



Date: April 15, 2013

To: OHP fee-for-service physicians, nurse practitioners and physician assistants practicing General Internal Medicine, Pediatric Medicine, or Family Medicine

From: Don Ross, Manager
Medicaid Policy and Planning Section, DMAP

Subject: Updates about the 2013-2014 Primary Care Rate Increase

As of March 31, 2013, over 2,000 providers have attested with DMAP and qualified for the two-year primary care rate increase available under Section 1202 of the Affordable Care Act.

We will be contacting over 200 providers to correct or clarify their attestation information. You can assume that your attestation has been accepted, unless you hear from us.

We have also filed temporary rules to support the rate increase, effective March 29, 2013. You can view them on the [DMAP Temporary Rules page](#).

When will providers receive the rate increase?

We will not be able to begin paying the rate increase until the federal Centers for Medicare and Medicaid Services (CMS) approves DMAP’s updated Medicaid State Plan, which is currently under their review. We will let you know when we are ready to begin paying the rate increase.

DMAP will apply the increased rates retroactively according to the following schedule. Please allow 2-3 weeks for us to process your attestation.

Attestation submitted	Increased FFS rate will apply to qualifying services rendered on or after:
Jan. 1 to Mar. 31	Jan. 1
Apr. 1 to June 30	Apr. 1
July 1 to Sep. 30	July 1
Oct. 1 to Dec. 31	Oct. 1

DMAP will automatically reprocess eligible claims for providers who attest by April 30

Once CMS approves DMAP’s updated Medicaid State Plan, we will automatically adjust all eligible claims for providers who have attested for the primary care increase by April 30, 2013. We will let you know when this happens.

What should you do?

If you attested by March 31 and are contacted by DMAP staff to correct your attestation, please do so as soon as possible. A prompt response will allow you to still be eligible to receive the rate increase retroactive to January 1, 2013.

If you feel you may qualify but haven't attested yet, please submit your attestation as soon as possible. If you submit your attestation by June 30, you will receive payment retroactively back to April 1.

- If you submit your attestation by April 30, we will be able to reprocess eligible claims for you.
- If you submit your attestation after April 30, you will need to resubmit previously submitted claims in order to have the higher rate apply back to the beginning of the quarter.

When attesting, please make sure to use the Oregon Medicaid ID and NPI for **the rendering provider** (not the clinic or group). This allows us to link the attestation to the correct practitioner.

For more information about the rate increase and how to attest, visit our [ACA Primary Care Reimbursement web page](#).

Questions?

If you have any questions about this announcement, contact the Provider Services Unit at dmap.providerservices@state.or.us or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:00 p.m. and Friday 10 a.m. to 4:00 p.m. (phone lines closed 11:30 a.m. to 12:30 p.m. daily).

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.

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