

Medicaid Payment for Primary Care Services

Effective with dates of service January 1, 2013, through December 31, 2014, Medicaid payment rates to primary care physicians for furnishing primary care services will be no less than 100% of Medicare payment rates for 2013 and 2014 respectively (or if greater, the Medicare payment rate in effect in July 1, 2009). Primary care physicians are defined as physicians with a primary specialty designation of family medicine, general internal medicine, pediatric medicine, or a subspecialty related to those specialties. Advanced practice clinicians under the personal supervision of an eligible physician may also be eligible and reimbursed at 75% of the increased rate. Increased payments do not apply to Rural Health Clinic and Federally Qualified Health Center services.

Physicians must self-attest that they are either board-certified in family medicine, general internal medicine, pediatric medicine, or a subspecialty related to those specialties or that 60% of all Medicaid services they bill, or provide in a managed care environment, are for the specified evaluation and management (E&M) and vaccine administration codes.

As part of the self-attestation, physicians must first self-attest to a covered specialty or subspecialty designation. As part of that attestation, they must specify that they are either board-certified in an eligible specialty or subspecialty and/or that 60% of their Medicaid claims for the prior year were for the (E&M) and vaccine administration codes specified in the regulation.

Only physicians who can legitimately self-attest to a specialty designation of (general) internal medicine, family medicine, pediatric medicine, or a subspecialty within those specialties recognized by the American Board of Physician Specialties (ABPS) or American Osteopathic Association (AOA) qualify.

KMAP

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- 1-800-933-6593 (in-state)
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8:00 a.m. - 5:00 p.m.
Monday - Friday

Medicaid Payment for Primary Care Services continued

It is possible that a physician might maintain a particular qualifying board certification but might actually practice in a different field. A physician who maintains one of the eligible certificates, but actually practices in a noneligible specialty should not self-attest to eligibility for higher payment. Similarly, a physician board-certified in a noneligible specialty (for example, surgery or dermatology) who practices within the community as, for example, a family practitioner could self-attest to a specialty designation of family medicine, internal medicine, or pediatric medicine and a supporting 60% claims history.

For retro-active self-attestations, increased payments will be limited to the beginning of the quarter in which the attestation is submitted.

Self-Attestation Form

The Certification and Attestation for Primary Care Rate Increase form can be found under the Provider Information heading on the [Forms page](#) of the KMAP website and should be submitted to the following address:

Kansas Dept. of Health and Environment, Division of Health Care Finance
Attention: Roxana Alexander
900 SW Jackson, 9th Floor
Topeka, Kansas 66612

Vaccine Administration Codes

Effective with dates of service on and after January 1, 2013, the Kansas regional Vaccine for Children (VFC) ceiling will be increased to \$20.26. This increase will be reflected in the reimbursement for procedure code 90460. Procedure code 90461 will no longer be covered.

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HP Enterprise Services is the fiscal agent of KMAP.