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Colorado Medicaid  
Eloiss Hulsbrink  
Medicaid Provider Rate Review Advisory Committee  
1570 Grant Street  
Denver, CO 80203

December 26, 2019

Re: Data considerations for the MPRAAC February meeting

Dear Eloiss:

We are writing on behalf of Community Center Boards (CCBs) and speech-language pathologists (SLPs) in regard to the low reimbursement rate for speech and language therapy provided in early intervention. Speech therapy is one of 15 available services for children birth to three years of age in Colorado with identified developmental delays or disabilities. Due to federal guidelines, all of the services implemented through early intervention must be provided in the natural environment. CCBs and most contracted providers are not home health agencies, therefore, we must bill under outpatient CPT codes.

Speech-language therapy and feeding services (CPT codes 92507 and 92526) are untimed codes (encounter codes), but services are most often provided via 60 minute sessions due to best practices in early intervention coupled with practicalities of driving to the child's natural environment. The very low reimbursement rates negatively affect early intervention programs in Colorado which impacts recruitment of qualified speech-language pathologists. Due to this, program successes have become difficult to sustain since there is a high rate of turnover with qualified SLPs leaving the field of early intervention. The additional requirements of Prior Authorization has made this even more difficult due to the extensive time involved. Speech language PARs are required every 6 months, and use the Individual Family Service Plan (IFSP)

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to help support documentation. This puts impact on each CCB to ensure timely meetings and paperwork turn-around time and requires the SLP to request this twice as often as physical and occupational therapy providers are required.

We are asking for consideration for a modified rate for early intervention services (with modifiers GN and TL). Attached you will find specifics and justification for an increase in reimbursement for this population only.

If you would like more detail related to these issues, we would be happy to discuss further. We appreciate your consideration of this matter.

Respectively,

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This is also supported by:

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