

Provider Summary of EAPG Engagement Meeting 7/13/2018

Welcome Message and Meeting Etiquette (Slides 1-4, Time 00:00:00–00:03:43)

- Staff Introductions
- Webinar rules
- Upcoming EAPG Meeting Schedule
- Proposed Meeting Changes

Ongoing Concerns (Slide 5, Time 00:03:30-00:06:27)

- Multiple Visits / Same Day Claims
 - Recognize this remains a concern
 - Provider feedback?

Drug Carveout (Slide 6, Time 00:06:27-00:12:00)

- Working through initial modeling
- Incremental implementation may be necessary
 - High-cost versus low-cost drugs
 - Impacts of 340B versus non-340B
- Physician-administered Drug Webinars, Survey (Slide 7)

EAPG Module Updates (Slide 8, Time 00:12:00-00:18:31)

- 3M released 2018.2.0
 - Contained CPT/HCPCs July 1, 2018 Updates
- 3M released 2018.2.1 on July 12
 - Accommodates recent change to EAPG 993 (Inpatient Only Procedure) logic by removing associated charges
 - Adds revenue code 0900 to covered revenue code list
 - Can be assigned EAPGs other than EAPG 999
 - Charges will be considered in charge redistribution
 - Roughly two weeks for DXC to update in system

EAPG Mass Adjustments (Slide 9, Time 00:18:31-00:22:55)

- Xerox EAPG Claim Adjustments
 - ~400,000 claims adjusted in total completed
 - Majority completed by 5/4/2018 financial cycle

- Represents majority of reprocessed claims
- 340B Discount Update
 - ~21,000 claims adjusted to pay at 80% discount rate
 - Completed as of 7/6 financial cycle
- 26/TC Modifier – 7/13 financial cycle

EAPG Upcoming Mass Adjustments (Slide 10, Time 00:22:55-00:24:39)

- Revenue Code 0900
 - Still assessing financial impact
 - Expectation on increase of payment
 - Less than 8,000 claims to be resubmitted
- Inpatient-only
 - Less than 1,000 claims to be resubmitted
 - Does not guarantee payment for claims as other edits may set
- No adjustment necessary for 7/1/2018 Rate Increase

DME Billing Clarification (Slide 11, Time 00:24:39-00:34:20)

- Non-Packaged DME EAPG codes should be billed separately
 - EAPGs 452 – 456, 1004 – 1020
 - EAPG Definitions Manual (Appendix D)
- The costs of packaged DME EAPGs were considered in development of remainder of EAPG weights

Observation Billing Guidance (Slide 12-13, Time 00:34:20-00:39:13)

- **Does not represent a shift in Observation payment policies under EAPGs**
- The Department has recently found that the 3M EAPG module does not utilize the sum of units across multiple claim details billed with code G0378 for the assignment of EAPG 450 (Observation).
- 3M cannot update this retrospectively
- ***For lines billed with G0378, please bill all units (hours) on a single line item using the first date of service of the visit. This will allow the EAPG grouper to accurately recognize and generate payment for observation services, when appropriate. All other payment policies regarding observation services remain in effect, meaning that observation is not separately payable on Significant Procedure visits, Ancillary-Only visits and visits where procedure code G0378 is billed with 7 or fewer units.***

EAPG Base Rate Reform (Slide 14, Time 00:39:13-00:43:22)

- Planning shift from transitional EAPG Base Rates
 - Continuation of conversation from previous hospital meetings
- Timing this with several other potential modifications to EAPGs:
 - EAPG Version Update
 - Potential transition to new set of weights
 - Drug Carveout
 - Any other EAPG policy modifications
- Implementation depends on numerous factors
 - Provider participation is encouraged to expedite this once initial modeling completed

Future EAPG Meetings (Slide 15, Time 00:43:22-00:46:02)

- EAPG Base Rate Reform
- Additional topics for discussion?
- EAPG Meetings moving to a bi-monthly occurrence. Next meeting for Friday September 7, 2018

Questions and Comments Topics (Slide 16, Time 00:46:02-00:48:43)

No Questions/Comments were discussed at this time