Anthem-Direct Contracted Providers and PMG/IPA Affiliated Providers

Primary Care Rate Increase

This provider bulletin is an update about information in the Anthem Blue Cross Medicaid Business Provider Manual (Manual). For access to the latest Manual, go online to www.anthem.com/ca.

Section 1202 of the Patient Protection and Affordable Care Act (PPACA) requires that Medicaid and Medicaid managed care organizations, such as Anthem Blue Cross, reimburse certain primary care services rendered to Medicaid members in calendar years 2013 and 2014 by eligible providers at the lesser of the providers’ charge or the applicable 2013 or 2014 Medicare rates.

This enhanced reimbursement is for certain evaluation and management (E&M) and vaccine administration codes with dates of service from January 1, 2013, through December 31, 2014.

In order to be eligible for enhanced reimbursement, providers must attest to their eligibility with the California Department of Health Care Services (DHCS). You will have to complete the DHCS online attestation form. The self-attest form and detailed self-attestation instructions are available at Medi-Cal.ca.gov > featured > Affordable Care Act > ACA Increased Medicaid Payments for Primary Care Physicians.

Services provided by or in federally qualified health centers (FQHCs), rural health centers (RHCs), or community clinics and county health clinics are not eligible for enhanced reimbursement.

Please note: Anthem is dependent upon receipt of enhancement funding from DHCS in order for us to make enhanced payments to providers.

I am an Anthem-direct contracted provider. How will I receive the enhanced rates for claim submitted to Anthem?

If you receive claims payments directly from Anthem, we will begin processing adjustments to previously processed eligible claims with 2013 dates of service in April 2014. Adjustments will be made on a claim by claim basis. The adjustments will reflect an additional payment up to the ACA Medicare rate. Anthem will complete processing of all 2013 retroactive adjustments as soon as possible, but no later than June 30, 2014.

Once 2013 retroactive adjustments have begun, any new claims for 2013 eligible services received by Anthem from that point forward will be paid at the applicable ACA Medicare enhanced rate.

For 2014 dates of service, Anthem will begin processing adjustments to previously processed eligible claims with dates of service back to and including January 1, 2014 within 45 days of receipt by Anthem of 2014 funds from DHCS. The same methodology will apply as described...
above for 2013 claims. Anthem will complete processing of all 2014 retroactive adjustments as soon as possible thereafter, but no later than June 30, 2015.

Once 2014 retroactive adjustments have begun, any new claims received by Anthem from that point forward for 2014 eligible services will be paid at the applicable ACA Medicare rate.

Providers who have attested with DHCS are eligible to receive the enhanced rates for eligible services retroactive to January 1, 2013.

I am a PMG/IPA-affiliated provider. How will I receive the enhanced rates from Anthem?

If you receive payments from independent practice associations (IPA’s) or primary medical groups (PMG’s) that are sub-capitated by Anthem, Anthem will distribute supplemental lump-sum payments for 2013 dates of service beginning in April 2014 based on encounters received by Anthem. The supplemental payment will be the difference between the Medi-Cal fee schedule rate and the applicable ACA Medicare rate for each eligible CPT code for each eligible encounter reported to Anthem. Lump-sum disbursements will be made directly to the eligible rendering provider (or to the payee or medical group designated to receive payments on behalf of the rendering provider) and will include corresponding remittance detailing the services and supplemental payment amounts for each eligible provider.

For 2014 dates of service, Anthem will make lump-sum disbursements on a quarterly basis beginning within 60 days of Anthem’s receipt of 2014 funds from DHCS.

Will rendering providers receive enhanced payments made to medical groups?

All medical groups and payees who receive enhancement payments on behalf of eligible providers are required by Anthem to direct all increased reimbursement to the eligible rendering provider who performed the service, or otherwise ensure that the eligible provider received the full benefit of the increased reimbursement in accordance with CMS requirements.

What if I am receiving Remittance Advices (RAs)?

If you are receiving RAs, you will see a new Explanation of Benefits (EOB) message of ‘00ABM’ which will translate to: “This payment includes the enhanced rate for primary care services as required by PPACA.” If you signed up for Electronic RA (835), you will not see any changes in the electronic transactions.

[Providers may also use ProviderAccess which is a free online tool that is fast and convenient way to look up your RA. To locate ProviderAccess, go to www.anthem.com/ca select “Other Anthem websites: Providers”, “State Sponsored Plans”, “Medical” (in the dropdown menu), and “Login”.]

Once you have logged in, the RA inquiry is available under the “Claims” tab and allows a provider to see a PDF copy of an RA. Select the “Tax ID” (enter in a date range no greater than seven days), and then click “search”. Results will contain all RAs for that tax ID. Then click “View Remittance”.

[The text continues with further details on how to receive and view remittance advices.]
**What if you have not attested yet?**
It is not too late. Providers who believe they meet the specialty designation requirements for the enhanced reimbursement are encouraged to attest as soon as possible to qualify for enhanced payments without additional delay.

**What if I have questions?**
If you have questions about the enhanced reimbursement, please contact our Customer Service Center:
- Medi-Cal at 1-800-407-4627
- L.A. Care at 1-888-285-7801

You may also visit the Anthem Provider Website at www.anthem.com/ca and Medi-Cal.ca.gov for more details on this implementation.