



State of Vermont
Agency of Human Services
280 State Drive, Center Building
Waterbury, VT 05671-1000

Global Commitment Register

August 5, 2022

GCR 21-036
FINAL

RBRVS Fee Schedule Update

Technical Correction: Over the course of the public comment period for this proposed policy, it was brought to the State's attention that there was a language discrepancy in the Medicaid State Plan for payment to certain nurse practitioners under the RBRVS reimbursement methodology. Updates to discounting policies for non-physician services in the RBRVS fee schedule were described in [GCR 17-061](#). The Medicaid State Plan has been corrected. The [annotated change to Attachment 4.19-B page 7](#) can be viewed here.

Policy Summary:

The Department of Vermont Health Access (DVHA) updated its Medicaid State Plan reimbursement methodology for Resource-Based Relative Value Scale (RBRVS) payments, including changes to the primary care conversion factor and the standard conversion factor.

In keeping with the process of using the best available data and alignment with Medicare, DVHA adopted the calendar year 2022 Medicare relative value units (RVUs), which are the basis of RBRVS payments and reflect the most recent data published by the Centers for Medicare and Medicaid Services (CMS). Effective January 1, 2022, the primary care conversion factor decreased from \$36.09 to \$33.60 to align with Medicare. The standard conversion factor decreased from \$29.71 to \$28.54.

Due to an unusual late adjustment by Medicare to its calendar year 2022 RVUs, DVHA again changed the primary care conversion factor effective April 15, 2022. On that date the primary care conversion factor increased from \$33.60 to \$34.60. The [annotated change is reflected in Attachment 4.19-B page 10](#) and can be viewed here.

Effective Date:

January 1, 2022, except the late adjustment to the primary care conversion factor to \$34.60 is effective April 15, 2022.

Authority/Legal Basis:

This change is being done through Global Commitment to Health waiver authority, where DVHA may establish rates with providers on an individual or class basis without regard to the rates currently set forth in the approved State Plan.

[Global Commitment to Health Waiver](#): Waiver authority #5 [Section 1902(a)(13), 1902(a)(30)]; Special Term and Condition #29.

Population Affected:

All Medicaid

Fiscal Impact:

The estimated gross annualized budget impact is \$9,891,927.

Public Comment Period:

The public comment period ended January 17, 2022. [One comment and state response can be viewed here.](#)

To be added to the GCR email list, send an email to AHS.MedicaidPolicy@vermont.gov.

Additional Information:

The following State Plan page was amended:

- Attachment 4.19-B page 10

Click here for the [Medicaid State Plan](#) on the AHS website.