## Medi-Cal DRG 3M Grouper Settings for CA State Fiscal Year 2022-23 (4/1/2023)

This document provides the setup parameters for the 3M Health Information System (3M™) All Patient Refined Diagnosis Related Group (APR-DRG) Core Grouping Software (CGS) desktop grouper for CA State Fiscal Year (SFY) 2022-23 claims with admission dates beginning 7/1/22 through 6/30/23. The required settings shown in this document correspond to the settings used within the California Medicaid Management Information System (CAMMIS) mainframe grouper, which pays Medi-Cal DRG claims.

#### Some important points to consider:

- Medi-Cal policy for each SFY is applied based upon the admission date of the claim. The grouper settings must be set to **Keyed by:** Admit date.
- These settings will vary based on the claims' admission and discharge dates. See Table 1 and Figures 1, 2, and 3 for full details of settings to enter.
  - Interpretation of undetermined Present of Admission (POA) indicators: The POA indicators of W and U will be treated as N by the system.
  - Hospital Acquired Conditions (HAC) version: For admissions from 7/1/22 through 9/30/22, with a discharge date before 10/1/2022, using HAC version 39.1 for California Medicaid per Table 1: Scenario A and Figure 1. For admissions from 7/1/22 through 3/31/23, with a discharge date on or after 10/1/2022, using HAC version 40.0 for California Medicaid per Table 1: Scenario B and Figure 2. For admissions from 7/1/22 through 6/30/23, with a discharge date on or after 4/1/2023, using HAC version 40.1 for California Medicaid per Table 1: Scenario C and Figure 3.
  - Birth weight and gestational age option: For all newborn claims with a birth weight below 2500 grams, the birth weight and gestational age must be entered as a diagnosis code or the system will process the claim with a default of normal birthweight.
  - Entered code mapping: For admissions from 7/1/22 through 9/30/22, with a discharge date before 10/1/2022, entered code mapping should be set to "None". For admissions from 7/1/22 through 3/31/23, with a discharge date on or after 10/1/2022, entered code mapping should be set to "ICD-10-CM/PCS version 40.0 effective 10/01/2022". For admissions from 7/1/22 through 6/30/23, with a discharge date on or after 4/1/2023, entered code mapping should be set to "ICD-10-CM/PCS version 40.1 effective 4/1/2023".
  - Mapping type: All admissions from 7/1/22 through 6/30/23 require historical mapping.

Table 1: SFY 2022-23 Medi-Cal DRG Claims Grouper Setting Scenarios

Scenario	Admit Date	Discharge Date	Grouper Version	Mapping	Mapper Version	HAC Version
А	7/1/22 to 9/30/22	Before 10/1/22	39.1	Historical	None	39.1 for California Medicaid

Scenario	Admit Date	Discharge Date	Grouper Version	Mapping	Mapper Version	HAC Version
В	7/1/22 to 3/31/23	On or after 10/1/22	39.1	Historical	40.0	40.0 for California Medicaid
С	7/1/22 to 6/30/23	On or after 4/1/23	39.1	Historical	40.1	40.1 for California Medicaid

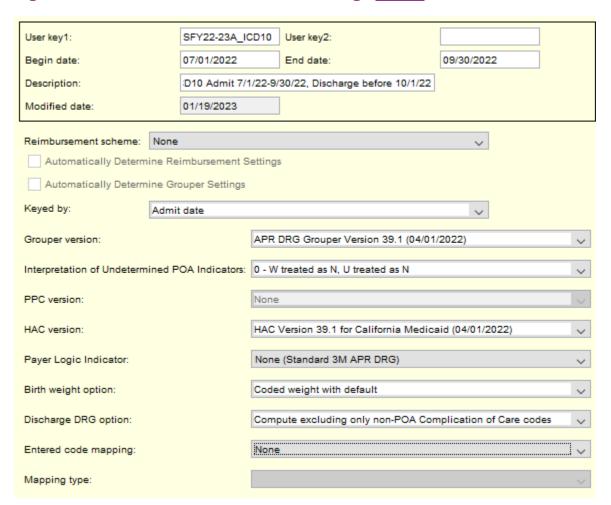
**Note:** For new or modified diagnose and procedure codes to be included in the DRG assignment, the appropriate APR-DRG Mapper must be implemented.

For grouper settings for other years of DRG payment, see the Pricing Resources webpages for each state fiscal year on the DHCS <u>Diagnosis Related Group Hospital Inpatient Payment</u> <u>Methodology</u> webpage.

#### Scenario A:

## Admission date from 7/1/22 through 9/30/22, with discharge date before 10/1/22

Figure 1: ICD10 admit 7/1/22-9/30/22, discharge <u>before</u> 10/1/22



### Scenario B:

# Admission date from 7/1/22 through 6/30/23, with discharge date on or after 10/1/22

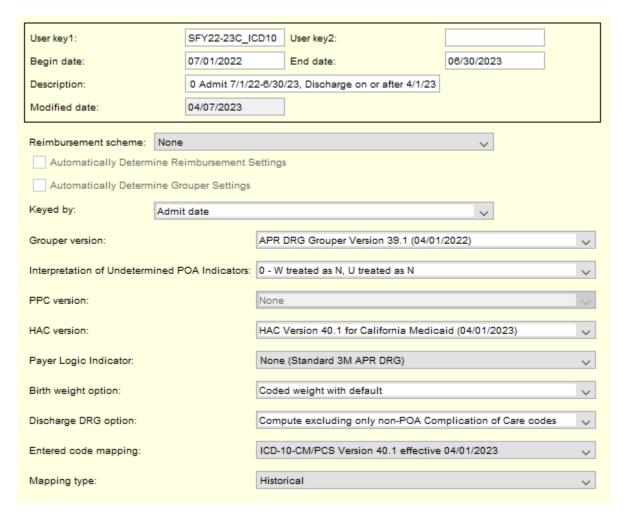
Figure 2: ICD10 admit 7/1/22-3/31/23, discharge <u>on</u> or <u>after</u> 10/1/22

User key1:		SFY22-23B_ICD10		User key2:						
Begin date:		07/01/2022		End date:		03/31/2023				
Description:		Admit 7/1/22-3/31/23, Discharge on or after 10/1/22								
Modified date:		10/12/2022								
Reimbursement scheme:	Reimbursement scheme: None									
	mine Reimbursement Settings									
Automatically Determine Grouper Settings										
Keyed by:	A 1-7 - 1 - 1									
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Grouper version:			APR DRG Grouper Version 39.1 (04/01/2022)							
Interpretation of Undetermined POA Indicators:			0 - W treated as N, U treated as N							
PPC version:			None							
HAC version:			HAC Version 40.0 for California Medicaid (10/01/2022)							
Payer Logic Indicator:			None (Standard 3M APR DRG)							
Birth weight option:			Coded weight with default							
Discharge DRG option:			Compute excluding only non-POA Complication of Care codes							
Entered code mapping:			ICD-10-CM/PCS Version 40.0 effective 10/01/2022							
Mapping type:			Historical V							

#### Scenario C:

# Admission date from 7/1/22 through 6/30/23, with discharge date on or after 4/1/23

Figure 3: ICD10 admit 7/1/22-6/30/23, discharge on or after 4/1/23



# Using CSV files to import grouper settings

A comma separated value (CSV) file containing the grouper settings for this year of DRG is available for download on the <u>Diagnosis Related Group Hospital Inpatient Payment</u>

<u>Methodology</u> webpage in the Pricing Resources section under the applicable SFY. You can use this file to import the grouper settings into the 3M<sup>™</sup> CGS Schedule Setup Module instead of manual entry. Instructions for importing the CSV file are posted in the DRG Pricing Resources under each SFY.