

DEPARTMENT OF SOCIAL SERVICES

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Attention: FQHC and RHC Providers

From: South Dakota Medicaid

RE: FQHC and RHC Provider Manual Update

South Dakota Medicaid has posted a new version of the <u>FQHC and RHC Provider Manual</u>. The manual has been updated to include a list of medical procedure codes that are considered a Prospective Payment System (PPS) visit. These services are reimbursed at the provider's per diem rate.

Prospective Payment System Services

PPS visits are limited to certain types of providers and services as stated in the provider manual. Providers bill for these services under their FQHC or RHC billing NPI and are reimbursed at a per diem rate for all services rendered. The provider manual provides details regarding when multiple visits may be billed for one recipient for the same date of service.

The manual now includes a list of codes that can be billed under the FQHCs or RHCs billing NPI and generate a per diem payment. Previously the manual only described what services were reimbursed at the per diem rate, but did not include a list of applicable procedure codes. Providers should continue to refer to the <u>Dental Services Fee Schedules</u> for a list of dental services reimbursable at the per diem rate.

South Dakota Medicaid also allows FQHCs and RHCs to bill for fluoride varnish (CPT Code 99188) and LARC (HCPCS Codes J7298, J7300, and J7307) under their FQHC or RHC billing NPI and be reimbursed at the fee schedule rate in addition to the per diem rate if a PPS visit occurred. Providers should continue to bill for these services in this manner. In addition, the telemedicine originating site fee (HCPCS Q3014) should continue to be billed for under the FQHC or RHC's billing NPI and will also be reimbursed at the fee schedule rate.

Incidental Services

As a reminder incidental services are considered part of a physician, nurse practitioner, or physician assistant PPS visit. These services do not generate a per diem payment. South Dakota Medicaid requests that providers include the procedure code for incidental services on the PPS visit claim if applicable. The following services are considered incidental services:

- Blood pressure checks;
- Allergy injections;
- Prescriptions;
- Nursing services;
- Diabetes education:
- Medical nutrition therapy;
- Speech language pathology services;
- Physical therapy services; and
- Occupational therapy services.

Vaccines

Vaccines provided at PPS visit are also considered an incidental service and must be listed on the PPS claim. Unlike other incidental services, vaccines provided at a standalone visit where no billable PPS visit occurred are allowed to be billed on a fee-for-service basis. Vaccines provided at a standalone visit must be billed under the FQHC or RHC's non-PPS billing NPI as detailed below.

Non-Prospective Payment System Services

As stated in the provider manual, additional services that are not considered a PPS visit/incidental to a PPS visit may be billed to South Dakota Medicaid under a separate billing NPI. These services are reimbursed on a fee-for service basis. Examples of these types of services include laboratory services and the technical component of an FQHC or RHC service. Please refer to the provider manual for additional details regarding this subject.

Sincerely,

South Dakota Medicaid