



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

Global Commitment Register

December 26, 2024

GCR 25-007
PROPOSED

RBRVS Fee Schedule Update

Policy Summary:

The Department of Vermont Health Access (DVHA) has conducted its annual review of the Resource-Based Relative Value Scale (RBRVS) professional fee schedule.

Changes to RBRVS rates include alignment with current Medicare Relative Value Units (RVUs) based upon Medicare's calendar year (CY) 2025 Physician Fee Schedule (PFS) Final Rule. This update will include an adjustment to the standard conversion factor (CF), which will be reduced to \$28.96, equivalent to 89.5% of Medicare's CF. The primary care CF will remain at \$37.28, equivalent to 115.2% of Medicare's CF. The 2025 Practice Expense Geographic Practice Cost Index (GPCI) for Vermont will remain at 0.993. The 2025 Malpractice GPCI for Vermont will remain at 0.518.

Additional Information for the CY 2025 Update:

1. OBGYN providers who are board certified as a primary care provider can elect to fill out the Enhanced Primary Care Physician (EPCP) Self-Certification form to receive the Primary Care Provider (PCP) CF rate for those evaluation and Management (E&M) and vaccine administration services that qualify.
2. DVHA is updating the reimbursement rate for Lactation Classes (CPT code S9443). S9443 is allowed to be billed by provider types: 005, 043, T06, T37, and T39 without the International Board-Certified Lactation Consultant (IBCLC) credential. Otherwise, DVHA requires that anyone who bills S9443 must have the IBCLC credential and must enroll with the S54 specialty. The payment rate for this code will be updated for all providers listed above rather than payment at different rates based on place of service or specialty. Reimbursement rates can be found on the Vermont Medicaid Fee Schedule.
3. DVHA will include Interpreter Services (CPT code T1013) within the RBRVS professional fee schedule to ensure this service is incorporated in the annual review process.
4. To align with Medicare's PFS site of service payment differentials Place of Service (POS) code 02: Telehealth Provided Other than in Patient's Home will be updated to reimburse at the facility rate.

5. Certified Pediatric and Family Nurse Practitioners reimbursement is being updated to reflect that payment is made at the lower of the actual charge or 90% of the Medicaid rate on file. This is a technical correction to reflect the current methodology.
6. DVHA completed a review of psychiatric payments to make reimbursement more uniform and consistent with current payment methodologies. Enhanced psychiatric incentive payments are no longer applicable and will be removed as of January 1, 2025.

Effective Date:

January 1, 2025

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:

This change is expected to be budget neutral.

Public Comment Period:

December 26, 2024 – January 27, 2025

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:

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 DVHA at (802) 355-8843, or can be found on [Agency of Human Services website](#).