



## Limited Services Clinics Payment Policy

### **Policy**

Fallon Community Health Plan (FCHP) reimburses covered services provided by contracted Limited Services Clinics to FCHP members.

### **Definitions**

*Limited Services Clinics* are walk-in medical clinics offering limited services. They treat basic illnesses such as strep throat, bronchitis, minor rashes and burns, and ear, eye and sinus infections.

### **Benefits application**

- FCHP Direct Care/FCHP Select Care
- Commonwealth Care
- Companion Care
- FCHP MassHealth
- Major Medical
- Fallon Preferred Care
- Fallon Senior Plan™
- Fallon Senior Plan Preferred
- Summit ElderCare®
- NaviCare<sup>SM</sup>

### **Reimbursement**

FCHP reimburses contracted Limited Service Clinics at a standard rate that includes both facility and professional services. Facility charges will be rejected if billed separately.

### **Referral/notification/prior authorization requirements**

Summit ElderCare requires prior authorization for all non-emergency outside services. Please contact the referring Summit ElderCare PACE site for assistance. A consult report should be provided to the Summit ElderCare PCP for all authorized visits.

PCP referrals are not required. Contracted Limited Services Clinics document each member's visit using electronic medical records. The member's chart will be sent electronically, mailed or faxed to the member's PCP after their visit. The member will also receive a printed copy for their own records.

NaviCare requires that detailed notes summarizing the member's visit be sent electronically, mailed or faxed to NaviCare after the visit. The fax number is:1-508-368-9030, and the mailing address is NaviCare, Attn: Clinical Program Director, P.O. Box 15121, Worcester, MA 01615-9831. Please contact the NaviCare Clinical Program Director at 1-877-700-6996 with questions.

## **Billing/coding guidelines**

Limited Services Clinics must submit claims on a CMS 1500 form. Claim lines billed with non-standard codes will deny.

## **Place of service**

This policy applies to services rendered in Limited Services Clinics.

## **Policy history**

Origination date:	05/01/2010
Previous revision date(s):	N/A
Connection date & details:	March 2010 - new policy

*This payment policy has been developed to provide information regarding general billing, coding and documentation guidelines for FCHP. Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member individual benefit plans may apply and this policy is not a guarantee of payment. FCHP reserves the right to apply this payment policy to all FCHP companies and subsidiaries.*