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METHODS AND STANDARDS OF ESTABLISHING PAYMENT RATES - OTHER MEDICAL CARE
(Continued)

Effective for dates of service on or after January 1, 201~~23~~²³, the RVUs used are the Medicare RBRVS values published by the Centers for Medicare and Medicaid on its website in the file RVU1~~23~~²³A.zip. The DVHA will ~~always use the Non-Facility values for the~~utilize the Non Facility values for services provided in the physician office and facility Practice Expense component of the RVUs to providers when place of service is an inpatient hospital, outpatient hospital, emergency room, ambulatory surgical center, inpatient psychiatric facility, nursing facility or skilled nursing center. The DVHA will follow Medicare's payment logic of using the lesser of the RBRVS or OPPS RVU values for those select procedures subject to the policy.

The GPCIs used are 0.977 for Work, 1.008 for Practice Expense and 0.554 for Malpractice Insurance.

The DVHA will use ~~three~~twoone conversion factors for DVHA covered services payable in the RBRVS methodology except in cases described in SPA #13-009 in which As required by the Affordable Care Act and as amended by Section 1202 of the Health Care and Education Reconciliation Act, effective January 1, 2013 through December 31, 2014, the DVHA will pay primary care physicians who meet criteria set forth by the Centers for Medicare and Medicaid at the Medicare rate for evaluation and management and immunization administration services. The specific codes paid at this enhanced rate are 90471-90474 and 99201-99480. For providers who deliver evaluation and management and immunization services who do not meet criteria set forth by the Centers for Medicare and Medicaid, the DVHA will pay for these services using a conversion factor of \$27.1642. A conversion factor of \$29.20 is used for services in the following series: CPT 99382, 99383, 99384, 99392, 99393, 99394, 90801-90899 and 96101-96155. A conversion factor of \$28.09 is used for services in the following series: CPT 59000-59871, 90471-90474 and 99201-99480. For all other covered services payable in the RBRVS methodology, a conversion factor of ~~\$22.60~~\$27.1642 is used.

Where the Vermont legislature has mandated a two percent reduction on rates paid to providers, the rate on file does not reflect this two percent rate reduction. Depending upon the provider billing the service, DVHA modifier pricing logic may also apply.

As part of ongoing maintenance of the payment system, the DVHA may change the following on a periodic basis either separately or in combination:

1. The RVU values
2. The GPCI values
3. The conversion factors

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