

CONTRACTING & BILLING

Q1. Is there a list of Managed Care Plans (MCPs) participating in the Medi-Cal CHW Benefit?

- Since CHW services are a Medi-Cal covered benefit, all Medi-Cal MCPs are required to offer CHW services to their assigned Medi-Cal members. A list of all 24 Medi-Cal MCPs is available on the [Department of Health Care Services \(DHCS\) website](#).

Q2. Is there a database of Community-Based Organizations (CBOs) who are providing CHW services in California?

- You can find a list of CBOs in the [open data portal](#). CBOs can provide either CHW or asthma preventive services.

Q3. The Provider Application and Validation for Enrollment (PAVE) application denial rate seems high. What's the primary reason for this?

- Many CBO applications had incomplete information and required follow-up from DHCS in order to make an approval determination, and others were denied for not meeting CBO provider enrollment requirements, such as not being a 501(c)(3) non-profit. DHCS is currently developing a checklist that will help CBOs be better prepared when they start their application so that less applications are returned for being incomplete. DHCS will continue to closely monitor provider enrollment in this space.

Q4. What should I do if I receive a PAVE application denial when trying to enroll my organization to provide CHW services?

- For denied PAVE applications, please contact DHCS' [Provider Enrollment Division \(PED\)](#) to request feedback on why your PAVE application was denied and guidance for re-submitting your application. As a reminder, you also have to separately contract with each Medi-Cal MCP in order to provide CHW services to their assigned Medi-Cal managed care members. For questions involving contracting, please follow up with each Medi-Cal MCP in your geographical area.

Q5. Are the hours/units shown on the “CHW Billing Scenarios” slide showing the maximum services that can be billed for each day? If so, why is scenario 3 maxed at 1.5 hours?

- The scenarios were hypothetical billing examples based upon the Current Procedural Terminology (CPT) codes for individual and group billing. For each CPT code, the maximum units that can be billed per day without prior authorization is 4.0 units (2.0 hours). Additional units may be provided with prior authorization.

Q6. What is the maximum number of hours you can bill for CHW services per week?

- Medi-Cal does not have a weekly frequency limit for CHW services. For each CPT code, the maximum units that can be billed per day without prior authorization is 4.0 units (2.0) hours. Additionally, please note that Medi-Cal providers are encouraged to develop a written plan of care when a need for multiple or ongoing CHW services is identified. Further, a written plan of care is required for continued CHW services after 12 units of care per Medi-Cal member in a single year, except for services provided in the Emergency Department. More details can be found in the [CHW Preventive Services Provider Manual](#).

Q7. Do CHWs need to get pre-authorization for group classes?

- Prior authorization is only required when seeking to exceed the maximum billable units per Medi-Cal member per day, which is 4.0 units or 2.0 hours for both individual (CPT code 98960) and group codes (CPT codes 98961 and 98962).

Q8. What is the universal ICD-10 code for CHWs to use?

- At this time, ICD-10 diagnosis codes are not required on claims for CHW services. However, DHCS is working on policy guidance on this front to comply with federal reporting requirements and more information will be released in the future.

Q9. For services provided to children under 21 years old, should services be billed under the child or the parent/guardian?

- If the parent/guardian is enrolled in Medi-Cal, CHW services provided to the parent/guardian should be billed under the parent/guardian’s Medi-Cal ID. If the parent/guardian is not eligible for Medi-Cal, CHW services may still be provided to the parent/guardian for the direct benefit of the Medi-Cal enrolled child under the age of 21. Here, the CHW services provided to the non-Medi-Cal eligible parent/guardian must be billed under the child’s Medi-Cal ID and the child must be present when the CHW services are provided to the non-Medi-Cal eligible parent/guardian.

Q10. Can CHWs ensure they are properly reimbursed for out-of-clinic services, particularly those that involve travel?

- DHCS only reimburses supervising providers for covered CHW services provided by CHWs to Medi-Cal members. DHCS does not reimburse for travel time.

Q11. Can CPT codes be used for CHWs supporting Medi-Cal Dental providers?

- DHCS is currently working on dental-specific codes for CHW services related to dental care. Additional policy guidance will be forthcoming.

Q12. Can Federally Qualified Health Centers (FQHCs) bill for CHW services?

- No, FQHCs cannot bill the fee-for-service (FFS) or prospective payment system (PPS) rate for CHW services. However, contracted FQHCs must be reimbursed by MCPs at a rate not less than that for other provider types. MCPs are required to reimburse contracted FQHCs similarly.

Q13: Will Return Transmission Files (RTFs) and Authorization Status File (ASFs) reports be required the same way that it is for Community Supports programs?

- No, those requirements are specific to Community Supports and not the CHW Benefit.

CHW CERTIFICATION/TRAINING

Q14: How does one become a certified CHW?

- As outlined in the [CHW Preventive Services Provider Manual](#), CHWs must demonstrate minimum qualifications through one of the following pathways, as determined by the supervising provider:
 - **Certificate Pathway:** CHWs demonstrating qualifications through the Certificate Pathway must provide proof of completion of at least one of the following certificates:
 - 1. CHW Certificate: A certificate of completion, including but not limited to any certificate issued by the State of California or a State designee, of a curricula that attests to demonstrated skills and/or practical training in the following areas: communication, interpersonal and relationship building, service coordination and navigation, capacity building, advocacy, education and facilitation, individual and community assessment, professional skills and conduct, outreach, evaluation and research, and basic knowledge in public health principles and social determinants of health, as determined by the supervising provider. Certificate programs shall also include field experience as a requirement.
 - 2. Violence Prevention Certificate: For individuals providing CHW

violence prevention services only, a Violence Prevention Professional (VPP) Certification issued by Health Alliance for Violence Intervention or a certificate of completion in gang intervention training from the Urban Peace Institute. A Violence Prevention Certificate allows a CHW to provide CHW violence prevention services only. A CHW providing services other than violence prevention services shall demonstrate qualification through either the Work Experience Pathway or by completion of a CHW Certificate.

- **Work Experience Pathway:** An individual who has 2,000 hours working as a CHW in paid or volunteer positions within the previous three years, and has demonstrated skills and practical training in the areas described above, as determined by the supervising provider, may provide CHW services without a certificate of completion for a maximum period of 18 months. A CHW who does not have a certificate of completion must earn a certificate of completion, as described above, within 18 months of the first CHW visit provided to a Medi-Cal member.

Q15: Can Peer Support Specialists (PSS) be billed as CHWs?

- PSS are distinct from CHWs, but a PSS who meets CHW qualifications could provide CHW services.

Q16: Can you clarify the role of a supervising provider for CHWs?

- The supervising provider is an enrolled Medi-Cal provider who submits claims for services provided by CHWs. The supervising provider ensures a CHW meets the qualifications listed in in the [CHW Preventive Services Provider Manual](#) and directly or indirectly oversees a CHW and their services delivered to Medi-Cal members. Currently, the supervising provider can be a licensed provider, a hospital, an outpatient clinic, a local health jurisdiction (LHJ), a community-based organization (CBO), and, as of October 1, 2024, a pharmacy. Please note that CHWs may be supervised by a CBO or LHJ that does not have a licensed provider on staff.

RECOMMENDATION FOR CHW SERVICES

Q17: Does the Emergency Department (ED) need to submit a recommendation before administering CHW services?

- The ED provider can make a note in the Medi-Cal member's medical record, which satisfies the federal requirement under Title 42 of the Code of Federal Regulations (CFR), Section 440.130(c) that there be a written recommendation of a physician or other licensed practitioner of the healing arts within their scope of practice under state law. Please note that a formal submission to the Medi-Cal

MCP is not required.

Q18: Is there guidance for providing CHW services to family members/guardians of Medi-Cal members with cognitive impairments?

- This is allowable for Medi-Cal members under age 21 through the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit. There is no similar guidance for elderly or impaired adults, but services for parents/guardians of Medi-Cal members under age 21 are allowed under federal rules, as described in question #9 above.

Q19. Does a licensed substance abuse counselor qualify as a licensed practitioner for referrals? What about for persons exiting jail/prison - can parole/probation officers make referrals?

- Under federal regulations (42 CFR 440.130(c)), CHW services require a written recommendation by a physician or other licensed practitioner of the healing arts within their scope of practice under state law. In addition to physicians, other licensed practitioners who can recommend CHW services within their scope of practice include physician assistants, nurse practitioners, clinical nurse specialists, podiatrists, nurse midwives, licensed midwives, registered nurses, public health nurses, psychologists, licensed marriage and family therapists, licensed clinical social workers, licensed professional clinical counselors, dentists, licensed educational psychologists, licensed vocational nurses, and pharmacists. Please see the [CHW Preventive Services Provider Manual](#) for more information. The physician or other licensed practitioner making the written recommendation for CHW services does not need to be enrolled in Medi-Cal and/or be an in-network provider within the Medi-Cal member's MCP as stated in [All Plan Letter \(APL\) 24-006](#).

Prepared by [Community Health Synergy](#). FAQ updated as of 9/25/24 with participants' questions from 8/27/24 Webinar: [Innovative Partnerships: Sowing Seeds and Anthem's CHW Benefit Journey](#). Answers provided by the Department of Health Care Services (DHCS).