



CMS Required MIPS Adjustment for Noncontracting Providers

Effective January 1, 2019, delegated PPGs must pay eligible noncontracting professional providers their positive MIPS adjustment for covered services

Effective in 2019, per Centers for Medicare & Medicaid Services (CMS) guidelines, fee-for-service (FFS) payments to Merit-based Incentive Payment System (MIPS) eligible professional providers who are noncontracting at the time of service for Cal MediConnect Plan (Medicare-Medicaid Plan) covered services must include their positive MIPS adjustment when payment is made under or based on the Medicare physician fee schedule.

PPG RESPONSIBILITY

Health Net* participating physician groups (PPGs) delegated for claims payment must include the positive MIPS adjustment payment for Cal MediConnect covered services provided by eligible professional providers that are not contracted with the PPG at the time of service when payment is made under or based on the Medicare physician fee schedule.

Health Net has decided to apply negative adjustments. However, per CMS, the application of any negative MIPS adjustments is optional.

MIPS ADJUSTMENT DATA FILE

CMS will upload the payment adjustment data file to the Health Plan Management System (HPMS) by the end of 2018. The adjustment data file will provide a list of MIPS-eligible providers and will consist of four data elements:

- 1 National Provider Identifier (NPI).
- 2 Taxpayer Identification Number (TIN).
- 3 MIPS adjustment percentage.
- 4 A marker (percentage indicator) indicating that the MIPS adjustment percentage is positive (P) or negative (N).

Health Net will make the files available to impacted providers once available from CMS.

ADDITIONAL INFORMATION

If you have questions regarding the MIPS program, visit the CMS website at www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/2019-MIPS-Payment-Adjustment-Remittance-Advice-FAQs.pdf.

THIS UPDATE APPLIES TO
CAL MEDICCONNECT
 PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

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