



Federally Qualified Health Center

Reimbursement Policy ID: RPC.0015.6400

Recent review date: 03/2024

Next review date: 03/2025

AmeriHealth Caritas Florida reimbursement policies and their resulting edits are based on guidelines from established industry sources, such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies. Reimbursement policies are intended as a general reference and do not constitute a contract or other guarantee of payment. AmeriHealth Caritas Florida may use reasonable discretion in interpreting and applying its policies to services provided in a particular case and may modify its policies at any time.

In making claim payment determinations, the health plan also uses coding terminology and methodologies based on accepted industry standards, including Current Procedural Terminology (CPT); the Healthcare Common Procedure Coding System (HCPCS); and the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and other relevant sources. Other factors that may affect payment include medical record documentation, legislative or regulatory mandates, a provider's contract, a member's eligibility in receiving covered services, submission of clean claims, and other health plan policies, and other relevant factors. These factors may supplement, modify, or in some cases supersede reimbursement policies.

This reimbursement policy applies to all health care services billed on a CMS-1500 form or its electronic equivalent, or when billed on a UB-04 form or its electronic equivalent.

Policy Overview

This policy addresses covered services provided by Federally Qualified Health Centers (FQHC's) and how these services are reimbursed. Federally Qualified Health Centers are paid based on the FQHC prospective payment system (PPS) for medically necessary primary health services and qualified preventive health services provided by a FQHC health provider.

Exceptions

N/A

Reimbursement Guidelines

The following covered services are reimbursable:

Adult Health Screening

- 99385-99387, 99395-99397

Chiropractic Services

- 99203, 98940-98942

Well Child Visit

- 99381-99385, 99391-99395

Family Planning Waiver Codes

- 99383-99386, 99393-99396
- 99401-99403, 99211

Primary Medical Care Codes

- 99201-99205, 99211-99215
- H1000, 59430

Mental Health Services Code

- H0004

Optometric Services

- 99201-99205, 99211-99215

Podiatry Services

- 99201-99215

Immunization Administration 90471-90474

Florida Medicaid reimburses for services provided through the fee-for-service delivery system at an encounter rate. Providers may be reimbursed for up to one medical, one dental, and one behavioral health visit provided to a recipient on the same day.

Services may be provided by a physician, physician assistant or advanced practice registered nurse, certified nurse midwife or clinical social worker. The services provided also include dental services, audiology services, vision, behavioral health, chiropractic and podiatry.

Definitions

Federally Qualified Health Center (FQHC)

Federally funded nonprofit health centers or clinics that serve medically underserved areas and populations. An FQHC is a community-based organization that provides comprehensive primary care and preventive care, including health, oral, and mental health/substance abuse.

Prospective payment system (PPS)

FQHC PPS consisted of bundled payments that drives efficiency, not cost-based reimbursement. The PPS base rate is calculated for each FQHC, derived from the historical costs of providing comprehensive care to Medicaid patients to ensure each rate is appropriate and accurate. There is a single, bundled rate for each qualifying patient visit.

Edit Sources

- I. Current Procedural Terminology (CPT)
- II. Healthcare Common Procedure Coding System (HCPCS)
- III. International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and associated publications.
- IV. Centers for Medicare and Medicaid Services (CMS).
- V. <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c13.pdf>
- VI. <https://ahca.myflorida.com/medicaid/cost-reimbursement/fqhc-rhc-rates>

- VII. <https://ahca.myflorida.com/content/download/22599/file/Federally%20Qualified%20Health%20Center%20Billing%20Codes%202023.pdf>
- VIII. https://ahca.myflorida.com/content/download/5947/file/59G-4.100_FQHCs.pdf

Attachments

N/A

Associated Policies

N/A

Policy History

04/2024	Revised preamble
03/2024	Reimbursement Policy Committee Approval
08/2023	Policy Implemented by AmeriHealth Caritas Florida
01/2023	Template revised <ul style="list-style-type: none"> • Revised preamble • Removal of Applicable Claim Types table • Coding section renamed to Reimbursement Guidelines • Added Associated Policies section