

Payment for Medical and Remedial Care and Services

Physician Services

Increased Primary Care Service Payment 42 CFR 447.405, 447.410, 447.415

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.
- 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 State utilizes the Deloitte fee schedule with the exception of the following vaccine administration codes.
- The State utilizes the maximum regional cap to procedure codes 90471 and 90473.
- The State will reimburse procedure code 90472 at the Medicare rate.

The following formula was used to determine the mean rate over all counties for each code: _____

Method of Payment

- The state has adjusted its fee schedule to make payment at the higher rate for each Evaluation and Management (E&M) and vaccine administration code.

The state reimburses a supplemental amount equal to the difference between the Medicaid rate in effect on July 1, 2009 and the minimum payment required at 42 CFR 447.405.

Supplemental payment is made: Monthly Quarterly Semi-annually Annually

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia

Attachment 4.19-B

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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, 99315, 99316, 99318, 99339, 99340, 99358, 99359, 99360, 99363, 99364, 99366, 99367, 99368, 99374, 99377, 99379, 99380, 99403, 99404, 99406, 99407, 99408, 99409, 99411, 99412, 99429, 99441, 99442, 99443, 99444, 99450, 99455, 99456, 99485, 99486, 99487, 99488, 99789, 99495, 99496, 90460, 90461, 90474
- The State will make payments 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 – 01/01/11, 99225 – 01/01/11, 99226 – 01/01/11
- The State will not adjust the fee schedule to account for any changes in Medicare rates throughout the year.

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 as implemented by the state in CYs 2013 and 2014

- Medicare Physician Fee Schedule rate as implemented by the state and using the 2009 conversion factor.
- State regional maximum administration fee set by the Vaccines for Children program

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Payment for Medical and Remedial Care and Services**Physician Services****Increased Primary Care Service Payment 42 CFR 447.405, 447.410, 447.415****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 07/01/09 for code 90460 equals the rate in effect at 07/01/09 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 07/01/09 is:

A single rate was in effect on 07/01/09 for all vaccine administration services, regardless of billing code. This 2009 rate is: \$12.00. The State did not cover 90460. The State elected to cover 90471-90473 for vaccine administration services; however, the single rate was only applied to procedure codes 90471 and 90472.

Alternative methodology to calculate the vaccine administration rate in effect 07/01/09:

Service code 90473 was added as a benefit 08/01/08 but was not priced using the single rate as other administration services. Service code 90473 is priced using the MPFS Relative Units times the State derived CF which will be used as the basis for determining the rate in effect 7/1/09.

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 dhr.wv.gov/bms.

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 dhr.wv.gov/bms.

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