

Medicaid Reimbursement for Community Health Worker Services

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COLORADO

Department of Health Care
Policy & Financing



Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.



Welcome & Introductions

The Department of Health Care Policy and Financing (HCPF) oversees and operates Health First Colorado (Colorado's Medicaid program).



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Meeting Norms

- To reduce background noise, all participants are muted upon entering the webinar.
- Participants are encouraged to use the Q & A pod or raise your hand using Zoom's toolbar to ask your question verbally. We will also be using Zoom polls during today's event.
- As this meeting may be recorded, please refrain from providing personally identifiable information or protected health information.
- Today's event will include a Spanish interpreter and automated captions. Both accessibility services are available through your Zoom toolbar.



Objectives

After this presentation, stakeholders will have a better understanding of the following:

- Referral and Documentation Requirements
- Covered Diagnosis and Medical Necessity
- The Process for Complaints and Grievances
- CBO Enrollment Update
- Helpful Resources

During this presentation, stakeholders will have the opportunity to provide feedback on:

- How would you or your agency handle the documentation requirements?
- What would be helpful resources for your or your agency to provide and be reimbursed for CHW services to Medicaid members?

Agenda

Agenda Items

1	Welcome/Introductory Comments	HCPF Staff
2	Meeting Norms and Structure	HCPF Staff
5	Referral Requirements	HCPF Staff
6	Documentation Requirements	HCPF Staff
7	Covered Diagnosis and Medical Necessity	HCPF Staff
8	Complaints	HCPF Staff
9	CBO Enrollment	HCPF Staff
10	Helpful Resources	HCPF Staff
11	Stakeholder Comments/Questions	All
12	Wrap-up and Next Steps	HCPF Staff



What have we covered so far?

Stakeholder Meeting #1 (January 9)	Stakeholder Meeting #2 (January 23)	Stakeholder Meeting #3 (February 13)	Stakeholder Meeting #4 (February 27)
<ol style="list-style-type: none"> 1. Who is HCPF? 2. What is Medicaid/Health First Colorado? 3. SB 23-002 Overview and Timeline 4. Federal Authority Options 5. CHW Registry, Training, and Enrollment 	<ol style="list-style-type: none"> 1. Topics 1-5 from Stakeholder Meeting #1 2. Patterns in CMS Coverage 3. Self-Management Education Codes 4. The Spectrum of CHW Services 	<ol style="list-style-type: none"> 1. Results from January Meetings 2. Federal Authority Decision 3. Preventative Services 4. Medical Necessity 5. Definition of CHW Services 6. Supervision of CHWs 7. Limitations and Rates 	<ol style="list-style-type: none"> 1. Billing Guidance & Requirements 2. Complaints 3. CHW Agency Enrollment & Reimbursement 4. Helpful Resources



Referral Requirements

Example From South Dakota

Documentation

The referring provider and CHW agency must maintain documentation of the referral. Documentation may be electronic or in writing.

Transferring Documentation

Following the provision of the specified services for the patient, the CHW agency should transmit the documentation resulting from the service to the referring provider within a reasonable time frame.

Follow-Up

The CHW agency should specifically identify needs for additional care and treatment, including follow-up care.

Keeping Record

After the documentation has been received from the CHW agency, the referring provider should incorporate the information into the patient's medical record.

Each service provided by a CHW agency must be documented. Services that are not documented are considered to have not occurred and are subject to recoupment of payment in the event of an audit.



Documentation Requirements

Example from South Dakota

The following documentation must be maintained by the CHW agency:

- Type of service performed including whether it was an individual or group service
- A summary of services provided including the objectives in the CHW Service Plan the service is related to
- Recipient receiving services
- Number of group numbers if a group service was provided
- Date of Service
- Location of service delivery including delivery method
- Time the service begins and ends
- Name of the individual providing the service
- CHW signature

It is also recommended that the CHW obtain a signed and dated statement/form from the recipient or their parent/legal guardian that indicates services were provided on that date.

Covered Diagnosis *Diagnosis Codes*

- Diagnosis codes will be required when submitting a claim.
 - *It is the responsibility of the provider to determine the correct diagnosis code.*
 - Almost any diagnosis code for a chronic disease may be used
 - Z codes (range Z55-65) can be used to identify a social determinant of health as a diagnosis code
- One source for ICD-10 codes can be found [here](#).

Billing Breakdown

Example CHW Billing

01	Self-Management Education Codes (discussed Jan 23rd)	<ul style="list-style-type: none">• Codes could include CPT 98960-98962• Use these codes to report educational and training services to an individual or group of patients (or caregivers on how to self manage their condition or disorder)
02	Diagnosis Codes (discussed on slide 12)	<ul style="list-style-type: none">• Also known as Z Codes• Range from Z55-Z65 and can be used to identify a social determinant of health as a diagnosis code• Almost any diagnosis code for a chronic disease may be used
03	Modifiers (have not discussed, will provide updates as necessary)	<ul style="list-style-type: none">• Because there is crossover between services that CHWs provide and other career fields (ex. Lactation Consultants), these modifiers may be available to distinguish between benefits

Medical Necessity

- Must reasonably expect to prevent, diagnose, cure, correct, reduce, or ameliorate the pain and suffering, or the physical, mental, cognitive, or developmental effects of an illness, condition, injury, or disability.
- Must meet the following:
 - Accepted as professional standards for health care in the U.S.
 - Clinically appropriate (type, frequency, extent, site, and duration)
 - Is not primarily for the economic benefit of the provider or for the convenience of the client, caretaker, or provider
 - Care is delivered in the most appropriate setting required by the client's condition
 - Cannot be experimental or investigational
 - Can not be more costly than other effective treatment options.

How Will Medical Necessity for CHW Services Be Determined?

Determination of medical necessity criteria for CHW services may be based on the presence of one or more of the following:

Physician order and diagnosis of one or more chronic health conditions (including behavioral health)

Presence of medical indicators of rising risk of chronic disease (ex. elevated blood pressure, elevated glucose levels, etc. that indicate risk but do not yet warrant a diagnosis of a chronic condition)

Presence of known risk factors including tobacco use, excessive alcohol use, and/or drug misuse

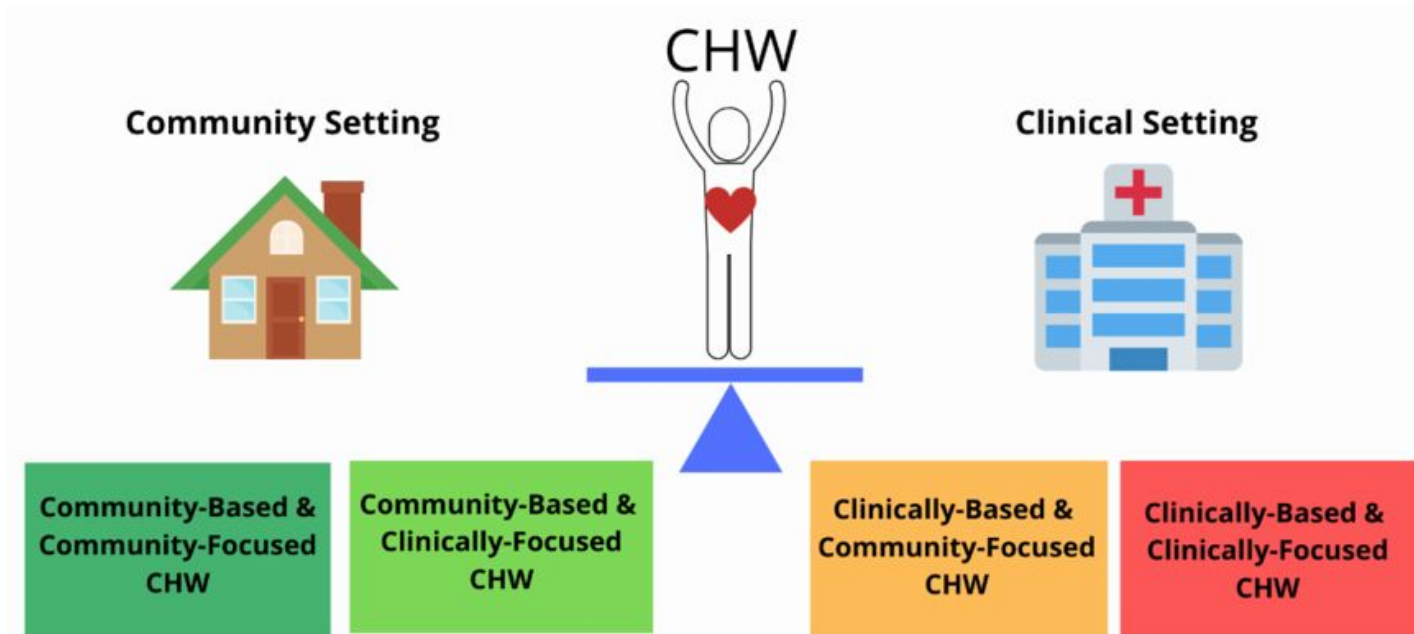
Cultural and language communication barriers results in the individual not following a medical professional's recommendation

Geographic distance from health services results in inability to attend medical appointments or pick-up prescriptions

Complaints

- All members have the right to complain about anything (this is also a grievance)
 - If the complaint is about the coverage or the pre-approval of services, that is an appeal and is NOT related to the complaint process at HCPF.
 - For example, members can complain if they are unhappy with their service or think they were treated unfairly.
- For more information about the complaint process, please visit [Chapter 7](#) of the Health First Colorado Member Handbook.

The Spectrum of CHW Service



Community-Based Organizations- *potential new provider type in our system*

Current Enrollment Provider Types in Other States:

- Hospital (PT 01)
- Physician (PT 04)
- Clinic (PT 16)
- Non-Physician Practitioner- Group (PT 25)
- Federally Qualified Health Center (PT 32)
- Dialysis Center (PT 33)
- Home and Community Based Services (PT 36)
- Rural Health Center (PT 45)
- Birthing Center (PT 58)
- Indian Health Services (PT 61)

CHW Agency Enrollment Types

	Individual within a Group	Group
What is it?	This enrollment type is for an individual that renders services but does not bill HCPF/Colorado Medicaid directly. These providers must be associated with a Group that submits claims on their behalf.	This enrollment type is a clinic or practice that will submit claims on behalf of one or more practitioners enrolled as an individual within a group. Income is reported to the IRS under business EIN.
Must Haves	<ul style="list-style-type: none"> - Must use a SSN or ITIN as the Tax ID Type - Must associate to at least one “Group” provider enrollment type - The group the individual will affiliate to must have an approved enrollment before the individual can enroll 	<ul style="list-style-type: none"> - Must use EIN as the Tax ID type <ul style="list-style-type: none"> - Billing/direct pay entity - Must have at least one enrolled “individual within a group” practitioner associated (this association is indicated on the application) <ul style="list-style-type: none"> - Associations may be added, removed, or changed after enrollment by logging into the provider web portal
Examples	<ul style="list-style-type: none"> - A community health worker who is employed by a clinic/health care organization who bills on behalf of the CHW. 	<ul style="list-style-type: none"> - A community based organization who does food security work who also employs CHWs (new enrollment type)

What documents do CHW Agencies need to enroll with HCPF?

**NPI
(National Provider
Identifier)**

Taxonomy

**EIN or SSN
(EIN for agency, SSN for
individual)**

Completed W-9

**Malpractice or
Liability Insurance**

Banking Information

**Ownership/Controlling
Interest Information**

**Conviction Disclosure
Information**

**CHW Registry
Confirmation**

Fingerprinting

Background Check

We will be discussing what **fingerprinting and background checks** look like with CMS. These would likely check to see if the CHW has a violent history (ex. murder/homicide), isn't on the Inspector General's list of excluded individuals, and isn't on the Sex Offender Registry.

Helpful Resources



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Resources on CHW Webpage



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Community Health Workers

The Colorado Legislature passed [Senate Bill 23-002](#) in May 2023 to add community health worker (CHW) services as a Health First Colorado (Colorado's Medicaid program) benefit starting July 1, 2025. HCPF will seek federal authorization from the federal Centers for Medicare and Medicaid Services (CMS) by July 1, 2024, to add CHW services as a covered benefit. HCPF will also conduct a series of stakeholder meetings to get input on how to meet federal requirements to add CHW services.

Timeline

- Stakeholder Webinar #1: January 9, 2024 at 10 a.m. [English](#) | [Spanish](#)
- Stakeholder Webinar #2: January 23, 2024 at 10 a.m. [English](#) | [Spanish](#)
- Draft proposal for federal authorization
- Stakeholder Webinar #3: February 13, 2024 at 10 a.m.
- Stakeholder Webinar #4: February 27, 2024 at 10 a.m.
- Submission deadline to CMS: July 1, 2024
- CMS approval, system updates, provider communications: 2024-2025
- Benefit Go-Live: July 1, 2025

Click [here](#) to register for the stakeholder meetings.

Resources

- [Stakeholder Feedback Form](#)

Missed a webinar? Slides can be found here

All resources can be found here

[HCPF CHW Webpage](#)



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Fact Sheet Example

HEALTH SYSTEMS DIVISION
Medicaid Programs



Oregon Medicaid Fee-for-Service reimbursement for Community Health Workers

The Oregon Health Authority (OHA) encourages Community Health Workers (CHWs) to become eligible to support clients enrolled in the Oregon Health Plan (OHP).

This fact sheet explains how CHWs can qualify to serve OHP clients – and be reimbursed for services – through the following process.

Step 1: Become a certified and registered Community Health Worker (CHW).

Services you provide as a CHW can be paid for by the Oregon Health Plan – if you are certified and registered as a Traditional Health Worker (THW).

- **What is a Traditional Health Worker?** Traditional Health Workers (THWs) is the Oregon umbrella term for five categories and sub categories of workers: Community Health Workers (CHWs), Peer Support Specialists (PSS) (e.g., addictions and mental health family and youth), Peer Wellness Specialists (PWS) (e.g., addictions and mental health family and youth), Personal Health Navigators (PHN) (also known as Patient Health Navigator), and Doula. THWs in Oregon are integrated and embedded in various organizational settings which includes behavioral health agencies, county health departments, federally qualified health centers, tribal health centers, government agencies, primary care clinics, hospitals, rural health clinics and community-based organizations. THWs provide critical services that include outreach and case management, mobilizing patients, making community and cultural connections, coordinating care, assisting in system navigation, and providing health promotion and providing coaching and support.
- **What is a Community Health Worker?** CHWs are a type of THW. CHWs have expertise or experience in public health; work in an urban or rural community; and to the extent practicable, share ethnicity, language, socioeconomic status and life experiences with the residents of the community where the worker serves. A CHW is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. Please see [Community Health Worker Scope of Practice](#).
- **You must be a certified CHW provider to be eligible for OHP payment.** To learn more about CHW training, certification and registration, visit the OHA Office of Equity and Inclusion's Traditional Health Worker Program.
- [How To Become a Certified Traditional Health Worker](#)
- [OEI Traditional Health Worker Registry](#)
- [Traditional Health Worker Resources, Policies, and Laws](#)
- [THW-Approved Training Programs and Continuing Education](#)

Step 2: Become an Oregon Medicaid provider.

Once you are registered with the Traditional Health Worker Registry, your next step is to obtain a unique National Provider Identifier (NPI) and enroll as an Oregon Medicaid provider:

- **To obtain an NPI:** Apply on [the National Plan and Provider Enumeration System website](#). For reference, the taxonomy code for CHW is 172V00000X.
- **To enroll as an Oregon Medicaid provider:** complete form [OHP 3113](#). Enter provider type 13, specialty code 601. Include your NPI and a copy of your OEI certification. To learn more, visit the [OHP provider enrollment page](#).

Learn more about Oregon Medicaid reimbursement for CHWs

Oregon Administrative Rule

The requirements for Community Health Workers in terms of Certification and Provider Registry Enrollment; Certification Curriculum Standards; Training; Standards of Professional Conduct are addressed in OAR [Chapter 410, Division 180](#).

Medicaid State Plan

- General Information
<https://www.oregon.gov/oha/HSD/Medicaid-Policy/Pages/State-Plans.aspx>
- Relevant Information: Other Practitioner Services/Non-licensed practitioners (page 376)
<https://www.oregon.gov/oha/HSD/Medicaid-Policy/StatePlans/Medicaid%20State%20Plan.pdf>
- Relevant Excerpt
CHW "must be supervised by existing licensed practitioners and perform services for them within the licensed practitioner's scope of practice. Licensed health providers are responsible for the work that they order, delegate or supervise when health care professionals work under their supervision. The state assures that only the Licensed Health Care Professional will bill for services. For purposes of this State Plan a Licensed Health Care Professional (LHCP) includes Physicians*, Certified Nurse Practitioners, Physician Assistants, Dentists, Dental hygienists with an Expanded Practice Permit, Ph.D. Psychologists, PsyD Psychologists, LCSW Social Workers and Licensed Professional Counselors. (*covered in the state plan under physician services)". . . . a) Community Health Worker services are provided under the supervision of LHCP; . . . The state assures that only the Licensed Health Care Professional will bill for services."

Fee Schedule Information

Medical/Dental Fee Schedule and Behavioral Fee Schedule
<https://www.oregon.gov/oha/HSD/OHP/Pages/Fee-Schedule.aspx>

- Note: For providers reimbursed at an encounter rate methodology (such as FQHCs, RHCs, and tribal/urban Indian health programs), these codes may be reimbursable under the applicable encounter rate rather than under fee schedule pricing.

Billing Information

Community Health Workers will be enrolled as "non-payable rendering provider". CHWs must work and bill "under the supervision of a licensed provider". When the CHW is the rendering provider, OHA will allow the code to pay. The billing provider must be a clinic or supervising medical provider.

Oregon Medicaid reimbursement for community health worker services Last updated 09/01/2020

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What Other Resources Would Help You?

When thinking about things that would help you or your organization, what would you like to see HCPF create?

Keep in mind that we are planning on releasing a fact sheet and a FAQ document in Spring of 2024.



HCPF Resources

Title & Link of Resource	Description
HCPF Community Health Worker FAQ	Will include questions from stakeholder meetings and from inquiries about specifics to the CHW benefit
HCPF How To Check a Member's Eligibility	Step-by-step quick guide for verifying member eligibility and co-pay amount
HCPF's Timely Filing FAQ	Webpage for frequently asked questions focused on common issues providers ask when trying to better understand the rules and exemptions for timely filing.
HCPF Member Benefits	List of benefits that are available to Health First Colorado members
HCPF Co-Pay Policy	Health First Colorado's co-pay page including maximums and co-pay amounts

Other Helpful Resources

Toolkits and Resource Collections

Title of Resource and Link	Description
Rural Community Health Workers Toolkit	Targets audiences that are rural organizations, has resources and information focused on developing, implementing, evaluating, and sustaining CHW programs
On the Front Lines of Health Equity: Community Health Workers	Provides an overview to the benefits of CHW programs as well as planning and implementing a CHW program including certification and program funding
Resources for Community Health Workers	From the National Heart, Lung, and Blood Institute, this is a collection of resources that includes a heart health manual, picture cards and handouts with key heart messages, and planning, implementation, and evaluation tools that help assess the effectiveness of a program.
Community Health Worker Resources	From the CDC, a collection of resources for CHWs and those who work closely with them. Topics include asthma, cancer, cardiovascular disease, diabetes, general resources, infectious disease, injury prevention, obesity, and physical activity.

Other Helpful Resources

Continuing Education Courses

Title of Resource and Link	Description
<p><u>Community Health Workers</u></p>	<p>From the American Diabetes Association, a free continuing education opportunity to increase understanding of diabetes and diabetes management to empower CHWs to provide guidance for those at risk or living with diabetes to best manage their condition and ensure they have access to the services and care needed. Also has CHW-focused webinars and a section for patient resources.</p>
<p><u>Guiding CHWs to Teach CHWs on Cancer Education and Message Tailoring to Serve Underserved Populations</u></p>	<p>Online self-paced courses. Attendees will receive CEUs after completing the course. The project is funded by the Cancer Prevention Research Institute of Texas.</p>
<p><u>Community Health Assessment: Using Health Models to Explore the Determinants of Health</u></p>	<p>In this course, you will learn that improving the health of populations is complex work and demands that we define health broadly, that we measure all aspects of health (thinking about cause and effect), and that we recognize the fact that the health system is only one part of the solution for improving health.</p>

Clarifying Questions

(will be moderated via chat)



Contact Info

Written comments are welcome!

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Thank you!



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