

## **Recommendations for Community Health Workers (CHW) Services for Eligible Medi-Cal Members**

The Department of Health Care Services (DHCS) is issuing a statewide standing recommendation that all Medi-Cal members who meet the defined eligibility criteria for receiving CHW services would benefit from CHW services. This recommendation fulfills the federal requirements in section 440.130(c) of title 42 of the Code of Federal Regulations for a physician or other licensed practitioner of the health arts acting within their scope of practice to provide a written recommendation for preventive services.

CHWs may include individuals known by a variety of job titles, including promotores, community health representatives, navigators, and other non-licensed public health workers, including violence prevention professionals. CHW services are preventive health services to prevent disease, disability, and other health conditions or their progression; to prolong life; and promote physical and mental health and well-being. CHW services include health education, health navigation, screening and assessment, and individual support and advocacy, which may assist with a variety of concerns impacting Medi-Cal members, including but not limited to, the control and prevention of chronic conditions or infectious diseases, behavioral health conditions, and need for preventive services. Additionally, CHW services can help ensure Medi-Cal members receive appropriate services related to perinatal care, preventive care, sexual and reproductive health, environmental and climate-sensitive health issues, oral health, aging, injury, and domestic violence and other violence prevention services.

To help ensure access and reduce barriers to Medi-Cal members receiving CHW services, and in alignment with DHCS' Comprehensive Quality Strategy Goals to keep families and communities healthy via prevention and eliminate health disparities through community-based partnerships, DHCS has determined that Medi-Cal members who meet the defined eligibility criteria to receive CHW services as listed below would benefit from receiving up to six hours annually of Medi-Cal covered CHW services from a CHW operating under the supervision of an enrolled Medi-Cal provider. CHWs who use this standing recommendation for Medi-Cal members should note the standing recommendation and the member's eligibility criteria in their records.

### Eligibility Criteria for CHW Services

- Presence of one or more chronic health (including behavioral health) conditions, or a suspected mental disorder or substance use disorder that has not yet been diagnosed.
- Presence of medical indicators of rising risk of chronic disease (for example, elevated blood pressure, elevated blood glucose levels, etc., that indicate risk but do not yet warrant diagnosis of a chronic condition).
- Presence of known risk factors, including domestic or intimate partner violence, tobacco use, excessive alcohol use, and/or drug misuse.
- Results of a social drivers of health screening indicating unmet health-related social needs, such as housing or food insecurity.
- One or more visits to a hospital emergency department within the previous six months, including when Medi-Cal members are in the emergency department.
- One or more hospital inpatient stays, including stays at a psychiatric facility, within the previous six months, or being at risk of institutionalization.
- One or more stays at a detox facility within the previous year.
- Two or more missed medical appointments within the previous six months.
- Beneficiary expressed need for support in health system navigation or resource coordination services.
- Need for recommended preventive service.
- Individuals released from incarceration within the past six months.

This standing recommendation authorizes CHWs to provide covered Medi-Cal CHW services including health education, health navigation, screening and assessment, and individual support and advocacy, which can be reimbursed using established Current Procedural Terminology billing codes 98960-98962 and subject to all frequency and other policy requirements as outlined in Medi-Cal's policy, including a frequency limit of 4.0 units (2.0 hours) per day.<sup>1</sup> Licensed providers are encouraged to develop a written plan of care when a need for multiple or ongoing CHW services is identified, and a written plan of care is *required* for continued CHW services after 12 units of care per Medi-Cal member in a single year from the initial date of service, which would constitute

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<sup>1</sup> Federal requirements for billing the new Medicare HCPCS codes G0019 and G0022, require an initiating visit with a licensed provider; please visit the [CHW provider manual](#) for additional information.

a new recommendation for more than the six hours authorized by this standing recommendation.<sup>2</sup>

CHW supervising providers should verify the Medi-Cal member's eligibility for the month of service. For Medi-Cal members enrolled in Medi-Cal managed care, CHW supervising providers should also verify the Medi-Cal member's MCP enrollment for the month of service.

For more information on Medi-Cal covered CHW services, please visit: <https://www.dhcs.ca.gov/community-health-workers> and the [Medi-Cal Provider Manual](#).

This recommendation remains in effect until rescinded or modified.

*ORIGINAL SIGNED BY KAREN MARK*

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DHCS Medical Director

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<sup>2</sup> CHW services provided in an Emergency Department, which should be documented in the Medi-Cal member's medical record, are exempt from the number of units provided before a treatment plan is required.