DC Medicaid EAPG Grouper Settings
Effective October 1, 2026

DC EAPGs: FY27 Grouper Settings
Effective October 1, 2026
Reimbursement scheme: Outpatient Payment Calculation Toolkit - EAPGS
Automatically Determine Reimbursement Settings: No (unchecked)
Automatically Determine Grouper Settings: No (unchecked)
Grouper version: Enhanced APG System Version 3.18 (01/01/2023)
Payer exceptions: None
Customize: Yes (check)
Medical necessity editor: No (unchecked)
Insurance ID: None
Grouping - General
Direct admit observation logic: Yes
Repeat ancillary procedure discounting: Yes
Repeat ancillary discounting for drug: Yes
Repeat ancillary discounting for DME: Yes
Bilateral discounting: Yes
Terminated procedure discounting: Yes
Observation hours option: >= 8 hours
Cross-type multiple procedure discounting: Yes
Radiology procedure packaging: Yes
Grouping - Visits
Multiple medical visits option: 0 - Do not allow assignment of multiple medical visits
Visits per claim: Multiple
Single visit per claim revenue codes: 450 451 452 456 459 762
Grouping - EAPG Type Processing
Same procedure consolidation for Significant Procedure: Yes
Same procedure consolidation for Physical Therapy & Rehab: Yes
Same procedure consolidation for Behavioral Health & Counseling: Yes
Same procedure consolidation for Dental: Yes
Same procedure consolidation for Radiologic Procedure: Yes
Same procedure consolidation for Diagnostic or Therapeutic Procedure: Yes
Clinical procedure consolidation for Significant Procedure: Yes
Clinical procedure consolidation for Physical Therapy & Rehab: Yes
Clinical procedure consolidation for Behavioral Health & Counseling: Yes
Clinical procedure consolidation for Dental: Yes
Clinical procedure consolidation for Radiologic Procedure: Yes
Clinical procedure consolidation for Diagnostic or Therapeutic Procedure: Yes
Multiple procedure discounting for Significant Procedure: Yes
Multiple procedure discounting for Physical Therapy & Rehab: Yes
Multiple procedure discounting for Behavioral Health & Counseling: Yes
Multiple procedure discounting for Dental: Yes
Multiple procedure discounting for Radiologic Procedure: Yes
Multiple procedure discounting for Diagnostic or Therapeutic Procedure: Yes
Medical visit processed with Significant Procedure: No
Medical visit processed with Physical Therapy & Rehab: No
Medical visit processed with Behavioral Health & Counseling: No
Medical visit processed with Dental: No
Medical visit processed with Radiologic Procedure: No
Medical visit processed with Diagnostic or Therapeutic Procedure: No
Grouping - Modifiers
Ignore all modifiers: No
Use modifier -25: Yes
Use modifier -27: Yes
Use modifier -59: Yes
Use therapy modifiers -GN, -GO and -GP: No
Use anatomical or select modifiers: No
Use never event modifiers, -PA, -PB, -PC: No
Use modifier -57: No
Use distinct procedure modifiers: Yes
Use modifier -JW: No
Use distinct medical visit: No
Grouping - Per Diem - not used in DC
Direct per diem option: 0 - Do not apply direct per diem criteria
Indirect per diem option: 0 - Do not apply indirect per diem criteria
Grouping - Inpatient Only / Alternate Payment
Inpatient only HCPCS codes: None
Inpatient only EAPGs: None
Alternate payment HCPCS codes: J1411, J1412, J1413, J1414, J3387, J3391, J3392, J3393, J3394, J3398, J3399
Alternate payment EAPGs: None
Grouping - Never Pay
Never pay HCPCS codes: list added
Never pay EAPGs: None
Grouping - Packaging
EAPGs added to packaging: None
EAPGs deleted from packaging: None

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Grouping - Acuity
Acuity secondary diagnosis codes: None
Acuity EAPGs: None
Grouping - Conditional
EAPGs conditional upon diagnosis code: None
Significant procedure or therapy EAPGs allowing medical visit: None
Grouping - Consolidation
EAPGs excluded from same significant procedure consolidation: None
Conditional EAPGS diagnosis codes required range list: Empty list
Grouping - Other
User-defined 340B drug list: None
Grouping - Midquarter Effective Date
Use Mid-quarter effective date option: Yes
Customizable HCPCS Coverage Date List: None
Facility Values
Base rates: Cedar Hill - $1,680.07; NRH - $585.74; All other hospitals - $1,199.49
Non-EAPG rate: None
Add-on rate 1: None
Add-on rate 2: None
Add-on rate 3: None
Add-on rate 4: None
Cost to charge ratio: None
Wage index: 1.00000
Facility specific percent of charge: None
Behavioral health full day per diem: None
Behavioral health half day per diem: None
Substance abuse full day per diem: None
Substance abuse half day per diem: None
User-defined adjustment factor: None
User-defined EAPG adjustment factor: None
Agency Values
Terminated procedure discount percent: 0.50
Bilateral procedure discount percent: 1.50
Low marginal cost factor: None
High marginal cost factor: None
High cost outlier limit: None
High cost outlier factor: None
Cost outlier threshold fixed amount: None
Transition percent: None
Significant Procedure Discounting Percents - 1st percent: 1.00
Significant Procedure Discounting Percents - 2nd percent: 0.50
Significant Procedure Discounting Percents - 3rd percent: 0.25
Repeat Ancillary Discounting Percents - 1st percent: 0.50
Repeat Ancillary Discounting Percents - 2nd percent: 0.25
Repeat Ancillary Discounting Percents - 3rd percent: 0.25
Agency Other
Lesser of charge vs. EAPG payment: Do not apply
Lesser of charge vs. fee: Do not apply
Payable line items number: No limit
Payment path: Line item based
Alternate line item payment hierarchy: None
Cost outlier method: None
Adjustment percent 1: 1.00000
Adjustment percent 2:
Therapy significant procedure discounting: Standard
Pre ranking bilateral adjustment flag: No
Pre ranking terminated procedure discounting flag: No
Independent bilateral procedure discount percent: 2.00
340B drug discount: None
Cross-type significant procedure discount ranking: Yes
Pediatric age adjustment: 1.2500 (25%)
Pediatric age adjustment limit: 20
Modifier JW No Payment Flag: Off
Dental add on payment: None
Vagus Nerve Stimulator Device Rate: None
Statistics
Statistics: Effective with Grouper Version V3.18 (updated January 2026) with two DC specific weights for 269 and 493
Fees: None
Revenue codes: None
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