CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES

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Audrey Tayse Haynes
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Lawrence Kissner
Commissioner

March 20, 2013

TO: Medicaid Providers
Provider Letter # A-91

RE: 907 KAR 3:015 Supplemental Payments for Certain Primary Care and Vaccine Services

SUBJECT: Adjusted Medicaid Reimbursement Rates for Primary Care Services

Dear Provider:

The Affordable Health Care Act (ACA) established adjusted primary care physician reimbursement rates to promote Medicaid enrollment of primary care providers. This initiative applies to both Medicaid fee-for-service and Medicaid managed care (MCO) plans.

Eligible primary care physicians are those who specialize in family medicine, general internal medicine or pediatric medicine providing primary care services in calendar years 2013 and 2014 can expect to receive a rate that is at least 100 percent of Medicare reimbursements. The specific CPT codes that are eligible for adjusted reimbursement by eligible physicians are codes currently covered by KY Medicaid Services and within the range of 99201 through 99499 and vaccine codes 90632, 90633, 90634, 90636, 90645, 90646, 90647, 90648, 90649, 90655, 90656, 90658, 90660, 90669, 90670, 90680, 90681, 90696, 90698, 90700, 90702, 90707, 90710, 90713, 90714, 90715, 90716, 90718, 90723, 90732, 90733, 90734, 90744, 90746, 90748.

Providers that bill these codes may qualify for adjusted payments if they are board certified in one of the specialized areas listed in the above paragraph. In addition, if providers are not board certified in one of the specialized areas, they may qualify for the adjusted rate if 60% of their paid claims in calendar year 2012 contained the qualified codes. All providers who believe they qualify for the adjusted rate (MD, DO, PA, APRN) must log on to their own KyHealthNet account to complete and submit the attestation: https://sso.kymmis.com/. APRN and PA providers must be directly supervised by an eligible MD or DO. The Department will conduct claims analysis to ensure only qualified providers receive the adjusted rate. If a provider is deemed ineligible, the adjusted amount paid, if any, will be recouped. The adjusted rates will be effective for dates of service beginning January 1, 2013 through December 31, 2014.

For fee-for-service claims, each quarter, Kentucky Medicaid will dispense a lump sum payment to each eligible provider. The lump sum payment will represent the difference between what Kentucky Medicaid paid the provider for claims in the quarter and what the provider would have received if Kentucky Medicaid had paid the provider the amount established by Medicare in CY 2013 and 2014 for those claims. A detailed claims analysis will accompany each quarterly payment.

For MCO claims, each quarter, Kentucky Medicaid and the MCOs will identify the claims eligible for the adjusted reimbursement. Each MCO will then disburse the appropriate payments to the eligible providers accordingly within fifteen business days of receiving funds from Kentucky Medicaid. The amount of the reimbursement to eligible providers shall represent the difference between what the MCO reimbursed the provider for that quarter and what the provider would have received if the provider's reimbursement for the claims had been the amount established by Medicare in CY 2013 and 2014.

The provider, MD, DO, PA, APRN must log on to their own KyHealthNet account to complete and submit the attestation: https://sso.kymmis.com/. APRN and PA providers must be directly supervised by an eligible MD or DO. Please read the FAQ's mentioned below.

A complete summary and analysis of this initiative is available at: http://www.Medicaid.gov. You can also link to the frequently asked questions (FAQ) page at: http://medicaid.gov/State-Resource-Center/Frequently-Asked-Questions/CMCS-Ask-Questions.html

If you have any questions, you may contact the Division of Provider Operations at 502-564-6890.

Sincerely,

Lawrence Kissner
Commissioner