



## Special Clinics

Special Clinics authorized by the Division of Health Care Financing and Policy (DHCFP) include Community Health, Family Planning, Federally Qualified Health Centers (FQHCs), HIV, TB, Methadone, Rural Health (RHC), Special Children's clinics, School Based Health Centers (SBHC) and Substance Abuse Agency Model (SAAM) clinics. Please see the Billing Guide for [Provider Type 17 \(Specialty 179\) – Special Clinics: School Based Health Centers \(SBHC\)](#) for specific information for this specialty.

Please see the Billing Guide for [Provider Type 17 \(Specialty 215\) – Special Clinics: Substance Abuse Agency Model \(SAAM\)](#) for specific information for this specialty.

### Policy

Nevada Medicaid policy for Special Clinics is located in [Medicaid Services Manual \(MSM\)](#) Chapter 600 - Physicians. For Specialty 215 (SAAM), see MSM Chapter 400, Attachment B Policy #4-04.

### Covered Services

Special Clinic services covered by Medicaid include methadone drug maintenance, therapy, immunizations, testing, family planning, nutrition and other services.

### *Smoking Cessation Counseling for Pregnant Women*

As of October 13, 2011, CPT codes 99406 and 99407 are used to bill smoking cessation counseling for pregnant women only. For all other recipients, these services are billed using the appropriate Evaluation and Management (E&M) office visit code.

### Prior Authorization

Special Clinic services do not require prior authorization (PA). For Specialty 179 (SBHC), refer to the Billing Guidelines for Provider Type 17 Specialty 179 and MSM Chapter 600. For Specialty 215 (SAAM), refer to the Billing Guidelines for Provider Type 17 Specialty 215 and MSM Chapter 400, Attachment B Policy #4-04.

### Notes

Medicaid pays for **Medicare** coinsurance and deductible up to the Medicaid allowable amount.

Medicaid is the **payer of last resort with the exception of family planning services**. Family planning services may be billed directly to Medicaid without billing the third party.

**Rural Health Clinics and FQHCs** are paid an encounter rate.

For FQHC encounter billing, please complete the CMS-1500 Claim Form and bill accordingly:

- DENTAL services: CPT code 41899 (Unlisted procedure, dentoalveolar structures)
- MEDICAL services: HCPCS code T1015 (Clinic visit/encounter, all inclusive).

Up to two times per calendar year the RHC/FQHC may bill for additional reimbursement for Family Planning Education when it is provided and documented in the patient's record, along with the encounter rate. Use CPT



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code 99401 (Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual).

For **anesthesia** services, see the [Anesthesia](#) billing instructions document on the HP Enterprise Services website (located in the "Billing Instructions (by Service Type)" table at the bottom of the Billing Information webpage).