1. If my organization receives a request from a federally qualified health center (FQHC) or a rural health center (RHC) to enroll with us, and they are not a West Virginia Children’s Health Insurance Program (WVCHIP) FQHC or RHC approved organization, are there special requirements?

**Answer:** Yes, there are special instructions you must follow for a FQHC/RHC approval for a non-enrolled WVCHIP FQHC or RHC; the organization must notify the WVCHIP who will initiate the process to establish a WVCHIP PPS Encounter rate. Also, the MCO should identify a contact person’s name, phone number, and email address when submitting an organization’s request to enroll with WVCHIP.

2. Are the WVCHIP PPS rates established in the same manner as WV Medicaid’s?

**Answer:** WVCHIP has its own PPS encounter rate setting process and calculations based upon Medicare cost reports. The WVCHIP contracts with a vendor to establish an organization’s PPS encounter rate and effective date. The WVCHIP, your organization and the FQHC/RHC requesting enrollment will receive the formal PPS Encounter Rate Assignment letter, approved by WVCHIP. WVCHIP will notify the requesting MCO to proceed with provider enrollment.

3. If a WVCHIP previously approved and enrolled FQHC or RHC organization submits a request to add a new HRSA approved location, does my organization need to notify the WVCHIP of the request?

**Answer:** Yes, the MCO must follow the same process established in # 1 in this document. Please refer to the WVCHIP PPS Billing Guideline Policy at [https://chip.wv.gov/providers/Pages/FQHCRHCPPS.aspx](https://chip.wv.gov/providers/Pages/FQHCRHCPPS.aspx). Once a rate is established for the new location and NPI number, the updated WVCHIP Master Rate Schedule will be sent electronically to the requesting MCO, with the new FQHC/RHC or new location.

4. Where do I find CPT codes that are included and excluded from an encounter?

**Answer:** MCOs can find the most recent 2020 codes located at [https://chip.wv.gov/providers/Pages/FQHCRHCPPS.aspx](https://chip.wv.gov/providers/Pages/FQHCRHCPPS.aspx).

5. How do I contact the WVCHIP if I have questions after reviewing the FQHC/RHC Billing Guideline and the PPS Rate Setting Policy?

**Answer:** You should submit an email with your questions to chipmc@wv.gov, noting in the subject field “FQHC/RHC Question” and the WVCHIP will provide answers or clarifications for you.

6. How are FQHC/RHC rates updated? What if a FQHC/RHC has an encounter rate update for “change in scope”?

**Answer:** FQHC/RHC PPS Encounter Rates are updated annually in January each year. WVCHIP will send the participating MCOs an updated WVCHIP Master Rate Schedule in either late December/early January each year. FQHC/RHCs are notified of these rate updates by letter from WVCHIP. FQHC/RHC must contact WVCHIP with a request to review an encounter rate for “change in scope”. If an updated rate is approved, the WVCHIP Master Rate Schedule is updated with the new rate and effective date. Claims must be paid with this new rate as of the effective date. Sometimes this requires reprocessing of previously paid claims to assure the new rate is paid according to policy.

The primary resource to access additional and more specific information regarding the WVCHIP’s FQHCs and RHCs policies and guidelines is located at [https://chip.wv.gov/providers/Pages/FQHCRHCPPS.aspx](https://chip.wv.gov/providers/Pages/FQHCRHCPPS.aspx).