

# Directed Payment Programs

## Frequently Asked Questions (FAQ)



Superior HealthPlan's Directed Payment Programs (DPP) reimburse providers for certain services by utilizing the following payers:

- Comprehensive Hospital Increase Reimbursement Program (CHIRP)
- Texas Incentives for Physicians and Professional Services (TIPPS)
- Rural Access to Primary and Preventive Services (RAPPS)

Please review the Frequently Asked Questions (FAQs) outlined below.

### Comprehensive Hospital Increase Reimbursement Program (CHIRP)

#### What is CHIRP?

Effective September 1, 2021, the Comprehensive Hospital Increase Reimbursement Program (CHIRP) replaced the Uniform Hospital Rate Increase Program (UHRIP). CHIRP provides increased payments to hospitals for inpatient and outpatient services to members enrolled in the Superior HealthPlan Medicaid (STAR and STAR+PLUS) programs.

#### Who is eligible for CHIRP?

Children's hospitals, rural hospitals, state-owned hospitals that are not Institutions for Mental Diseases (IMDs), urban hospitals, non-state-owned IMDs and state-owned IMDs.

#### How will CHIRP funds be paid?

Funds will be paid through two components of the managed care capitation rates:

- **Component 1:** The UHRIP component provides a uniform rate increase payment that is based on a percentage of the Medicare gap.
- **Component 2:** The Average Commercial Incentive Award (ACIA) component is an optional component. It provides a uniform rate increase payment that is based on a percentage of the Average Commercial Reimbursement (ACR) gap less payments received under the UHRIP component. ACIA payments are capped at 90% of the total estimated ACR for the hospital class.

### Texas Incentives for Physicians and Professional Services (TIPPS)

#### What is TIPPS?

The Texas Incentives for Physicians and Professional Services (TIPPS) program provides increased payments to certain physician groups providing health care services to members enrolled in the Superior HealthPlan Medicaid (STAR, STAR Kids and STAR+PLUS) programs.

#### Which providers are eligible for TIPPS?

Health-related institution physician groups, physician groups affiliated with hospitals that receive indirect medical education funds and other physician groups.

#### How will TIPP funds be paid?

TIPPS funds are paid through three components of the managed care capitation rates:

- **Component 1:** Is equal to 65% of the total program value and provides a uniform dollar increase paid monthly. Only health-related institutions and indirect medical education physician groups are eligible.

- **Component 2:** Is equal to 25% of the total program value and provides a uniform rate increase paid semi-annually. Only health-related institutions and indirect medical education physician groups are eligible.
- **Component 3:** Is equal to 10% of the total program value and provides a uniform rate increase for applicable outpatient services and is paid at the time of claim adjudication. All participating physician groups are eligible.

## Rural Access to Primary and Preventive Services (RAPPS)

### What is RAPPS?

The Rural Access to Primary and Preventive Services (RAPPS) program provides increased payments to Rural Health Clinics (RHCs) that provide primary care and Long-Term Services and Supports (LTSS) to members in rural areas of the state enrolled Superior HealthPlan Medicaid (STAR, STAR Kids and STAR+PLUS) programs.

### Who is eligible for RAPPS?

Hospital-based RHCs, which include non-state government-owned and private RHCs and free-standing RHCs.

### How will RAPPS funds be paid?

RAPPS funds are paid through two components of the managed care capitation rate:

- **Component 1:** Is equal to 75% of the total program value and provides a uniform dollar increase paid monthly that is based on RHC class.
- **Component 2:** Is equal to 25% of the total program value and provides a uniform rate increase on applicable services.

## Additional Payment Questions

### When will payments begin for previous months and current business?

For TIPPS/RAPPS, payments began for new claims in May 2022 and adjustments of previously paid claims should also begin at that time. For CHIRPS, payment began for new claims in June and reprocessing of previously paid claims to begin shortly after that.

### How will payments be retroactively processed?

Superior will reprocess the original payment and re-pay the corrected amount.

### Will there be a specific remit code for these payments?

Yes, see remit codes below:

- CHIRP payments can be identified for medical claims with EXcx and for behavioral health claims with EXcX.
- RAPP payments can be identified with EXrP.
- TIPPS payments can be identified with EXdP.

### If not paid timely or correctly, will penalty/interest be applied?

No, Superior does not pay penalties or interest on pass through payments.

### Do we have the payment rates?

- For CHIRP, providers may reference the HHS webpage: [Comprehensive Hospital Increase Reimbursement Program | Provider Finance Department](#).
- For TIPPS, providers may reference the HHS webpage: [Texas Incentives for Physicians and Professional Services](#).
- For RAPPS, providers may reference the HHS webpage here: [Rural Access to Primary and Preventive Services](#).

**When will the claim payment system be set up to re-pay providers?**

Superior started applying CHIRP to claims in June.

**Will the CHIRP program require a Letter of Offer and Acceptance (LOA) and amendment like UHRIP?**

Yes. There will be both LOAs and amendments to existing UHRIP LOAs that will be going out to those who are part of the CHIRP program. There will be no contractual action extended for any other-directed payment program.

**When will amendments be initiated and when will they need to be completed by?**

Outreach to providers began in May.

**When did Superior begin making CHIRP payments to the hospitals?**

Superior implemented a process to apply CHIRP to applicable claims received on and after June 1, 2022.

**By what mechanism (i.e. retroactive claims adjustment, lump-sum, or other) will Superior make CHIRP payments to hospitals?**

Superior began adjudicating previously paid claims to incorporate CHIRP at the end of May. Though we explored the feasibility of retroactive lump-sum payments to further expedite payment to the hospitals, we do not believe retroactive lump-sums are practical given Superior's IT systems and Texas Health and Human Services (HHS) requirements.

**Will providers have to analyze what they are receiving based on individual service rates to see if they are being paid the updated rate or retro payments?**

Yes. Providers will have to analyze the reimbursement rates based on service lines processed with the EX codes identified below.

**Will there be an identifier on claim so that we can track and differentiate the funding from contract rate, timing, etc.?**

Yes. See remit codes that can be utilized as an identifier below:

- CHIRP payments can be identified for medical claims with EXcx and for Behavioral Health claims with EXcX.
- RAPP payments can be identified with EXrP.
- TIPPS payments can be identified with EXdP.

**Will the new Exclamation of Payment (EOP) match the original EOP?**

No. Superior only reprocesses service lines on the claim where the DPP was expected to apply instead of adjusting the entire claim.

**For hospitals, will the payment be a lump sum paid via Electronic Funds Transfer (EFT) to the individual hospital's lock box?**

The providers will receive applicable CHIRP payments included in with their final payment amounts for those services rendered.

**Is there a breakdown of the UHRIP and ACIA payments?**

The UHRIP and ACIA payments have been combined. To determine their individual UHRIP and ACIA rates, providers can refer to the [HHS Uniform Managed Care Terms & Conditions \(UMCC\)](#).

**Who can I reach out to with questions?**

For questions, please [Contact Your Local Account Manager](#).