

CYE 2020	IC (Integrated Clinics)*	08, 18 and 19 (Physicians, PA's, and RNP's E-Prescribing)	02 (Acute Hospitals DRG Eligible)	71, B5, C4 (Psych Hospitals, Sub Acute Facility 1-16 beds, and Rehab/LTAC Hospitals)	22 (Nursing Facilities)	IC and 77 (Integrated Clinics and Behavioral Health Outpatient Clinics)*/**/***	Dental Providers (Provider types 07 and 54)	HCBS Providers (Provider types A3, FI, IC, 23, 39, 40, 46, 77** and 95)
						New for CYE 2020	New for CYE 2020	New for CYE 2020
Providers:	Qualified Provider List	Qualified Provider List	Qualified Provider List	Qualified Provider List	Qualified Provider List	Qualified Provider List	Qualified Provider List	Qualified Provider List
Provider Flag:	Provider ID listed on RF682 as VB2 for applicable year	Provider ID listed on RF682 as VB1 for applicable year	Provider ID flagged on PR010 VBP = Y/Qualified List provided; and Provider listed on RF682 as - VBD (HIE); VD1 (Sepsis Performance) and/or VD2 (Pediatric Preparedness) for applicable year.	Provider ID flagged on PR010 VBP = Y/Qualified List provided; and Provider listed on RF682 as VBO (HIE); VO1 (Psych Facility Quality Reporting); VO2 (LTC Hospital Pressure Ulcer Performance); VO3 (Rehab Pressure Ulcers Performance) for applicable year.	Provider ID flagged on PR010 VBP = Y/Qualified List provided; and Provider listed on RF682 as VBN (Percentage of Residents with UTI); VN1 (Percentage of High Risk Residents with Pressure Ulcers) for applicable year.	Provider ID listed on RF682 as - VB3 (Schools Partnership); and/or VB4 (Autism Center for Excellence); and/or VB5 (Difficult to access location) for applicable year***	Provider ID listed on RF682 as VB6 for applicable year	Provider ID listed on RF682 as EVV for applicable year
% Increase:	10% increase to FFS rates/Regular Processing	1% increase to FFS rates/Regular Processing	Up to 4%, CAH's up to 28.5% increase to provider specific rates	Up to 4% increase to provider specific rates	2% increase to provider specific rates	As applicable to each type - VB3 1% Schools Partnership; VB4 3% Autism CE; VB5 3% Difficult to access location	1% increase to FFS rates/Regular Processing	1% increase to FFS rates/Regular Processing
Services:	Select Services reflected as VB2 on RF166 (will be reflected as %'s for 10/1/20)	All services on a form 1500	Inpatient and Outpatient	Inpatient and Outpatient	All services	All Services	All services	Select Services reflected as EVV on RF166 (reflected as %)
How driven in PMMIS:	<i>System Logic and Table Driven - Systematically applied to the FFS rates/Regular Processing based on provider ID's for dates of service on the RF682 table as VB2 for codes and services listed as VB2 on RF166 table</i>	<i>System Logic and Table Driven - Systematically applied as a 1% increase to the FFS rates/Regular Processing based on provider ID's for dates of service on the RF682 table as VB1</i>	<i>Provider Rate Driven - Systematically reflected as increases to Provider Specific DRG Rates and OPFS PGM's for Eligible Providers on PR050</i>	<i>Provider Rate Driven - Systematically reflected as increases to Provider Specific Rates for Eligible Providers on PR050</i>	<i>System Logic and Provider Rate Driven - Systematically reflected as increases to Provider Specific Rates for Eligible Providers on PR050</i>	<i>System Logic and Table Driven - Systematically applied as applicable % increase to the FFS rates/Regular Processing based on provider ID's for dates of service on the RF682 table as applicable to each VB3, VB4, VB5 Indicators</i>	<i>System Logic and Table Driven - Systematically applied as applicable % increase to the FFS rates/Regular Processing based on provider ID's for dates of service on the RF682 table as VB6</i>	<i>System Logic and Table Driven - Systematically applied as applicable to the FFS rates/Regular Processing based on provider ID's for dates of service on the RF682 table as EVV and the services on RF166 table as EVV.</i>

<p>Notes, Issues or Questions</p>	<p>*Note this increase for eligible IC providers may be in addition to BH OP Clinic DAP for eligible providers.</p>		<p>Note - PGM does not apply to items paid at the Outpatient CCR; so these items are not subject to DAP</p>	<p><i>Need to verify how these provider types are paid for form type OP.</i></p>		<p>*Note this increase for eligible IC providers may be in addition to IC DAP for eligible providers. ** Note this increase of eligible 77 providers may be in addition to EVV DAP for eligible providers. ***Note a given provider may qualify for one or multiple of these increases and will be flagged for those applicable</p>	<p>Note Provider Types D1, D2, D3, D4 are listed in the Public Notice in addition to 07 and 54; however these provider types are not currently used by AZ</p>	<p>**Note this increase for eligible 77 providers may be in addition to BH OP Clinic DAP increase for eligible providers.</p>
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