

including in the definition of “primary care physician” in § 425.20 as well as in §§ 425.102 and 425.304 and throughout 42 CFR part 425, subpart E – have been interpreted to refer to “rural health clinic” or “rural health clinics” as defined at § 405.2401(b). Further, we propose to revise the definition of rural health center in § 425.20 to specify that the referenced provision at § 405.2401(b) is within Title 42, Chapter IV of the Code of Federal Regulations. We seek comments on these proposed technical changes.

c. Definition of At-Risk Beneficiary

In the November 2011 final rule (see 76 FR 67974), we established the definition of “At-risk beneficiary” at § 425.20, the meaning of which includes, but is not limited to, a beneficiary who –

- Has a high risk score on the CMS-HCC risk adjustment model;
- Is considered high cost due to having two or more hospitalizations or emergency room

visits each year;

- Is dually eligible for Medicare and Medicaid;
- Has a high utilization pattern;
- Has one or more chronic conditions;
- Has had a recent diagnosis that is expected to result in increased cost;
- Is entitled to Medicaid because of disability; or
- Is diagnosed with a mental health or substance abuse disorder.

In finalizing modifications to the proposed definition of at-risk beneficiary, we explained that we agreed with commenters that our proposed definition should be expanded to include patients who are entitled to **Medicare** (emphasis added) because of disability (see 76 FR 67950). However, in codifying the relevant regulation text at § 425.20, we inadvertently referred to patients who are entitled to **Medicaid** because of disability (emphasis added). We note that an

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