

# Rules Regarding Physician Incentive Plan

The CCN Physician Incentive Plan (herein referred to as Plan) must be approved by the State and any payments under the Plan must result in the provision of medically necessary care provided in accordance with the terms of the Contract with the Department and ensure:

- (1) Services are offered in an amount, duration and scope that is no less than that furnished to beneficiaries under fee-for-service Medicaid;
- (2) Services are offered in sufficient amount, duration, and scope to reasonably be expected to achieve the purpose for which the services are furnished;
- (3) Providers under a Plan do not arbitrarily deny or reduce the amount, duration, or scope of a required service solely because of the diagnosis, type of illness, or condition;
- (4) Authorization of services is consistent with the DHH definition for medical necessity;  
and
- (5) Plan is structured so as *not* to provide incentives for the provider to deny, limit or discontinue medically necessary services to any enrollee.