

Year 4 Medi-Cal DRG Payment Policy and Grouper Settings SFY 2016-17 (10/26/16)

The purpose of this document is to provide users with the setup for the 3M™ APR-DRG desktop grouper for state fiscal year (SFY) 2016-17 (claims with admission dates beginning 7/1/16 through 6/30/17). The recommended settings shown in this document correspond to the settings used within the California Medicaid Management System (CAMMIS) mainframe grouper, which pays Medi-Cal DRG claims.

Some important points to consider specific to SFY 2016-17 are:

- Version 34 of the Mapper utility was installed on 10/31/2016. Any claims with new or revised ICD-10 DM or PCS codes effective 10/1/16 requiring the new mapper that have had a DRG erroneously assigned will be reprocessed via EPC through CA-MMIS after the implementation has been completed and tested. Providers are encouraged to check the Medi-Cal DRG website regularly for updates regarding this issue.
- Medi-Cal policy for each SFY is applied based upon the admission date of the claim. With ICD-10 fully implemented, discharge date has no bearing on grouper settings in Year 4 of DRG payment as it did only in Year 3. The grouper settings must be set to “**keyed by**” admission date.
- These settings will vary in this document based on the claims’ admission dates:
 - **Entered code mapping:** Each July 1, the newest version of the APR-DRG grouper is implemented (V.33 7/1/16), which requires the setting for *no code mapping* for admissions between 7/1/16-9/30/16. For admissions on or after 10/1/16, “Entered Code mapping” should be set at *ICD-10 CM/PCS Version 34 effective 10/1/16*.
 - **Mapping type:** Choose *none* or *historical* based on admission dates. Only *admissions* on or after 10/1/16 require historical mapping using the newly implemented V.34 Mapper. See Table 1 and Figures 1 and 2 for details on which mapping type to use.
- These settings will apply to all Year 4 claims regardless of admission dates:
 - **HAC version:** Use HAC V.33 for California Medicaid until notified otherwise.
 - **ICD version indicator (located on claim record):** The “ICD version indicator” should be set to “0” on the claim record for all claims with discharge dates after 10/1/15.

For grouper settings for Years 1-3 of DRG payment, see the Pricing Resource webpages for each state fiscal year on the DHCS DRG webpage at <http://www.dhcs.ca.gov/provgovpart/Pages/DRG.aspx>.

Table 1				
Year 4 SFY 2016-17 Medi-Cal DRG Claims Grouper Setting Scenarios (10/26/16)				
Scenario	Admit Date	Grouper Version	Mapping	HAC
A	07/1/16 to 09/30/16	V.33	None	V.33 for California Medicaid
B	10/1/16 to 06/30/17	V.33	V.34 Historical	V.33 for California Medicaid

Notes:

1. Only the admission date determines the need for historical mapping. Unlike Year 3, which saw the implementation of ICD-10, discharge date does not affect this setting in Year 4.
2. In order for new diagnoses and procedures to be included in the DRG assignment, the updated APR-DRG Mapper must be implemented. Though the new mapper must be used in the desktop APR-DRG version settings each October 1, this will not match the mainframe CAMMIS claims system if the mapper in the mainframe has not been updated. (The CAMMIS mainframe has been programmed to extend the end date on the mapper allowing for more time, if needed, for the upgrade.)

Figure 1 Scenario A

Year 4 CA DRG SFY 2016-17 Admission Date on or after 7/1/16 through 9/30/16

User key1:	Year4A_ICD10	User key2:		What's This? Print Clear Cancel Save Save as...
Begin date:	07/01/2016	End date:	09/30/2016	
Description:	ICD10-Begin dt 7/1/16-9/30/16			
Modified date:	09/27/2016			
Groupers version:	APR DRG Grouper version 33.0 (10/01/2015)			
PPC version:	None			
HAC version:	HAC Version 33.0 for California Medicaid (10/01/2015)			
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			
Keyed by:	Admit date			
Entered code mapping:	None			
Mapping type:				
Reimbursement scheme:	None			

Figure 2 Scenario B

Year 4 CA DRG SFY 2016-17 Admission Date on or after 10/1/16 through 6/30/17

User key1:	Year4B_ICD10	User key2:		What's This? Print Clear Cancel Save Save as...
Begin date:	10/01/2016	End date:	06/30/2017	
Description:	ICD10-Begin dt 10/1/16-6/30/17			
Modified date:	10/04/2016			
Groupers version:	APR DRG Grouper version 33.0 (10/01/2015)			
PPC version:	None			
HAC version:	HAC Version 33.0 for California Medicaid (10/01/2015)			
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			
Keyed by:	Admit date			
Entered code mapping:	ICD-10-CM/PCS Version 34.0 effective 10/01/2016			
Mapping type:	Historical			
Reimbursement scheme:	None			

All copyrights in and to the 3M™ software are owned by 3M. All rights reserved.