

July 12, 2006

Clarifying Reimbursement Policy

This notice is to clarify Medicaid's reimbursement policy when FQHCs & RHCs see a patient twice in one day. The following scenarios should help explain the differences in use:

1) The patient is treated for a headache in the morning at the office and returns home. The patient returns a few hours later because the headache is worse, sees the same or different practitioner, and returns home.

This would be billed and reimbursed as one encounter since the reason/diagnosis for the multiple visits was the same and was performed at the same office.

2) The patient is treated during a single visit for both a headache and stomach ache.

This can only be billed and reimbursed as one encounter.

3) The patient is treated in the morning for a headache and returns home. The patient returns the same day for treatment of a different ailment such as a laceration.

This is billed and reimbursed as two separate encounters. As long as the patient has left the office and returns for a different reason then the service can be billed and reimbursed as a second encounter.

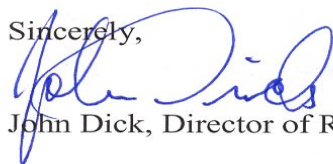
4) The patient is treated by a physician and a mental health provider any time during the same day.

This is billed and reimbursed as two separate encounters.

5) The patient sees her provider for a standard pre-natal visit and returns home. The patient returns the same day to see the same provider for a separate concern, not pre-natal.

The Antepartum care (pre-natal) visits are not considered an encounter by Medicaid, and are typically billed globally after the birth. The other visit is a billable encounter.

Sincerely,



John Dick, Director of Reimbursement