

**TEXAS HEALTH AND HUMAN SERVICES  
COMMISSION  
RATE ANALYSIS DEPARTMENT**

**Proposed Medicaid Payment Rates for Medicaid  
Biennial Calendar Fee Review for:**

- (1) Access to Care**
- (2) "B" Codes (Enteral supplies)**
- (3) Medicaid Long-Acting Reversible Contraceptives  
(LARCs)**
- (4) Medicaid Family Planning Services (excluding  
LARCs)**
- (5) Musculoskeletal System Surgery**
- (6) "Q" Codes (Physician, DME, and physician-  
administered drug codes)**
- (7) "R" Codes (Transportation of portable x-ray  
equipment to home or nursing home, per trip)**
- (8) Radiopharmaceuticals**
- (9) Respiratory System Surgery**
- (10) "T" Codes (Registered nurse services, sign  
language or oral interpretive services, screening for  
specified programs, and environmental lead  
investigation)**
- (11) Hospital Outpatient Imaging (Q0035)**

**Payment rates are proposed to be effective  
January 1, 2016**

## **SUMMARY OF PROPOSED MEDICAID PAYMENT RATES**

**Effective January 1, 2016**

Included in this document is information relating to the proposed Medicaid payment rates for Medicaid Biennial Calendar Fee Review for (1) Access to Care, (2) "B" Codes (Enteral supplies), (3) Medicaid Long-Acting Reversible Contraceptives (LARCs), (4) Medicaid Family Planning Services (excluding LARCs), (5) Musculoskeletal System Surgery, (6) "Q" Codes (Physician, DME, and Physician-administered drug codes), (7) "R" Codes (Transportation of portable x-ray equipment to home or nursing home, per trip), (8) Radiopharmaceuticals, (9) Respiratory System Surgery, (10) "T" Codes (Registered nurse services, sign language or oral interpretive services, screening for specified programs, and environmental lead investigation), and (11) Hospital Outpatient Imaging (Q0035). The rates are proposed to be effective January 1, 2016.

### **Hearing**

The Health and Human Services Commission (HHSC) will conduct a public hearing to receive comments regarding the proposed Medicaid rates detailed in this document on November 12, 2015, at 1:30 p.m. in the Public Hearing Room in the Brown-Heatly Building at 4900 North Lamar Boulevard, Austin, Texas 78751, with entrance through Security at the front of the building facing Lamar Boulevard. HHSC will consider concerns expressed at the hearing prior to final rate approval. This public hearing is held in compliance with the provisions of Human Resources Code §32.0282 and the Texas Administrative Code, Title 1 (1 TAC), §355.201, which require a public hearing on proposed payment rates. Should you have any questions regarding the information in this document, please contact:

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HHSC also will broadcast the public hearing; the broadcast can be accessed at <http://www.hhsc.state.tx.us/news/meetings.asp>. The broadcast will be archived and can be accessed on demand at the same website.

### **Background**

HHSC is responsible for the reimbursement determination functions for the Texas Medicaid Program. Proposed rates are calculated utilizing established methodologies that conform to the Social Security Act and related federal regulations, the federally approved Texas Medicaid State Plan, all applicable state statutes and rules, and other requirements. HHSC reviews the Medicaid reimbursement rates for all acute care services every two years. These biennial reviews result in rates that are increased, decreased, or remain the same. The reviews are conducted to ensure that rates

continue to be based on established rate methodologies.

### **Methodology**

The specific administrative rules that govern the establishment of the fees in this proposal include these rules in 1 TAC:

- §355.8021, which addresses the reimbursement methodology for home health services and durable medical equipment, prosthetics, orthotics, and supplies;
- §355.8061, which addresses outpatient hospital reimbursement;
- §355.8085, which addresses the reimbursement methodology for physicians and other practitioners;
- §355.8441, which addresses the reimbursement methodology for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services (known in Texas as Texas Health Steps); and
- §355.8581, which addresses the reimbursement methodology for Family Planning Services.

### **Proposed Rates**

The methodologies used to determine the proposed fee-for-service Medicaid rates are summarized below:

- Procedure codes and descriptions used in the Texas Medicaid Program are national standard code sets as required by federal laws; Healthcare Common Procedural Coding System (HCPCS) and Current Procedural Terminology (CPT).
- Resource-based fee (RBF) methodology uses relative value units (RVUs) established by Medicare times a conversion factor. Current conversion factors include \$28.0672 for most services provided to children 20 years of age and younger and \$26.7305 for services provided to adults 21 years of age and older. Fees for services provided to children and identified as having access-to-care issues may be assigned a higher conversion factor, currently \$30.00.
- Access-based fees (ABFs) allow the state to reimburse for procedure codes not covered by Medicare or for which the Medicare fee is inadequate, or account for particularly difficult procedures, or encourage provider participation to ensure access to care.
- ABFs may also be established based on the Medicare fee for a service that is not priced using RVUs.

- For services and items that are not covered by Medicare or for which the Medicare rate is insufficient, different approaches are used to develop fees based on available information. These alternate methods include, as applicable:
  - The median or mean of the Medicaid fees from 14 states (the 10 most populous and the 4 bordering Texas) or the median or mean of the states that cover the service
  - Regional Medicare pricing from Novitas
  - The current Medicaid fee for a similar service (comparable code)
  - The most recent *HCPCS Fee Analyzer* or the (CPT) *Customized Fee Analyzer*, customized listings of the 25<sup>th</sup>, 50<sup>th</sup>, 75<sup>th</sup>, and 85<sup>th</sup> percentiles of reimbursement rates charged for each of the procedures in the Healthcare Common Procedure Coding System (HCPCS) and the Current Procedural Terminology (CPT) respectively, in the Dallas area
  - 82 percent of the manufacturer suggested retail price (MSRP) supplied by provider associations or manufacturers
  - 89.5 percent of the average wholesale price for enteral and parenteral products
  - Cost shown on a manufacturer's invoice submitted by the provider to HHSC
- Rate determination methodologies related to outpatient hospital and clinical laboratory services are addressed in §355.8061 and §355.8610.

Proposed payment rates are listed in the attachments outlined below:

CFR Att 1 – Access to Care

CFR Att 2 – “B” Codes (Enteral supplies)

CFR Att 3 – Medicaid Long-Acting Reversible Contraceptives (LARCs)

CFR Att 4 – Medicaid Family Planning Services (excluding LARCs)

CFR Att 5 – Musculoskeletal System Surgery

CFR Att 6 – “Q” Codes (Physician, DME, and Physician-administered drug codes)

CFR Att 7 – “R” Codes (Transportation of portable x-ray equipment to home or nursing home, per trip)

CFR Att 8 – Radiopharmaceuticals

CFR Att 9 – Respiratory System Surgery

CFR Att 10 – “T” Codes (Registered nurse services, sign language or oral interpretive services, screening for specified programs, and environmental lead investigation)

CFR Att 11 – Hospital Outpatient Imaging (Q0035)

This public rate hearing briefing packet presents proposed payment rates and is distributed at HHSC public rate hearings and posted by the proposed effective date on the HHSC website at <http://www.hhsc.state.tx.us/rad/rate-packets.shtml>. Proposed rates may or may not be adopted, depending on HHSC management decisions after review of public comments and additional information. Provider and public notification about adoption decisions are published on the Texas Medicaid and Healthcare Partnership (TMHP) website at <http://www.tmhp.com> in banner messages, bulletins, notices, and updates to the Texas Medicaid fee schedules. The fees schedules are available in static files or online lookup at <http://public.tmhp.com/FeeSchedules>.