Dear patients,

This fees schedule provides you with an overview of the various modes and methods of payment for general and optional medical services of University Hospital Aachen.

With the introduction of a fixed fee system in Germany, the general medical services of University Hospital Aachen are predominately settled by means of diagnosis-related groups (DRGs). To all full- and semi-inpatient fees, there will also be a daily care fee on the personnel costs of staff directly responsible for patient care. Furthermore, there are additional fees, lump sums and other surcharges that may affect remuneration depending on the individual method and duration of treatment.

The total of costs resulting from received general and optional hospital services may represent a considerable financial burden. This particularly applies to self-pay patients. Please verify whether or not you are fully covered by insurance for hospital treatment.

If you have any additional queries on details, our staff of the inpatient receptions and the inpatient accountancy will be glad to help you. Moreover, this gives you the opportunity to access the individual legal regulations, agreements and payment policies.

Diagnosis-related groups (DRGs)

Pursuant to § 17 b KHG

The fees for general inpatient and day-patient services of University Hospital Aachen are based on the legal framework of the Hospital Financing Act (Krankenhausfinanzierungsgesetz, KHG) and the Hospital Remuneration Act (Krankenhausentgeltgesetz, KHEntgG), as amended. In accordance, all general medical services are remunerated by means of diagnosis-related groups. In conformance with the DRG system, payable remuneration is subject to the individual circumstances of the case of treatment.

Allocation to a DRG is made via several parameters. In this regard, the main diagnosis and possibly necessary procedures (surgery, complicated diagnostic or therapeutic services) are the most important criteria. Furthermore, present side diagnoses may influence the classification of severity, and factors such as age and way of discharge (e.g. transfer to another hospital) may affect the allocation to a DRG. For this reason, it is difficult to predict which DRG will ultimately be selected for remuneration with respect to your case history. Therefore, the diagnosis at the end of your inpatient stay and the specific diagnostic and therapeutic services that were performed in the course of the treatment period are decisive.

Each DRG is classified according to a corresponding specific weight, which may vary annually within system maintenance. A base rate expressed in euro is allocated to this relative weight. The current national base rate amounts to 3,738.55 € and is also subject to annual change. Provided that the DRG-specific length of stay is complied with, the fee for a case of treatment results from the multiplication of relative weight and base rate.

Diagnosis-related group inpatient

Please see attachment A to find the detailed DRG fees schedule for inpatient services containing specifications on fees as well as on additions and deductions in conformance with the DRG-specific medium, minimum and maximum length of stay limits.

The additions and deductions mandated pursuant to § 1 and 3 of DRG Agreement 2021 (FPV 2021) are made when the lengths of stay fall below or above the defined duration. If the length of stay of non-transferred patients is shorter than the specified minimum length of stay (column 7), a daily deduction (column 9) for the day stated in the DRG fees schedule and each additional day of hospitalisation that was not taken is made. If the maximum length of stay (column 10) is exceeded, an additional day-based fee (column 12) is charged for the day stated in the DRG fees schedule and for each additional day of hospitalisation. In the event of a transfer to or from another hospital, a day-based deduction (column 14) is made, provided that the actual length of stay is shorter than the medium length of stay (column 5) stated in the DRG fees schedule. The individual additions and deductions result from multiplying the evaluation relations defined for the corresponding lengths of stay with the base rate.

Furthermore, DRG case-based lump sums individually agreed by hospitals may arise. Please see attachment B for these DRGs.
Fees schedule for University Hospital Aachen

As of 01/07/2021

Daily charges pursuant to § 6 section 1 KHEntgG will apply on general hospital services, that cannot be represented in DRG lump sums or additional charges, as well as on special institutions in accordance with § 17b section 1 KHG. These fees can be found in attachment B.

Semi-inpatient dialysis services will be remunerated on the basis of DRG fees. The billing is processed quarterly. These fees can be found in attachment C.

Care Fees
Pursuant to § 8 FPV

Daily care fees will be charged in addition to full- and semi-inpatient fees in accordance with § 7 section 1 No. 6a KHEntgG. The care fee is determined by multiplying the relevant daily value relation for care fees with the daily remuneration value. As of 01.01.2021, a remuneration value of 163,09 € is to be taken into account.

Additional fee
Pursuant to § 5 FPV

Pursuant to § 17b section 1 clause 12 KHG, the self-administration partners at the federal level (compulsory health insurance [GKV] – umbrella organisations, Private Health Insurance Association [PKV] and the German Hospital Federation [DKG]) are entitled to agree upon additional fees for services, service complexes or pharmaceuticals.

Attachments 2 and 5 of FPV 2020 specify federally uniform additional fees for the year 2020. See attachment D for federally uniform additional fees.

Furthermore, additional fees in combination with amounts payable may be individually agreed upon by hospitals and health insurance companies pursuant to § 6 section 1 and 2 KHEntgG as well as attachments 4 and 6 of FPV 2020. See attachment E for the hospital-specific additional fees of University Hospital Aachen.

For certain additional fees, the legislature has given from 01.01.2021 additional encryption of ICD codes. The relevant fees and associated ICD codes can be found in the attachment E ICD.

Additional fees for new examination and treatment methods
Pursuant to § 6 section 2 KHEntgG

Pursuant to § 6 section 2 KHEntgG, separate additional fees, which are likewise agreed upon by hospitals and health insurance companies, are also charged for particular new examination and treatment methods (NUB) that may not be properly remunerated by DRG case-based lump sums and additional fees. See attachment F for the hospital-specific additional fees for special examination and treatment methods of University Hospital Aachen.

Pre-inpatient and post-inpatient treatments
Pursuant to § 115a SGB V

<table>
<thead>
<tr>
<th>Department</th>
<th>Pre-inpatient lump sum</th>
<th>Post-inpatient lump sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Anaesthesiology</td>
<td>104.30 €</td>
<td>36.81 €</td>
</tr>
<tr>
<td>Department of Ophthalmology</td>
<td>68.51 €</td>
<td>38.86 €</td>
</tr>
<tr>
<td>Department of Surgery</td>
<td>100.72 €</td>
<td>17.90 €</td>
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<tr>
<td>Department of Orthopaedics and Trauma Surgery</td>
<td>82.32 €</td>
<td>21.47 €</td>
</tr>
<tr>
<td>Department of Gynaecology and Obstetrics</td>
<td>119.13 €</td>
<td>22.50 €</td>
</tr>
<tr>
<td>Department of Gynaecological Endocrinology and Reproductive Medicine</td>
<td>119.13 €</td>
<td>22.50 €</td>
</tr>
<tr>
<td>Department of Otorhinolaryngology and Plastic Head and Neck Surgery</td>
<td>78.74 €</td>
<td>37.84 €</td>
</tr>
<tr>
<td>Department of Dermatology</td>
<td>75.67 €</td>
<td>23.01 €</td>
</tr>
<tr>
<td>Department of Internal Medicine I, Focus on cardiology, angiology and pneumology</td>
<td>156.97 €</td>
<td>61.36 €</td>
</tr>
<tr>
<td>Department of Internal Medicine II, Focus on nephrology and clinical immunology</td>
<td>140.61 €</td>
<td>67.49 €</td>
</tr>
</tbody>
</table>

As of 01/07/2021 (V21.5)
Fees schedule for University Hospital Aachen

As of 01/07/2021

<table>
<thead>
<tr>
<th>Department</th>
<th>Focus</th>
<th>Pre-2021</th>
<th>Post-2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Medicine, focus on gastroenterology and metabolic diseases</td>
<td>164.64 €</td>
<td>63.91 €</td>
<td></td>
</tr>
<tr>
<td>Internal Medicine, focus on hematology and oncology</td>
<td>75.67 €</td>
<td>46.02 €</td>
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<tr>
<td>Internal Medicine, focus on pneumology</td>
<td>219.34 €</td>
<td>66.47 €</td>
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<tr>
<td>Internal Medicine, focus on geriatrics</td>
<td>72.09 €</td>
<td>30.68 €</td>
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<tr>
<td>Paediatric and Adolescent Medicine</td>
<td>94.08 €</td>
<td>37.84 €</td>
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</tr>
<tr>
<td>Paediatric Cardiology</td>
<td>111.46 €</td>
<td>27.10 €</td>
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<tr>
<td>Neurosurgery</td>
<td>48.57 €</td>
<td>21.99 €</td>
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<tr>
<td>Neurology</td>
<td>114.02 €</td>
<td>40.90 €</td>
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<tr>
<td>Nuclear Medicine</td>
<td>162.08 €</td>
<td>123.22 €</td>
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<tr>
<td>Orthopaedics and Trauma Surgery, focus on orthopaedics</td>
<td>133.96 €</td>
<td>20.96 €</td>
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<tr>
<td>Psychiatry and Psychotherapy</td>
<td>125.78 €</td>
<td>37.84 €</td>
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<tr>
<td>Child and Adolescent Psychiatry and Psychotherapy</td>
<td>50.11 €</td>
<td>20.45 €</td>
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<tr>
<td>Psychosomatic and Psychotherapeutic Medicine</td>
<td>99.19 €</td>
<td>47.55 €</td>
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<tr>
<td>Radiotherapy</td>
<td>186.62 €</td>
<td>330.29 €</td>
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<tr>
<td>Cardiac Surgery</td>
<td>126.29 €</td>
<td>23.01 €</td>
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<tr>
<td>Thoracic Surgery</td>
<td>121.18 €</td>
<td>45.50 €</td>
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<tr>
<td>Urology</td>
<td>103.28 €</td>
<td>41.93 €</td>
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<tr>
<td>Plastic, Hand and Burn surgery</td>
<td>95.10 €</td>
<td>18.41 €</td>
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</tr>
<tr>
<td>Operative Dentistry and Plastic Facial Surgery</td>
<td>64.42 €</td>
<td>23.52 €</td>
<td></td>
</tr>
</tbody>
</table>

Pursuant to § 8 section 2 no. 4 KHEntgG, pre-inpatient treatment may not be charged separately in addition to a DRG. Post-inpatient treatment may be charged in addition to a DRG, provided that the sum of inpatient hospitalisation days and pre-inpatient and post-inpatient days of treatment exceeds the length of stay limit of the DRG. Utilisation of medical device services (CT, MRI, PET and left heart catheter) during pre-inpatient or post-inpatient treatment is charged separately.

Additions

**Addition for the Federal Joint Committee (IQWIG)**

Pursuant to § 91 section 2 and § 139 c SGB V

additional amount of € 1,89 for each inpatient or day-patient case of treatment

**Addition for the DRG-system**

Pursuant to § 17 b section 5 KHG

additional amount of € 1,66 per inpatient and day-patient hospital case

**Addition for training facilities and trainee allowances**

Pursuant to § 17a section 1 KHG

addition per inpatient and day-patient case amount of € 193,10

**Addition for training in nursing**

Pursuant to § 33 section 3 PIIBG

addition per inpatient and day-patient case amount of € 109,73

**Addition for quality control**

Pursuant to § 17b section 1 KHG and § 137 SGB V

additional amount of € 1,15 on DRG
Fees schedule for University Hospital Aachen

As of 01/07/2021

Addition for the participation in the interinstitutional error reporting system
Pursuant to §17b section 1a Nr. 4 KHG
surcharge amount of € 0,20 for every inpatient

Surcharge of extra expenses of the Federal Joint Committee instruction
Pursuant to § 9 section 1 a KHEntgG, § 92 Section 1 and § 136 section 1 SGB V
additional amount of 0,01 % per inpatient case or day-patient case

Addition for Area of hospital sanitation
Pursuant to § 4 section 9 KHEntgG
additional amount of 0,12 % per inpatient case

Surcharge on revenue equalisation
Pursuant to § 5 section 4 KHEntgG
additional amount of 1,25 % per inpatient and day-patient case

Surcharge for emergency care
Pursuant to § 5 section 1 KHEntgG
additional amount of € 15,81 per inpatient case

Surcharge to the reimbursement of the higher expenditures of the hospitals with the material procurement
Pursuant to § 5 section 3i KHEengG
addition per inpatient and day-patient case amount of € 20,00
addition per Covid-patient € 40,00

Accompanying persons
Pursuant to § 17b section 1 clause 4 KHG
A federally uniform surcharge is made for the medically necessary accommodation of an accompanying person of a patient. The medical necessity is determined by the clinician. A fee of € 45,00 is charged for each day of hospitalisation and accommodation without the accompanying person’s day of discharge.

Additional expenses international patients
For each inpatient admission of a patient, who is no resident of the European Union, a fix amount of € 370,00 is charged.

Extra payment
Pursuant to § 39 section 4 SGB V
Insured persons eighteen years of age or older are required to make an extra daily payment for a maximum period of 28 days, beginning with inpatient treatment during a given calendar year. Extra payment currently amounts to € 10,00 per calendar day. This amount is charged by University Hospital Aachen to be forwarded to the corresponding health insurance company.

The obligation to make extra payments does not apply:
- If a valid exemption certificate is presented to the corresponding health insurance company.
- To mothers until 6 days postpartum.
Optional services

Optional services received in addition to general hospital services are charged separately (§ 17 KHEntgG):

- Accommodation in a single room per night: €151.00
- Accommodation in a comfort twin room: €75.00

The standard service for an inpatient stay at University Hospital Aachen is accommodation in a double room.

Board and lodging of an accompanying person, whose accommodation is not medically necessary (inclusive VAT 19% or 7%):
- Room Rate international: €195.00
- Board and lodging: €50.19

Supply of a high-quality multimedia terminal with the services:
- TV: €0.50
- Telephone provision charge per day and TV: €1.00
- Telephone flatrate and TV per day: €2.00
- Telephone flatrate, TV, Internet or WLAN flatrate per day (only available in covert rooms): €4.00
- Telephone flatrate, TV, Internet and WLAN flatrate per day (only available in covert rooms): €5.00

Other combinations are possible.

When receiving optional medical services, the choice may not be limited to individual physicians of the hospital who are entitled to bill for services or private physicians of the hospital, whose services are billed on part of University Hospital Aachen (see § 17 section 3 KHEntgG). An agreement on optional medical services concerns all physicians of the hospital involved in the treatment of the patient, provided that they are entitled to separately bill their services of inpatient, day-patient as well as pre-inpatient and post-inpatient treatment pursuant to § 115a SGB V, as well as private physicians of the hospital whose services are billed on part of University Hospital Aachen, including the services of physicians and medical facilities outside the hospital that were assigned by them. Services provided by a non-medical therapist that are professionally supervised by the senior physician are also regarded as services by a physician of choice.

For remuneration of optional medical services, the regulations of the physician fee schedule (GOÄ), as amended, apply. Settlement of accounts is made by a clinician entitled to bill for services, by University Hospital Aachen, or by an assigned accounting centre.

Value-added tax (VAT)

Pursuant to value-added tax guidelines

In conformance with German value added tax guidelines, the services of a hospital are only tax-free, if they promote health care by diagnosing and treating diseases and disorders. When other services are rendered (e.g. aesthetic surgery or accommodation of accompanying persons not requiring medical treatment) a value added tax of 19% is imposed. In case of board and lodging of an accompanying person, whose accommodation is not medically necessary, the VAT for board is 7% and for lodging 19%.