

EAPG Monthly Meeting

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

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Mar-18



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GROUND RULES FOR WEBINAR

- **WE WILL BE RECORDING THIS WEBINAR**
- **ALL LINES ARE MUTED. PLEASE UTILIZE WEBINAR CHAT WINDOW**
- Please speak clearly when asking a question and give your name and hospital
- If you wish to utilize the conference line for speaking, please submit the request through webinar chat window. We will temporarily mute the microphones and activate the conference line. This may take a few moments.



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Welcome & Introductions

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



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Upcoming Meetings

2018 Meetings 2:00pm-4:00pm	
03/02/2018	03/30/2018
05/04/2018	06/01/2018

Please Note: All 2018 Meetings will be held at
303 E. 17th Ave Denver Conference Room 7B



Drug Payment in EAPGs

- Appropriateness of 50% reduction for drugs reported with UD modifier
 - The Department planning to modify State Regulation / State Plan for 20% Reduction
- Plan for effective date of July 1, 2018
 - Emergency rule may allow for sooner effective date
- Continue billing at actual acquisition costs



Colorado Rule Change

- Rule update posted on [Outpatient Hospital Payment](https://www.colorado.gov/pacific/hcpf/outpatient-hospital-payment) page
 - <https://www.colorado.gov/pacific/hcpf/outpatient-hospital-payment>
- Public Rule Review Meeting
 - March 12, 2018
- Medical Services Board initial proposal date
 - April 13, 2018
- Medical Services Board final proposal date
 - May 11, 2018
- **All above dates may change depending on emergency rule status**
- Additional non-specific language to accommodate implementation of potential rate change closer to effective date



EAPG Groupers Version Update

- 3M released new grouper version on 12/27/2017
 - V2018.0.1 active in DXC system as of 1/13/2018
- DXC implemented new grouper version but did not implement new Payment Schedule - distinct procedure modifier claims are not processing correctly
- Will be addressed in upcoming adjustment
 - Less than 400 claims anticipated



Mass Adjustment Updates

- Distinct Procedure Modifiers effective 1/1/2018
 - Refer to previous slide
- Charges from non-covered revenue codes
 - Impacted claims adjudicated between 10/20/2017 and 1/13/2018
 - 15,393 claims reprocessed on 2/22/2018
- 2018 CPT/HCPCS Updates
 - Monitoring closely to determine if action is necessary



Mass Adjustment Updates

- Duplicate Claim Adjustments
 - Department worked to identify most recently submitted claim
 - Should have been processed and released by 1/19 financial cycle
 - Hospitals will need to analyze claim to verify “correct” claim is paid in series of duplicate submissions
- Denied Claim Analysis
 - Claims that were denied for timely filing originally processed in Xerox system



Mass Adjustment Updates

- EAPG Claims processed in Xerox MMIS as Percent of Charge
 - 12,900 claims submitted for reprocessing
 - Results will inform remainder of schedule
 - More than 400,000 claims to be reprocessed
 - Technical limitations will likely mean these are reprocessed over multiple financial cycles



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Crossover Claims

- Crossover claim logic still being worked in interChange system
 - Claims should be paid as sum of Medicare Coinsurance and Medicare Deductible
 - Part B Only (TOB 12X) - assessing variety of solutions with attention to complexity / timeliness of implementation
 - Denying 12Xs Not Feasible option for proper reporting
 - Solutions being assessed - minimum 6 months until resolution implemented



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Recurring Visits Clarification and ED/Observation Billing

- Emergency Room visits should not be included on outpatient claims describing recurring visits (regularly scheduled visits for ongoing treatment, such as physical therapy or oncology treatment). Emergency Room visits should be billed separately in order for the EAPG grouper to calculate payment appropriately per claim and visit. Recurring visits which may include Observation services should have each visit billed separately to avoid unintended bundling during payment calculation.



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Questions or Concerns?



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