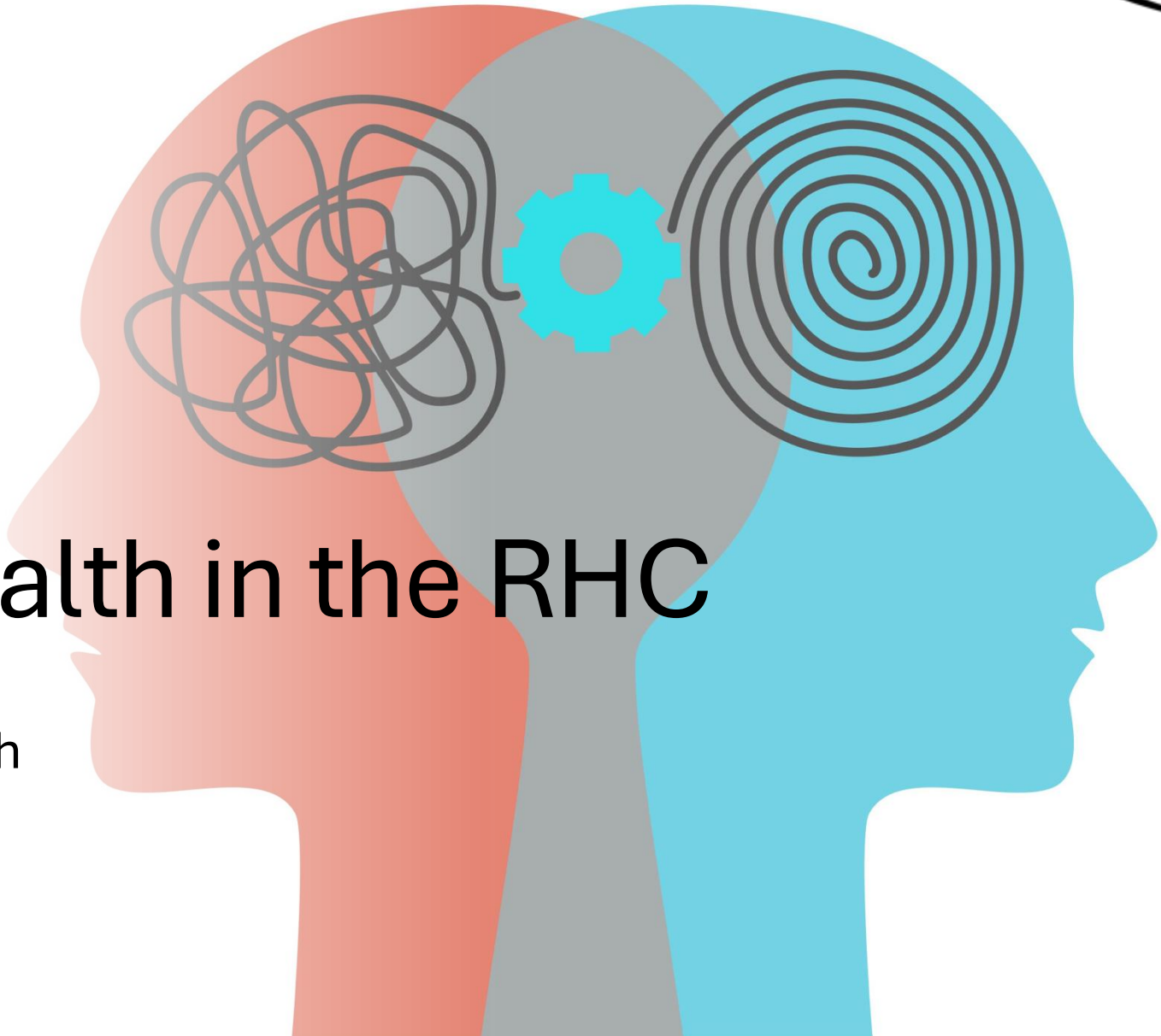


# FAQ: Behavioral Health in the RHC

Oregon Office of Rural Health  
April 21, 2025



# Medicare First

Are mental health services  
considered RHC encounters?

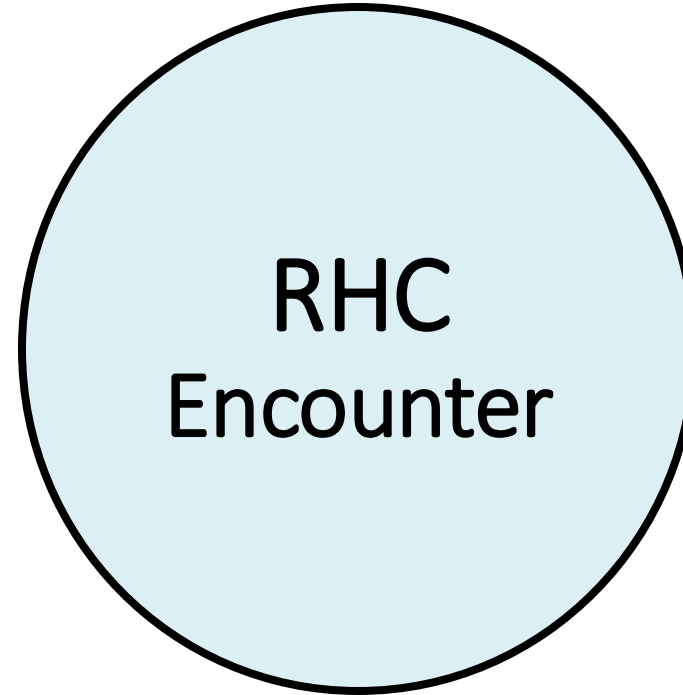
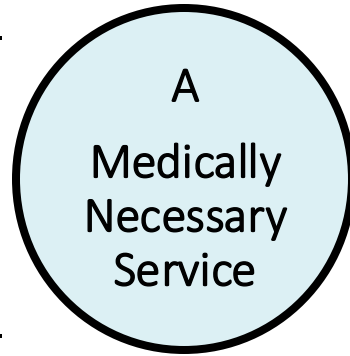
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# Mental Health Face-to-Face Encounters

40 - RHC and FQHC Visits (Rev.12832; Issued: 09-12-24;  
Effective:01-01-24; Implementation:10-14-24)

***An RHC or FQHC visit is a medically-necessary medical or mental health visit, or a qualified preventive health visit.***

*Medicare  
LCD/NCD  
Covered  
Services*



Mental Health encounters may  
be furnished via telehealth  
beginning 2022 are considered  
face to face.

Reimbursement for an  
encounter is based off the  
All-Inclusive Rate which is  
calculated each year on  
the cost report.

CMS reimburses 80% of  
the AIR after the  
deductible is met and  
there is an additional  
patient responsibility  
amount/coinsurance which  
is 20% of the total charges.

## **170 - Mental Health Visits (Rev. 12832; Issued: 09-12-24; Effective:01-01-24; Implementation:10-14-24)**

A mental health visit is a medically-necessary face-to-face encounter between an RHC or FQHC patient and an RHC or FQHC practitioner during which time one or more RHC or FQHC mental health services are rendered.

Effective January 1, 2022, a mental health visit is a face-to-face encounter or an encounter furnished using interactive, real-time, audio and video telecommunications technology or audio-only interactions in cases where the patient is not capable of, or does not consent to, the use of video technology for the purposes of diagnosis, evaluation or treatment of a mental health disorder.

Who are qualified mental  
health providers in an RHC?

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# RHC Mental Health Providers

The visit must be a face-to-face (one-on-one) encounter between the patient and **a physician, NP, PA, CNM, CP, CSW, MFT or MHC\*** during which time one or more RHC or FQHC services are rendered.

Physician: Psychiatrist, Physician with Mental Health Specialty

NP: Psychiatric-Mental Health Nurse Practitioner (PMHNP)

CP: Clinical Psychologist

CSW: Clinical Social Worker

MFT: Marriage & Family Therapist (added 1/2024)

MCH: Mental Health Counselor (added 1/2024)



# Examples of Mental Health NPIs

\*not all-inclusive list

# Psychiatry Physician

Code	2084P0800X
Name	Psychiatry
Definition	A Psychiatrist specializes in the prevention, diagnosis, and treatment of mental disorders, emotional disorders, psychotic disorders, mood disorders, anxiety disorders, substance-related disorders, sexual and gender identity disorders and adjustment disorders. Biologic, psychological, and social components of illnesses are explored and understood in treatment of the whole person. Tools used may include diagnostic laboratory tests, prescribed medications, evaluation and treatment of psychological and interpersonal problems with individuals and families, and intervention for coping with stress, crises, and other problems.
Notes	<i>Source: The American Board of Psychiatry and Neurology, Inc. <a href="http://www.abpn.com">www.abpn.com</a> [1/1/2007: new definition]</i>
Effective Date	4/1/2003
Last Modified Date	1/1/2007

# Addiction Medicine (Psychiatry & Neurology) Physician

Code	2084A0401X
Name	Addiction Medicine
Definition	A doctor of osteopathy board eligible/certified in the field of Psychiatry by the American Osteopathic Board of Neurology and Psychiatry is able to obtain a Certificate of Added Qualifications in the field of Addiction Medicine
Notes	<i>Source: American Osteopathic Board of Neurology and Psychiatry, 2007 [1/1/2008: definition added, source added; 7/1/2011: modified source]</i>  <i>Additional Resources: <a href="http://www.osteopathic.org/certification">http://www.osteopathic.org/certification</a></i>
Effective Date	4/1/2003
Last Modified Date	7/1/2011

# Addiction Psychiatry Physician

Code	2084P0802X
Name	Addiction Psychiatry
Definition	Addiction Psychiatry is a subspecialty of psychiatry that focuses on evaluation and treatment of individuals with alcohol, drug, or other substance-related disorders, and of individuals with dual diagnosis of substance-related and other psychiatric disorders.
Notes	Source: <i>The American Board of Psychiatry and Neurology, Inc.</i> <a href="http://www.abpn.com">www.abpn.com</a> [1/1/2007: new definition]
Effective Date	4/1/2003
Last Modified Date	1/1/2007

# Behavioral Neurology & Neuropsychiatry Physician

Code	2084B0040X
Name	Behavioral Neurology & Neuropsychiatry
Definition	Behavioral Neurology & Neuropsychiatry is a medical subspecialty involving the diagnosis and treatment of neurologically based behavioral issues.
Notes	<i>Source: National Uniform Claim Committee. [1/1/2012: new] Additional Resources: American Academy of Neurology, <a href="http://www.aan.com">www.aan.com</a>.</i>
Effective Date	4/1/2012

# Geriatric Psychiatry Physician

Code	2084P0805X
Name	Geriatric Psychiatry
Definition	Geriatric Psychiatry is a subspecialty with psychiatric expertise in prevention, evaluation, diagnosis and treatment of mental and emotional disorders in the elderly, and improvement of psychiatric care for healthy and ill elderly patients.
Notes	<i>Source: The American Board of Psychiatry and Neurology, Inc. <a href="http://www.abpn.com">www.abpn.com</a> [1/1/2007: new definition]</i>
Effective Date	4/1/2003
Last Modified Date	1/1/2007

# Psychiatric/Mental Health Nurse Practitioner

Code	363LP0808X
Name	Psychiatric/Mental Health
Definition	Definition to come...
Effective Date	4/1/2002

# Clinical Neuropsychologist

Code	103G00000X
Name	Clinical Neuropsychologist
Definition	A clinical psychologist who applies principles of assessment and intervention based upon the scientific study of human behavior as it relates to normal and abnormal functioning of the central nervous system. The specialty is dedicated to enhancing the understanding of brain-behavior relationships and the application of such knowledge to human problems.
Notes	<i>Source: American Psychological Association, <a href="http://www.apa.org">www.apa.org</a> [1/1/2007: title modified, 1/1/2019: definition modified]</i>
Effective Date	4/1/2002
Last Modified Date	1/1/2007



# Clinical Social Worker

Code	1041C0700X
Name	Clinical
Definition	A social worker who holds a master's or doctoral degree in social work from an accredited school of social work in addition to at least two years of post-master's supervised experience in a clinical setting. The social worker must be licensed, certified, or registered at the clinical level in the jurisdiction of practice. A clinical social worker provides direct services, including interventions focused on interpersonal interactions, intrapsychic dynamics, and life management issues. Clinical social work services are based on bio-psychosocial perspectives. Services consist of assessment, diagnosis, treatment (including psychotherapy and counseling), client-centered advocacy, consultation, evaluation, and prevention of mental illness, emotional, or behavioral disturbances.
Notes	<i>Source: National Association of Social Workers, 2008 [7/1/2009: definition modified]</i>
Effective Date	4/1/2002

# Marriage & Family Therapist

Code	106H00000X
Name	Marriage & Family Therapist
Definition	A marriage and family therapist is a person with a master's degree in marriage and family therapy, or a master's or doctoral degree in a related mental health field with substantially equivalent coursework in marriage and family therapy, who receives supervised clinical experience, or a person who meets the state requirements to practice as a marriage and family therapist. A marriage and family therapist treats mental and emotional disorders within the context of marriage and family systems. A marriage and family therapist provides mental health and counseling services to individuals, couples, families, and groups.
Effective Date	4/1/2002

# Mental Health Counselor

Code	101YM0800X
Name	Mental Health
Definition	Definition to come... <b>See 42 CFR §410.54</b>
Effective Date	4/1/2002

How does the taxonomy code  
have to do with billing mental  
health services?

---

Revenue Code	CPT Example	Taxonomy Code
521, 522, 524, 525	99214	Medical Taxonomy Code
900	90834	Mental Health Taxonomy Code

- A mismatch between revenue codes/CPT® and taxonomy code can create an edit or a denial.
- For providers who are dually certified, for example, a NP who is both family medicine and mental health, the NPI may need to be toggled.
- Some payers may have their own rules on services by provider type.

How does a mental health  
provider enroll as a Medicare  
provider?

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# **MEDICARE ENROLLMENT APPLICATION**

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**PHYSICIANS AND  
NON-PHYSICIAN PRACTITIONERS**

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**CMS-855I**

<https://www.cms.gov/medicare/cms-forms/cms-forms/downloads/cms855i.pdf>

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## SECTION 2: PERSONAL IDENTIFYING INFORMATION *(Continued)*

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### H. ELIGIBLE PROFESSIONAL OR OTHER NON-PHYSICIAN SPECIALTY TYPE

If you are an eligible professional, check the appropriate box below to indicate your specialty.

**Check only one of the following:** If you have multiple non-physician specialty types, you must complete and submit a separate CMS-855I application for each non-physician specialty type.

All individuals must meet specific licensing, educational, and work experience requirements. Include copies of educational and certification information with this application. If you need information concerning the specific requirements for your specialty, contact your designated MAC.

- |   |   |
|---|---|
| <input type="checkbox"/> Anesthesiology Assistant                                       | <input type="checkbox"/> Physical Therapist in Private Practice<br>(See section 2J)   |
| <input type="checkbox"/> Certified Nurse Midwife (CNM)                                  | <input type="checkbox"/> Physician Assistant  |
| <input type="checkbox"/> Certified Registered Nurse Anesthetist (CRNA)                  | <input type="checkbox"/> Psychologist, Clinical (See section 2I)  |
| <input type="checkbox"/> Clinical Nurse Specialist (CNS) (See section 2K)               | <input type="checkbox"/> Psychologist Billing Independently (See section 2I2)   |
| <input type="checkbox"/> Clinical Social Worker   | <input type="checkbox"/> Qualified Audiologist  |
| <input type="checkbox"/> Mass Immunization Roster Biller                                | <input type="checkbox"/> Qualified Speech Language Pathologist  |
| <input type="checkbox"/> Nurse Practitioner (See section 2K)                            | <input type="checkbox"/> Registered Dietitian or Nutrition Professional   |
| <input type="checkbox"/> Occupational Therapist in Private Practice<br>(See section 2J) | <input checked="" type="checkbox"/> Undefined Non-Physician Practitioner Specialty<br>(Specify): <b>Mental Health Counselor</b> |



# Who is a Mental Health Counselor?

## § 410.54 Mental health counselor services.

- (a) *Definition: mental health counselor.* For purposes of this part, a *mental health counselor* is defined as an individual who—
- (1) Possesses a master's or doctor's degree which qualifies for licensure or certification as a mental health counselor, clinical professional counselor, professional counselor under the State law of the State in which such individual furnishes the services defined as mental health counselor services;
  - (2) After obtaining such a degree, has performed at least 2 years or 3,000 hours of post master's degree clinical supervised experience in mental health counseling in an appropriate setting such as a hospital, SNF, private practice, or clinic; and
  - (3) Is licensed or certified as a mental health counselor, clinical professional counselor, professional counselor by the State in which the services are performed.

**Does not include a LMSW**

How does an RHC report  
face-to-face mental health  
encounters?

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## RHC Encounter: In- Person Mental Health Visit Only

<b>FL 42 Rev Code</b>	<b>FL43 Description</b>	<b>FL44 HCPCS</b>	<b>FL 45 Date of Service</b>	<b>FL46 Units</b>	<b>FL47 Total Charge</b>
0900	Psych Eval	90791 CG	11/01/2024	1	200.00
0001	Total Charge				200.00

Provider performed a Psychiatric Diagnostic Evaluation (\$200) on the date of service. Total RHC services would be \$200. The patient would be responsible for a \$40.00 co-insurance payment.

<i><b>Mental Health Services</b></i>	
<b>HCPCS Code</b>	<b>Short Descriptor</b>
90791	Psych diagnostic evaluation
90792	Psych diag eval w/med srvc
90832	Psytx pt&/family 30 minutes
90834	Psytx pt&/family 45 minutes
90837	Psytx pt&/family 60 minutes
90839	Psytx crisis initial 60 min
90845	Psychoanalysis

Can an RHC report a medical and mental health visit for the same patient on the same day?

---

## RHC Encounter: Medical Visit and Mental Health Visit on Same Date of Service

FL 42 Rev Code	FL43 Description	FL44 HCPCS	FL 45 Date of Service	FL46 Units	FL47 Total Charge
0521	OV New	99204 CG	11/01/2024	1	175.00
0900	Psych Eval	90791 CG	11/01/2024	1	200.00
0001	Total Charge				375.00

The physician performed a sick visit (\$175) and the behavioral health provider performed a psych eval (\$200) on the same date of service. **Both services would be reported separately with the –CG modifier. No roll-up.** Total RHC services would be \$375.00. The patient would be responsible for a \$75.00 coinsurance.

.

40.3 - Multiple Visits on Same Day (Rev. 12832; Issued: 09-12-24; Effective:01-01-24; Implementation:10-14-24) Except as noted below, encounters with more than one RHC or FQHC practitioner on the same day, or multiple encounters with the same RHC or FQHC practitioner on the same day, constitute a single RHC or FQHC visit and is payable as one visit.

Exceptions are for the following circumstances only:

- The patient, subsequent to the first visit, suffers an illness or injury that requires additional diagnosis or treatment on the same day (for example, a patient sees their practitioner in the morning for a medical condition and later in the day has a fall and returns to the RHC or FQHC). In this situation only, the FQHC would use modifier 59 on the claim and the RHC would use modifier 59 or 25 to attest that the conditions being treated qualify as 2 billable visits;
- **The patient has a medical visit and a mental health visit on the same day (2 billable visits);**
- For RHCs only, the patient has an initial preventive physical exam (IPPE) and a separate medical and/or mental health visit on the same day (2 or 3 billable visits);

# How does an RHC report mental health telehealth visit?

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# Mental Health Telemedicine Example

## RHC Claims for Mental Health Visits via Telecommunications Example

Revenue Code	HCPCS Code	Modifiers
0900	90834 (or other qualifying mental health visit payment code)	95 (audio-video) or FQ <b>or 93</b> (audio-only) CG (required)

- Mental Health Codes on the QVL
- Revenue Code = 900
- Distant Site Telehealth
- New Modifiers for Medicare: 95 for audio/visual and FQ or 93 for audio only
- Reason for audio-only should be included in the note.
- Telemedicine consent each visit
- Visit and associated costs are included on cost report
- Is an encounter; pays at the AIR.



## RHC Mental Telemedicine Audio-Visual Service

FL 42 Rev Code	FL43 Description	FL44 HCPCS	FL 45 Date of Service	FL46 Units	FL47 Total Charge
0900	Psych Eval	90791 CG 95	04/01/2025	1	200.00
0001	Total Charge				200.00

Provider performed a Psychiatric Diagnostic Evaluation (\$200) on the date of service. Total RHC services would be \$200. The patient would be responsible for a \$40.00 co-insurance payment. This claim example represents a behavioral health visit occurring in the RHC. See other examples of mental health telehealth. Mental health provider will have a mental health individual taxonomy code.



## RHC Mental Telehealth Audio-Only

FL 42 Rev Code	FL43 Description	FL44 HCPCS	FL 45 Date of Service	FL46 Units	FL47 Total Charge
0900	Psych Eval	90791 CG 93	04/01/2025	1	200.00
0001	Total Charge				200.00

Provider performed a Psychiatric Diagnostic Evaluation (\$200) on the date of service. Total RHC services would be \$200. The patient would be responsible for a \$40.00 co-insurance payment. This claim example represents a behavioral health visit occurring in the RHC. See other examples of mental health telehealth. Mental health provider will have a mental health individual taxonomy code.

# In-Person Visit Requirement Waived

*An in-person visit within six months of an initial Medicare behavioral/mental telehealth service, and annually thereafter, is not required through September 30, 2025. For FQHCs and RHCs, the in-person visit requirement for mental health services furnished via communication technology to beneficiaries in their homes is not required until January 1, 2026.\**

*\*<https://telehealth.hhs.gov/providers/telehealth-policy/telehealth-policy-updates#rural-health>*

# What about medication management?

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## **170 - Mental Health Visits**

**(Rev. 12832; Issued: 09-12-24; Effective:01-01-24; Implementation:10-14-24)**

Medication management, or a psychotherapy “add on” service, is not a separately billable service in an RHC or FQHC and is included in the payment of an RHC or FQHC medical visit.

For example, when a medically-necessary medical visit with an RHC or FQHC practitioner is furnished, and on the same day medication management or a psychotherapy add on service is also furnished by the same or a different RHC or FQHC practitioner, only one payment is made for the qualifying medical services reported with a medical revenue code.

For FQHCs, an FQHC mental health payment code is not required for reporting medication management or a psychotherapy add on service furnished on the same day as a medical service.

Benefit Policy Manual, Chapter 13, Section 170

# Be careful not to double-dip

- Clinical documentation should adequately support separate medical and mental health services when performed on the same day/same patient.
- Two different providers in most situations
- If adjusting medications related to interactions/contraindications between medical treatments/mental health treatments, the reason should be clear in the note.

# What about behavioral health in Oregon RHCs?

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## 410-147-0120

### Division Encounter and Recognized Practitioners

(h) Other specialized nurse practitioners;

(i) Registered nurses — may accept and implement orders within the scope of their license for client care and treatment under the supervision of a licensed health care professional recognized by the Division in this section and who is authorized to independently diagnose and treat according to appropriate State of Oregon's Board of Nursing OARs;

(j) Psychiatrists;

(k) Licensed Clinical Social Workers;

(L) Clinical psychologists;

(m) Acupuncturists — Refer to OAR chapter 410, division 130 for service coverage and limitations;

(n) Licensed professional counselor;

(o) Licensed marriage and family therapist; or

(p) Other health care professionals providing services within their scope of practice and working under the supervision requirements of:

(A) Their individual provider's certification or license; or

(B) A clinic's mental health certification or alcohol and other drug program approval or licensure by the Addictions and Mental Health Division (AMH) (see OAR 410-147-0320).

## Division 147

### FQHC AND RHC SERVICES

#### 410-147-0140

##### Multiple Encounters

(1) An encounter is defined in OAR 410-147-0120.

(2) The following services may be considered as multiple encounters when two or more service encounters are provided on the same date of service with distinctly different diagnoses (see OAR 410-147-0120 and individual program rules listed below for specific service requirements and limitations):

(a) Medical section (3) of this rule and OAR chapter 410, division 130);

(b) Dental (OAR 410-147-0125, and OAR chapter 410, division 123);

(c) Mental Health — If a client is also seen for a medical office visit and receives a mental health diagnosis, then the client contacts are a single encounter (Refer to the Division of Addictions and Mental Health (AMH) for the appropriate OARs);

(d) Addiction and Alcohol and Chemical Dependency — If a client is also seen for a medical office visit and receives an addiction diagnosis, then the client contacts area single encounter (Refer to AMH's OARs);

# Different Provider/Different Dx

410-147-0140  
Multiple Encounters

(4) A mental health encounter and an addiction and alcohol and chemical dependency encounter provided to the same client on the same date of service will only count as multiple encounters when provided by two separate health professionals and each encounter has a distinctly different diagnosis.

<https://secure.sos.state.or.us/oard/displayChapterRules.action?selectedChapter=87>

# Telehealth



The screenshot shows the CCHP Medicaid Telehealth Overview page. At the top left is a circular profile picture of a woman and a child. To the right of the profile picture is the word "Medicaid" in large black font. Further right is the CCHP logo, which consists of an orange sunburst icon followed by the text "CCHP". In the top right corner is a blue upward-pointing chevron icon. Below the header, on the left side, is a vertical list of menu items: "OVERVIEW", "DEFINITIONS", "LIVE VIDEO", "STORE-AND-FORWARD", "REMOTE PATIENT MONITORING", "EMAIL, PHONE & FAX", "CONSENT REQUIREMENTS", "OUT OF STATE PROVIDERS", and "MISCELLANEOUS". The "OVERVIEW" item is highlighted in a darker blue. To the right of the menu, the text "Last updated 03/22/2025" is displayed in a smaller font. Below this is the word "Overview" in a large, bold, dark blue font. Underneath the title is a paragraph of text: "OR Health Authority covers telehealth and telemedicine services. The definitions of which encompass video conferencing, store-and-forward imaging, streaming media including services with information transmitted via landlines, and wireless communications, including the Internet and telephone networks. Services must be culturally and linguistically appropriate."

**Medicaid**

 **CCHP**

**OVERVIEW**

**DEFINITIONS**

**LIVE VIDEO**

**STORE-AND-FORWARD**

**REMOTE PATIENT MONITORING**

**EMAIL, PHONE & FAX**

**CONSENT REQUIREMENTS**

**OUT OF STATE PROVIDERS**

**MISCELLANEOUS**

*Last updated 03/22/2025*

## Overview

OR Health Authority covers telehealth and telemedicine services. The definitions of which encompass video conferencing, store-and-forward imaging, streaming media including services with information transmitted via landlines, and wireless communications, including the Internet and telephone networks. Services must be culturally and linguistically appropriate.

<https://www.cchpca.org/oregon/>

What have your experiences  
been with behavioral health  
services?

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# Questions and Comments



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