MEDICAID SERVICES MANUAL
TRANSMITTAL LETTER

September 27, 2018

TO: CUSTODIANS OF MEDICAID SERVICES MANUAL

FROM: LYNNE FOSTER, CHIEF OF DIVISION COMPLIANCE

SUBJECT: MEDICAID SERVICES MANUAL CHANGES
CHAPTER – 600

BACKGROUND AND EXPLANATION

Revisions to Medicaid Services Manual (MSM) Chapter 600 – PHYSICIAN, Section 605 Federally Qualified Health Centers (FQHCs), are being proposed to move this section to new MSM Chapter 2900. This MSM Chapter will have policy for Federally Qualified Health Centers only.

Entities Financially Affected: Provider Type (PT) 17, Specialty 181.

Financial Impact on Local Government: N/A.

These changes are effective October 1, 2018.

MATERIAL TRANSMITTED	MATERIAL SUPERSEDED
CL Federally Qualified Heath Centers (FQHC)	MTL 16/16 Federally Qualified Health Centers (FQHC)

Manual Section	Section Title	Background and Explanation of Policy Changes, Clarifications and Updates
605	**Federally Qualified Health Centers (FQHC)**	Removal of FQHC policy. Language moved and revised into MSM Chapter 2900.

~~605 FEDERALLY QUALIFIED HEALTH CENTERS~~

~~Federally Qualified Health Centers (FQHCs) are defined by the Health Resources and Services Administration (HRSA) as health centers providing comprehensive, culturally competent, quality primary health care services to medically underserved communities and vulnerable populations. Nevada Medicaid reimburses for medically necessary services provided at FQHCs and follows State and Federal laws pertaining to them.~~

~~605.1 HEALTH SERVICES~~

~~A. The DHCFP reimburses FQHCs an outpatient encounter rate.~~

~~1. Encounter: Any one or more of the following medical professionals are included in the all-inclusive, daily outpatient encounter:~~

~~a. Physician or Osteopath;~~

~~b. Dentist;~~

~~c. Advanced Practice Registered Nurse (APRN);~~

~~d. Physician Assistant;~~

~~e. Certified Registered Nurse Anesthetist (CRNA);~~

~~f. Certified Registered Nurse Midwife;~~

~~g. Psychologist;~~

~~h. Licensed Clinical Social Worker;~~

~~i. Registered Dental Hygienist;~~

~~j. Podiatrist;~~

~~k. Radiology;~~

~~l. Optometrist;~~

~~m. Optician; and~~

~~n. Clinical Laboratory~~

~~B. Encounters are used by FQHCs for Medicaid-covered, HRSA-approved services which include:~~

~~1. Primary care services: medical history, physical examination, assessment of health status, treatment of a variety of conditions amendable to medical management on an ambulatory basis by an approved provider and related supplies;~~

~~2. Vital signs including temperature, blood pressure, pulse, oximetry and respiration;~~

~~3. Early periodic screenings (Refer to Medicaid Services Manual (MSM) Chapter 1500, Healthy Kids), for EPSDT screening policy and periodicity recommendations;~~

~~4. Preventive health services recommended with a grade of A or B by the United States Preventive Services Task Force (USPSTF) and education (Refer to MSM Chapter 600, Physicians Services, Attachments #6-12 through #6-14 for preventive services policy);~~

~~5. Home visits;~~

~~6. Diagnostic laboratory and radiology services, including but not limited to cholesterol screening, stool testing for occult blood, tuberculosis testing for high risk patients, dipstick urinalysis;~~

~~7.6. Family Planning services including contraceptives;~~

~~Up to two times a calendar year, the FQHC may bill for additional reimbursement for family planning education on the same date of service as the encounter.~~

~~8. For women: annual preventive gynecological examinations, prenatal and post-partum care, prenatal services, clinical breast examination, thyroid function test;~~

~~9. Vision and hearing screenings;~~

~~10. Dental office visits;~~

~~Dental encounters are to be billed as applicable with the FQHC encounter reimbursement methodology. An FQHC may bill a dental encounter for each face-to-face encounter. Dentures provided by an FQHC are included in the daily encounter rate unlike the denture policy established in MSM Chapter 1000, Dental, for fee-for-service recipients who obtain dentures at non-FQHC facilities. Medicaid will pay for a maximum of one emergency denture reline and/or a maximum of six adjustments (dental encounters) done not more often than every six months, beginning six months after the date of partial/denture purchase. A prior authorization is not required for relines.~~

~~The FQHCs in-office records must substantially document the medical emergency need. Denture/partial relines and adjustments required within the first six months are considered prepaid with the Medicaid's Dental encounter payment for the prosthetic. All other coverage policies (covered and non-covered for dental, MSM Chapter 1000) are still applicable.~~

~~11. Service Limits: An FQHC may reimburse for up to three service specific visits per patient per day to allow for a medical, mental health, and dental visit to occur on a single day for the same patient.~~

~~B. Non-covered services under an FQHC encounter:~~

~~1. Group therapy;~~

~~2. Eyeglasses;~~

~~3. Hearing aids;~~

~~4. Durable medical equipment, prosthetics, orthotics and supplies; and~~

~~5. Ambulance services.~~

~~605.2 ANCILLARY SERVICES~~

~~All services not recognized by HRSA as approved FQHC encounter services which are an approved Nevada Medicaid State plan service.~~

~~A. Ancillary services may be reimbursed on the same date of service as an encounter by a qualified Medicaid provider.~~

~~B. The FQHC must enroll within the appropriate provider type and meet all MSM coverage guidelines for the specific ancillary service.~~

~~605.3 MEDICAL NECESSITY~~

~~In order to receive reimbursement, all services provided must be medically necessary as defined in MSM Chapter 100 - Medical Program.~~

~~605.4 PRIOR AUTHORIZATION~~

~~A. FQHC encounters do not require prior authorization.~~

~~B. Ancillary services billed outside of an encounter must follow prior authorization policy guidelines for the specific service provided.~~

~~For billing instructions for FQHCs, please refer to the Billing Manual for Provider Type 17.~~

~~For Indian Health Programs (IHP) policy, please refer to MSM Chapter 3000, Indian Health.~~