

Meeting Summary for MAPOC Specialty Rate Plan Forum Zoom Meeting

Mar 18, 2024 08:55 AM Eastern Time (US and Canada) ID: 968 8039 2244

Quick recap

The meeting primarily revolved around the funding of behavioral health rates, with Brad and Sheldon discussing the current rates and the potential impacts of raising them. Other topics included the proposed allocation of funds for the rate study, the rationale behind targeting Emergency Medical (EMM) codes, and the policy of not increasing reimbursement for services provided by physicians in hospital outpatient settings. The conversation ended with a discussion about a topic involving selecting appropriate tables.

Next steps

Brad will provide the calculation of the 4.5% increase in relation to the 5-state comparison and Medicare rates.

Brad will take the feedback from the meeting internally for review and consideration.

Summary

Brad Richards, the Chief Medical Director at the Department of Social Services, thanked everyone for their participation and mentioned that the meeting was a continuation of a previous discussion, specifically about the Rate Study. He also mentioned that the meeting was condensed, with only an hour scheduled until 10 am. However, the specifics of the discussion were not clearly stated in the transcript. Medicaid Rate Study and Recommendations Brad presented the findings of a rate study commissioned by the DSS, which examined Medicaid rates for various services. The study recommended adjustments such as benchmarking rates to Medicare or the average rate set by five other states. The study suggested adjusting rates for behavioral health and physician specialist services and standardizing rates for office insurance disorder services. The next steps involve gathering stakeholder feedback and making recommendations for rate adjustments within the available budget. Brad also discussed the proposed allocation of funds for the rate study, with a suggestion of setting aside \$2 million for position specialists and the remainder for behavioral health services. He also highlighted the need to increase non-facility rates for evaluation and management services provided by specialists. Finally, he discussed the rationale behind targeting Emergency Medical (EMM) codes as the best approach to improve access to care and reduce selection bias. Discussion on Proposed Increase and State Comparison Brad introduced Nina Holmes, who had been involved in the Rate Setting process and the second phase. Brad mentioned that any additional questions or responses should be directed to Nina. Rep Gilchrest asked about the proposed 4.5% increase, specifically what it reflected in terms of a state comparison and Medicare rates. Brad admitted that they had not yet calculated this and would need to do so. Rep Gilchrest found this information important for understanding the impact of the increase. Mark also had a question about the presentation slides, confirming with Brad that the 4.5% increase was relative to the current rate, not percentage points. Physician Reimbursement Policy Concerns Mark Schaefer raised concerns about the policy of not increasing reimbursement for services provided by physicians in hospital outpatient settings, suggesting it was problematic and questioned the rationale behind this decision. Brad acknowledged Mark's point and indicated that it would be addressed later. Sabrina Trocchi (Wheeler), representing a Federally Qualified Health Center, inquired about the long-term plan to ensure competitive and appropriate rates, to which Brad responded that a holistic review would be conducted after the second phase of the rate study. Ellen Andrews emphasized the need for monitoring access and increasing high-value services. Medicare Rates Benchmarking

for Healthcare Services Ellen expressed interest in benchmarking against Medicare rates rather than other states, as she questioned the value of states with higher rates. Brad explained their approach of using Medicare as the primary benchmark, and sometimes comparing to the rates of five other states when Medicare didn't cover a certain service. He also elaborated on the selection of the five states for benchmarking, considering factors such as economic indices, population location, and policy changes. Ellen stressed the importance of using an objective measure like Medicare rates and applying Connecticut's specific goals and quality measures.

Behavioral Health Rates Funding Discussion The meeting primarily revolved around the funding of behavioral health rates. Brad and Sheldon Toubman discussed the current rates and the potential impacts of raising them. Sheldon expressed concern over the low rates and questioned the adequacy of the proposed \$7.5 million increase. Brad admitted they did not have a specific recommendation for increasing the rates but assured they would internally discuss it and present a plan if additional funds were allocated. Nina agreed to gather more information about the comparators for behavioral health rates. The conversation ended without any further questions or concerns being raised.

Provider Rates and Patient Access Concerns Sabrina highlighted the critical role of adequate rates in ensuring direct providers could fill positions and provide necessary care to all patients. She noted that inadequate rates could lead to access issues. Brad acknowledged the concerns and emphasized the challenge of making decisions with limited resources. Ellen pointed out discrepancies in physician outpatient E&M codes and raised concerns about access to specialists and tests, which Brad and others acknowledged as valid but noted the limited data on the issue. Nina suggested looking at more specific services with a focus on pathology-related procedures and agreed to touch base with her team for a more in-depth analysis.

Selecting Appropriate Tables Discussion Brad facilitated a discussion about a topic that involved looking at and selecting appropriate tables. He encouraged questions and thoughtful comments and promised to address any that came up. Brad then mentioned a handout that he thought might have been distributed earlier. Representative Leeder expressed appreciation for the discussion. David requested presentation and Brad promised to send afterwards. The team discussed the comments, with Brad noting they would review the comments internally, discuss them with their sister agencies, and bring forth a final recommendation. Brad apologized for the last-minute notice and thanked everyone for their participation.