

OPCS-4.8 Update

HRG4+ 2017/18 Local Payment Grouper

Published April 2017



**Information and technology
for better health and care**

Copyright © 2017 Health and Social Care Information Centre.

The Health and Social Care Information Centre is a non-departmental body created by statute, also known as NHS Digital.

Purpose

This document outlines the changes to the HRG4+ 2017/18 Payment Grouper, for use from 1 April 2017, made as a result of the version 4.8 update to the OPCS Classification of Interventions and Procedures (OPCS-4.8). OPCS-4.7 has been replaced by OPCS-4.8, effective 1 April 2017.

Background

The OPCS Classification of Interventions and Procedures – Version 4 (OPCS-4) is a statistical classification for clinical coding of hospital interventions and procedures undertaken by the National Health Service (NHS). It is an approved NHS Fundamental Information Standard and is mandatory for use by healthcare providers to support various forms of data collections for operational and secondary uses. It is mandatory for Admitted Patient Care Commissioning Data Sets (CDS). The requirements for data sets and related definitions are specified in the NHS Data Model and Dictionary.

<http://www.datadictionary.nhs.uk/>

The OPCS-4 classification is updated to accurately reflect current NHS clinical practice through the addition of new content as necessary. Key classification characteristics are retained to maintain consistency and comparability across OPCS-4 versions and statistical data. The classification comprises a list of alphanumeric codes organised into mainly anatomically based chapters. It is published as a book set (Tabular List and Index) and is also available to download as an eVersion. OPCS-4 was last updated in April 2014 with the release of OPCS-4.7.

<https://isd.hscic.gov.uk/trud3/user/guest/group/0/pack/10>

The Clinical Classifications Service at NHS Digital has responsibility for the support, maintenance, development and licensing of the OPCS-4 classification. OPCS-4.8 is released by the Clinical Classifications Service and contains updates submitted by the NHS, NHS Digital, the Department of Health, NHS England and other organisations via the OPCS-4 Requests Portal.

In the HRG4+ 2017/18 Payment Grouper, OPCS-4 codes are used:

- To drive HRG grouping where a valid procedure is recorded in the patient record
- To escalate activity to a higher resource HRG root where significant additional procedures are recorded in the patient record
- To escalate activity grouped to a diagnosis-driven HRG to a higher resource HRG where a minor procedure has been recorded in the patient record
- In other processes as trigger codes with the output via the HRG grouper. For example, Best Practice Tariffs (BPTs) and unbundled HRGs.

Types of changes affecting HRG4+ design

Codes added to OPCS-4 classification

For the purpose of this document, new codes are defined as those 4-digit OPCS-4 codes that do not exist in the HRG4 2016/17 Payment Grouper but will exist in the OPCS-4 code set to be used by the NHS from 1 April 2017.

Codes retired from OPCS-4 classification

One OPCS-4 code has been newly retired in OPCS-4.8 due an overlap in the meaning of two codes in the OPCS-4.7 code set. In OPCS-4.7, *M06.4 Attention to nephrostomy tube NEC* and *M16.2 Maintenance of drainage tube of kidney* classified the same procedure. Consequently, M064 has been retired and its description has been changed to *Code retired – refer to introduction* in OPCS-4.8. This code can no longer drive grouping to a valid HRG and will derive HRG **UZ01Z Data Invalid for Grouping** if no procedure code that is valid for grouping has been recorded in the same patient episode.

OPCS-4 description changes

Code descriptions have been updated for certain OPCS-4 codes, which will impact on descriptions of combination codes based on the affected codes. However, changes to code and combination code descriptions will have no impact on HRG derivation.

Numbers

The following table attempts to illustrate the magnitude of the change. There are approximately 9,500 OPCS-4 codes in total.

	New codes	Retired codes	Updated Descriptions
Count	92	1	8

Implementation in the HRG4+ 2017/18 Payment Grouper

OPCS-4 code additions

Where a new code has been added to the OPCS-4 classification, National Casemix Office Expert Working Group (EWG) advice has been sought to ascertain the most appropriate HRG(s) to which to group the new code and whether the new code should (or should not) be a member of certain lists (e.g., intervention lists). The clinical discussions centred on the OPCS code(s) that would have been used to code the procedure(s) identified by the new code prior to the introduction of the OPCS-4.8 update in April 2017.

Accommodating the new OPCS-4 codes within the payment design in this way preserves the base HRG4+ 2014/15 Reference Costs design, on which the reference costs underlying Payment 2017/18 were collected, as much as possible.

See *Appendix A for the list of code additions*.

OPCS-4 code retirement

The HRG4+ 2017/18 Payment Grouper has implemented the OPCS-4.8 code list as released by the Clinical Classifications Service. Therefore, while valid in the previous payment grouper, retired OPCS code M064 will not be valid in the HRG4+ 2017/18 Payment Grouper. However, M064 has been mapped in the HRG4+ 2017/18 Payment design for completeness.

If M064 is the only procedure code recorded in the patient record, the episode (and spell) will generate HRG **UZ01Z Data Invalid for Grouping**. If M064 is recorded alongside any procedure code that is valid for grouping, the episode (and spell) will generate a valid HRG based on the dominant procedure recorded in the patient record.

For multi-episode spells with an admission date prior to 1 April 2017 and a discharge date after 31 March 2017 (i.e. the spell spans dates in two financial years), where the only significant procedure recorded within any constituent 2016/17 episode is the retired OPCS-4 code, the spell will generate the HRG **UZ01Z Data Invalid for Grouping**. The HRG4+ 2017/18 Payment Grouper will not distinguish between the two different versions of the OPCS-4 classification, with the OPCS-4.8 code set the only code set recognised as valid.

M064 has been removed from the list Interventions in HRG4+ 2017/18 Payment Grouper. The code can no longer be used to escalate an episode from one diagnosis-driven HRG to another diagnosis-driven HRG with a higher expected resource use.

M064 will not affect HRG grouping except where it is recorded in an episode without a procedure code that is valid for grouping.

See Appendix B for the list of code deletions.

Summary

The Clinical Classifications Service will implement OPCS-4.8 from the 1 April 2017. The HRG4+ 2017/18 Payment Grouper supports this classification as it is designed to be used with 2017/18 data.

All 92 new OPCS-4.8 intervention and procedure codes have been accommodated within the HRG4+ classification and are present in the HRG4+ 2017/18 Payment Grouper. This means that the new codes will be valid in this payment grouper and will play a part in grouping. The new codes were accommodated within the design based on advice from the National Casemix Office EWGs and with an eye to preserving the base HRG4+ 2014/15 Reference Costs design, on which the reference costs underlying Payment 2017/18 were collected, as much as possible.

As part of the OPCS-4.8 update, a single OPCS-4.8 code will become invalid on 1 April 2017. This retired code remains in the HRG4+ design for completeness, but it has been removed from the Interventions list and it will cause an episode (and spell) to U-group where it is not recorded alongside a procedure code that is valid for grouping.

Where spells span the financial year boundary and any constituent 2016/17 episode contains the retired code and no other procedure code that is valid for grouping, these validly coded spells will U-group.

Frequently asked questions

- Q:** How can we group multi-episode spells that span financial years 2016/17 and 2017/18 that have a retired OPCS-4 code in the 2016/17 episode to valid HRGs using the HRG4+ 2017/18 Payment Grouper?
- A:** For multi-episode spells that end in 2017/18 but contain one or more episodes that finished in 2016/17 (and where an episode from 2016/17 contains the retired OPCS-4 code and no other procedure code that is valid for grouping), we would advise commissioners and providers to discuss the activity and come to a local arrangement regarding appropriate tariffs.
- Q:** How can we code activity previously coded using retired code *M064 Attention to nephrostomy tube NEC*?
- A:** *M064 Attention to nephrostomy tube NEC* and *M162 Maintenance of drainage tube of kidney* classified the same procedure in OPCS-4.7 and were mapped to the same HRG root in previous payment designs. Therefore, M162, which remains valid in OPCS-4.8, should be used to code activity that would previously have been coded using M064.
- Q:** How can we group historic data for business planning purposes or to calculate the marginal rate using the HRG4 2016/17 Payment Grouper?
- A:** Historic data will U-group when run through the HRG4+ 2017/18 Payment Grouper if it contains the an episode with the code retired in OPCS-4.8 but no other procedure code that is valid for grouping. Where this causes an issue for organisations locally, they may wish to use the HRG4+ 2017/18 Consultation Grouper for their planning as this grouper does not include the OPCS-4.8 update.

Further information

For further information please contact the NHS Digital helpdesk on 0300 303 5678 or via enquires@nhsdigital.nhs.uk.

Appendix A: code additions

A821	Quantitative sensory testing
A828	Other specified other neurophysiological operations
A829	Unspecified other neurophysiological operations
B324	Vacuum biopsy of lesion of breast
B411	Radionuclide guided excision of lesion of breast
B412	Radionuclide guided partial excision of breast
B418	Other specified excision of breast
B419	Unspecified excision of breast
D064	Graft of skin to external ear
D065	Flap of skin to external ear
E097	Graft of skin to external nose
E661	Flap of skin to external nose
E668	Other specified other operations on external nose
E669	Unspecified other operations on external nose
E671	Endoscopic thermal bronchoplasty
E678	Other specified other therapeutic fibreoptic endoscopic operations on lower respiratory tract
E679	Unspecified other therapeutic fibreoptic endoscopic operations on lower respiratory tract
F096	Coronectomy NEC
G121	Fibreoptic endoscopic mucosal resection of lesion of oesophagus
G128	Other specified other fibreoptic endoscopic extirpation of lesion of oesophagus
G129	Unspecified other fibreoptic endoscopic extirpation of lesion of oesophagus
G201	Fibreoptic endoscopic coagulation of bleeding lesion of oesophagus
G208	Other specified therapeutic fibreoptic endoscopic operations on oesophagus
G209	Unspecified therapeutic fibreoptic endoscopic operations on oesophagus
G423	Fibreoptic endoscopic mucosal resection of lesion of upper gastrointestinal tract
G462	Fibreoptic endoscopic coagulation of bleeding lesion of upper gastrointestinal tract
G825	Radiological reduction of intussusception of ileum using air enema
H207	Fibreoptic endoscopic mucosal resection of lesion of colon
H237	Endoscopic mucosal resection of lesion of lower bowel using fibreoptic sigmoidoscope
H371	Endoscopic mucosal resection of lesion of sigmoid colon using rigid sigmoidoscope
H378	Other specified other endoscopic extirpation of lesion of sigmoid colon using rigid sigmoidoscope
H379	Unspecified other endoscopic extirpation of lesion of sigmoid colon using rigid sigmoidoscope
K597	Renewal of cardioverter defibrillator using three electrode leads
K731	Renewal of intravenous single chamber cardiac pacemaker system
K732	Renewal of intravenous dual chamber cardiac pacemaker system
K733	Renewal of intravenous biventricular cardiac pacemaker
K738	Other specified other cardiac pacemaker system introduced through vein
K739	Unspecified other cardiac pacemaker system introduced through vein
K741	Renewal of single chamber cardiac pacemaker system NEC
K742	Renewal of dual chamber cardiac pacemaker system NEC
K743	Renewal of biventricular cardiac pacemaker NEC
K748	Other specified cardiac pacemaker system
K749	Unspecified cardiac pacemaker system
L863	Injection of glue into varicose vein of leg
M571	Introduction of vaginal tape NEC
M572	Total removal of vaginal tape NEC
M573	Partial removal of vaginal tape NEC
M574	Partial removal of transobturator tape
M578	Other specified other vaginal operations to support outlet of female bladder
M579	Unspecified other vaginal operations to support outlet of female bladder
M683	Endoscopic insertion of prosthesis to compress lobe of prostate
O176	Remanipulation of fracture of bone and fixation using plate
P065	Excision of lesion of labia
P094	Biopsy of lesion of labia

P274	Endoscopic examination of vagina
P281	Total removal of prosthetic material from previous repair of vaginal prolapse
P282	Partial removal of prosthetic material from previous repair of vaginal prolapse
P288	Other specified repair of prolapse of vagina
P289	Unspecified repair of prolapse of vagina
P301	Total removal of prosthetic material from previous repair of vaginal vault prolapse
P302	Partial removal of prosthetic material from previous repair of vaginal vault prolapse
P308	Other specified other repair of vault of vagina
P309	Unspecified other repair of vault of vagina
Q547	Total removal of prosthetic material from previous suspension of uterus
Q571	Partial removal of prosthetic material from previous suspension of uterus
Q578	Other specified other operations on other ligament of uterus
Q579	Unspecified other operations on other ligament of uterus
S072	Photodynamic laser therapy to lesion of skin
T321	Reconstruction of anterior abdominal wall using insert of natural material
T322	Reconstruction of anterior abdominal wall using insert of prosthetic material
T323	Reconstruction of anterior abdominal wall using flap NEC
T324	Reconstruction of anterior abdominal wall using insert of prosthetic material and flap NEC
T328	Other specified reconstruction of anterior abdominal wall
T329	Unspecified reconstruction of anterior abdominal wall
U365	Cone beam computed tomography NEC
V415	Posterior attachment of spinal growing system
V416	Attention to spinal growing system
V417	Surgical distraction of spinal growing system
V511	Primary direct lateral excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spine
V518	Other specified other primary excision of lumbar intervertebral disc
V519	Unspecified other primary excision of lumbar intervertebral disc
W247	Closed reduction of fracture of bone and fixation using plate
W926	Chemical synovectomy
W927	Radiation synovectomy
Y172	Morcellation of lesion of organ NOC
Y207	Vacuum biopsy of lesion of organ NOC
Z157	Areola
Z447	Labia
Z537	Abdominal cavity
Z881	Hyoid
Z888	Specified respiratory tract NEC
Z889	Respiratory tract NEC

Appendix B: code retirement

M064	Attention to nephrostomy tube NEC
------	-----------------------------------

Appendix C: code description updates

W194	Primary open reduction of fracture of short bone and fixation using screw
W244	Closed reduction of fracture of short bone and fixation using screw
O174	Remanipulation of fracture of short bone and fixation using screw
K594	Renewal of cardioverter defibrillator NEC
K603	Renewal of intravenous cardiac pacemaker system NEC
M537	Total removal of transobturator tape
Z248	Specified other respiratory tract NEC
Z249	Other respiratory tract NEC

The Documentation Suite - Payment

Below is a list of the various documents which are available to download from the National Casemix Office website <http://www.hscic.gov.uk/casemix/downloads>

This documentation suite provides a comprehensive resource to enable users to understand design concepts and logic, as well as practical use of the Grouper

- The **Casemix Companion** is a starting point and general reference guide for anyone interested in learning about the casemix classification system used by the NHS in England. The document provides an introduction to HRGs, groupers, HRG4+ design concepts and grouping logic, and it contains links to additional resources.
- The **Grouper User Manual** provides instructions on how to prepare and group data using the Grouper software application. Sample data with expected results is provided. This document is updated with every grouper release.
- The **Summary of Changes** document provides an overview of the main differences between the current grouper design and its relevant predecessor.
- The **Chapter Summaries** document provides an overview of the scope, composition and relevant grouping logic of individual HRG subchapters, and it highlights significant changes to the latest HRG design.
- The **Code to Group Workbook** is a spreadsheet that embodies the casemix design. It provides details of the constituent elements that contribute to HRG grouping, and it contains reference data such as the ICD-10 and OPCS-4 codes utilised in the design, the procedure and diagnosis hierarchies pertinent to a specific design, and the Complication and Comorbidities lists for HRG subchapters. The spreadsheet also includes information on Programme Budgeting Category (PBC) mapping, as well as a comprehensive list of HRG codes and labels.
- The **Code to Group User Manual** explains how to make best use of the information found in the Code to Group Workbook. Specifically, the manual clarifies the grouping logic found in the workbook's Code to Group tab.
- The **Specialised Service Identification Code Sets** is a spreadsheet that contains details about how the grouper allocates specific identification flags relating to specialised services that previously attracted a tariff top-up. It is included for reference since the Grouper still outputs SSC codes for benchmarking purposes. Please note that PSS identification flags are now the basis for attracting a tariff top-up.
- The **Best Practice Guide** is a spreadsheet that contains details about how the grouper allocates specific identification flags relating to best practice. Best Practice Flags usually result in an adjustment to the tariff. The spreadsheet also provides details of these specific tariff adjustments.
- The **OPCS-4.8 Update** outlines the changes to the HRG4+ 2017/18 Payment Grouper made as a result of the version 4.8 update to the OPCS-4 Classification of Interventions and Procedures, which is effective from 1 April 2017.