

# ForwardHealth **UPDATE**

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## ORIGINATING SITE FEE EXPANSION FOR TELEHEALTH SERVICES

Effective for dates of service on and after March 1, 2022, ForwardHealth is expanding the originating site locations eligible for the originating site fee during a telehealth visit under the permanent policy. The effective date for this permanent policy is not tied to the expiration of the federal public health emergency for permanent telehealth policy described in ForwardHealth Update [2021-50](#), titled “Permanent Telehealth Coverage Policy and Billing Guidelines.”

### Allowable Originating Site Fee Expansion

The originating site is where the member is located during a telehealth visit. Only the provider at the originating site can bill for an originating site fee for hosting the member. The originating site should not use telehealth modifiers on the claims since all services are provided in-person. The distant site is where the provider is located during the telehealth visit. The provider providing health care services to the member via telehealth cannot bill the originating site fee because they are not hosting the member.

## AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

## TO

All Providers, HMOs and Other Managed Care Programs

## QUICK LINKS

- [Telehealth topic \(#510\)](#)
- [ForwardHealth Online Handbook](#)

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The information provided in this ForwardHealth Update is published in accordance with Wis. Stat. § 49.45(61).

Beginning March 1, 2022, the following locations are eligible for the originating site fee under permanent telehealth policy:

- Office or clinic:
  - Medical
  - Dental
  - Therapies (physical therapy, occupational therapy, speech and language pathology)
  - Behavioral and mental health agencies
- Hospital
- Skilled nursing facility
- Community mental health center
- Intermediate care facility for individuals with intellectual disabilities
- Pharmacy
- Day treatment facility
- Residential substance use disorder treatment facility

### **Claim Submission**

Outpatient hospitals, including emergency departments, must bill Healthcare Common Procedure Coding System (HCPCS) procedure code Q3014 (Telehealth originating site facility fee) on an institutional claim form as a separate line item with revenue code 0780. ForwardHealth will reimburse hospitals for the facility fee based on the standard hospital reimbursement methodology.

All other providers should bill HCPCS procedure code Q3014 with a place of service (POS) code that represents where the member is located during the service. The POS must be a ForwardHealth-allowable originating site for HCPCS procedure code Q3014 in order to be reimbursed for the originating site fee. Billing-only provider types must include an allowable rendering provider on the claim form.

Although federally qualified health centers are not directly reimbursed an originating site fee, HCPCS procedure code Q3014 should be billed for tracking purposes and for consideration in any potential future changes in scope.

### **Reimbursement**

To receive reimbursement, the originating site must:

- Utilize an interactive audiovisual telecommunications system that permits real-time communication between the provider at the distant site and the member at the originating site.
- Be in a physical location that ensures privacy.

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- Provide access to broadband internet with sufficient bandwidth to transmit audio and video data.
- Provide access to support staff to assist with technical components of the telehealth visit.
- Be compliant with Health Insurance Portability and Accountability Act of 1996 standards.

Refer to the Telehealth topic (#510) of the ForwardHealth Online Handbook for additional information.

## Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Providers are required to produce or submit documentation, or both, to ForwardHealth upon request. Per Wis. Stat. § [49.45\(3\)\(f\)](#), providers of services shall maintain records as required by the Wisconsin Department of Health Services (DHS) for verification of provider claims for reimbursement. The DHS may audit such records to verify actual provision of services and the appropriateness and accuracy of claims. ForwardHealth may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from the Medicaid program.

## Information Regarding Managed Care Organizations

This Update contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization (MCO). MCOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).