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Reimbursement Template -Physician Services Increased Primary Care Service Payment 42 CFR 447.405, 447.410, 447.415 Attachment 4.19-B: Physician Services 42 CFR 447.405 Amount of Minimum Payment

The state reimburses for services provided by physicians meeting the requirements of 42 CFR 447.400(a) at the Medicare Part B fee schedule rate using the Medicare physician fee schedule rate in effect in calendar years 2013 and 2014 or, if greater, the payment rates that would be applicable in those years using the calendar year 2009 Medicare physician fee schedule conversion factor. If there is no applicable rate established by Medicare, the state uses the rate specified in a fee schedule established and announced by CMS. ☐ The rates reflect all Medicare site of service and locality adjustments. ☑ The rates do not reflect site of service adjustments, but reimburse at the Medicare rate applicable to the office setting. Ohio has only one Medicare GPCI. ☐ The rates reflect all Medicare geographic/locality adjustments. ☐ The rates are statewide and reflect the mean value over all counties for each of the specified evaluation and management and vaccine billing codes. The following formula was used to determine the mean rate over all counties for each Ohio is using a state developed fee schedule utilizing the January 2013 release of the Relative Value Unit file in conjunction with the 2009 conversion factor. Ohio will not be adjusting these fees during the year. **Method of Payment** ☐ The state has adjusted its fee schedule to make payment at the higher rate for each E&M and vaccine administration code. ☐ The state reimburses a supplemental amount equal to the difference between the Medicaid rate in effect on the date of service as published in the agency's fee schedule described in Attachment 4.19-B, Item 5-a, Physician Services of the State plan and the minimum payment required at 42 CFR 447.405.

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Supplemental payment is made: ☐ monthly ☐ quarterly ☒ per claim

Supersedes:

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Primary Care Services Affected by this Payment Methodology

☐ This payment applies to all Evaluation and Management (E&M) billing codes 99201 through 99499.

☑ The State did not make payment as of July 1, 2009 for the following codes and will not make payment for those codes under this SPA (specify codes).

99288	99339	99340	99354	99355	99356	99357	99358
99359	99360	99363	99364	99366	99367	99368	99374
99375	99377	99378	99379	99380	99386	99387	99396
99397	99401	99408	99409	99411	99412	99420	99429
99441	99442	99443	99444	99450	99455	99456	99499

⊠The state will make payment under this SPA for the following codes which have been added to the fee schedule since July 1, 2009 (specify code and date added).

99224	99225	99226	99406	99407	99495	99496
(2011)	(2011)	(2011)	(2012)	(2012)	(2013)	(2013)

Physician Services – Vaccine Administration

For calendar years (CYs) 2013 and 2014, the state reimburses vaccine administration services furnished by physicians meeting the requirements of 42 CFR 447.400(a) at the lesser of the state regional maximum administration fee set by the Vaccines for Children (VFC) program or the Medicare rate in effect in CYs 2013 and 2014 or, if higher, the rate using the CY 2009 conversion factor.

☐ Medio	care	Physi	ician F	ee Sc	he	dule	rate	e			
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⊠State regional maximum administration fee set by the Vaccines for Children program

⊠Rate using the CY 2009 conversion factor (for non-VFC vaccines)

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Documentation of Vaccine Administration Rates in Effect 7/1/09

The state uses one of the following methodologies to impute the payment rate in effect at 7/1/09 for code 90460, which was introduced in 2011 as a successor billing code for billing codes 90465 and 90471.
□ The imputed rate in effect at 7/1/09 for code 90460 equals the rate in effect at 7/1/09 for billing codes 90465 and 90471 times their respective claims volume for a 12 month period which encompasses July 1, 2009. Using this methodology, the imputed rate in effect for code 90460 at 7/1/09 is:
☐ A single rate was in effect on 7/1/09 for all vaccine administration services, regardless of billing code. This 2009 rate is:
☑ Alternative methodology to calculate the vaccine administration rate in effect 7/1/09: The only vaccine administration the State paid was for VFC vaccines; the amount paid \$10 per vaccine administered.
Note: This section contains a description of the state's methodology and specifies the affected billing codes.
Effective Date of Payment
E & M Services This reimbursement methodology applies to services delivered on and after January 1, 2013, ending on 12/31/14 but not prior to December 31, 2014. All rates are published at jfs.ohio.gov/OHP/provider.stm.
Vaccine Administration
This reimbursement methodology applies to services delivered on and after January 1, 2013, ending on 12/31/14 but not prior to December 31, 2014. All rates are published at jfs.ohio.gov/OHP/provider.stm.
Supersedes Page: None
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