Chat Q&A from MO HealthNet and Solventum APR-DRG Education 101 Webinar
April 21, 2025

from Brittany Vitale to everyone: 1:32 PM
Does the APR DRG change the UR process? There will be no changes to the utilization review process for DRGs.

from Jennifer Avery to everyone: 1:33 PM
In your opinion, should a facility focus more with education on code reporting for APR-DRG to ensure capture vs. MS-DRG (focus on cc/mcc)? This is very dependent on the patient mix of the facility in question. The facility should evaluate their current patient mix and make an education decision that is most appropriate for them. Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims.

from Kim Williams to everyone: 1:34 PM
Will Medicaid be providing insight on changes to the UM review processes, authorizations for inpatient stays and cadence of reviews for inpatients? There will be no changes to this process for DRGs.

from Brian Waterman to everyone: 1:36 PM
does APR-DRG logic account for SDOH z-codes in secondary dx fields? The APR-DRG grouping logic does allow for the reading of SDOH z-codes but those codes do not influence the DRG or severity level (SOI) assignment nor does it affect reimbursement at this time. Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims.

from Ellen Ellis to everyone: 1:36 PM
How do the initially assigned SOI and ROM result in the final APR-DRG? Missouri Medicaid's APR-DRG reimbursement system will be based upon the HAC Adjusted DRG – SOI assignments. While there are multiple DRG-SOI-ROM groupings that occur on a single claim in the Solventum grouping process, the HAC Adjusted DRG-SOI will be the one utilized for reimbursement. This DRG-SOI combination will be based upon the diagnosis codes, POA codes and IC procedure codes present on the claim at the time of discharge. Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims.

from Jaclyn Hugo to everyone: 1:37 PM
UR process for continued stay reviews There will be no changes to this process for DRGs.

from Mary Daymont to everyone: 1:37 PM
I would be interested in the UR response as well. Answered above

from Jennifer Wilson to everyone: 1:37 PM
When will Missouri post the Relative Weights? Answered on the call, but MO HealthNet has already provided these weights to MHA for distribution. If you have not received these please reach out to your hospital CEO or CFO.

from Mary Daymont to everyone: 1:37 PM
What are the recommendations to address length of stay and outlier cases? Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims and the APR-DRG Payment Calculator.

from Zac Hafez to everyone: 1:39 PM
Do the APR-DRGs account for the longer length of stay, severity of illness, and difficulty placing Medicaid patients? The APR-DRG system is adjusted based on the severity of a claim through the Severity of Illness (SOI) assignment within the DRG assignment process. Claims with longer lengths of stay are accounted for in the modeling of the system that went into the system design. Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims and the APR-DRG Payment Calculator.

from Sara to everyone: 1:39 PM
Do diagnoses not present on admission factor in to the apr weight? Is there a list of diagnosis codes that effect the apr DRG - like the cc/mcc lists or other resource of diagnoses to look for? Yes, all diagnosis codes on the claim affect the APR-DRG assignment. The diagnosis codes, POA codes, ICD procedure codes present on the claim at time of discharge (or claim submission for payment) will factor into the APR-DRG assignment. Please refer to the APRDRGAssign.com website to review how individual claims can group and how changes in the diagnosis codes can affect the DRG and SOI assignment.

from Erik Madsen to everyone: 1:39 PM
Are the ALOS values underlying specific DRG-ROM-SOI combinations based on a statistical calculation of previous patient admissions? If so, are pediatrics and adults lumped into one group such that a specific DRG-SOI-ROM combo gives an ALOS that is calculated based on historical adult and peds combined data? Or is there a specific age-related subgrouping so that the ALOS for a peds patient is being compared to historical pediatric admissions? Does a pediatric patient admitted for pneumonia with acute respiratory failure, for example, get the same ALOS as an adult, assuming they are otherwise the same (no chronic disease etc.)? The APR-DRG methodology is based on Missouri's historical claims data and is inclusive of the Missouri Medicaid population of all ages. Some APR-DRGs do factor age into the DRG and/or SOI assignment, but the underlying data is not split into an adult and pediatric population.

from Carla Gaines to everyone: 1:43 PM
What SDOH impact APR-DRGs Currently, SDOH codes do not impact the assignment of DRGs or level of severity on the claim. This is an area that the state is reviewing. Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims.

from Peggy Forrest to everyone: 1:44 PM
How to identify what impacts the APR-DRG is same question I have? Is there something that indicates, in encoder? Please review APRDRGAssign.com for the overview of the APRDRG assignment logic and ability to test the grouping of claims.

from Brittany Vitale to everyone: 1:44 PM
Since no changes UR reviews will CSR's still need to be submitted to CYber? ?????? There will be no changes in this process.

from Mary Daymont to everyone: 1:45 PM
Remember to provide recommendations on LOS optimization. The APR-DRG calculator contains length of stay instructions.