



**Louisiana Department of Health
Health Plan Advisory 18-18
November 1, 2018**

Update to Medicaid Policy: Reimbursement for Screening and Diagnostic Mammographies for FQHC and RHC Providers

Effective with dates of service on Jan. 1, 2019, screening and diagnostic mammographies provided on or after Jan. 1, 2019 will be reimbursed at the fee for service rate on file for the Medicaid covered procedure codes at Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC). These rates are on the laboratory and radiology fee schedule at www.lamedicaid.com.

The FQHC or RHC will submit the medical encounter and required detail line(s) for services provided to the recipient on the date of service according to current policy. The procedure code for the appropriate service payable outside of the PPS rate will be included in the detail lines. The FQHC or RHC will be reimbursed the fee for service rate for these services. Reimbursement will also be made for the associated medical encounter on the claim.

The Louisiana Department of Health expects the managed care organizations (MCO) to update their systems to accommodate these changes. Any claims paid at the incorrect rate for dates of service on or after Jan. 1, 2019 must be adjusted and reimbursed at the appropriate rate including interest, if applicable. All MCOs shall have completed their system updates to accommodate these changes along with publishing of written instructions to the providers on how to submit claims for adjustment no later than 60 days from the date of this advisory. Providers must be notified of the MCO process for recycling claims at the correct rate and the recycling of claims must be completed no later than 15 days after the system update.

Direct questions regarding this advisory to Irma.Gauthier2@la.gov.