

## **Frequently Asked Questions**

### Enhanced Payments for Eligible Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration under the Vaccines for Children Program

#### **What are enhanced payments?**

The Patient Protection and Affordable Care Act mandates states to reimburse eligible providers for certain primary care services at the Medicare rate for services provided between 1/1/2013 and 12/31/2014.

#### **Which services are eligible for the enhanced rate?**

Payments will be enhanced for eligible Evaluation and Management (E&M) codes 99201 through 99499 and vaccine administration codes 90460, 90461, 90471, 90472, 90473, and 90474. South Dakota Medicaid will not reimburse codes that are not eligible for payment under the South Dakota Medicaid Program.

#### **Who is eligible for enhanced payment?**

Primary Care Physicians and Advanced Practice Clinicians specializing in Family Practice, Pediatrics and Internal Medicine are potentially eligible for enhanced payment.

#### **How is eligibility determined?**

Physician's eligibility is determined in one of two ways:

- **Board Certification:** Physicians who are board certified from the American Board of Physician Specialties, the American Osteopathic Association, or the American Board of Medical Specialties, in Family Practice, Pediatrics or Internal Medicine, or a sub-specialty of Family Practice, Pediatrics or Internal Medicine. South Dakota has validated certification and identified South Dakota Medicaid enrolled Physicians that are eligible as of November 30, 2012.
- **Self-Attestation:** Physicians who do not meet the board certification may become eligible by attesting that 60% of their codes billed to South Dakota Medicaid for calendar year 2012 are the specified evaluation and management codes (99201 through 99499) and/or vaccine administration codes (90460, 90461, 90471, 90472, 90473, and 90474). They also must be enrolled in the Vaccines for Children Program.

#### **How will South Dakota Medicaid verify eligibility?**

South Dakota Medicaid matched currently enrolled physicians to board certified physicians in the applicable specialties to make an initial determination of eligibility as of November 30, 2012.

Additionally, South Dakota Medicaid will annually review a sample of physicians who self-attest to ensure that 60% of claims paid billed to Medicaid are for eligible evaluation and management codes, and/or vaccine administration codes. Providers who are found ineligible will have their payments recouped by South Dakota Medicaid.

#### **How do I self-attest?**

You may submit your completed self-attestation form to Division of Medical Services, Department of Social Services, 700 Governors Drive, Pierre, SD 57501-50170. A self-attestation form is available on the DSS website <https://dss.sd.gov/sdmedx/enhancedpcppayment.aspx>.

#### **Do I need to submit a copy of my board certification to South Dakota Medicaid?**

No. South Dakota Medicaid is able to verify your board certification electronically.

**I am a newly enrolled provider without board certification. Can I still participate?**

Possibly, federal regulations require that 60% of claims billed by new providers in the month prior to making enhanced payments be for the eligible evaluation and management codes (99201 through 99499) and/or vaccine administration codes (90460, 90461, 90471, 90472, 90473, and 90474). You will need to submit a completed self-attestation form. This means you must have at least one month's claim history before submitting the attestation form.

**Will I need to re-attest to remain eligible in 2014?**

Yes. Eligibility will need to be verified again in calendar year 2014 based on your board certification from the American Board of Physician Specialties, the American Osteopathic Association, or the American Board of Medical Specialties, in Family Practice, Pediatrics or Internal Medicine, or a sub-specialty of Family Practice, Pediatrics or Internal Medicine. Or, attesting that 60% of the codes billed to South Dakota Medicaid for calendar year 2013 are the specified evaluation and management codes (99201 through 99499) and/or vaccine administration codes (90460, 90461, 90471, 90472, 90473, and 90474), and that you are also enrolled in the Vaccines for Children Program.

**Are Advanced Practice Clinicians eligible for enhanced payment?**

Yes. Advanced Practice Clinicians, such as physician assistants, certified nurse practitioners and certified nurse midwives are eligible for enhanced payment provided that eligible services are within the stated scope of practice and are under the supervision of an eligible primary care physician.

**How do Advanced Practice Clinicians attest?**

Advanced Practice Clinicians such as physician assistants, certified nurse practitioners and certified nurse midwives should select the box for Advanced Practice Clinicians on the Attestation Form. Remember, Advanced Practice Clinicians are only eligible for the enhanced payment if their supervising/collaborating physician has attested and is eligible. You must provide the individual national provider identifier (NPI) of your supervising/collaborating physician on the form.

**Can Advanced Practice Clinicians be eligible if they provide primary care, but their supervising/collaborating physician is not eligible?**

No. The supervising/collaborating physician must be eligible for the Advanced Practice Clinician to be eligible.

**To be eligible for enhanced payment, do I need to bill under my supervising physician?**

No. Claims submitted by a certified nurse practitioner, certified nurse midwife or a physician assistant must contain their individual national provider identifier (NPI) number and may not be submitted under the supervising physician's provider identification number.

**To be eligible, do I need to include my supervising physician's NPI number on the claim?**

No. South Dakota Medicaid does not require you to include the supervising physician NPI number on the claim.

**Are hospitals, rural health clinics (RHC), federally-qualified health centers (FQHC) or nursing homes eligible for enhanced payment?**

No. Hospitals, RHCs, FQHCs, and nursing homes are not eligible to receive enhanced payments under federal law.

**How will Advanced Practice Clinicians be reimbursed?**

Eligible Advanced Practice Clinicians will be reimbursed in the same manner as other services. South Dakota Medicaid will pay the applicable percentage of the enhanced rate.

**How is eligibility determined for the enhanced vaccine administration payment?**

Providers must be enrolled and participating in the Vaccines for Children Program to be eligible.

**If I self-attest after January 1, will South Dakota Medicaid make retroactive enhanced payments for all dates of service since January 2013?**

Providers who self-attested before March 31, 2013 will receive enhanced payment for dates of service starting January 1, 2013. Providers who self-attest after March 31, 2013 will receive enhanced payment for dates of service occurring on or after the date of the self-attestation.

**Can I receive enhanced payments for other primary care services?**

No. Only those services stipulated in federal law will be subject to enhanced payment.

**How will I receive payment?**

The enhanced rate will be paid to eligible professionals automatically when you submit a claim for an eligible service.

**How is the enhanced rate determined?**

The enhanced rate is determined by comparing the 2013 Medicare Rate established by CMS and comparing it to the 2009 South Dakota Medicaid rate. The higher rate will establish the rate of payment for that code. A rate review will be done in calendar year 2014 after the 2014 Medicare rates are established and adjusted if appropriate.

**How can I view the enhanced rates?**

A separate fee-schedule of the enhanced rates is available to providers on SDMEDX at <https://dss.sd.gov/sdmedx/includes/providers/feeschedules/dss/index.aspx>.

**Do allergists qualify for higher Medicaid payment under this regulation?**

CMS recently received information from the American Board of Medical Specialties attesting that the American Board of Allergy and Immunology (ABAI) is an ABMS-recognized sub-discipline of the American Board of Pediatrics and the American Board of Internal Medicine.

Specifically, the ABAI is a conjoint board of the American Board of Pediatrics (ABP) and the American Board of Internal medicine (ABIM). All physicians certified by the Board of Allergy and Immunology must first be board certified by either ABP or ABAI. Medical specialists certified by the Allergy and Immunology Board remain subspecialists of Internal Medicine and Pediatrics. However, it is possible that some holders of a certificate from ABAI will not have a current certificate in Internal Medicine or Pediatrics because some diplomats of the ABP and ABIM who hold subspecialty certificates are not required to maintain their primary certificates. The ABMS was concerned that these diplomats might be excluded from eligibility for higher payment under a strict interpretation of the rule even though they do act as their patients' primary care provider in many cases and urged that CMS formally recognize that diplomats of ABAI are, in fact subspecialists in Internal Medicine and Pediatrics and eligible for higher payment up to the Medicare rate.

Based on this information, CMS agrees that allergists are eligible for higher payment under the rule.