

## Reimbursement for telehealth is changing frequently.

### **Billing departments must stay up to date with reimbursement changes.**

Some insurance payers have ended their payment parity. Some state Medicaid plans have carved out certain telehealth services, like Virtual Communication Services and e-Visits and do not reimburse at an encounter rate, specifically for RHCs and FQHCs.

### **First, determine the type of telehealth service that is being provided to determine appropriate reimbursement.**

- Telehealth
- Mental Health & SUD via Telecommunications (Medicare)
- Telephone E/M
- Virtual Communication Services/CTBS

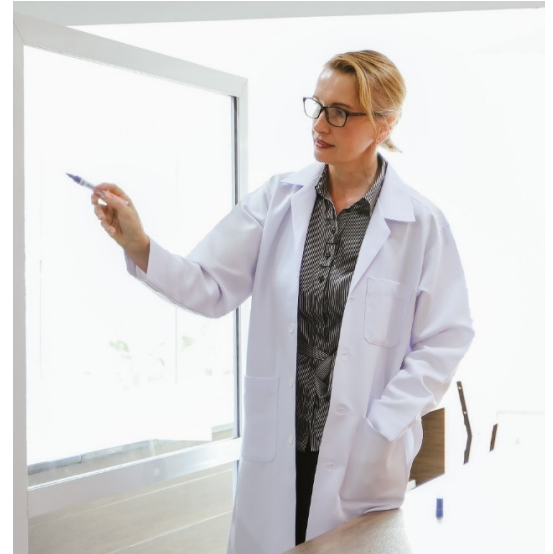
## **NAVIGATING MEDICAID**

Many states have added FQHC Telehealth Services to their Medicaid State Plan.

- Review state policy (many states have already made permanent changes)
- Health Services Covered
- Eligible Providers
- Licensing (cross state)
- New patients allowed
- Covered CPT codes
- Type of Reimbursement (hospital/FFS/facility or both)

## **KEY QUESTIONS FOR PRIVATE PAYERS**

- What CPT and HCPC codes can be delivered via telehealth?
- Are there any restrictions on the location of the patient or provider?
- What modifiers do we need?
- What is the correct place of service code (POS)?
- Which providers are eligible?



## **Teaching Physicians**

Beginning in 2022, CMS has made a technical clarification to provide that when teaching physicians bill their time as an office/outpatient evaluation and management (E/M) visit that involves the oversight of residents, Medicare payment can be made to teaching physicians. However, this payment to teaching physicians under the MPFS includes only the total time that the physician is present during such a visit, not the resident's time.

For primary care services, CMS finalized a proposed policy to allow selection of medical decision making (MDM) as the sole E/M visit level indicator for office/outpatient E/M visits and the total time.

*For commercial payers, telehealth coverage and payment continue to evolve. For more information, check with your state provider board or association, or see the [2022 Telehealth Coverage and Billing By Payer](#)*

## NAVIGATING MEDICARE

### Medicare Telehealth Reimbursement

- Defining Originating and Distant Site
  - During the public health emergency (PHE), FQHCs may be reimbursed for telehealth services as a distant site provider, and also via telecommunications for mental health and substance use disorder services
  - Post-PHE, FQHCs are reimbursed as a distant site provider for mental health and substance use disorder services delivered via telecommunication only, pending permanent policy change
- The patient must be in a HPSA (Health Professional Shortage Area (waived during PHE)
- Only services listed under PPS G0469 & G0470 will be reimbursed if performed via telecommunications. See [MLN Matters](#) for more. FQHCs will receive their full PPS rate reimbursement for these services:
  - G0469 - FQHC visit, mental health, new patient (reported with revenue codes 0900)
  - G0470 - FQHC visit, mental health, established patient (reported with revenue codes 0900)
  - Each specific payment code listed above must be submitted with a qualifying visit code on a separate line.  
For a list of qualifying visits under G0469 & G0470, refer to the [FQHC-PPS Specific Payment Codes](#)
- FQHC Reimbursement for Telehealth Originating Site Fee Q3014 for 2022 is \$27.59

### Medicare Telehealth Reimbursement During the Public Health Emergency

- All Telehealth services are billed and reimbursed with the new FQHC/RHC specific G code for distant site telehealth services, G2025. Effective January 1, 2022, the reimbursement for G2025 is \$97.24. FQHCs may provide any services listed in the 2022 Physician Fee Schedule (PFS) working within their scope of practice. For a list of these services: [List of Telehealth Services 2022](#)
- Note that during the PHE, all FQHC and non-FQHC services, such as Telephonic E/M codes will be reimbursed under the G2025 payment code. This includes any service listed in 2022 Physician Fee Schedule for allowable Telehealth Services
- Expansion of Virtual Communication Services (VCS) to include Online Digital E/M using a secure portal. The digital assessment codes that are billable during the PHE are CPT codes 99421-99443. To receive reimbursement for all VCS services, you must submit the G0071 payment rate code. Reimbursement for 2022 for G0071 is \$23.88.



## TIP FROM CHRISTINA

During the Public Health Emergency (PHE), FQHCs receive reimbursement for all non-FQHC services listed in the 2022 Physician Fee Schedule, and are reimbursed with a G2025. This includes Telephone E/M visits (CPT codes 99441-99443). Billing the G2025 instead of the Virtual Communication Services G0071 payment code will result in a higher reimbursement (\$97.24 vs \$23.88).