



May 6, 2015

To All PCOT Practices

Ladies and Gentlemen:

On April 1, 2015, the PCOT's Board of Directors executed a contract with Texas Children's Health Plan (TCHP) a network for Medicaid managed plans. The Medicaid Managed plans included STAR, STAR+PLUS, STAR KIDS, STAR HEALTH, and CHIP Program. At this time, they are seeking a contract for STAR KIDS. They would expand into other products after approved for STAR KIDS. You will be given the opportunity to opt in or out of the additional products as they are added. Please see the attached summary of terms of this contract.

The STAR KIDS managed Medicaid program is set to begin 9/1/2016.

Please indicate your practice's plans to participate in this TCHP contract by checking one of the boxes below for the health plan. This response should be faxed to PCOT at 903-526-2320.

Sincerely,

Jennifer Roach  
Executive Director

\_\_\_\_\_ Yes, our practice will accept these fees and all physicians in the practice will participate in the Texas Children's Health Plan contract for STAR KIDS Managed Medicaid.

\_\_\_\_\_ No, our practice does not wish to participate in the Texas Children's Health Plan contract for STAR KIDS Managed Medicaid.

Date: \_\_\_\_\_ Practice Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Tax I.D. No. \_\_\_\_\_

Printed Physician Name(s)

		<b>Physicians Contracting Organization of Texas</b>	
		<b>Contract Review Worksheet</b>	
		JRR 5-1-2015	
		<b>Background Information</b>	
	1	Payor Name, Organizational Status	<b>Texas Children's Health Plan (TCHP)</b>
	2	Type of Organization	Managed Medicaid plans
	3	Type Product	STAR Kids, with the hope to add other Medicaid products in the future
	4	Background Due Diligence, OIG Exclusion, TDI	no reports
	5	Number of covered lives, major employers	n/a-starts in 2016
	6	Hospital affiliations	working on TMF, ETMC and others
	7	Laboratory affiliations	still negotiating
	8	Benefit plan description (Covered Services defined)	Managed Medicaid plans
	9	Provider procedure manual	
	10	References/ Notes	Must notify with a 60 day written notice if planning to close practice to new patients
			Must notify covered person of the cost of non-covered services prior to rendering services and obtain a signed statement
		Formulary	
		<b>Terms</b>	
**	11	PCOT Agency Status defined	yes
	12	Each party responsible for their own acts	yes
		Hold Harmless and Indemnification language	yes; Art IX 9.9
		Arbitration & mediation non binding	Binding; Art XVII; 17.21
**	13	No assignment without consent (Silent PPO)	yes; Art XVII 17.5
	14	No all products clauses	
	15	No marketing w/o consent	
**	16	Credentialing delegated	yes
**	17	Members can not be terminated w/o cause	term w/o cause 90 days notice; article X 10.2
**	18	Adequate grievance process	yes
	19	Modifications must be mutually accepted	TCHP must notify IPA of any modifications at least 90 days in advance; Art IX 9.21
**	20	Access and confidentiality reasonable	yes
	21	Members may charge for requested medical records	can charge up to .10 cents per page for copying only
	22	Governed by Texas Law, governed in county where care was recd	Follows Federal and State Laws
**	23	Max liability insurance required 200,000/ 600,000	yes: \$100/\$300 minimum; Article XII 12.3 B
**	24	Term: 1 year max	1 year; Art X 10.1
	25	Auto renewal	yes for one year periods; Art X 10.1
**	26	Termination w/o cause not > 90 days	Can be termed without cause by TCHP by giving PCOT at least 90 days written notice, Art X 10.2
	27	Termination Tail reasonable	
	28	HIPAA language--code sets	yes
		<b>Billing/ Compensation</b>	
	29	Claims processor (payor) identified	yes, TCHP
**	30	Claims paid < 30 days (or comply with SB 418)	yes
	31	Penalty for non timely payment (Predetermined)	
	32	Payment to Non-Physician Providers	
	33	Standard filing form (HCFA 1500) acceptable; electronic	yes
	34	Right to coordination of benefits payments	yes
	35	Retroactive adjustments within 90 days	Not stated; follow State law of 180 days; Medicaid is 180 days
	36	Enrollee identification process specified	yes; ID card with Network ID
**	37	Complete fee schedule	<b>See Exhibit A-Compensation</b>
		Non Specified	to be determined
		Meets PCOT Minimum Criteria	
	38	Fee schedule fixed for contract period	follow Medicaid updates quarterly
	39	Fee schedule review & increase at renewal (auto escalator)	No
	40	New CPT Code Changes/Updates effective January 1st	follow Medicaid guidelines
		<b>Miscellaneous Comments/Notes</b>	

## **EXHIBIT A COMPENSATION**

### **Compensation for Primary Care Physician Services**

Medical Group Physician shall be reimbursed for Covered Services as follows:

**Tier One:** Panel size exceeds 0.412% of TCHP's overall Medicaid HMO membership. On or before the fifteenth (15<sup>th</sup>) day of the month, TCHP shall pay Capitation Compensation to Medical Group Physician at a rate of \$3.00 per member per month. In addition to capitation, TCHP will reimburse Medical Group Physician, on a fee for service basis, the lesser of Physician's usual and customary charges for Covered services provided, or at one hundred ten percent (110%) of the current Texas Medicaid allowable amount.

**Tier Two:** Panel size is between 0.411% and 0.071% of TCHP's overall Medicaid HMO membership. For Covered services provided to Medicaid HMO Members, Medical Group Physician shall be reimbursed the lesser of Medical Group Physician's usual and customary charges for Covered services provided, or at one hundred ten percent (110%) of the current Texas Medicaid allowable amount.

**Tier Three:** Panel size is less than .070% of TCHP's overall Medicaid HMO membership. For Covered services provided to Medicaid HMO Members, Medical Group Physician shall be reimbursed the lesser of Medical Group Physician's usual and customary charges for Covered services provided, or at one hundred percent (100%) of the current Texas Medicaid allowable amount.

*Individual panel sizes shall be evaluated on an annual basis.*

### **Compensation for Specialty Care Physician Services**

Reimbursement to Provider for Covered Services shall be at the lesser of Providers usual and customary charge for services provided, or the maximum acceptable charge for Covered Services calculated at one hundred percent (100%) of the current Texas Medicaid allowable amount.

### **Compensation for Physician Extenders**

All physician extender provider types including but not limited to physician assistants, nurse practitioners, certified nurse midwives and certified registered nurse anesthetists shall be reimbursed 100% of the applicable Texas Medicaid allowable fee schedule less the applicable reduction for physician extenders as published by HHSC and/or TMHP.

### **Pay For Performance**

When developed by TCHP, TCHP will make an additional incentive payment to Medical Group physician for participation in a pay for performance program.

## Why Texas Children's Health Plan?

- Offer a community based, provider sponsored health plan with a strong reputation in our current communities
- Fosters growth of a provider network that supports community based care
- NE MRSA does not currently have a provider-sponsored health plan
- Electronic processes for efficient claims payment, and a streamlined authorization process. Additionally, referrals to specialists are not required.
- Offer provider population management tools and registries to help effectively manage patients.
- Large, hands-on provider relations staff to service the provider network through face-to-face meetings with office staff, provider education programs, and office manager education and group training programs
- Supportive member services program to foster access to care for members with an outbound call unit to assist members and providers in making appointments with other providers in the network
- Innovative, integrated care and disease management programs to assist with members' medical and behavioral health needs
- Strong medical and behavioral health leadership available to assist providers with ongoing education needs to help effectively manage the chronic care and special need pediatric populations
- Just-in-time resource for providers to help with medication management and access to specialists for questions regarding clinical management through our HUB and spoke system for the STAR Kids program