IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

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IHCP updates FQHC and RHC encounter codes

Effective July 28, 2025, the Indiana Health Coverage Programs (IHCP) will include the Current Procedural Terminology

(CPT^{®1}) codes and Current Dental Terminology (CDT^{®2}) code in Table 1 as valid encounter codes for federally qualified health center (FQHC) and rural health clinic (RHC) claims. This update applies retroactively to claims with dates of service (DOS) on or after **Jan. 1, 2025**.

Beginning July 28, 2025, FQHC and RHC providers may submit claims for these codes with DOS on or after Jan. 1, 2025. The claim must also include the T1015 or D9999 encounter code and meet all other billing requirements described in the <u>Federally Qualified Health Centers and Rural Health Clinics</u> provider reference module. For the telehealth codes,



the appropriate place of service (POS) code and modifier should be included as described in the *FQHC* and *RHC*Telehealth Services section of the Telehealth and Virtual Services module.

FQHC or RHC claims for these codes with DOS on or after Jan. 1, 2025, that previously denied may be resubmitted. Claims submitted beyond the original 180-day filing limit must include a copy of this bulletin (first page only) as an attachment and must be filed within 180 days of the publication date. For managed care member claims, providers should work with the respective managed care entities (MCEs) for resubmission of claims.

The IHCP will remove the nationally deleted codes in Table 2 from the list of valid FQHC and RHC encounter codes. This change applies retroactively to claims with DOS after **Dec. 31, 2024**. This change will have no impact on previously adjudicated claims.

The list of valid FQHC and RHC encounter codes is reviewed periodically to account for new and end-dated CPT and CDT codes, and is available on the Myers and Stauffer at 317-846-9521.

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Table 1 – Procedure codes added as valid FQHC and RHC encounter codes effective for DOS on or after Jan. 1, 2025

Procedure code	Code description
92137	Imaging of retina with optical coherence tomography angiography
96041	Counseling for genetic testing provided by a genetic counselor, each 30 minutes of total time on the date of encounter
98000	New patient synchronous audio-video visit with straightforward medical decision making, if using time 15 minutes or more
98001	New patient synchronous audio-video visit with low medical decision making, if using time 30 minutes or more

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²CDT copyright 2024 American Dental Association. All rights reserved. CDT is a registered trademark of the American Dental Association.

Table 1 – Procedure codes added as valid FQHC and RHC encounter codes effective for DOS on or after Jan. 1, 2025 (Continued)

Procedure code	Code description
98002	New patient synchronous audio-video visit with moderate medical decision making, if using time 45 minutes or more
98003	New patient synchronous audio-video visit with high medical decision making, if using time 60 minutes or more
98004	Established patient synchronous audio-video visit with straightforward medical decision making, if using time 10 minutes or more
98005	Established patient synchronous audio-video visit with low medical decision making, if using time 20 minutes or more
98006	Established patient synchronous audio-video visit with moderate medical decision making, if using time 30 minutes or more
98007	Established patient synchronous audio-video visit with high medical decision making, if using time 40 minutes or more
98008	New patient synchronous audio-only visit with straightforward medical decision making and 10 minutes or more of medical discussion, if using time 15 minutes or more
98009	New patient synchronous audio-only visit with low medical decision making and 10 minutes or more of medical discussion, if using time 30 minutes or more
98012	Established patient synchronous audio-only visit with straightforward medical decision making and 10 minutes or more of medical discussion, if using time 10 minutes or more
98013	Established patient synchronous audio-only visit with low medical decision making and 10 minutes or more of medical discussion, if using time 20 minutes or more
0936T	Light therapy of retina, single session
D7259	Nerve dissection

Table 2 – Procedure codes no longer valid as FQHC and RHC encounter codes, effective for DOS after Dec. 31, 2024

Procedure code	Code description
0567T	Blockage of fallopian tubes with implants inserted through cervix
D2941	Interim therapeutic restoration – primary dentition

QUESTIONS?

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