



# Review of the AR-DRG Classification Case Complexity Process: Final Report (1 Aug 2014)

Errata 1, November 2017

## Background

AR-DRG Version 8.0 included the implementation of the Episode Clinical Complexity (ECC) Model which assigns a Diagnosis Complexity Level (DCL) value for in scope diagnosis codes that appear in acute admitted episodes. In the ECC Model, several groups of diagnostic codes which generally provide additional or supplementary information to another code already assigned have been excluded from receiving a DCL value and they are referred to as exclusions. Some diagnosis codes are excluded unconditionally and others are excluded conditionally. There are exceptions among unconditional exclusions, which remain within DCL scope (i.e. may receive a nonzero DCL).

Discrepancies have been identified in relation to the DCL unconditional exclusions in the *AR-DRG Version 8.0 Definitions Manual* and the *Review of the AR-DRG Case Complexity Process: Final Report* (published on 1 August 2014). Modifications have been made to the *AR-DRG Version 8.0 Definitions Manual* to amend these inconsistencies as per *Errata 3* to the *AR-DRG Definitions Manual* issued November 2017.

Corresponding changes have **only** been made to the *Appendices* of the *Review of the AR-DRG Classification Case Complexity Process: Final Report* to make the list of diagnosis codes within the *Appendices* consistent with the *AR-DRG Version 8.0 grouper specifications* (see attachments 1-3 for *Errata 1* to the complete appendices). *Section 6* of this report (pages 78-85) included consensus views on the DCL guiding principles and the list of identified exclusions that were intended to be implemented in AR-DRG Version 8.0. *Section 6* in the *Final Report* therefore remains unchanged.

These amendments will now create consistency with the AR-DRG Version 8.0 grouper specifications. As these discrepancies were identified prior to publication of AR-DRG Version 9.0, the Version 9.0 unconditional exclusions in the *Definitions Manual* and grouper specifications remain consistent.

It is intended that a review of the unconditional exclusions be undertaken in a future version of the AR-DRG classification.

## Review of the AR-DRG Classification Case Complexity Process: Final Report - Appendix 2 List of Chapter 18 Signs and symptoms codes with DCL in-scope codes identified

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Correction to Appendix 2 – Remove diagnosis codes (R95.0 and R95.9) from the DCL in-scope list as shown below.

Code	Description	DCL in-scope
R94.2	Abnormal results of pulmonary function studies	
R94.3	Abnormal results of cardiovascular function studies	
R94.4	Abnormal results of kidney function studies	
R94.5	Abnormal results of liver function studies	
R94.6	Abnormal results of thyroid function studies	
R94.7	Abnormal results of other endocrine function studies	
R94.8	Abnormal results of function studies of other organs and systems	
R95.0	Sudden infant death syndrome with mention of autopsy	<del>Yes</del>
R95.9	Sudden infant death syndrome without mention of autopsy	<del>Yes</del>
R96.0	Instantaneous death	
R96.1	Death occurring less than 24 hours from onset of symptoms, not	
R98	Unattended death	
R99	Other ill-defined and unspecified causes of mortality	

## Review of the AR-DRG Classification Case Complexity Process: Final Report - Appendix 3 List of all Chapter 21 codes with Unacceptable PDx codes and DCL in-scope codes identified

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Correction to Appendix 3 – Remove diagnosis codes (Z34.- and Z35.-) from the DCL in-scope list as shown below.			
Code	Description	Unacceptable	DCL in-scope
Z31.5	Genetic counselling		
Z31.6	General counselling and advice on procreation		
Z31.8	Other procreative management		
Z31.9	Procreative management, unspecified		
Z32.0	Pregnancy, not (yet) confirmed	Yes	
Z32.1	Pregnancy confirmed	Yes	
Z33	Pregnant state, incidental	Yes	
Z34.0	Supervision of normal first pregnancy		Yes
Z34.8	Supervision of other normal pregnancy		Yes
Z34.9	Supervision of normal pregnancy, unspecified		Yes
Z35.0	Supervision of pregnancy with history of infertility		Yes
Z35.1	Supervision of pregnancy with history of abortive outcome		Yes
Z35.2	Supervision of pregnancy with other poor reproductive or		Yes
Z35.3	Supervision of pregnancy with history of insufficient antenatal care		Yes
Z35.4	Supervision of pregnancy with grand multiparity		Yes
Z35.51	Supervision of primigravida with advanced maternal age		Yes
Z35.52	Supervision of multigravida with advanced maternal age		Yes
Z35.6	Supervision of (very) young primigravida		Yes
Z35.7	Supervision of high-risk pregnancy due to social problems		Yes
Z35.8	Supervision of other high-risk pregnancies		Yes
Z35.9	Supervision of high-risk pregnancy, unspecified		Yes
Z36.0	Antenatal screening for chromosomal anomalies		
Z36.1	Antenatal screening for raised alpha-fetoprotein level		

## Review of the AR-DRG Classification Case Complexity Process: Final Report - Appendix 8 In scope diagnosis codes

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Correction to Appendix 8 – Remove diagnosis codes (R95.0 and R95.9) from the DCL in-scope list as shown below.

Code	Description	Sex-specific CDC	Coherent Diagnosis Class
R57.0	Cardiogenic shock		F62
R57.1	Hypovolaemic shock		T60
R57.2	Septic shock		T60
R57.8	Other shock		T60
R57.9	Shock, unspecified		F62
R65.0	Systemic inflammatory response syndrome [SIRS] of infectious origin without acute organ failure		T60
R65.1	Systemic inflammatory response syndrome [SIRS] of infectious origin with acute organ failure		T60
R65.2	Systemic inflammatory response syndrome [SIRS] of noninfectious origin without acute organ failure		X60
R65.3	Systemic inflammatory response syndrome [SIRS] of noninfectious origin with acute organ failure		X60
<del>R95.0</del>	<del>Sudden infant death syndrome with mention of autopsy</del>		<del>B81</del>
<del>R95.9</del>	<del>Sudden infant death syndrome without mention of autopsy</del>		<del>B81</del>
S00.00	Superficial injury of scalp, unspecified		J65
S00.01	Superficial injury of scalp, abrasion		J65
S00.02	Superficial injury of scalp, blister		J67
S00.03	Superficial injury of scalp, insect bite		J67