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Date: October 25, 2019

To: Oregon DRG hospitals

From: Nathan Roberts, Traditional Programs manager
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Subject: MS- and LTC-DRG updates and inpatient claim reprocessing

On November 3, 2019, the Oregon Health Authority (OHA) will update its claims system with Version 37 of the Medicare Severity Diagnosis Related Group (MS-DRG) grouper software and Long-Term Care DRG files, effective October 1, 2019. This requires OHA to also change the Oregon Unique DRGs as listed below.

Old DRG effective 10/1/2015	Description	New DRG effective 10/1/2019
317	Rehab with diagnosis of central nervous system disorder	521
318	Rehab with diagnosis of quadriplegia	522
319	Other rehabilitation visit	523
320	Neonates <1,000 grams	524
321	Neonates 1,000-1,499 grams	525
322	Neonates 1,500-1,999 grams	526
323	Neonates > 2,000 grams with RDS	527
324	Neonates > 2,000 grams, premature w major problems	528
325	Neonates w low birthweight Dx, age > 28 days at admit	529

Why is this happening?

Version 37 of the MS-DRG grouper is utilizing the Oregon Unique DRGs effective prior to this version. OHA will implement new Oregon Unique DRGs effective October 1, 2019.

What should you do?

No action is required on your part. The weekend of November 15, 2019, OHA will reprocess all inpatient claims paid between October 1, 2019 and November 3, 2019 to ensure the claims comply with this update.

What you will see on the paper remittance advice

The Claims Paid section will list the affected claims with a Detail EOB code of *8008: Provider Requested Claim Adjustment Due to Misc. or Unspecified Error*.

What you will see on the electronic remittance advice (ERA) or Provider Web Portal

Both the ERA and Provider Web Portal will list *Adjustment Reason Code 16: Claim/service lacks information or has submission/billing error(s) which is needed for adjudication*. Again, no action is required on your part.

Questions?

If you have any questions about this announcement, contact the Provider Services Unit at dmap.providerservices@dhsosha.state.or.us or call 800-336-6016. We are available Monday through Friday between 8 a.m. and 5 p.m.

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.