

## APG Rate Code Matrix as of September 1, 2009

SETTING	SERVICE	Old Rate Code (note 1)	APG Rate Code (note 2)	Visit or Episode Based Payment (note 3)	Blend or No Blend (note 4)	Effective Date (note 5)	Medicaid Maximization for Dual Eligibles (note 6)
HOSPITAL	OPD	2870	1400	Visit	Blend	12/01/08	
HOSPITAL	AMBULATORY SURGERY	3089/3090	1401	Visit	No Blend	12/01/08	
HOSPITAL	EMERGENCY DEPARTMENT	2879	1402	Episode	No Blend	01/01/09	
DTC	GENERAL CLINIC	1610	1407	Visit	Blend	09/01/09	Yes
DTC	SURGERY	1804/1805	1408	Visit	Blend	09/01/09	
HOSPITAL	OPD - OUT OF STATE	2870	1413	Visit	Blend	07/01/09	
HOSPITAL	SURGERY - OUT OF STATE	2887	1416	Visit	No Blend	07/01/09	
HOSPITAL	ED - OUT OF STATE	2879	1419	Episode	No Blend	07/01/09	
DTC	GENERAL CLINIC - EPISODE PAYMENT	1610	1422	Episode	Blend	09/01/09	Yes
DTC	GENERAL CLINIC MR/DD/TBI - EPISODE PAYMENT (note 7)	1610	1425	Episode	Blend	09/01/09	Yes
DTC	DENTAL SCHOOLS	1610/1620	1428	Visit	Blend	09/01/09	Yes
HOSPITAL	OPD - EPISODE PAYMENT	2870	1432	Episode	Blend	07/01/09	
DTC	GENERAL CLINIC MR/DD/TBI (note 7)	1610	1435	Visit	Blend	09/01/09	Yes
DTC	RENAL CLINIC (note 8)	1641-1643	1438	Visit	Blend	09/01/09	
HOSPITAL	OPD - OUT OF STATE - EPISODE PAYMENT	2870	1441	Episode	Blend	10/01/09	
HOSPITAL	SCHOOL BASED HEALTH PROJECT	2888/2889	1444	Visit	Blend	04/01/09	
DTC	SCHOOL BASED HEALTH PROJECT	1627/1628	1447	Visit	Blend	09/01/09	
HOSPITAL	SCHOOL BASED HEALTH PROJECT - EPISODE	2888/2889	1450	Episode	Blend	10/01/09	
DTC	SCHOOL BASED HEALTH PROJECT - EPISODE	1628/1629	1453	Episode	Blend	10/01/09	
DTC	RENAL CLINIC - EPISODE (note 8)	1641-1643	1456	Episode	Blend	10/01/09	
DTC	DENTAL SCHOOL - EPISODE	1610/1620	1459	Episode	Blend	10/01/09	Yes
HOSPITAL	CLINIC - MR/DD/TBI PATIENT - EPISODE PAYMENT	2870	1489	Episode	Blend	01/01/10	

Note 1: Many other rates codes are also subsumed within (made obsolete by) APG payment. For the complete list see:

[http://www.health.state.ny.us/health\\_care/medicaid/rates/apg/docs/outpatient\\_rate\\_codes.pdf](http://www.health.state.ny.us/health_care/medicaid/rates/apg/docs/outpatient_rate_codes.pdf)

[http://www.health.state.ny.us/health\\_care/medicaid/rates/apg/docs/apg\\_dtc\\_rate\\_codes.pdf](http://www.health.state.ny.us/health_care/medicaid/rates/apg/docs/apg_dtc_rate_codes.pdf)

Note 2: These are the rate codes used for APG billing. Other APG rate codes exist for blend payments and capital add-ons, but those are for internal eMedNY use only.

Note 3: See discussion of episode payment in the APG provider manual at: [http://www.health.state.ny.us/health\\_care/medicaid/rates/apg/docs/apg\\_provider\\_manual](http://www.health.state.ny.us/health_care/medicaid/rates/apg/docs/apg_provider_manual)

Note 4: Blended rate codes are subject to a blend with provider-specific year 2007 payment levels through December 31, 2011.

Note 5: All DTC effective dates are tentative. eMedNY will issue the new rates and their actual effective dates upon Federal approval of the controlling State Plan Amendment.

Note 6: The Medicaid co-payment for Medicare eligibles billed under these rate codes will be made up to the Medicaid amount calculated under APGs.

Note 7: These MR/DD/TBI rate codes are assigned only to providers that already have rate codes 1407 and 1422 (DTC General Clinics).

Note 8: These renal clinic rate codes are assigned to providers in the old Peer Group 80: Statewide Dialysis, or new dialysis centers.