

Restricted Recipient Program

Frequently Asked Questions From Providers



Background:

Historically, the New York Office of the Medicaid Inspector General (OMIG) administered a program that implemented set criteria that were used to determine a pattern of misuse or abuse of services covered under the Medicaid Program. This program, known as the Restricted Recipient Program (RRP), has been rolled into the Medicaid Managed Care benefit package, and requires Medicaid Managed Care plans, including HIV SNPs, to continue the effort in identifying such areas of concern by executing their own Restricted Recipient Program.

Amida Care has now moved forward with implementing its Restricted Recipient Program (RRP). Restrictions could apply, but are not limited to, provider types such as: primary care physicians, outpatient clinic services, hospitals, pharmacies, and dentists. Once implemented, the restriction follows the member, regardless of a member's plan participation.

What are the changes to the Restricted Recipient Program (RRP)?

NYS DOH and OMIG have asked Managed Care Organizations to administer restrictions for enrolled members who demonstrate a pattern for misusing or abusing the Medicaid Program. Amida Care will assume responsibility for reviewing and restricting, when warranted, pharmacy and other primary care services, and OMIG RRP will continue to administer the restriction of plan carved out services.

What is Amida Care's role in the RRP?

Amida Care will continually review and monitor monthly claims data to identify emerging trends in duplicative, excessive, contraindicated or conflicting drugs, healthcare services, or supplies and abusive practices. A current profile for all restricted recipients will be compiled and maintained.

What is the purpose of having a RRP?

The purpose of a RRP is to provide restricted enrollees with tightly managed medical and psychosocial services. It is an aid for the local provider team to ensure a member's utilization of services is appropriate and not duplicative or excessive.

Why is the NPI number important and what if I am a specialist?

Amida Care requires that the NPI number of the member's Primary Care Provider be listed on all specialist claim submissions for services rendered to a Restricted Recipient. This can be obtained from the Primary Care Provider by requesting a script from the Primary Care Provider's office. Failure to indicate this information on the claim could result in a denial of payment. Specialist should indicate the primary care provider's NPI number in the appropriate field on the claim form to endure appropriate adjudication.

How long is an enrollee restricted?

Restrictions can vary. There are three restriction periods based on OMIG:

1. Initial restriction- 2 years
2. Re-restriction (2nd restriction)- 3 years
3. Subsequent restriction (3rd or greater)- 6 years

Initial and additional restriction periods are computed without regard to eligibility. For a member who disenrolls from Amida Care, and subsequently re-enrolls in Amida Care, the restriction will continue until its scheduled expiration date, as if the member did not have a gap in coverage.

What happens if a member transfers to another HIV SNP or MMC Plan?

Restrictions follow members regardless of whether they change their specific plan.

What are examples of behaviors that would warrant an individual to be reviewed for potential restriction(s)?

Examples include, but are not limited to:

- Excessive requests for drugs, supplies, or appliances
- Duplicative health care services
- Duplicative drugs, supplies or appliances
- Contraindicated or conflicting care
- Excessive inpatient hospital services
- Abusive practices

How is a pattern of misuse or abuse determined?

Amida Care is monitoring claims as well as working with physicians to identify patterns of misuse or abuse. When a potential member is identified, Amida Care conducts an investigation. All information collected is reviewed by our Restricted Recipient Committee which is comprised of, at minimum, a physician, a registered professional nurse and a pharmacist. The Committee determines whether there is a pattern of over-utilization, under-utilization or improper utilization of services, and whether the member should be managed under the RRP.

How would I know if an individual is restricted?

In instances where Amida Care is imposing a restriction, a letter will be sent to the primary care provider, restricted provider, and case manager. Information on restricted individuals is also available on ePACES. Amida Care is working on providing electronic communication as well. We will let you know when this is available.

Please be aware that Amida Care allows the member to change a restricted Primary Care Provider (PCP) within 30 days, and every 3 months thereafter without cause. A member can request a change to a restricted non-PCP every 3 months without cause.

How do enrollees know that they are assigned to the Amida Care Restricted Recipient Program (RRP)?

All Amida Care members assigned to the RRP are notified via standard and certified mail. Information includes, but is not limited to, a summary of the specific reason for the restriction(s), any review conducted, evidence of misuse, a determination, their rights to Fair Hearing and appeal, and restricted provider information.

What if I am unable to accept the restricted member?

Providers have the right not to accept a restricted member. Should you no longer want to be a provider for the member, please contact Provider Services by faxing the RRP Provider Change Request Form to 646-738-8610. We will process your request, and notify you when the change has been completed. You will need to assist in transitioning the patient to their new PCP. The RRP Provider Change Request Form is available on our website www.amidacareny.org, under "Links for Providers" or by calling Provider Services at 1-800-556-0674. Please advise your patient to contact Member Services to select another provider.



What are my management responsibilities as a RRP provider?

Amida Care Primary Care Providers (PCP) by contract are expected to manage the healthcare of the RRP members on their panel, including referrals to specialty services and prescriptions. Non-Primary Care Providers are expected to coordinate services with the member's PCP. Amida Care may request data from various providers to support reasons for a member restriction, continuation of restriction or authorization of care.

How do I refer members to the Amida Care Program?

RRP Referral Forms are available at www.amidacareny.org/provider-rrp.htm and can be faxed to the Restricted Recipient Fax Line at 646-738-8610.

Contact Health Services at 646-786-1828 if you would like to discuss specific case(s).

Meet Your Reps!

You can reach your Provider Services Representative at 646-757-7200. Please call us if you have any concerns or to schedule an onsite visit.