

Rural Health Clinic (RHC) Billing Guidelines

Quick Reference Guide



The table below lists billing guidelines for Rural Health Clinics (RHC) that serve Superior HealthPlan Medicaid (STAR, STAR Health, STAR Kids, STAR+PLUS) and CHIP members.

Please review the table below for information on processes claims:

Procedures and Services	Billing Guidelines
T1015 (Medicaid and CHIP)	<ul style="list-style-type: none"> • Allows an encounter rate to be reimbursed to the RHC facility. • Only payable to a clinic with appropriate modifiers. • Payable to Location 72.
Texas Health Steps (Medicaid) / Well Child Exams (CHIP)	<p>Texas Health Steps and Well Child Exams must be billed using one of the following E&M Codes and appropriate ICD-10 codes:</p> <ul style="list-style-type: none"> • Bill with E&M Codes: <ul style="list-style-type: none"> ○ 99381-99385 (New Patients) ○ 99391-99395 (Established Patients) ○ 99211 (Texas Health Steps Follow Up Visit) • ICD-10 Diagnosis Codes: <ul style="list-style-type: none"> ○ Z00.110 (Routine newborn exam, birth through seven days) ○ Z00.111 (Routine newborn exam, eight through 28 days) ○ Z00.129 (Routine child exam) ○ Z00.121 (Routine Child exam, abnormal) ○ Z00.00 (General adult exam) ○ Z00.01 (General adult exam, abnormal) • Provider must bill THSTEP modifier to indicate the practitioner who performed the examination in the FIRST position: <ul style="list-style-type: none"> ○ Modifier Practitioner: ○ AM Physician, team member service ○ SA Nurse practitioner rendering service in collaboration with a physician ○ TD Registered nurse ○ U7 Physician assistant • RHC providers must bill Place of Service 72. • Use Benefit Code EP1. • Additional billing guidelines can be found on the: Texas Health Steps QRG (PDF).
Vision (Medicaid and CHIP)	<p>Submit all routine vision and optometry medical claims to Envolve Vision. For additional information, please contact Envolve Vision at: 1-888-756-8768.</p>
Family Planning Services (Medicaid Only)	<ul style="list-style-type: none"> • Must be billed with the most appropriate family planning diagnosis code, benefit code and one of the following E&M codes <i>and</i> appropriate ICD-10 codes: <ul style="list-style-type: none"> ○ E&M Codes <ul style="list-style-type: none"> ▪ 99202-99205 ▪ 99211-99215 ▪ J7296-J7298 ▪ J7300-J7301 ▪ J7307 ○ ICD-10 Codes <ul style="list-style-type: none"> ▪ Z300.11

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	<ul style="list-style-type: none"> ▪ Z300.19 ▪ Z985.1 ▪ Z309. ▪ Z304.9 ▪ Z300.18 ▪ Z304.2 ▪ Z302. ▪ Z308. ▪ Z300.9 ▪ Z300.13 ▪ Z304.30 ▪ Z300.2 ▪ Z300.14 ▪ Z304.9 <ul style="list-style-type: none"> • T1015 may be reimbursed at the encounter rate in a addition to a flat add on fee for Long-Acting Reversible Contraception (LARC) procedures.
Family Planning Services (CHIP Only)	Not a covered benefit.
Sports Physicals (Medicaid and CHIP)	<ul style="list-style-type: none"> • STAR and CHIP – available for members four through 17 years of age. • STAR Health – available for members four through 18 years of age. • One allowed per calendar year. • \$35 reimbursement (no co-pay). • Diagnosis code: Z02.5 • CPT Codes: 99382-99385 or 99392-99395
Lab Services (Medicaid and CHIP)	For freestanding RHCs, all laboratory services provided in the RHC are included in the encounter (unless enrolled in Medicaid as an independent laboratory).
Dental Services (Medicaid and CHIP)	<ul style="list-style-type: none"> • Checkups are required once every 6 months for Medicaid members age six months through 20 years of age. • STAR Health members must receive a checkup within 60 days of eligibility. • Providers must contact Superior’s Medical Management department to request authorization for checkups that result in treatment requiring a facility or anesthesia charges. For additional information, please contact Medical Management at 1-800-218-7508. • Routine dental services are paid through Dental Managed Care Organizations. • Oral Evaluation and Fluoride Varnish Benefits (OEFV) provided as part of a Texas Health Steps checkup are reimbursed by Superior for members six through 35 months of age. <ul style="list-style-type: none"> ○ Must be billed concurrently with a Texas Health Steps exam with 99429 and U5 modifier.