

Medi-Cal DRG 3M Grouper Settings for CA State Fiscal Year 2022-23 (10/1/2022)

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 Figure 1 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 6/30/23, 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.
 - **Birth weight option:** For all newborn claims with a birth weight below normal, the birth weight 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 "Automatically Determine Code Mapping". For admissions from 7/1/22 through 6/30/23, 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".
 - **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
A	7/1/22 to 9/30/22	Before 10/1/22	39.1	Historical	Automatically Determine Code Mapping	39.1 for California Medicaid
B	7/1/22 to 6/30/23	On or after 10/1/22	39.1	Historical	40.0	40.0 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 [Diagnosis Related Group Hospital Inpatient Payment Methodology](#) 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 before 10/1/22

User key1:	SFY22-23A_ICD10	User key2:	
Begin date:	07/01/2022	End date:	09/30/2022
Description:	D10 Admit 7/1/22-9/30/22, Discharge before 10/1/22		
Modified date:	05/03/2022		

Reimbursement scheme:	None
<input type="checkbox"/> Automatically Determine Reimbursement Settings	
<input type="checkbox"/> Automatically Determine Grouper Settings	
Keyed by:	Admit date
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 39.1 for California Medicaid (04/01/2022)
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:	Automatically Determine Code Mapping
Mapping type:	Historical

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 7/1/22-6/30/23, discharge on or after 10/1/22

The screenshot shows a web-based form titled "Schedule - Open" with a yellow background. The form is divided into several sections. The top section contains input fields for "User key1" (SFY22-23B_ICD10), "User key2" (empty), "Begin date" (07/01/2022), "End date" (06/30/2023), "Description" (Admit 7/1/22-6/30/23, Discharge on or after 10/1/22), and "Modified date" (10/10/2022). Below this is a "Reimbursement scheme" dropdown set to "None", with two unchecked checkboxes for "Automatically Determine Reimbursement Settings" and "Automatically Determine Grouper Settings". The "Keyed by" dropdown is set to "Admit date". The "Grouper version" dropdown is set to "APR DRG Grouper version 39.1 (04/01/2022)". The "Interpretation of Undetermined POA Indicators" dropdown is set to "0 - W treated as N, U treated as N". The "PPC version" dropdown is set to "None". The "HAC version" dropdown is set to "HAC Version 40.0 for California Medicaid (10/01/2022)". The "Payer Logic Indicator" dropdown is set to "None (Standard 3M APR DRG)". The "Birth weight option" dropdown is set to "Coded weight with default". The "Discharge DRG option" dropdown is set to "Compute excluding only non-POA Complication of Care codes". The "Entered code mapping" dropdown is set to "ICD-10-CM/PCS Version 40.0 effective 10/01/2022". The "Mapping type" dropdown is set to "Historical".

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 [Diagnosis Related Group Hospital Inpatient Payment Methodology](#) webpage in the Pricing Resources section under the applicable SFY. You can use this file to import the grouper settings into the 3M™ CGS Schedule Setup Module instead of manual entry. Instructions for importing the CSV file are posted in the DRG Pricing Resources under each SFY.