

FQHC/RHC Code Conversion – Policy Effective October 1, 2017

Effective for dates of service on or after October 1, 2017, the FQHC/RHC code conversion will establish HIPAA-compliant billing code sets for Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs).

The Health Insurance Portability and Accountability Act (HIPAA) was authorized by Congress in 1996. HIPAA mandates uniform, national standards for information submitted by health care providers on claims, including health care services, procedures and personal health information.

Current Billing Codes		New Billing Codes				
Local Code	Description	National Code Description	Revenue Code	Procedure Code	Modifier	Billing Instructions
01	Medical, per visit code	Medical, per visit	0521	T1015		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims FQHC/RHC clinic visit New patient	0521	G0466		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims FQHC/RHC clinic visit Established patient	0521	G0467		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims FQHC/RHC clinic visit initial preventive physical exam (IPPE) or annual wellness visit (AWV)	0521	G0468		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims home visit New patient	0522	G0466		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims home visit Established patient	0522	G0467		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims home visit initial preventive physical exam (IPPE) or annual wellness visit (AWV)	0522	G0468		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visit covered Part A stay at SNF New patient	0524	G0466		Revenue code with HCPCS Level II code

FQHC/RHC Code Conversion (continued)

Current Billing Codes		New Billing Codes				
Local Code	Description	National Code Description	Revenue Code	Procedure Code	Modifier	Billing Instructions
02	Crossover claims	Crossover claims visit covered Part A stay at SNF Established patient	0524	G0467		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visit (covered Part A stay) at SNF initial preventive physical exam (IPPE) or annual wellness visit (AWV)	0524	G0468		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visit (not covered Part A stay) at SNF New patient	0525	G0466		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visit (not covered Part A stay) at SNF Established patient	0525	G0467		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visit (not covered Part A stay) at SNF initial preventive physical exam (IPPE) or annual wellness visit (AWV)	0525	G0468		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visiting nurse to home New patient	0527	G0466		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims visiting nurse to home Established patient	0527	G0467		Revenue code with HCPCS Level II code

FQHC/RHC Code Conversion (continued)

Current Billing Codes		New Billing Codes				
Local Code	Description	National Code Description	Revenue Code	Procedure Code	Modifier	Billing Instructions
02	Crossover claims	Crossover claims visiting nurse to home-initial preventive physical exam (IPPE) annual wellness visit (AWV)	0527	G0468		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims mental health visit New patient	0900	G0469		Revenue code with HCPCS Level II code
02	Crossover claims	Crossover claims mental health visit Established patient	0900	G0470		Revenue code with HCPCS Level II code
04	Optometry services	Clinic visit optometry Facility-specific all-inclusive rate New patient	0521	92004		Revenue code with CPT code
04	Optometry services	Clinic visit optometry Facility-specific all-inclusive rate Established patient	0521	92014		Revenue code with CPT code
06	Community-Based Adult Services (CBAS) regular day of service	Community-Based Adult Services (CBAS) regular day of service	3103			Revenue code
07	Community-Based Adult Services (CBAS) Initial assessment day (with subsequent attendance)	Community-Based Adult Services (CBAS) Initial assessment day (with subsequent attendance)	3101	99205		Revenue code with CPT code

FQHC/RHC Code Conversion (continued)

Current Billing Codes		New Billing Codes				
Local Code	Description	National Code Description	Revenue Code	Procedure Code	Modifier	Billing Instructions
08	Community-Based Adult Services (CBAS) Initial assessment day (without subsequent attendance)	Community-Based Adult Services (CBAS) Initial assessment day (without subsequent attendance)	3101	T1015		Revenue code with HCPCS Level II code
09	Community-Based Adult Services (CBAS) transition day	Community-Based Adult Services (CBAS) transition day	3103	T1023		Revenue code with HCPCS Level II code
11	Licensed Clinical Social Worker (LCSW)	Licensed Clinical Social Worker (LCSW)	0900	T1015	AJ	Revenue code with HCPCS Level II code and modifier
12	Psychologist	Psychologist	0900	T1015	AH	Revenue code with HCPCS Level II code and modifier
13	Psychiatrist	Psychiatrist	0900	T1015	AG	Revenue code with HCPCS Level II code and modifier
15	Acupuncture	Acupuncture – one or more needles, without electrical stimulation, initial 15 minute service	2101	97810	SE	Revenue code with CPT code and modifier
15	Acupuncture	Acupuncture – one or more needles, without electrical stimulation, each additional 15 minute service	2101	97811	SE	Revenue code with CPT code and modifier
15	Acupuncture	Acupuncture – one or more needles, with electrical stimulation, initial 15 minutes service	2101	97813	SE	Revenue code with CPT code and modifier

FQHC/RHC Code Conversion (continued)

Current Billing Codes		New Billing Codes				
Local Code	Description	National Code Description	Revenue Code	Procedure Code	Modifier	Billing Instructions
15	Acupuncture	Acupuncture – one or more needles, with electrical stimulation, each additional 15 minute service	2101	97814	SE	Revenue code with CPT code and modifier
16	Chiropractic	Chiropractic manipulative treatment, spinal, one to two regions	0940	98940	SE	Revenue code with CPT code and modifier
16	Chiropractic	Chiropractic manipulative treatment, spinal, three to four regions	0940	98941	SE	Revenue code with CPT code and modifier
16	Chiropractic	Chiropractic manipulative treatment, spinal, five regions	0940	98942	SE	Revenue code with CPT code and modifier
17	Heroin detox	Heroin detox	0521	H0014		Revenue code with HCPCS Level II code
18	Managed care differential rate	Managed care differential rate, covered by managed care and rendered to recipients enrolled in Medi-Cal managed care plans and Denti-Cal managed care plans	0521	T1015	SE	Revenue code with HCPCS Level II code and modifier
20	Capitated Medicare Advantage Plans	Capitated Medicare Advantage Plans New patient	0529	G0466		Revenue code with HCPCS Level II code
20	Capitated Medicare Advantage Plans	Capitated Medicare Advantage Plans Established patient	0529	G0467		Revenue code with HCPCS Level II code

FQHC/RHC Code Conversion (continued)

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Local Code	Description	National Code Description	Revenue Code	Procedure Code	Modifier	Billing Instructions
20	Capitated Medicare Advantage Plans	Capitated Medicare Advantage Plans Initial preventive physical exam (IPPE) or annual wellness visit (AWV)	0529	G0468		Revenue code with HCPCS Level II code
20	Capitated Medicare Advantage Plans	Capitated Medicare Advantage Plans Mental health New patient	0529	G0469		Revenue code with HCPCS Level II code
20	Capitated Medicare Advantage Plans	Capitated Medicare Advantage Plans Mental health Established patient	0529	G0470		Revenue code with HCPCS Level II code
21	End of Life Option Act	End of Life Option Act	0521	S0257		Revenue code with HCPCS Level II code