc w cc	1.5179	\$3,352.40	\$5,088.61	\$5,666.61	35	\$20,306.50
270	Other skin, subcut tiss & breast proc w/o cc	0.6174	\$3,352.40	\$2,069.75	\$2,304.86	10	\$7,110.59
271	Skin ulcers	1.3934	\$3,352.40	\$4,671.26	\$5,201.83	35	\$21,978.96
272	Major skin disorders w cc	1.0760	\$3,352.40	\$3,607.23	\$4,016.93	32	\$15,256.65
273	Major skin disorders w/o cc	1.1283	\$3,352.40	\$3,782.50	\$4,212.09	32	\$15,568.94
274	Malignant breast disorders w cc	0.5857	\$3,352.40	\$1,963.50	\$2,186.54	20	\$9,989.99
275	Malignant breast disorders w/o cc	0.4604	\$3,352.40	\$1,543.43	\$1,718.70	11	\$7,401.80
276	Non-malignant breast disorders	0.3432	\$3,352.40	\$1,150.56	\$1,281.29	8	\$4,801.14
277	Cellulitis age > 17 w cc	0.9359	\$3,352.40	\$3,137.52	\$3,493.84	26	\$11,689.54
278	Cellulitis age > 17 w/o cc	0.5464	\$3,352.40	\$1,831.75	\$2,039.83	13	\$6,548.23
279	Cellulitis age 0 - 17	0.5270	\$3,352.40	\$1,766.64	\$1,967.41	8	\$6,181.03
280	Trauma to the skin, subcut tiss & breast age > 17 w cc	0.8030	\$3,352.40	\$2,691.95	\$2,997.78	23	\$10,385.81
281	Trauma to the skin, subcut tiss & breast age > 17 w/o cc	0.4135	\$3,352.40	\$1,386.18	\$1,543.60	10	\$5,985.30
282	Trauma to the skin, subcut tiss & breast age 0 - 17	0.2736	\$3,352.40	\$917.15	\$1,021.36	7	\$2,908.70
283	Minor skin disorders w cc	1.3027	\$3,352.40	\$4,367.13	\$4,863.19	32	\$16,219.87
284	Minor skin disorders w/o cc	0.6698	\$3,352.40	\$2,245.36	\$2,500.53	22	\$10,604.09
285	Amputate of lower limb for endocrine, nutrit, & metabol disorders	2.3752	\$3,352.40	\$7,962.63	\$8,867.03	35	\$34,781.15
286	Adrenal & pituitary procedures	2.8717	\$3,352.40	\$9,627.10	\$10,720.71	21	\$22,395.80
287	Skin grafts & wound debrid for endoc, nutrit & metabol disorders	2.2737	\$3,352.40	\$7,622.29	\$8,488.10	35	\$43,775.00
288	Procedures for obesity	1.6269	\$3,352.40	\$5,453.94	\$6,073.59	15	\$16,855.33
289	Parathyroid procedures	1.2499	\$3,352.40	\$4,190.16	\$4,666.16	13	\$11,087.57
290	Thyroid procedures	1.1529	\$3,352.40	\$3,864.95	\$4,304.06	10	\$9,781.63
291	Thyroglossal procedures	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
292	Other endocrine, nutrit & metab o.r. proc w cc	4.0035	\$3,352.40	\$13,421.33	\$14,945.89	35	\$43,775.00
293	Other endocrine, nutrit & metab o.r. proc w/o cc	2.2147	\$3,352.40	\$7,424.58	\$8,267.95	34	\$31,279.83
294	Diabetes age > 35	0.8318	\$3,352.40	\$2,788.51	\$3,105.22	24	\$11,614.06
295	Diabetes age 0 - 35	1.4502	\$3,352.40	\$4,861.66	\$5,413.82	35	\$24,177.91
296	Nutritional & misc metabolic disorders age > 17 w cc	0.7767	\$3,352.40	\$2,603.89	\$2,899.52	26	\$11,779.47
297	Nutritional & misc metabolic disorders age > 17 w/o cc	0.5749	\$3,352.40	\$1,927.29	\$2,146.25	17	\$9,271.12
298	Nutritional & misc. metabolic disorders age 0 - 17	0.4291	\$3,352.40	\$1,438.54	\$1,601.91	8	\$5,672.90
299	Inborn errors of metabolism	0.4962	\$3,352.40	\$1,663.45	\$1,852.49	9	\$8,703.49
300	Endocrine disorders w cc	0.7524	\$3,352.40	\$2,522.29	\$2,808.91	19	\$10,685.86
301	Endocrine disorders w/o cc	0.4133	\$3,352.40	\$1,385.50	\$1,542.92	8	\$5,017.55
302	Kidney transplant	9.0839	\$3,352.40	\$30,452.95	\$33,911.94	35	\$48,064.95
303	Kidney, ureter & major bladder procedures for neoplasm	3.6654	\$3,352.40	\$12,287.94	\$13,683.64	35	\$43,775.00
304	Kidney, ureter & major bladder procedures for non-neoplasm w cc	2.7453	\$3,352.40	\$9,203.29	\$10,248.79	35	\$33,820.14
305	Kidney, ureter & major bladder procedures for non-neoplasm w/o cc	1.8455	\$3,352.40	\$6,186.81	\$6,889.59	27	\$25,017.03
306	Prostatectomy w cc	1.0030	\$3,352.40	\$3,362.43	\$3,744.42	15	\$10,203.06
307	Prostatectomy w/o cc	0.9848	\$3,352.40	\$3,301.40	\$3,676.42	13	\$10,290.61
308	Minor bladder procedures w cc	2.4074	\$3,352.40	\$8,070.58	\$8,987.39	35	\$40,262.46
309	Minor bladder procedures w/o cc	1.6410	\$3,352.40	\$5,501.37	\$6,126.12	26	\$21,063.51

310	Transurethral procedures w cc	0.8233	\$3,352.40	\$2,759.95	\$3,073.60	13	\$9,175.75
311	Transurethral procedures w/o cc	0.6696	\$3,352.40	\$2,244.85	\$2,499.68	8	\$6,372.45
312	Urethral procedures, age > 17 w cc	0.6533	\$3,352.40	\$2,190.11	\$2,438.82	15	\$12,518.46
313	Urethral procedures, age > 17 w/o cc	0.8656	\$3,352.40	\$2,901.90	\$3,231.53	13	\$9,323.65
314	Urethral procedures, age 0 - 17	0.8857	\$3,352.40	\$2,969.22	\$3,306.50	11	\$10,440.55
315	Other kidney & urinary tract o.r. procedures	1.8204	\$3,352.40	\$6,102.66	\$6,795.92	25	\$22,179.39
316	Kidney failure	0.9949	\$3,352.40	\$3,335.23	\$3,714.16	27	\$16,678.36
317	Admit for renal dialysis	1.1061	\$3,352.40	\$3,708.04	\$4,129.30	22	\$16,805.69
318	Kidney & urinary tract neoplasma w cc	1.0197	\$3,352.40	\$3,418.36	\$3,806.81	30	\$14,739.17
319	Kidney & urinary tract neoplasma w/o cc	0.5238	\$3,352.40	\$1,755.93	\$1,955.51	12	\$8,037.09
320	Kidney & urinary tract infections age > 17 w cc	0.8316	\$3,352.40	\$2,787.83	\$3,104.54	22	\$10,650.16
321	Kidney & urinary tract infections age > 17 w/o cc	0.5845	\$3,352.40	\$1,959.42	\$2,182.12	15	\$7,168.39
322	Kidney & urinary tract infections age 0 - 17	0.6557	\$3,352.40	\$2,198.10	\$2,447.83	9	\$8,244.15
323	Urinary stones w cc, &/or esw lithotripsy	0.8281	\$3,352.40	\$2,776.10	\$3,091.45	15	\$9,632.20
324	Urinary stones w/o cc	0.4369	\$3,352.40	\$1,464.72	\$1,630.98	8	\$5,759.43
325	Kidney & urinary tract signs & symptoms age > 17 w cc	0.6769	\$3,352.40	\$2,269.16	\$2,527.05	18	\$9,779.76
326	Kidney & urinary tract signs & symptoms age > 17 w/o cc	0.4484	\$3,352.40	\$1,503.14	\$1,673.99	11	\$5,922.63
327	Kidney & urinary tract signs & symptoms age 0 - 17	0.5339	\$3,352.40	\$1,789.93	\$1,993.08	9	\$8,436.42
328	Urethral stricture age > 17 w cc	0.8586	\$3,352.40	\$2,878.44	\$3,205.35	25	\$18,732.47
329	Urethral stricture age > 17 w/o cc	0.4194	\$3,352.40	\$1,406.07	\$1,565.70	8	\$5,432.69
330	Urethral stricture age 0 - 17	0.6947	\$3,352.40	\$2,328.83	\$2,593.52	16	\$13,372.03
331	Other kidney & urinary tract diagnoses age > 17 w cc	1.0057	\$3,352.40	\$3,371.44	\$3,754.45	25	\$15,384.83
332	Other kidney & urinary tract diagnoses age > 17 w/o cc	0.6893	\$3,352.40	\$2,310.81	\$2,573.29	14	\$9,970.50
333	Other kidney & urinary tract diagnoses age 0 - 17	0.5335	\$3,352.40	\$1,788.57	\$1,991.72	8	\$7,668.87
334	Major male pelvic procedures w cc	2.4285	\$3,352.40	\$8,141.30	\$9,066.10	29	\$23,115.75
335	Major male pelvic procedures w/o cc	2.1524	\$3,352.40	\$7,215.65	\$8,035.39	17	\$17,292.57
336	Transurethral prostatectomy w cc	1.1097	\$3,352.40	\$3,720.11	\$4,142.73	16	\$10,405.53
337	Transurethral prostatectomy w/o cc	0.9852	\$3,352.40	\$3,302.76	\$3,677.95	11	\$8,245.85
338	Testes procedures for malignancy	0.6971	\$3,352.40	\$2,336.99	\$2,602.36	12	\$7,538.65
339	Testes procedures for non-malignancy, age > 17	0.5507	\$3,352.40	\$1,846.20	\$2,055.81	8	\$5,791.56
340	Testes procedures for non-malignancy, age 0 - 17	0.7560	\$3,352.40	\$2,534.36	\$2,822.34	8	\$8,331.36
341	Penis procedures	1.2276	\$3,352.40	\$4,115.36	\$4,582.86	18	\$12,854.04
342	Circumcision, age > 17	0.4916	\$3,352.40	\$1,647.98	\$1,835.32	10	\$6,723.67
343	Circumcision, age 0 - 17	0.3847	\$3,352.40	\$1,289.62	\$1,436.16	7	\$4,925.41
344	Other male reproductive system o.r. procedures for malignancy	1.3159	\$3,352.40	\$4,411.50	\$4,912.49	16	\$12,181.69
345	Other male reproductive system o.r. procedures except for malignancy	0.6872	\$3,352.40	\$2,303.84	\$2,565.47	11	\$9,265.00
346	Malignancy, male reproductive system w cc	1.0825	\$3,352.40	\$3,628.99	\$4,041.24	30	\$14,663.52
347	Malignancy, male reproductive system w/o cc	0.8651	\$3,352.40	\$2,900.20	\$3,229.66	20	\$13,646.24
348	Benign prosthetic hypertrophy w cc	0.4825	\$3,352.40	\$1,617.55	\$1,801.32	14	\$6,637.65
349	Benign prosthetic hypertrophy w/o cc	0.4100	\$3,352.40	\$1,374.45	\$1,530.68	11	\$6,388.60
350	Inflammation of the male reproductive system	0.3929	\$3,352.40	\$1,317.16	\$1,466.76	8	\$4,612.27
351	Sterilization, male	0.3430	\$3,352.40	\$1,149.88	\$1,280.44	35	\$43,775.00
352	Other male reproductive system diagnoses	0.2978	\$3,352.40	\$998.41	\$1,111.80	7	\$3,262.13
353	Pelvic evisceration, radical hysterectomy & radical vulvectomy	2.6083	\$3,352.40	\$8,744.12	\$9,737.26	25	\$21,528.12
354	Uterine, adnexa proc for non-ovarian/adnexal malign w cc	1.2215	\$3,352.40	\$4,094.96	\$4,560.08	33	\$24,769.00
355	Uterine, adnexa proc for non-ovarian/adnexal malign w/o cc	1.6515	\$3,352.40	\$5,536.56	\$6,165.39	16	\$12,767.85
356	Female reproductive system reconstructive procedures	1.2435	\$3,352.40	\$4,168.74	\$4,642.19	15	\$9,928.85
357	Uterine & adnexa proc for ovarian or adnexal malignancy	1.8515	\$3,352.40	\$6,207.04	\$6,912.03	24	\$18,241.17
358	Uterine & adnexa proc for ovarian or adnexal non-malignancy w cc	1.6545	\$3,352.40	\$5,546.59	\$6,176.61	19	\$13,380.87
359	Uterine & adnexa proc for ovarian or adnexal non-malignancy w/o cc	1.2250	\$3,352.40	\$4,106.69	\$4,573.17	16	\$11,213.54
360	Vagina, cervix & vulva procedures	0.6119	\$3,352.40	\$2,051.39	\$2,284.29	13	\$8,612.54

361	Gynaecological laparoscopy or sterilization in laparotomy	0.6660	\$3,352.40	\$2,232.78	\$2,486.25	9	\$5,975.16
362	Laparoscopic or other endoscopic sterilization	0.4211	\$3,352.40	\$1,411.68	\$1,571.99	7	\$3,495.88
363	D&C orization & radio-implant, for malignancy	0.4731	\$3,352.40	\$1,586.10	\$1,766.13	8	\$4,531.86
364	D&C orization , for non-malignancy	0.3693	\$3,352.40	\$1,238.11	\$1,378.70	8	\$3,241.39
365	Other female reproductive system o.r. procedures	1.6810	\$3,352.40	\$5,635.33	\$6,275.55	34	\$22,262.52
366	Malignancy, female reproductive system w cc	0.5043	\$3,352.40	\$1,690.65	\$1,882.58	9	\$7,958.04
367	Malignancy, female reproductive system w/o cc	0.5033	\$3,352.40	\$1,687.25	\$1,878.84	8	\$6,117.11
368	Infections, female reproductive system	0.4464	\$3,352.40	\$1,496.51	\$1,666.51	11	\$5,628.02
369	Mentrual & other female reproductive system disorders	0.2495	\$3,352.40	\$836.40	\$931.43	7	\$3,180.19
370	Caesarean section w cc	1.9364	\$3,352.40	\$6,491.62	\$7,228.91	24	\$19,058.87
371	Caesarean section w/o cc	1.3639	\$3,352.40	\$4,572.32	\$5,091.67	14	\$10,490.02
372	Vaginal delivery w complicating diagnosis	0.9143	\$3,352.40	\$3,065.10	\$3,413.26	14	\$8,656.40
373	Vaginal delivery w/o complicating diagnosis	0.6611	\$3,352.40	\$2,216.29	\$2,468.06	10	\$5,731.89
374	Vaginal delivery w sterilization &/or d&c	1.0272	\$3,352.40	\$3,443.52	\$3,834.69	23	\$15,204.29
375	Vaginal delivery w o.r. proc except steril &/or d&c	1.0720	\$3,352.40	\$3,593.80	\$4,001.97	12	\$7,825.10
376	Postpartum & post abortion diagnoses w/o o.r. procedure	0.4858	\$3,352.40	\$1,628.60	\$1,813.56	11	\$6,057.95
377	Postpartum & post abortion diagnoses w o.r. procedure	0.3407	\$3,352.40	\$1,142.23	\$1,271.94	7	\$3,885.86
378	Ectopic pregnancy	0.7985	\$3,352.40	\$2,676.82	\$2,980.95	8	\$7,239.12
379	Threatened abortion	0.3416	\$3,352.40	\$1,145.12	\$1,275.34	10	\$4,858.60
380	Abortion w/o d&c	0.2506	\$3,352.40	\$840.14	\$935.51	7	\$2,887.11
381	Abortion w d&c, aspiration curettage or hysterotomy	0.2861	\$3,352.40	\$959.14	\$1,068.11	7	\$2,859.06
382	False labor	0.1921	\$3,352.40	\$643.96	\$717.23	6	\$2,569.72
383	Other antepartum diagnoses w medical complications	0.4489	\$3,352.40	\$1,504.84	\$1,675.86	11	\$5,807.37
384	Other antepartum diagnoses w/o medical complications	0.3992	\$3,352.40	\$1,338.24	\$1,490.22	10	\$5,316.24
392	Splenectomy age > 17	2.0201	\$3,352.40	\$6,772.12	\$7,541.37	19	\$18,920.32
393	Splenectomy age 0 - 17	2.3987	\$3,352.40	\$8,041.34	\$8,954.75	23	\$29,650.04
394	Other o.r. procedures of the blood and blood forming organ	0.8279	\$3,352.40	\$2,775.42	\$3,090.77	12	\$11,014.30
395	Red blood cell disorders > 17	0.7354	\$3,352.40	\$2,465.34	\$2,745.33	22	\$10,430.01
397	Coagulation disorders	0.7103	\$3,352.40	\$2,381.19	\$2,651.66	19	\$11,099.30
398	Reticuloendothelial & immunity disorders w cc	2.7305	\$3,352.40	\$9,153.65	\$10,193.54	35	\$43,775.00
399	Reticuloendothelial & immunity disorders w/o cc	0.9125	\$3,352.40	\$3,059.15	\$3,406.63	20	\$15,247.98
400	Lymphoma & leukaemia w major o.r. procedure	2.2993	\$3,352.40	\$7,708.14	\$8,583.81	30	\$31,621.36
401	Lymphoma & non-acute leukaemia w other o.r. proc w cc	2.1751	\$3,352.40	\$7,291.81	\$8,120.05	35	\$30,329.02
402	Lymphoma & non-acute leukaemia w other o.r. proc w/o cc	1.3398	\$3,352.40	\$4,491.57	\$5,001.74	25	\$19,766.07
403	Lymphoma & non-acute leukaemia w cc	1.4082	\$3,352.40	\$4,720.90	\$5,257.08	35	\$22,953.57
404	Lymphoma & non-acute leukaemia w/o cc	0.8138	\$3,352.40	\$2,728.16	\$3,038.07	19	\$13,106.66
406	Myeloprolif disord or poorly diff neopt w major o.r. procedures and w cc	3.4293	\$3,352.40	\$11,496.42	\$12,802.19	35	\$43,775.00
407	Myeloprolif disord or poorly diff neopt w major o.r. procedures but w/o cc	3.0882	\$3,352.40	\$10,352.83	\$11,528.89	35	\$32,334.00
408	Myeloprolif disord or poorly diff neopl w other o.r. proc	1.0563	\$3,352.40	\$3,541.10	\$3,943.32	17	\$14,167.63
409	Radiotherapy	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
410	Chemotherapy w/o acute leukaemia as secondary diagnosis	0.4758	\$3,352.40	\$1,595.11	\$1,776.33	10	\$7,297.42
411	History of malignancy w/o endoscopy	0.5790	\$3,352.40	\$1,941.06	\$2,161.55	22	\$8,971.75
412	History of malignancy w endoscopy	0.3752	\$3,352.40	\$1,257.83	\$1,400.63	8	\$3,314.66
413	Other Myeloprolif die of poorly diff neopl diag w cc	0.4966	\$3,352.40	\$1,664.81	\$1,853.85	13	\$9,064.57
414	Other Myeloprolif die of poorly diff neopl diag w/o cc	0.5893	\$3,352.40	\$1,975.57	\$2,199.97	10	\$10,039.01
415	Procedure for infectious & parasitic diseases	2.0286	\$3,352.40	\$6,800.68	\$7,573.16	35	\$29,692.20
416	Septicaemia age > 17	1.1582	\$3,352.40	\$3,882.80	\$4,323.78	26	\$15,069.99
417	Septicaemia age 0 - 17	1.4287	\$3,352.40	\$4,789.58	\$5,333.58	22	\$18,386.69
418	Postoperative & post-traumatic infections	0.8321	\$3,352.40	\$2,789.53	\$3,106.41	22	\$11,632.42
419	Fever of unknown origin age > 17 w cc	0.9696	\$3,352.40	\$3,250.57	\$3,619.64	23	\$12,676.22
420	Fever of unknown origin age > 17 w/o cc	0.7055	\$3,352.40	\$2,365.04	\$2,633.81	18	\$10,081.17

421	viral illness, age > 17	0.4492	\$3,352.40	\$1,505.86	\$1,676.88	12	\$6,222.00
422	Viral illness & fever of unknown origin age 0 - 17	0.3868	\$3,352.40	\$1,296.76	\$1,443.98	8	\$5,096.26
423	Other infectious & parasitic diseases diagnoses	0.8920	\$3,352.40	\$2,990.30	\$3,329.96	24	\$13,413.00
424	O.R. procedure w principal diagnoses of mental illness	0.8125	\$3,352.40	\$2,723.91	\$3,033.31	16	\$13,272.58
425	Acute adjust react & disturbances of psychosocial dysfunction	0.5451	\$3,352.40	\$1,827.33	\$2,034.90	18	\$8,888.62
426	Depressive neuroses	0.5314	\$3,352.40	\$1,781.43	\$1,983.90	21	\$8,778.46
427	Neuroses except depressive	0.2557	\$3,352.40	\$857.14	\$954.55	8	\$3,911.70
428	Disorders of personality & impulse control	0.9033	\$3,352.40	\$3,028.21	\$3,372.12	24	\$19,677.67
429	Organic disturbances & mental retardation	0.7879	\$3,352.40	\$2,641.29	\$2,941.34	27	\$11,811.60
430	Psychoses	0.8175	\$3,352.40	\$2,740.57	\$3,051.84	24	\$12,737.76
431	Childhood mental disorders	0.4986	\$3,352.40	\$1,671.44	\$1,861.33	7	\$7,950.56
432	Other mental disorder diagnoses	0.1877	\$3,352.40	\$629.17	\$700.74	7	\$2,301.46
439	Skin grafts for injuries	1.7349	\$3,352.40	\$5,816.04	\$6,476.66	35	\$26,058.79
440	Wound debriments for injuries	1.7166	\$3,352.40	\$5,754.67	\$6,408.49	35	\$39,483.86
441	Hand procedures for injuries	0.7540	\$3,352.40	\$2,527.73	\$2,814.86	9	\$10,989.48
442	Other o.r. procedures for injuries w cc	2.0097	\$3,352.40	\$6,737.27	\$7,502.61	35	\$36,401.25
443	Other o.r. procedures for injuries w/o cc	1.3426	\$3,352.40	\$4,500.92	\$5,012.11	21	\$18,684.19
444	Traumatic injury, age > 17 w cc	0.8780	\$3,352.40	\$2,943.38	\$3,277.77	32	\$15,313.77
445	Traumatic injury, age > 17 w/o cc	0.4218	\$3,352.40	\$1,414.06	\$1,574.71	9	\$6,134.96
446	Traumatic injury, age 0 - 17	0.3433	\$3,352.40	\$1,150.90	\$1,281.63	7	\$4,115.19
447	Allergic reactions, age > 17	0.2119	\$3,352.40	\$710.43	\$791.01	7	\$2,599.30
448	Allergic reactions, age 0 - 17	0.2219	\$3,352.40	\$743.92	\$828.41	7	\$2,740.06
449	Poisoning & toxic effects of drugs, age > 17 w cc	0.6322	\$3,352.40	\$2,119.39	\$2,360.11	21	\$10,125.71
450	Poisoning & toxic effects of drugs, age > 17 w/o cc	0.2697	\$3,352.40	\$904.06	\$1,006.91	7	\$3,830.44
451	Poisoning & toxic effects of drugs, age 0 - 17	0.2671	\$3,352.40	\$895.39	\$997.22	7	\$2,884.22
452	Complications of treatment w cc	1.0768	\$3,352.40	\$3,609.78	\$4,019.99	19	\$16,900.89
453	Complications of treatment w/o cc	0.4066	\$3,352.40	\$1,363.06	\$1,517.93	10	\$5,678.51
454	Other injury, poisoning & toxic effect diag w cc	0.7390	\$3,352.40	\$2,477.41	\$2,758.76	19	\$11,829.11
455	Other injury, poisoning & toxic effect diag w/o cc	0.3095	\$3,352.40	\$1,037.51	\$1,155.49	7	\$4,336.02
456	Burns transfer to another acute care facility, duration of care< than 6 days	3.6606	\$3,352.40	\$12,271.79	\$13,665.79	35	\$52,827.67
457	Extensive burns w/o o.r. procedure	0.5008	\$3,352.40	\$1,678.92	\$1,869.66	35	\$43,775.00
458	Non-extensive burns w skin grafts	3.0305	\$3,352.40	\$10,159.37	\$11,313.50	35	\$43,775.00
459	Non-extensive burns w wound debridement or other o.r. proc	1.5466	\$3,352.40	\$5,184.83	\$5,773.71	35	\$25,555.08
460	Non-extensive burns w/o o.r. procedure	0.7736	\$3,352.40	\$2,593.35	\$2,887.96	23	\$14,185.14
461	O.R. proc w diagnoses of other contact w health services	0.9572	\$3,352.40	\$3,208.92	\$3,573.40	15	\$12,238.81
462	Rehabilitation	1.1214	\$3,352.40	\$3,759.38	\$4,186.42	35	\$21,517.75
463	Signs & symptoms w cc	0.7974	\$3,352.40	\$2,673.25	\$2,976.87	25	\$11,515.63
464	Signs & symptoms w/o cc	0.4371	\$3,352.40	\$1,465.40	\$1,631.83	12	\$6,413.25
465	Aftercare w history of malignancy as secondary diagnosis	0.9740	\$3,352.40	\$3,265.19	\$3,636.13	35	\$43,775.00
466	Aftercare w/o history of malignancy as secondary diagnosis	0.3341	\$3,352.40	\$1,119.96	\$1,247.29	8	\$5,975.67
467	Other factors influencing health status	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
468	Extensive o.r. procedure unrelated to principal diagnosis	1.7002	\$3,352.40	\$5,699.76	\$6,347.12	28	\$27,901.76
469	Unspecified or invalid discharge information	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
470	Ungroupable	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
471	Bilateral or multiple major joint procs of lower extremity	4.6628	\$3,352.40	\$15,631.50	\$17,407.15	35	\$41,442.60
472	Extensive burns w o.r. procedure	1.7526	\$3,352.40	\$5,875.37	\$6,542.79	35	\$51,676.43
475		2.8027	\$3,352.40	\$9,395.73	\$10,462.99	35	\$42,712.16
476		0.9712	\$3,352.40	\$3,255.84	\$3,625.76	18	\$13,226.00
477	Non-extensive o.r. procedure unrelated to principal diagnosis	0.7240	\$3,352.40	\$2,427.09	\$2,702.83	13	\$11,581.42
478	Other vascular procedures w cc	2.2795	\$3,352.40	\$7,641.84	\$8,509.86	24	\$33,471.30
479	Other vascular procedures w/o cc	2.2942	\$3,352.40	\$7,691.14	\$8,564.77	12	\$29,972.70

480	Liver transplant	21.2642	\$3,352.40	\$71,286.10	\$79,383.54	35	\$109,875.25
482	Tracheostomy for face, mouth & neck diagnoses	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
483	Tracheostomy except for face, mouth & neck diagnoses	0.0000	\$3,352.40	\$0.00	\$0.00		\$0.00
491	Major joint & limb reattachment procedures of upper extremities	2.1148	\$3,352.40	\$7,089.68	\$7,894.97	20	\$18,667.70
493	Laparoscopic Cholecystectomy w/o o.d.e. w cc	1.7830	\$3,352.40	\$5,977.37	\$6,656.35	29	\$18,882.24
494	Laparoscopic Cholecystectomy w/o o.d.e. w/o cc	1.0640	\$3,352.40	\$3,566.94	\$3,972.05	9	\$8,646.03

mutual dialogue. The DRG package as a whole is negotiated yearly between representatives of purchasers and providers.

A New Price Mechanism

In 1990, the Social Democratic majority on Stockholm's Greater Council introduced the Diagnosis Related Group (DRG) system literally overnight. Inspired by U.S. use of the system, DRGs are tools for the distribution of funds that set price tags for many contracted services. They measure the resources necessary for a wide number of treatments and are made up of two parts, the predicted cost of a treatment and a weight given the estimated resource consumption for the treatment by public authorities.

This compensation system replaced the allocation of resources by means of central or global budgets. Hospitals were now paid according to what they really delivered, not according to what they supposed to produce. More than 10,000 treatments were packed into close to 500 "products" defined by the DRG price list, and prices were gradually reduced to reflect an appropriate level of compensation under increased conditions of efficiency and productivity. The entire list is contained in a

rather large but comprehensive appendix to this newsletter.

A Change of Mentality

This reform had at least two important outcomes. The mentality of hospital managers changed dramatically. And so did productivity figures. In the first year of the new reimbursement system, the **average productivity in Stockholm hospitals grew by 19 percent**, and some hospitals improved by as much as **30 percent**. By providing a new way of planning and paying for additional care, the DRG system broke up traditional bureaucratic behaviours. When combined with a market environment, with a greater number of dispersed providers, it encouraged all providers to seek and adopt better, more efficient practices.

The DRG prices listed below have been converted into Canadian currency using an exchange rate of 1 Swedish Kronor = \$.17 Canadian dollars. The standard price per DRG point is currently \$3,352.40. Here are some typical DRG price designations for a range of treatments, in Canadian dollars (definitions on next page):

SAMPLE PRICING OF SWEDISH HEALTHCARE TREATMENTS

DIAGNOSIS DESCRIPTION	TREATMENT WEIGHTING	PRICE WITHIN THE REGION (column 2 times 1 DRG point)	PRICE OUTSIDE THE REGION	HOSPITAL STAY LIMIT IN DAYS	VARIANCE LIMIT FOR EXTREME CASES
Spinal disorders & injuries	0.8409	\$2,819.11	\$3,139.22	25	\$14,460.54
Retinal procedures	1.1435	\$3,833.50	\$4,268.87	12	\$11,447.63
Ear, nose & throat malignancy	1.1062	\$3,708.38	\$4,129.64	24	\$18,549.38
Pulmonary embolism	1.2739	\$4,270.57	\$4,755.75	25	\$14,302.44
Coronary bypass with Catheter	6.6767	\$22,383.05	\$25,265.40	35	\$43,775.00
Hypertension	0.4723	\$1,583.38	\$1,763.24	13	\$6,016.13
Hernia, age 0-17	0.5501	\$1,844.16	\$2,053.60	7	\$5,664.06
Fractures of femur	1.3764	\$4,614.31	\$5,138.42	35	\$22,981.45
Skin ulcers	1.3934	\$4,671.26	\$5,201.83	35	\$21,978.96
Kidney transplant	9.0839	\$30,452.95	\$33,911.94	35	\$48,064.95
Female reproductive infections	0.4464	\$1,496.51	\$1,666.51	11	\$5,628.02
Rehabilitation	1.1214	\$3,759.38	\$4,186.42	35	\$21,517.75
Allergic reactions, over 17	0.2119	\$710.43	\$791.01	7	\$2,599.30
Skin grafts for injuries	1.7349	\$5,816.04	\$6,476.66	35	\$26,058.79

Defining the columns

Diagnosis Description is a stable, nationally negotiated definition but with openings for the introduction of new treatment techniques.

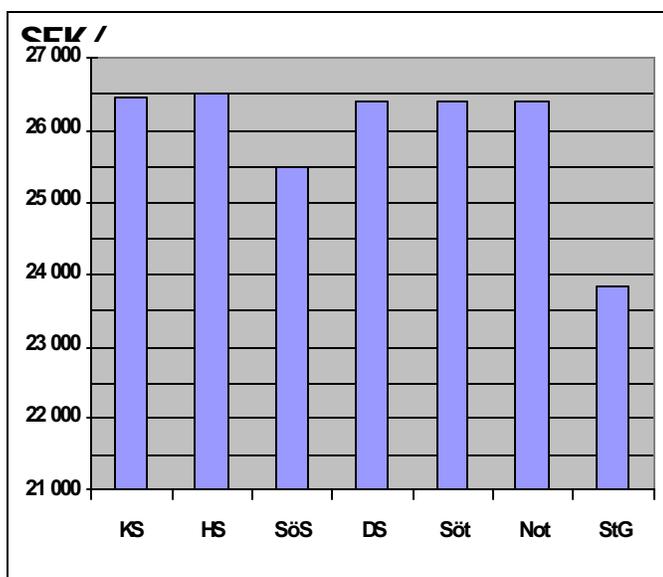
Treatment Weighting describes what resources each diagnosis requires. Here the guide is not absolute truth, as everybody understands that the average treatment consists of some cases needing more resources compensated by others requiring fewer. The assumption that these variations in the long run cancel each other out generally proves to be quite correct. But an efficient DRG system must be constantly fine-tuned and its outcomes assessed by independent system accountants; there will never be a constant, perfect system.

Price Within the Region (the weight times the DRG price per treatment) indicates the reimbursement to the providers within the health care region. There are six regions, a form of administrative co-operation between county councils.

Price Outside the Region shows the compensation when you treat a patient from another part of the country. The higher reimbursement level is motivated not only by higher expected costs for preparation and examination, but is also an incentive for providers to accommodate out-of-region patients otherwise looked upon as unwelcome consumers of resources. The new national freedom of choice in Sweden -- treatment regardless of where you live -- depends on this kind of "compensation premium".

Hospital Stay Limit in Days is the maximum number of days the hospitals will be reimbursed by the DRG system for patient care. Otherwise, there are few such detailed regulations, whose strongly decentralized health-care system relies on local, professional decision-making. Compared to international standards, the average hospital stay in Sweden is quite short.

Variance Limit for Extreme Cases shows that extra reimbursement can be expected for extremely complicated cases. There are regular assessments in every region which monitor the inevitable tendency to describe cases as more complicated and costly than before. The risk of "DRG inflation" exists, but it is not regarded a major problem and is handled by annual negotiations between stakeholders. Of course, some treatments require fewer resources than the standard, and such nuances are included in the annual evaluations.



Swedish Kronor per DRG Point – varies across hospitals, lowest on chart is St. Goran’s Hospital privatized in 1994. (Source KPMG 2002)

What does the DRG system mean in practice?

As always, laboratory models that look as clear as fresh water can become more obscure when adapted for daily use. Ideally, a DRG system would provide a cost control perspective, as well as a means to benchmark the competitiveness of every provider. Instead, the Swedish strategy for applying DRGs puts

different price tags that reflect the true costs for every hospital. Why?

As illustrated by the adjacent chart cost levels between Stockholm’s acute and emergency hospitals differ markedly. As a consequence, they all have individual DRG price levels, with the privately owned St. Göran’s hospital at the bottom and the publicly owned Huddinge University Hospital at the top. The price is designed to reflect not only degrees of efficiency but also different structural costs for facilities that undertake different tasks like teaching, research and development and specialized medicine.

At one point a couple of years ago, attempts were made to give all the hospitals equal reimbursement per treatment but this goal – stressing competition on equal terms – resulted in big deficits for a number of hospitals. In response, purchasers in Swedish county councils decided to accept paying some hospitals a little more and some a little less than the national standard. The Swedish DRG system is built around common principles and definitions but with local implementation regarding prices and methods. In tune with the decentralized Swedish culture, it allows local bargaining but makes national comparisons difficult. The DRGs therefore offer little help in trying to rank the most or least efficient hospitals.

Some hospitals gain from the DRG-system. The simple explanation for this is that they do a more thorough job registering the correct diagnosis. The more accurate the statistics, the more likely will be full compensation, as it is much more common to underestimate the resources used for a specific treatment than to overestimate. Generally "cream-skimming" is regarded as a minor problem in the Swedish system, because private providers must follow the same DRG rules as public ones.

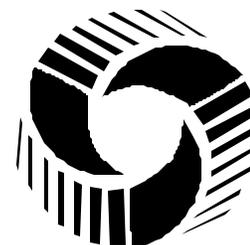
DRG-type strategies are not the last step in the development chain. But in the transition from resource consumption (expressed by number global budgeting) to a performance-based

system, DRGs are necessary. They dramatically improve awareness among providers, who alter their behaviour.

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