



MINUTES OF THE MEETING OF THE Medicaid Provider Rate Review Advisory Committee (MPRRAC)

June 19, 2020

Colorado Department of Health Care Policy and Financing
303 E. 17th Avenue, Denver, CO 80203
Webinar

A recording of this meeting is available at this [link](#).

1. Call to Order and Introductions

Eloiss Hulsbrink, Rate Review Stakeholder Relations Specialist, called the meeting to order at 9:10 a.m.

2. Roll Call

There were sufficient members for a quorum with twelve members participating. All individuals participated remotely, due to ongoing health and safety requirements regarding the COVID-19 pandemic.

A. Members on Webinar/Phone

Wilson Pace, Robert Hernandez, Maureen Welch, Jeff Perkins, Valerie Schlect, Gretchen McGinnis, Vennita Jenkins, Tim Dienst, Kelli Ore, Christi Mecillas, Matt VanAuken, Murray Willis.

B. Department Staff Participants

Eloiss Hulsbrink, Jami Gazerro, Matt Colussi, Alex Koloskus, Alex Weichselbaum, Matt Wellens, Gina Robinson.

It was noted that 9 committee positions are still waiting to be filled.

3. Meeting Minutes

Meeting minutes were not available for review by the meeting date. Minutes will be sent via email to all members, with a vote to be held via email.



4. Year Five Services Working Recommendations

A. Pediatric Personal Care (PPC)

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 1 of the [Working Recommendations document](#) and slides 13-16 of the [June MPRRAC Presentation](#).

Committee Discussion

There were not any questions or comments from the committee regarding PPC services.

Stakeholder Comment

Themes of stakeholder feedback included:

- pediatric rates for HCBS waiver services were insufficient and in need of review.
 - Note: HCBS waiver services are scheduled for Year 1 review, later this year.

B. Home Health

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 2-3 of the [Working Recommendations document](#) and slides 20-24 of the [June MPRRAC Presentation](#).

Committee Discussion

A committee member asked the Department to provide insight into why total expenditure has increased significantly while member and provider counts only saw small increases. The Department noted that it was likely the number of units per member increasing, but would further investigate.

Stakeholder Comment

Themes of stakeholder feedback included:

- providers are unable to find employees to deliver services with the current rate levels;

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- aligning with Medicare is insufficient due to the short-term nature of Medicare services and providers would like the Department to instead offer a 90% match with the Medicare Low Utilization Payment Adjustment (LUPA) rates; and
- electronic visit verification (EVV) requirements will discourage smaller providers from delivering Home Health services.

C. Private Duty Nursing (PDN)

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 4 of the [Working Recommendations document](#) and slides 28-31 of the [June MPRRAC Presentation](#).

Committee Discussion

A committee member raised concerns with the wording regarding unit values in the PDN Key Considerations section of the [Working Recommendations document](#). The Department clarified that units are per hour not per visit, and that shifts can have multiple units depending on the number of hours per shift (e.g. 6-8 units per shift). The Department agreed to change the wording for Colorado rates to one hour per unit, not per visit, on page 4 of the PDN Key Considerations section of the [Working Recommendations document](#).

A committee member asked if there had been any change in the previous information shared in 2016, which noted that there was a backlog of pediatric members at Children's Hospital Colorado who could not be discharged earlier due to a lack of available PDN. A stakeholder responded that this still seems true based on anecdotal evidence.

Stakeholder Comment

Themes of stakeholder feedback included:

- providers couldn't hire Licensed Practical Nurses (LPNs) because they were being hired by hospitals. While this has changed and LPNs are now most likely being employed in private placements due to COVID-19, rates are still insufficient to attract LPNs to Home Health and a rate increase would be required;
- the data was outdated when compared to other states; and
- ability to provide services in this setting is vital, and that despite the current climate, a rate increase should be considered for these services.

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D. Pediatric Behavioral Therapy (PBT)

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 5 of the [Working Recommendations document](#) and slides 35-38 of the [June MPRRAC Presentation](#).

Committee Discussion

A committee member asked why the Department is seeking benefit status for PBT and how is PBT currently provided if it is not a benefit. The Department clarified that it is currently provided through the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit. Making PBT a State Plan benefit would formalize the requirements and would ensure it is no longer treated as an exception.

Committee discussion considered the broader topic of benchmarks and how they are being used. Members believe that that Medicaid to Medicaid benchmark should be 100%. The Department agreed to provide time at the September meeting for the committee to discuss including benchmark comparison levels for Medicaid rates in the guiding principles.

A committee member asked if the dramatic increase in providers indicates that there are more providers across the state, improving access. The Department stated that the increase in providers is due the service being created in 2015, and subsequent provider recruitment and enrollment efforts.

Stakeholder Comment

Themes of stakeholder feedback included:

- agreement with the committee's discussion regarding comparison of rates with other states and payer types.

E. Speech Therapy

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 6 of the [Working Recommendations document](#) and slides 42-45 of the [June MPRRAC Presentation](#).

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Committee Discussion

There were not any questions or comments from the committee regarding Speech Therapy services.

The committee did raise the general process for rebalancing across all service groups and asked to confirm that rebalancing is still sought even if all codes cannot be achieved in an initial attempt. The Department confirmed that rebalancing can occur within and across service categories, and may occur over multiple years depending on Joint Budget Committee approval and any budget neutrality factors.

Stakeholder Comment

The Department did not receive any feedback from stakeholders regarding Speech Therapy services during the June MPRRAC meeting.

F. Physical/Occupational Therapy (PT/OT)

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 7 of the [Working Recommendations document](#) and slides 49-52 of the [June MPRRAC Presentation](#).

Committee Discussion

There were not any questions or comments from the committee regarding Physical/Occupational Therapy services.

Stakeholder Comment

Themes of stakeholder feedback included:

- the Physical Therapy Association of Colorado has been trying for a number of years to get a rate increase directly through the Joint Budget Committee (JBC);
- providers are unwilling to accept Medicaid patients because of the lower rates; and
- the increased usage of telemedicine visits during the pandemic has had a positive impact on PT/OT.



G. Prosthetics, Orthotics, and Supplies (POS)

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 8 of the [Working Recommendations document](#) and slides 56-59 of the [June MPRRAC Presentation](#).

Committee Discussion

A committee member asked if rates were compared to Medicare or Medicaid. The Department confirmed that the majority of rates were compared with Medicare. Where a Medicare comparison was unable to be made, the rate was compared with other states' Medicaid rates.

Stakeholder Comment

Themes of stakeholder feedback included:

- a number of supplies, especially those for pediatric patients, are not covered by Medicare due to the differing populations; and
- rates at 80% of Medicare would be appreciated, and 90% would be preferred.

H. Vision

Working Recommendation

The analysis results, stakeholder and Department considerations, and the preliminary recommendations were presented. For more information, see page 9 of the [Working Recommendations document](#) and slides 63-66 of the [June MPRRAC Presentation](#).

Committee Discussion

There were not any questions or comments from the committee regarding Vision services.

Stakeholder Comment

Themes of stakeholder feedback included:

- a large increase in the number of providers followed a rate increase five years ago, and a rate decrease now may result in a loss of Medicaid providers; and

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- some confusion between facility and non-facility rates, the difference between the two, and which ones would be matched to Medicare rates. The Department clarified that Colorado Medicaid has only one rate for each procedure code, but Medicare has both facility and non-facility rates based on where the service is provided. Data is listed for both rates in Appendix B, while the rate comparison analysis published in the body of the [2020 Medicaid Provider Rate Review Analysis Report](#) is based on the most appropriate setting for the service.

I. General

The committee asked the Department to seek advice from Optimus and the legal area of the Department to determine if the penetration can be broken down to smaller demographics without violating HIPPA requirements. The Department will investigate and report back to the committee.

5. Next Steps and Announcements

Updates were shared with the committee, including upcoming meeting dates. See slide 70 in the [June MPRRAC Presentation](#) for more information.

MPRRAC members discussed nominations for the next MPRRAC Chair and Vice Chair. No members submitted nominations prior to the meeting. MPRRAC members discussed the upcoming yearly schedule and which services would be reviewed in the next year. Tim Dienst was nominated for the role of Vice Chair by Jeff Perkins; the motion was seconded by Gretchen McGinnis. Tim Dienst accepted the nomination. Committee members voted on the nomination and were in unanimous agreement. The MPRRAC agreed that as has been customary, the Vice Chair will transition into the Chair role at the end of the Chair's term, and prior to the start of the next rate review cycle. Wilson Pace's Chair term will end at the September meeting, after which Tim Dienst will assume the role of MPRRAC Chair. The committee will discuss new Vice Chair nominations in September.

6. Meeting Adjourned at 11:55 a.m.

