



PROVIDER BULLETIN
#18-2013

TO: Participating hospitals in New Jersey

FROM: Michael S. Zollenberg
Vice President, Provider Network Operations

DATE: October 1, 2013

SUBJECT: New ICD-9 codes and DRG Grouper impacts

The Centers for Disease Control and Prevention have published new ICD-9 procedure and diagnosis codes that are effective October 1, 2013. As a result, we are working with our vendor to update our DRG Grouper software to process claims for inpatient services for providers who have a DRG-based payment methodology.

Until this update is complete, inpatient claims with dates of service on or after October 1, 2013, that require a DRG assignment and contain new ICD-9 procedure and/or diagnosis codes may not group and process correctly. We have implemented procedures to help ensure that claims submitted with these new ICD-9 codes process appropriately while we complete these software updates, which we expect to occur after the first week of November.

Once our DRG Grouper software has been updated, we will review all inpatient claims processed with new ICD-9 codes prior to the software update and adjust them as necessary. **Please note that no action is necessary on your part to have these claims reprocessed.**

Again, this is a potential issue only for inpatient claims that require a DRG assignment and are billed with the new ICD-9 procedure and/or diagnosis codes effective October 1, 2013. This issue does not affect claims billed with current ICD-9 codes or ones that are not dependent on a DRG assignment.

Thank you for your understanding during this transition. If you have any questions regarding this update, please contact your Hospital/Ancillary Services Coordinator.

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We encourage you to share this information with appropriate members of your staff.
