Update
FQHC & RHC billing changes

This provider bulletin is an update about information in UniCare’s Medicaid Business Provider Manual (Manual). For access to the latest Manual, go online to www.unicare.com.

West Virginia’s Medicaid Managed Care programs provide eligible members access to a wide range of medically necessary health care services.

Effective with services rendered on and after July 1, 2015:

- All Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC) providers will submit behavioral health claims to the member’s specific Medicaid managed care plan.
- UniCare Health Plan of West Virginia, Inc. will utilize the same encounter rate reimbursement methodology to reimburse for behavioral health services.

Billing methodology summary

Behavioral health services included in the FQHC and RHC Encounter Rate must be billed using the UB-04 claim form.

- Providers must bill all encounters using the encounter code T1015 along with the HE (behavioral health) modifier and the appropriate REV Code 91X series or Rev Code 900.
- Claims must list the actual CPT/HCPCS procedure codes and appropriate revenue codes, as defined by Medicare, to identify services included during the encounter visit.
- The FQHC and RHC may indicate the actual charge or a zero for the CPT/HCPCS codes listed on the claim for encounter data purposes, but MUST include the encounter rate for the T1015-HE encounter code for payment.
- Indicate the appropriate type of bill when submitting corrected claims to ensure proper processing. The third digit of “7” in the three digit type of bill defines a replacement/corrected claim.

Services excluded from the FQHC and RHC Encounter Rate covered by UniCare should be billed on CMS-1500. All appropriate CPT/HCPCS procedure codes must be individually listed on the claim form.

What if I need assistance?
If you have questions about this communication, received it in error or need assistance with any other item, please contact our Customer Care Center toll free at 1-800-782-0095.