

EAPG Bi-Monthly Meeting

303 East 17th Avenue, Denver, CO 80203. 7th Floor Room B
Conference Line: 1-877-820-7831 Passcode: 294442#

Kevin Martin, Andrew Abalos

November 2018



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GROUND RULES FOR WEBINAR

- WE WILL BE RECORDING THIS WEBINAR
- ALL LINES ARE MUTED. PRESS *6 IF YOU WISH TO UNMUTE. PARTICIPANTS CAN ALSO UTILIZE THE WEBINAR CHAT WINDOW
- Please speak clearly when asking a question and give your name and hospital
- If background noise and/or inappropriate language occurs all lines will be hard muted.

Thank you for your cooperation



Welcome & Introductions

- **Thank you for participating today!**
- We are counting on your participation to make these meetings successful



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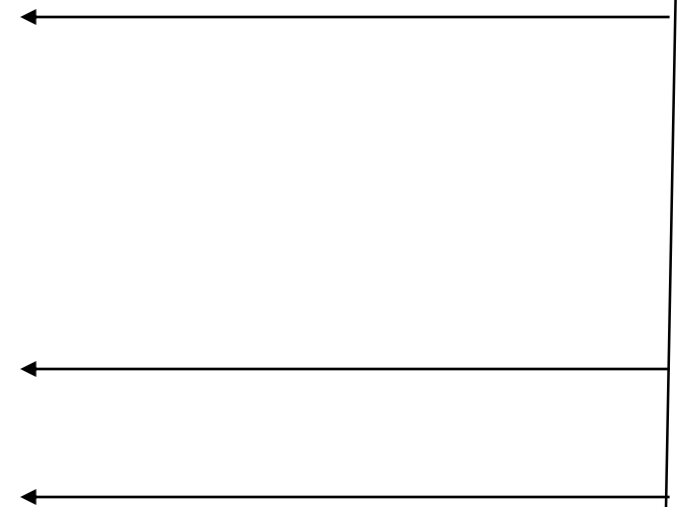
EAPG Engagement Meetings for 2019

With limited topics available for discussion - It has been decided to merge EAPG back to the Hospital Stakeholder Engagement Meeting.

Please note the offset dates and times to work around holidays AND Medical Services Board

Hospital Stakeholder Engagement Meeting

Dates of Meetings	Meeting Time
January 11, 2019	12:30 p.m. - 4:00 p.m.
March 1, 2019	9:00 a.m. - 12:30 p.m.
May 3, 2019	9:00 a.m. - 12:30 p.m.
July 12, 2019	12:30 p.m. - 4:00 p.m.
September 13, 2019	12:30 p.m. - 4:00 p.m.
November 1, 2019	9:00 a.m. - 12:30 p.m.



Rule Change - Specialty Drugs

- Rule update to reimburse certain specialty drugs outside of EAPGs effective August 11, 2018
- Final Reading to Medical Services Board occurred on October 12, 2018
- Awaiting CMS approval before payment methodology fully effective
- For more information on the Medical Services Board, [click here](#).



JW Modifier - Discarded Drugs

- Impacts claims where discarded portions of drugs were billed (JW modifier)
- DXC's system not interfacing correctly with EAPG grouper
- Seeking to correct defect prior to mass adjustment. Schedule uncertain



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Ongoing Payment Analysis

- Performing aggregate EAPG payments analysis
 - State-wide basis
 - Peer group basis
- Information collected from audited cost reports, cost settlements, compared to aggregate pre-EAPG budget amounts



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EAPG Module Updates

- GPS v2018.3.0 Released September 26, 2018
 - Installed into DXC system September 28, 2018
 - Allowed Grouper to interpret ICD-10 Updates, new CPT/HCPCS
 - interChange system CPT/HCPCS updates pending
- 3M released Hotfix to issue involving suspended claims on October 16, 2018
 - Installed into DXC system on October 17, 2018
 - All impacted claims (230) that suspended have been processed
- No planned changes for any upcoming Service Packs



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Potential Changes

- EAPG Base Rate Reform
- Most resource-intensive project, would most effectively address variations in payments for Colorado hospitals and peer groups



Potential Changes

- Transition to National Weights
- Work in tandem with redevelopment of base rates
 - Pros:
 - Faster transition between EAPG versions
 - Lowers complexity of EAPG updates
 - Cons:
 - Weights more reflective of National resource utilization, instead of Colorado-specific utilization
 - Developed using EAPG default settings



Potential Changes

- Update to Observation Payment Policy
- Clarification: Observation only distinctly paid on OP hospital visits without Significant Procedures and are not Ancillary-only. Part of EAPG methodology - cannot be changed
- Update would be removing ≥ 8 hour requirement for payment



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Potential Changes

- Update to Modifier 25 Policy
- Currently cannot be used to describe distinct Medical Visits from Significant Procedure visits
- Update would allow Medical Visits to pay on Outpatient visits with Significant Procedures, when appropriate
- Possible impact on Weights



Potential Changes

- Multiple Visits per Day
- Currently requested that all visits in the same day are billed on same claim, which may cause unintended bundling
- REQUEST: Need to know frequency. Not enough information at moment to determine how to prioritize

Potential Changes

- High-cost / non-packaged Drug Carveout
- Addressed pricing variation with:
 - 340B Discount Percent Adjustment
 - Specialty drug carveouts
- Other changes?



Prioritization

- Base Rate Development
- National Weights
- Observation
- Modifier 25
- Multiple Visits / Day
- High cost / non-packaged drug carveout

- Best way of obtaining feedback?

Questions or Concerns?



Contact Information

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