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

20. Extended Services to Pregnant Women

Payment is made at the lower of the usual and customary charge to the general public or the Medicaid rate on file for the particular service. The agency's rates were set as of 10/01/10 and are effective for services on or after that date. All rates are published at <u>http://dvha.vermont.gov/for-providers/claims-processing-1</u>. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

21. <u>Ambulatory Prenatal Care For Pregnant Women During a Presumptive Eligibi1ity Period</u> Not provided.

22. Respiratory Care

Payment is made at the lower of the actual charge or the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. This methodology was updated for dates of service effective on or after the date specified in the RBRVS section (26) of this attachment. All rates are published at http://dvha.vermont.gov/for-providers/claims-processing-1. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private.

23. Certified Pediatric and Family Nurse Practitioners

Payment is made at the lower of the actual charge or <u>90% of</u> the Medicaid rate on file. For services payable in Medicare's Resource Based Relative Values Scale payment methodology, the DVHA is utilizing the Medicare RBRVS RVUs, the Medicare GPCIs and State determined conversion factors as specified in Section 26. The RBRVS methodology was updated for dates of service effective as specified in Section 26 of Attachment 4.19-B. All rates are published at <u>http://dvha.vermont.gov/for-providers/claims-processing-1</u>. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private providers.

24. <u>Any Other Medical Care And Any Other Type Of Remedial Care Recognized Under State Law, Specified By The</u> <u>Secretary</u>

a. <u>Transportation</u>

Rates for ambulance services were set as of 07/01/2023 and will be paid at 100% of Medicare's 2023 urban base ambulance rates. When no Medicare rate is available rates are established by analyzing payment and utilization data, other state Medicaid rates, or rates for similar codes. If a fixed rate cannot be established reimbursement equals 60% of the billed charges. Payment for transportation other than ambulance services is made through a negotiated per member, per week (PMPW) payment methodology made to the existing network of NEMT brokers. The agency's rates were set as of 07/01/2024 and are effective for services on or after that date. All rates are published on the DVHA website. Except as otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private providers.

b. Treatment no Transport

Ambulance service response and treatment when no transport is provided will be paid at 100% of the 2024 Medicare urban base rate for Basic Life Support (BLS), non-emergency transport.

GCR# <u>25-007</u> 24-068 Supersedes GCR# <u>24-068</u> 24-065 Effective Date: <u>1/1/2025</u>7/1/2024

Last TN# 16-0013

Approval Date: N/A_