FQHC Reimbursement for Telemedicine (Physician Delivered) and Telehealth (Non-Physician-Delivered) Services

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Note: Texas Medicaid managed care organizations (MCOs) must provide all medically necessary, Medicaid-covered services to eligible clients.

Administrative procedures such as prior authorization, pre-certification, referrals, and claims/encounter data filing may differ from traditional Medicaid (fee-for-service) and from MCO to MCO. Providers should contact the client's specific MCO for details.

To help ensure continuity of care during the COVID-19 (coronavirus) response, HHSC will begin reimbursing Federally Qualified Health Centers (FQHCs) as telemedicine (physician-delivered) and telehealth (non-physician-delivered) service distant site providers effective immediately.

FQHCs can continue to bill for telemedicine services rendered by affiliates, although an affiliate agreement is not required for an FQHC to be reimbursed as a telemedicine or telehealth distant site provider. FQHCs should bill for telemedicine or telehealth services using the encounter and informational procedure codes outlined in the *Texas Medicaid Provider Procedures Manual*, *Clinic and Other Outpatient Facility Services Handbook*, *Section 4.1.2*.

To indicate that remote delivery occurred, FQHCs should use the 95 modifier when submitting claims and encounters. The telemedicine or telehealth service must also meet applicable state statutory and rule scope-of-practice requirements.

Providers can refer to the *Texas Medicaid Provider Procedures Manual*, *Telecommunication Services Handbook* and the *Clinic and Other Outpatient Facility Services Handbook* for additional information about the Texas Medicaid telemedicine, telehealth, and FQHC service benefits.

For more information, call the TMHP Contact Center at 800-925-9126.