



## **Michigan Medicaid and Medicare Telehealth Reimbursement for Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC)**

MDHHS aligns the definition of telemedicine with Section 3476 of the Insurance Code of 1956, 1956 PA 218 MCL 00.3476, as updated on December 20, 2017. Therefore, “Telemedicine” means the use of an electronic media to link [beneficiaries] with health care professionals in different locations. To be considered telemedicine under this section, the health care professional must be able to examine the [beneficiary] via a real-time, interactive audio or video (or both) telecommunications system, and the patient must be able to interact with the off-site health care professional at the time the services are provided.

**Source:** *Medical Services Bulletin* / [https://www.michigan.gov/documents/mdhhs/MSA\\_20-09\\_683712\\_7.pdf](https://www.michigan.gov/documents/mdhhs/MSA_20-09_683712_7.pdf)

Healthy Michigan and private insurance carriers are authorized and encouraged to reimburse for telehealth services. To facilitate reimbursement of telehealth services:

- 1) Insurance carriers must cover virtual check-ins and e-visits and must not impose any additional requirements inconsistent with guidance issued by the Centers for Medicare and Medicaid Services on March 17, 2020. The Director of the Department of Insurance and Financial Services may issue orders or guidance to implement this subsection.
- 2) Telehealth services are covered under the Michigan Medicare/Medicaid Assistance Program and Healthy Michigan Plan if the originating site is an in-home setting or any other originating site allowed in the Medicaid Provider Manual or considered appropriate by the provider. For purposes of this order, “originating site” means the location of the eligible beneficiary at the time the service being furnished by a telecommunications system occurs.

**Source:** *Executive Order 2020-86 (COVID-19)* / [https://www.michigan.gov/whitmer/0,9309,7-387-90499\\_90705-529458--,00.html](https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705-529458--,00.html)

### **Michigan Medicaid Reimbursement for FQHCs and RHCs**

An RHC can be either an originating or a distant site for telemedicine services. Refer to the Billing & Reimbursement for Institutional Providers Chapter for specific billing instructions.

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Refer to the Telemedicine Section of the Practitioner Chapter for additional information regarding telemedicine services.

Refer to the Additional Code/Coverage Resource Materials subsection of the General Information for Providers Chapter for additional information regarding coverage parameters.

## **6.22 Telemedicine**

Procedure code and modifier information is contained in the MDHHS Telemedicine Services Database available on the MDHHS website. (Refer to the Directory Appendix for website information.)

### **6.22.A. Originating Site**

To be reimbursed for the originating site facility fee, the originating site provider must bill the appropriate telemedicine procedure code and modifier. MDHHS will reimburse the originating site provider the lesser of charge or the current Medicaid fee screen. Additional services provided at the originating site on the same date as the telemedicine service may be billed and reimbursed separately according to published policy.

### **6.22.B. Distant Site**

The modifier for interactive communication must be used in conjunction with the appropriate HCPCS procedure code to identify the professional telemedicine services provided by the distant site provider. To be reimbursed for services that are telemedicine specific (that can only be billed via telemedicine), the provider must use the interactive communication modifier. If the appropriate modifier is not supplied, the service cannot be paid.

**Source:** Medicaid Provider Manual / <https://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf>

## **Michigan Medicare Telemedicine Reimbursement FQHCs and RHCs:**

### ***Michigan Medicaid COVID-19 Update***

- Following guidelines are only effective for no more than 30 days following the conclusion of the Governor's Declaration of a State Emergency Order.
- All codes within the telemedicine database may use audio only services as a when both visual and audio is unavailable.
- See MDHHS bulletin MSA 20-13 for many telemedicine services codes and fees.
- Both provider and patient must have HIPAA compliant communication technology that must be synchronous and have both audio and visual components. All services must remain HIPAA compliant.

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- Patients may be in their home, and providers may be wherever they deem as an appropriate site.
- Telepractice services will be submitted using the same codes as if the encounter occurred in-person. Additionally, providers must use the GT – interactive telecommunication modifier to label the service as telepractice. If the service is audio only, providers must note, “services provided via telephone” in the remarks section.
- Like all telemedicine, telepractice must be provided by a licensed provider acting within the scope of their practice.
- Behavioral health telepractice services may be provided to beneficiaries of Medicaid or Healthy Michigan Plan using interactive and synchronous audio and/or video.
- Dentists also have temporary, limited permission for oral evaluations using telemedicine when using both audio and visual technology is unavailable. Dentists must still adhere to the specific requirements presented in bulletin MSA 20-13. See MSA 20-21 for more details.
- CPT/HCPCS codes for physical, occupational, and speech therapy services via telemedicine can be found on page 3 of bulletin MSA 20-22.
- FQHC’s and RHC’s may receive the Prospective Payment System rate and THC’s may receive the All-Inclusive Rate for specified telemedicine visits. See bulletin MSA 20-34 for details.
- Certain telemedicine services (including audiology services) are now eligible for a facility rate effective June 1, 2020.

**Sources:** MDHHS bulletins MSA [20-13](#); MSA [20-15](#); MSA [20-21](#); MSA [20-34](#); MSA [20-22](#), MSA [20-53](#)

**Michigan Medicaid Policy Bulletins** can be found on the MDHHS site. See: [https://www.michigan.gov/mdhhs/0,5885,7-339-71551\\_2945\\_42542\\_42543\\_42546\\_42553-87513--,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42553-87513--,00.html)

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