



**FRESENIUS
MEDICAL CARE**

June 28, 2019

Medicaid Provider Rate Review Advisory Committee
Colorado Department of Health Care Policy & Financing
303 East 17th Avenue
Denver, CO 80203

RE: Department Working Recommendations: Dialysis & End Stage Renal Disease

On behalf of Fresenius Medical Care, we submit these comments on the dialysis Medicaid reimbursement rates. Our company has 27 outpatient dialysis facilities in Colorado, serving nearly 1,600 patients with kidney failure, also known as End Stage Renal Disease. Over 40% of our dialysis patients have Medicaid as their primary or secondary insurance.

First, we are grateful for the 1% increase in reimbursement rate that will be effective July 1. We are hoping that the increase will be processed in a timely manner. In the past when rates have changed, it has taken from 5 – 11 months for the payment system to be updated. This results in added burden later to manage reprocessing of past claims.

Earlier this year, an updated Medicaid payment manual was released. We noticed there is now a list of routine drugs to be included in the Medicaid payment rate for dialysis. There is one drug in particular, Parsabiv, that we are concerned about being added to the list. It is an expensive drug, and the reimbursement rate did not increase for adding the routine drugs into the Medicaid payment. We believe this could have been a misinterpretation of Medicare guidelines, and this drug should remain separately billable.

We have a meeting scheduled with the Department for July 16, and we will be discussing this issue more in depth with them at that time.

Thank you for the opportunity to make these comments, and we continue to desire to be an active partner with the state in providing high quality and cost-efficient care for our dialysis patients.

Sincerely,

Wendy Funk Schrag

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