Continuation of COVID-19 Alternative Payment Arrangement (APA)

This Bulletin serves as official notice of the continuation of the COVID-19 Alternative Payment Arrangement (APA) through **December 31, 2021.**

Per previously stated in **Bulletin 21-06** (issued June 1, 2021), all providers were required to shift back to a fee-for-service (FFS)/claims-based payment system as of October 1, 2021. CBH is committed to ongoing partnerships with the provider community and continues to work in conjunction with the Department of Behavioral Health & Intellectual disAbility Services (DBHIDS) and the Pennsylvania Department of Human Services (PA DHS) Office of Mental Health and Substance Abuse Services (OMHSAS). These partnerships have resulted in the approval to extend the COVID-19 APA through the end of calendar year 2021 (December 31, 2021) for all providers wishing to continue operating under this funding mechanism.

To note, in order to receive the APA payment, providers must satisfy the following conditions by at least **five business days** before the scheduled payment date:

- 1. Submission of all claims for dates of service ending the last day of the month prior to the APA payment month (see table below) ¹
- 2. Submission of monthly expense reports to CBH.ExpenseReportSubmission@Phila.Gov²

Additionally, it is expected that providers utilize APA funds to increase staff retention, promote staff recruitment, invest in technology to support telehealth requirements, and other enhancements needed to increase and support member access.

The payment dates are as follows:

Please complete and send in an Excel format.

¹ Not including those claims that require Third Party Liability (TPL) coordination

² The template that is required for expense report submission can be found here: <u>https://cbhphilly.org/wp-content/uploads/2020/04/CBH_Provider-Bulletin_20-</u> 08 APA Expense Tracking 2020-04-02.xlsx

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Service Month	Payment Date	
October 2021	November 17, 2021	
November 2021	December 15, 2021	
December 2021	January 19, 2022	

If a provider does not satisfy the requirements within the above timeframe, they will still be eligible to receive the payment once the requirements are met; payments will be made in the next identified payment date.

Providers who are currently not on the APA, or providers who wish to shift to FFS, are able to request their preferred payment mechanism by completing <u>this form</u> by **September 15, 2021.** The payment mechanism (FFS or APA) that is in place on September 1, 2021 will continue through December 31, 2021, unless requested otherwise. Changes will be **effective October 1, 2021.** As was the case with previous COVID-19 APA iterations, providers who have both community-based and bed-based levels of care can select one of these payment mechanisms (FFS or APA) for their community-based portfolio and one for their bed-based portfolio. However, providers cannot make program specific payment designations.

<u>No action is required at this time for providers who wish to continue their funding</u> mechanism as-is.

Thank you for your partnership during this challenging time. If you have any questions, please reach out to your designated Provider Relations Representative.