

In November multiple groups came together to learn about the process of becoming a Medicaid provider under HB 1575. There were over 200 participants with some in-person and many online. See slide decks for detailed information on each agenda item highlighted below.

- Groups included: Episcopal Health Foundation (EHF), Methodist Healthcare Ministries, Michael and Susan Dell Foundation, St. David's Foundation, the Texas Association of Health Plans (TAHP), the Texas Association of Community Health Plans (TACHP), Verisys, Texas Medicaid Healthcare Partnership (TMHP) and the Texas Health and Human Services Commission (HHSC).
- [HB 1575](#): Recent legislation that authorizes HHSC to make community health workers (CHWs) and doulas a provider in Medicaid for case management services under the [Case Management for Children and Pregnant Women \(CPW\) program](#). Becoming a provider means CHWs and doulas can provide services and receive reimbursement from Medicaid health plans that administer the Medicaid program.

Introduction:

- Key leadership from EHF, HHSC, TACHP and TAHP provided a welcome to the participating CHWs and doulas and expressed their excitement for passage of HB 1575 and their desire to work together to ensure a successful implementation. Key meeting goals included:
 - Engage with the various groups to learn about updates around implementation of HB 1575, timeline and about the new upcoming enrollment opportunities.
 - Better understand provider enrollment, contracting and credentialing and working with Medicaid health plans or Medicaid managed care organizations (MCOs).
 - Gather feedback directly from CHWs and doulas about the proposed changes and gather their concerns, questions, comments and considerations.
 - Share training and technical assistance opportunities for those interested in becoming a participating Medicaid provider.

Overview of HB 1575 and CPW

- Michelle Erwin, the Deputy Association Commissioner of the Office of Policy at HHSC, and her staff provided an overview of Medicaid, HB 1575 and the CPW program. See slides for full presentation and details.
 - HHSC contracts with health plans who administer the program including contracting with providers and building a network, paying claims, and coordinating care. The state is divided into [service areas](#) and health plans are contracted in various service areas.
 - Under HB 1575 CHW and doulas will be able to provide case management services to Medicaid recipients that the health plans determine are eligible for CPW services.

- Not every pregnant woman in Medicaid is eligible to receive CPW services and many of the MCOs may provide case management services directly rather than refer to CPW and the MCO cannot duplicate case management services.
- To become a Medicaid provider CHWs and doulas will have to go through a series of trainings to be a CPW provider, then go through provider enrollment (TMHP conducts provider enrollment on behalf of HHSC), then contract with a health plan or MCO, and then go through credentialing with Verisys.
- HHSC walked through the requirements and eligibility for CPW and for becoming a provider in the program – see slides for details.

Provider Enrollment Overview

- Provider enrollment is required under federal law and there are a lot of steps but TMHP can help guide individuals through the process. Their slide deck goes into great detail about how to enroll. You can also find information [here](#).
- A provider can not get reimbursement until they go through Medicaid provider enrollment and verified as meeting the minimum requirements to participate in the Medicaid program.
- Providers can enroll as individual CHWs or doulas or can enroll under an existing provider or group. For example, a clinic or FQHC may be enrolled and have CHWs and doulas participating under their enrollment.
- Providers submit their applications through the Provider Enrollment Management System (PEMS).
- Enrollment requirements include and TMHP's presentation walks through each step:
 - **Doulas Enrolling With the Experience Pathway**
 - Doulas who are enrolling with the experience pathway must:
 - Attest to having five years of experience as a doula within the last seven years.
 - Attest to attendance in three births in the last seven years.
 - Submit an approval letter from HHSC.
 - Attest to having completed Health Insurance Portability and Accountability Act (HIPAA) training.
 - Upload their HIPAA certification.
 - Submit three professional letters of recommendation dated in the last seven years.
 - **Doulas Enrolling With the Training Pathway**
 - Doulas who are enrolling with additional training in core competencies must:
 - Attest to attendance in three births.
 - Submit an approval letter from HHSC.
 - Attest to having completed HIPAA training.
 - Upload their HIPAA certification.

- Submit three professional letters of recommendation dated in the last seven years.
 - Attest to having completed all training that is necessary to meet the core competency requirements.
- **Community Health Workers (CHWs)**
 - CHWs must:
 - Submit an approval letter from HHSC.
 - Submit their CHW certification number and state the expiration date, which should be no more than two years from the date of enrollment as CHW.
 - Attest to having completed HIPAA training.
 - Upload their HIPAA certification.
- **Health Plan Credentialing and Contracting**
 - After a provider is enrolled in Medicaid they must go through credentialing and contracting with health plans in order to receive reimbursement for the services they provide.
 - Credentialing is the review of qualifications and other relevant background information pertaining to a provider for MCO network participation. Credentialing protects Medicaid program against fraud and ensures patient safety.
 - Providers go through the credentialing verification organization (CVO) – Verisys for credentialing. This streamlines credentialing so that providers do not have to go through every health plan to credential – one credential works for all health plans.
 - Verisys provide an overview of the credentialing process and timeline and you can find details in the slides.
 - Providers must also contract with each health plan they want to bill.
 - TAHP provided the following steps for success:
 - Ensure all required documents are submitted in your application
 - Ensure accurate and complete responses to questionnaire
 - Respond to your MCO and Verisys as soon as possible
 - Onboarding and contracting processes vary by MCO
 - Even after enrollment and credentialing is complete, MCOs still must approve providers and execute contracts before a provider can begin participating in the Medicaid program
- **Question and Discussion**
 - There were multiple MCOs and state staff that participated in the meeting in addition to CHWs and Doulas. After the presentations there was discussion and the opportunity for CHWs and Doulas to talk with the MCOs in the room. Highlights included:
 - MCOs have the ability to determine which providers they will contract with – not every health plan has to contract with every enrolled doula

or CHW but every representative in the room expressed interest in credentialing and contracting with CHWs and doulas right now since they are a new provider type and they need to be able to provide access to their members.

- There was concern that the policies do not address post partum doulas and HHSC agreed to take back this issue and figure out if there is away to include.
- There is concern that MCOs, the state and other stakeholders are not fully aware of the full scope of doulas and the differences between what doulas and CHWs do.
- There were a lot of follow up questions regarding how enrollment, contracting and credentialing works and HHSC and other stakeholders will work together to put together a Q&A based on this meeting.
- There was expressed interest in continuing the discussion and developing future opportunities for the various stakeholders to come together.
- There was general excitement about the opportunities provided under this bill but also concerns about how they will have the ability to fulfill all the administrative requirements that go along with providing Medicaid services.
- EHF let the group know that they have hired individuals to help with technical assistance for CHWs and doulas wishing to participate and will provide details soon.

Stay tuned for Q&A, and see slides for very detailed information about the requirements, processes, timelines and contact information.