Medicaid Provider Rate Review Advisory Committee Meeting

Rate Review Recommendations

Facilitators:  
Eloiss Hulsbrink, Rate Review Stakeholder Relations Specialist  
Rebecca Craig, Vice-Chair

June 28, 2019  
9:00 a.m.—12:00 p.m.
Our Mission

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources
Welcome 9:00 a.m.

Vote on Proposed 5-year Schedule 9:10 a.m.

Prior Year Rate Review Recommendation Status Update 9:20 a.m.

Department Working Recommendations:

- Ambulatory Surgical Centers 9:30 a.m.
- Fee-for-Service Behavioral Health 9:50 a.m.
- Residential Child Care Facilities & Psychiatric Residential Treatment Facilities 10:10 a.m.

Break 10:30 a.m.

- Special Connections 10:40 a.m.
- Dialysis & End Stage Renal Disease 11:00 a.m.
- Durable Medical Equipment 11:20 a.m.

Next Steps & Announcements 11:50 a.m.
Proposed Changes to 5-year Schedule

Discussion and Vote to Approve

Eloiss Hulsbrink and Rebecca Craig
Rate Review
Recommendation Status

Updates

Eloiss Hulsbrink
Questions?
Department Working Recommendations

Eloiss Hulsbrink
Ambulatory Surgical Centers (ASCs)

- Analysis Results
- Key Considerations
  - Stakeholder Feedback
  - Department Feedback
ASC Working Recommendations

• The Department recommends adding clinically appropriate procedure codes to the list of services that can be reimbursed in an ASC setting.

• The Department recommends eliminating the ASC grouper reimbursement methodology in favor of setting individual procedure rates.

• The Department recommends, once complete:
  • re-evaluating each service rate relative to the benchmark.
  • evaluating individual services that were identified to be below 80% and above 100% of the benchmark to identify groups that would benefit from an immediate rate change.
ASC Working Recommendations

- The Department recommends evaluating the potential for creating a Multiple Procedure Discounting reimbursement methodology.

- The Department recommends additional evaluation of whether costs can be offset by incentivizing migration of appropriate procedures from the hospital to the ASC setting.
Questions?
Stakeholder Comments
Committee Discussion
Fee-for-Service Behavioral Health

- Analysis Results
- Key Considerations
  - Stakeholder Feedback
  - Department Feedback

Working Recommendation:
- The Department recommends evaluating individual services that were identified to be below 80% and above 100% of the benchmark to identify services that would benefit from an immediate rate change.
Questions?
Committee Discussion
Residential Child Care Facilities (RCCFs)

• Analysis Results
• Key Considerations
  • Stakeholder Feedback
  • Department Feedback

Working Recommendations
The Department recommends:
• evaluating a way to differentiate payments for RCCFs from other FFS behavioral health services.
• a joint RCCF and PRTF rate setting project using Department best practices for incentivizing proper use of each facility type.
• evaluating the regulatory requirements regarding co-location of RCCFs and PRTFs on the same campus to better understand factors impacting service delivery.
Questions?
Stakeholder Comments
Committee Discussion
Psychiatric Residential Treatment Facilities (PRTFs)

• Analysis Results

• Key Considerations
  • Stakeholder Feedback
  • Department Feedback

Working Recommendations

• The Department recommends a joint RCCF and PRTF rate setting project using Department best practices for incentivizing appropriate placement in each facility type.
Questions?
Stakeholder Comments
Committee Discussion
Break

10 minutes
Special Connections

- Analysis Results
- Key Considerations
  - Stakeholder Feedback
  - Department Feedback

Working Recommendations

The Department recommends:

- further evaluating whether initiating a rate setting project would be beneficial.
- conducting a provider survey to augment the lack of data currently available and identify areas for impacting program improvement.
- further aligning with and supporting the Office of Behavioral Health efforts to increase data availability, consistency, and validity.
Questions?
Stakeholder Comments
Committee Discussion
The Department recommends:

• evaluating factors that impact utilization of in-home dialysis, including Medicare enrollment, and how to improve access to in-home dialysis options where appropriate.

• evaluating the potential to implement changes to reimbursement for in-home Continuous Ambulatory Peritoneal Dialysis and Continuous Cycling Peritoneal Dialysis services, to align more closely with the Medicare payment methodology.
Questions?
Stakeholder Comments
Durable Medical Equipment (DME)

- Analysis Results
- Key Considerations
  - Stakeholder Feedback
  - Department Feedback

Working Recommendations

- The Department will continue to evaluate and monitor access to care for services subject to federal Upper Payment Limits (UPLs) and work with state and federal partners to identify solutions to impacted services.
- The Department recommends rebalancing the DME rates not subject to the UPLs and will evaluate individual services that were identified to be below 80% of the benchmark and above 100% of the benchmark to identify services that would benefit from an immediate rate change.
Questions?
Stakeholder Comment
Next Steps & Announcements

• Next Meeting: September 20, 2019*
  • Conduct Annual Training and Welcome New Members
  • Further Refine Year Four Recommendations
  • Introduce Year Five Services

• Committee Member (Re)Appointment

*Subject to Change
Contact Information

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Thank You!