COVID-19 Frequently Asked Questions (FAQs) for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)

Expansion of Virtual Communication Services for RHCs and FQHCs

1. **Question:** What are "online digital evaluation and management services" in RHCs and FQHCs?

    Answer: Online digital evaluation and management services are non-face-to face, patient-initiated, digital communications using a patient portal, that require a clinical decision that otherwise typically would have been provided in the office. CMS has been paying separately under the physician fee schedule for these services since before the PHE and is expanding the same flexibilities to RHCs and FQHCs.

2. **Question:** Are there specific codes that describe these services?

    Answer: Yes. The codes that have been added for RHCs and FQHCs are:
    - 99421 - Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes
    - 99422 - Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes
    - 99423 - Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes.

3. **Question:** What is an online patient portal?

    Answer: An online patient portal is a secure online website that gives patients 24-hour access to personal health information from anywhere with an Internet connection by using a secure username and password.

4. **Questions:** Does the RHC or FQHC practitioner have to be physically in the RHC or FQHC, or can they respond from another location such as their home?

    Answer: The RHC or FQHC practitioner can respond from any location during a time that they are scheduled to work for the RHC or FQHC.

5. **Question:** How will Medicare pay RHCs and FQHCs for performing online digital evaluation and management services?

    Answer: The online digital assessment codes are being added to the codes that are billed using HCPCS code G0071, the RHC/FQHC specific code for Virtual Communication Services

6. **Question:** How can RHCs and FQHCs bill for online digital evaluation and management services?

    Answer: RHCs and FQHCs can bill for online digital evaluation and management services using the RHC/FQHC HCPCS code G0071. The payment for G0071 will be the PFS national non-facility payment rate for HCPCS code G2012 (communication technology-based

services), HCPCS code G2010 (remote evaluation services), CPT 99421, CPT 99422, and CP 99423. The new payment rate is $24.76.

7. **Question:** When will the new payment rate for G0071 be effective?

   Answer: The new payment rate is effective for services provided on or after March 1, 202 However, claims submitted with this code before the claims processing system is updated will be reprocessed.

8. **Question:** How frequently can G0071 be billed by RHCs and FQHCs?

   Answer: Because these codes are for a minimum 7-day period of time, they cannot be billed more than once every 7 days.

9. **Question:** Can virtual communication services be furnished to both new and established patients?

   Answer: Yes. Virtual communication services may be furnished to both new and established patients during the COVID-19 PHE.

10. **Question:** Is beneficiary consent required?

    Answer: Yes, but during the PHE, it may be obtained at the same time the services are furnished.

Revision of the Home Health Agency Shortage Area Requirement for Visiting Nursing Services Furnished by RHCs and FQHCs

1. **Question:** Can RHCs and FQHCs bill for visiting nursing services?

   Answer: Yes. In an area in which there exists a shortage of home health agencies (HHAs), visiting nursing services can be furnished to a homebound individual by an RN or a LPN under a written plan of treatment.

2. **Question:** How are we changing the HHA shortage area requirement for visiting nursing services and what additional flexibilities does this provide for RHCs and FQHCs?

   Answer: During the COVID-19 PHE, we will assume that the area typically served by the RHC, and the area that is included in the FQHC's service area plan, has a shortage of home health agencies, and no request for this determination is required. The RHC or FQHCs must check the HIPAA Eligibility Transaction System (HETS) before providing visiting nurse services to ensure that the patient is not already under a home health plan of care. No visits will be payable to the RHC/FQHC if such patient is already being treated under a home health plan of care.

3. **Question:** Is there a change in how "homebound" is determined?

    Answer: No. During the PHE, as previously, a patient would be considered "homebound" if it is medically contraindicated for the patient to leave the home. The patient's medical records must document leaving the home is medically contraindicated. For example, a beneficiary could be considered "homebound" if: (1) a physician has determined that it is medically contraindicated for a beneficiary to leave the home because he or she has a confirmed or suspected diagnosis of COVID-19; or (2) where a physician has determined that it is medically contraindicated for a beneficiary to leave the home because the patient has a condition that may make the patient more susceptible to contracting COVID-19.

4. **Question:** Can a visiting nurse service be billed if the nurse goes to the patient's home to collect a lab specimen for coronavirus testing?

    Answer: Not if it is the only service provided. Visiting nurse services are only billable as an RHC/FQHC visit when they require skilled nursing services. If the RN or LPN collects a specimen for testing and does not provide skilled nursing services under a written plan of treatment, then it would not be a RHC or FQHC billable visit.

5. **Question:** How does this change affect how RHCs and FQHCs bill for visiting nursing services?

    Answer: There are no billing changes for visiting nursing services. Qualified visiting nursing services are billed as an RHC or FQHC visit using revenue code 0527.