

Date: 1/22/2024

Medi-Cal

Important Provider Notice: #453 - updated

Subject: Street Medicine – Effective 10/1/2023

Background and Definition:

Street medicine refers to a set of health and social services developed specifically to address the unique needs and circumstances of individuals experiencing unsheltered homelessness, delivered directly to them in the own environment. The fundamental approach of street medicine is to engage people experiencing unsheltered homelessness exactly where they are and on their own terms to maximally reduce or eliminate barriers to care access and follow-through. Typically, street medicine is provided to an individual experiencing unsheltered homelessness in their lived environment, places that are not intended for human habitation. Health care services provided at shelters, mobile units/recreational vehicles (RV), or other sites with a fixed, specified location do not qualify as street medicine. It is considered mobile medicine, as it requires people experiencing unsheltered homelessness to visit a health care provider's fixed, specified location. Mobile units/RVs that go to the individual experiencing unsheltered homelessness in their lived environment ("on the street") is considered street medicine. This benefit is in accordance with the Department of Health Care Services (DHCS) All Plan Letter (APL) 22-023.

Billing Requirements:

Providers rendering street medicine are to bill PHC for appropriate and applicable services within their scope of practice and will be paid on a fee for service (FFS) basis. All services for street medicine MUST be billed on a CMS-1500 form or the electronic equivalent (837P v.5010 transaction). This includes claims submitted by FQHC, RHC and IHS providers.

The following is also required when billing street medicine claim(s) to PHC:

- Bill using CPT and/or HCPCS codes for applicable and appropriate services that are within the provider's scope of practice.
- Use location code **27 (outreach site/street)** or 16 (temporary housing) for all street medicine services.
- Use diagnosis code Z00.8 (Encounter for other general examination) or Z01.89 (Encounter for other specified special examinations) in the first (1st) position. All other applicable diagnosis codes should be billed in subsequent positions.
- Attach modifier –SE (State and/or federally-funded programs/services) to ALL service lines billed. For procedure codes without a modifier requirement, place –SE at 1st position; for procedure codes with a modifier requirement, place –SE in 2nd or subsequent position.
- We also encourage providers to bill their taxonomy code in box 24Ja (or the electronic equivalent) to avoid possible delays in processing.

Street medicine services do not require prior authorization to bill for services.

For questions regarding these billing requirements, please contact the PHC Claims Department at (800) 863-4155.

Resources:

APL 22-023, Street Medicine Provider: Definitions and Participation in Managed Care,

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-023.pdf>

DHCS Medi-Cal Billing Guidelines for Street Medicine

https://files.medi-cal.ca.gov/pubsdoco/newsroom/newsroom_31526.aspx

APL 21-009 (*Revised*), Collecting Social Determinants of Health (SDOH) Data – Attachment A ICD-10-CM Codes

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf>

APL 24-001 Street Medicine Provider: Definitions and Participation in Managed Care

<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL%202024/APL24-001.pdf>