

Provider Notice

To: CABHC Providers
From: PerformCare
Date: October 20, 2021
Subject: Alternative Payment Arrangement Update

The CABHC/PerformCare Ambulatory Services APA went into effect March 2020, and is now set to expire on 12/31/2021.

- CABHC and PerformCare are ending the Ambulatory APA on 12/31/2021.
- CABHC and PerformCare are hereby providing the required notice to providers at least 45 days prior to the end of the current APA communicated on August 16, 2021 which was through 12/31/2021.
- **The final APA payment for the month of December 2021 will be made by January 21, 2022.**
- Claims for dates of service on or after January 1, 2022 will be paid via traditional claims payment methods.
- CABHC and PerformCare will continue to monitor provider service delivery levels.
- Providers who anticipate a financial hardship as a result of terminating the APA may request an extension using the instructions provided below. Provider requests for an extension must be received no later than December 1, 2021.

The CABHC/PerformCare Substance Use (SU) Facility APA went into effect March 1, 2020, and is now set to expire 12/31/2021.

- The SU Facility Gap payment APA for eligible providers was terminated effective 6/30/2021.
- The SU Facility APA 10% rate increase above the provider's approved rate, effective 3/1/2020 will expire on 12/31/2021.
- CABHC and PerformCare are hereby providing the required notice to providers at least 45 days prior to the end of the current APA communicated on August 16, 2021 which was through 12/31/2021.
- SU facility claims for dates of service on or after January 1, 2022 will be paid at the approved rate and without the 10% add on.
- SU facilities are not eligible to request an extension of the APA.

CABHC Ambulatory APA Extension Request

If a provider determines they are unable to continue operations when the APA ends and the payment system returns to fee for service funding, the provider can request an extension of the APA using the following procedures:

1. The Extension Request must be service specific and a separate request must be submitted for each service for which the provider is requesting an APA Extension.
2. The request must be submitted in writing to the provider's Account Executive.

3. The request must clearly state the justification for the APA extension request for that service and the amount requested for the monthly APA. Provide all relevant data/factors that supports the Extension Request.
4. The request must include a plan that identifies what steps the provider will take to sustain operations after the APA extension ends. This includes all activities that are or will be taken and the time line to complete the action plan.
5. The provider must submit a financial statement for the past 12 months that shows ALL revenue and ALL expenditures for the service being requested for the Extension. This report must include an attestation of the accuracy of this statement signed by the CEO/Executive Director and CFO or equivalent positions.
6. Extensions will be considered for approval by PerformCare and CABHC for a 3-month extension. Additional extensions may be considered based on the submitted plan and time line. Claims and encounter trending, efforts to engage consumers, financial position, and the submitted plan will be taken into consideration for each request.
7. Extension requests must be submitted to the AE no later than 12/01/21 and decisions will be communicated to Providers by 12/15/21.
8. During the APA extension period, claims that are submitted that exceed the monthly APA amount will be paid.

cc: Lisa Hanzel, PerformCare
Scott Suhring, Capital Area Behavioral Health Collaborative
PerformCare Account Executives