



M E M O R A N D U M

TO: Valued STAR and CHIP Providers

FROM: El Paso Health

DATE: TBD

RE: Telemedicine and Telehealth Benefit Updates for Rural Health Clinics and Federally Qualified Health

This notice provides guidance on the implementation of a new telehealth patient site facility fee benefit for federally qualified health center (FQHC) and rural health clinic (RHC) providers.

Telehealth services are defined as health-care services, other than telemedicine medical services or a teledentistry service, delivered by a health professional licensed, certified or otherwise entitled to practice in Texas and acting within the scope of the health professional's license, certification, or entitlement to a patient at a different physical location other than the health professional using telecommunications or information technology. As a reminder, guidance regarding the telemedicine patient site facility fee benefit for RHCs implemented on April 1, 2022.

Telehealth Patient Site Facility Fee:

The facility fee (procedure code Q3014) for telehealth services will be a benefit for patient site FQHC and RHC providers who are enrolled in Texas Medicaid starting November 1, 2023. It will not be a benefit if the patient site is in the client's home.

Clarifications are included for current telemedicine and telehealth guidelines.

Effective for dates of service on or after November 1, 2023, FQHC and RHC providers performing patient-site telehealth 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 FQHC and RHC providers when telehealth services are rendered in the office or outpatient hospital setting.

The facility fee should not be included in any cost reporting that is used to calculate a prospective payment system (PPS) or alternative prospective payment system (APPS) per visit encounter rate.



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Additionally, the facility fee should not be included in any cost reporting that is used to calculate the RHC All Inclusive Rate (AIR) PPS per visit encounter rate.

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.

To receive reimbursement for more than one facility fee for the same client on the same date of service, an FQHC or RHC must submit documentation of medical necessity that the client needed multiple distant-site provider consultations. An FQHC or RHC can use a signed letter from the client's treating health care provider at the FQHC or RHC to document the client's medical need to receive additional facility fee payments for the same client 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 FQHC or RHC is eligible for the payment of both an encounter fee and a facility fee for the same client on the same date of service, the FQHC or RHC must submit a claim for the facility fee separately from the claim that was submitted for the encounter.

Clarifications for telemedicine and telehealth:

FQHC practitioners may be employees of the FQHC or contracted with the FQHC. In addition, RHC practitioners may be employees of the RHC or contracted with the RHC.

A distant-site provider that is located outside of state lines while rendering services is considered to be an out-of-state provider.

Additional Resources:

<https://www.tmhp.com/news/2023-09-15-telemedicine-and-telehealth-benefit-updates-texas-medicaid-effective-november-1>

If you have any questions regarding this communication please contact our Provider Relations team at 915-532-3778 or email us at ProviderRelationsDG@elpasohealth.com