



**Agency for Health Care Administration  
2727 Mahan Drive  
Tallahassee, FL 32308**

**Hospital Outpatient Prospective Payment Systems  
Governance Meeting – 11/06/2015  
8:30 a.m. – 10:00 a.m.**

**Meeting Summary**

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The Agency is making decisions on the hospital outpatient prospective payment system methodology using a Governance Committee model. This committee has been formed and held its fourth meeting on November 6, 2015. The decisions that have been made are outlined below.

Decisions from 11/06/2015 meeting:

- Outlier Payment: Do not include
- Service Type Policy Adjustor: None to be included
- Provider Type Policy Adjustor: Model impact of policy adjuster for providers with high Medicaid days
- Exclude hospitals out of the OPSS model that have more than 33% of qualified claims lines that did not include a procedure code (Exclude those with 34-100% blank claim lines)
- Move forward with planning and policy updates needed to require hospitals to include procedure codes on all claim lines by July 1, 2016
- Transitional Period: Do not include a transitional period

The next Governance Committee meeting will be held on November 18, 2015.