



Rates Update

Shelli Silver

Assistant Director

November 7, 2018



Provider Type 02 Inpatient Hospital Claims – BH Primary Diagnosis

- AHCCCS amending FFS reimbursement methodology - discharge dates on/after 10/1/18
- Pay using a daily rate rather than a DRG
 - This daily rate shall be considered an administrative day rate
 - The claim shall be submitted as an administrative day claim and follow the process outlined by AHCCCS for billing of administrative day claims
 - AHCCCS will amend definition of administrative day in Rule, DRG Policy Document, FFS Provider Manual

Provider Type 02 Inpatient Hospital Claims – BH Primary Diagnosis, cont.

- Current definition of admin day will be maintained – days that do not meet criteria for an acute inpatient stay
- New definition will be added that will specify that the days do meet the criteria for an acute inpatient stay and have a primary diagnosis of BH
 - Original communication:
 - AHCCCS shall pay the daily rate of \$816.39 on the FFS Fee Schedule (BH Inpatient Rates)
 - Which shall not be used for, or confused with, the traditional administrative days reimbursement

Provider Type 02 Inpatient Hospital Claims – BH Primary Diagnosis, cont.

- Revised communication:
 - AHCCCS shall pay a diagnosis-based daily rate of \$816.39, to be loaded in PR050 without regard to revenue code
 - Which shall not be used for, or confused with, the traditional administrative days reimbursement
- **New Communication:**
 - RBHAs shall continue to pay for BH primary diagnosis claims in 02 setting as they were paying effective 9/30/18
 - Per diem rates
 - Revenue code dependent
 - Do not follow this admin day/rate policy

BH Fee For Service Rates – CYE 2019

- ~38k AI members transitioned from RBHAs to AIHP for BH services 10/1/18
- ~1.6k transitioning AI members utilizing BH services
- Servicing providers paid market rates through 9/30/18 dates of service
- AHCCCS FFS rates below market rates for select BH services – varies by County
- Considering market equalization on rates

BH Fee For Service Rates – CYE 2019, cont.

- Rate changes could occur as early as 1/1/19
- Considering various options
- Looking for solutions that will have minimal impact on MCOs
- No capitation changes

BH Fee For Service Rates – CYE 2020

- AHCCCS contracted with Navigant Consulting on BH Fee Schedule review – inpatient/outpatient
- Timeline (subject to change)
 - Kick-off - 10/29/18
 - Report due to AHCCCS - 4/1/19
 - AHCCCS submit report to Legislature - 6/30/19
 - Proposed rates published - 6/30/19
- Goal: development of a sustainable and reproducible rate-setting methodology
- MCOs: consider impacts to contracts eff 10/1/19

Differential Adjusted Payments

- AHCCCS posted a Request for Information on 10/31/18 – comments due 11/30/18
 - <https://www.azahcccs.gov/Resources/Downloads/Solicitations/Open/RFPs/YH19-0048/YH19-0048RFIforDAP.pdf>
- Seeking stakeholder input on Differential Adjusted Payments (DAPs) for CYE 2020 (and for 2021 as some could be pushed back/take longer)
- Provides a list of ideas AHCCCS is already considering in future years

DAP Timeline

Deadline	Key Activities
1/31/2019	Preliminary Public Notice
4/30/2019	Final Public Notice
5/1/2019	Qualifying Providers Identified
7/1/2019	438.6(c) Request for Approval Due to CMS
8/15/2019	MCO Cap Rates Due to CMS (w/prospective funding for DAPs)
10/1/2019	Effective Date of DAP

ACC Risk Adjustment Future Plans

- Expect to continue non-diagnostic based risk model for years 1 and 2 (CYEs 2019 & 2020)
- Implement diagnostic-based risk model for year 3 (CYE 2021)
- Intend to engage actuarial consulting firm specializing in risk adjustment
 - Contract beginning ~7/1/19
- More communication forthcoming from Actuarial Unit

Prop 206 – Minimum Wage

- Next increase to minimum wage is 1/1/19
 - \$0.50 increase
 - Select HCBS procedure codes
 - All NF revenue codes
 - All ALF procedure codes
- Funding for increase already included in ALTCS capitation rates (both EPD and DDD)

Questions?



Thank You.

