



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

Volume 28 No. 23

December 2018

TO: Hospitals – Chief Financial Officers of Acute Care General Hospitals
Route to – Patient Account Managers and Medical Records
Managed Care Organizations – For Informational Purposes

SUBJECT: Transition from AP-DRG Version 27 to APR- DRG Version 34

EFFECTIVE: October 1, 2018

PURPOSE: Consistent with previous announcements, this is to formally notify all New Jersey Acute Care General Hospitals reimbursed via DRG Methodology that NJ FamilyCare/Medicaid will move from utilization of AP-DRG v27 to APR-DRG v34 for Reimbursement of Inpatient Hospital Claims.

BACKGROUND: Beginning with Inpatient Hospital Discharges on or after January 1, 2012 NJ FamilyCare/Medicaid has utilized the 3M AP-DRG v27 Grouper for Reimbursement of Acute Care General Hospital Inpatient Claims.

ACTION: Effective with Inpatient Hospital Discharges occurring on or after October 1, 2018 NJ FamilyCare/Medicaid will utilize the 3M APR- DRG v34 Grouper for Reimbursement of Acute Care General Hospital Inpatient Claims.

The transition to APR-DRGs NJ FamilyCare/Medicaid will also include the use of national DRG Weights. These Weights have been calibrated to maintain budget neutrality. The version 34 APR-DRGs and Weights are available on the NJMMIS.COM web site under the DRG Pricing Header on the Rate and Code Information Link.

APR-DRGs consist of a three digits base DRG plus a one digit DRG severity. All four digit APR-DRG must be submitted on your claim. Claims submitted with discharge dates on or after October 1, 2018 that do not contain all four digits will be denied. Claims with discharge dates prior to October 1, 2018 submitted with four digits will be denied.

For questions regarding this Newsletter providers can contact the Office of Hospital Reimbursement via email @ MAHS.Hospitalissues@dhs.state.nj.us, or via telephone at 609-588-2668.

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