

Thomas, Rebeca

From: Petre, Lori
Sent: Wednesday, March 28, 2018 5:06 PM
To:

Cc:

Subject:
Attachments:

Importance: High

Thank you all again for your responses to the below inquiry.

At this time we have determined that we want to offer the MCO's flexibility in this reporting and will be expanding the use of the Post Adjudicated File and 837I/P options previously defined for Structured Payment to also cover this situation (as well as SUD Fund, applicable only the RBHA's with communication via separate email).

Please refer to the updated versions of the attached documents for the new reporting definition and let us know if you have questions. Thank you.

From: Petre, Lori
Sent: Friday, February 2, 2018 12:12 PM
To:
Subject: Response Requested - Questions [Regarding - E-Prescribing Differential Adjusted Payment](#)

Please see the questions below regarding the E-Prescribing Differential Adjusted Payment process. A response from each organization (all lines of business) is requested by no later than COB Friday, February 9th.

1. Are you using the quarterly supplemental payment process (that AHCCCS discussed with the Association and select MCOs) for paying the practitioners the E-Rx DAP for CYE 18?
2. Will you be paying this on a claim-by-claim basis for CYE 18?
3. If neither of the above apply, please describe the payment process you are utilizing.

This information will assist us in understanding which MCOs will need to submit post-adjudication encounter files to update their encounters.

Please let us know of any questions, and thank you in advance for your responses!

Background for reference:

Physicians, Physician Assistants, and Registered Nurse Practitioners (Provider Types 08, 31, 18, 19) – Physicians, physician assistants, and registered nurse practitioners who have written at least 100 prescriptions for AHCCCS members, and who have written at least 50% of their total AHCCCS prescriptions as Electronic Prescriptions (E-Prescriptions) will qualify for a 1% VBP Differential Adjusted Payment increase for all services billed on the CMS Form 1500.

E-Prescription statistics will be identified by the AHCCCS provider ID for the prescribing provider, and computed by AHCCCS based on the following factors:

- Only approved and adjudicated AHCCCS claims and encounters for July 1, 2016 through December 31, 2016 dispense dates will be utilized in the computations
- AHCCCS will not consider any other data when determining which providers qualify for the VBP Differential Adjusted Payment increase
- E-Prescriptions include those prescriptions generated through a computer-to-computer electronic data interchange protocol, following a national industry standard and identified by Origin Code 3
- Refills of original prescriptions whereby the original prescriptions meet the definition of E-Prescriptions shall not be counted as E-Prescriptions

The VBP Differential Adjusted Payment will apply to claims for covered AHCCCS services where the rendering provider ID on the claim is the same as the prescribing provider ID that was identified and found to meet the VBP criteria described above.

If AHCCCS continues this increase beyond CYE 2018, physicians, physician assistants, and registered nurse practitioners who meet the E-Prescription criteria will see a VBP Differential Adjusted Payment increase for all services effective October 1, 2018. It is anticipated that physicians, physician assistants, and registered nurse practitioners who do not meet the E-Prescription criteria will see a VBP Differential Adjusted Payment decrease for all services effective October 1, 2018.