MEDICAID PROVIDER RATE REVIEW ADVISORY COMMITTEE (MPRRAC) VIRTUAL MEETING MINUTES
Friday, January 25, 2019
10:00 - 11:00 a.m.

Please find the webinar audio recording at this [link](#).

1. MPRRAC Members Present (by phone)
   Bill Munson, Jeff Perkins, Barbara Wilkins-Crowder, Tom Rose, Rebecca Craig, Wilson Pace, Gretchen McGinnis, Susan Flynn, Arthur Schut, Murray Willis, Chris Hinds, Lisa Foster, Jody Wright, and Arnold Salazar.

2. Agenda Review
   Eloiss Hulsbrink, Rate Review Stakeholder Relations Specialist, welcomed participants and outlined the meeting agenda.

3. Meeting Minutes Approval
   Committee members approved the November 16, 2018 meeting minutes.

4. Durable Medical Equipment (DME) Considerations
   The Department provided context regarding considerations for Year Four rate review service groupings and data analyses.

   January Montaño, Department DME benefit specialist, provided an overview of what DME codes (e.g., walkers, crutches, monitoring supplies, wheelchairs, hospital beds, shower chairs) will be reviewed in Year Four of the rate review process. She also clarified that the codes under review this year are related to the active treatment or therapy for a physical condition; other DME codes are scheduled for review in Year Five of the rate review process, including prosthetics, orthotics, and disposable supplies (e.g., artificial limbs, supportive devices). See slides 4-5 of the [January MPRRAC Presentation](#) for more information on the DME codes under review this year.

   January further explained the following:
   - 237 of the 245 DME codes reviewed this year are subject to Upper Payment Limits (UPLs) as of January 2018.
   - The [Consolidated Appropriations Act of 2016](#) establishes UPLs on DME codes paid by both Medicare and Medicaid in the previous fiscal year, meaning the list of codes subject to UPL can change on a yearly basis.
   - Codes subject to the UPL are reimbursed at 100% of the Medicare rate.
• The Department does not have the authority to change the rates subject to UPL; however, the Department decided to review these codes to evaluate and solicit stakeholder feedback regarding potential access issues that may have arisen from UPL implementation.
• The Department is aware of certain stakeholder concerns related to client access to DME subject to the UPL and continues to monitor. There is no quantitative data to support these reports as-yet; the Department is reviewing claims data as it becomes available.
• See slide 7 of the January MPRRAC Presentation for more information on how the UPL codes are broken down by service.

Wilson Pace, MPRRAC Chair, asked if this is a hard CMS rule, rather than a policy that a waiver could remedy. January affirmed it is a nationwide rule. Wilson stated that, while there are national guidelines that the Department must adhere to, the MPRRAC has a commitment to recommend that Medicaid pay the cost of services and that there should be more in-depth discussion on this topic at the next in-person meeting. Wilson asked if DME is only provided by DME suppliers, or if the access issue is affecting other providers. January responded that the way DME is structured, it is primarily the DME suppliers that are having to shift their practices to adjust to changes required by DME UPLs.

Jody Wright, MPRRAC member, stated that he feels the UPL implementation affects everybody because these rates are consistent across regions, whether it is coming out of a rural hospital or not; the DME delivery rate is the same. Jody noted that the rates for these products are inclusive of everything, meaning the cost of the product, the delivery of the product, service of the product, and any warranty on the product. This affects anybody that delivers any of these products.

Kelly Ore, stakeholder, stated that the reimbursement rate for some categories, such as respiratory items, decreased by as much as 70%. Kelly considers this a drastic change and that it would affect all providers in the service models.

Jeremy Tipton, Special Projects Section Manager, reviewed the benchmarks being used for the DME rate review comparison analysis, to include:
• A large share of the dollar’s fall under the DME UPL.
• The Department started the comparison using states it compared to in past years of the rate review cycle, including Nebraska, Arizona, Wyoming, Oregon, and Oklahoma.
• There is a possibility that there are not as many comparison rates for the states previously used for rate review, so the Department is investigating using supplemental rates from additional states that may not have been used in previous analyses.

Eloiss shared:
• The February 15th MPRRAC meeting will focus primarily on DME rate comparison analyses.
• The March 29, 2019 MPRRAC meeting will include the rate comparison information for all other Year Four rate review services, and potentially some follow-up on DME analyses.
• See slide 10 of the January MPRRAC Presentation for more information.
• The considerations MPRRAC members should keep in mind during year four rate review. See slide 11 of the January MPRRAC Presentation for more information.

5. Introduction to MPRRAC Annual Training (HB18-1198)

Referring to slide 15 of the January MPRRAC Presentation, Eloiss explained that:
• the annual training will include the aspects of HB 18-1198 summarized on the left and a review of the MPRRAC-specific information summarized on the right.
• The Department is developing:
  o an explainer-style video that will include information relevant to all department commissions, boards, and committees, and
  o a facilitator guide that incorporates committee-specific materials, procedures, and subjects.

The Department will conduct the annual training in September in compliance with the legislation, as well as an MPRRAC Orientation to benefit new committee members.

Slides 17-19 of the January MPRRAC Presentation outline the proposed MPRRAC Annual Training content and timeline.

Eloiss requested initial feedback regarding the proposed MPRRAC Annual Training content to comply with HB18-1198. No feedback was provided.

6. Next Steps
Eloiss will send the requirements outlined in HB18-1198 to committee members for review before the next meeting.

Eloiss asked the committee members to watch for February 15, 2019 meeting materials.

7. Adjourn
The meeting was adjourned at 10:55 a.m.