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Massachusetts Registration of Provider Organizations (MA-RPO) Program

Proposed 2018 Updates

Release for Public Comment: October 20, 2017

Provider Organizations that meet certain thresholds are required to register biennially with the Health Policy Commission (HPC) and to submit a related annual filing to the Center for Health Information and Analysis (CHIA). The HPC and CHIA have created a single program – the Massachusetts Registration of Provider Organizations (MA-RPO) Program – that incorporates the required data elements from both the HPC and CHIA statutes. Under the MA-RPO Program, a Provider Organization submits an annual filing to the Commonwealth which satisfies its obligations under both M.G.L. c. 6D, § 11 and M.G.L. c. 12C, § 9.

In response to stakeholder feedback, the HPC and CHIA have been phasing in the statutorily required data elements over time. In 2015, Provider Organizations submitted information regarding their organizational and operational structure and governance. In 2017, the requirements were expanded to include standardized financial statements, detailed information on contracting practices, and detailed information on revenue received from alternative payment methods. For the 2018 filing, the MA-RPO Program is proposing to make the following additions:

1. Replacing a data element in the Facilities file to better capture information about facility fees paid to the provider organization; and
2. Adding Nurse Practitioners (NP), Physician Assistants (PA), and Certified Nurse Midwives (CNM) to the Provider Roster.

Proposed 2018 Updates and Request for Public Comment

To streamline the review and public comment process, the MA-RPO Program is releasing the proposed additions to the 2018 Facilities file and Provider Roster in this document, rather than providing the full text of the proposed 2018 Data Submission Manual (DSM). For the full text of the 2017 DSM, please see the program [website](#). At this time, the MA-RPO Program is not proposing additions or substantive changes to the DSM for the 2018 filing aside from those described below.

Facilities File

The proposed 2018 Facilities File asks for more detailed information on which payers, if any, pay facility fees to the facility. Specifically, the MA-RPO Program is proposing to remove data element RPO-86: Provider-Based Status and replace it with data element RPO-86A: Facility Fees. Data element RPO-86A will be required of Facilities with the following license types selected in RPO-84: “Clinic – Main Site,” “Clinic – Satellite,” or “Acute Hospital – Satellite.”



Facility fee is defined as any fee charged or billed by a hospital or health system for outpatient hospital services provided in a hospital-licensed facility that is:

- (A) intended to compensate the hospital or health system for the operational expenses of the hospital or health system, and
- (B) separate and distinct from a professional fee.

RPO-86A: Facility Fees: Select each of the payers that pay facility fees to this Facility:

	Private Commercial	MassHealth MCO	Medicare Advantage
Aetna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BMC HealthNet Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Blue Cross Blue Shield	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cigna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Celticare	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fallon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Harvard Pilgrim Health Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health New England	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood Health Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tufts Health Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tufts Health Public Plans	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
United Healthcare	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other payers not listed above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- ☐ MassHealth (non-MCO)
- ☐ Traditional Medicare (non-Medicare Advantage)
- ☐ Programs for Dually Eligible Members, Ages 21 - 64
- ☐ Programs for Dually Eligible Members, Ages 65+
- ☐ No payers pay facility fees to this Facility

Provider Roster

The MA-RPO Program is proposing to add nurse practitioners (NP), physician assistants (PA), and certified nurse midwives (CNM) to the Provider Roster. Other Health Care Professionals are not required to be reported in the 2018 filing. Provider Organizations must report all physicians, NPs, PAs, and CNMs participating in at least one contract as of January 1, 2018 established by one of the Provider Organization's Corporately Affiliated Contracting Entities. The roster also includes five new data elements, RPO-99A through RPO-99E, which would apply only to NPs, PAs, and CNMs:

RPO-99A: Patient Panel

Does this provider have his/her own patient panel?

☐ Yes ☐ No

RPO-99B: Billing Practices

Of the services provided by the provider, what percent were billed using his/her own NPI in the last year?

☐ 0-24% ☐ 25-49% ☐ 50-74% ☐ 75-100%

RPO-99C through RPO-99E are required for NPs and PAs only.

RPO-99C: Last Name of Supervising Physician for Prescriptive Practice

Enter the last name of the supervising physician for prescriptive practice.

RPO-99D: First Name of Supervising Physician for Prescriptive Practice

Enter the first name of the supervising physician for prescriptive practice.

RPO-99E: NPI of Supervising Physician for Prescriptive Practice

Enter the NPI of the supervising physician for prescriptive practice.

Please see [243 CMR 2.08: Physician Assistants](#) and [244 CMR 4.00: Advanced Practice Registered Nursing](#) for relevant definitions.

Request for Public Comment

The MA-RPO Program values the feedback that many organizations have provided over the last year and looks forward to gaining new insight on the proposed 2018 updates. Organizations or individuals who would like to provide comments on the proposed 2018 requirements should send written feedback to HPC-RPO@state.ma.us on or before **Thursday, November 30, 2017 at 5:00 PM**. The HPC specifically seeks comments on the following questions:

1. Does your organization recommend any modifications or instructions to the proposed updates described above?
2. Does your organization have any concerns regarding data consistency/accuracy as an end-user of this information?
3. Is there any data in the Provider Roster requirements that your organization currently tracks for physicians, but not for NPs, PAs, or CNMs?
4. Would your organization prefer to submit a combined Provider Roster that includes physicians (MDs and DOs), NPs, PAs, and CNMs, or would your organization prefer to submit a separate roster for NPs, PAs, and CNMs?



5. In the existing data elements in the 2017 DSM, are there any answer options or instructions that your organization believes should be added or modified to better reflect changes to your organizational structure or contracting and clinical relationships that may have resulted from changes in care delivery and payment models (e.g., Accountable Care Organizations, increase in risk-based contracts, etc.)?
6. Provider Organizations have previously indicated a preference for a summer submission deadline rather than a fall submission deadline. Please include any feedback regarding the feasibility of providing data in the summer of 2018.

The final 2018 DSM, which will contain all data elements that a Provider Organization will submit to satisfy its 2018 filing requirements with the HPC (*see* [958 CMR 6.05\(5\)](#)) and CHIA (*see* [957 CMR 11.00](#)), will be released after the MA-RPO Program has reviewed and incorporated stakeholder feedback on the new data elements, as appropriate.