



April 01, 2025

RE: Important Update - DHCS Telehealth Modifier Requirements for FQHC, RHC, IHS-MOA, and Tribal FQHC Providers

Dear Valued Provider,

This notice is to inform you of important changes to telehealth billing requirements as mandated by the Department of Health Care Services (DHCS), effective September 30, 2024.

New Telehealth Modifier Requirements

Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), Indian Health Service – Memorandum of Agreement (IHS-MOA), and Tribal FQHC providers must include the following telehealth modifiers on the "informational line" of claims for telehealth services:

- Modifier 93: For synchronous telemedicine services provided via telephone or other real-time interactive audio-only telecommunications system
- Modifier 95: For synchronous telemedicine services provided via real-time interactive audio and video telecommunications system
- Modifier GQ: For asynchronous Store and Forward telecommunications systems

These modifiers must be used with appropriate billing codes when submitting claims to L.A. Care Health Plan (L.A. Care).

Additional Information

L.A. Care will generate a remediation report related for all impacted claims that were erroneously denied with dates of service on or after January 1, 2023. This applies to claims that were appropriately submitted based on the guidance outlined in the previously published article, [“Telehealth Modifiers for FQHC, RHC, IHS-MOA, and Tribal FQHC Providers.”](#) Adjustments will be made as appropriate.

If you have any questions about these requirements or need additional clarification, please contact your L.A. Care Provider Account Manager.

Thank you for your continued partnership in providing quality healthcare services to our members.

Sincerely,

L.A. Care Health Plan