

## AHCCCS Proposal for FQHC/RHC Processing

### Proposed Systems Approach:

- AHCCCS will establish a unique provider type for FQHCs and a unique provider type for RHCs; Provider types 29 and C2
- AHCCCS is requesting that all FQHCs and RHCs register and obtain a unique AHCCCS Provider ID for each site under these applicable provider types
- To facilitate this registration and AHCCCS claims processing, AHCCCS is requesting that FQHCs or RHCs have a unique NPI for each site(not already associated with any other active AHCCCS Provider ID) to be on file and utilized for related claims submissions
- AHCCCS will provide a streamlined approach for provider registration
- FQHC and RHC claims will identify the unique NPI of the FQHC or RHC as the service/rendering provider
- FQHCs and RHCs can be reimbursed on same day for each “unique” visit, i.e. a separate service not within same discipline (e.g. dental and medical); no change from the current process
- FQHCs and RHCs will bill AHCCCS and its Contractors for each “unique” visit utilizing appropriate CPT Evaluation and Management codes and including all related services for the visit utilizing a 1500 claim format (standard practice for most facilities)
- FQHCs and RHCs will be paid an all inclusive "visit" rate per visit that will serve a full reimbursement for the individual visit regardless of other related services for the visit
- Visit payments will be paid associated with the billed E&M “visit” codes and any other related services will be valued at \$0.00
- AHCCCS will implement a unique fee schedule (equivalent to the PPS rate) for each FQHC and RHC where visit E&M codes will reflect the appropriate per visit rate effective for the date of service and in which all other related service codes will reflect a rate of \$0.00 (due to bundling under the per visit rate as noted above)
- Current FQHC Pharmacy (340B) billing will remain as is under the Pharmacy provider type, etc... and will not be impacted by this change
- AHCCCS will continue to have a quarterly payment and reconciliation process but the amounts that are part of the quarterly payments will be updated to reflect that health plans will be paying considerably more to avoid recoupments as part of the reconciliation