

**Regional Perinatal Intensive Care Center (RPICC) Neonatal Services Fee Schedule
2020**

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	193	54
99499	TG		765.01		P07.01		Extreme Prematurity <750 G	24,366.00	124	125	116	249	58
99499	TG		765.02		P07.02								
99499	TG		765.03		P07.03		Prem. 750-999 W/Out Ventilation	11,187.00	74	75	104	149	54
99499	TG		765.03	770.84	P07.03	P285	Prem. 750-999 W/ Ventilation	16,683.00	93	94	114	187	57
99499	TG		765.14	770.84	P07.14	P285	Prem. 1000-1499 W/ Ventilation	7,265.00	55	56	104	111	54
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	97	54
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	75	55
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	63	54
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	65	66
99499	TG		765.29		P84		Full Term >2500 W/Out Ventilation	1,414.00	26	27	117	53	58
99499	TG	57					Complex Surgery >1500 G	4,596.00	51	52	74	103	54
99499	TG	SC					Extracorporeal Membrane Oxygenation	6,760.00	9				