

Federally Qualified Health Centers and Rural Health Clinics Provider Guide

Use this guide as a supplement to Federally Qualified Health Centers and Rural Health Clinics (FQHC-RHC) Oregon Administrative Rules ([Chapter 410 Division 147](#)). See current FQHC-RHC rules for official policies regarding billing.

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Client eligibility and enrollment

Refer to [General Rules](#) and [OHP Rules](#) for information about the service coverage according to OHP benefit plans and the Prioritized List of Health Services.

The [OHP eligibility verification page](#) explains how to verify eligibility using the MMIS Provider Portal, Automated Voice Response, or electronic data interchange (EDI) 270/271 transaction.

Prior authorization- See [OAR 410-147-0060](#) for more information

The following services require prior authorization (PA):

- Durable medical equipment, prosthetics, orthotics and supplies ([DMEPOS – Division 122](#))
- Home health services ([Division 127](#))
- Home Enteral/Parenteral and IV services ([Division 148](#))
- Hospital dentistry and certain dental services ([Division 123](#))
- Physical and occupational therapy ([Division 131](#))
- Private duty nursing ([Division 132](#))
- Speech and hearing services ([Division 129](#))
- Certain [pharmaceutical](#), [medical-surgical](#), [vision](#), and [hospital](#) services

Refer to the program-specific administrative rules and supplemental information for specific details and required forms. Submit prior authorization (PA) requests using the [MMIS Provider Portal \(instructions\)](#) or the [MSC 3971](#).

- For coordinated care organization (CCO) members, contact the CCO for PA instructions.
- For complete information about how to submit a PA request to OHA, see the [Prior Authorization Handbook](#).

Billing references - See [OAR 410-147-0120](#) for more information

Bill according to the provider guidelines for the services requested, including the specific procedure codes, documentation or other requirements (e.g., prior authorization) outlined for each program.

- Dental Services ([Division 123](#))
- Home Enteral/Parenteral Nutrition and IV Services ([Division 148](#))
- Home Health Services ([Division 127](#))

- Hospice Services ([Division 142](#))
- Hospital Services ([Division 125](#))
- Medical-Surgical Services ([Division 130](#))
- Medical Transportation Services ([Division 136](#))
- Physical and Occupational Therapy Services ([Division 131](#))
- Private Duty Nursing Services ([Division 132](#))
- Speech-Language Pathology, Audiology and Hearing Aid Services ([Division 129](#))
- Visual Services ([Division 140](#))

Billing for FQHC/RHC services

Use the MMIS Provider Portal professional claim, 837P or CMS-1500. For Medicare/Medicaid claims, use the MMIS Provider Portal professional claim, 837P or [OHP 505](#) for services not covered by Medicare.

- **Procedure codes:** Use the most appropriate procedure code(s) as described in [410-147-0160](#) and program-specific rules. Use required modifiers when appropriate.
- **Rendering provider ID:** If the clinic has received written approval for multiple clinic numbers, use the performing provider number as the rendering provider ID and the main FQHC/RHC provider number as the billing provider ID.
- **Billing instructions** are available on the [OHP provider billing tips page](#).
- **For information about electronic billing**, go to the [Electronic Business Practices page](#).

Claim status and adjustments

For information about the paper remittance advice and other ways to get claim status information via the MMIS Provider Portal, AVR or EDI 835 (Electronic Remittance Advice), go to the [OHP remittance advice page](#).

For information about how to adjust a claim, refer to the [Claim Adjustment Handbook](#).

Vaccines for Children program

The Vaccines for Children program (VFC) supplies federally-purchased, free vaccines for eligible children in public and private practices.

- Eligible patients are under 19, enrolled in Medicaid or the Oregon Health Plan, uninsured or American Indian/Alaskan Native.
- For more information, go to the [VFC website](#).
- To enroll in the VFC program, call 971-673-0300 and request a “VFC Recruitment Packet.”

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the OHA Medicaid Division at Medicaid.Programs@odhsoha.oregon.gov.

Medicaid Division
Policy and Fee-for-Service Operations
[FQHC-RHC Services Program](#)

