

Helen Phillips

From: Newman, Anthony (HSS) <anthony.newman@alaska.gov>
Sent: Wednesday, March 30, 2016 6:50 PM
To: Helen Phillips
Subject: FW: Responses to questions from 3/24 House Finance hearing on SB 74
Attachments: Alaska Medicaid Computed Tomography Reimbursement Rates.pdf

From: Newman, Anthony (HSS)
Sent: Wednesday, March 30, 2016 6:48 PM
To: Pierson, Jane (LAA); Shadduck, Heather R (LAA)
Cc: Davidson, Valerie J (HSS); Sherwood, Jon (HSS); Forrest, Karen L (HSS); Brodie, Margaret C (HSS); Dunkin, Susan M (HSS); Martin, Monique R (HSS); Erickson, Deborah L (HSS); Peterson, Darwin R (GOV); Wilcox, Lacy J (GOV); McClanahan, Natasha S (GOV)
Subject: Responses to questions from 3/24 House Finance hearing on SB 74

Jane and Heather:

Here are responses to questions asked in the Thursday, March 24th House Finance hearing on SB 74 for which the Department offered to provide further details. Please distribute to committee members.

1. ***Rep. Saddler requested background on the legality of requiring Medicaid recipients to participate in care management programs, and limiting participation in Medicaid if someone refuses.***

Please see the following regulations. They outline, from both the state and federal perspective, how the Department can enroll Medicaid recipients in care management programs, enforce restrictions, and provide fair hearing rights for individuals who disagree with these decisions. Recipients in the care management program can still receive all medically necessary Medicaid covered services, as long as they comply with the rules of the care management program. If they do not they are liable for the cost of services provided outside the program.

[7 AAC 105.600 Restriction of recipient's choice of providers](#)

[42 CFR 431.54 Exceptions to certain state plan requirements](#)

2. ***Rep. Munoz requested the Medicaid reimbursement for a computed tomography (CT) scan.***

Please see the attached table of CT scan rates. Note that payment rates vary depending on whether the service is offered in a physician's office or hospital and depending on the type of scan performed.

3. ***Rep. Saddler requested summaries of the Department's care management programs, and Rep. Wilson requested enrollment figures for these programs, including the number of individuals who declined participation.***

The Department is operating three care management programs at this time:

- A. The Lock-In Care Management Program has been in place since the early 1990s to combat harmful and costly inappropriate use of Medicaid-covered services. The Lock-In Program

limits a recipient to a primary care provider and a single pharmacy to reduce misuse of Alaska Medicaid services, encourage continuity of care, and promote communication between the recipient's primary care provider and pharmacy. Providers eligible to serve as primary care providers under this program and they include Physicians, Advanced Nurse Practitioners, and Physician Assistants. Recipients who could benefit from the program are most often identified by the Department or its fiscal agent, Xerox State Healthcare, but are also referred to the program by medical providers or other concerned individuals. A utilization review of the most recent 12 months of medical and pharmacy records is then conducted to determine if the individual meets criteria for this program. If placement is determined appropriate, the recipient is sent a notice explaining the reason for, and the date of placement into the program. The notice includes reports detailing the area(s) the patient has overused medical services. Care Management Program participation generally lasts for twelve months, during which time the recipient is limited to services rendered by the primary care provider and a single pharmacy. With the exception of emergency services, a recipient may seek treatment from other providers only after receiving an advance written referral from the primary care provider. This program saves approximately \$1.9 million a year. To date the Lock-In Program has enrolled 162 individuals. Thirty-nine individuals have requested fair hearings to contest their enrollment in the program.

- B. The MedExpert Care Management Program is a voluntary pilot project for individuals who have been identified to have three or more hospital visits in a 12-month period. The program began in December 2014. Through a contract with the Department, MedExpert assigns Medicaid recipients to case management and care coordination to build trust, increase understanding of their medical conditions, and ultimately improve the quality of their lives and help them make healthier lifestyle decisions. Case work is primarily conducted by telephone. This program began in 2013. To date 5,269 Alaskans have been enrolled and 523 have declined participation in the program. The Department estimates that this program has saved about \$6 million in state general funding through avoidance of health care costs for these individuals.
- C. The Qualis Care Management Program is also a voluntary pilot project is similar to the MedExpert Care Management Program except that care coordination services are primarily provided by an in-person case manager. This approach is more in line with managed care as it has traditionally been understood. To date this program has 19 participants; 39 individuals have declined participation. Furthermore, Qualis offers information about conditions that people have whether they participate or not, so if individuals decline they are provided information that includes recommendations on how to manage their conditions. This project began in November 2015 so we do not yet have data on the savings generated by this program.

Tony

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Alaska Medicaid Computed Tomography Reimbursement Rates

Provided by the Alaska Department of Health and Social Services, March 26, 2016

Procedure Code	Procedure Code Description	Physician Imaging	Hospital Imaging
70450	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL	\$251.01	\$618.76
70460	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)	\$329.47	\$982.50
70470	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED	\$335.17	\$1,323.21
70480	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE,	\$419.10	\$658.77
70481	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE,	\$483.54	\$727.41
70482	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE,	\$534.18	\$486.00
70486	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL	\$346.41	\$593.31
70490	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL	\$340.63	\$593.67
70491	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)	\$407.64	\$763.69
70496	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITH CONTRAST MATERIAL(S), INCLU	\$746.83	\$929.43
70498	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITH CONTRAST MATERIAL(S), INCLU	\$771.23	\$846.21
71250	COMPUTED TOMOGRAPHY, THORAX; WITHOUT CONTRAST MATERIAL	\$318.24	\$666.81
71260	COMPUTED TOMOGRAPHY, THORAX; WITH CONTRAST MATERIAL(S)	\$397.27	\$742.24
71270	COMPUTED TOMOGRAPHY, THORAX; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONT	\$479.42	\$601.00
71275	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST (NONCORONARY), WITH CONTRAST	\$611.19	\$855.81
72125	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL	\$325.91	\$679.90
72128	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL	\$318.33	\$800.94

Procedure Code	Procedure Code Description	Physician Imaging	Hospital Imaging
72131	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL	\$317.37	\$680.14
72192	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL	\$267.93	\$629.91
72193	COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)	\$411.99	\$792.34
72194	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONT	\$460.52	\$681.43
73200	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL	\$316.05	\$643.68
73700	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL	\$317.01	\$637.39
74150	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL	\$274.77	\$840.04
74160	COMPUTED TOMOGRAPHY, ABDOMEN; WITH CONTRAST MATERIAL(S)	\$420.82	\$914.00
74170	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CON	\$483.45	\$749.38
74174	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN AND PELVIS, WITH CONTRAST	\$752.92	\$966.74
74175	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITH CONTRAST MATERIAL(S), IN	\$613.97	\$1,236.29
74176	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL	\$358.59	\$1,043.45
74177	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITH CONTRAST MATERIAL	\$525.21	\$1,243.55
74178	COMPUTED TOMOGRAPHY, ABDOMEN AND PELVIS; WITHOUT CONTRAST MATERIAL IN ON	\$612.75	\$1,569.98
75574	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEART, CORONARY ARTERIES AND BYPASS GR	\$696.17	\$560.82
75635	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMO	\$684.56	\$1,241.95