

# Medicaid Provider Rate Review Public Meeting

April 21, 2023  
9:00am - 12:00pm

Presented by: HCPF & GPS



**COLORADO**

Department of Health Care  
Policy & Financing

# Housekeeping

- **Committee Members only - add “MPRRAC Member” to your Zoom name**
- **Public Stakeholders - sign up to make public comment during your service**
- **Identify yourself before speaking**
- **Do not share PHI**
- **Use Q&A feature for questions**



# Agenda

- Call to Order and Welcome
- Meeting Overview and Minutes
- Year One Services Data Analyses/ Feedback
  - Anesthesia
  - Ambulatory Surgical Centers
  - FFS Behavioral Health Services
  - Maternity Services
  - Abortion Services
    - 10 minute break
  - Pediatric Behavioral Therapy
  - Qualified Residential Treatment Programs



# Agenda Continued

- **Psychiatric Residential Treatment Facilities**
- **Dental Services**
- **Surgeries**
  - **Digestion System**
  - **Musculoskeletal System**
  - **Cardiovascular System**
  - **Respiratory System**
  - **Integumentary System**
  - **Eye and Auditory System**
  - **Other**
- **Questions and Feedback**
- **Next Steps and Announcements**
- **Adjourn**



# Friendly Reminder: Rules of Governance

- Self-governance
- Maintain a respectful, safe environment for all
- One person speaks at a time
- Stay on mute unless engaging
- Tough on problems, easy on people
- Use the past only to describe a better future
- Come prepared - review materials in advance, gather & share input from your community, stakeholders, colleagues etc.



**COLORADO**

Department of Health Care  
Policy & Financing

# MPRRAC/ Department Roles

- A legislatively appointed body that functions collaboratively with the Department, they are not Department staff.
- Rate Review staff is tasked with synthesizing actuarial analyses into digestible reports and works with other Department staff to develop recommendations for rate or policy changes, which are then agreed upon by the MPRRAC.
- These recommendations *may* result in future budget actions by the Department but rate changes must be approved and appropriated for by the Legislature.
- Review of services including analysis and recommendations does not guarantee rate changes, whether increases or decreases, or changes to reimbursement policy.



**COLORADO**

Department of Health Care  
Policy & Financing

# Out of Scope for the MPRRAC

- The MPRRAC does NOT submit budget requests
  - While budget requests are submitted by staff of the Department, the process of budget request submission is independent of the Rate Review process.
- The MPRRAC does NOT have the authority to change rates without legislative approval and appropriation



**COLORADO**

Department of Health Care  
Policy & Financing

# Meeting Minutes

March 2023

## Edits made:

- Page 4 – change “help” to “held” accountable under Vennita’s comments
- Page 6 – remove “and” from the end of the last sentence in Megan’s comments



**COLORADO**

Department of Health Care  
Policy & Financing





# Q & A



# Meeting Purpose

- **BY THE END OF TODAY:**
  - Understanding of the data for each service
  - Opportunity to listen to Stakeholder feedback
  - Determine need (if any) for further metrics
  
- **JUNE MEETING:**
  - The MPRRAC will have clear definitions of the recommendations being made for each service



# Metrics Used in Rate Adequacy Analysis

- **Benchmark Rate Ratio:** For each service code, and relevant modifier, the rate ratio is the quotient of the corresponding Colorado rate to the Benchmark Rate. For example, if procedure code 99217 has a Colorado Medicaid rate of \$56.08 and Medicare has a rate of \$73.94 then the resulting rate ratio is  $\$56.08/\$73.94 = 0.7585$  or 75.85%.
- **Provider Participation Percentage:** This is calculated by dividing the number of active service providers in Colorado by the total Medicaid providers of a service in the State. This identifies the percentage of service providers in Colorado that are seeing Medicaid Members.



# Rate Comparison Data at a Glance

Services Rate Benchmark Comparison Results					
Service	CO as a Percent of Benchmark	Provider Participation	Service	CO as a Percent of Benchmark	Provider Participation
Anesthesia	136%	53%	Pediatric Behavioral Therapy	92%	85%
Ambulatory Surgical Centers	51.9%	43%	Qualified Residential Treatment Programs	N/A	43%*
Fee-for-Service Behavioral Health Services	86.1%	49%	Psychiatric Residential Treatment Facilities	N/A	43%*
Maternity Services	71.7%	79%	Dental Services	48%	Undefined
Abortion Services	Undefined	Undefined			

*Table 1. Rate Benchmark Comparison & Provider Participation Results*

\*PRTF and QRTP provider participation percentage were grouped together in CIVHC's analysis



# Rate Comparison Data at a Glance Continued

Surgeries Rate Benchmark Comparison Results					
Service	CO as a Percent of Benchmark	Provider Participation	Service	CO as a Percent of Benchmark	Provider Participation
Digestive System	91.4%	46%	Integumentary System	63.8%	60%
Musculoskeletal System	64.3%	53%	Eye and Auditory System	94.7%	50%
Cardiovascular System	153.3%	40%	Other Surgeries	77.9%	54%
Respiratory System	79.3%	51%			

*Table 2. Surgeries Rate Benchmark Comparison & Provider Participation Results*



# Anesthesia

- Service Description:

- Anesthesia includes general, local, and conscious sedation done to permit the performance of medical, surgical, and radiological procedures.

- Last Review:

- [2017 Medicaid Provider Rate Review Analysis Report](#)

- 250 Procedure Codes

- 248 compared to Medicare (99% of codes were compared to Medicare)
- 2 with no comparable Medicare rate



**COLORADO**

Department of Health Care  
Policy & Financing

# Anesthesia - Statistics

Total Adjusted Expenditures FY2022	\$35,662,790
Total Members Utilizing Services in FY2022	94,532
FY2022 Over FY2021 Change in Members Utilizing Services	3.9%
Total Active Providers FY2022	1,764
FY2022 Over FY2021 Change in Active Providers	2.3%

Rate Benchmark Comparison	136%
Colorado Repriced	\$35,662,790
Medicare Repriced	\$26,225,236
Difference	\$(9,437,554)

**Provider Participation: 53%**





# Comments Regarding Anesthesia



**COLORADO**

Department of Health Care  
Policy & Financing





# MPRRAC Discussion



**COLORADO**

Department of Health Care  
Policy & Financing

# Ambulatory Surgical Centers (ASCs)

- Service Description:
  - ASCs are distinct entities that provide a surgical setting for members who do not require hospitalization.
- Last Review:
  - [2019 Medicaid Provider Rate Review Analysis Report](#)
- 2,686 Procedure Codes
  - 2,424 compared to Medicare (90% of codes were compared to Medicare)
  - 262 with no comparable Medicare rate



# ASCs - Statistics

Total Adjusted Expenditures FY2022	\$13,663,071
Total Members Utilizing Services in FY2022	21,890
FY2022 Over FY2021 Change in Members Utilizing Services	9.4%
Total Active Providers FY2022	305
FY2022 Over FY2021 Change in Active Providers	12.1%

Rate Benchmark Comparison	51.9%
Colorado Repriced	\$10,515,358
Medicare Repriced	\$20,265,101
<b>Difference</b>	<b>\$9,749,743</b>

**Provider Participation: 43%**





# Comments Regarding ASCs



**COLORADO**

Department of Health Care  
Policy & Financing



# MPRRAC Discussion



# Fee-for-Service (FFS) Behavioral Health Services

- Service Description:

- Under a separate managed care arrangement, the Department pays a fixed, capitated rate to the RAEs to manage and reimburse for the vast majority of behavioral health services Colorado Medicaid members receive. Each RAE contracts with behavioral health providers and has flexibility to negotiate reimbursement rates with each of those providers. For services covered under the RAE contracts, behavioral health providers bill the RAEs directly for services rendered.<sup>32</sup> Capitated rates reimbursed through the RAEs are not included in the following analysis; only FFS behavioral health rates are included in the analysis.

- Last Review:

- [2019 Medicaid Provider Rate Review Analysis Report](#)

- 18 Procedure Codes

- 12 compared to Medicare (67% of codes were compared to Medicare)
- 6 with no comparable Medicare rate



**COLORADO**

Department of Health Care  
Policy & Financing

# FFS Behavioral Health Services - Statistics

Total Adjusted Expenditures FY2022	\$38,693,668
Total Members Utilizing Services in FY2022	137,635
FY2022 Over FY2021 Change in Members Utilizing Services	7.8%
Total Active Providers FY2022	3,772
FY2022 Over FY2021 Change in Active Providers	12.8%

Rate Benchmark Comparison	86.1%
Colorado Repriced	\$38,693,668
Medicare Repriced	\$44,843,530
Difference	\$6,149,862

**Provider Participation: 49%**





# Comments Regarding FFS Behavioral Health Services



**COLORADO**

Department of Health Care  
Policy & Financing





# MPRRAC Discussion



# Maternity Services

- Service Description:

- Maternity services are any medically necessary pregnancy related service covered during the obstetrical period, beginning on the date of the initial visit in which pregnancy was confirmed and extending through the end of the postpartum period (generally considered ~60 days following delivery). Most maternity related services are reimbursed utilizing global maternity codes for services (including antepartum care, labor and delivery, and postpartum care) that are provided during the maternity period for uncomplicated pregnancies. Normal antepartum care includes monthly visits up to 28 weeks gestation, biweekly visits to 36 weeks gestation and weekly visits until delivery. Maternity care for High-Risk Pregnancies and/or Complications of Pregnancy, where patients at risk are seen more frequently during the prenatal period or for other medical/surgical intervention, are usually billed outside of the normal global OB package for these specific services. Any additional medically necessary visits are usually reported separately with billing codes selected to represent the appropriate level of Evaluation and Management services, as well as billed for separately identified services, such as for other medically necessary laboratory or radiologic tests performed.

- Last Review:

- [2018 Medicaid Provider Rate Review Analysis Report](#)

- 45 Procedure Codes

- 43 compared to Medicare (96% of codes were compared to Medicare)
- 2 with no comparable Medicare rate



**COLORADO**

Department of Health Care  
Policy & Financing

# Maternity Services - Statistics

Total Adjusted Expenditures FY2022	\$26,819,048
Total Members Utilizing Services in FY2022	23,026
FY2022 Over FY2021 Change in Members Utilizing Services	.15%
Total Active Providers FY2022	1,382
FY2022 Over FY2021 Change in Active Providers	3.4%

Rate Benchmark Comparison	71.7%
Colorado Repriced	\$26,819,048
Medicare Repriced	\$37,394,267
Difference	\$10,575,219

**Provider Participation: 79%**





# Comments Regarding Maternity Services





# MPRRAC Discussion



# Abortion Services

- Service Description:

- Per Federal/State guidelines, Health First Colorado covers abortion services if one of the three following circumstances exists: 1. A life-endangering condition for the pregnant individual and under situations of 2. Rape, or 3. Incest.

- Last Review:

- Abortion Services have not been formally reviewed as a separate service. Most codes from this category are also used for other reproductive healthcare services, so it has historically been reviewed as a part of Maternity Services.

- The below codes had no utilization:

- 59841
- 59850
- 59851
- 59852
- 59855
- 59856
- 59857

- 1 Procedure Code

- 1 compared to Medicare (100% of codes were compared to Medicare)
- No comparable Medicare rate
- The pharmaceutical code related to abortion is not reviewed as a part of the Rate Review process as it is considered a Physician Administered Drug and is reviewed periodically along with other Physician Administered Drugs.



**COLORADO**

Department of Health Care  
Policy & Financing

# Abortion Services - Statistics

**Provider Participation: undefined due to utilization**

**Due to having less than 30 claims,  
we cannot share information due to PHI**

**Colorado Medicaid Rate: \$198.76  
Medicare Non-Facility Rate: \$259.05**





# Comments Regarding Abortion Services



**COLORADO**

Department of Health Care  
Policy & Financing





# MPRRAC Discussion



# 10 Minute Break



# Pediatric Behavioral Therapy (PBT)

- Service Description:

- PBT services consist of adaptive behavior treatment services, as well as evaluation and assessment services, for children ages 0-20. PBT services are covered by the Early Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit. This benefit was created as a benefit through EPSDT in January 2018, after being removed as a waiver service. These services are provided both in home and clinical settings.

- Last Review:

- [2020 Medicaid Provider Rate Review Analysis Report](#).

- 6 Procedure Codes/ Modifier Combinations

- 5 compared to the average of 7 other states' Medicaid rates
- 1 with no comparable Medicare rate



# PBT - Statistics

Total Adjusted Expenditures FY2022	\$127,357,636
Total Members Utilizing Services in FY2022	5,528
FY2022 Over FY2021 Change in Members Utilizing Services	20.5%
Total Active Providers FY2022	820
FY2022 Over FY2021 Change in Active Providers	25.6%

Rate Benchmark Comparison	92%
Colorado Repriced	\$127,357,636
Other States Repriced	\$138,457,072
Difference	\$11,099,436

**Provider Participation: 85%**





# Comments Regarding PBT Services





# MPRRAC Discussion



# Qualified Residential Treatment Programs (QRTPs)

- Service Description:

- Facilities that provide residential trauma-informed treatment that is designed to address the needs, including clinical needs, of children with serious emotional or behavioral disorders or disturbances. As appropriate, QRTP treatment facilitates the participation of family members in the child's treatment program, including siblings, and documents outreach to family members, including siblings.
- More data about QRTPs is needed (pricing from other states, utilization, etc) in order to satisfy data metrics.

- Last Review:

- QRTP is a new service as of 2021. Previously, QRTPs fell into Residential Child Care Facilities (RCCFs) but was federally mandated to separate.

- 1 Procedure Code

- 0 compared to Medicare (0% of codes were compared to Medicare)
- 1 with no comparable Medicare rate



**COLORADO**

Department of Health Care  
Policy & Financing

# QRTPs - Statistics

Total Adjusted Expenditures FY2022	\$3,183,803
Total Members Utilizing Services in FY2022	248
FY2022 Over FY2021 Change in Members Utilizing Services	N/A
Total Active Providers FY2022	21
FY2022 Over FY2021 Change in Active Providers	N/A

Rate Benchmark Comparison	N/A
Colorado Repriced	\$3,183,803
Medicare Repriced	N/A
Difference	N/A

**Provider Participation: 43%\***

\*PRTF and QRTP provider participation percentage were grouped together in CIVHC's analysis







# Comments Regarding QRTPs





# MPRRAC Discussion



**COLORADO**

Department of Health Care  
Policy & Financing

# Psychiatric Residential Treatment Facilities (PRTFs)

- Service Description:

- Provide comprehensive mental health treatment to children and adolescents (youth) who, due to mental illness, substance abuse, or severe emotional disturbance, need treatment that can most effectively be provided in a residential treatment facility. PRTF services are provided under the direction of a physician.
- Currently, there are no Medicaid clients in an in-state facility.

- Last Review:

- [2019 Medicaid Provider Rate Review Analysis Report](#)

- 1 Code

- 0 compared to Medicare (0% of codes were compared to Medicare)
- 1 with no comparable Medicare rate



# PRTFs - Statistics

Total Adjusted Expenditures FY2022	\$5,595,488
Total Members Utilizing Services in FY2022	61
FY2022 Over FY2021 Change in Members Utilizing Services	90.6%
Total Active Providers FY2022	23
FY2022 Over FY2021 Change in Active Providers	76.9%

Rate Benchmark Comparison	N/A
Colorado Repriced	\$5,595,488
Medicare Repriced	N/A
Difference	N/A

## Provider Participation: 43%\*

\*PRTF and QRTP provider participation percentage were grouped together in CIVHC's analysis





# Comments Regarding PRTFs





# MPRRAC Discussion



**COLORADO**

Department of Health Care  
Policy & Financing

# Dental Services

- Service Description:

- Colorado Medicaid covered dental services for children; Colorado Medicaid began covering dental services for adults in 2013. The adult dental benefit provides eligible Colorado Medicaid members up to \$1,500 in dental services per state fiscal year. Colorado Medicaid partners with DentaQuest, which operates as an Administrative Services Only organization (ASO), to help members find a dental provider and manage dental benefits.

- Last Review:

- [2018 Medicaid Provider Rate Review Analysis Report](#)

- 466 Procedure Codes

- 177 compared to ADA Survey (40% of codes were compared to ADA Survey)
- 289 with no comparable ADA Survey rate

<https://hcpf.colorado.gov/sites/hcpf/files/Health%20First%20Colorado%20Dental%20Annual%20Report%20FY22.pdf>



# Dental Services- Statistics

Total Adjusted Expenditures FY2022	\$349,409,091
Total Members Utilizing Services in FY2022	595,541
FY2022 Over FY2021 Change in Members Utilizing Services	16.4%
Total Active Providers FY2022	2,026
FY2022 Over FY2021 Change in Active Providers	6.6%

Rate Benchmark Comparison	48%
Colorado Repriced	Undefined due to lack of claims data
Medicare Repriced	Undefined due to lack of claims data
Difference	Undefined due to lack of claims data

## Provider Participation: Undefined

<https://hcpf.colorado.gov/sites/hcpf/files/Health%20First%20Colorado%20Dental%20Annual%20Report%20FY22.pdf>







# Comments Regarding Dental Services





# MPRRAC Discussion



**COLORADO**

Department of Health Care  
Policy & Financing

# Surgeries

- 7 Subcategories:
  - Digestive System
  - Musculoskeletal System
  - Cardiovascular System
  - Respiratory System
  - Integumentary System
  - Eye and Auditory System
  - Other Surgeries
- 3,964 Procedure Codes
  - 3,922 compared to Medicare (99% of codes were compared to Medicare)
  - 42 with no comparable Medicare rate



# Surgeries - Statistics

Total Adjusted Expenditures FY2022	\$107,859,097
Total Members Utilizing Services in FY2022	240,292
FY2022 Over FY2021 Change in Members Utilizing Services	-3.9%
Total Active Providers FY2022	14,943
FY2022 Over FY2021 Change in Active Providers	3.4%

**Provider Participation (All Categories): 62%**



# Surgeries - Digestive System

- Service Description:
  - Digestive system surgery services involve surgical and diagnostic procedures extending from where the food enters the body to where it leaves.
- Last Review:
  - 2017 Medicaid Provider Rate Review Analysis Report
- 622 Procedure Codes
  - 615 compared to Medicare (99% of codes were compared to Medicare)
  - 7 with no comparable Medicare rate



# Surgeries - Digestive System

Rate Benchmark Comparison	91.4%
Colorado Repriced	\$21,642,366
Medicare Repriced	\$23,690,199
Difference	\$2,047,833

**Provider Participation: 46%**





# Comments Regarding Digestive System Surgery





# MPRRAC Discussion





# Surgeries - Musculoskeletal System

- Service Description:
  - Musculoskeletal System Surgery services involve procedures done to the locomotor system, such as spine fusions, arthroscopy, and arthroplasty.
- Last Review:
  - 2017 Medicaid Provider Rate Review Analysis Report
- 1,246 Procedure Codes
  - 1,240 compared to Medicare (99% of codes were compared to Medicare)
  - 6 with no comparable Medicare rate



# Surgeries - Musculoskeletal System

Rate Benchmark Comparison	64.3%
Colorado Repriced	\$23,821,176
Medicare Repriced	\$37,036,569
Difference	\$13,215,393

**Provider Participation: 53%**





# Comments Regarding Musculoskeletal System Surgery



**COLORADO**

Department of Health Care  
Policy & Financing



# MPRRAC Discussion



# Surgeries - Cardiovascular System

- Service Description:
  - Cardiovascular System Surgery services involve procedures related to the heart, veins, and arteries.
- Last Review:
  - 2017 Medicaid Provider Rate Review Analysis Report
- 453 Procedure Codes
  - 445 compared to Medicare (98% of codes were compared to Medicare)
  - 8 with no comparable Medicare rate



# Surgeries - Cardiovascular System

Rate Benchmark Comparison	153.3%
Colorado Repriced	\$17,158,61
Medicare Repriced	\$11,190,181
Difference	\$(5,968,437)

**Provider Participation: 40%**





# Comments Regarding Cardiovascular System Surgery





# MPRRAC Discussion





# Surgeries - Respiratory System

- Service Description:

- Respiratory System Surgery services involve procedures related to the diagnostic evaluation and invasive surgeries of the nose, trachea, bronchi, lungs, and pleura.

- Last Review:

- [2017 Medicaid Provider Rate Review Analysis Report](#)

- 203 Procedure Codes

- 202 compared to Medicare (99% of codes were compared to Medicare)
- 1 with no comparable Medicare rate



**COLORADO**

Department of Health Care  
Policy & Financing

# Surgeries - Respiratory System

Rate Benchmark Comparison	79.3%
Colorado Repriced	\$4,879,225
Medicare Repriced	\$6,154,363
Difference	\$1,275,138

**Provider Participation: 51%**





# Comments Regarding Respiratory System Surgery





# MPRRAC Discussion



# Surgeries - Integumentary System

- Service Description:
  - Integumentary System Surgery services involve procedures of the skin and breast.
- Last Review:
  - 2017 Medicaid Provider Rate Review Analysis Report
- 336 Procedure Codes
  - 330 compared to Medicare (98% of codes were compared to Medicare)
  - 6 with no comparable Medicare rate



# Surgeries - Integumentary System

Rate Benchmark Comparison	63.8%
Colorado Repriced	\$10,440,097
Medicare Repriced	\$16,353,178
<b>Difference</b>	<b>\$5,913,081</b>

**Provider Participation: 60%**





# Comments Regarding Integumentary System Surgery





# MPRRAC Discussion





# Surgeries - Eye and Auditory System

- Service Description:
  - Eye and Auditory Systems Surgery services involve surgeries pertaining to the eye, including the ocular muscles and eyelids, and ears.
- Last Review:
  - 2017 Medicaid Provider Rate Review Analysis Report
- 253 Procedure Codes
  - 249 compared to Medicare (98% of codes were compared to Medicare)
  - 4 with no comparable Medicare rate



# Surgeries - Eye and Auditory System

Rate Benchmark Comparison	94.7%
Colorado Repriced	\$8,577,572
Medicare Repriced	\$9,057,557
Difference	\$479,985

**Provider Participation: 50%**





# Comments Regarding Eye and Auditory System Surgery





# MPRRAC Discussion



# Surgeries - Other

- Service Description:

- This category includes procedures which are considered surgeries but are not included in any of the other surgical categories covered in this report. Services under "other surgeries" are as follows: endocrine system, female genital system, male genital system, intersex surgery, and urinary system. These surgery categories have been added to the rate review cycle since surgeries were previously reviewed in the 2017 Medicaid Provider Rate Review Analysis Report.

- 893 Procedure Codes

- 883 compared to Medicare (99% of codes were compared to Medicare)
- 10 with no comparable Medicare rate



**COLORADO**

Department of Health Care  
Policy & Financing

# Surgeries - Other

Rate Benchmark Comparison	77.9%
Colorado Repriced	\$21,340,044
Medicare Repriced	\$27,380,217
Difference	\$6,040,173

**Provider Participation: 54%**





# Comments Regarding Other Surgeries





# MPRRAC Discussion







# Public Comments



# Next Steps

**NEXT MEETING: JUNE 23, 30?  
9:00am - 12:00pm**



**COLORADO**

Department of Health Care  
Policy & Financing

# Next Steps Continued

**September Meeting:**

**Friday, 9/8, 9:00am -12:00pm?**

**November Meeting:**

**Friday, 11/17, 9:00am -12:00pm?**



# Announcements

## MEETING MINUTES

- Sent to Chair and Vice Chair, then to committee
- Posted on website within 1 week of meeting

## WEBSITE

- <https://hcpf.colorado.gov/rate-review-public-meetings>



# Contact Info

**Michelle LaPlante**

Rate Review Stakeholder Relations Specialist

[michelle.laplante@state.co.us](mailto:michelle.laplante@state.co.us)

**Victoria Martinez**

Waiver and Fee Schedule Rates Manager

[victoria.l.martinez@state.co.us](mailto:victoria.l.martinez@state.co.us)

**Rate Review Team**

[HCPF\\_RateReview@state.co.us](mailto:HCPF_RateReview@state.co.us)



**COLORADO**

Department of Health Care  
Policy & Financing

# Thank you!

