

To: All Providers Participating in Nebraska Medicaid Program
From: Kevin Bagley, Director *KB*
Date: July 28, 2022
Re: All Patient Refined Diagnosis Related Groups (APR-DRG) Version Update

This provider bulletin is being issued to notify acute inpatient hospitals of the update to All Patient Refined Diagnosis Related Groups (APR-DRGs) version effective July 1, 2022.

Claims paid under the previous national relative weights with a discharge date on or after July 1, 2022, will be repriced using the re-scaled weights effective July 1, 2022. For more information, visit:

<https://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx>

Reimbursement

Medicaid and Long-Term Care (MLTC) has implemented 3M APR-DRG version 39.1, effective July 1, 2022. APR-DRG version 39.1 will apply to fee-for-services (FFS) inpatient claims with a discharge date on or after July 1, 2022.

The Managed Care Organizations (MCOs) will reimburse acute hospital inpatient services using the re-scaled APR-DRG version 39.1 relative weights for inpatient claims with a discharge date on or after July 1, 2022. Each MCO will reprocess impacted claims using the re-scaled relative weights for discharge dates beginning July 1, 2022. MCO pricing for version 39.1 is targeted to be in production by September 6, 2022.

Changes to Coding Procedures

Due to the update of the APR DRG grouper logic that occurred in APR DRG version 38 and was carried through to APR DRG version 39.1, a birth outcome and birth delivery surgical procedure code are required to be coded when certain childbirth diagnosis codes, that imply a delivery, are billed as the primary ICD-10 diagnosis code. The version 39.1 logic requires a birth outcome and a birth delivery procedure on the record. If either the birth outcome or a birth delivery procedure is missing, and the principal diagnosis is one of the childbirth codes, the claim will be denied and paid at zero due to an invalid principal diagnosis used as discharge diagnosis.

This change impacts APR DRG 548 postpartum and post-abortion diagnosis with OR procedure and APR DRG 561 postpartum and post-abortion diagnoses without procedure.

If you have questions regarding this bulletin, please contact Stephanie Ourada MacKenzie via email at Stephanie.OuradaMacKenzie@nebraska.gov. You may also reach out to your specific MCO payer Provider Relations assigned contact regarding plan-specific questions.

Provider Bulletins, such as this one, are posted on the DHHS website at <https://dhhs.ne.gov/pages/Medicaid-Provider-Bulletins.aspx>. Please subscribe to the page to help you stay up to date about new Provider Bulletins