

Urgent Telehealth Fix Needed for Community Health Centers SFY 2023 – 2024

<u>THE ASK:</u> Include Part OO of the Assembly One-House Health Bill in the Enacted Budget to ensure all providers with bundled payments – Federally Qualified Health Centers (FQHCs), Article 31 clinics, and Article 32 clinics, receive full Medicaid telehealth payment parity.

Why Current Law Doesn't Work

- The FY22 enacted budget language states no PHL Article 28 provider conducting services via telehealth may bill a *facility fee* when both the patient and provider are outside of the facility.
 - MHL Article 31 and 32 clinics bill using Ambulatory Patient Groups ("APGs"), a bundled payment rate similar to the FQHC bundled threshold visit PPS rate. A31 and 32 clinics are statutorily exempt from the facility fee restriction, and instead are receiving their standard bundled rate whether the service is provided via telehealth or in person, and regardless of where the patient or provider is located.
 - The same exception should apply to FQHCs that bill a bundled payment rate like Article 31 and 32 clinics. There are no separate professional fee schedules or facility fees that FQHCs may bill.
- Although FQHCs do not bill a facility fee, DOH has interpreted the FY22 law as prohibiting the
 Department from paying FQHCs the full in person rate when neither the patient nor provider are
 in clinic.
 - Accordingly, per DOH recently released <u>guidance</u>, effective May 11, DOH will pay FQHCs **ONE-THIRD** of their in-person rate if FQHCs deliver services via telehealth and neither the patient nor provider are onsite.
 - This will result in a major financial loss for the clinics.

What will happen if Part OO is not included in the Enacted Budget:

- 66% of current FQHC behavioral health providers would leave.
- 62% of FQHCs would delay expansion, curtail, or further reduce behavioral health services.
- Behavioral health visits will be reduced by 28%
- 78% of FQHCs said it would be difficult to hire new providers because available candidates want to work from home.
- 78% of FQHCs said the number of behavioral health visits their FQHCs could accommodate would be reduced.