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March 25, 2021

Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2021-09

Applicable to the following benefits in the **2018-2023 SMMC contract**:

- Managed Medical Assistance (MMA) and MMA Specialty
- Long-term Care (LTC)
- Dental

Re: Updated MMA Physician Incentive Program (MPIP) Requirements Year 5 Effective January 1, 2021 and Delayed Submission of MPIP Year 6 Proposals

Pursuant to s. 409.967(2)(a), F.S., and as specified by the Agency, MMA plans must implement an incentive program wherein payment rates for eligible physicians must equal or exceed Medicare rates for services provided. The Agency fulfilled this requirement through implementation of the MMA Physician Incentive Program (MPIP). (Attachment II, Exhibit II-A, Section VIII.E.1.) The managed care plan must submit a proposal to the Agency for review and approval by April 1 of each year (in a format prescribed by the Agency) identifying the qualifying criteria (performance and quality measures) that each physician type must meet in order to earn the enhanced payment, beginning October 1 of the upcoming Contract year. (Attachment II, Exhibit II-A, Section VIII.E.1.c.) The purpose of this policy transmittal is to notify the managed care plan about several updated requirements to the MPIP Year 5 parameters and delayed submission of MPIP Year 6 proposals.

MPIP YEAR 5 Updated Guidance: Enhanced Payment Effective January 1, 2021

MMA plans must implement the following updated rate calculation methodology for dates of service on or after January 1, 2021 for procedure codes without rates published on First Coast's website but that have Medicare Relative Value Units (RVUs) (as published by the Centers for Medicare & Medicaid Services at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files.html>). Refer to Attachment 1 of this policy transmittal for this updated MPIP Year 5 guidance.

$$\begin{aligned}
 &2021 \text{ Non-Facility Pricing Amount} = \\
 &\quad [(Work \text{ RVU} * Work \text{ GPCI}) + \\
 &\quad (Non-Facility \text{ PE RVU} * PE \text{ GPCI}) + \\
 &\quad (MP \text{ RVU} * MP \text{ GPCI})] * \text{Conversion Factor (CF)}
 \end{aligned}$$

$$\begin{aligned}
 &2021 \text{ Facility Pricing Amount} = \\
 &\quad [(Work \text{ RVU} * Work \text{ GPCI}) + \\
 &\quad (Facility \text{ PE RVU} * PE \text{ GPCI}) + \\
 &\quad (MP \text{ RVU} * MP \text{ GPCI})] * \text{Conversion Factor (CF)}
 \end{aligned}$$



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2021 MPIP EM Procedure Code Medicare Rates Effective January 1, 2021

The Medicaid fee schedule includes pediatric evaluation and management codes that are not listed on the Medicare fee schedule. For the purpose of reimbursing MPIP-qualified providers for the pediatric evaluation and management codes included in the MPIP, but not listed in the Medicare fee schedule, the managed care plan must use the rates included in the list of Children's Primary Care Codes in Attachment 2 to this policy transmittal, as the 2021 Medicare rates for services provided January 1, 2021 and later .

The managed care plan must program its billing systems to make these payments beginning no later than June 1, 2021 and reprocess MPIP-qualified provider claims paid prior to the pricing updates of its billing systems by August 1, 2021.

The managed care plan is not required to submit an MPIP Year 6 proposal to the Agency by April 1, 2021. Additional information from the Agency regarding MPIP Year 6 is forthcoming.

If you have any questions, please contact Tiffany Krampota by emailing Tiffany.Krampota@ahca.myflorida.com and copy your contract manager.

Sincerely,



Beth Kidder
Deputy Secretary for Medicaid

BK/sar
Attachment 1: MMA MPIP Rate Calculation Guidance
Attachment 2: 2021 MPIP EM Procedure Code Medicare Rates