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March 13, 2019

MEMORANDUM

MEMO NO.
CTR-1901

TO: FQHC Providers - Dental

FROM: Judy Mohr Peterson, PhD
Med-QUEST Division Administrator

SUBJECT: REIMBURSEMENT FOR PROCEDURES RELATED TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHC) TELEDENTISTRY SERVICES

The Med-QUEST Division (MQD) is issuing this memorandum to clarify Medicaid reimbursement for dental care enabled by telehealth at FQHCs. This memorandum is an update to the previous QI-1702A and FFS 17-01A issued on May 2, 2017, on Tele-Health Law (Act 226, SLH 2016) Implementation.

“Telehealth” means the use of telecommunication services to transmit patient health information for interpretation and diagnosis while a patient is at an originating site and the health care provider is at a distant site. It is an enabling technology intended to facilitate access for patients who would otherwise not receive services without the provider being physically present.

1. Eligible Dental Providers for Hawaii Medicaid

Dental providers who are eligible to bill Hawaii Medicaid are also eligible providers to bill for telehealth. The criteria for eligible dental providers are the same regardless whether or not telehealth is utilized (e.g., DDS or DMD).

2. Eligible Dental Sites

The criteria for eligible dental sites are the same regardless whether or not telehealth is utilized. Dental sites that qualify for FQHC Prospective Payment System (PPS) reimbursement also qualify for telehealth enabled PPS reimbursement (e.g., in order to qualify for PPS reimbursement for telehealth enabled services, the patient must be at an eligible FQHC site).

3. Eligible Codes

The eligible codes for reimbursement will remain consistent with Memo QI-1702A (see Attachment A) with the addition of code D0145. All eligible codes shall have the same edits, in terms of frequency and limitations, as described in Chapter 14 of the Medicaid dental provider manual.

4. Billing Procedure

All claims for services provided through telehealth technology must be identified by the applicable teledentistry CDT code D9995 (teledentistry-synchronous) or D9996 (teledentistry-asynchronous). Both D9995 and D9996 have no fees assigned and are used to identify that the dental service was delivered via telehealth. In addition, the following information must be included on the claim form when submitting for PPS:

- a. CDT code D9999 must be used if submitting the claim for PPS payment. This code is used to identify that dental services were provided at an eligible FQHC site.
- b. All claims must be billed using the FQHC provider number.
- c. All dental codes and fees describing the services provided must be included on the claim form.

5. Service Date

MQD recognizes that the reimbursement for radiographic services is traditionally based on the date that the radiograph is read by the dentist providing the diagnosis. However, to minimize confusion that may potentially arise with asynchronous technology, the following protocol will be used when filing claims:

- Only one claim is allowed for each patient visit.

- The service date on the claim is based on the date that the patient was treated at the originating site regardless of whether or not asynchronous or synchronous technology was utilized.
- When asynchronous technology is used and the service date on the claim does not match the clinical notes (patient was seen at the originating site on date 00/00/00 to have x-rays taken, but interpretation of the x-rays to perform the exam was completed on 00/01/00 at the distant site), a notation in clinical records should explain the discrepancy for auditing purposes.

6. Effective Date

Telehealth services rendered by an FQHC that meet criteria above will be eligible for the PPS reimbursement effective July 1, 2018.

Claims must meet the one (1) year filing deadline to be considered for reimbursement.

7. Non-Telehealth Enabled and Telehealth Enabled Services

Hygienists are allowed to perform services beyond what is described in Attachment A of this memo. However, as a non-eligible Medicaid provider, services not enabled through telehealth technology require a face-to-face contact between a patient and dentist for PPS reimbursement.

- a. When telehealth enabled services indicated in Attachment A are performed in conjunction with non-enabled covered dental services on the same service date, reimbursement for the claim will be at the PPS rate only and not in addition to the PPS rate. Claims must indicate all telehealth enabled and non-enabled services performed and follow the billing procedure described in Section #4 above.
- b. When eligible Medicaid procedures which are not listed in Attachment A (e.g., D1120 child prophylaxis) are performed at originating sites by a dental hygienist, but not in conjunction with telehealth enabled services, reimbursement will be at the FFS rate unless a DDS or DMD was also physically present with the patient on the date of service.
- c. All procedures performed at non-eligible FQHC sites will be reimbursed at the FFS rate. For instructions on billing FFS, refer to Section #8 below.

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8. FFS Billing

- a. Claims for services enabled by telehealth technology must be identified by the applicable teledentistry CDT code D9995 or D9996.
- b. All claims should be submitted without the D9999 code.
- c. Each eligible billable procedure and fee must be indicated on the claim form.
- d. FFS billing will need to be submitted under the individual dental provider's number/NPI with payment made to the FQHC. FFS claims cannot be submitted using the FQHC provider number.

Should you have any questions, please contact Dan Fujii, DDS, MQD Dental Consultant at dfujii@dhs.hawaii.gov.

Attachment

Attachment A
CDT Codes approved for Teledentistry

CDT	Description
D0120	Periodic oral evaluation - established patient
D0145	Oral evaluation for a patient under 3 years of age and counseling with caregiver
D0150	Comprehensive oral evaluation - new or established patient
D0210	Intraoral - complete series of radiographic images
D0220	Intraoral - periapical first radiographic image
D0230	Intraoral - periapical each additional radiographic image
D0240	Intraoral - occlusal radiographic image
D0270	Bitewing - single radiographic image
D0272	Bitewing - two radiographic images
D0274	Bitewing - Four radiographic images
D0330	Panoramic radiographic image

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