

ForwardHealth **ALERT**

Wisconsin serving you



TO

Community Health Centers, Tribal Federally Qualified Health Centers, HMOs and Other Managed Care Programs

REGARDING

Tribal and Non-Tribal Federally Qualified Health Centers Billing Guidance for Telehealth Policy Changes in ForwardHealth Update 2020-09

Non-Tribal Federally Qualified Health Centers

For dates of service on and after March 1, 2020, the Wisconsin Department of Health Services has made changes that will allow services billed with modifier GT (modifier indicating telehealth) to be considered under the Prospective Payment System reimbursement method for non-tribal federally qualified health centers. Billing Healthcare Common Procedure Coding System procedure code T1015 (Clinic visit/encounter, all-inclusive) with a telehealth procedure code will now result in a Prospective Payment System rate for fee-for-service encounters.

Please follow the billing instructions in the [Telehealth](#) topic (#510) of the ForwardHealth Online Handbook and the fee-for-service billing procedures for receiving the Prospective Payment System rate via the T1015 procedure code.

Tribal Federally Qualified Health Centers

For dates of service on and after March 1, 2020, claims for telehealth services will count as encounters as allowed under the encounter counting logic through the interim reporting and cost reporting processes.

Please follow the billing procedures outlined in the [Telehealth](#) topic (#510) of the Online Handbook.

Additional Policy Information

For additional policy information related to these changes, refer to the March 2020 ForwardHealth Update (2020-09), titled "[Changes to ForwardHealth Telehealth Policies for Covered Services, Originating Sites, and Federally Qualified Health Centers](#)," and the [Telehealth](#) topic (#510) of the Online Handbook.