

## Medi-Cal DRG 3M Grouper Settings for CA State Fiscal Year 2020-21 (1/1/2021)

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) 2020-21 claims with admission dates beginning 7/1/20 through 6/30/21. 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 7/1/20 through 9/30/20 with discharges before 10/1/20, use HAC version 37.1 for California Medicaid per Table 1: Scenario A and Figure 1. For admissions from 7/1/20 through 12/31/20 with discharges on or after 10/1/20, use HAC version 38.0 for California Medicaid per Table 1: Scenario B and Figure 2. For admissions from 7/1/20 through 6/30/21 with discharges on or after 1/1/2021, use HAC version 38.1 for California Medicaid per Table 1: Scenario C and Figure 3.
  - **Birth weight option:** For all newborn claims with a birth weight below normal, the reduced 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 7/1/20 through 9/30/20, with a discharge date before 10/1/2020, entered code mapping should be set to "ICD-10-CM/PCS version 37.1 effective 04/01/2020." For admissions from 7/1/20 through 12/31/20, with a discharge date on or after 10/1/20, entered code mapping should be set to "ICD-10-CM/PCS version 38.0 effective 10/1/2020." For admissions from 7/1/20 through 6/30/21, with a discharge date on or after 1/1/21, entered code mapping should be set to "ICD-10-CM/PCS version 38.1 effective 1/1/2021."
  - **Mapping type:** All admissions from 7/1/20 through 6/30/21 require historical mapping.

**Table 1: SFY 2020-21 Medi-Cal DRG Claims Grouper Setting Scenarios**

| Scenario | Admit Date         | Discharge Date      | Grouper Version | Mapping    | Mapper Version | HAC Version                  |
|----------|--------------------|---------------------|-----------------|------------|----------------|------------------------------|
| A        | 7/1/20 to 9/30/20  | Before 10/1/20      | 35              | Historical | 37.1           | 37.1 for California Medicaid |
| B        | 7/1/20 to 12/31/20 | On or after 10/1/20 | 35              | Historical | 38.0           | 38.0 for California Medicaid |
| C        | 7/1/20 to 6/30/21  | On or after 1/1/21  | 35              | Historical | 38.1           | 38.1 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 [Diagnosis Related Group Hospital Inpatient Payment Methodology](#) webpage.

**Scenario A:**

**Admission date from 7/1/20 through 9/30/20, with discharge date before 10/1/20**

**Figure 1: ICD10 admit 7/1/20-9/30/20, discharge before 10/1/20**

The screenshot shows a configuration page for ICD10 DRG grouper settings. The main form area includes the following fields and options:

- User key1:** SFY20-21A\_ICD10
- User key2:** [Empty field]
- Begin date:** 07/01/2020
- End date:** 09/30/2020
- Description:** D10 Admit 7/1/20-9/30/20, Discharge before 10/1/20
- Modified date:** 06/11/2020
- Reimbursement scheme:** None
- Automatically Determine Reimbursement Settings
- Automatically Determine Grouper Settings
- Keyed by:** Admit date
- Grouper version:** APR DRG Grouper version 35.0 (10/01/2017)
- Interpretation of Undetermined POA Indicators:** 0 - W treated as N, U treated as N
- PPC version:** None
- HAC version:** HAC Version 37.1 for California Medicaid (04/01/2020)
- 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 37.1 effective 04/01/2020
- Mapping type:** Historical

On the right side, there is a vertical sidebar with the following buttons: What's This?, Print, Clear, Cancel, Save, and Save as...

**Scenario B:**

**Admission date from 7/1/20 through 12/31/20 with discharge date on or after 10/1/20**

**Figure 2: ICD10 admit 7/1/20-12/31/20, discharge on or after 10/1/20**

|   |   |            |            |  |
|---|---|------------|------------|--|
| User key1:  | SFY20-21B_ICD10   | User key2: |            | What's This?<br>Print<br>Clear<br>Cancel<br>Save<br>Save as... |
| Begin date:   | 07/01/2020  | End date:  | 12/31/2020 |  |
| Description:  | Admit 7/1/20-12/31/20, Discharge on or after 10/1/20        |            |            |  |
| Modified date:  | 03/12/2021  |            |            |  |
| Reimbursement scheme: <b>None</b> ▼                                     |   |            |            |  |
| <input type="checkbox"/> Automatically Determine Reimbursement Settings |   |            |            |  |
| <input type="checkbox"/> Automatically Determine Grouper Settings       |   |            |            |  |
| Keyed by:   | Admit date ▼  |            |            |  |
| Grouper version:  | APR DRG Grouper version 35.0 (10/01/2017) ▼                 |            |            |  |
| Interpretation of Undetermined POA Indicators:                          | 0 - W treated as N, U treated as N ▼                        |            |            |  |
| PPC version:  | None ▼  |            |            |  |
| HAC version:  | HAC Version 38.0 for California Medicaid (10/01/2020) ▼     |            |            |  |
| 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 38.0 effective 10/01/2020 ▼           |            |            |  |
| Mapping type:   | Historical ▼  |            |            |  |

## Scenario C:

Admission date from 7/1/20 through 6/30/21 with discharge date on or after 1/1/21

Figure 3: ICD10 admit 7/1/20-6/30/21, discharge on or after 1/1/21

|                |  |            |            |
|----------------|--|------------|------------|
| User key1:     | SFY20-21C_ICD10                                      | User key2: |            |
| Begin date:    | 07/01/2020   | End date:  | 06/30/2021 |
| Description:   | 0 Admit 7/1/20-6/30/21, Discharge on or after 1/1/21 |            |            |
| Modified date: | 03/12/2021   |            |            |

  

|   |   |
|---|---|
| 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 35.0 (10/01/2017)                 |
| Interpretation of Undetermined POA Indicators:                          | 0 - W treated as N, U treated as N                        |
| PPC version:  | None  |
| HAC version:  | HAC Version 38.1 for California Medicaid (01/01/2021)     |
| 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 38.1 effective 01/01/2021           |
| Mapping type:   | Historical  |

What's This?

Print

Clear

Cancel

Save

Save as...

## 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 state fiscal year. 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.