

DEPARTMENT OF HUMAN SERVICES, DIVISION OF MEDICAL SERVICES

SUBJECT: Primary Care Case Management (PCCM) Reconciliation

DESCRIPTION:

Statement of Necessity

The Primary Care Case Management (PCCM) program pays a monthly case management fee to Primary Care Providers (PCP) the first week of each quarter. The payment amount is based on their caseload at that time. The reconciliation process ensures that PCPs are paid for any clients who came on or left the PCP's panel sometime during the quarter after the quarterly payment was made.

Currently the PCCM reconciliation process is executed through an annual ad-hoc manual process. Moving the PCCM Reconciliation to a quarterly automated schedule is easier to maintain operationally, assists in avoiding potential audits, and provides better service to providers as payments and adjustments will be provided on a more frequent, and timely basis.

Rule Summary

Section I – Primacy Care Case Management Fee 171.230 (I) – Sentence revised to read, “Case management fees will be reconciled at least quarterly, and may be reconciled at any time determined necessary to resolve immediate issues.”

PUBLIC COMMENT: A public hearing was held on this rule on October 12, 2022. The public comment period expired on October 31, 2022. The agency indicated that it received no public comments.

The proposed effective date is January 1, 2023.

FINANCIAL IMPACT: The agency indicated that this rule has no financial impact.

LEGAL AUTHORIZATION: The Department of Human Services has the responsibility to administer assigned forms of public assistance and is specifically authorized to maintain an indigent medical care program (Arkansas Medicaid). *See* Ark. Code Ann. §§ 20-76-201(1), 20-77-107(a)(1). The Department has the authority to make rules that are necessary or desirable to carry out its public assistance duties. Ark. Code Ann. § 20-76-201(12). The Department and its divisions also have the authority to promulgate rules as necessary to conform their programs to federal law and receive federal funding. Ark. Code Ann. § 25-10-129(b).



Division of Medical Services

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MEMORANDUM

TO: Interested Persons and Providers

FROM: Elizabeth Pitman, Director, Division of Medical Services

DATE: September 29, 2022

SUBJ: Primary Care Case Management (PCCM) Reconciliation

As a part of the Arkansas Administrative Procedure Act process, attached for your review and comment are proposed rule revisions.

Public comments must be submitted in writing at the above address or at the following email address: ORP@dhs.arkansas.gov Please note that public comments submitted in response to this notice are considered public documents. A public comment, including the commenter's name and any personal information contained within the public comment, will be made publicly available and may be seen by various people.

If you have any comments, please submit those comments in writing, no later than October 31, 2022 .

All DHS proposed rules, public notices, and recently finalized rules may also be viewed at: [Proposed Rules & Public Notices](#).

NOTICE OF RULE MAKING

The Director of the Division of Medical Services of the Department of Human Services announces for a public comment period of thirty (30) calendar days a notice of rulemaking for the following proposed rule under one or more of the following chapters, subchapters, or sections of the Arkansas Code: §§20-76-201, 20-77-107, and 25-10-129.

Effective January 1, 2023:

The Director of the Division of Medical Services amends the Primary Care Case Management (PCCM) Reconciliation to change the reconciliation from an annual to a quarterly process.

The proposed rule is available for review at the Department of Human Services (DHS) Office of Rules Promulgation, 2nd floor Donaghey Plaza South Building, 7th and Main Streets, P. O. Box 1437, Slot S295, Little Rock, Arkansas 72203-1437. You may also access and download the proposed rule at <https://humanservices.arkansas.gov/do-business-with-dhs/proposed-rules/>. Public comments must be submitted in writing at the above address or at the following email address: ORP@dhs.arkansas.gov. All public comments must be received by DHS no later than October 31, 2022. Please note that public comments submitted in response to this notice are considered public documents. A public comment, including the commenter's name and any personal information contained within the public comment, will be made publicly available and may be seen by various people.

A public hearing by remote access only through a Zoom webinar will be held on October 12, 2022, at 11:00 a.m. and public comments may be submitted at the hearing. Individuals can access this public hearing at <https://us02web.zoom.us/j/89077570180>. The webinar ID is 89077570180. If you would like the electronic link, "one-tap" mobile information, listening only dial-in phone numbers, or international phone numbers, please contact ORP at ORP@dhs.arkansas.gov.

If you need this material in a different format, such as large print, contact the Office of Rules Promulgation at 501-534-4138.

The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and is operated, managed and delivers services without regard to religion, disability, political affiliation, veteran status, age, race, color or national origin. 4502100209



Elizabeth Pitman, Director
Division of Medical Services

*TOC not required***171.230 Primary Care Case Management Fee****8-1-181-1-
23**

- A. In addition to reimbursing PCPs on a fee for service basis for physician services, Arkansas Medicaid pays them a monthly case management fee for each enrollee on their caseloads.
- B. The amount due for each month is determined by multiplying the established case management fee by the number of enrollees on the PCP's caseload.
 - 1. Medicaid pays case management fees quarterly.
 - 2. The accompanying Medicaid Remittance and Status Report (RA) itemizes the payments and lists the number of enrollees and each enrollment month.
 - 3. Enrollees are listed alphabetically by name, with their Medicaid identification numbers and addresses also displayed.
- C. PCP case management fees are paid according to the PCP's direction. The PCP may choose to have the case management fee paid to his or her individual provider ID number or to the group provider ID number with whom the PCP is affiliated.
- D. If the PCP's case management fees are paid to a group and the PCP changes his or her affiliation, the PCP must submit a new PCP Agreement Form to Provider Enrollment within thirty (30) calendar days of changing affiliation. The PCP must also notify the beneficiaries on his or her caseload of the change.
- E. If a PCP fails to submit a new PCP Agreement Form, the case management fees will pay to the provider of record until a new PCP Agreement Form is received by Provider Enrollment.
- F. If a Group Affiliation Form is received by Provider Enrollment to disassociate a PCP from a group but the PCP Agreement Form is not received, the case management fees will be paid to the individual PCP's provider ID number.
- G. If a PCP's case management fees were paid to a group in which the PCP is no longer affiliated, it is the responsibility of that group to reimburse Medicaid the fees they were not entitled to receive.
- H. **No case management fees will be back paid to a PCP who has failed to follow the process described in Paragraph D of this Section.**
- I. ~~Reconciliation of case management fees will occur annually in June. Case management fees will be reconciled at least quarterly, and may be reconciled at any time determined necessary to resolve immediate issues.~~