

Global Commitment Register

February 15, 2023

GCR 22-126 PROPOSED

2023 Durable Medical Equipment, Prosthetics/Orthotics, and Supplies Fee Schedule Update

Policy Summary:

The Department of Vermont Health Access (DVHA) has conducted its annual review of the Durable Medical Equipment, Prosthetics/Orthotics, and Supplies (DMEPOS) fee schedule.

Effective March 1, 2023, changes to DMEPOS rates include:

- 1. Alignment with current Medicare pricing to reflect 98% of Medicare rates.
- 2. Adjust to 98% of current rates, excluding incontinence, vision, and hearing services.
- 3. Alignment with Medicare to add two new codes to the Capped Rental list.

A description of these changes can be found below.

Effective Date:

March 1, 2023

Authority/Legal Basis:

Medicaid State Plan

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 #6.8.

Population Affected:

All Medicaid

Fiscal Impact:

The estimated gross annualized budget impact is \$255,644.



Public Comment Period:

February 15, 2023 – March 15, 2023

Send comments to: Medicaid Policy Unit 280 State Drive, Center Building Waterbury, VT 05671-1000

Or submit via e-mail to AHS.MedicaidPolicy@vermont.gov.

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

Additional Information:

1. Alignment with current Medicare Pricing.

To align reimbursement rates with the latest version of Medicare pricing, DVHA shall reimburse 98% of the Medicare rate for codes for which there is a corresponding Medicare rate. The Medicare Vermont-specific Rural Rate will be used for all Medicaid-covered codes where available. If no Vermont-specific Rural Rate (VR) is available, the Vermont-specific Non-Rural Rate (VNR) will be used. DVHA used the most recently available Medicare fee schedule; for rates beginning March 1, 2023, the most recently available were the Medicare October 2022 rates.

To align with recent Medicare pricing changes, DVHA shall no longer manually price codes B4187, K1014, K1022, K1024, K1025 and L2006. The reimbursement for these codes will follow the Medicare reimbursement methodology outlined above.

2. Adjustment of current Medicaid Rates.

To align reimbursement rates with the Medicare methodology, DVHA shall adjust to 98% of current Medicaid rates, excluding incontinence, vision, and hearing services.

3. Alignment with Medicare Capped Rental list.

To align with recent changes to the Medicare Capped Rental list, DVHA shall add code K1024 and K1025 to the Vermont Medicaid Capped Rental list as rental only codes effective March 1, 2023.

The draft Global Commitment Amended State Plan page provides additional details on the proposed changes; copies of the draft page can be requested from local Department for Children and Families (DCF) offices or from the Department of Vermont Health Access (DVHA) at (802) 355-8843, or can be found on Agency of Human Services website.

