

# Rural Health Clinics

Presented by: Erin Johnson



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# Our Mission

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado



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# Bi-Monthly Rural Health Clinic Meetings

**Today's Meeting: 12:30 - 1:30 P.M.**

**Next Meeting: May 6, 2021      12:30 - 1:30 P.M.**

## **Webinar Link:**

<https://zoom.us/j/93165012998?pwd=b2Y1QTN0SG16WGc5TkUrWmZGamd1QT09>

**Conference Line: 833-548-0282**

**Meeting ID: 931 6501 2998**

**Passcode: 180888**



# Agenda

- Behavioral Health Provider Types
- Hospital-Based Reconciliations
- 2021 Claims Reprocessing
- Rates Topics



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# Behavioral Health Provider Types

- RHC Visit
  - Face-to-face encounter, or interactive audio, interactive video, or interactive data communication between a clinic client and physician, physician assistant, clinical psychologist, clinical social worker, nurse practitioner or nurse midwife
  - Must be a covered Medicaid service



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# What Does This Mean?

## Billable Provider Types

- Physician, physician assistant, clinical psychologist, clinical social worker, nurse practitioner or nurse midwife

**Not Included:** Licensed professional counselor, licensed marriage and family therapist, licensed addiction counselor



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# Questions

- Are RHCs currently using these BH providers to furnish services?
- Are RHCs billing these services to the RAEs or the Department?
- Should we add these providers to the definition of an RHC visit?



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# 2021 Hospital-Based RHC Reconciliations

- Cost report years: 2016, 2017, 2018
- Letters will be sent out soon
- Can request payment plan if amount owed is overly burdensome



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# 2021 Claims Reprocessing

- All RHC's 2021 rates updates have been completed
- Due to backlog of claims adjustments, claims after 1/1/2021 have not been reprocessed
- Will start reprocessing within the next week



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# Rates Topics

• **Planned Go-Live date: January 1, 2022**

- Updates needed:
  - PPS Change in Scope
  - PPS rate setting for new RHCs
  - APM rate setting
  - Managed Care Accuracy Audit



# PPS Change in Scope Process

## Plans

- Use same change in scope process as the FQHCs
  - RHCs will submit application for PPS rate adjustment
  - Department will use Medicare cost report information to calculate new PPS rates
  - New rates must be 3% different from old rates
  - New PPS rates are effective the next January 1<sup>st</sup>



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# PPS Change In Scope - Next Steps

- Share draft application form with RHCs/CRHC
- Set up meeting to go through process
- Collect feedback



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# PPS Rate Setting For New RHCs

## Plans

- PPS rates for new Freestanding RHCs are set at an average of other Freestanding RHC PPS rates in the new RHC's RAE
- PPS rates for new Hospital-Based RHCs are set once a full year of audited cost report information is available.



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# Freestanding RHC APM

## Plans

- Create new process where APM rates are set and updated based on Medicare cost reports
- Obtain most recent cost per visit for each RHC and set that as the APM rate



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# Hospital-Based RHC APM

## Plans

- Keep current APM process
- APM rates are set based on the finalized Medicare cost reports and reconciled



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# Interim Rate Setting - New Hospital-Based RHCs

## Plans

- Set initial rates for new hospital-based RHCs using Medicare rate letter or sister clinic rates
- Update interim rates with newest Medicare rate letters



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# Managed Care Accuracy Audit Report

## Plans

- Establish Managed Care Accuracy Audit (MCAA) process to ensure RHCs are reimbursed at least their per visit encounter rate by MCEs
- Use same process as FQHCs
- Go-Live January 1, 2022



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# Managed Care Accuracy Audit Report

## Work Needed

- Send instructions to RHCs/CRHC for feedback
- Training



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# Other Topics?

We want to hear from you!



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# Questions?



# Contact Info

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# Thank you!

