






Rural Health Clinic Billing – One of Three Presented by Healthcare Business Specialists Sponsored by Azalea Health and ChartSpan January 21, 2020




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[Become a fan and Like us on Facebook for more RHC information](#)


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[RHC Information Exchange Group on Facebook](#)
 • "A place to share and find information on RHCs."

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Panelist

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Panelist

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2020 Dates

Nashville 11/5
 Somerset, KY 11/12
 Alabama, 11/18

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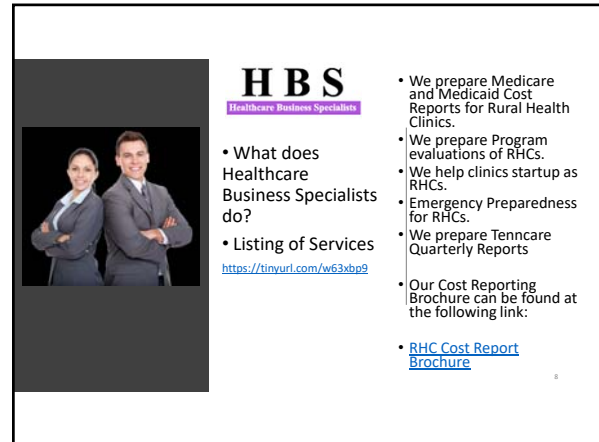
RHC Update Seminar – Clanton, Alabama
Agenda and Topics Outline
January 16, 2020

Healthcare Business Specialists, Andra Health, and ChartSpan are providing a free seminar for RHCs at Clanton-Cashelton Center - Alabama Power Company, 2030 7th St S Clanton, AL 36905. To register go to our website at www.chartspan.com

Time	Subject Matter
10:00 AM to 9:30 AM	Registration and Continental Breakfast. 3000 attendees from the Alabama Department of Public Health Office of Primary Care and Rural Health will introduce the program. Mark Egan will provide a Catch-Up session for people new to the Rural Health Clinic Program. We will go over the 9 Conditions of Participation for RHCs and cover some of the most common compliance issues in the program. 10 free lunches are RHCs for single-visit non-urgent care at the program.
10:45 AM to 10:55 AM	Mark Egan, CPA, CRECF will present information on the Clanton Center Outreach Center Behavioral Preparedness & Program Evaluation and the RHC Maintenance fee which will be presented by the individual RHC up to \$10 per visit.
11:00 AM to 11:05 AM	RHC Billing
11:05 AM to 11:15 AM	Don Nix, Florida Release Supervisor, LDC Technology (Alabama Medicaid) will provide information for RHCs on how to bill for Medicaid services and how to manage their billing cycle with Alabama Medicaid.
11:20 to 11:30	Break Luncheon Provided on site by Andra Health, ChartSpan, and Healthcare Business Specialists. At 11:30 Don Nix will discuss Rural Health Services provided by Andra Health including the new Telehealth solution.
11:30 PM to 1:30 PM	Emergency Triage as
1:30 PM to 1:45 PM	Emergency Triage as
1:45 PM to 2:00 PM	RHC Billing in a Cost Reporting

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HBS
Healthcare Business Specialists

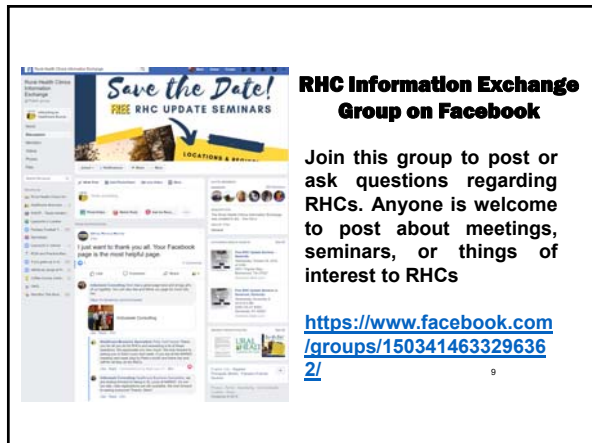
- We prepare Medicare and Medicaid Cost Reports for Rural Health Clinics.
- We prepare Program evaluations of RHCs.
- We help clinics startup as RHCs.
- Emergency Preparedness for RHCs.
- We prepare TennCare Quarterly Reports

• What does Healthcare Business Specialists do?
 • Listing of Services
<https://tinyurl.com/w63xpb9>

• Our Cost Reporting Brochure can be found at the following link:
[RHC Cost Report Brochure](#)

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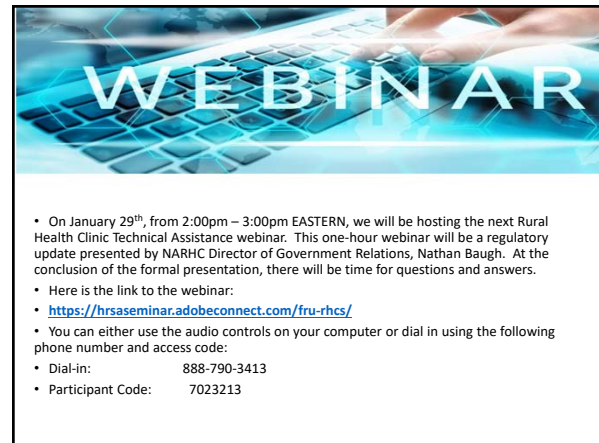
RHC Information Exchange Group on Facebook

Join this group to post or ask questions regarding RHCs. Anyone is welcome to post about meetings, seminars, or things of interest to RHCs

<https://www.facebook.com/groups/1503414633296362/>

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WEBINAR

- On January 29th, from 2:00pm – 3:00pm EASTERN, we will be hosting the next Rural Health Clinic Technical Assistance webinar. This one-hour webinar will be a regulatory update presented by NARHC Director of Government Relations, Nathan Baugh. At the conclusion of the formal presentation, there will be time for questions and answers.
- Here is the link to the webinar:
<https://hrsseminar.adobeconnect.com/fru-rhcs/>
- You can either use the audio controls on your computer or dial in using the following phone number and access code:
- Dial-in: 888-790-3413
- Participant Code: 7023213

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WEBINAR

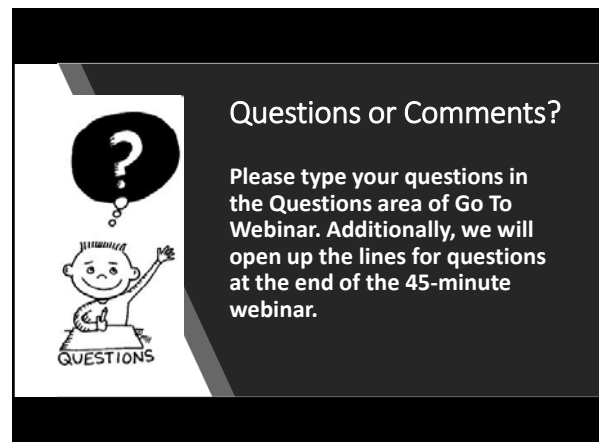
Please register for Cost Reporting for Rural Health Clinics - What is needed to file an accurate and timely cost report on Jan 30, 2020 3:00 PM EST at:
<https://attendee.gotowebinar.com/register/7460659588778612236>

After registering, you will receive a confirmation email containing information about joining the webinar.

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Questions or Comments?

Please type your questions in the Questions area of Go To Webinar. Additionally, we will open up the lines for questions at the end of the 45-minute webinar.

QUESTIONS

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• Information is current as of 1/20/2020.
 • We will supply general information. All situations are specific so refer to specific guidance as necessary.
 • This session is being recorded.

THE

DISCLAIMER

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Pre-Test
 Check your progress!

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1. Rural Health Clinic Status directly impacts payments from the following:

a. Medicare
 b. Medicaid
 c. All Payers
 d. Medicare and Medicaid

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2. RHCs should charge:

a. Only the RHC reimbursement rate to Medicare and Medicaid
 b. All payors using the same chargemaster
 c. All payors the same chargemaster except indigent patients
 d. As much as possible

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3. RHCs must always have a Face-to-Face encounter to bill Medicare.

a. True
 b. False


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4. RHCs bill Medicare RHC claims for RHC covered services using the following Claim Form?

a. 1500
 b. UB-04

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5. An RHC must include a CG modifier on all claims for RHC covered services.


 _____



QUESTIONS

a. True
b. False

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6. The MSP payer questionnaire questions must be asked


 _____



QUESTIONS

a. Every visit
b. Annually
c. Every 90 days

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7. The following are not RHC covered services


 _____



QUESTIONS

a. Lab tests (except venipuncture)
b. Technical components
c. Hospital services
d. All of the above

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8. CPT Category II Codes can not be included on the UB-04.


 _____



QUESTIONS

a. True
b. False

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9. In most cases Medicare allows an RHC to collect:


 _____



QUESTIONS

a. The Medicare allowable co-payment from the fee-schedule
b. The CO45 Reason Code Amount or Contractual Adjustment
c. 20% of Reasonable Charges from the patient.

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10. Negative Reimbursement refers to the following:

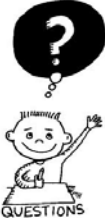
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QUESTIONS

a. Receiving more than the RHC charges from Medicare
b. Medicare recouping money from the RHC due to the deductible at the beginning of the year.
c. The difference between what Medicare Fee for Service would have paid versus what Medicare RHC pays

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11. Influenza and Pneumococcal shots in a Rural Health Clinic are:



- a. Paid using a log on the RHC Cost Report
- b. Billing on the 1500 Form
- c. Billed on the UB-04 incident to an encounter
- d. Billed to Medicare Part D

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12. RHC services that may be billed incident to are:



- a. Venipuncture (CPT 36415)
- b. Shot Administration
- c. Drugs that cannot be self-administered
- d. All of the above

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RHC Billing



<http://www.ruralhealthclinic.com/rhc-billing>

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<http://www.ruralhealthclinic.com/rhc-billing>



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Resources for RHCs

<http://www.ruralhealthclinic.com/rhc-billing>

Healthcare Business Specialists RHC Billing Policies

- [RHC Billing Policy - Introduction Policy 1000](#)
- [RHC Billing Policy - Medicare Secondary Policy 1100](#)

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AFTER THE INSPECTION - MEDICARE & MEDICAID ENROLLMENT

Whew, we passed the RHC inspection with flying colors (hopefully). Now what. Unfortunately, we are entering probably the most frustrating aspect of becoming of an RHC because you are expecting those buckets of RHC money flowing like manna from heaven. Unfortunately, the experience is more like the carrot being placed just out of reach of the mule. Each state is different, so we have prepared several reports for new RHCs depending on the state you are in. The links below will take you to the report for your state.



- [Alabama After the RHC Inspection Report Medicare & Medicaid Enrollment](#)
- [Kentucky After the RHC Inspection Report Medicare & Medicaid Enrollment](#)
- [Ohio After the RHC Inspection Report Medicare & Medicaid Enrollment](#)
- [Mississippi After the RHC Inspection Report Medicare & Medicaid Enrollment](#)
- [West Virginia After the RHC Inspection Report Medicare & Medicaid Enrollment](#)

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RHC Status only affects reimbursement from:

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The Golden Rule

“He who has the Gold makes the rules.”



1. Charge everyone the same.
2. Bill in accordance with the Payor’s rules.

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Reference Materials



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What is a rural health clinic?

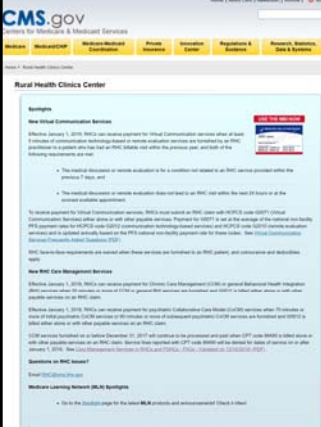
RHC Fact Sheet

<https://www.cms.gov/Outreach-and-Education/Medicaid-Learning-Network-MLN/MLNProducts/downloads/RuralHealthClinicsFactSheet.pdf>

Last Update: May 2019




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CMS Rural Health Clinics Center (Google rural health clinic.asp)

<http://www.cms.gov/Center/Provider-Type/Rural-Health-Clinics-Center.html>

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CMS Rural Health Clinics Center (Google rural health clinic.asp)

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**Medicare Benefit Policy Manual
Chapter 13 - Rural Health Clinic (RHC) and
Federally Qualified Health Center (FQHC) Services**

Table of Contents
Rev. 2017.12-29-19

**New Revised
Chapter 13 Manual**

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c13.pdf>


Transmittals for Chapter 13

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- 10 - RHC and FQHC: General Information
 - 10.1 - RHC: General Information
 - 10.2 - FQHC: General Information
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 - 20.1 - Non-Urbanized Area Requirement for RHCs
 - 20.2 - Designated Shortage Area Requirement for RHCs
- 30 - RHC and FQHC: Staffing Requirements
 - 30.1 - RHC: Staffing Requirements
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- 40 - RHC and FQHC: Visits
 - 40.1 - Location
 - 40.2 - Hours of Operation
 - 40.3 - Multiple Visits on Same Day
 - 40.4 - Global Billing
 - 40.5 - Day Payment Window
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 - 50.1 - RHC: Services
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 - 60.1 - Description of Non-RHC/FQHC: Services
- 70 - RHC and FQHC: Payment Rate
 - 70.1 - RHC: Billing Under the A/R

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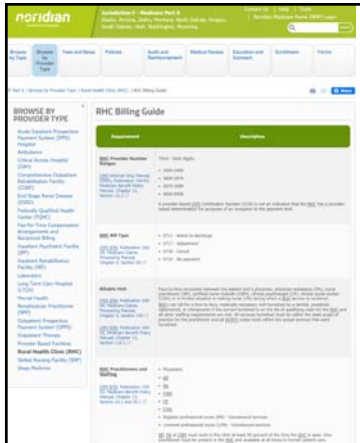


Other Useful Links (2)

Description	Link
RHC Benefits Manual Chapter 9	https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c09.pdf
Medicare Benefit Policy Manual Chapter 15 – Covered Medical and Other Health Services	https://www.cms.gov/media/125221
Medicare Claims Processing Manual Chapter 16 - Laboratory Services	https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c16.pdf

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<https://med.noridianmedicare.com/web/jfa/provider-types/rhc/rhc-billing-guide>

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Resources for RHCs



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NARHC RHC Resources

- RHC TA Forums --
 1. Signup by email to admin@narhc.org and put "Forums" in the subject line
- RHC TA Webinars: Rural Health Information Hub
 - Go to: <https://www.ruralhealthinfo.org/topics/rural-health-clinics/technical-assistance-calls>
- National Association of Rural Health Clinics
 - General questions: rdavis@narhc.org
 - Bill Finerfrock: bf@narhc.org
 - Nathan Baugh: baughn@capitolassociates.com
- Other Resources
 - CMS RHC Website: <https://www.cms.gov/Center/Provider-Type/Rural-Health-Clinics-Center.html>
 - State Offices of Rural Health: <https://nosorh.org/>
 - [CMS Regional Office Rural Health Coordinators](#)

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<https://www.ruralhealthinfo.org/topics/rural-health-clinics/technical-assistance-calls>



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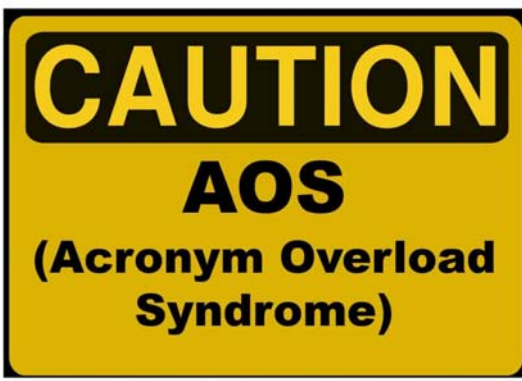
NARHC's Certified Rural Health Clinic Professional (CRHCP) Course
<https://www.web.narhc.org/assnfe/ev.asp?ID=360>

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RHC Coding Certification
<https://www.archprocoding.com/page/GetCertified>



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Definitions of Common Acronyms

Term	Definition
AIR	All Inclusive Rate (the amount the RHC is paid on an interim basis capped at \$86.31 for Independent RHC)
CMS	Centers for Medicare and Medicaid Services
RHC	Rural Health Clinic (PL-95210)
MAC	Medicare Administrative Contractor
MLN	Medlearn Matters


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Definitions of Common Acronyms (2)

Term	Definition
QVL	Qualified Visit List
DDE	Direct Data Entry
CWF	Common Working File
FISS	Fiscal Intermediary Standard System
MSP	Medicare Secondary Payor

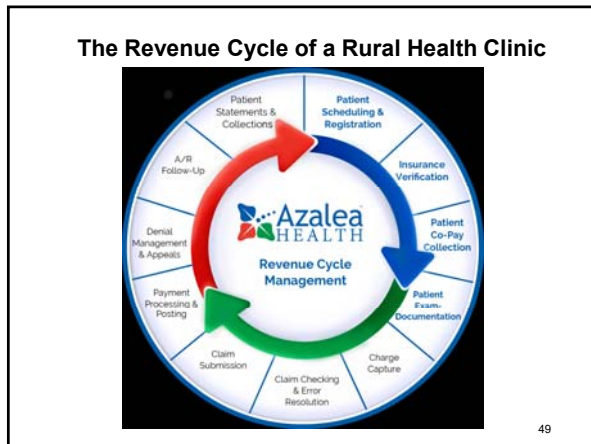
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Definitions of common Acronyms (3)

CMS	Centers for Medicare and Medicaid Services
PTAN	A six Digit Number that is assigned to the RHC by Medicare. It is not used on the UB-04.
NPI	The Nine Digit Number assigned in PECOS and it is used on the UB-04
UB-04	The Electronic Claim formatting used to bill Medicare RHC Claims (ANSI 837 I)
1500	The Electronic Claim formatting used to bill professional services (ANSI 837 P)

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Are RHC Services Part A or B

Part A Coverage

Medicare Part A covers inpatient hospital care, skilled nursing care, hospice care, and care in a Medicare-approved nursing home.

Medicare Part B

Medicare Part B covers outpatient services, including doctor visits, preventive services, durable medical equipment, and certain home health services.

Claims are paid through Part A UB-04

The money comes from the Part B Trust Fund. Patients receive all Part B benefits. Typically HCFA-1500

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Part A versus Part B

RHCs submit claims to a Part A MAC, so they are often referred to as Part A providers; however, they are paid from the Part B trust fund. Beneficiaries must have Part B coverage at the time of service in order to be reimbursed.

It is confusing because sometimes the Part A rules apply and sometimes the Medicare Part B rules apply. **For example, to be paid for an AWV, a rural health clinic must have physician, PA, or NP have a face to face visit, while for Part B a nurse is only required to bill this service.**

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Questions/Thank You

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