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

2. a. 2. Outpatient Hospital and Ambulatory Surgical Center Services (Continued)

iii. Special Payment Provisions (Continued)

H. ~~[Reserved]~~ Emergency Department Per Diem for Extended Mental Health Stays

Extended Emergency Department stays in which a Medicaid beneficiary meets clinical criteria for inpatient psychiatric level of care and there are no beds available for placement are reimbursed at a per diem rate established by the Division of Rate Setting equal to the average statewide rate per patient day paid for services furnished in nursing facilities during the previous calendar year.

I. Other Rate Adjustments

There may be some situations where a fee has not been established by the Medicare OPPS or by the DVHA for a covered outpatient service. Payment for these services will be allowed charges multiplied by the Cost to Charge Ratio assigned to the hospital as defined in 2.iii.c.

J. Outpatient Dental Services

Effective with dates of services on or after July 1, 2021, covered outpatient dental services will no longer be paid using Medicare's OPPS APC fee schedule. Instead, covered outpatient dental services for Hospitals and Ambulatory Surgical Centers will be paid via a Vermont Medicaid specific payment methodology. This payment methodology for outpatient dental services will work in conjunction with the existing Vermont Medicaid dental fee schedule. DVHA has created two Vermont Medicaid specific APC groups (APC 001 and APC 002) for covered outpatient dental services. All outpatient dental services delivered in an outpatient hospital or ambulatory surgical center setting will be reimbursed for the technical component of the service as follows:

Diagnostic Services (D0120-D0999) – Packaged Service (\$0.00)
Preventative Services (D1110-D1999) – Packaged Service (\$0.00)
Restorative Services (D2140-D2999) – APC 001
Endodontics (D3110-D3999) – APC 001
Periodontics (D4210-D4999) – APC 001
Prosthodontics (D5110-D5999) – APC 001
Implant Services (D6010-D6199) – APC 001
Prosthodontics, Fixed (D6205-D6999) – APC 001
Oral & Maxillofacial Surgery (D7111-D7999) – APC 002
Orthodontics (D8010-D8999) – VT Medicaid Dental Fee Schedule Rate
General Services (D9110-D9999) – VT Medicaid Dental Fee Schedule Rate

Covered outpatient dental services assigned to either APC 001 or 002 will be assigned a Medicare status indicator of T, which will indicate that the OPPS multiple procedure reduction will be applied. For packaged services, a Medicare status indicator of N will be applied. For dental services paid through DVHA's dental professional fee schedule, a Medicare status indicator of M will be applied.

(Continued)

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