

Regional Perinatal Intensive Care Center (RPICC) Neonatal Services Fee Schedule

Effective 01/01/2017

Code	Mod 1	Mod 2	ICD9 Diag1	ICD9 Diag2	ICD10 Diag1	ICD10 Diag2	Neonatal Care Group Description	Base Fee	LOS	Outlier #1	Per Day	Outlier #2	Per Day
99499	TG		779.9		O99.89		Died 0 To 5 Days	1,445.00					
99499	TG		779.9		O99.89		Died 6 To 10 Days	3,407.00					
99499	TG		779.9		O99.89		Died 11 To 15 Days	5,721.00					
99499	TG		779.9		O99.89		Died 16 Plus Days	16,072.00	96	97	106.00	193	54.00
99499	TG		765.01		P07.01		Extreme Prematurity <750 G	24,366.00	124	125	116.00	249	58.00
99499	TG		765.02		P07.02								
99499	TG		765.03		P07.03		Prem. 750-999 W/Out Ventilation	11,187.00	74	75	104.00	149	54.00
99499	TG		765.03	770.84	P07.03	P285	Prem. 750-999 W/ Ventilation	16,683.00	93	94	114.00	187	57.00
99499	TG		765.14	770.84	P07.14	P285	Prem. 1000-1499 W/ Ventilation	7,265.00	55	56	104.00	111	54.00
99499	TG		765.15	770.84	P07.15	P285							
99499	TG		765.14		P07.14		Prem. 1000-1499 W/Out Ventilation	4,275.00	48	49	76.00	97	54.00
99499	TG		765.15		P07.15								
99499	TG		765.16	770.84	P07.16	P285	Prem. 1500-2499 W/ Ventilation	3,729.00	37	38	109.00	75	55.00
99499	TG		765.17	770.84	P07.17	P285							
99499	TG		765.18	770.84	P07.18	P285							
99499	TG		765.16		P07.16		Prem. 1500-2499 W/Out Ventilation	2,024.00	31	32	91.00	63	54.00
99499	TG		765.17		P07.17								
99499	TG		765.18		P07.18								
99499	TG		765.29	770.84	P84	P285	Full Term >2500 G With Ventilation	3,214.00	32	33	134.00	65	66.00
99499	TG		765.29		P84		Full Term >2500 W/Out Ventilation	1,414.00	26	27	117.00	53	58.00

99499	TG	57				Complex Surgery >1500 G	4,596.00	51	52	74.00	103	54.00
99499	TG	SC				Extracorporeal Membrane Oxygenation	6,760.00	9				