

FQHC Care Management Billing & Coding



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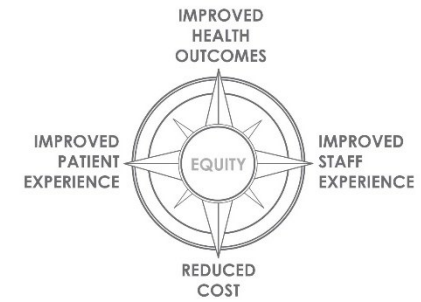
CARE
MANAGEMENT



PAYMENT

Centers for Medicare and Medicaid Services (CMS)

Care Management Services: *Reimbursement Opportunities*



Care Management Services	Reimbursement*
Chronic Care Management (CCM)	\$79.25
Complex Chronic Care Management (CCCM)	\$79.25
Principal Care Management (PCM)	\$79.25
Transitional Care Management (TCM)	\$180.16 \$97.24 (telehealth)
Psychiatric Collaborative Care Model (CoCM)	\$151.23
General Behavioral Health Integration (BHI)	\$79.25
Virtual Communication Services	\$23.88

*Above intended to provide a general picture of reimbursement potential using 2022 CMS reimbursement guidance. See [Reimbursement Tips](#) for more details.

Care Management Services Coding & Billing

Care Management Service	FQHC Provider CPT Codes	What FQHC bills to CMS	What CMS Pays (PFS)
Chronic Care Management (CCM)	<p>99490 (First 20 mins, <i>non-complex</i>; clinical staff) + 99439 (each add'l 20 mins; clinical staff. Only added to <i>non-complex</i>/99490) 99491 (30 mins; physician or QHP only (<i>not to be reported in same month as above clinical staff codes</i>)) +99437 (New!) (each add'l 30 mins; physician or QHP. Only added to 99491)</p>	<p>G0511 <i>General care management, 20 minutes or more of clinical staff time, directed by FQHC practitioner, per calendar month</i></p>	<p>\$79.25</p>
Complex Chronic Care Management (CCCM)	<p>99487 (60+ mins, complex; clinical staff) +99489 (each add'l 30 mins; clinical staff. Only added to complex/99487)</p>		
Principal Care Management (PCM)	<p>99424 (New!) (First 30 mins; physician or QHP) +99425 (New!) (each add'l 30 mins; physician or QHP. Added to 99424) 99426 (New!) (First 30 mins; clinical staff) +99427 (New!) (each add'l 30 mins; clinical staff; added to 99426)</p>		

Behavioral Health Care Management Services

Coding & Billing

Care Management Service	FQHC Provider CPT Codes	What FQHC bills to CMS	What CMS Pays (PFS)
Behavioral Health Integration (BHI)	CPT 99484 (20 minutes of clinical staff time directed by physician or QHP, per calendar month)	G0511 <i>General care management, 20 minutes or more of clinical staff time, directed by FQHC practitioner, per calendar month</i>	\$79.25
Psychiatric Collaborative Care Model (CoCM)	CPT 99492 (Initial CoCM, first 70 mins of BHC manager activities; first calendar month; in consultation with psychiatric consultant; directed by treating physician or QHP) CPT 99493 (Subsequent CoCM; 60 mins; plus as above elements) +99494 (each add'l 30 mins of either of the above in a calendar month. Add on to either 99492 or 99493.)	G0512 <i>Psychiatric CoCM, 60 minutes or more of clinical staff time, directed by FQHC practitioner, including BHC manager in consultation with psychiatric consultant, per calendar month</i>	\$151.23

Transitional Care Management Coding & Billing

Care Management Service	FQHC Provider CPT Codes	What FQHC bills to CMS	What CMS Pays
Transitional Care Management (TCM)	99495 (Moderate Complexity) Communication with patient and/or caregiver within 2 days of discharge; Moderate MDM ; Face-to-face visit, within 14 calendar days of discharge	G0467 ; established FQHC patient visit <i>TCM services are qualified visit codes under G0467</i>	\$180.16 (PPS)
	99496 (High Complexity) Communication with patient and/or caregiver within 2 days of discharge; High MDM ; Face-to-face visit, within 7 calendar days of discharge		
	If services are provided via Telehealth During PHE, G2025 rate trumps non-PHE telehealth rate.	G2025	\$97.24

New! FQHCs may bill for TCM and care management services furnished “for the same beneficiary during the same service period, provided all requirements for each medically necessary service are separately met.”

Virtual Communication Services

Coding & Billing

Care Management Service	FQHC Provider CPT Codes	What FQHC bills to CMS	What CMS Pays (PFS)
Virtual Communication Services	<p>Visit is not related to E/M provided in previous 7 days and not leading to E/M within 24 hours or soonest avail. appt.:</p> <p>G2010 (Remote evaluation of recorded video and/or images submitted by the patient, 24 hour follow-up by FQHC practitioner)</p> <p>G2012 (Virtual check-in by FQHC practitioner; 5-10 minutes of medical discussion)</p>	<p>G0071 <i>Communication technology-based services; 5 or more mins; non-face-to-face patient and FQHC practitioner; OR 5 or more mins or remote evaluation of recorded video and/or image by FQHC practitioner; in lieu of office visit.</i></p>	<p>\$23.88</p>
Digital Assessment Services “E-Visits” (PHE Only)	<p>Online digital E/M service, for an established patient for up to 7 days, cumulative time during the 7 days;</p> <p>CPT 99421 (5-10 minutes)</p> <p>CPT 99422 (11-20 minutes)</p> <p>CPT 99423 (21 or more minutes)</p>		