

# Minutes of the Medicaid Provider Rate Review Quarterly Public Meeting

**September 29, 2023** 

Colorado Department of Health Care Policy and Financing

303 E. 17th Avenue, Denver, CO 80203

 $\label{eq:Virtual Zoom Meeting} Virtual Zoom Meeting, 9:00 a.m. - 12:00 p.m. A recording of this meeting is available at this $$\lim_{\to}$. Passcode: ZeBq9T&t$ 

### 1. Call to Order and Welcome

Megan Adamson, MPRRAC Vice Chair, called the meeting to order at 9:02a.m. All 6 of the 7 members were present and participating remotely.

#### A. Members on Zoom/Phone

Terri Walter, MSN, RN, HopeWest, Hospice & Palliative Care Kim Kretsch DDS, MBA Colorado Dentistry for Children in Brush CO Vennita Jenkins, MBA, CEO Senior Housing Options, Inc. Megan Adamson, MD, family physician from Lafayette Colorado Kate Leslie, LCSW, Medicaid Mental Health provider Tim Diesnt, CEO, Ute Pass Regional Health Service District

## **B.** Department Staff Participants and Facilitators

Michelle LaPlante, Jeff Laskey, Kevin Martin, Cheyenne Gratale, Lingling Nie, Amanda Villalobos, Christopher Lane, from HCPF, Brian Pool and Erin Ulric from GPS Consulting (facilitators)

## C. Other Participants

46 total participants were present at 9:03.

## D. Housekeeping & Meeting Overview

Michelle, Kevin and Brian reviewed slides 2-10; including meeting etiquette, rules of governance, PHI, and the role of MPRRAC.

## 2. Meeting Minutes

Motion to approve July 14 minutes made by Tim, Megan seconded.

In favor: Terri, Vennita, Kate, Tim

Motion to approve July 24 minutes made by Vennita, second by Megan.

In favor: Terri, Kim, Tim, Kate



This meeting is an extension of the last meeting, the minutes will be combined into one set of meeting minutes for both meetings, and we will review those minutes together. The two sets of meeting minutes will be discussed in September.

### 3. Meeting Purpose

Update: the full report from HCPF is now considered a budget request and will be confidential until November 1.

Today's purpose will be to review the recommendations the MPRRAC has put together for accuracy, and will see a redacted draft of the recommendations.

In November, the group will brainstorm ideas for process improvement and discuss metrics to use over the course of the year.

### 4. MPRRAC Recommendations

### A. Analyses Updates

There will be some new information in the report based on recommendations, but no new analyses will be presented to the MPRRAC today.

### **B.** Fiscal Impact

Overall fiscal impact of the MPRRAC Recommendation: \$143,707,976, with a \$39,558,298 in General Fund Impact.

Question: Can we include a percentage increase for the members? Yes, in the future we can, and will include in the November discussion as an improvement topic.

## C. Topic Area Review

The committee reviewed slide 16 for anesthesia. No discussion.

The committee reviewed slide 19 for Ambulatory Surgical Center's. No discussion.

The committee reviewed slide 22-23 for Fee For Service (FFS) Behavioral Health Services.

- Discussion: The members want to make sure that the fiscal impact is correct based on current state, given the amount of changes and movement in rates. HCPF to ensure report is as current as possible.
- No public comment.

The committee reviewed slide 26. No MPRRAC discussion.

- Public Comment:
  - O Providers need certainty to plan and operate their businesses. Any transparency and insight into the process is helpful. Kevin shared the high-level overview of the budget process. The Governor's Office to recommend a budget and the Joint Budget Committee (JBC) will make decisions on the final budgets. JBC meetings are open to the public, but do not always contain a public comment opportunity.
  - The benchmark is not entirely reflective of reality, and the current rates are lower than shown.
  - o Each code should individually be brought to 100% of the benchmark.
  - The two codes that impact billing the most are 97153 and 97155.
  - The three-year cycle is challenging, given that the rates will still likely be on the low end and will not be reviewed for another three years.
  - Stakeholders shared that the JBC can do an emergency rate review upon request from the Governor's Office and asked whether HCPF would be supportive of this action. HCPF did not have the right staff at the meeting to respond to this question, and emergency rate reviews are outside of the scope of the MPRRAC.



The committee reviewed slide 29 on Maternity Services. No MPRRAC Discussion.

• Public Comment: Wanted to endorse the recommendation to increase maternity rates to 100% of the benchmark.

The committee reviewed slide 32 on Abortion Services.

- Discussion: The report lists the specific states for abortion services comparisons. The claim volume is so low, that anything shared in PHI.
- No public comment.

The committee reviewed slide 35 on Dental Services.

- Discussion: Fiscal impact looks large, but this category has been severely underfunded.
- Public Comment:
  - o Income tax will increase and help to reimburse General Fund. More providers will sign up and patients will have more access to care. Support the recommendation.
    - Clarification: About half of the fiscal impact is Federal, and the remaining funding is from The Unclaimed Property Tax fund.
  - o Salaries are higher than the current reimbursement rates. This increase is needed.

The committee reviewed slide 39 on Digestive System Surgeries. No discussion.

The committee reviewed slide 42 on Musculoskeletal System Surgeries. No discussion.

The committee reviewed slide 45 on Cardiovascular System Surgeries. No discussion.

The committee reviewed slide 48 on Respiratory System Surgeries. No discussion.

The committee reviewed slide 51 on Integumentary System Surgeries. No discussion.

The committee reviewed slide 54 on Eye and Auditory System Surgeries. No discussion.

The committee reviewed slide 57 on Other Surgeries. No discussion.

The committee reviewed slide 60 on Co-Surgery (no recommendation). No discussion.

### **D. Summary Fiscal Impact**

The committee viewed the summary of the fiscal recommendations on slides 63.

## 5. Next Steps

HCPF is reviewing the total impact of the recommendations and will be reviewing the report and recommendations. They are working on finalizing the report given the allocated funding number they are asked to work towards.

Next meeting is November3 from 9-12. The members will review the process and recommend improvements.

#### Discussion/Q&A:

Can individual MPRRAC members submit their own recommendations? Individual members can submit individual email to rate review email if they want to provide additional detail or their own recommendations.

Are there any capacity issues at HCPF, and is there a recommendation that we need to ensure adequate staffing to provide MPRRAC the data they need? HCPF got three new positions for this process as of July 1. They are filling positions now and will have more capacity for next years' review.

Are old recommendations being reviewed? It was difficult to track old recommendations, and HCPF would like to do better about this in the future. There are two different recommendations that have not been taken up in the past: 1) budget constraint and 2) bigger lifts that need more than money to implement. Would be helpful to have a broader view and consider how to be more efficient. Further conversation in November will be useful.





Contact information was also shared:

Website <a href="https://hcpf.colorado.gov/rate-review-public-meetings">https://hcpf.colorado.gov/rate-review-public-meetings</a>

### **Lingling Nie**

Rates Review and Research Section Manager Lingling.nie@state.co.us

#### Michelle LaPlante

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Best email for rate review is <a href="https://html/>
HCPF RateReview@state.co.us">HCPF RateReview@state.co.us</a>

6. Meeting Adjourned at 10:35 a.m.

