





Medicare Coverage at Federally Qualified Health Centers for Primary Care Services

Background

Health Care Centers that are approved by the Centers for Medicare & Medicaid Services (CMS) as Federally Qualified Health Centers (FQHCs) can provide medical services to People with Medicare. The main purpose of FQHCs under the original Medicare Program is to enhance primacy care services in underserved urban and rural areas. However, anyone on Medicare may use an FQHC and always ask if the FQHC accepts Medicare.

Coverage

- Doctor in-person and telehealth services
 - Plus ordering/referring of laboratory, medical supplies and specialist visits
- Preventive services and wellness visits
 - Routine and diagnostic screenings, wellness checks, tobacco counseling and certain vaccinations
 flu, pneumonia, hepatitis B and COVID-19
- Chronic care management
 - Advanced care planning, diabetes self-management training and medical nutrition therapy
- Medical social services and behavioral health services

Payment

- No Part B deductible is applied to Medicare benefits
- Medicare beneficiary pays the 20% coinsurance amount of the FQHC's charge for the specific payment code or the national encounter based-rate, whichever is less
- FQHCs may waive collection of all or part of coinsurance amounts

Where to Locate a Medicare-Approved FQHC

• Go to https://www.hrsa.gov/, scroll down to the middle of the web page, click on Health Centers, then scroll down to the bottom of the web page to locate Find a Health Center and then enter your ZIP code, city or state.

Resource Information

- 1-800-MEDICARE (1-800-633-4227)
- https://www.medicare.gov and https://www.NGSMedicare.com
- https://www.hrsa.gov
- https://www.cms.gov, type Federally Qualified Health Centers in the search box



