CTRC Digital Health Payment Guide DOOR 1 | August 2024



COVERAGE

Provider Type

Coverage for digital health services can differ widely based on the type of provider, such as Federally Qualified Health Centers (FQHCs) or Rural Health Clinics (RHCs). Knowing these differences is crucial to ensure you meet the necessary requirements for reimbursement. Here are some key factors that may vary by provider type:

- **Service Eligibility:** Not all digital health services are covered for every provider. Confirm whether the service you offer is covered for your specific provider type.
- **Patient Consent:** Some providers may need to obtain specific consent from patients before delivering digital health services.
- **Co-Pays:** Co-pay requirements can differ depending on the provider type. Ensure you're aware of the correct co-pay structure.
- **Site of Service:** The patient's location at the time of service might impact coverage. Different rules may apply based on whether the patient is at home, in a clinic, or elsewhere.
- **Incident-to Billing:** Certain providers may have different rules for incident-to billing, where non-physician practitioners bill under a supervising physician's NPI number.
- **Concurrent Billing:** Some providers may be restricted from billing digital health services alongside other services.
- **Device Requirements:** The type of device used for the service may influence coverage. Some providers might need to use specific modalities or technology to qualify for reimbursement.

Understanding these variations will help you navigate the specific coverage requirements tied to your provider type.

For provider type descriptions, click <u>here</u> to return the main page and then visit **Provider Types**.

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Medi-Cal offers the following provider manuals to help providers further understand coverage payment:

- Medi-Cal Telehealth Provider Manual
- <u>RHC/FQHC Provider Manual</u>
- IHS MOA 638 Clinics Provider Manual

Medi-Cal Managed Care offers the same baseline coverage per provider type as Medi-Cal Fee-for-Service. Individual managed care plans may offer additional coverage. Check with the managed care plan of interest for more information.

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