



Nathan Deal, Governor

Frank W. Berry, Commissioner

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2 Peachtree Street, NW | Atlanta, GA 30303-3159 | 404-656-4507 | www.dch.georgia.gov

**MEMORANDUM**

Date: January 25, 2018

To: Public Teaching Hospitals

From: John Upchurch  
Director, Reimbursement Services  
Division of Financial Management

Subject: Expansion of the Medicaid Physician UPL Supplemental Payment Program  
**(Action required for participation)**

The purpose of this memorandum is to announce an opportunity for physician practices affiliated with public teaching hospitals in Georgia to continue or begin participation in the Medicaid Physician Upper Payment Limit (UPL) Supplemental Payment program.

The Department is seeking approval from the federal Centers for Medicare and Medicaid Services (CMS) to expand the Physician UPL program to include the following:

- (1) All physician practices affiliated with a public teaching hospital enrolled in Georgia Medicaid.
  - A “teaching hospital” is defined as a hospital associated with an accredited medical school that offers clinical and other facilities to those studying to become physicians.
  - An “accredited medical school” is defined as a medical school accredited by the Liaison Committee on Medical Education (LCME) or the Commission on Osteopathic College Accreditation.
- (2) Medicaid-eligible services provided by eligible physicians and mid-level providers.
  - “Eligible mid-level providers” is defined as Advanced Registered Nurse Practitioners (ARNPs), Certified Registered Nurse Anesthetists (CRNAs), Physician Assistants, Certified Nurse Midwives (CNMs), Clinical Social Workers (CSWs), Clinical Psychologists, and Optometrists.

Participation in the Physician UPL Supplemental Payment program is voluntary and will continue to be dependent upon the physician practice securing a commitment from a hospital authority, or other government body, to make an intergovernmental transfer (IGT) of funds to DCH to finance the state share of the supplemental payment.



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Upon CMS approval, the expansion will be effective retroactively to July 1, 2016. **Please note that physicians and mid-level providers receiving supplemental UPL payments will not be eligible for the higher Medicaid fee schedule paid to attested primary care physicians.**

**Required submissions**

1. The attached attestation statements must be completed and submitted to DCH by **February 19, 2018**:

- Affiliated Public Teaching Hospital Attestation Statement
- Physician Practice Attestation Statement(s) – please submit a separate attestation statement for each participating physician group
- Physician Upper Payment Limit Letter of Agreement – to be completed by the government entity providing the intergovernmental transfer

Completed and signed attestation statements should be scanned and submitted to Annetta Smith via email at [asmith@dch.ga.gov](mailto:asmith@dch.ga.gov).

2. The attached Excel templates must be completed and submitted to DCH by **February 26, 2018**:

- Roster of participating physicians and mid-level providers for each participating physician group for state fiscal year 2017 (July 1, 2016-June 30, 2017). Include name, title and tax ID number for each physician and mid-level providers.
- Fee Schedule rates for the participating physician group's five (5) largest commercial payers for state fiscal year 2017 (July 1, 2016-June 30, 2017).

Completed templates should be submitted as Excel files to Annetta Smith via email at [asmith@dch.ga.gov](mailto:asmith@dch.ga.gov).

Physician practices that do not submit the requested information by the above due dates will not be eligible to participate in the SFY 2017 Physician UPL program. Please contact Annetta Smith at 404-463-6669 if you have any questions or would like to schedule a conference call with the Department to discuss the requirements



**GEORGIA DEPARTMENT  
OF COMMUNITY HEALTH**