

New York State Department of Health

FQHC MCVR Submission Guide

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FQHC MCVR tool

The Web-based Federally Qualified Health Center (FQHC) Managed Care Visit and Revenue (MCVR) Tool (Tool) is the primary point for FQHC MCVR submission and audit information. This section offers detailed guidance for getting started in the Tool.

Logging into the FQHC MCVR tool

Primary contacts of FQHCs with MCVRs that are under audit for calendar year 2018 can use their current credentials to access the Tool. Any FQHCs that are not subject to the 2018 MCVR audit will need to reach out to the KPMG mailbox (<u>us-nyoadvfqhcmcvr@KPMG.com</u>) and provide the name and email address for a Primary Contact. Within one week of receiving the Primary Contact's information, KPMG will provide login credentials to the FQHC MCVR tool.

If you have any difficulty with the log-in process after receiving the log-in details, please contact the KPMG mailbox.

Please use the following link to access the FQHC MCVR Tool:

https://desoto.certisphere.com/doh/FQHC2020/

Using the tool

Upon logging into the Tool, you will arrive at the **2020 MCVR** tab. We recommend you visit and review the **Instructions tab** as this page includes guidance about the MCVR, submission deadline, and how to utilize the Tool. On the top of the screen, you will find a link to a recorded informational webinar on how to use the Tool.

Tool tabs

The Tool includes two tabs which will be used throughout the data entry process. The following image is a screenshot from the Tool which displays the tabs described in this section:



2020 MCVR

1. Instructions tab

Contains detailed instructions of the data entry process and using the Tool, as well as a link to the MCVR tool walkthrough.

2. 2020 MCVR tab

Contains the key MCVR inputs that need to be completed by each FQHC before submitting to the Department of Health. The specific inputs include:

Paid Visits and Revenue with Contracted Plans

This table will document the FQHC's paid visits and payments to be reported in the MCVR. FQHCs are expected to enter the amount of paid visits and payments by Managed Care Organizations (MCOs)/Independent Practice Associations (IPAs) for the year. The **MCO Name** column contains a drop-down with pre-populated MCO names. If you are unable to find an MCO, please contact our FQHC MCVR mailbox.

Unpaid Visits with Plans

This table will document the FQHC's unpaid visits to be reported in the MCVR. FQHCs are expected to enter the amount of unpaid visits by MCO/IPA for the year. For simplicity, columns for payments received are blocked.

Note: If you are reporting payments and visits reported for:

- Fidelis please utilize "New York Quality Health Care Corporation" in the drop down.
- Emblem please utilize "Health Insurance Plan of Greater New York, Inc."

If you are reporting payments and visits reported for the following IPAs:

- Beacon Health Strategies
- Dentaquest
- HealthPlex
- Optum
- Healthcare Partners
- Liberty

Please enter a "blank" MCO name in the drop down and enter the associated IPA name in the "IPA Name" column of the report.

Fee-for-Service (FFS) Rate Calculation Box

FQHCs are expected to enter the total visits applicable to the 4011, 4012 and 4013 rate codes.

Attestation of MCVR Submission

Once all the information has been reported, the FQHC's CEO/CFO is required to provide a signature to submit the report.

Note: After the report is submitted, you will not be able to adjust the data. If an update is required after submitting, please contact us at the FQHC MCVR Mailbox.

Validation of Submitted Data by DOH

The information contained in the FQHC MCVR reports may be validated by the DOH using one or more data sources. These sources may include the supplemental claims billed by FQHCs to NYS for the period, MCO encounter data showing paid FQHC visits, MCO Medicaid Managed Care Operating Reports (MMCORs) which list contracted FQHCs and paid visits, or any other data sources available to the DOH.

The DOH may choose to accept the MCVR report as submitted, based on the attestation of data accuracy signed by the FQHCs CEO. The MCVR report and as well as other aspects of the program are subject to future audit by the Office of the Medicaid Inspector General (OMIG), NYS Office of the Attorney General or any other authorized body. If however, the information on MCVR reports is so inadequate that a supplemental rate cannot be established, the FQHC may be deemed ineligible for the time period in question.

The language cited above from the Supplemental Payment Program policy guidelines, as well as other related language, can be found via the following link: https://www.health.ny.gov/health_care/medicaid/rates/fghc/fghc_policy_document.htm

Questions

As previously communicated, KPMG has set up a FQHC MCVR Mailbox where questions can be sent regarding the MCVR Tool process. Please send any related questions to the FQHC MCVR Mailbox at <u>nyoadvfqhcmcvr@KPMG.com</u>.

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