

Bulletin Number: MSA 20-34

Distribution: Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Medicaid Health Plans, Integrated Care Organizations, Prepaid Inpatient Health Plans, Community Mental Health Services Programs

Issued: May 20, 2020

Subject: COVID-19 Response: Telemedicine Reimbursement for Federally Qualified Health Centers, Rural Health Clinics, and Tribal Health Centers

Effective: March 10, 2020

Programs Affected: Medicaid, Healthy Michigan Plan

The purpose of this guidance is to allow flexibility in the reimbursement methodology for telehealth services provided by Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), and Tribal Health Centers (THCs) to protect the health and welfare of beneficiaries and providers while maintaining access to vital services during the COVID-19 pandemic. Consistent with public health emergency conditions at both the state and federal level related to COVID-19, the Michigan Department of Health and Human Services (MDHHS) is issuing this policy effective March 10, 2020. Given the circumstances, this policy is intended to be time-limited, and MDHHS will notify providers of its termination.

MDHHS will allow FQHCs and RHCs to receive the Prospective Payment System (PPS) rate and allow THCs to receive the All-Inclusive Rate (AIR) for qualifying telemedicine visits. Visits rendered by the clinic provider while the provider is working from home and telephonic (audio only) visits are included as eligible to receive the PPS or AIR. The provider must be employed by or contracted with the FQHC, RHC, or THC and the procedure code billed must appear on the clinic qualifying visit list located on the MDHHS website at www.michigan.gov/medicaidproviders >> Provider Specific Information.

Clinic providers of telemedicine services must follow all requirements of telemedicine policy described in Bulletins MSA 20-09, MSA 20-13 and the MDHHS Medicaid Provider Manual unless otherwise indicated by federal guidance. The MDHHS Medicaid Provider Manual can be accessed at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms >> Medicaid Provider Manual. Allowable telemedicine services are limited to those listed on the telemedicine fee schedule, which can be accessed on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information >> Physicians/Practitioners/Medical Clinics/Telemedicine Services.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments to Tyler Wise via e-mail at:

E-mail: Wiset2@michigan.gov

Please include “COVID-19 Response: Telemedicine Reimbursement for Federally Qualified Health Centers, Rural Health Clinics, and Tribal Health Centers” in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

Information is time-limited and will not be incorporated into any policy or procedure manuals.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Providers may phone toll-free. Typical providers should call 800-292-2550; atypical providers should call 800-979-4662.

Approved



Kate Massey, Director
Medical Services Administration