



Louisiana Department of Health
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Telemedicine/Telehealth Billing Changes for Rural Health Clinics and Federally Qualified Health Clinics

The Centers for Medicare and Medicaid Services (CMS) change request (CR) 10152 has eliminated the requirement to use the GT modifier on claims for telemedicine/telehealth services.

Effective August 1, 2019, rural health clinics (RHC) and federally qualified health clinics (FQHC) are required to use place of service (POS) 02 with modifier 95 for the billing of telemedicine/telehealth services.

Upon implementation, claims submitted without the combination of the POS 02 and modifier 95 will deny. Providers will be required to resubmit with the correct POS and modifier in order for claims to process. Providers must use procedure codes appropriate to telemedicine/telehealth services to receive reimbursement.

Reimbursement for these services will be at the all-inclusive prospective payment rate on file for the date of service (DOS).

Fee for service policy regarding this billing change will be published on www.lamedicaid.com under the Provider Manuals link, within the *FQHC/RHC* manual. Questions regarding this message and fee for service claims should be directed to DXC Technology Provider Relations at (800) 473-2783 or (225) 924-5040.

Questions regarding managed care claims should be directed to the appropriate managed care organization.