

# The HHSC Inspector General Utilization Review (IG-UR) Unit Has Revised the DRG Validation Process

Information posted April 24, 2017

**Note:** *Texas Medicaid managed care organizations (MCOs) must provide all medically necessary, Medicaid-covered services to eligible clients. Administrative procedures such as prior authorization, pre-certification, referrals, and claims/encounter data filing may differ from traditional Medicaid (fee-for-service) and from MCO to MCO. Providers should contact the client's specific MCO for details.*

The Health and Human Services Commission Inspector General-Utilization Review (IG-UR) Unit has revised the Diagnosis Related Group (DRG) validation process in compliance with Senate Bill 207 84th Legislature (2015).

Hospital providers that received an IG DRG change notification letter dated September 1, 2015, or later may request IG re-review those claims with the new DRG validation process. Currently, IG-UR is accepting requests for sample quarter(s) 03/2010, 04/2010, 01/2011, and 02/2011 notifications.

Re-review requests must be submitted to the appropriate IG-UR regional office. The requests must be submitted by fax or mail by May 12, 2017. The requests must include the copy of the original DRG notification and the Remittance and Status (R&S) Report.

Questions about the revised DRG Validation process may be sent to [OIG\\_UR@hhsc.state.tx.us](mailto:OIG_UR@hhsc.state.tx.us).

For more information, call the TMHP Contact Center at 1-800-925-9126.