

101 CMR: EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

101 CMR 353.00: PAYMENT FOR PRIMARY CARE CLINICIAN PLAN SERVICES

Section

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353.01: General Provisions

(1) Scope and Purpose. 101 CMR 353.00 governs certain payments to Primary Care Clinicians (PCCs) for Primary Care Clinician (PCC) services provided to MassHealth members as part of MassHealth PCC Plan. The enhancement rate payments described in 101 CMR 353.00 are in addition to payments under the Acute Hospital Request for Applications, and 101 CMR 304.00: *Rates for Community Health Centers*; 101 CMR 316.00: *Surgery and Anesthesia Services*; 101 CMR 317.00: *Medicine*; and 101 CMR 318.00: *Radiology*.

(2) Disclaimer of Authorization of Services. 101 CMR 353.00 is not authorization for or approval of the procedures for which payments are determined pursuant to 101 CMR 353.00. Purchasing agencies and insurers are responsible for the definition, authorization, and approval of care and services extended to publicly aided individuals.

(3) Administrative Bulletins. EOHHS may issue administrative bulletins to clarify its policy on and understanding of substantive provisions of 101 CMR 353.00.

353.02: General Definitions

Meaning of Terms. Terms used in 101 CMR 353.00 will have the meaning ascribed in 101 CMR 353.02.

Center. The Center for Health Information and Analysis established under M.G.L. c. 12C.

EOHHS. The Executive Office of Health and Human Services established under M.G.L. c. 6A.

Primary Care Clinician (PCC). Any MassHealth provider that participates as a primary care provider for MassHealth members enrolled in the PCC Plan, as described in MassHealth regulation 130 CMR 450.118: *Primary Care Clinician (PCC) Plan*.

Publicly Aided Individual. A person whose medical and other services is paid for in whole or in part by the Commonwealth of Massachusetts or any of its departments, agencies, boards, commissions, or political subdivisions.

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353.03: General Payment Provisions

Primary Care Clinicians (PCCs) receive an enhanced rate for certain types of primary and preventive care visits provided to PCC Plan members enrolled with the PCC on the date of service. Ten dollars is added to the fee for the procedure code billed. The MassHealth agency pays PCCs an enhanced fee for delivering primary care services in accordance with the terms of the PCC provider contract.

353.04: Filing and Reporting Requirements

The purchasing governmental unit may reduce the payment rates by 15% for any provider that fails to submit required information to the Center. The purchasing governmental unit will notify the provider in advance of its intention to impose a rate reduction.

353.05: Severability

The provisions of 101 CMR 353.00 are severable, and if any provision of 101 CMR 353.00 or application of such provision to any community service agency or any circumstances shall be held to be invalid or unconstitutional, such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 101 CMR 353.00 or application of such provisions to community service agencies or circumstances other than those held invalid.

REGULATORY AUTHORITY

101 CMR 353.00: M.G.L. c. 118E.