

Community Health Worker (CHW) Medicaid reimbursement FAQ

CHW Medicaid reimbursement State Plan options

Are the State Plan options fee-for-service or value based?

HCA's presentation on CHW Medicaid reimbursement shares options for fee-for-service payment through the Medicaid state plan. These options do not include value-based payment (VBP). As opportunities for VBP within Apple Health (Medicaid) develop, HCA will ensure CHWs are considered and included.

Do all options require the referral of a licensed practitioner?

Yes, based on current guidance from Centers for Medicare and Medicaid Services (CMS), all options will require the referral of a licensed provider.

What is a licensed practitioner? For State Plan options, would license practitioners include both primary care/medical and a behavioral health practitioner?

A licensed practitioner is a provider credentialed by the state based on a set of qualifications and experiences to provide services within the scope of their license.

States have different definitions and limitations for referring and supervising licensed practitioners. Examples from other state Medicaid State Plans include physicians, advanced practice registered nurses, health service providers in psychology, physician assistant, certified nurse midwife, and more.

Will the options for CHWs under a licensed practitioner include more paperwork and take CHWs away from the community?

Administrative requirements such as paperwork and allowable places of service have not yet been defined. HCA plans to collaborate with CHWs to ensure their voices and perspectives are included as we develop policies.

Which options require a state certification?

Option 4 is the only option that requires a CHW certification. If option 4 is selected, HCA would need to collaborate with the Department of Health (DOH) to establish a CHW certification. More details on option for can be found in the presentation slide deck.

Will HCA submit a decision package for the governor's budget?

Yes, HCA plans submit a decision package in May.

Apple Health reimbursement for community-tailored roles

Which CHW services are billable through Apple Health?

There are currently three ways CHWs are funded through Apple Health, including:

- Federally qualified health centers (FQHC)
- Maternity Support Services (MSS) First Steps program
- Managed care organizations

To learn more about these options, review HCA's provider billing guides and Apple Health managed care webpages.

Participating clinics will collect data about how CHWs spend their time, what their functions are, and key deliverables. Based on the limitations of Apple Health financing, it is likely that not all CHW activities will be billable.

Why are doulas and peers not included in HCA's CHW Medicaid reimbursement options? Peers are currently covered under Washington Medicaid State Plan Section 13d, rehabilitative services. These are distinct roles requiring unique training and qualifications separate from CHWs.

CHWs are currently reimbursed in FQHCs, MSS First Steps program, and managed care organizations. Is MSS reimbursed by HCA? Is it in the Fee-for-service model?

MSS is reimbursed by HCA. Services will be paid directly by HCA in FFS methodology in 15-minute increments of service rates.

Codes and rates

How much will CHWs be paid?

We have not reached the milestone of rate setting. HCA currently pays for services, not salaries. Setting rates is outside our authority and scope for the commercial space.

Are FQHCs reimbursing for CHWs?

CHWs are not encounter-rate eligible. CHWs for FQHCs are incorporated into cost base reimbursement report where clinics can account for CHW salaries.

Will the State Plan options alter the current encounter rate for CHW reimbursement?

No, HCA will not change how FQHCs define the roles of CHWs and how those CHWs provide services. We are reviewing CHWs in pediatric primary care settings.

Definitions of key terms

Community Health Worker: A frontline public health worker who is a trusted member of or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison between health and social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

Fee-for-service: A system of health insurance payment in which a doctor or other health care provider is paid a fee for each service provided.

State certification: Certification program includes 100 hours of classroom training that addresses the core competencies in health, knowledge of social service resources, communication skills, advocacy, CPR certification, lifespan development, and basic community health worker skills.

Value based payment: Payment method in which health care systems are rewarded based on the quality of care versus the number of patients treated.