

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Health Care Finance

Transmittal # 21-14

Office of the Senior Deputy Director/
Medicaid Director



To: All Medicaid Providers Billing for Services under the Medicaid Fee-For-Services Fee Schedule

From: Melisa Byrd
Senior Deputy Director and State Medicaid Director

Date: March 18, 2021

Subject: Notice of Annual Pricing Update to the Medicaid Fee-For-Service (FFS) Fee Schedule

Purpose

The purpose of this Transmittal is to notify all Medicaid providers billing Medicaid fee-for-services (FFS) for professional items and services of updates to the District’s professional fee schedule as required under 29 DCMR 998 for physician services, physician-administered drugs, durable medical equipment (DME), parenteral/enteral nutrition items and laboratory services. The professional services categorization refers to all providers who submit claims to the DC Medicaid program using the CMS-1500 claims form.

Professional Fee Schedule Update

Under the District of Columbia’s Medicaid State Plan, most physician services, physician-administered drugs, DME and laboratory services are reimbursed at 80% of the Medicare rates as established by the federal Centers for Medicare and Medicaid Services (CMS). The exceptions are: certain primary care physicians who have qualified for an enhanced rate and certain DME items and chemotherapy-related physician-administered drugs, which are paid at 100% of the Medicare rate. In addition, eight drug codes were updated with wholesale acquisition cost (WAC) pricing. As well, COVID-19 testing and vaccine/treatment administration codes are paid at 100% of the available Medicare rate during the Public Health Emergency as noted in previous transmittals (please see transmittals 20-09, 20-13, 20-22, 20-41, 20-44, 20-45). DHCF makes pricing updates to the fee schedule annually to ensure the reimbursement rates are up to date and are properly aligned with the State Plan provisions.

Physician service pricing updates will be effective January 1, 2021; affected claims will be reprocessed to apply these changes with retroactive adjustments made as applicable. Updates related to physician-administered drugs, DME, parenteral/enteral nutrition items and laboratory services will be effective April 1, 2021. Accordingly, please note that the reimbursement rates and maximum unit values will increase for some and decrease for others. Detailed changes can be found online at:

<https://www.dc-medicaid.com/dcwebportal/providerSpecificInformation/providerInformation>.

Managed Care Organization Rates

Each managed care organization (MCO) negotiates rates with its providers. Providers will be reimbursed according to their contract with each managed care organization (MCO).

Contact

If you have any questions or suggestions related to this pricing updates, please contact Amy Xing, Reimbursement Analyst, at (202) 481-3375 or amy.xing2@dc.gov.