

Last year's CT Medicaid cuts to radiology provider reimbursement will limit access, impede patient care

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Co-Chair, Legislative Committee
Radiological Society of Connecticut

Background

- Before April 1, 2015, interpreting imaging studies was paid 100% of 2007 Medicare rates (rates that are already lower than private insurance).
- Effective April 1, 2015, DSS slashed these payments to 57.5% of the prior reimbursement rate.
- During the budget process in June 2015, radiologists across the state, through the RSC, raised concerns about the adverse effects from these cuts with legislators, DSS, and the Governor's office.
- While cuts to other providers were fully or partially restored, the cuts to radiology were not addressed.

Concerns

- These cuts target one small group of physicians, not hospitals. Cuts to other providers were reversed.
- Private physician practices are small businesses. These cuts will lead to decisions to limit access to Medicaid patients, close offices, and eliminate staff.
- This was an “across the board” cut that not only lowers reimbursement from the state, but also forfeits matching funds from the federal government.
 - The savings in the state budget estimated at \$4.5M.
 - But the loss to radiology providers is \$13+M.

Take home points

- Connecticut Medicaid reimbursement rates for providers are out of line with rates elsewhere in New England, and across the country.
- Rate cuts will result in decreased access for Medicaid patients at private outpatient imaging centers – and already have.



As Medicaid grows, will there be more cuts to provider payments?

By: **ARIELLE LEVIN BECKER** | June 25, 2015

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(Department of Social Services spokesman David) Dearborn said that even with the cuts, Connecticut's rates are higher than those in New York and in line with other New England states.

nt

EXAM	CT	MA	ME	NH	VT	NY
Chest X-ray, 2v	\$6.50	\$8.02	\$7.48	\$11.20	\$8.90	\$5.59
Chest X-ray, 1v	\$5.34	\$6.49	\$8.97	\$9.39	\$7.46	\$4.54
CT head	\$24.86	\$31.07	\$29.17	\$43.36	\$34.45	\$21.66
US abd	\$23.93	\$29.55	\$27.48	\$41.55	\$32.73	\$20.60
Screening Mammo	\$20.45	\$38.36	\$23.46	\$35.73	\$28.14	\$34.50

EXAM	CT/M A	CT/M E	CT/N H	CT/V T	CT/N Y
Chest X-ray, 2v	81%	87%	58%	73%	116%
Chest X-ray, 1v	82%	60%	57%	72%	118%
CT head	80%	85%	57%	72%	115%
US abd	81%	87%	58%	73%	116%
Screening Mammo	53%	87%	57%	73%	59%

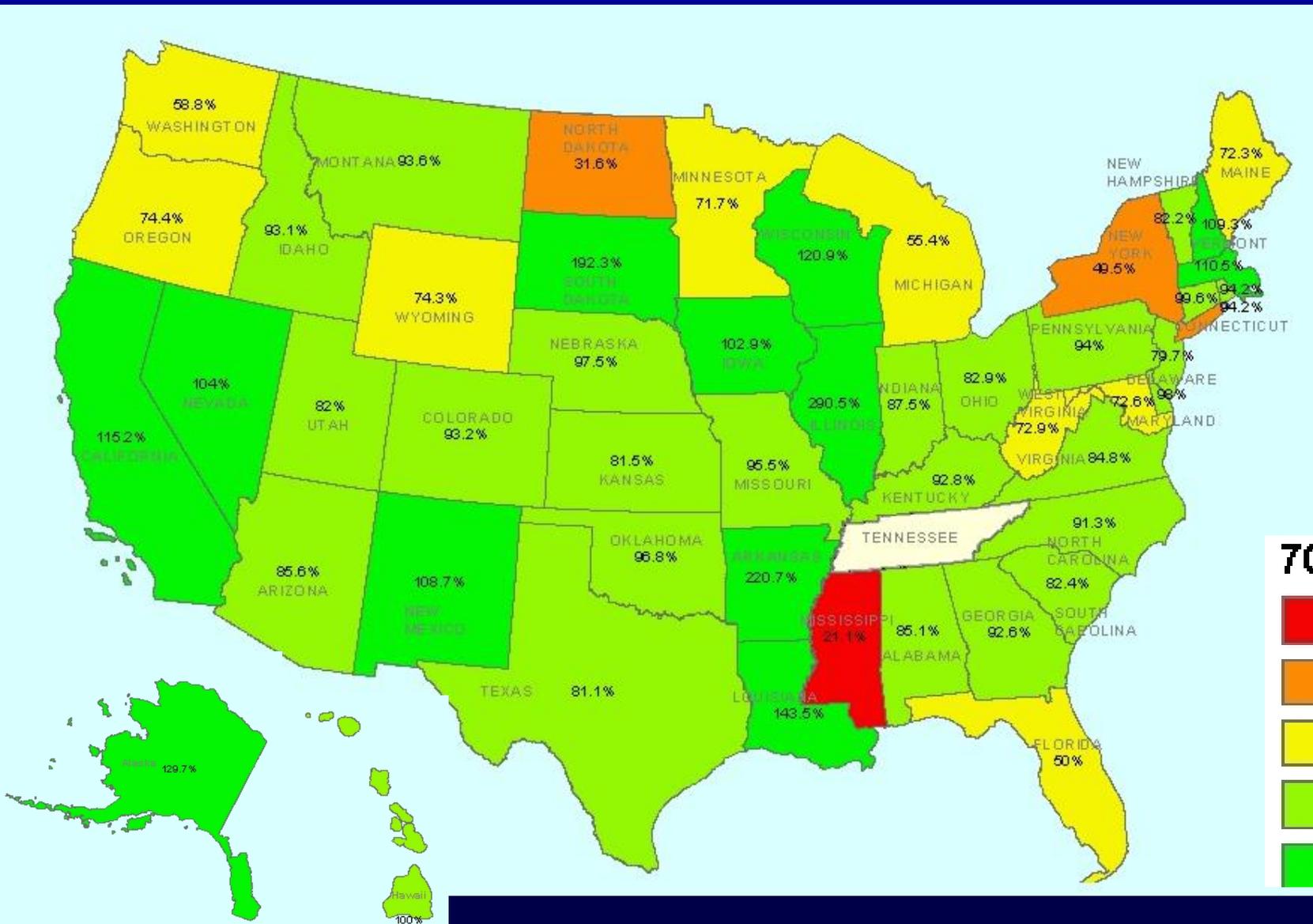
EXAM	CT/M A	CT/M E	CT/N H	CT/V T	CT/N Y
Chest X-ray, 2v	81%	87%	58%	73%	116%
Chest					

Connecticut Medicaid reimbursement rates to radiology providers are NOT “in line” with other New England states.

US abd	81%	87%	58%	73%	116%
Screening Mammo	53%	87%	57%	73%	59%

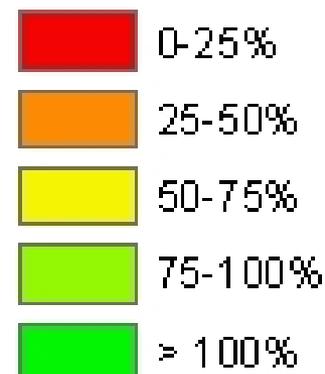
Ratio of Medicaid:Medicare rates

(Connecticut is PRIOR to rate reduction)



Head CT

70450 (26)



EXAM	CT/M A	CT/M E	CT/N H	CT/V T	CT/N Y
Screening Mammo	53%	87%	57%	73%	59%
Diagnostic Mammo Bil	79%	87%	57%	72%	59%
Diagnostic Mammo Uni	79%	87%	57%	73%	59%

Connecticut Medicaid reimbursement rates for mammography are well below all neighboring states (53-87%).



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State budget could prevent some from getting mammograms

Posted: Jun 24, 2015 6:00 PM EDT

Updated: Jul 22, 2015 6:04 PM EDT

By WFSB Staff

HARTFORD, CT (WFSB) - More concerns have been raised because of the state budget.

Doctors said they worry a cut in reimbursements could prevent women from getting mammograms.

Connecticut has the highest breast cancer incidents in the country and prevention has made a big difference as early detection has greatly lowered mortality rates.

The budget would cut reimbursements by more than 50 percent to Medicaid patients.

"It's going to be a giant step backwards because the cuts in reimbursements for radiologists will force them to cut their overhead significantly," said Kristen Zarfos, with the Hospital of Central Connecticut.

"The end result is limited access to patients that need it the most and to all patients," said radiologist Dr. Joel Gelber.



State budget could prevent some from getting mammograms (WFSB)



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Dr. Gary Dee figured the state's fiscal troubles would lead radiologists like him to face a cut in their Medicaid payment rates. But he wasn't anticipating the 42.5 percent cut Gov. Dannel P. Malloy's administration imposed this spring.

Now, Dee's private practice has stopped taking new Medicaid patients. He dropped talks with a community health center on plans to provide services for Medicaid patients. Efforts to recruit a new radiologist fell apart.

"The reimbursement is to the point where we can't take care of these patients. They're going to lose access," said Dee, president of MidState Radiology Associates in Meriden.



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State Healthcare Advocate Victoria Veltri sees the radiology rate cut as part of a trend of cutting reimbursement rates to save money in Medicaid.

“There’s no question that the budget is incredibly tight and it’s not an easy thing to try to find places where there are cuts,” she said. “My concern is you could only go so far before you reach a tipping point where access becomes incredibly difficult.”



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The Connecticut State Conference of NAACP Branches has also criticized the cuts, raising concerns that they could make it harder for people with Medicaid to receive screening or care for breast cancer and other conditions.

James Rawlings, the organization's state health chair, said the state can't afford to have fewer providers of preventive and intervention services. "It simply would exacerbate the current situation around health care access, and that's a real problem for us," he said.



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“Cutting rates inevitably means fewer providers participating, and fewer providers participating, if we continue with this trend, can make the Medicaid expansion a hollow expansion,” said Sheldon Toubman, an attorney with the New Haven Legal Assistance Association. “Because although on paper they have good coverage in terms of benefits, and no cost-sharing obligations, in reality, they can’t find specialists willing to see them.”



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Department of Social Services spokesman David Dearborn...

More generally, he said, when lawmakers look at adjusting rates, it's with an assumption that access will continue. He noted that as Medicaid has grown, so has the "revenue potential" for providers, since more patients have coverage, although providers say Medicaid doesn't cover their costs.

Health Affairs

MEDICAID EXPANSION

By Sandra L. Decker

In 2011 Nearly One-Third Of Physicians Said They Would Not Accept New Medicaid Patients, But Rising Fees May Help

ABSTRACT When fully implemented, the Affordable Care Act will expand the number of people with health insurance. This raises questions about the capacity of the health care workforce to meet increased demand. I used data on office-based physicians from the 2011 National Ambulatory Medical Care Survey Electronic Medical Records Supplement to summarize the percentage of physicians currently accepting any new patients. Although 96 percent of physicians accepted new patients in 2011, rates varied by payment source: 31 percent of physicians were unwilling to accept any new Medicaid patients; 17 percent would not accept new Medicare patients; and 18 percent of physicians would not

Health Affairs

MEDICAID EXPANSION

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In 2011 Nearly One-Third Of Physicians Said They Would Not Accept New Medicaid Patients, But Rising Fees May Help

Nationally only 69.4 percent of physicians accepted new Medicaid patients in 2011. This is sharply lower than the number of physicians accepting new Medicare patients (83.0%), privately insured patients (81.7%), self-pay patients (91.7%) and any new patients (96.1%).

Physician acceptance rates were higher in states with higher Medicare-to-Medicaid fee-for-service fee ratios.

Health Affairs

MEDICAID EXPANSION

By Sandra L. Decker

In 2011 Nearly One-Third Of Physicians Said They Would Not Accept New Medicaid Patients, But Rising Fees May Help

The following factors did NOT have an impact on a physician's willingness to accept new Medicaid patients: percentage of Medicaid population in capitated managed care, number of physicians per capita in the state, or percent of Medicaid enrollees in the state.

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DOI: 10.1111/j.1475-6773.2011.01378.x

RESEARCH ARTICLE

A Comparison of Two Approaches to Increasing Access to Care: Expanding Coverage versus Increasing Physician Fees

Chapin White

Objective. To compare the effects of a coverage expansion versus a Medicaid physician fee increase on children's utilization of physician services.

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DOI: 10.1111/j.1475-6773.2011.01378.x

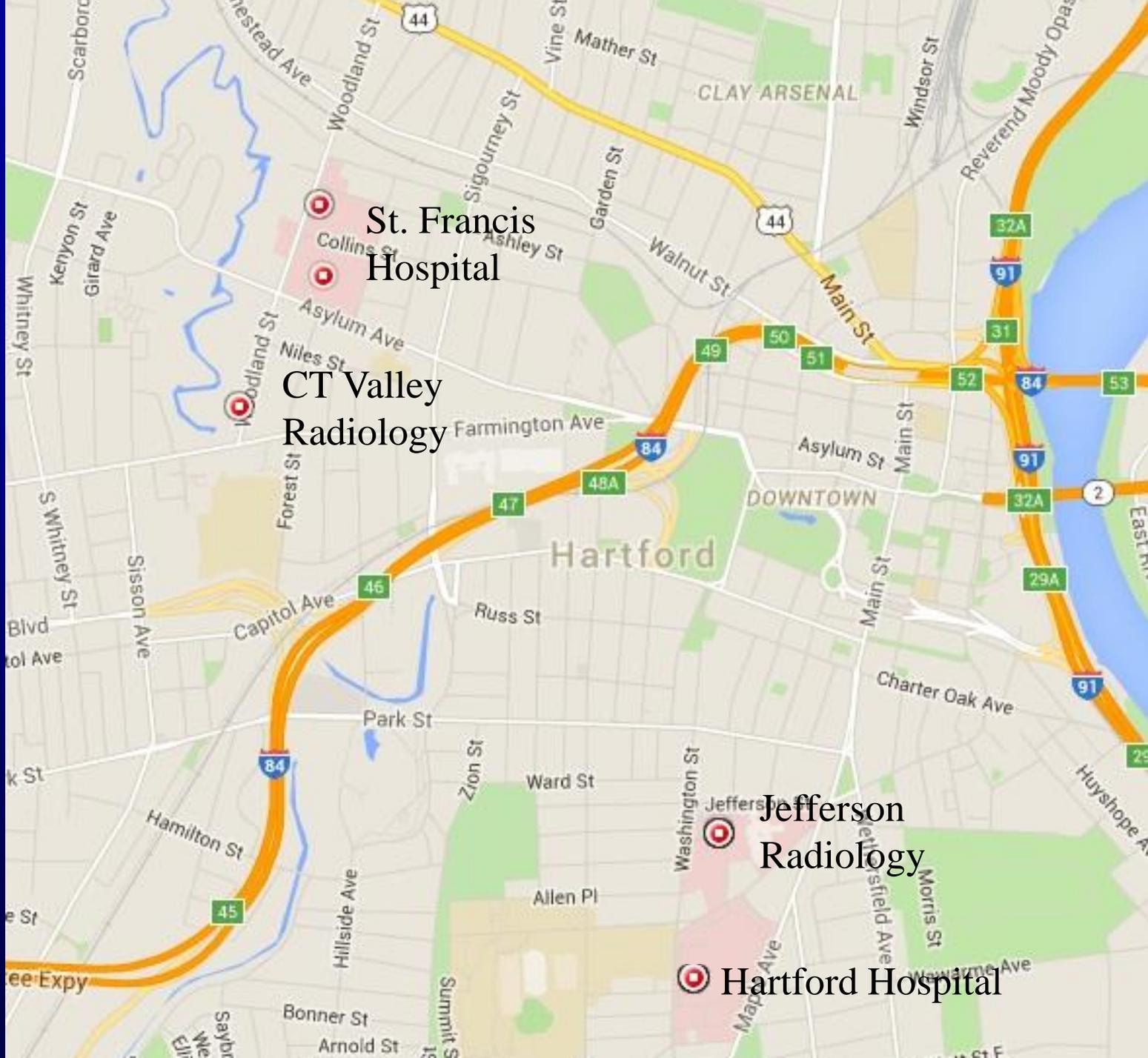
RESEARCH ARTICLE

A Comparison of Two Approaches to Increasing Access to Care: Expanding Coverage versus Increasing Physician Fees

Chapin White

Objective. To compare the effects of a coverage expansion versus a Medicaid physician fee increase on children's utilization of physician services.

Conclusion: Increasing physician payments improves access to care.



St. Francis
Hospital

CT Valley
Radiology

Jefferson
Radiology

Hartford Hospital

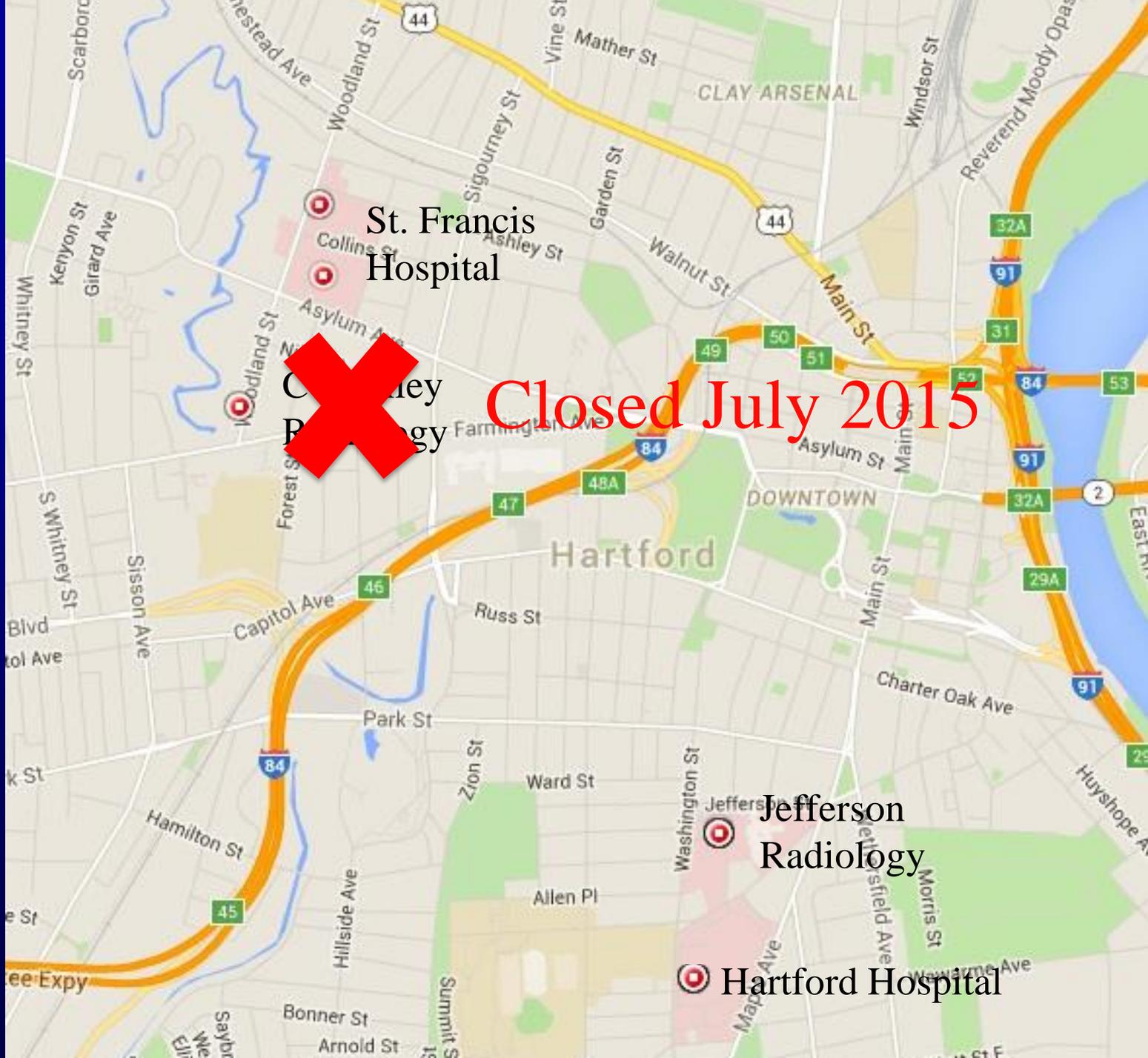
St. Francis
Hospital



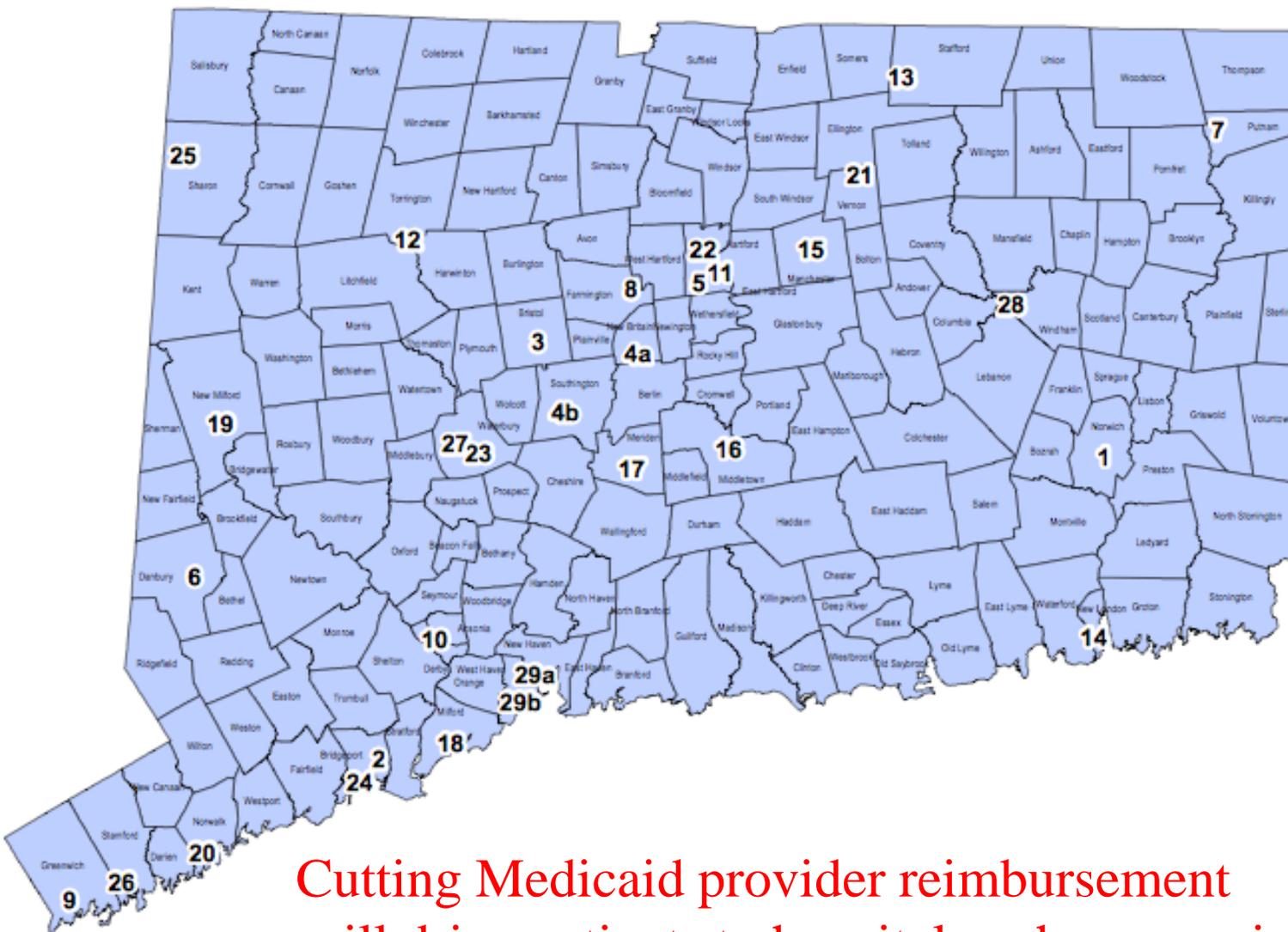
Closed July 2015

Jefferson
Radiology

Hartford Hospital



Acute Care and Children's Hospitals in Connecticut



- 1 William W. Backus Hospital
- 2 Bridgeport Hospital
- 3 Bristol Hospital
- 4a Hospital of Central Connecticut - New Britain Memorial Campus
- 4b Hospital of Central Connecticut - Bradley Memorial Campus
- 5 CT Children's Medical Center
- 6 Danbury Hospital
- 7 Day Kimball Hospital
- 8 John Dempsey Hospital
- 9 Greenwich Hospital
- 10 Griffin Hospital
- 11 Hartford Hospital
- 12 Charlotte Hungerford Hospital
- 13 Johnson Memorial Hospital
- 14 Lawrence & Memorial Hospital
- 15 Manchester Memorial Hospital
- 16 Middlesex Hospital
- 17 MidState Medical Center
- 18 Milford Hospital
- 19 New Milford Hospital
- 20 Norwalk Hospital
- 21 Rockville General Hospital
- 22 Saint Francis Hospital and Medical Center
- 23 Saint Mary's Hospital
- 24 Saint Vincent's Medical Center
- 25 Essent-Sharon Hospital
- 26 Stamford Hospital
- 27 Waterbury Hospital
- 28 Windham Community Memorial Hospital
- 29a Yale-New Haven Hospital
- 29b Yale-New Haven Hospital - Saint Raphael Campus

Cutting Medicaid provider reimbursement will drive patients to hospitals, where care is more expensive and less convenient.

Hartford Courant

More Hospital Groups Critique State Budget, Warn Of Consequences



By **Matthew Sturdevant** • Contact Reporter

June 10, 2015

Hartford Courant

"Embedded within the Medicaid cuts, the Medicaid reimbursement for an X-ray is down 57 percent as a result of this," said Rocco Orlando, chief medical officer at Hartford HealthCare. "That means, if you're a private radiology group, you lose money every time you take an X-ray, do a CT, do an MRI. They can't afford to do this. ... So, they will stop seeing Medicaid."

The result, he said, is a delay in diagnosis of medical problems for low-income individuals and families, and a delay in care.

"The patient will present with their illness, but further in the course of the disease, generally to an emergency department, [which results in] more costly care for them, and, most important, a worse outcome," Orlando said.

On behalf of radiologists throughout the state, the Radiological Society of Connecticut continues to work with legislators and the Malloy administration to address these cuts.

If not addressed, these drastic cuts will limit access to care for Connecticut's most vulnerable patients.

Take home points

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