Appendix B1 - Base Data Summary

The following appendices provide more detailed rate comparison benchmark summaries and results that were introduced and discussed in the narrative.

Table B1(a): Anesthesia

	Anesthesia
Data Received from HCPF	$ 45,982,369
Non-Anesthesia Codes Excluded	$ 9,532,977
Anesthesia Data Used for Analysis	$ 36,449,392
Exclusions	
Dual Eligible	$ 178,899
No Eligibility Span	$ 13,478
Child Health Plan Plus (CHP+)	$ 959
Non-TXIX	$ 1,192,845
No Comparison Available	$ 361,222
Total Exclusions	$ 1,747,403
Base Medicaid Data	$ 34,701,989
Percentage of Raw	95.2%

Note: as an example, the Anesthesia final figures in the above table can be interpreted to mean that 95.2% (accounting for $34,701,989 in unadjusted paid dollars) of the FY 2022 data provided by the Department was appropriate for use in the payment rate comparison analysis.

Table B1(b): Ambulatory Surgical Centers (ASC)

	ASC
Data Received from HCPF	$ 26,710,587
Non-ASC Codes Excluded	$ 13,267,882
ASC Data Used for Analysis	13,442,706
Exclusions	
Dual Eligible	56,550
No Eligibility Span	917
Child Health Plan Plus (CHP+)	-
Non-TXIX	1,876
No ASC Group	2,252
No Comparison Available	$ 2,865,754
Total Exclusions	$ 2,927,348
Base Medicaid Data	$ 10,515,358
Percentage of Raw	78.2%

The percentage of raw dollars for ASC is lower than other services because of the comparison methodology used. Colorado Medicaid, in general, only reimburses for the most expensive ASC service on an encounter, but Medicare pays for additional ASC services, though sometimes at a reduced rate. To ensure that an apples-to-apples comparison was done, only the primary line was repriced using the Colorado fee schedule and the Medicare fee schedule. This resulted in an overall greater reduction in the base data that was repriced.

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Table B1(c): Fee-for-Service Behavioral Health Services

	Fee-for-Service Behavioral Health
Base data	$ 18,790,895
Eligibility Exclusions	
Dual Eligible	$ 45,456
No eligibility Span	$ 5,047
Child Health Plan Plus (CHP+)	$ -
Non-TXIX	$ 5,656
Total Exclusions	$ 56,159
Base Medicaid Data	$ 18,734,736
Percentage of Raw	99.7%

Note: as an example, the FFS behavioral health final figures in the above table can be interpreted to mean that 99.7% (accounting for $18,734,736 in unadjusted paid dollars) of the FY 2022 data provided by the Department was appropriate for use in the payment rate comparison analysis.

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Table B1(d): Maternity Services

	Maternity
Base Data	$ 28,610,463
Eligibility Exclusions	
Dual Eligible	$ 10,044
No Eligibility Span	$ 4,226
Child Health Plan Plus (CHP+)	$ 1,632
Non-TXIX	$ 2,423,084
Pre-Natal Plus Program	$ 433,994
No Medicare Rate Found	$ 550,397
Total Exclusions	$ 3,423,377
Base Medicaid Data	$ 25,187,086
Percentage of Raw	88.0%

Note: as an example, the maternity final figures in the above table can be interpreted to mean that88% (accounting for $25,187,086 in unadjusted paid dollars) of the FY 2022 data provided by the Department was appropriate for use in the payment rate comparison analysis.

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Table B1(e): Pediatric Behavioral Therapy

	Pediatric Behavioral Therapy
Base data	$ 120,772,992
Eligibility Exclusions	
Dual Eligible	$ 121,824
No eligibility Span	$ 47,082
Child Health Plan Plus (CHP+)	$ -
Non-TXIX	$ -
Total Exclusions	$ 168,906
Base Medicaid Data	$ 120,604,087
Percentage of Raw	99.9%

Note: as an example, the pediatric behavioral therapy final figures in the above table can be interpreted to mean that 99.9% (accounting for $120,604,087 in unadjusted paid dollars) of the FY 2022 data provided by the Department was appropriate for use in the payment rate comparison analysis.

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Table B1(f): Dental

	Dental
Base data	$ 298,869,522
Eligibility Exclusions	
Dual Eligible	$ 22,661,304
No Eligibility Span	$ 68,373
Child Health Plan Plus (CHP+	
Non-TXIX	$ 77,673
Total Exclusions	$ 22,807,350
Base Medicaid Data	$ 276,062,172
Percentage of Raw	92.4%

Note: as an example, the dental final figures in the above table can be interpreted to mean that 92.4% (accounting for $276,062,172 in unadjusted paid dollars including unreviewed codes due to no matched ADA rates or discontinued use in 2023) of the FY 2022 data provided by the Department was appropriate for use in the payment rate comparison analysis.

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Table B1(g): Surgery

	Surgery
Base data	$ 107,230,075
Eligibility Exclusions	
Dual Eligible	$ 866,612
No Eligibility Span	$ 40,569
Child Health Plan Plus (CHP+)	$ 1,961
Non-TXIX	$ 1,545,698
Total Exclusions	$ 2,454,839
Base Medicaid Data	$ 104,775,236
Percentage of Raw	97.7%

Note: as an example, the surgery final figures in the above table can be interpreted to mean that 97.7% (accounting for $104,775,236 in unadjusted paid dollars) of the FY 2022 data provided by the Department was appropriate for use in the payment rate comparison analysis.

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