

# MPRRAC Meeting

**February 19, 2016**  
9am to Noon

Guest Presenters – Alex Koloskus  
Ana Lucaci  
Elizabeth Lopez  
Lila Cummings



**COLORADO**

Department of Health Care  
Policy & Financing

# *Agenda*

Meeting & Minutes Review

9:00–9:10 AM

Guiding Principles

9:10–9:30 AM

Laboratory Services

9:30–10:15 AM

**Break**

**10:15–10:25 AM**

Private Duty Nursing Services

10:25–11:10 AM

Home Health Services

11:10–11:55 AM

Closing Remarks

11:55 AM–12:00 PM



# ***Guiding Principles***

## ***Discussion***



# *Laboratory Services*

Guest Presenters – Ana Lucaci  
Elizabeth Lopez



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Department of Health Care  
Policy & Financing

**DRAFT - Calculations are preliminary.**

# ***Expenditure Snapshot***

MRRAC rates as a portion of total Medicaid spend



# *Service Description*

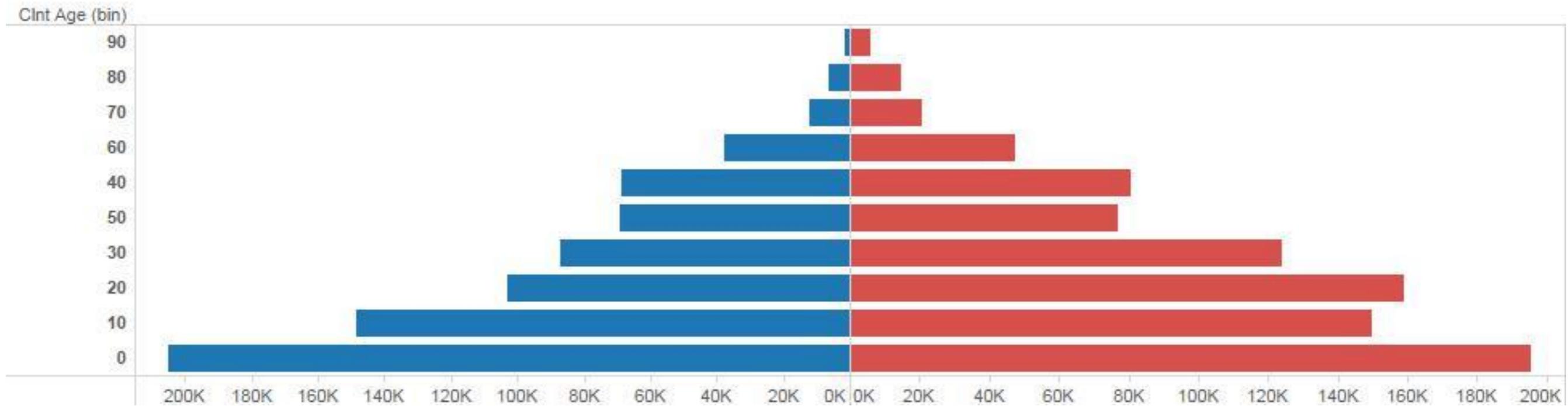
- Services where bodily fluids or specimens are collected and analyzed for screening and treatment of diseases and disorders.
- Available to all Colorado Medicaid clients.
- Providers that render laboratory services must have certification from the Clinical Laboratory Improvement Amendments (CLIA) Program
- CLIA-approved laboratories include independent laboratories, hospital laboratories, and clinics or physician practices (for certain services approved through CLIA waiver).



**DRAFT - Calculations are preliminary.**

# Demographics

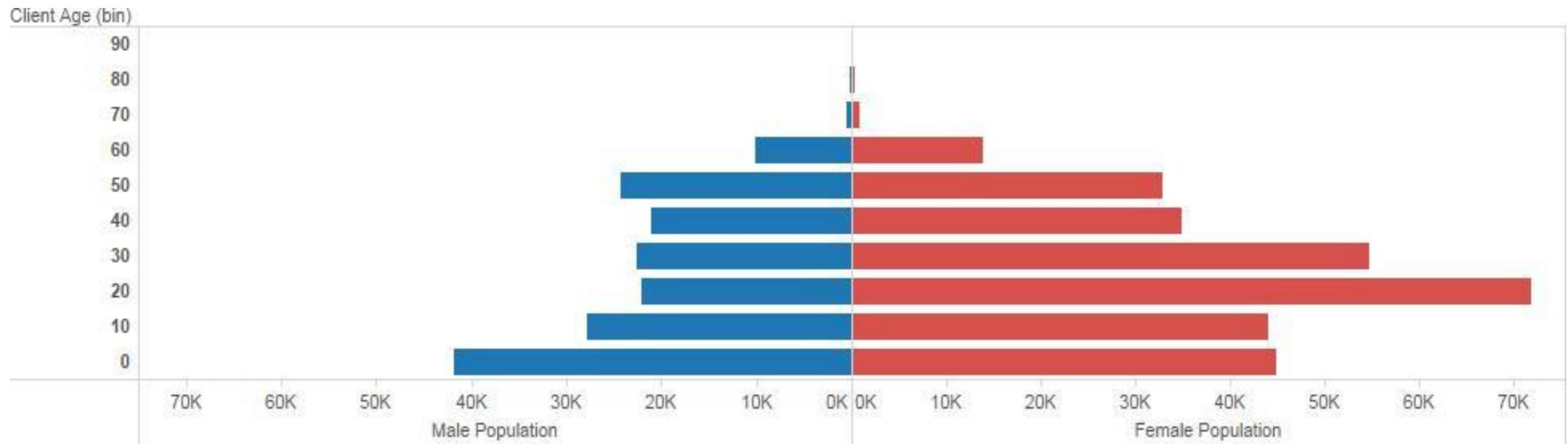
Population pyramid of all Medicaid clients by age and gender.



**DRAFT - Calculations are preliminary.**

# Demographics

Population pyramid of laboratory services by age and gender.

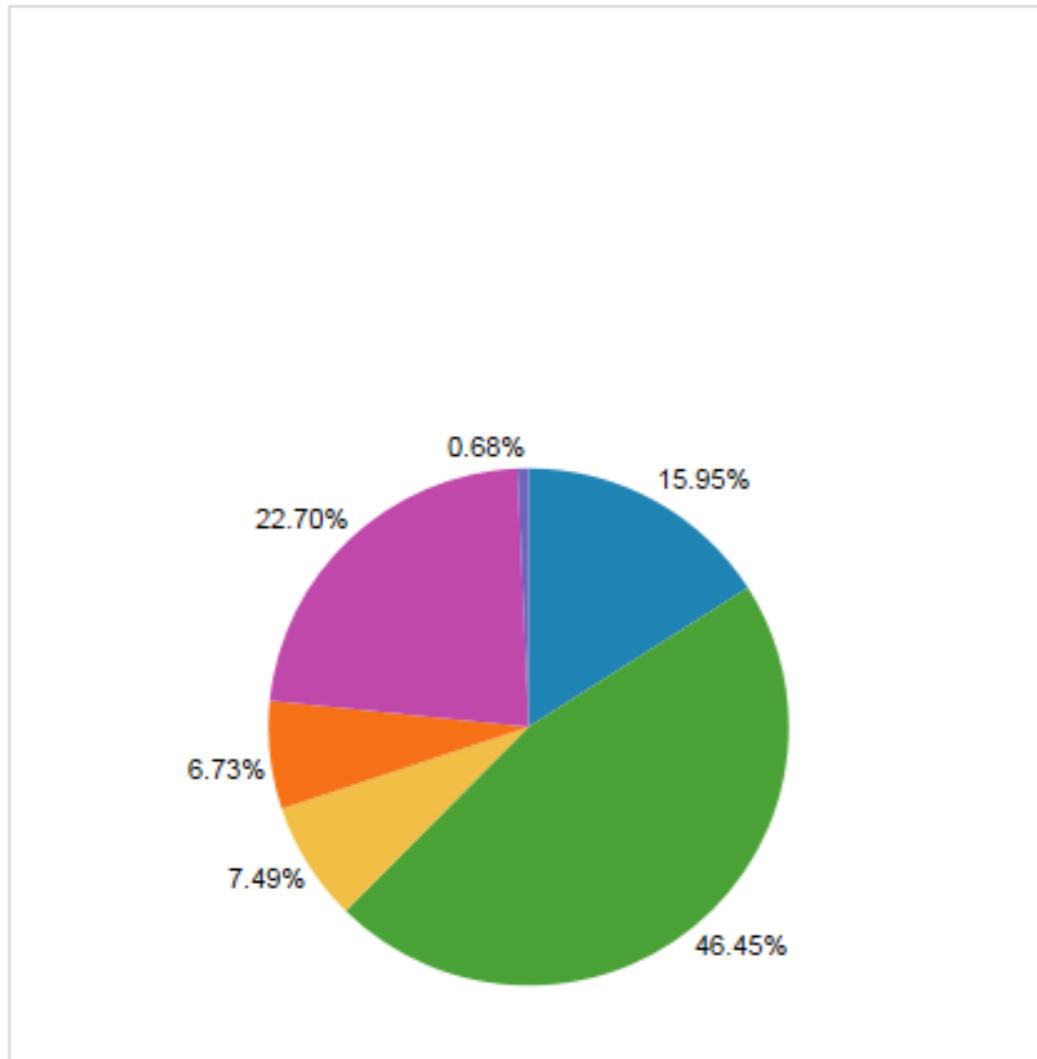


**DRAFT - Calculations are preliminary.**

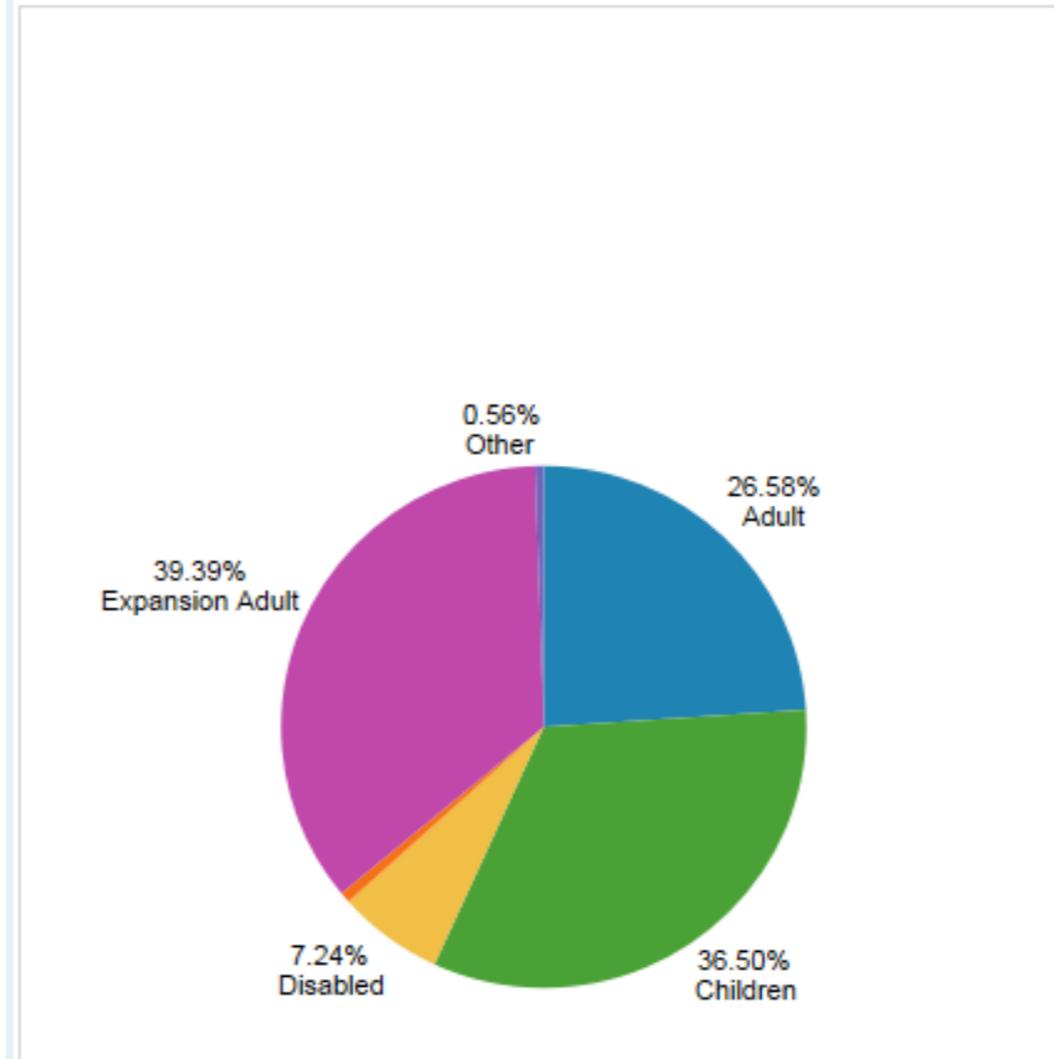
# Demographics

Graphs represent all Medicaid clients (left) and laboratory service utilizers (right) by population, which is determined by eligibility type.

Medicaid Population



Lab Utilizer Population



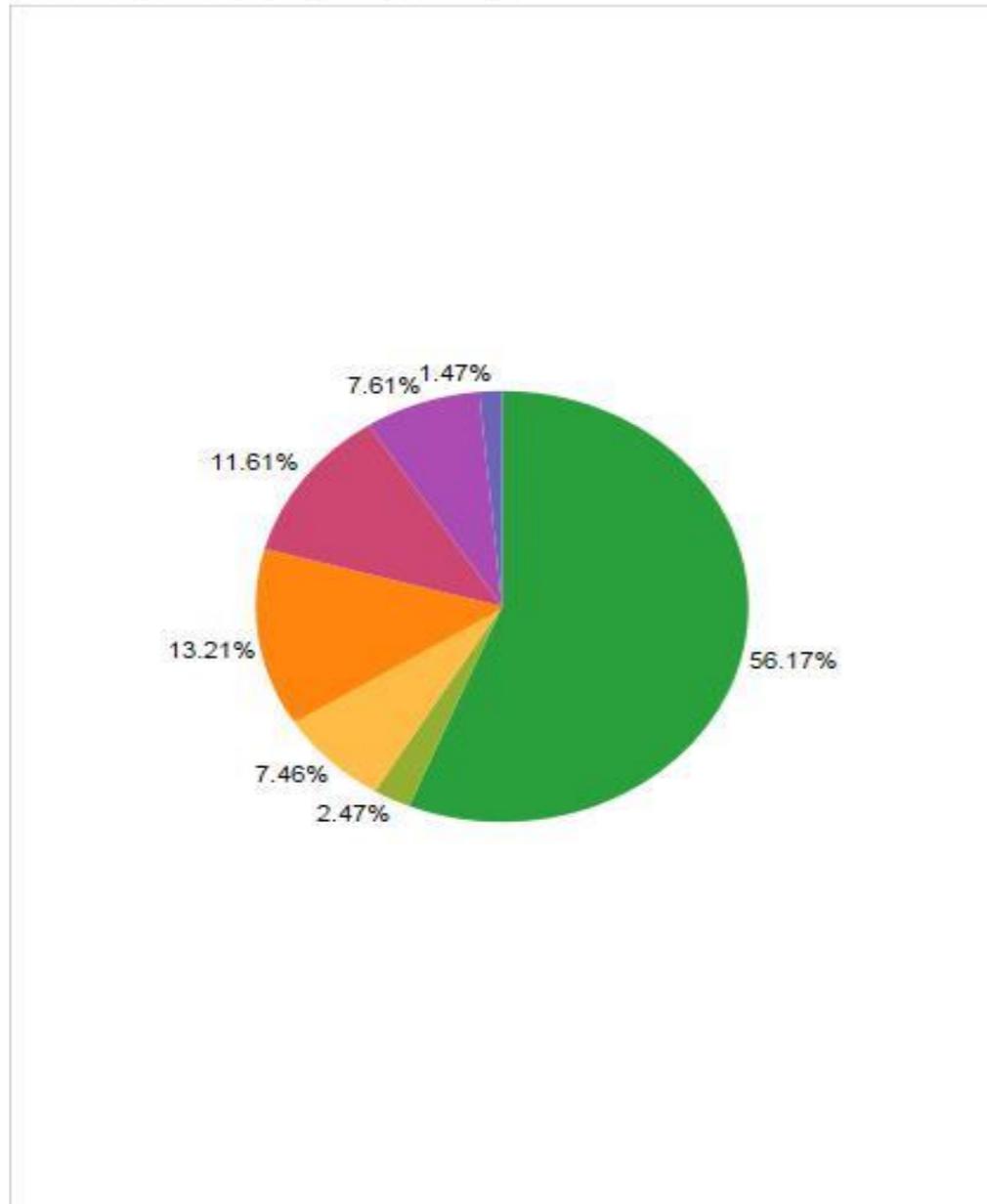
- Adult
- Children
- Disabled
- Elderly
- Expansion Adult
- Other

**DRAFT - Calculations are preliminary.**

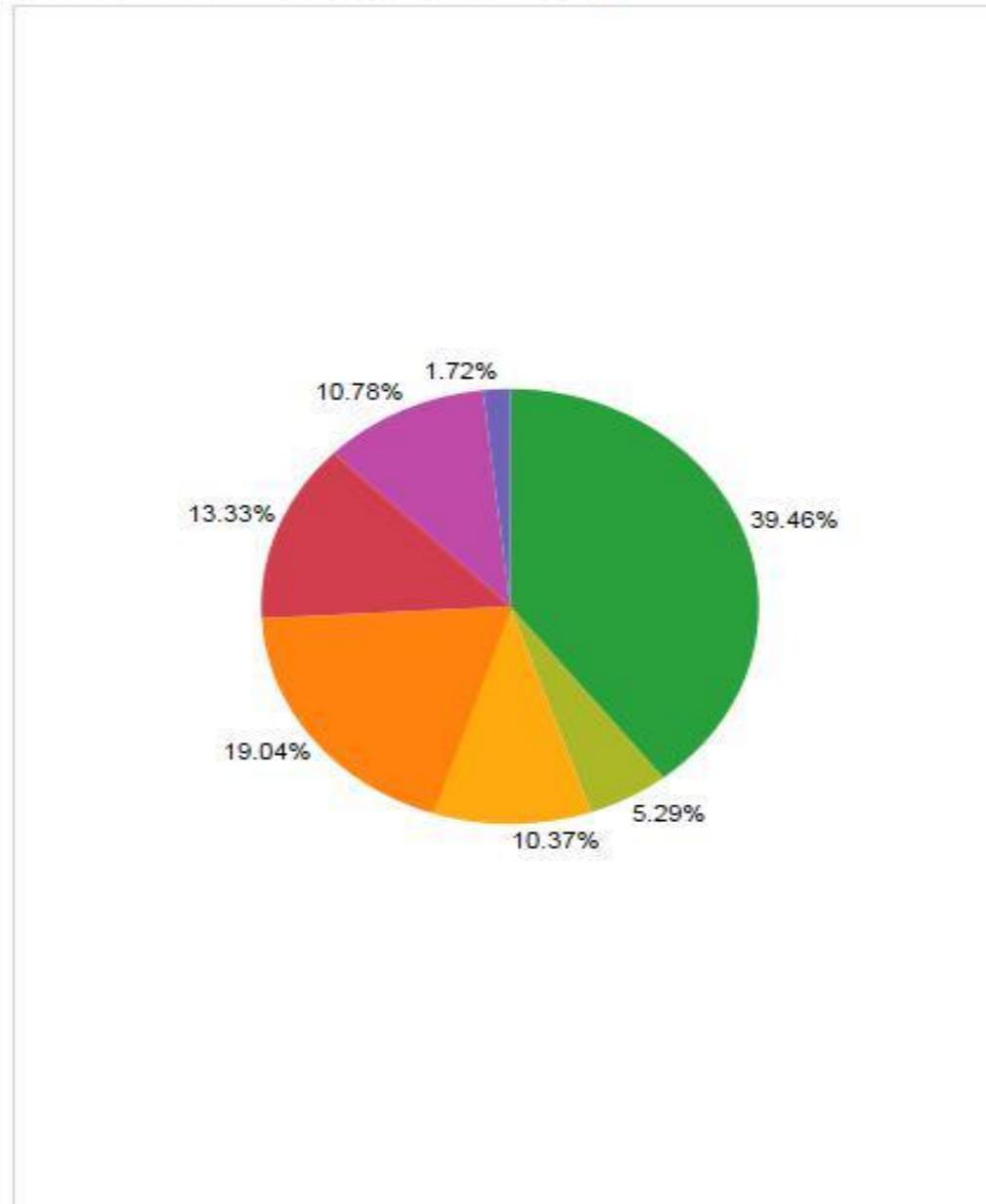
# Demographics

Graphs represent all Medicaid clients (left) and laboratory service utilizers (right) by clinical risk groups.

Medicaid Clinical Risk Group



Lab Utilizer Clinical Risk Groupings



- Healthy & Non Users
- Pregnancy/Delivery
- Minor Chronic
- Moderate Chronic
- Dominant Chronic
- Significant Acute
- Malignancies & Catastro..



**DRAFT - Calculations are preliminary.**

# *Utilization*

Summary statistics over two state fiscal years for laboratory services

## Summary Statistics

	<b>FY 2014</b>	<b>FY 2015</b>
<b>Member to Provider Ratio</b>	1,651	1,255
<b>Client Count</b>	349,216	458,490
<b>Avg. Paid Per Utilizer</b>	\$178.36	\$199.77
<b>PMPY</b>	\$67.24	\$98.87
<b>Total Paid</b>	\$62,287,260	\$91,590,514

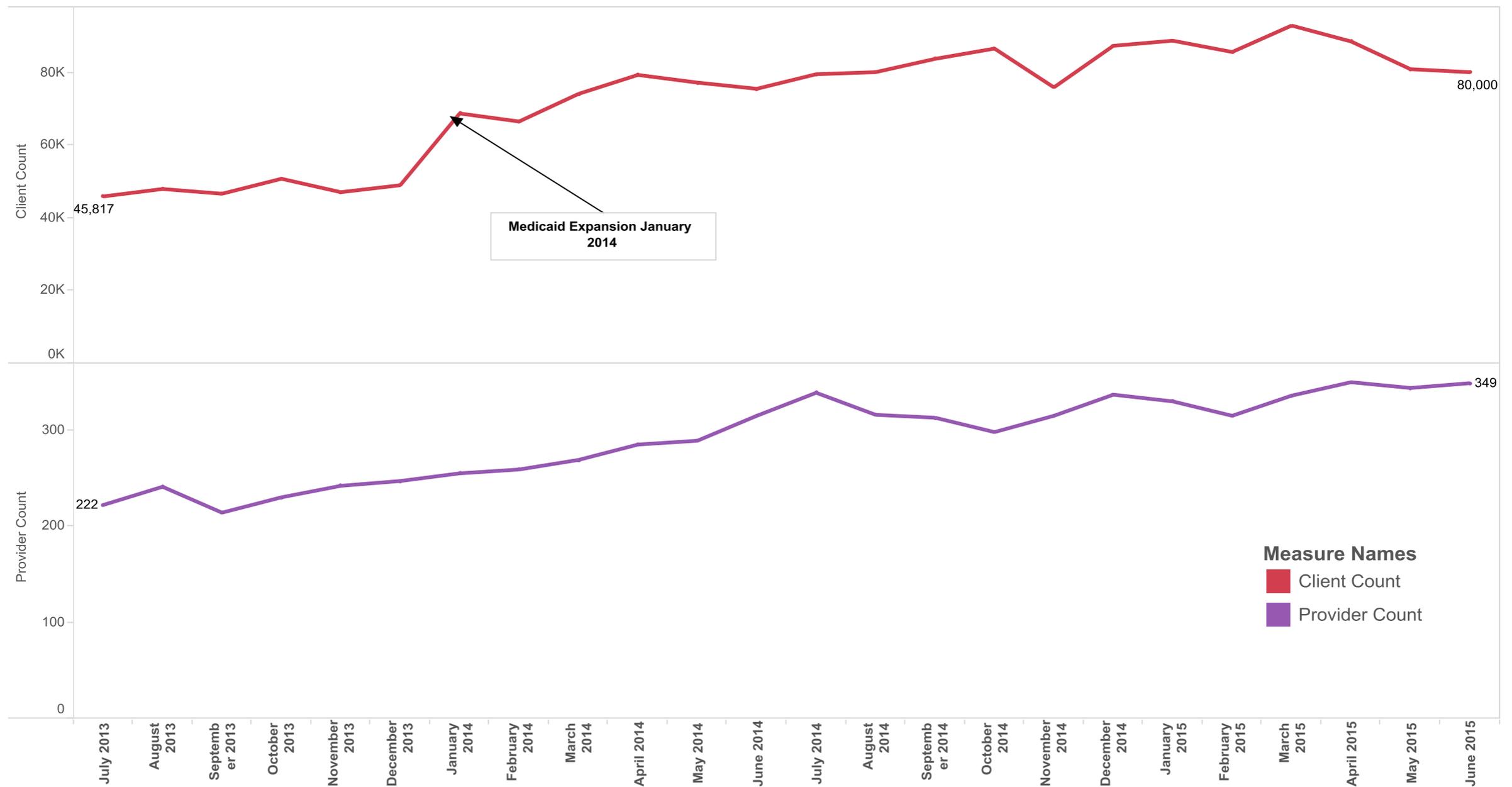
Note: PMPY refers to cost “Per Member Per Year”



**DRAFT - Calculations are preliminary.**

# Utilization

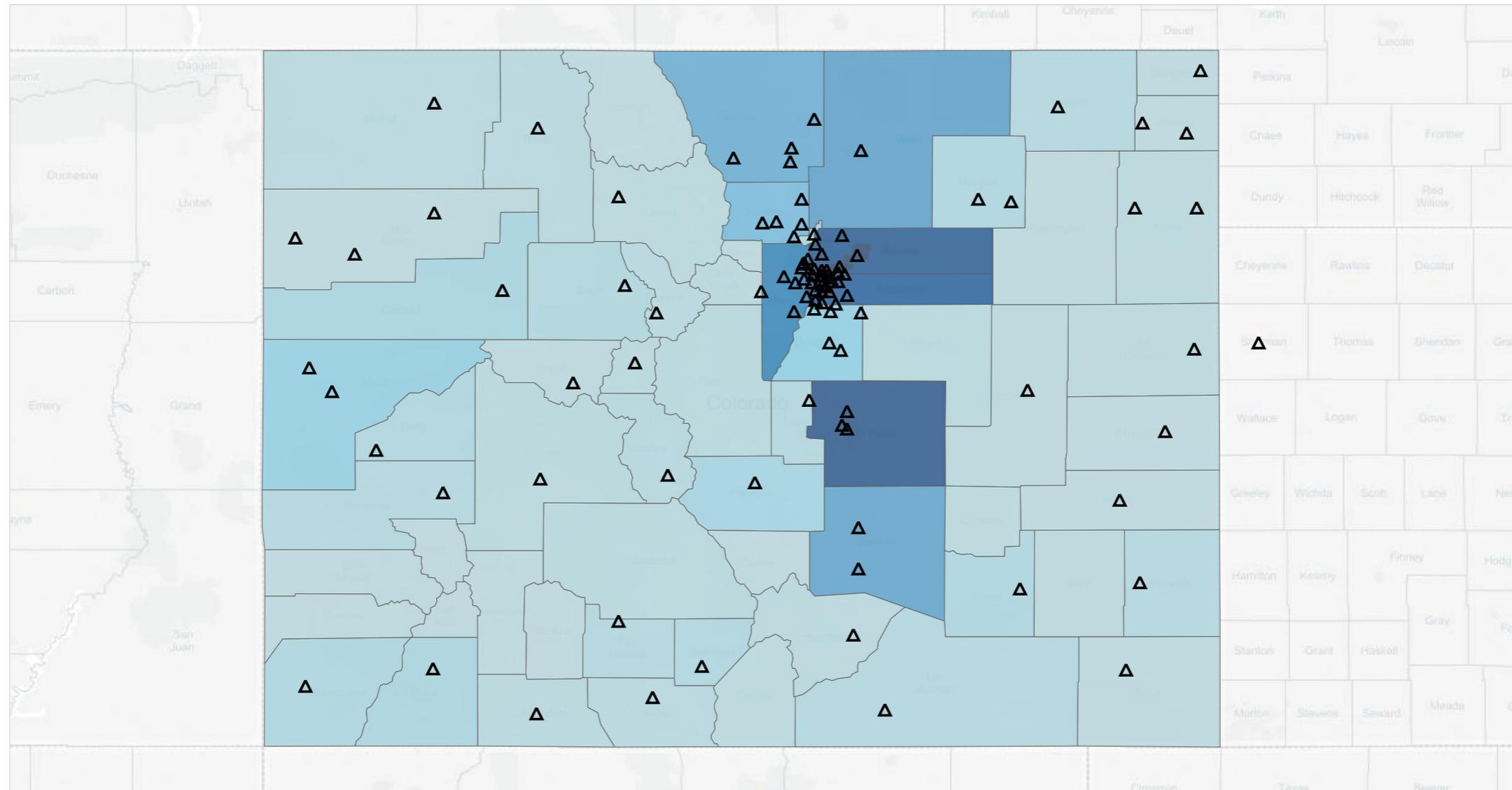
Changes in the number of clients utilizing services (top) and number of providers of laboratory services (bottom) over two state fiscal years.



**DRAFT - Calculations are preliminary.**

# *Utilization*

Heat map of the number of clients utilizing laboratory services by county.



**Client Count**  
44  66,646

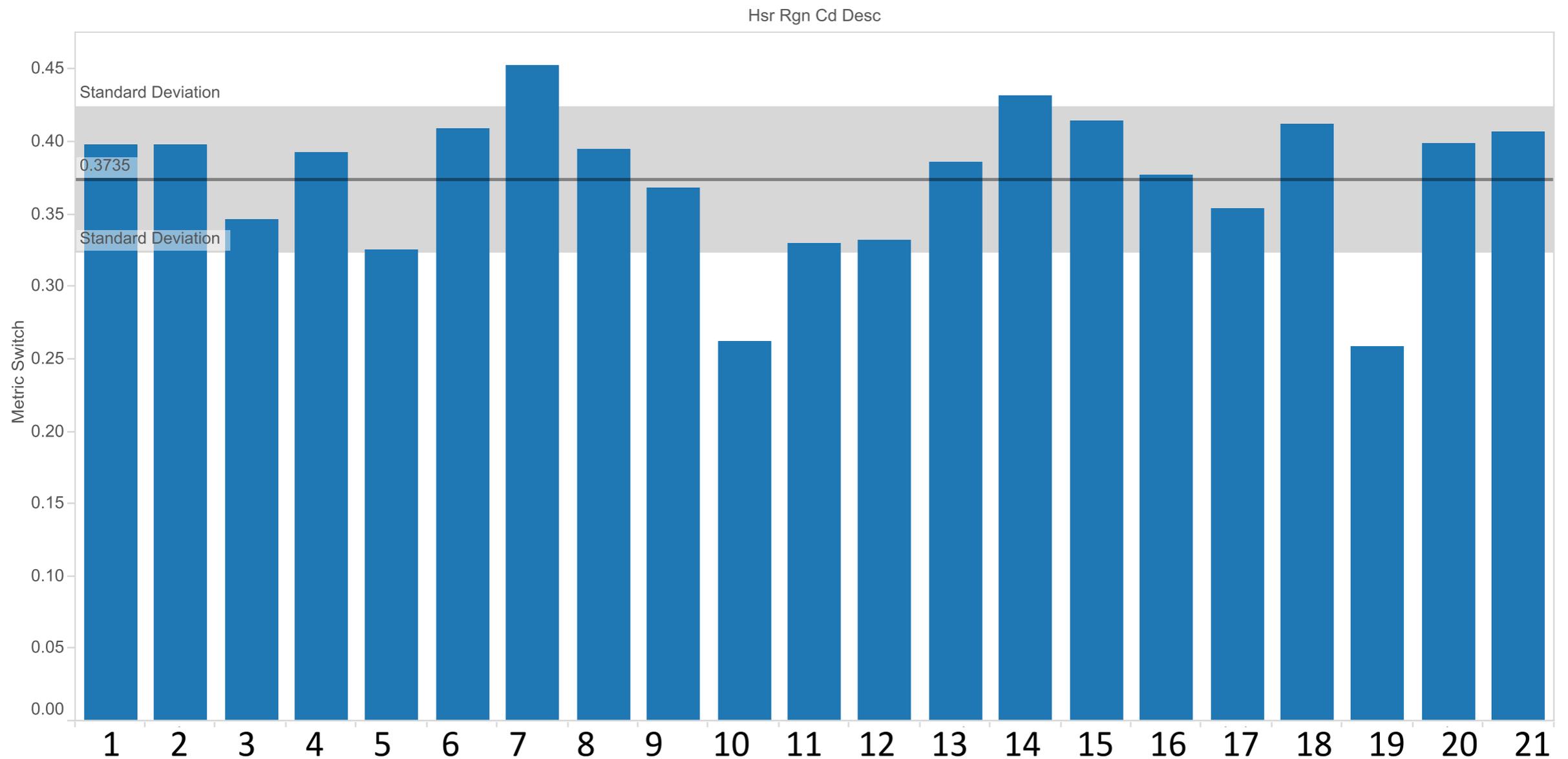
Note: Triangles represent billing zip code of providers



**DRAFT - Calculations are preliminary.**

# Access

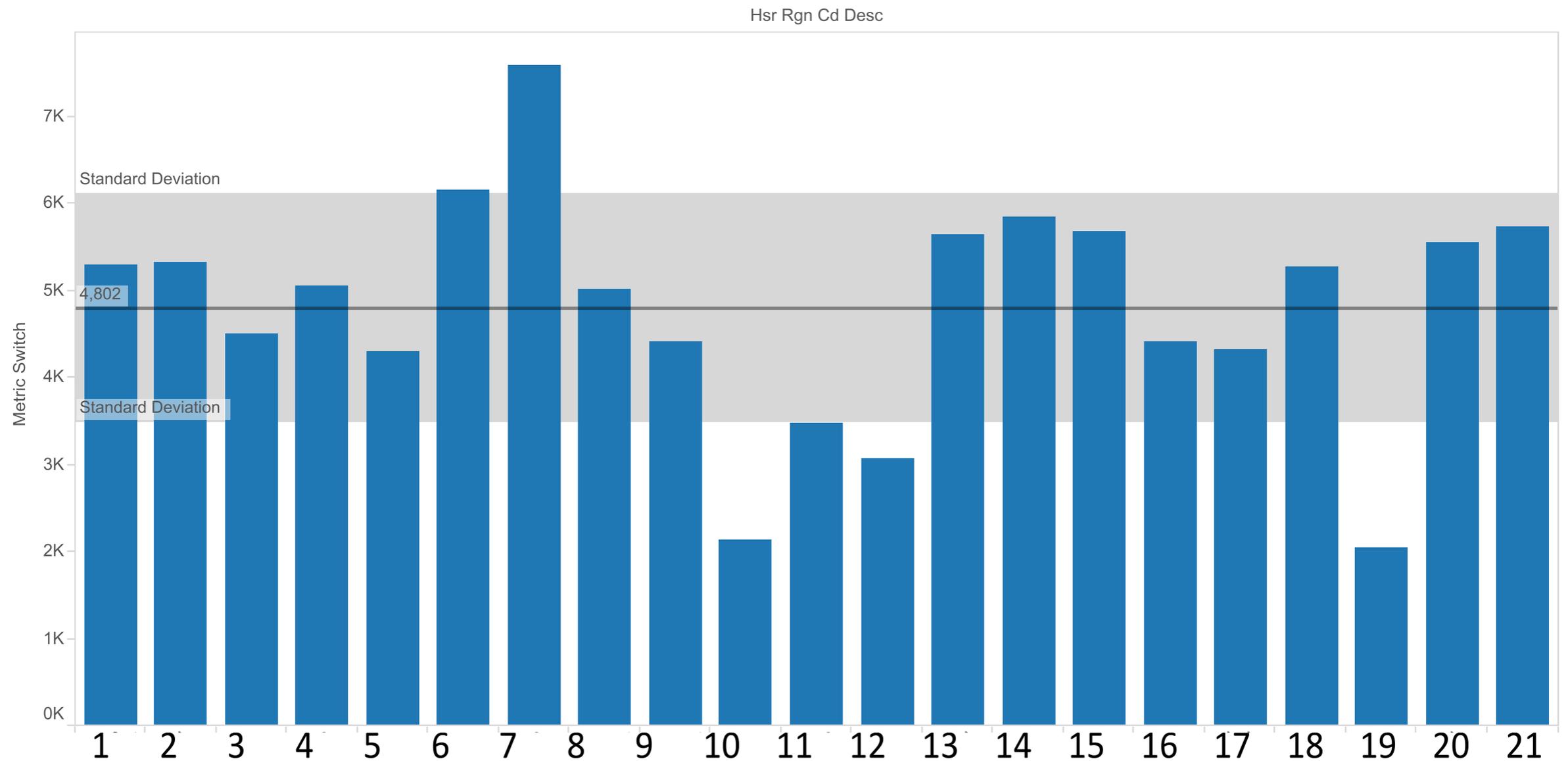
Percent of the Medicaid population utilizing laboratory services in each Health Statistics Region (see HSR Map Handout for region definitions).



**DRAFT - Calculations are preliminary.**

# Access

Number of laboratory services utilized per 1000 Medicaid clients by Health Statistics Region (see HSR Map Handout for region definitions).



# *Quality*

- CLIA regulations, established by the Center for Medicare and Medicaid Services (CMS), set standards for quality control and quality assurance for laboratories.
- CMS has delegated compliance oversight duties, which include certification and on-site inspections, to the Colorado Department of Public Health and Environment.



# *Private Duty Nursing Services*

Guest Presenters – Alex Koloskus  
Elizabeth Lopez



**COLORADO**  
Department of Health Care  
Policy & Financing

# ***PDN Service***

- Continuous one-to-one skilled nursing care provided by an RN or LPN.
- Available to Colorado Medicaid clients who are dependent on medical technology and need a higher level of care than is available in the Home Health benefit.
  - Per the CO's State Plan, PDN services are limited to 16 hours per day. Through EPSDT federal regulations, children aged 20 and younger are evaluated on a case-by-case basis to determine the medically necessary amount of PDN care needed per day above the 16 hour limit.
- Providers that render PDN services must be employed by a licensed and certified Home Health agency.
- PDN services require prior authorization and are assessed using the PDN acuity tool and the client's plan of care.

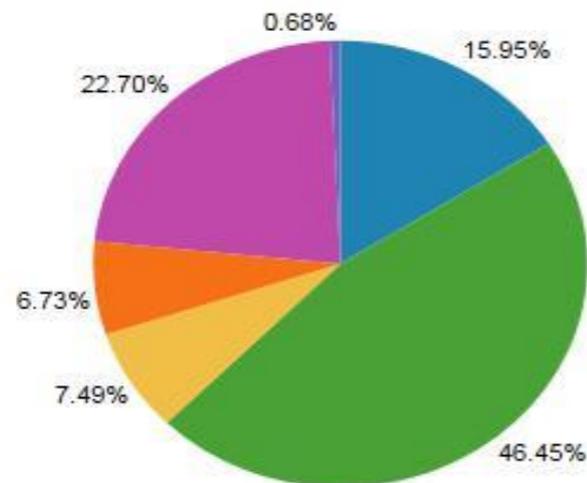


**DRAFT - Calculations are preliminary.**

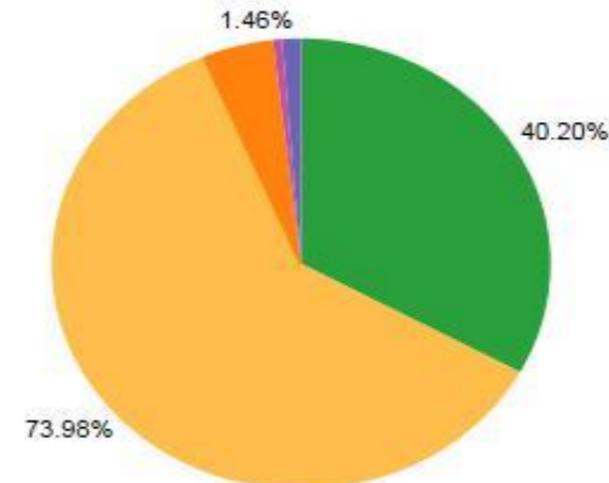
# Demographics

Graphs represent all Medicaid clients (left) and private duty nursing utilizers (right) by population, which is determined by eligibility type.

Medicaid Population



PDN Population

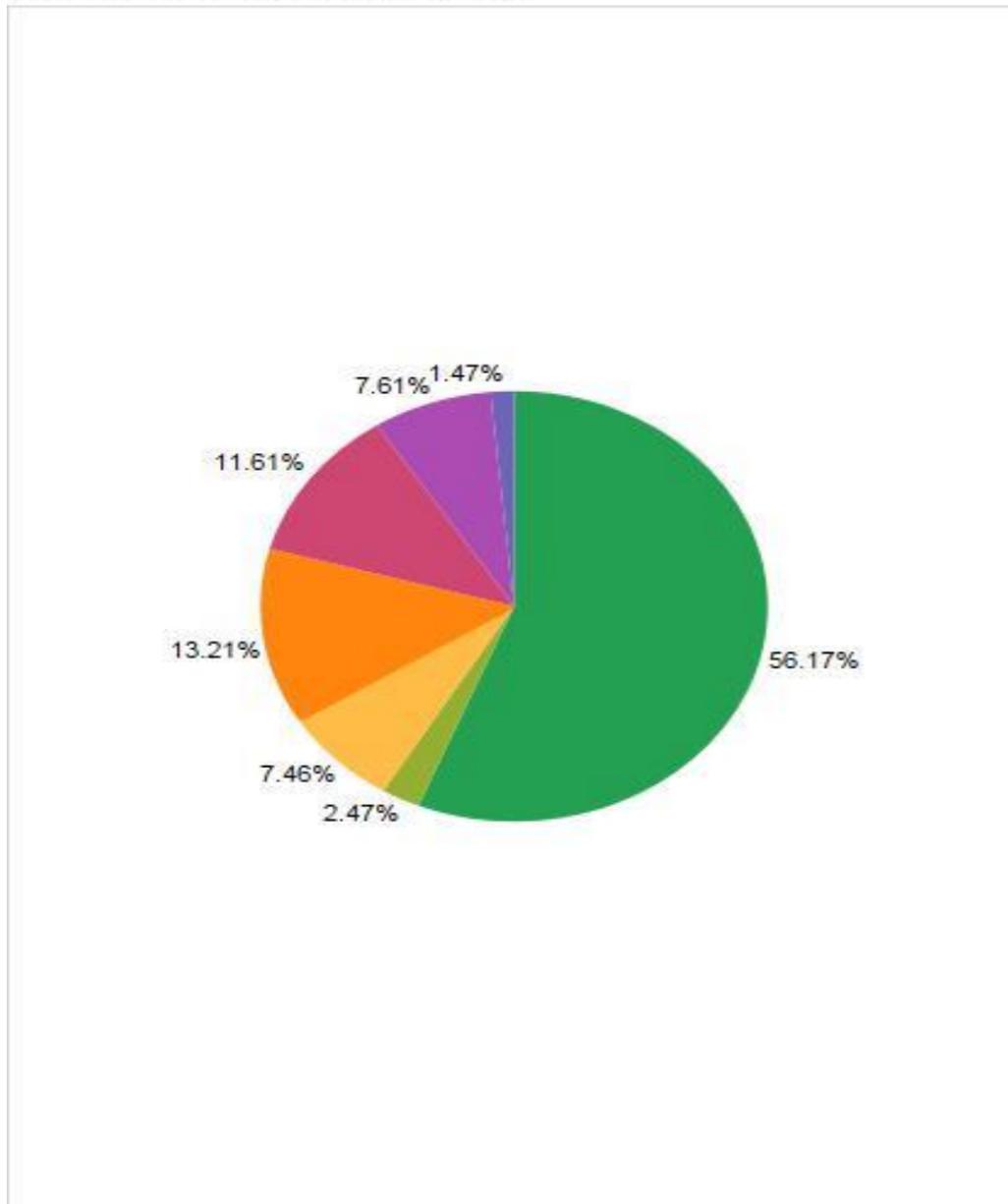


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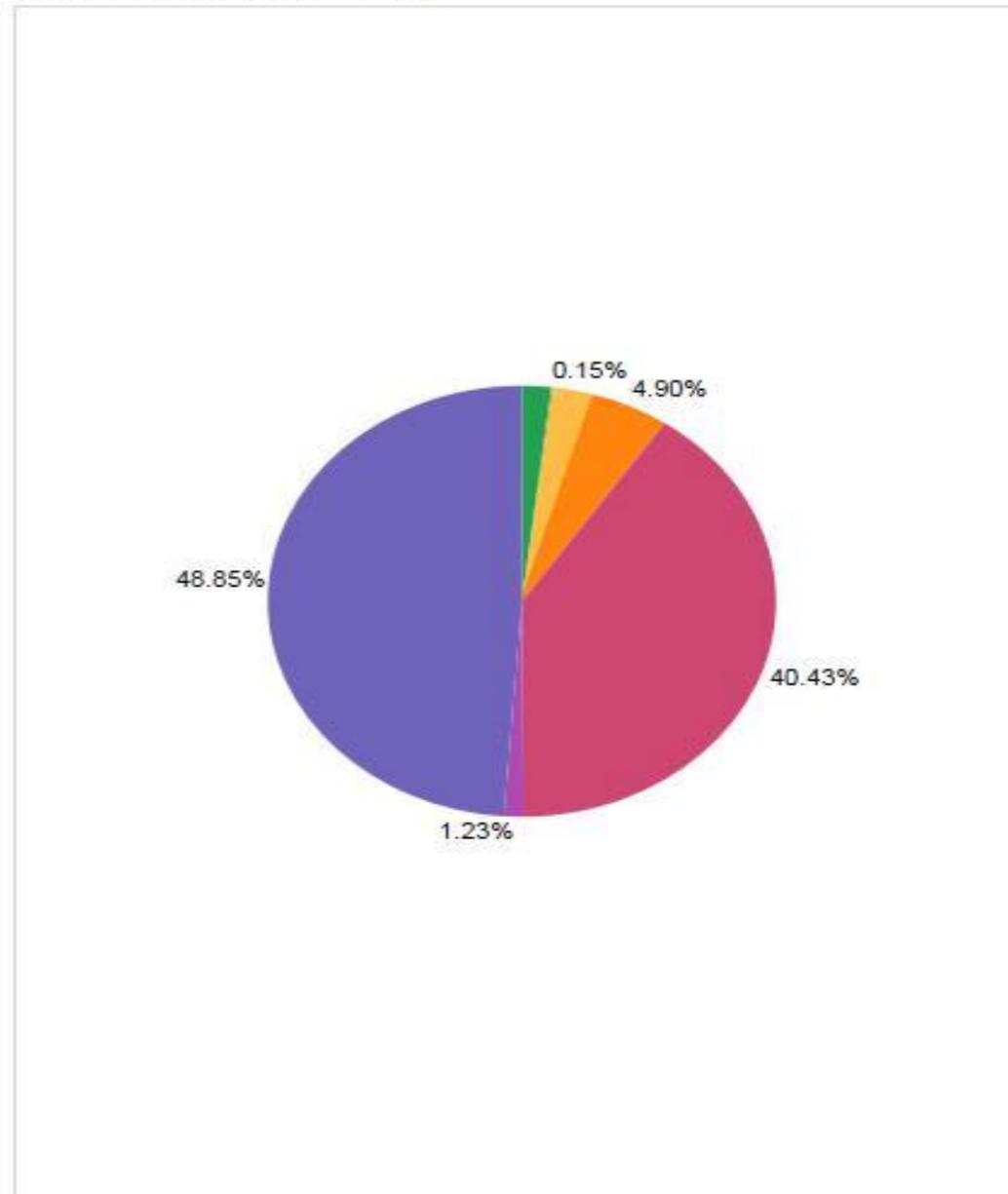
# Demographics

Graphs represent all Medicaid clients (left) and private duty nursing utilizers (right) by clinical risk groups.

Medicare Clinical Risk Group



PDN Clinical Risk Group



- Healthy & Non Users
- Pregnancy/Delivery
- Minor Chronic
- Moderate Chronic
- Dominant Chronic
- Significant Acute
- Malignancies & Catastro...



**DRAFT - Calculations are preliminary.**

# *Utilization*

Summary statistics over two state fiscal years for private duty nursing services.

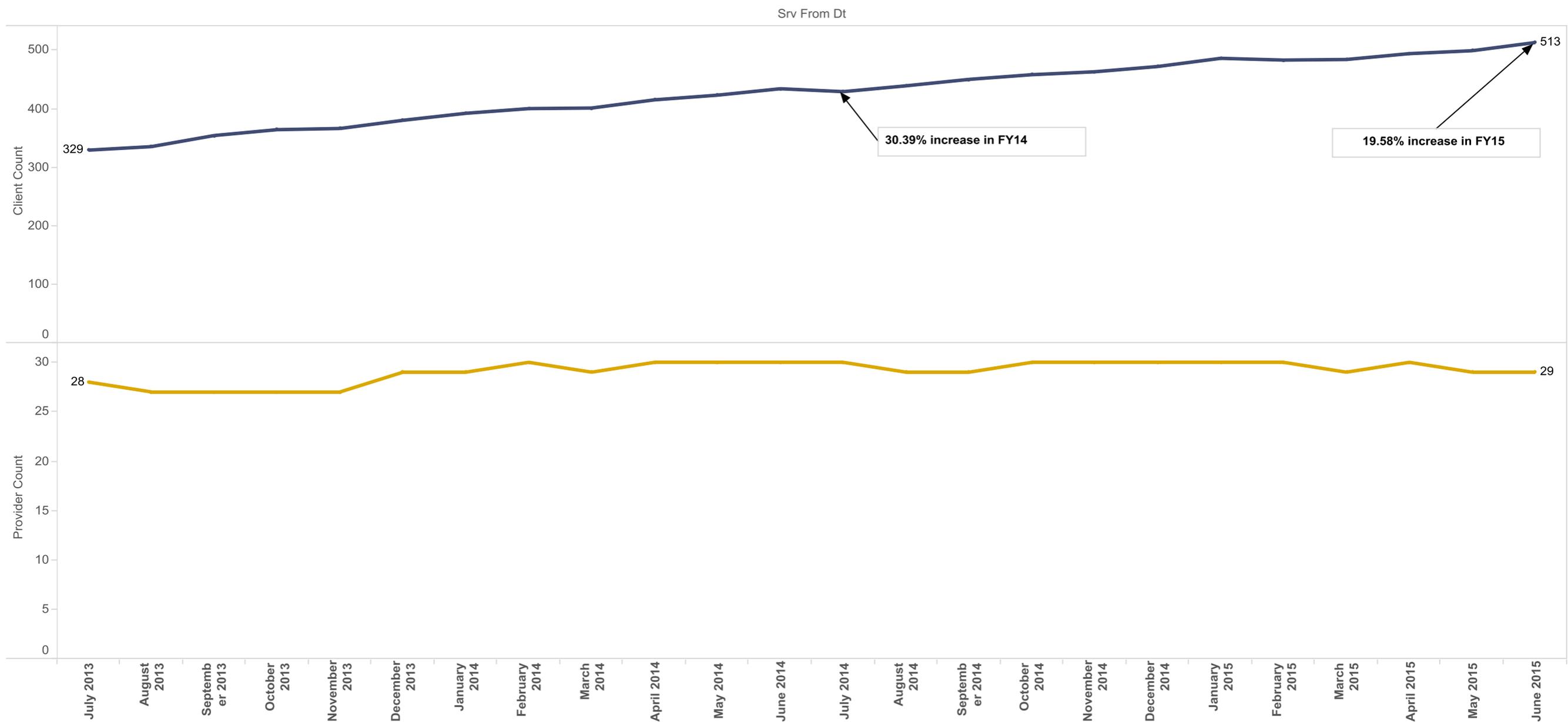
	FY 2014	FY 2015
Client Count	502	614
Avg. Paid Per Utilizer	\$105,085	\$102,338
Total Paid	\$52,752,670	\$62,835,661



**DRAFT - Calculations are preliminary.**

# Utilization

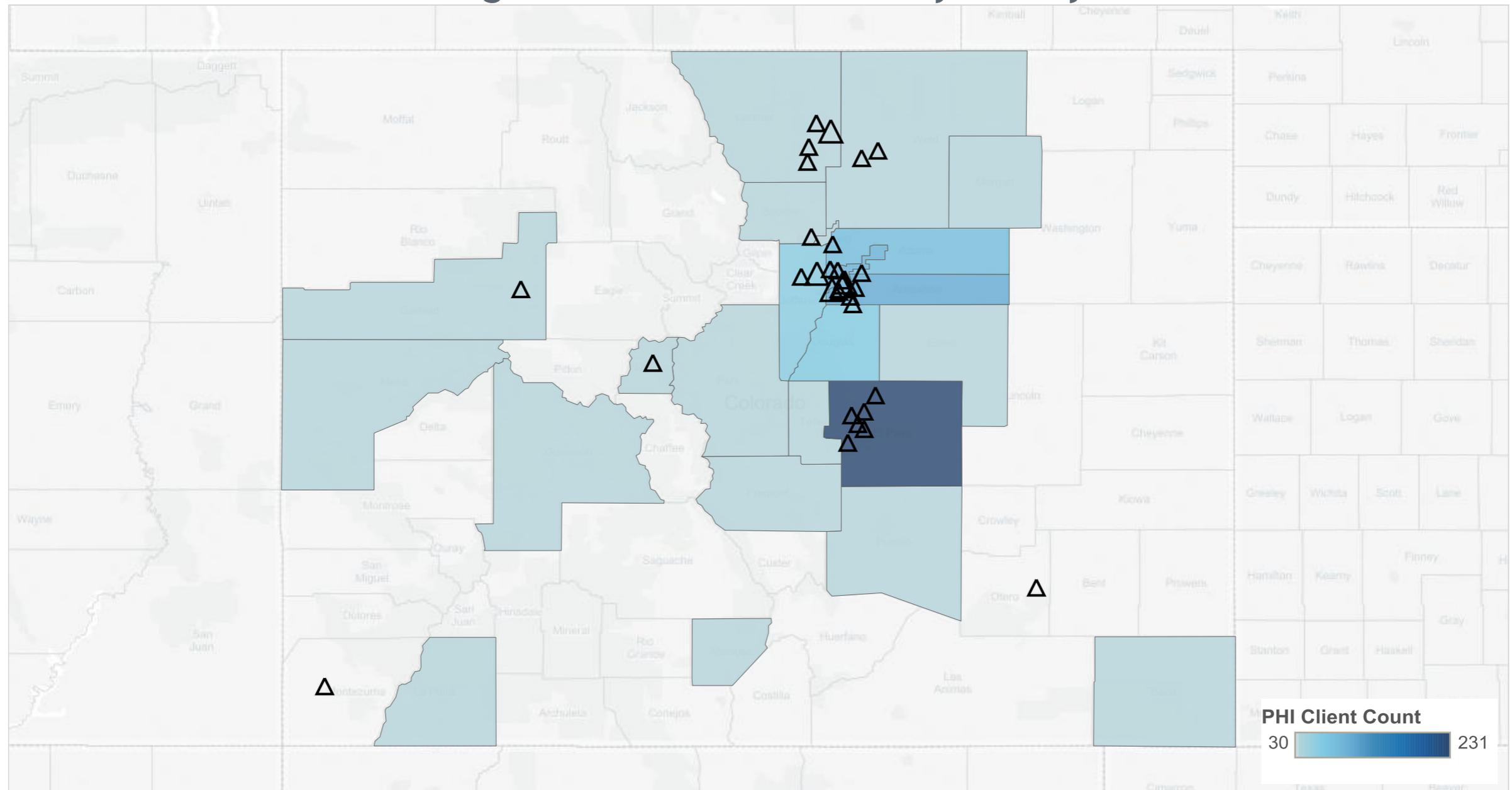
Changes in the number of clients utilizing services (top) and number of providers of private duty nursing services (bottom) over two state fiscal years.



**DRAFT - Calculations are preliminary.**

# *Utilization*

Number of clients utilizing home health services by county. Fiscal Year 14



Note: Triangles represent billing zip code of providers

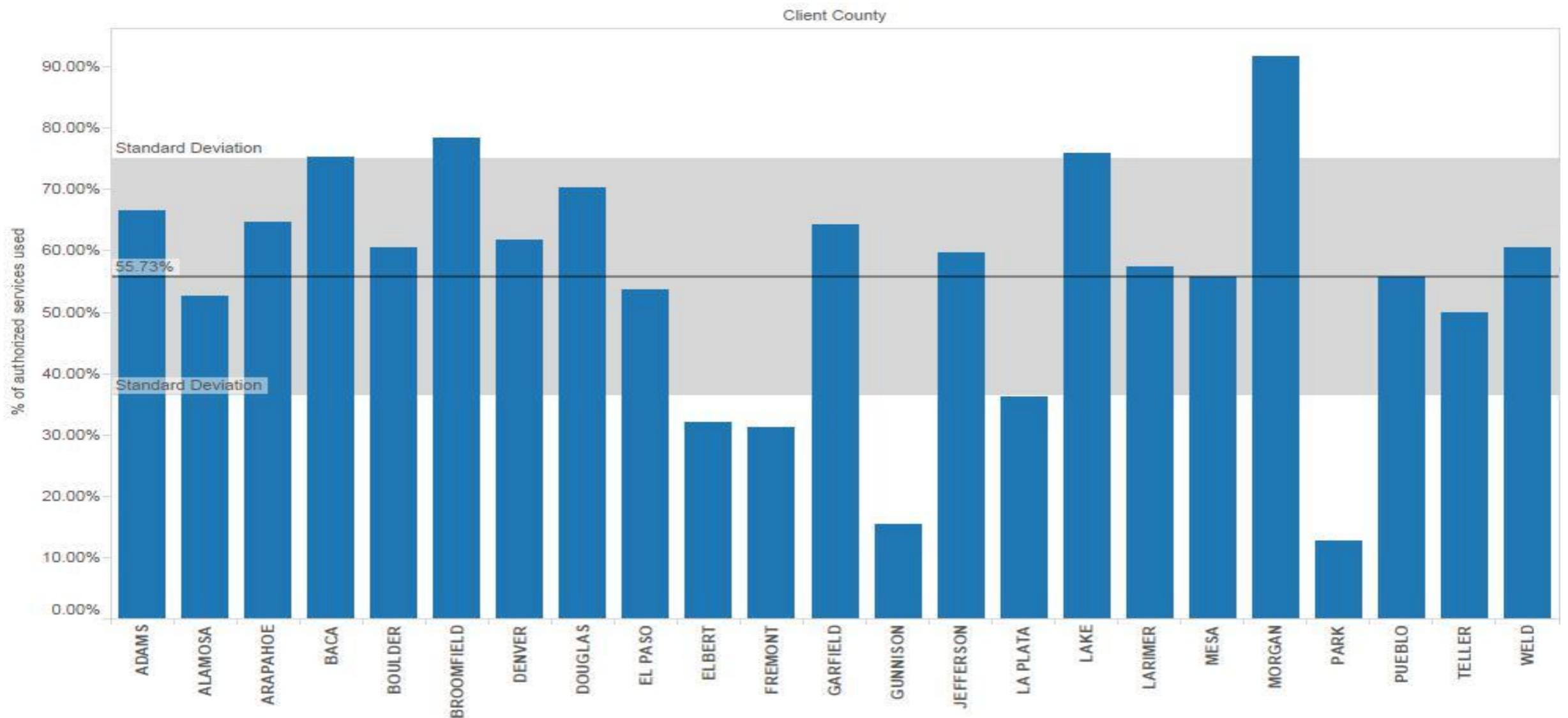




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# Access

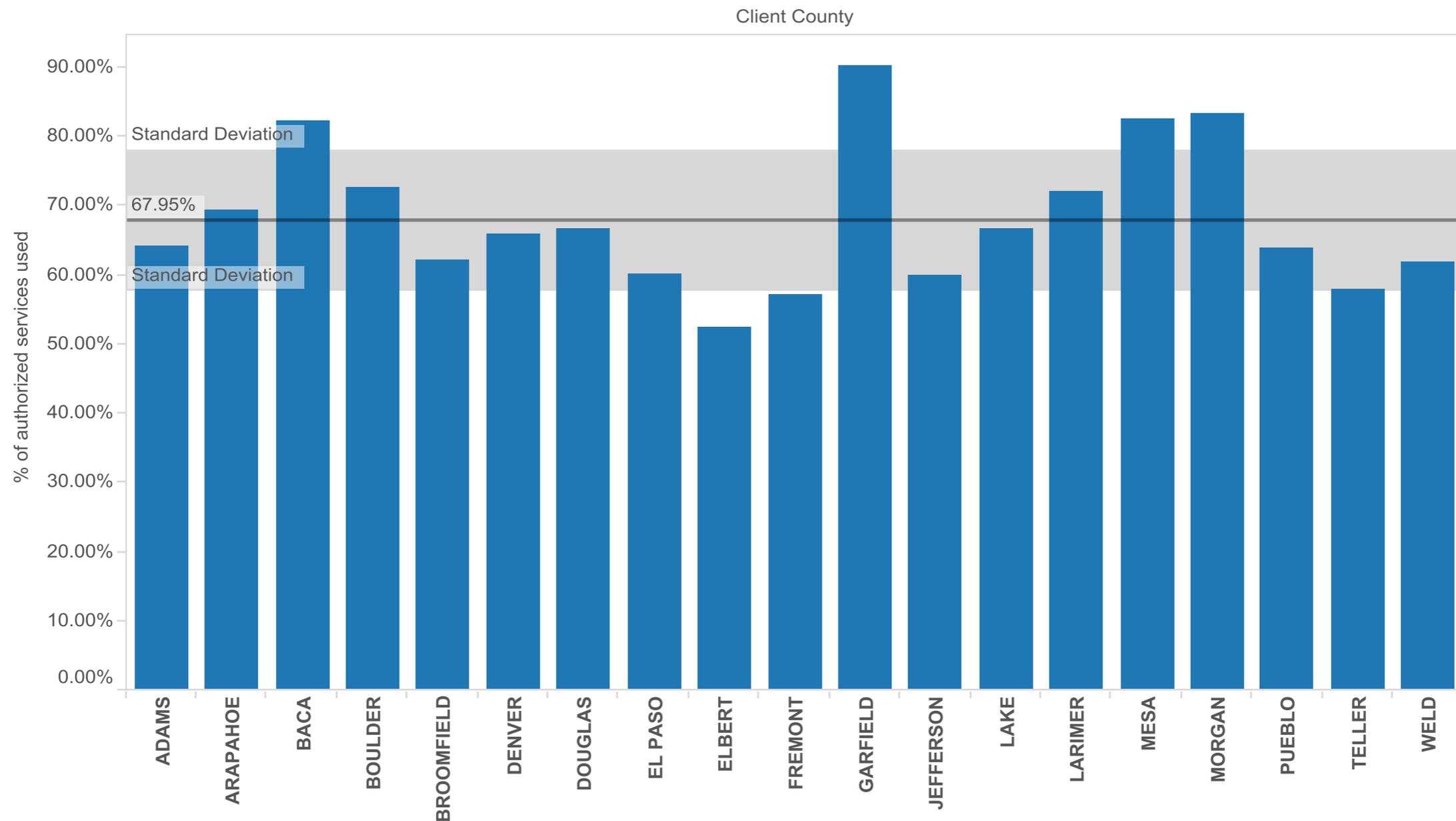
Of the private duty nursing services that were authorized through a Prior Authorization Request, percent of services utilized in each county by county. Fiscal year 2014



**DRAFT - Calculations are preliminary.**

# Access

Of the private duty nursing services that were authorized through a Prior Authorization Request, percent of services utilized in each county by county. Fiscal year 2015



# *Quality*

- Colorado Department of Health Care Policy and Financing:
  - Waiver-specific population surveys that may serve as proxy quality measure for PDN clients.
- Colorado Department of Public Health and Environment:
  - Monitors all Home Health Agencies through an established quality management program, which is required for licensure.



# *Home Health Services*

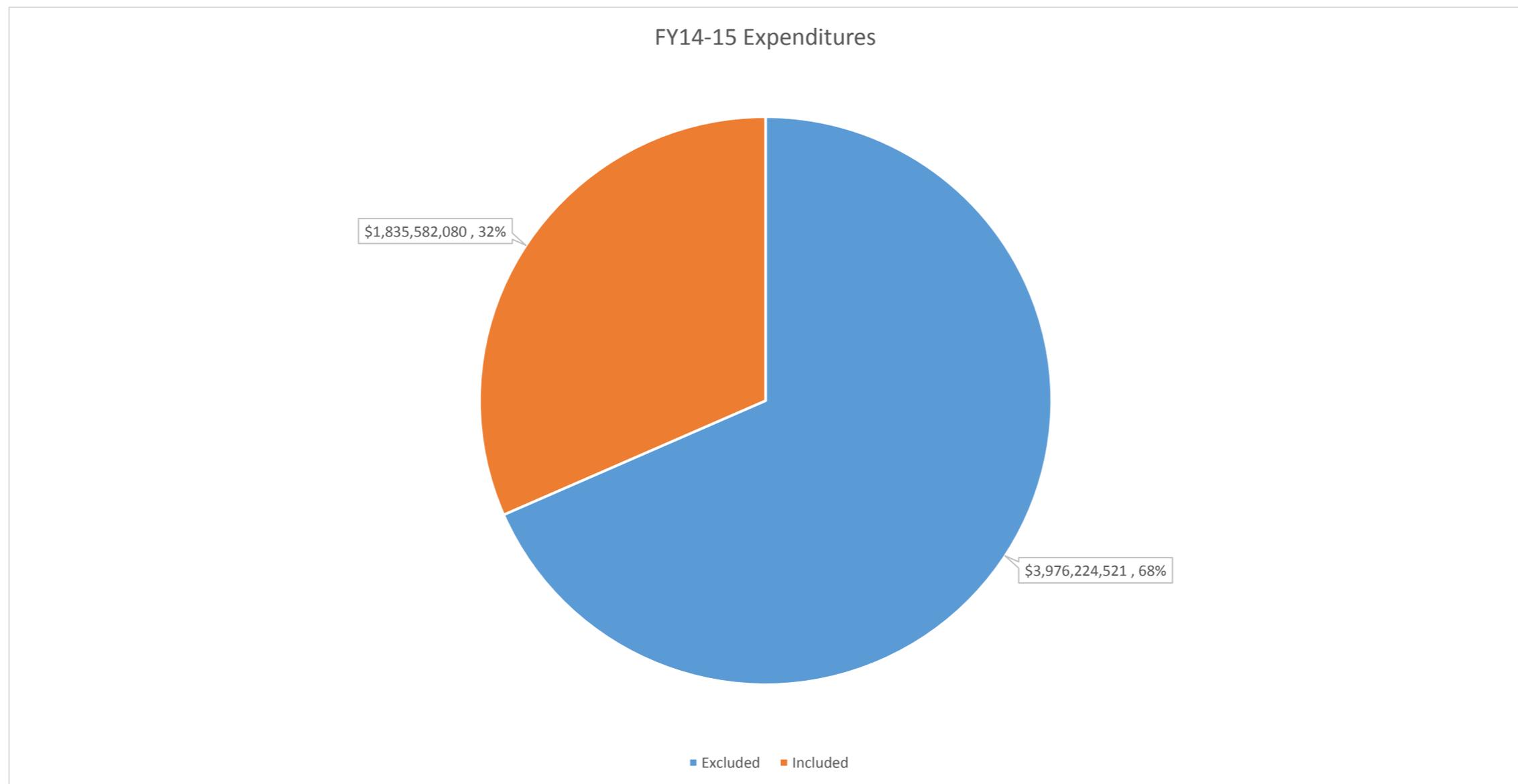
Guest Presenters – Alex Koloskus  
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# *Expenditure Snapshot*

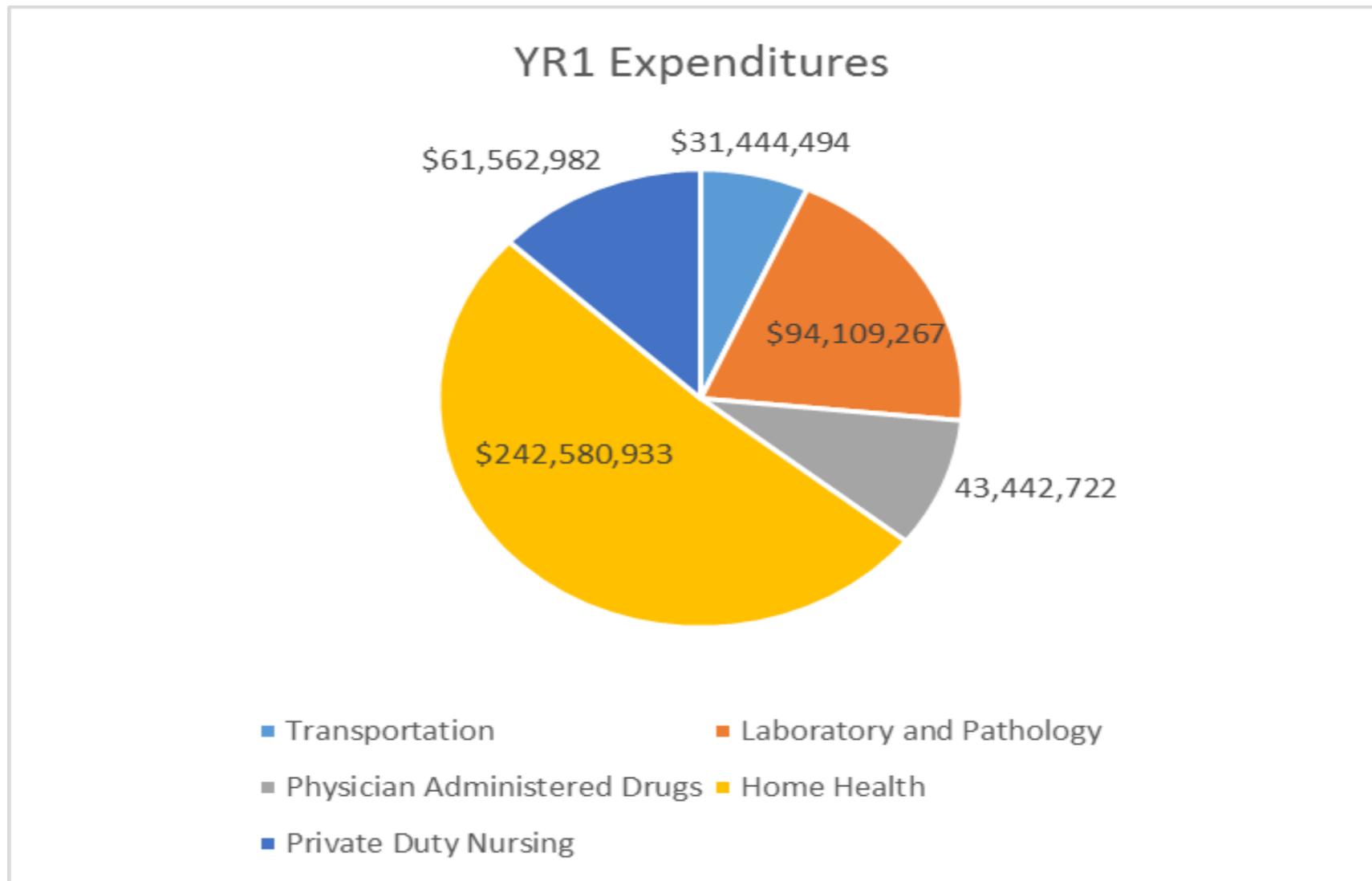
Percent of expenditure of: (1) MPRRAC included services, (2) MPRRAC Year 1 services, and (3) Home Health services.



**DRAFT - Calculations are preliminary.**

# *Expenditure – Year One*

- Share of expenditure by service reviewed for year one



# *HH Service*

- Home Health services consist of skilled nursing, certified nurse aide (CNA) services, physical therapy, occupational therapy, and speech/language pathology services that are provided by a licensed and certified Home Health agency.
- Home Health services are available to Colorado Medicaid clients who need intermittent skilled care in their place of residence.
- Home Health services are divided into two service types:
  - Acute Home Health services are provided for the treatment of acute conditions/episodes (such as post-surgical care) for up to 60 days without prior authorization.
  - Long-Term Home Health is available for clients who require ongoing Home Health Services beyond the 60 day Acute Home Health period. Long-Term Home Health services require prior authorization.



# *HH Service*

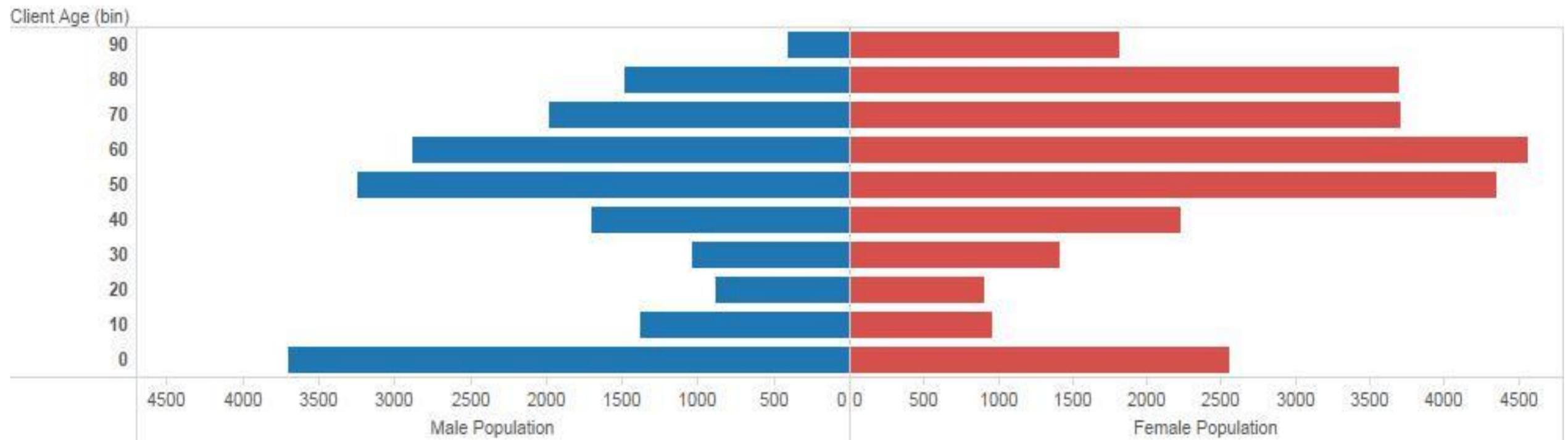
- Clients ages 20 and younger:
  - Are assessed for Long-Term Home Health services using the Pediatric Assessment Tool (PAT) and the client's plan of care.
  - May receive PT, OT and SLP in Acute and Long-Term Home Health periods.
- Clients ages 21 and older:
  - For clients 21 years of age or older, PT, OT and SLP shall only be provided in the Acute Home Health episode.



**DRAFT - Calculations are preliminary.**

# Demographics

Population pyramid of home health service utilizers by age and gender.



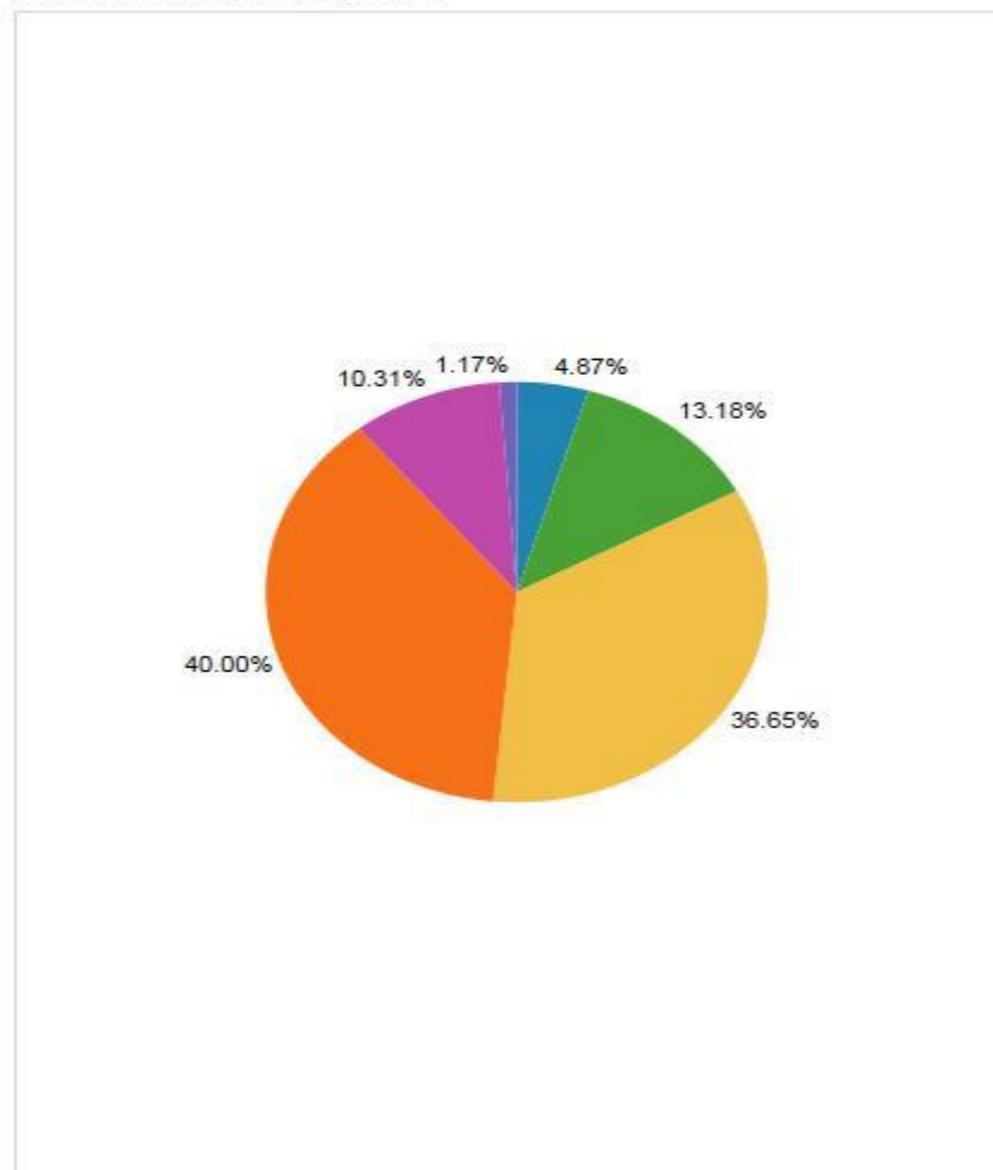
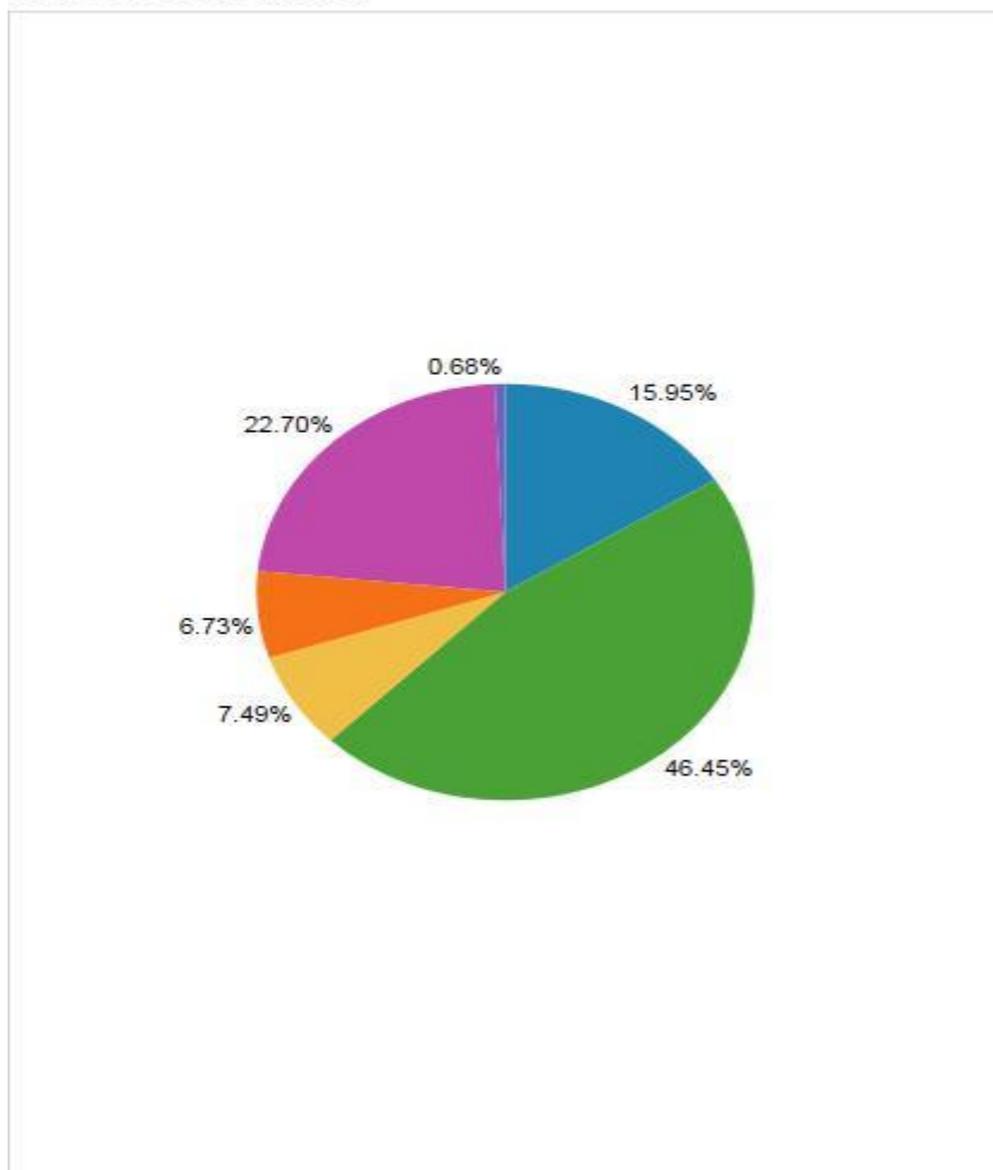
**DRAFT - Calculations are preliminary.**

# Demographics

Graphs represent all Medicaid clients (left) and home health utilizers (right) by population description.

Medicaid Population

Home Health Population

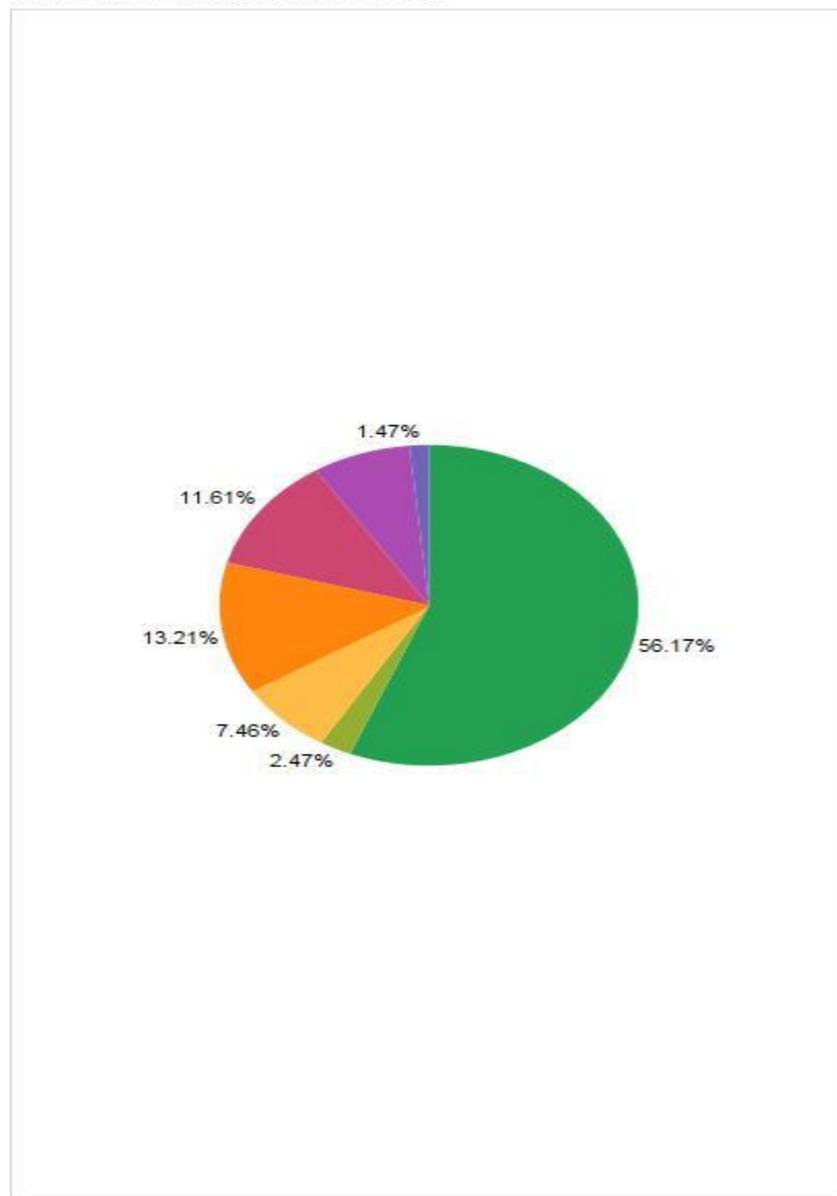


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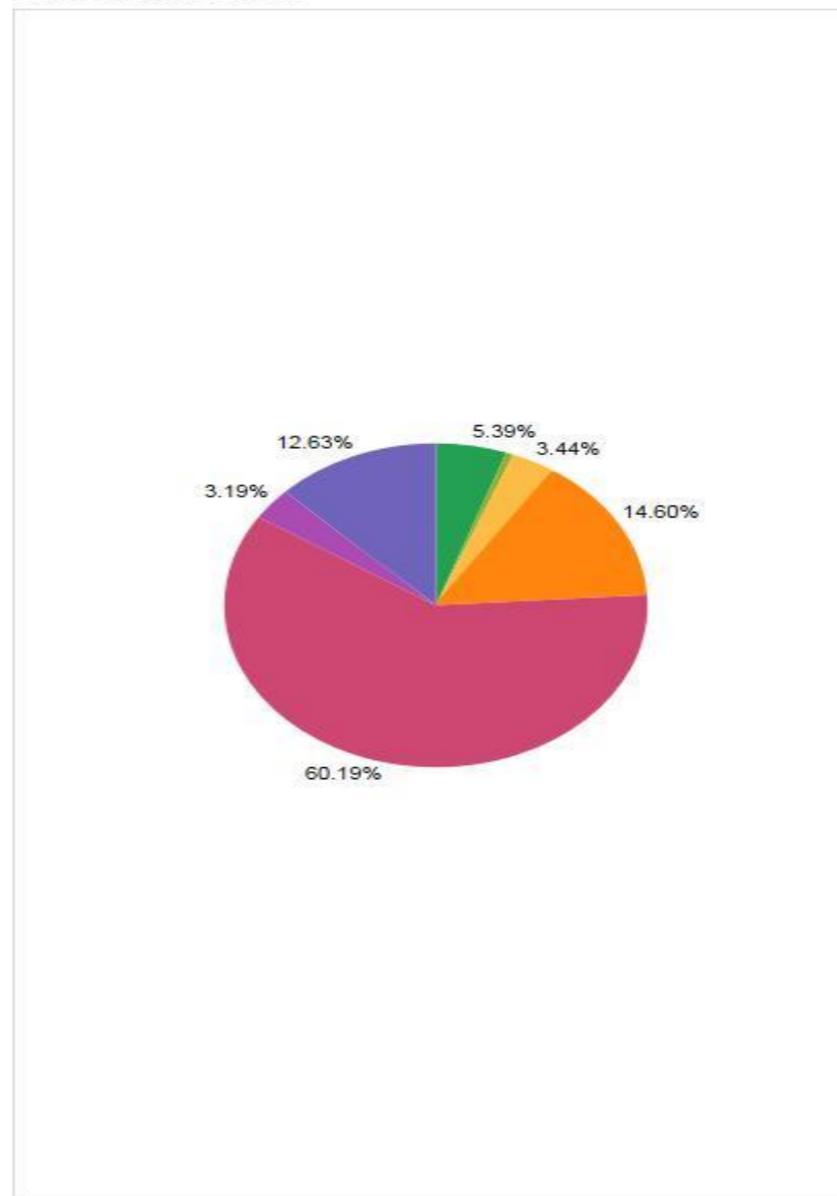
# Demographics

Graphs represent all Medicaid clients (left) and home health utilizers (right) by clinical risk groups.

Medicare Clinical Risk Group



Clinical Risk Group



- Healthy & Non Users
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# *Utilization*

Summary statistics over two state fiscal years for home health services.

## Summary Statistics

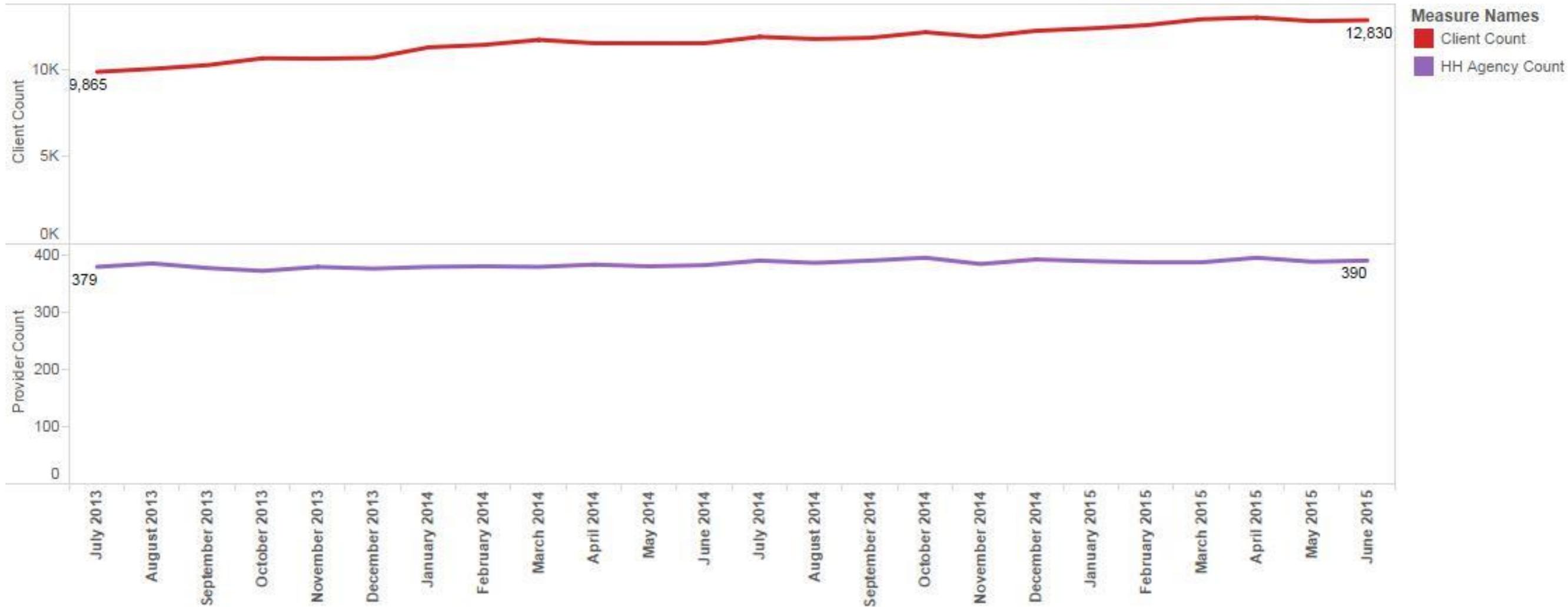
		FY 2014	FY 2015
<b>Acute Home Health</b>	Client Count	20,404	23,305
	PMPY	\$28.30	\$36.93
	Avg. Paid Per Utilizer	\$1,285	\$1,468
	Total Paid	\$26,220,352	\$34,213,113
<b>Long Term Home Health</b>	Client Count	11,298	12,688
	PMPY	\$200.64	\$231.65
	Avg. Paid Per Utilizer	\$16,452	\$16,914
	Total Paid	\$185,873,060	\$214,604,533
<b>Grand Total</b>	Client Count	26,797	30,516
	PMPY	\$228.94	\$268.58
	Avg. Paid Per Utilizer	\$7,915	\$8,154
	Total Paid	\$212,093,412	\$248,817,646



**DRAFT - Calculations are preliminary.**

# Utilization

Changes in the number of clients utilizing services (top) and number of providers of home health services (bottom) over two state fiscal years.

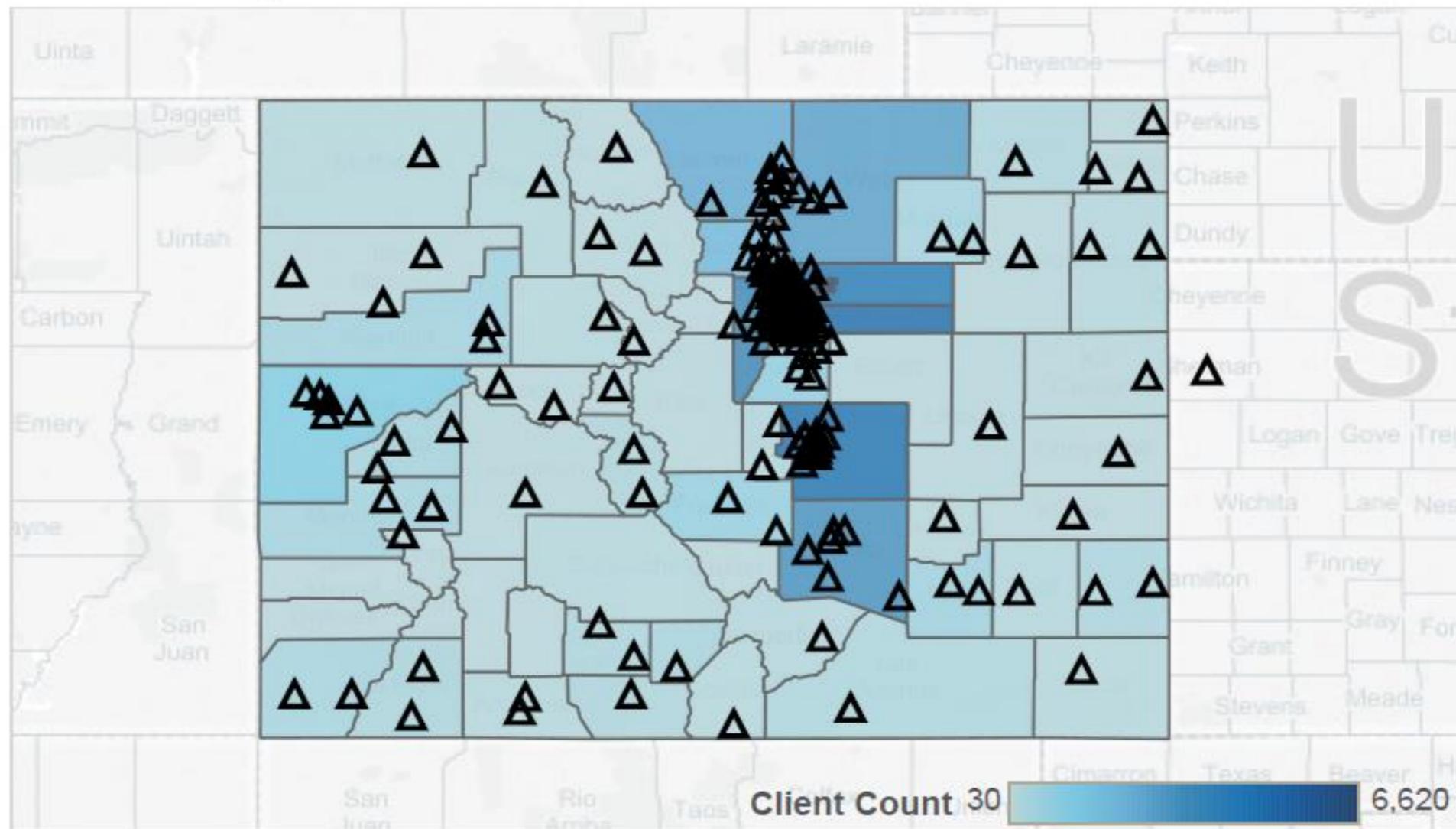


**DRAFT - Calculations are preliminary.**

# *Utilization*

Number of clients utilizing home health services by county.

Distance Map



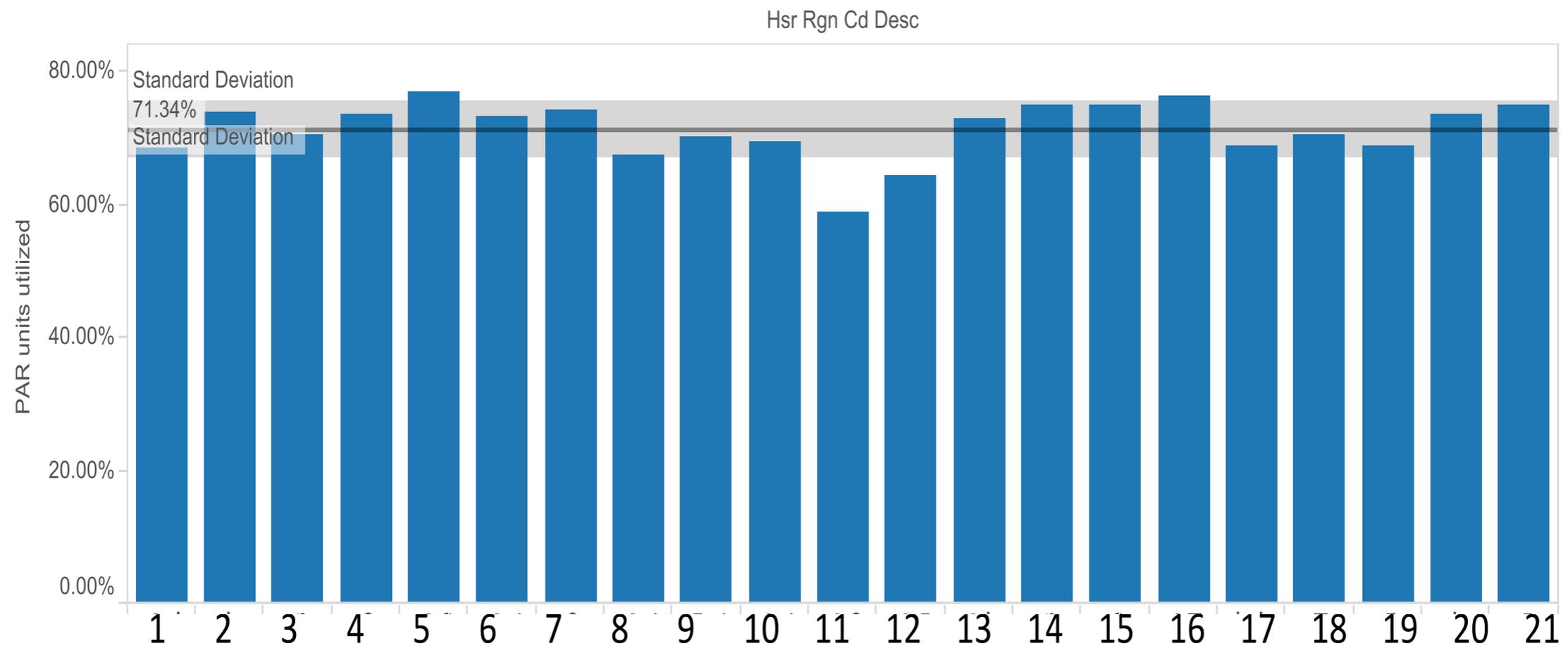
Note: Triangles represent billing zip code of providers



**DRAFT - Calculations are preliminary.**

# Access

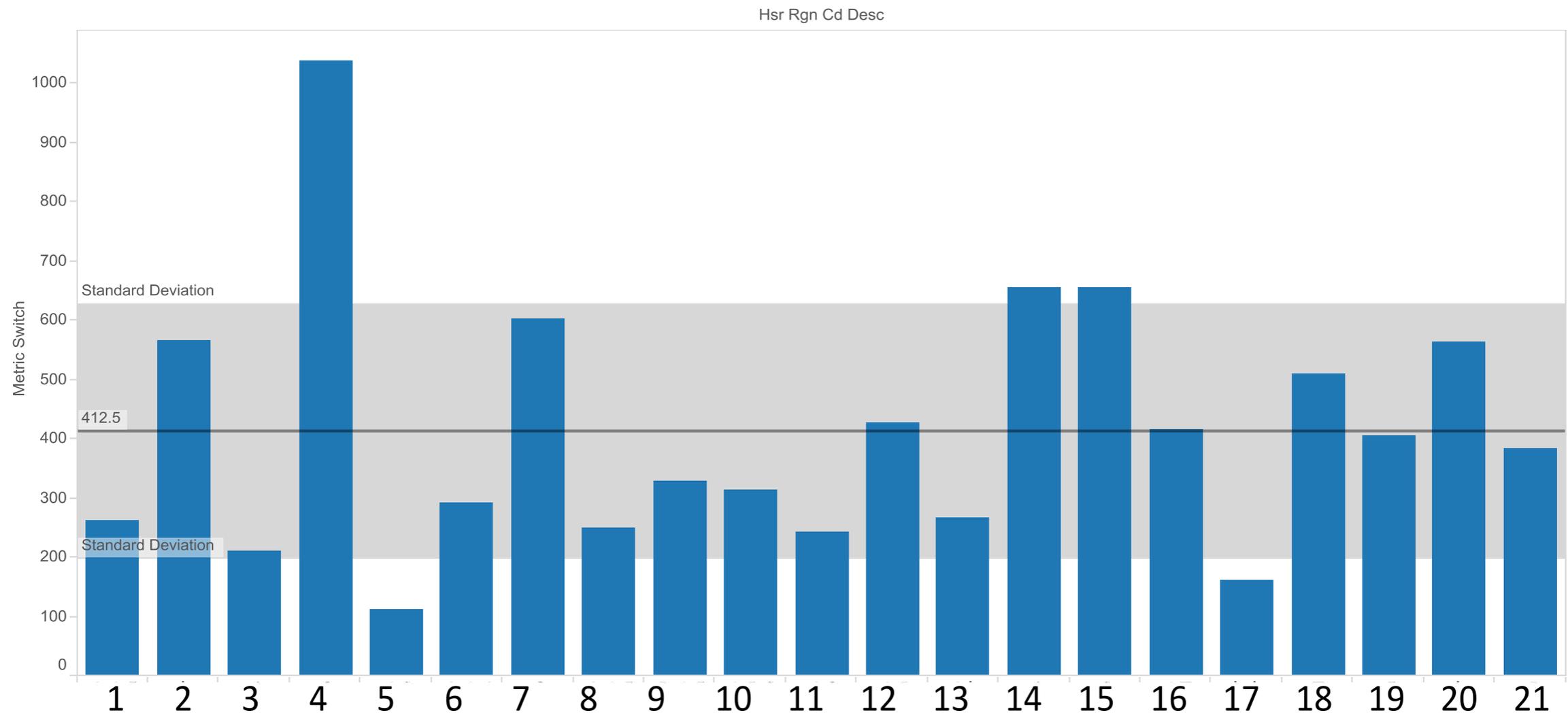
Percent of long-term home health services utilized of the services that were authorized through a Prior Authorization Request by county (see HSR Map Handout for region definitions).



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# Access

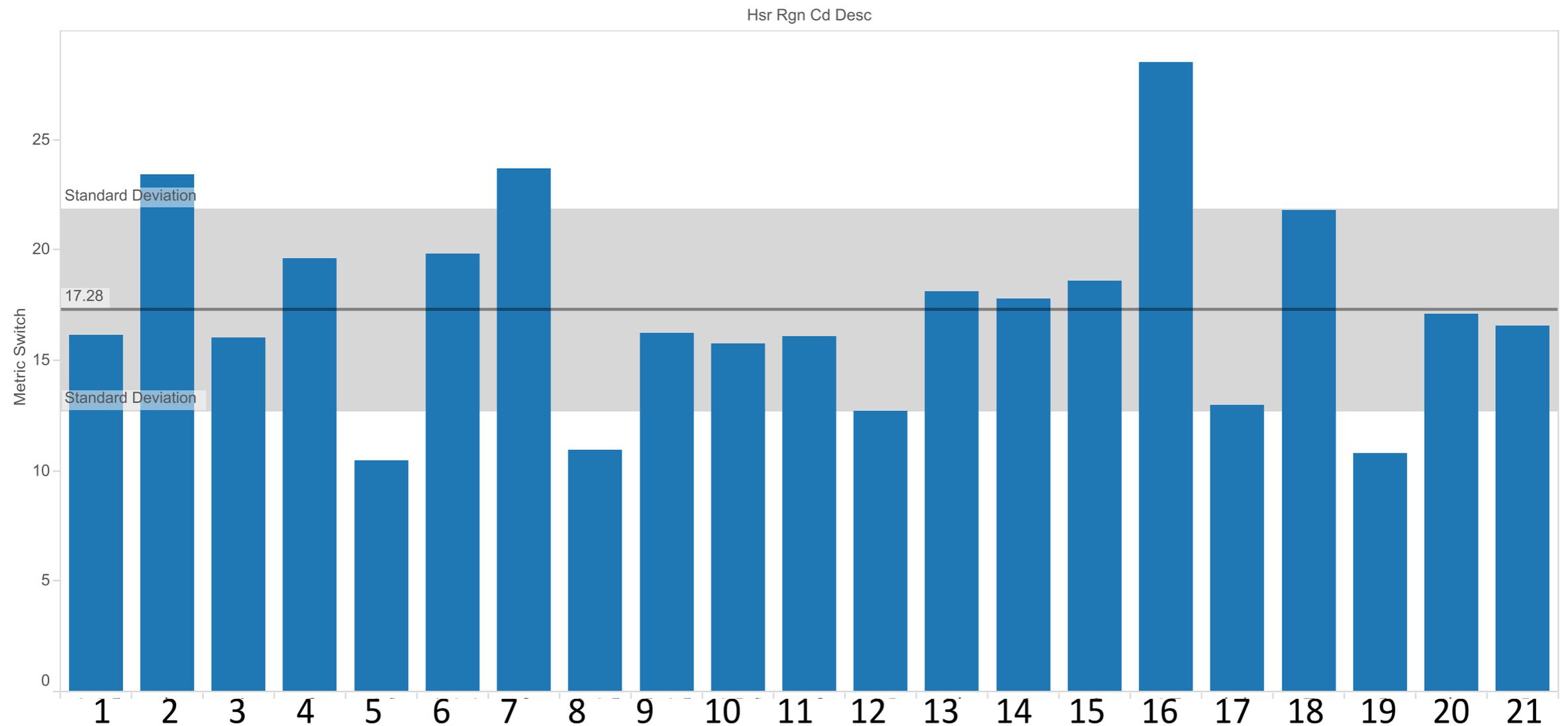
Member to provider ratio for acute home health services by Health Statistics Region (see HSR Map Handout for region definitions).



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# Access

Utilization of acute home health services by Health Statistics Region (see HSR Map Handout for region definitions).



# *Quality*

- Colorado Department of Health Care Policy and Financing:
  - Waiver-specific population surveys that may serve as a proxy quality measures for PDN clients.
- Colorado Department of Public Health and Environment:
  - Monitors all Home Health Agencies through an established quality management program, which is required for licensure.



# *Next Steps*

- More information about upcoming Rate Review Information Sharing Sessions can be found on MPRRAC webpage: <https://www.colorado.gov/pacific/hcpf/medicaid-provider-rate-review-advisory-committee>
- Contact Lila Cummings with additional questions between meetings: [Lila.Cummings@state.co.us](mailto:Lila.Cummings@state.co.us)

