

# Quadrennial Rate Review Summary (AB 108)

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## **Overview:**

The Quadrennial Rate Review (QRR) is a comparison of Fee-For-Service (FFS) rate reimbursement levels to provider reported costs, current Medicare reimbursement rates, and other States' FFS reimbursement rates. The report is a valuable tool used to provide rate increase recommendations to the Director of the Nevada Department of Health and Human Services. The QRR relies heavily on provider feedback and accurate cost reporting. Without this feedback from Nevada Medicaid providers, the DHCFP must make recommendations based on the information available from other states. This does not always accurately reflect costs in Nevada, so the DHCFP is increasing its outreach efforts and working with providers to actively engage in this process.

[Assembly Bill 108](#) of the 2017 legislative session requires the DHCFP to:

- Review the reimbursement rate for each service or item covered by the Medicaid State Plan every four years;
- Determine if the rate of reimbursement accurately reflects providers' costs of providing the service or item;
- If the DHCFP determines that the rate of reimbursement for a service or item does not accurately reflect the actual cost of providing the service or item, the DHCFP calculates the reimbursement rate that accurately reflects the actual cost of providing the service or item and recommends that rate to the Director for possible inclusion in the State Plan for Medicaid.

## **Annual Report:**

The Quadrennial Rate Review (QRR) report is completed annually and includes recommendations for the provider types *analyzed* in the prior year. For example, providers' costs analyzed in Calendar Year 2021 will be on the 2022 report. Surveys collected in Calendar Year 2021 may not always be analyzed that same year and is dependent on the level of provider feedback. The DHCFP will, at times, submit a second survey to try and get more feedback to include in the analysis, especially for larger provider groups.

## **Methodology and Schedule of Reviews:**

DHCFP has established an annual schedule for completing rate reviews by provider type. Completed surveys can be emailed to [rates@dhcfp.nv.gov](mailto:rates@dhcfp.nv.gov) or mailed to the address listed at the top of the survey. Various channels will be used to notify affected providers of the availability of surveys for selected provider types, including but not limited to: email and fax blasts from DHCFP's fiscal agent (Gainwell Technologies), correspondence to provider associations, Web Announcements on the Nevada Medicaid Provider Portal, and website updates.

## **Provider Response Rate:**

Provider surveys request information regarding the Customary Charges and Costs of Providing Service for each CPT/HCPCS/Revenue code allowed under the designated provider type. Providers should ensure that surveys are completed and submitted by the deadline listed on the survey.

Provider Response rates for the 2020 Report and 2021 Report are listed below. The survey response rates for various provider types has been extremely low. Therefore, the DHCFP strongly encourages providers to participate in these surveys as they help determine if the current reimbursement rates paid

to providers align with their costs. It is equally important that costs are reported accurately as the analysis uses the median of costs when analyzing the data.

#### Response Rates by Provider Type and Specialty (2020 Report)

Provider Type, Specialty	Enrolled Providers	Codes in Fee Schedule	Responses Received	Response Rate
PT 17 Special Clinics, 166 Family Planning Clinics	3	73	0	0%
PT 17 Special Clinics, 171 Methadone	7	4	0	0%
PT 17 Special Clinics, 174 Public Health	6	126	0	0%
PT 17 Special Clinics, 182 Indian Health Programs (Non-Tribal)	1	18	0	0%
PT 17 Special Clinics, 183 Comprehensive Outpatient Rehabilitation	6	37	0	0%
PT 17 Special Clinics, 195 Community Health Clinic	27	86	0	0%
PT 17 Special Clinics, 198 HIV	3	27	0	0%
PT 22 Dentist/Oral and Maxillofacial Surgery	1,079	345	14	1%
PT 23 Hearing Aid Dispenser/Clinical	8	52	0	0%
PT 27 Radiology and Noninvasive Diagnostic	38	2,536	0	0%
PT 32 Ambulance, Air or Ground – Cost-based Public	15	30	3	20%
PT 32 Ambulance, Air or Ground – Private and Other Public	73	30	0	0%
PT 43 Laboratory, Pathology/Clinical	62	1,260	1	2%
PT 72 Nurse Anesthetist	266	116	0	0%
PT 74 Nurse Midwife	55	100	0	0%
PT 76 Audiologist	112	154	0	0%

#### Response Rates by Provider Type and Specialty (2021 Report)

Provider Type, Specialty	Enrolled Providers	Codes in Fee Schedule	Responses Received	Response Rate
PT 14 Behavioral Health Outpatient, Spec 300 Qualified Mental Health Professional	1,320	73	23	2%
PT 14 Behavioral Health Outpatient, Spec 301 Qualified Mental Health Associate	1,431	14	7	0%
PT 14 Behavioral Health Outpatient, Spec 302 Qualified Behavioral Aide	1,107	5	5	0%
PT 14 Behavioral Health Outpatient, Spec 305 Licensed Clinical Social Worker	334	65	7	2%
PT 14 Behavioral Health Outpatient, Spec 306 Licensed Marriage & Family Therapist	242	65	6	2%
PT 14 Behavioral Health Outpatient, Spec 307 Clinical Professional Counselor	121	65	5	4%
PT 14 Behavioral Health Outpatient, Spec 308 Day Treatment Model	34	1	1	3%
PT 15 Registered Dietitian and Medical Nutrition Therapy	77	6	4	5%
PT 26 Psychologist	311	56	5	2%
PT 30 Personal Care Aide - Provider Agency	177	2	22	12%
PT 82 Behavioral Health Rehabilitative Treatment (Includes Spec 300 Qualified Mental Health Professional, 301 Qualified Mental Health Associate & 302 Qualified Behavioral Aide)	208	25	1	0%
PT 83 Personal Care Aide - Intermediary Service Organization	16	2	2	13%
PT 85 Applied Behavioral Analysis, Spec 310 Licensed & Board Certified Behavior Analyst	156	10	6	4%
PT 85 Applied Behavioral Analysis, Spec 311 Psychologist	8	10	2	25%
PT 85 Applied Behavioral Analysis, Spec 312 Licensed & Board Certified Assistant Behavior Analyst	18	6	6	33%
PT 85 Applied Behavioral Analysis, Spec 314 Registered Behavior Technician	638	5	6	1%

## Frequently Asked Questions (FAQ)

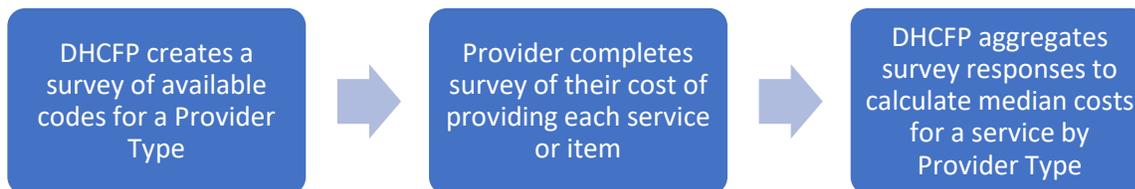
### How many rates need to be reviewed?

As of January 2021, 290,000+ active rates covering 65 Provider Types (category of provider performing the billing). Provider Types can be individuals, facilities, or other organizational structures.

### What is the rate review schedule?

The rate review schedule is updated as needed to reflect which surveys will be available annually. Rate reviews are organized by Provider Type. The schedule of reviews is posted [here](http://dhcfp.nv.gov/Resources/Rates/AB_108_Reviews/) ([http://dhcfp.nv.gov/Resources/Rates/AB\\_108\\_Reviews/](http://dhcfp.nv.gov/Resources/Rates/AB_108_Reviews/))

### How is the cost of providing the service or item determined?



### Does the DHCFP audit the cost information submitted by providers?

The DHCFP does not have the authority to audit the cost information submitted by providers in their survey responses. The DHCFP uses the information provided by the provider to determine costs.

### How do providers find out about the survey?

The DHCFP reaches out to providers multiple ways:

- website postings, web announcements, and social media posts;
- email/fax outreach from Gainwell Technologies and DHCFP emails/calls to providers;
- contact with provider associations and boards

### Will a rate increase if it is determined to be below the average cost of providing that service or item?

If a reimbursement rate is below providers' average costs, the DHCFP must recommend an increase in that rate to align with costs. The Director of the Department of Health and Human Services will then determine if a rate increase should be included in the Medicaid State Plan. The QRR includes the fiscal impact of any recommended rate increases as the DHCFP must ensure sufficient budget authority exists for any increases to the budget.

Rate increases also require approval from the Centers for Medicare and Medicaid Services (CMS) prior to implementation via a State Plan Amendment (SPA). The process for SPAs includes a Public Workshop, Public Hearing, and submission of the SPA documents to CMS for review and approval.

### How are the results of the rate reviews disseminated?

The final report is posted online each year on the DHCFP Rate Analysis and Development website: [http://dhcfp.nv.gov/Resources/Rates/AB\\_108\\_Reviews/](http://dhcfp.nv.gov/Resources/Rates/AB_108_Reviews/)