

E & M Uplift for PGIP Patient-Centered Medical Home Designation Program

Presented June 16, 2009 by:

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E&M Uplift Overview and Objective



- E&M Uplift stands for Evaluation and Management Procedure Code Uplift
- A provider differential payment system
- BCBSM mechanism for funding practice units designated as a Patient-Centered Medical Home (PCMH) on July 1, 2009

E&M Uplift Overview and Objective



- The Evaluation and Management (E&M) Uplift refers to the additional reimbursement that will be paid to designated Primary Care Physicians (PCPs) under the BCBSM Patient Centered Medical Home Designation Program, in recognition of their capability to provide patient-centered, coordinated care.
- Note: All PCPs in PGIP will continue to be eligible to receive incentive payments to support their ongoing implementation of additional PCMH capabilities.

PGIP Patient-Centered Medical Home (PCMH) Designation Program – Review of Eligibility Requirements



- Must be a Primary Care Physician (PCP)

PCP must:

- Be a TRUST provider
- Participate in PGIP through a PGIP PO
- In good standing with the network (PPO/TRUST and Traditional, if participating)
- Meet PCMH infrastructure criteria for PCMH designation
- Meet standards for quality and use of performance

What are E&M Procedure Codes?



- Evaluation and Management (E&M) CPT procedure codes
- Office visits, hospital visits, preventive, and consultations among others
- CPT values for E&M codes → 99201 - 99499

Applicable E&M Uplift Procedure Codes



- The following E&M CPT procedural code ranges are applicable for the E&M Uplift:
 - Office visits → 99201 – 99215
 - Office Consultations → 99241 – 99245
 - Preventive → 99381 – 99397

E&M “Uplifted” Percentage Amount



- A **10% “uplift”** (i.e. increase) to the reimbursement for the selected E & M procedure codes will be applied for PCMH designated PCP’s, based on eligible conditions (slide 9)
- E.g., for E&M service 99201, the fee is \$43.57
 - $\$43.57 \times 10\% = \4.36
 - $\$43.57 + 4.36 = \mathbf{\$47.93}$ (= new “E&M Uplifted” fee)
- Note: the standard rule of reimbursing at the lesser of charge or the prevailing fee still applies

Applicable Locations of Service for The E&M Uplift



- The following Place of Service (POS) codes are targeted for the Uplift:
 - POS 22 (2) = Hospital, Outpatient
 - POS 11 (3) = Doctor's office

E&M Uplift Eligible



- Inclusions:
 - All BCBSM PPO products:
 - e.g. Community Blue
 - e.g. MI Child
 - e.g. Blue Preferred Plus
 - e.g. Flexible Blue
 - BCBSM Traditional*
 - Point of Service
 - BlueCard Host claims
 - occurs when other than BCBSM control plan member sees BCBSM PCMH PCP

*Programming currently taking place to implement the E&M Uplift for PCMH Traditional Network PCP's; expected to be completed by the end of August 2009

E&M Uplift Eligible



- Current Issue with PCMH Traditional PCP's not receiving the E&M Uplift 7/1/2009:
 - Who is affected?
 - Only PCMH designated PCP's who are in the BCBSM Traditional network who bill with a Group billing PIN only
 - Nearly all our PGIP PCP's are in the Traditional network, but only a small set of BCBSM membership has Traditional (~10%)
 - We are still in the process of implementing the programming changes to rectify this subset of PCMH providers who won't be receiving the E&M Uplift 7/1/2009
 - Expected to be implemented within a couple months

E&M Uplift Ineligible



- Exclusions:
 - Pay Subscriber
 - BlueCard Home
 - Medicare Supplemental
 - COB claims where BCBSM is not primary
 - Vision and Hearing (stand alone's)
 - FEP member claims

Any Special Billing Procedures?



- NO –
 - We are working to standardize billing procedures
 - No special modifiers needed
 - E&M Uplift applied internally in BCBSM claims payment system
 - Please follow your normal billing procedures

Any Member Cost-Sharing?



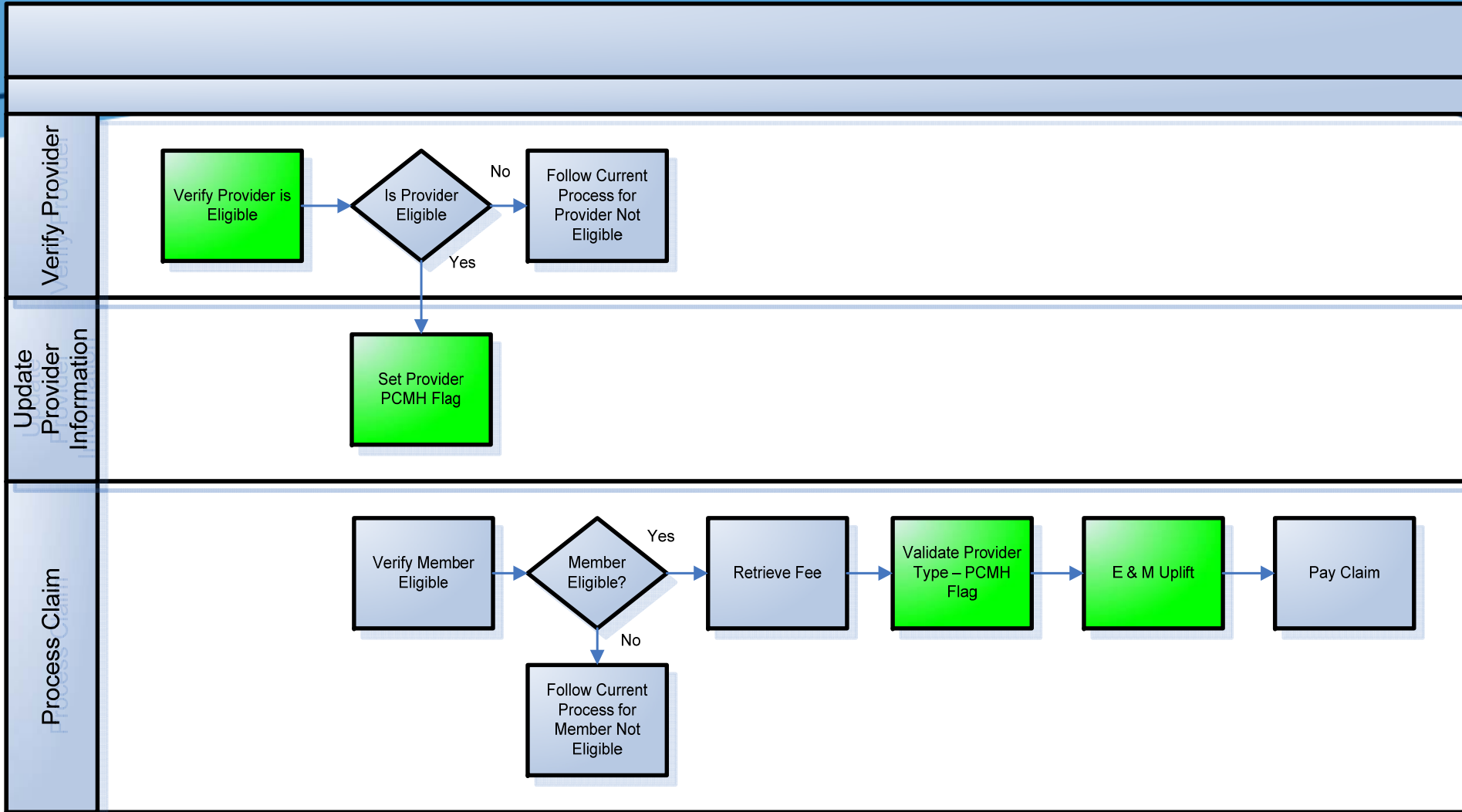
- Yes, if applicable
 - Won't affect flat co-pay situations
 - Any co-insurance or deductibles will still be applicable at the standard amount or percentage of the higher E&M fee
- Majority of cost-sharing in BCBSM benefit plans:
 - Community Blue Plan's 2, 3, & 4
 - Flexible Blue Plan's 2, 3, & 4

EOB and payment voucher changes?



- **NO** –
 - Provider Payment vouchers
 - Only the higher reimbursement payment for E&M procedure code service will be seen
 - NO verbiage stating “E&M Uplift”
 - NO separate line item payment for E&M Uplift
 - Explanation of Benefits (EOBs)
 - Will not change except for showing the different cost sharing amounts

E&M Uplift Logic Flow Diagram – BCBSM High Level Internal Claims Process



Updated Sample Standard Calculation – Procedure Code 99201



Charged Amount: \$ 80.00

- Calculation:
- Allowed Amount: \$ 43.57 (POS 3)
- Copay: \$ (10.00)

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- ATP: \$ 33.57
- PGIP Contribution: \$ (1.35) (3.1% of **Allowed**
to Reward Pool **Amount** above, \$43.57)

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- Net payment \$ 32.22

Updated Sample E&M Uplift Calculation

– Procedure Code 99201



Charged Amount: \$ 80.00

- Calculation:
- Allowed Amount: \$ 43.57 (POS 3)
- E&M Uplift: \$ 4.36
(10% of **allowed amt**)

=====

- New allowed: \$ **47.93**
amount
- Copay: **(\$10.00)**

=====

- ATP: \$ 37.93
- PGIP Contribution: \$ **(1.49)** (3.1% of **New Allowed**
to Reward Pool **Amount** above, \$47.93)

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- Net payment \$ **36.44**

Scenario #1 of PCMH Designation



- For example: there are 3 PCP's, Dr's X, Y, & Z in Practice Unit A...
- Practice Unit A is designated PCMH status
- Dr.'s X & Y are in PGIP
- Dr. Z is not in PGIP
- Dr.'s X & Y will receive the E&M Uplift
- Dr. Z will not receive the E&M Uplift
- Reminder: ****BEING IN PGIP IS A REQUIREMENT OF THE PCMH DESIGNATION PROGRAM****, and thus, being eligible for the E&M Uplift
- Therefore, even though the practice unit as a whole has PCMH designation status, only PGIP PCP's are eligible for the E&M Uplift.

Scenario #2 of PCMH Designation



- For example: there are 3 PCP's, V, W, & X; and 2 Specialist physicians, Dr's Y & Z in one Practice Unit B...
- Practice Unit B is designated PCMH status
- All physicians in Practice Unit B are in PGIP
- PCP's V, W, & X will receive the E&M Uplift
- Specialists Dr.'s Y & Z will not receive the E&M Uplift
 - ****Specialists are not eligible for the E&M Uplift because they are not eligible for the PCMH designation program**

Reminder: E&M Uplift Begin Date



- E&M Uplift is effective for dates of service starting **JULY 1, 2009** and going forward for a minimum of one year
 - Contingent upon previously stated factors – the PCP is in good standing with the network, etc.
- This date coincides with the effective date of BCBSM's PCMH Designation Program, which is to "go live" July 1, 2009
- Note: PCMH designated offices must go through the designation process again after one year, therefore the E&M Uplift may not continue for some PCMH designated PCP's after one year



Thank you

Questions/Comments?

Contact Information



For questions about the E&M Uplift, please contact:

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