HealthChoices Rate Setting Policies

Community Care publishes base fee schedules for each HealthChoices network and individually negotiates rates with providers for residential services and some specialized services. In order to formalize the process and develop parameters around the rate setting process, Community Care, in conjunction with our County Partners and OMHSAS, developed policies related to rate setting based upon the program year for each network.

Attached, please find the three (3) Policies and Procedures for Provider Rate Setting: (i) Allegheny, Berks, York-Adams; (ii) Chester, North Central, Carbon-Monroe-Pike; (iii) Northeast Behavioral Health Care Consortium, Inc. (North East Counties). The program year is January through December for the Allegheny and Chester networks and July through June for all others.

For those networks with a program year beginning in July, providers must submit requests to Community Care no later than March 1 of each year to be considered for a July 1st implementation. Requests received after March 1 will be held for consideration until the next annual rate consideration period.

For the Allegheny and Chester networks, whose program year commences January 1, and whose rate setting policies require submission of documentation and rate requests from providers no later than September 1st each year, Community Care and its County Partners have determined that providers may submit requests between now and September 1, 2010 as follows:

- Drug and Alcohol Providers whose rates are set by Single County Authorities may submit rate requests to Community Care on or before March 1, 2010 for consideration for a July 1, 2010 effective date
- Other providers who receive an approved rate from the Office of Medical Assistance Programs between now and September 1, 2010 may submit these requests to Community Care for consideration in advance of the program year commencing January 1, 2011
- After September 1, 2010, the policy will be in place as written, which means that rate requests will be due to Community Care once per year prior to September 1 each year

After following this process, all rate increase requests will ultimately be determined through county/Community Care review of requests against the current budget/capitation environment.

Please note that you may be contracted for more than one network for which different policies apply. Please make sure that you follow the submission guidelines for each network for which you are requesting a rate request.

If you have any questions, please contact your Provider Relations Representative.