

02/28/2022

TELEMEDICINE AND TELEHEALTH SERVICES PROVIDED BY RURAL HEALTH CLINICS

Summary of Notification:

Effective for dates of service on or after April 1, 2022, rural health clinic (RHC) providers performing patient-site telemedicine services may be reimbursed for the facility fee (procedure code Q3014) as an add-on procedure code. Distant-site telemedicine and telehealth services provided by RHC providers, as allowed in response to the COVID-19 public health emergency, will also become a permanent benefit of Texas Medicaid when submitted with procedure code T1015.

Key Details:

Effective for dates of service on or after April 1, 2022, rural health clinic (RHC) providers performing patient-site telemedicine services may be reimbursed for the facility fee (procedure code Q3014) as an add-on procedure code.

Procedure code Q3014 will be a benefit for RHC providers when telemedicine services are rendered in the office or outpatient hospital setting.

More than one facility fee for the same client on the same date of service may be reimbursed for multiple distant-site provider consultations, when medically necessary. For the purpose of ensuring medical necessity of additional diagnosis or treatment, MCOs are encouraged to have a process in place to monitor multiple distant site provider consultations for the same client on the same dates of service.

For example, in Medicaid fee-for-service, the policy requires that an RHC must use a signed letter from the client's treating health-care provider at the RHC to document the client's medical need for receiving multiple distant-site provider consultations on the same date of service. The letter must state that the client suffered an illness or injury that required additional diagnosis or treatment by a distant-site provider.

If an RHC is eligible for payment of both an encounter fee and a telemedicine facility fee for the same client on the same date of service, the RHC must submit a claim for the facility fee separate from the claim submitted for the encounter.

MCOs should inform RHCs that the facility fee should not be included in any cost reporting that is used to calculate the RHC All Inclusive Rate (AIR) prospective payment system (PPS) per visit encounter rate.

Distant-site telemedicine and telehealth services provided by RHC providers, as allowed in response to the COVID-19 public health emergency, will become a permanent benefit of Texas Medicaid when submitted with procedure code T1015, effective for dates of service on or after April 1, 2022.

Note: Telemedicine and telehealth services must be billed with modifier 95. Procedure codes that indicate remote delivery (telemedicine medical services or telehealth service) in the description do not need to be billed with modifier 95.