

**Payment Implementation Work Group
 Meeting Notes
 January 4, 2012**

Attendance:

Amy James, Scott Frey, Carol Cowan, Pam Biron -BCBSVT; Kevin Ciechon, Michelle Corey -Cigna; Chrissie Racicot -HP; Lou McLaren -MVP; Laura Hubbell –Barre; Dana Noble -Bennington; Beth Steckel -Burlington; Jean Cotner, Michelle Patterson -Middlebury; Elise McKenna, Darcy Bohannon –Morrisville; LaRae Francis -Gifford; Julie Riffon -Newport; Sarah Narkewicz, Marie Gilmond -Rutland; Laural Ruggles -St. Johnsbury; Nancy Thibodeau -Springfield; Crystal Thibodeau, Jill Lord -Windsor; Pat Jones, Beth Tanzman, Terri Price, Jenney Samuelson - Blueprint

Clarification for December minutes:

Cigna noted that they will not begin paying quarterly until 2013; they will continue to pay semi-annually in 2012.

Medicare update:

Payments are flowing; CHT payments are coming in the form of checks from NVRH. Medicare is running the beneficiary attributions for each practice on a quarterly schedule. The Blueprint just received the January – March attribution. Pat will reformat the patient counts for each practice and send them to the project managers. Medicare will ask for updated practice information in February and re-run the attributions in March – project managers can expect to hear from Pat in February and March if there are any questions about the practice information.

There have been a number of questions about the Medicare payments:

- Some claims are being appropriately denied; e.g. for people who are incarcerated or who have another insurance that is primary.
- All CHT payments are going through NVRH. Medicare asked its claims processor not to send Explanations of Benefits (EOBs) to beneficiaries because they would be confusing. However, the claims were included in Medicare’s online system. A couple of Vermont beneficiaries who are not in the St. Johnsbury area accessed the online system and discovered these claims. They were concerned that there were claims for services that they didn’t receive, and one of them reported the claim to Medicare’s fraud unit. Medicare was very appreciative that we brought this to their attention, and they are working on removing these claims from the online system.
- Some secondary insurers wanted to get copies of all claims, including the demonstration project claims, even though they aren’t responsible for paying them. Some of these insurers subsequently issued denials to practices and EOBs to beneficiaries for these claims, resulting in excess paperwork and confusion. Medicare has individually called these secondary insurers when we provide contact information to tell them to stop, and

they are issuing a “Task Direction Letter” telling the claims processor not to cross these claims over to the secondary insurers. As a result, this issue should not continue.

Pat asked if there were any other issues that project managers have encountered with the Medicare payments. In general, things seem to be going well. Pat offered a special “Thank You” to Laural Ruggles and NVRH for their assistance in providing the CHT payments.

Standardized Payer Attribution Methodology and Timeline:

The payers have agreed to a common methodology for attributing patients to Blueprint recognized practices for the PPPM payments. There are a couple of typos that need to be corrected, and then this document will be considered final. Special thanks to the payers and to Richard Slusky for their work on this.

The “Timetable for Quarterly Attribution and Payment” applies to MVP, which is the only insurer that will be making quarterly PPPM payments in 2012. BCBSVT, Medicaid, and Medicare will continue to make monthly PPPM payments. Cigna is currently paying every 6 months, and will move to quarterly in 2013.

Revised Payment Methodology Grid:

Pat is waiting for a couple of changes from the insurers; she is hoping to post this by the end of the week. There are some changes in the CHT payments; Medicaid will no longer require an invoice for CHT payments, and BCBSVT and Medicare also don’t require an invoice. MVP and Cigna still need an invoice – they will pay quarterly.

Payment Roster Template:

Haven’t heard any feedback so will consider this final and post on the web. Element definitions (tab 2) describe the information that insurers are looking for; practices should refer to these definitions when completing the roster, and project managers can contact Pat if there are any questions. We will try to pre-populate this new roster template with information that we already have from the practices, to make it easier for the practices to add any missing information. Some project managers are putting all practices on one worksheet, others are using one worksheet for each practice, and others are using one workbook for each practice. We will determine which approach is best for importing the information into the Blueprint database, and then ask for the information in that format.

First Quarter 2012 CHT Scaling and Payments:

The process of obtaining total unique patient numbers for CHT scaling seems to be working well. The pediatric codes used for the total unique patient numbers calculation have changed slightly; the ones in the standardized payer attribution methodology are the codes that should be used.

Payment implementation Calendar:

Payment rosters for practices being scored on March 1 are due next week (1/9/2012); will be looking for the April 1 practice rosters in early February. At the end of February, Pat will request the total unique patient numbers for each recognized practice for the second quarter CHT payments.

A couple face to face meetings will take place in 2012; Pat will request availability for dates in April, May and October. These meetings would replace the phone meeting for that month. They will provide an opportunity to obtain in depth information from payers and to work on process improvements.

Lou from MVP wanted to know how practices will be notified that MVP is moving to quarterly payments. Dana indicated that she will be e-mailing her practices. Beth Steckel said that she would send notice with the new payment methodology information.

Nancy Thibodeau thanked Pat, Lou and Beth Tanzman for their help in working through the payment processes.