

FQHC, RHC, IHS Provider Telemedicine Training Webinar

8/24/20

STAKEHOLDER QUESTIONS AND ANSWERS

This document contains answers to questions posed by stakeholders in the FQHC, RHC, IHS Provider Telemedicine Training Webinar. Answers provided are reflect information that is current as of November 11, 2020.

1. If the provider is at home delivering telemedicine to our patients, do we use place of service, home?

There is no place of service on a UB.

Hospital care should be billed as professional services on a 1500 and would use the hospital as place of service.

2. Is Medicaid going to start covering the G2025 Medicare code for crossover claims? This is for medical and BH services.

Crossover claims are covered by Medicaid.

3. If we have a telemedicine appointment with the patient on the providers schedule, we call the patient at the appointment time. How does this reconcile with what you indicated that the patient must call the provider?

The patient must initiate the call that is billed for service. You can do a reminder call 5 minutes before the scheduled visit or you can call and remind the patient of a telemedicine visit immediately at the time of their scheduled visit they do not happen to join but the patient will then have to hang up and dial or log into whatever telemedicine modality you are using.

4. For FQHC Telephone only E&M services, are these claims billed with the regular E&M CPT for example 99213 or the 99441-3 and 98966-8 telephone CPTs?

You should bill according to correct coding as to the service provided. If you look at the code description for these procedure codes, you will see that they have slightly different descriptions. The telephone only services are not as complex as the E&M codes. Both are payable as encounters, so whichever service is rendered, that is the service you would bill. Check the code descriptions and use your billing guidance as to which one you would bill.

5. Are both E&M's and Telephone CPTs payable at the same PPS rate?

Both are reimbursable as prospective payments and paid the encounter rate.

6. Do IHS facility professional claims have to be billed with POS 02?

If the doctor is at a hospital delivering an in-person service that is a professional claim, use the place of service hospital.

Most of the IHS claims would be for encounter.