

Vermont Blueprint for Health  
Payment Implementation Workgroup Minutes  
April 3, 2013  
Conference Call

**Present:** Pam Biron, Scott Frey, Lynn Trepanier, and Carol Cowan, BCBSVT; Jackie Graham, Medicaid-HP; Lou McLaren, MVP; Pat Jones and Nick Lovejoy, Blueprint; Mark Young, Barre; Dana Noble, Bennington; Wendy Cornwell, Brattleboro; Beth Steckel, Robyn Skiff, Roberta Gilmour, Fiona Daigle, and Rita Pellerin, Burlington; Michelle Patterson, Middlebury; LaRae Francis, Randolph; Marie Gilmond, Rutland; Loral Ruggles, St. Johnsbury; Kaylie Chaffee and Pat Knapp, Springfield; Gail MacKenzie, Windsor

**Impact of Sequestration on Medicare Payments**

Pat reported that the failure to reach agreement on the federal budget has resulted in a two percent reduction for all Medicare PPPM, CHT and SASH payments. An e-mail notification has been sent to the project managers, and they are notifying practices of the impact on their PPPM payments.

**Updates**

Cigna has made payments for July 2012 through March 2013; the new quarterly PPPM payment process will begin in April. The new process will result in a quarterly lump-sum payment in the form of an electronic funds transfer (EFT) directly into the practice's bank account; there will be no checks or no EOBs generated. Cigna has the necessary banking information from most of the practices so that PPPM payments can be sent by EFT.

The final version of the NCQA recognition lapse procedure was sent to the work group with the meeting reminder, and an updated version of the payment roster was also distributed (the only change to the roster is the addition of an ND credential for naturopathic physicians).

**Changes to BCBSVT Provider Manual and Attribution Process**

Pam Biron reported that a new Blueprint-specific section has been added to the BCBSVT Provider Manual. She demonstrated how to access the manual from the BCBSVT website.

Pam also proposed a change to the BCBSVT attribution process, effective 7/1/2013. PPPM payments and attribution would still occur monthly. New practices would receive attribution reports monthly for the first 3 months, and then would start receiving attribution reports quarterly. Existing practices would receive the reports quarterly. The quarterly attribution reports would consist of one file with all three months in the file.

There was extensive discussion about the proposal – Dana noted that the Bennington practice had weighed in on quarterly attribution reports with mixed responses; Wendy indicated that some practices have been using the reports to reconcile with payments and the practice rosters. The reaction was generally favorable to BCBSVT's proposal. Pam indicated that BCBSVT would provide 30 days' advance notice to practices in the form of a news flash on their provider portal. The provider manual would be updated, and an e-mail and/or letter might be sent to practice. The project managers asked to be copied on BCBSVT communications with practices.