



COLORADO

Department of Health Care
Policy & Financing

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FQHC/RHC Integrated Care Policy

Fact Sheet July 1, 2025

Integrated Care for FQHCs

Effective July 1, 2025, FQHCs and RHCs may be reimbursed by Health First Colorado for Health Behavior Assessment & Intervention (HBAI) and Collaborative Care Model (CoCM) codes Fee-for-Service (FFS). These sessions will not require a covered behavioral health diagnosis. **These claims should be billed using the 900 revenue code.** Integrated care services at Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs), will follow standard reimbursement policies, including policies outlined in [10 CCR 2505-10 8.700](#). HBAI and CoCM procedure codes include:

HBAI

- 96156
- 96158
- 96159
- 96164
- 96165
- 96167
- 96168
- 96170
- 96171

CoCM

- 99484
- 99492
- 99493
- 99494
- G0323
- G2214

If a member receives both a FFS integrated care service and a medical service on the same day, a FQHC must submit two (2) claims, one (1) with the HBAI or CoCM service using revenue code 900 and one (1) with the medical service using revenue code 529 for two (2) encounter rate payments from Health First Colorado.

A visit that includes a FFS integrated care service and other behavioral health services should include all behavioral health services in the visit on the claim billed to Health First Colorado.

Per 10 CCR 25-05-10 8.700 FQHCs or RHCs can receive one (1) encounter payment for a behavioral health visit for a single patient in one (1) day. The FQHC or RHC is not allowed to bill for a behavioral health psychotherapy visit (to their RAE) and an integrated care visit (HBAI and CoCM) for the same member on the same day. The Department conducts ongoing retroactive review and compliance activities monitoring all of these policies.



For additional details on the Integrated Care Benefit, including NCCI edits, please reference the Behavioral Health Billing Manual or the [FQHC/RHC Billing Manual](#).

For more information contact

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