

PROVIDER BULLETIN

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Telehealth: Originating Site Reimbursement for Rural Health Clinics & Federally Qualified Health Centers

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- **Billing and Reimbursement for Telehealth Procedure Code Q3014 Rate Update**

As stated in the Telehealth [bulletin](#), Volume 39, Number 28, dated November 9, 2016, RHCs and FQHCs are eligible to receive reimbursement for a facility fee for Telehealth services when operating as the originating site. Claims must be submitted with HCPCs code **Q3014** (Telehealth originating site facility fee).

For dates of service on or after July 1, 2017, the originating site reimbursement rate is decreased by 3% due to reductions included in the Fiscal Year 2018 budget.

The MO HealthNet Division (MHD) will reimburse the lower of the provider's billed charge or the maximum allowable amount for the date of service billed. Providers may not bill the MHD at a higher rate than they charge their private pay patients. Providers must bill the MHD their usual and customary rate.

The MHD will reprocess claims paid for dates of service on or after July 1, 2017. Please check your future remittance advice statements for rate adjustments.

RHCs, both Provider Based and Independent, must continue to bill Telehealth services using their **non-RHC** provider number when operating as an originating site or distant site. Claims which are submitted with the RHC provider number will be denied payment.

Effective for dates of service on or after July 1, 2017, **FQHC providers must bill no more than \$16.49** in order to receive the \$15.17 maximum reimbursement. Claims will be subject to post payment review and those reimbursed more than \$15.17 will be adjusted to recoup the difference.

FQHC providers must leave the Rendering Provider ID field (24j on CMS-1500) blank on their claims when billing the Q3014 originating site facility charge. FQHC providers must also remove charges and payments for Telehealth services from their year-end cost reports.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

Provider Communications Hotline