



HCA CHW Benefit: Billing Guide Updates

Nikeisha Banks, MPH
January 2026

Objectives



Washington Administrative Code (WAC) Requirements

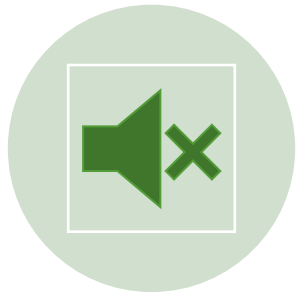


CHW 2026 Billing Guidance



Frequently Asked Questions

Housekeeping Rules



Please stay on mute unless speaking to minimize background noise



Use chat box for questions and comments



For Q&A, raise your hand



Be respectful of time and other's perspectives

Common Terms & Definitions

Common Terms/Definitions

Service Types

- ▶ **CHI – Community Health Integration Services**
Services addressing clients' health-related social needs (HRSN) and social determinants of health (SDOH).
- ▶ **PIN – Principal Illness Navigation Services**
Services supporting clients with chronic, serious, or high-risk conditions to navigate care.

Foundational Concepts

- ▶ **HRSN – Health-Related Social Needs**
Immediate, person-level needs requiring support (e.g., food, housing, transportation).
- ▶ **SDOH – Social Determinants of Health**
Broader structural and environmental conditions influencing health outcomes.
- ▶ **ACH – Accountable Communities of Health**
Independent, regional organizations that work with communities to support health care services and health-related social needs (HRSN) activities.
- ▶ **CCH- Community Care Hubs**
Function as a central source for connecting individuals with health care needs and HRSN screening and referrals.
- ▶ **CBW- Community Based Workers**
CHWs employed within the ACHs and CCHs.
- ▶ **CHR Community Health Representatives**
CHRs are frontline public health workers who improve access to healthcare in AI/AN communities and build community capacity.

Common Terms/Definitions

Billing & Administrative Terms

- **FS-Facility Setting Rate**
CMS pays less because the facility provides space, staff, equipment, and overhead.
- **NFS-Non-Facility Rate**
CMS pays more because the clinic or provider covers all costs themselves.
- **WAC – Washington Administrative Code**
State regulations governing CHW services, billing requirements, and documentation standards.

CHW WAC OVERVIEW



WHO ARE COMMUNITY HEALTH WORKERS?

- Community care coordinator
- **Community Based Workers**
- **Community Connectors**
- Community Health Advocate
- **Community Health Representative**
- Community Health Promoter
- **Community Health workers**
- **Community Outreach Worker**
- **Family Health advocate**
- HIV Peer Counselor
- Lay Health advisor
- **Maternal Child Health CHW**
- **Outreach Specialist**
- **Patient Health Navigator**
- **Promotor (a) de Salud**
- Public Health aide

CHW ROLE & SERVICES

A frontline public health worker who is a trusted member of and/or has a 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.”

-CHW Task Force (2019)



Health
assessment &
screenings



Health
education &
targeted skill
building



Care
Coordination
services



System
Navigation
services



Social Support
and tailored
resources for
HRSN/SDOH

Examples of CHW Services for CHI & PIN Services

Health Assessments & Screening

- Conduct screenings for HRSN (PRAPARE)
- Administer standard screenings tools like PHQ-9 & GAD-7
- Conduct screenings for chronic, high-risk conditions (blood pressure, glucose)

Health Education & Targeted Skill Building

- Teaching clients how to monitor condition/symptoms
- Supporting clients in developing self-managing routines
- Providing education on treatment plans, medications, and lifestyle changes
- Coaching clients through problem-solving skills related to their health

Care coordination

- Coordinate with client's care team.
- Supporting transitions of care after hospitalization, ER visits, or psychiatric crises.
- Follow-Up Support

System Navigation

- Identify local resources
- Explain service option & eligibility criteria
- Arrange transportation
- Provide or arrange language interpretation services

Social support & advocacy

- Provide emotional support
- Motivate & encourage people to obtain care and other services
- Support self-management of disease
- Referral to social Services

*** This list is not complete list***

CHW REQUIREMENTS



2,000 supervised hours as a CHW/CHR in the last 3 years—paid or volunteer position



Completion of any formal state CHW training or approved health-specific training approved by supervisor



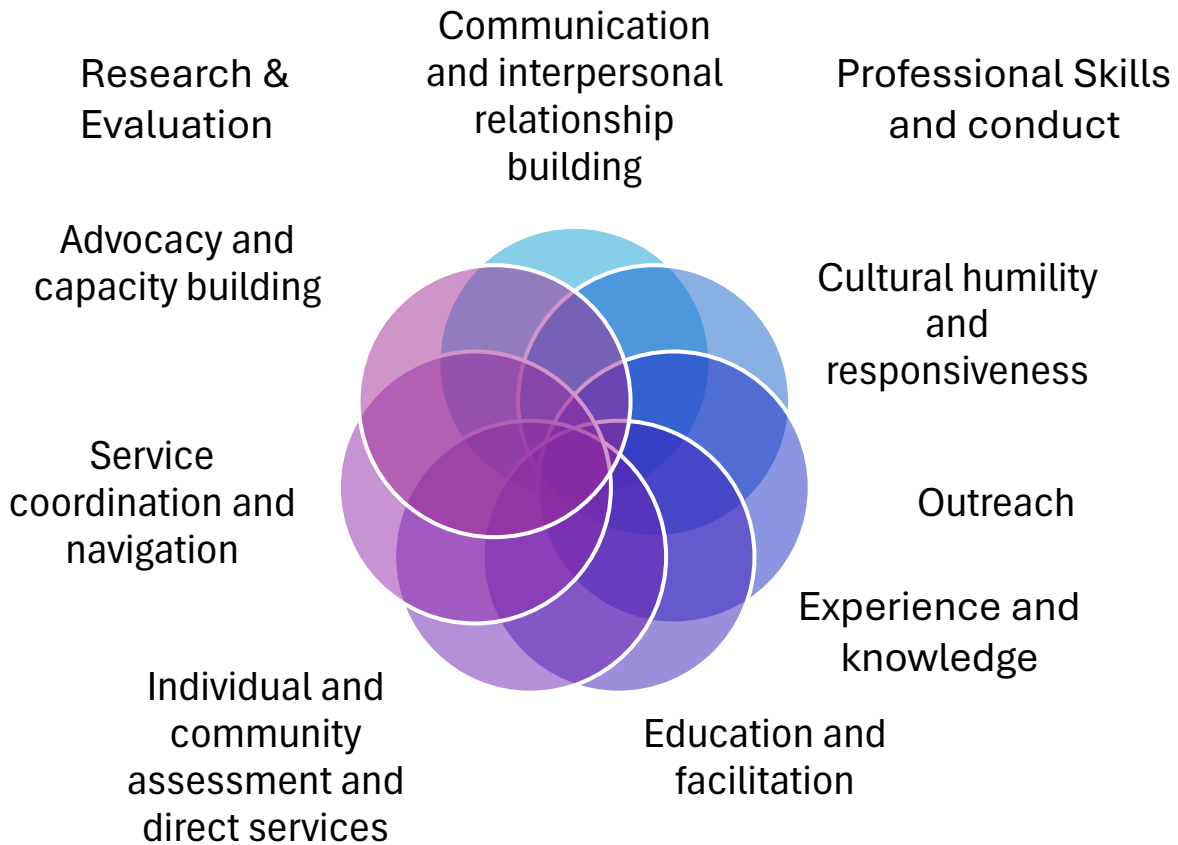
Furnish services under the supervision of a licensed, Medicaid enrolled practitioner



Meet any applicable state rules and requirements, and possess the following skills or core competencies listed in WAC [182-562-0400](#)

If CHWs do not meet the requirements, they must do so within 18 months of employment

CHW CORE COMPETENCIES



C3 Project CHW Roles and Competencies Review Checklist

Use the following checklists to assess how CHW role and skills linked to CHW trainings, practice, and/or policies align with the Community Health Worker Core Consensus Project.

ROLES

Table 1: COMMUNITY HEALTH WORKER ROLES/SCOPE OF PRACTICE	
<input type="checkbox"/> Checklist for personal, programmatic, and policy review	Community Health Worker Core Consensus Project Roles/Scope of Practice
<p>Role: Functions that CHWs serve in communities and the health care system. For example, CHWs provide health education.</p> <p>Scope of Practice: An all-inclusive list of roles and tasks which an occupation includes in its scope of work. The exact mix of these roles and tasks for any one individual will vary based on the needs of those served and host organizations.</p>	
ROLE	SUB-ROLES
<input type="checkbox"/> 1. Cultural Mediation Among Individuals, Communities, and Health and Social Service Systems	<ul style="list-style-type: none"> a. Educating individuals and communities about how to use health and social service systems (including understanding how systems operate) b. Educating systems about community perspectives and cultural norms (including supporting implementation of Culturally and Linguistically Appropriate Services [CLAS] standards) c. Building health literacy and cross-cultural communication
<input type="checkbox"/> 2. Providing Culturally Appropriate Health Education and Information	<ul style="list-style-type: none"> a. Conducting health promotion and disease prevention education in a manner that matches linguistic and cultural needs of participants or community b. Providing necessary information to understand and prevent diseases and to help people manage health conditions (including chronic disease)
<input type="checkbox"/> 3. Care Coordination, Case Management, and System Navigation	<ul style="list-style-type: none"> a. Participating in care coordination and/or case management b. Making referrals and providing follow-up c. Facilitating transportation to services and helping address barriers to services d. Documenting and tracking individual and population level data e. Informing people and systems about community assets and challenges
<input type="checkbox"/> 4. Providing Coaching and Social Support	<ul style="list-style-type: none"> a. Providing individual support and coaching b. Motivating and encouraging people to obtain care and other services c. Supporting self-management of disease prevention and management of health conditions (including chronic disease) d. Planning and/or leading support groups
<input type="checkbox"/> 5. Advocating for Individuals and Communities	<ul style="list-style-type: none"> a. Advocating for the needs and perspectives of communities b. Connecting to resources and advocating for basic needs (e.g. food and housing)

DOH CHW TRAINING

You & Your Family ▾

Community & Environment ▾

Licenses, Permits, & Certificates ▾

Data & Statistical Reports ▾

Emergencies ▾

Public Health & Provider Resources ▾

[Home](#) | [You & Your Family](#) | [Community Health Worker Program](#) | Community Health Worker Training Program

English ▾

In this section

Community Health Worker Program

Community Health Worker Training Program

Training and Education Project

Working with Community Health Workers

Community Health Worker Training Program

Our Community Health Worker (CHW) Training Program helps CHWs with essential knowledge and skills to support health equity and improve community well-being. It helps connect underserved populations with health care systems to address social factors that affect health. CHWs learn how to improve access to care and bridge gaps in public health services in Washington.

Who Can Take These Courses?

These courses are for anyone working or planning to work as a:

- Community Health Worker
- Promotores de Salud
- Patient navigator
- Peer counselor
- Similar positions in community health

You do not need to be currently working in these positions to enroll.

Course Details

Quick Links


Information on This Page

- [Who Can Take These Courses?](#)
- [Course Details](#)
- [Courses We Offer](#)
- [Registration Information](#)
- [Registration Schedule](#)
- [Optional Weekly Office Hours](#)
- [Community of Practice](#)

Additional Resources

- [Course Login](#)
- [Subscribe to Community Health Worker News](#)
- [Contact CHWTP](#)


DOH CHW TRAINING

You & Your Family 

Community & Environment 

Licenses, Permits, & Certificates 

Data & Statistical Reports 

Emergencies 

Public Health & Provider Resources 


 [Home](#) | [You & Your Family](#) | [Community Health Worker Program](#) | Community Health Worker Training Program

Courses We Offer

Follow the links below to learn more about each of the three courses we offer:

- [CHW Core Competency Course](#)
This is an introductory course for people who want to become CHWs. Starting in July 2025, the curriculum is new and teaches important CHW skills recommended by [the National C3 Council](#).
- [Health Specific Modules \(HSMs\)](#)
These short courses focus on specific health topics like heart health, breast cancer, and vaccines. CHWs can choose from different available topics that best fit their work. It's a good idea to take the CHW Core Competency Course first, but it's not required. **At this time there are two HSMs to choose from. Additional HSMs will be released as they become available.**
- [Pediatric CHW Course](#)
This is a 2-part course for CHWs working with children, youth, and families. It covers core CHW principles while incorporating pediatric-focused topics.

[Expand all](#)

CHW Core Competency Course Information 

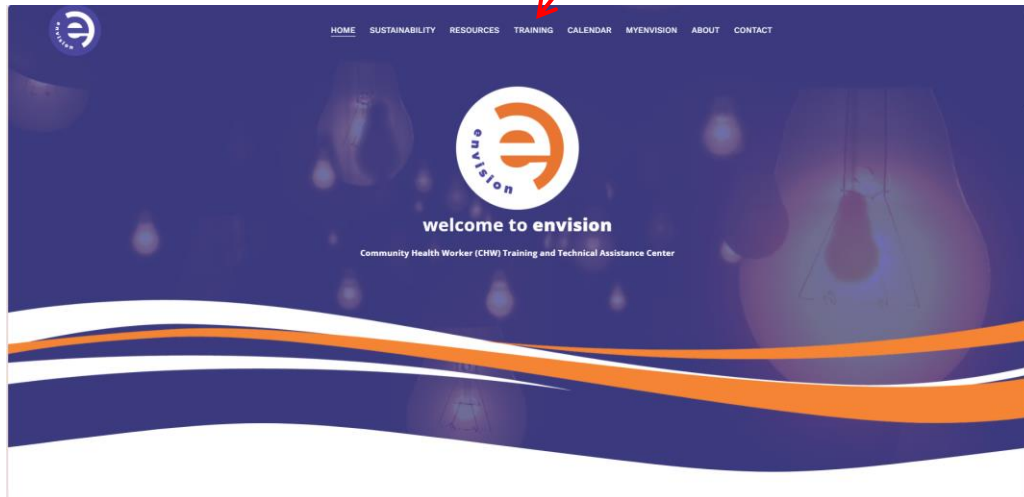
Health Specific Modules (HSMs) Information 

Pediatric CHW Course Information 

COMMUNITY HEALTH WORKER TRAININGS

1

Select Trainings



2



Amplifying CHWs in Diabetes Care

[Read More](#)



CLINICAL TRIALS 101: AN ADVOCACY-FOCUSED CURRICULUM FOR COMMUNITY HEALTH WORKERS

[Read More](#)



Equipping Community Health Workers to Address Alzheimer's Disease and Related Dementias in Their Communities

[Read More](#)



Grant Writing Basics

[Read More](#)



Community Health Worker Training COVID-19 Module

[Read More](#)



Introduction to Ethics for CHWs

[Read More](#)



Introduction to HIPAA for CHWs

[Read More](#)



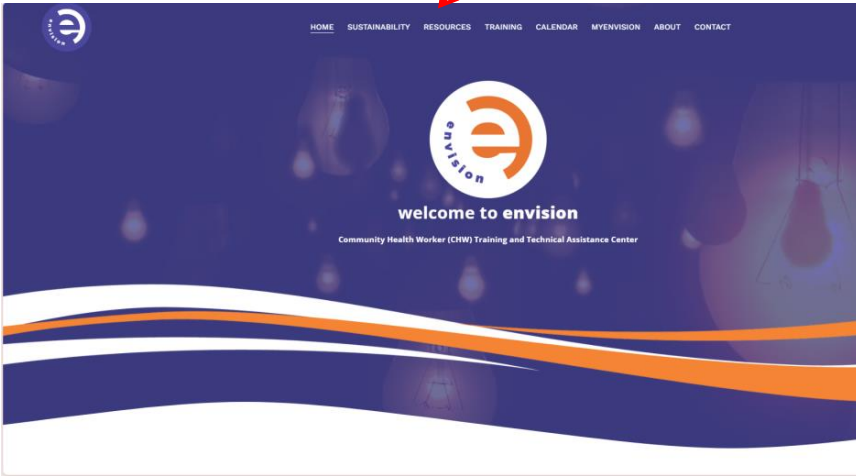
Introduction to interviewing for CHWs

[Read More](#)



1

Click resources



2 Select more resources

3

additional resources

Partner Resources
Review partner's sustainability work occurring at the local, state, and national levels.
[VIEW RESOURCES](#)

NACHW library
We support NACHW in their mission and recommend their library for more CHW-related resources.
[VISIT NACHW WEBSITE](#)

C3 Council
The C3 Council provides guidance for improving CHW practice and policy.
[VISIT C3 WEBSITE](#)

CHW Center for Research Evaluation
Resources to support CHW-led research and evaluation, capacity building, and CHW process and outcome indicators.
[VISIT CHW-CRE WEBSITE](#)

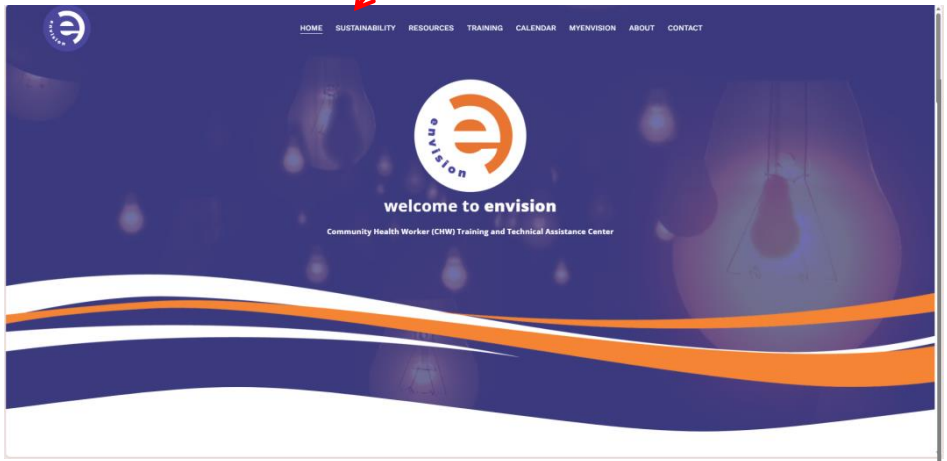
Vaccine Equity Cooperative
Find up-to-date, tailored, and sharable tools to communicate about the COVID-19 vaccine in your community.
[VISIT VEC WEBSITE](#)

Other Trainings for CHWs
A curated collection of trainings meant to build skills beyond core competency training.
[VIEW OTHER TRAININGS](#)

Community Health Worker Resources

1

Click sustainability



CHW toolkit
The first part of our CHW Financial Sustainability Planning Toolkit (FST) is available for download and use

GO TO THE FST

CHW program learning series
This is a video based series with 3 hours of content presented by 4 teams.

LEARN MORE

quickstart guide
We've assembled some essential resources into an easy-to-use pdf with links to key resources.

GET THE PDF

CHW Sustainability Summit Resources

sustainability

partner

keynote session materials

2

Select partner

3



See CHW-CRE summary [here](#)

- [CHWCRE website](#)
- [A Guide to Using the CHW Common Indicators](#)
- [CHW Common Indicators Grid](#)
- [An Introduction to Popular/People's Education](#)

See CDC summary [here](#)



- [Community Health Workers for COVID Response and Resilient Communities \(CCR\) website](#)
- [Community Preventive Services Task Force \(CPSTF\) website](#)
- [National Center for Chronic Disease Prevention and Health Promotion \(NCCDPHP\) website](#)
- [Community Guide](#)
- [CDC CHW Workgroup Resources](#)

See ASTHO summary [here](#)



- [ASTHO website](#)
- [State Approaches to Community Health Worker Certification](#)
- [Hiring Practices that Support State Integration of CHWs](#)
- [The Role of State and Territorial Health Agencies in Supporting and Hiring Community Health Workers](#)
- [State Policies Bolster Investment in Community Health Workers](#)
- [Approaches to Community Health Worker Certification](#)
- [Community Health Workers: Evidence of their Effectiveness](#)
- [Opportunities for Public Health Agencies to](#)

CLIENT ELIGIBILITY



Who Qualifies?

Client must be enrolled in Apple Health OR a Managed Care plan.

Who should be recommended for CHW services?

- Unmet social needs
- Positive ACEs
- High-risk health condition
- Multiple missed appointments
- Needs help navigating resources
- Needs preventive services
- Conditions requiring ongoing monitoring/support

CHW DOCUMENTATION REQUIREMENTS



Client consent (verbal or written) obtained before services



Location of services



Date, time, and duration of services and activities performed

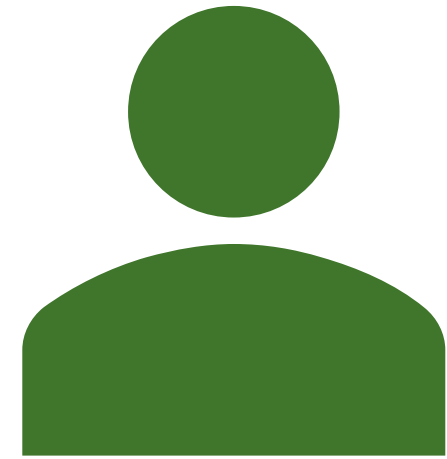
CHW DOCUMENTATION REQUIREMENTS CONT..



Type of service (individual or group) and number of clients if group.



Client needs/SDOH addressed, including relevant diagnoses when applicable.



Name of the CHW/CHR who provided the service.

RECOMMENDING & SUPERVISING PRACTITIONER ELIGIBILITY



Who Qualifies?

A “practitioner” includes **any licensed, Medicaid enrolled practitioner** such as:

- Nurse practitioners
- Physician assistants
- Licensed behavioral health providers
- Any provider type listed in [WAC 182-502-0002](#)
- Other licensed healing arts professionals

Roles of Licensed, Medicaid-Enrolled Provider

- Make recommendations for CHW services
- Serve as the supervising provider for CHW encounters

CHW SUPERVISOR REQUIREMENTS



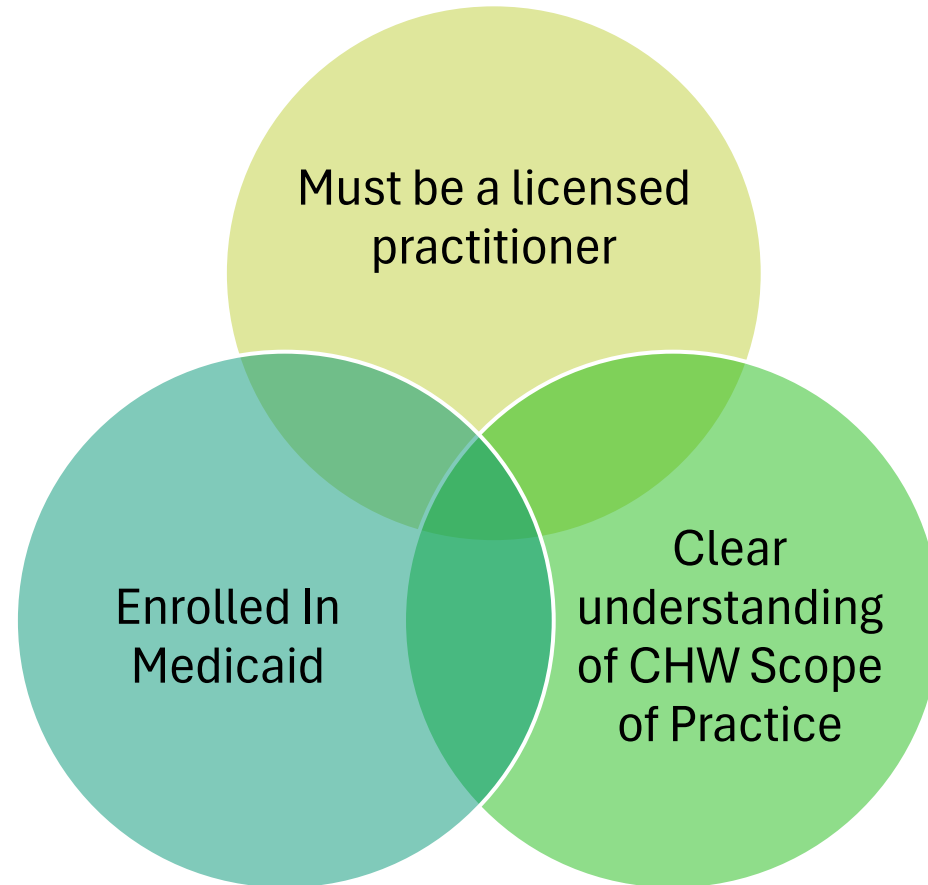
- Licensed, Medicaid-enrolled provider
- Understands CHW practice
- Provides CHW training/support
- Maintains supervision & compliance with WAC

[182-562](tel:182-562)

RECOMMENDING & SUPERVISING PROVIDER ELIGIBILITY SUMMARY



Recommending Provider



Supervising Provider

CHW BILLING GUIDANCE

COMMUNITY HEALTH INTEGRATION V. PRINCIPAL ILLNESS NAVIGATION SERVICES

Community Health Integration Services (CHI)

Address social determinants of health needs that significantly limit the ability to diagnose or treat problems. This includes:

- Housing
- Transportation
- Food insecurities
- Utility difficulties

Principal Illness Navigation Services (PIN)

Services focused on a serious, high-risk illness by certified or trained auxiliary personnel. Examples of a serious, high-risk condition, illness, or disease include:

- Cancer
- Chronic obstructive pulmonary disease
- Congestive heart failure
- Dementia
- HIV/AIDS
- Mental/Behavioral health conditions

COMMUNITY HEALTH INTEGRATION SERVICES FOR HRSN/SDOH

Primary Code:

- **G0019**
- \$47.83 (NFS); \$ 28.85 (FS)
- Cover 60 mins per calendar month

Add on code:

- **G0022**
- \$ 29.80 (NFS); \$20.12 (FS)
- Covers additional 30 mins per month



Health
assessment &
screenings



Health education &
targeted skill
building



Care Coordination
services



System Navigation
services



Social Support and
tailored resources
for HRSN/SDOH

NFS-maximum fee for non-facility setting
FS-maximum fee for facility setting

CONNECTING ICD-10-CM CODES TO SDOH

IMPROVING THE COLLECTION OF Social Determinants of Health (SDOH) data with ICD-10-CM Z Codes

Exhibit 1. Recent SDOH Z Code Categories and New Codes

Z55 – Problems related to education and literacy

- Z55.5 – Less than a high school diploma (Added, Oct. 1, 2021)

- NEW** • Z55.6 – Problems related to health literacy

Z56 – Problems related to employment and unemployment

Z57 – Occupational exposure to risk factors

Z58 – Problems related to physical environment (Added, Oct. 1, 2021)

- Z58.6 – Inadequate drinking-water supply (Added, Oct. 1, 2021)

- NEW** • Z58.8 – Other problems related to physical environment

- NEW** • Z58.81 – Basic services unavailable in physical environment

- NEW** • Z58.89 – Other problems related to physical environment

Z59 – Problems related to housing and economic circumstances

- Z59.0 – Homelessness (Updated)

- Z59.00 – Homelessness unspecified (Added, Oct. 1, 2021)

- Z59.01 – Sheltered homelessness (Added, Oct. 1, 2021)

- Z59.02 – Unsheltered homelessness (Added, Oct. 1, 2021)

- Z59.1 – Inadequate Housing (Updated)

- NEW** • Z59.10 – Inadequate housing, unspecified

- NEW** • Z59.11 – Inadequate housing environmental temperature

- NEW** • Z59.12 – Inadequate housing utilities

- NEW** • Z59.19 – Other inadequate housing

- Z59.4 – Lack of adequate food (Updated)

- Z59.41 – Food insecurity (Added, Oct. 1, 2021)

- Z59.48 – Other specified lack of adequate food (Added, Oct. 1, 2021)

- Z59.8 – Other problems related to housing and economic circumstances (Updated)

- Z59.81 – Housing instability, housed (Added, Oct. 1, 2021)

- Z59.811 – Housing instability, housed, with risk of homelessness (Added, Oct. 1, 2021)

- Z59.812 – Housing instability, housed, homelessness in past 12 months (Added, Oct. 1, 2021)

- Z59.819 – Housing instability, housed unspecified (Added, Oct. 1, 2021)

- Z59.82 – Transportation insecurity (Added, Oct. 1, 2022)

- Z59.86 – Financial insecurity (Added, Oct. 1, 2022)

- Z59.87 – Material hardship due to limited financial resources, not elsewhere classified (Added, Oct. 1, 2022; Revised, April 1, 2023)

- Z59.89 – Other problems related to housing and economic circumstances (Added, Oct. 1, 2021)

Z60 – Problems related to social environment

Z62 – Problems related to upbringing

- Z62.2 – Upbringing away from parents

- NEW** • Z62.23 – Child in custody of non-parental relative (Added, Oct. 1, 2023)

- NEW** • Z62.24 – Child in custody of non-relative guardian (Added, Oct. 1, 2023)

- Z62.8 – Other specified problems related to upbringing (Updated)

- Z62.81 – Personal history of abuse in childhood

- NEW** • Z62.814 – Personal history of child financial abuse

- NEW** • Z62.815 – Personal history of intimate partner abuse in childhood

- Z62.82 – Parent-child conflict

- NEW** • Z62.823 – Parent-step child conflict (Added, Oct. 1, 2023)

- Z62.83 – Non-parental relative or guardian-child conflict (Added Oct. 1, 2023)

- NEW** • Z62.831 – Non-parental relative-child conflict (Added Oct. 1, 2023)

- NEW** • Z62.832 – Non-relative guardian-child conflict (Added Oct. 1, 2023)

- NEW** • Z62.833 – Group home staff-child conflict (Added Oct. 1, 2023)

- Z62.89 – Other specified problems related to upbringing

- NEW** • Z62.892 – Runaway [from current living environment] (Added Oct. 1, 2023)

Z63 – Other problems related to primary support group, including family circumstances

Z64 – Problems related to certain psychosocial circumstance

Z65 – Problems related to other psychosocial circumstances

PRINCIPAL ILLNESS NAVIGATION FOR HIGH-RISK & CHRONIC CONDITIONS

Primary Code:

- **G0023**
- \$47.83 (NFS); \$ 28.85 (FS)
- Cover 60 mins per calendar month

Add on code:

- **G0024**
- \$ 29.80 (NFS); \$20.12 (FS)
- Covers additional 30 mins per month



Health
assessment &
screenings



Health education &
targeted skill
building



Care Coordination
services



System Navigation
services



Social Support and
tailored resources
for HRSN/SDOH

NFS-maximum fee for non-facility setting
FS-maximum fee for facility setting

CHI/PIN SERVICE BILLING GUIDANCE: PRIMARY CODE G0019/G0023

2025 Guidance

- Services **MUST** equal 60 mins to bill for CHI/PIN services
- First CHW visit of **each month** can be performed in person or via telemedicine.
- Includes services provided directly or on behalf of client including administrative task.
- **Only one** provider can bill CHI/PIN services per client per month.

2026 Guidance

- Services **MUST** equal 30 mins or 60 mins to bill for CHI/PIN services
- Modifier 52 can be used, with the primary code, to bill **30 minutes** of CHW services are provided. Use of modifier voids any use of add on code.
- First CHW visit of **each month** can be performed in person or via telemedicine.
- Includes services provided directly or on behalf of client including administrative task.
- Any billing provider (**agency**) can bill once per month per client for CHI/PIN services.

CHI & PIN SERVICE BILLING GUIDANCE: ADD ONS G0022 & G0024

Add-ons for CHI/PIN (G0022/G0024)

- Add-on codes **require** the full 60-minute base unit to be met first with primary codes (**G0019/G0023**).
- Services **MUST** equal 30 mins to bill for add on CHI/PIN services.
- Max allowance = **3 units** per calendar month.
- **Must be listed on claim with primary code**

CHI/PIN SERVICE BILLING GUIDANCE: PRIMARY CODE G0019/G0023 W/ **MODIFIER**

2026 Guidance

- Services **MUST** equal 30 mins or 60 mins to bill for CHI/PIN services
- Modifier 52 can be used, with the primary code, to bill **30 minutes** of CHW services are provided. Use of modifier voids any use of add on code.
- First CHW visit of **each month** can be performed in person or via telemedicine.
- Includes services provided directly or on behalf of client including administrative task.
- Any billing provider (**agency**) can bill once per month per client for CHI/PIN services.

CHI/PIN SERVICE CLAIMS EXAMPLE: PRIMARY CODE G0019/G0023 W/ **MODIFIER**

INCORRECT

Date of Service	HCPCS Code	Units	Modifiers	Billing Provider NPI	Rendering Provider NPI	Diagnosis	Charge	Status
04/10/2026	G0019	1	52	Use Clinic NPI		Z71.89	\$23.91	Declined
04/12/2026	G0022	3				Z71.89	\$89.40	

CORRECT

Date of Service	HCPCS Code	Units	Modifiers	Billing Provider NPI	Rendering Provider NPI	Diagnosis	Charge	Status
04/10/2026	G0019	1	52	Use Clinic NPI		Z71.89	\$23.91	Approved

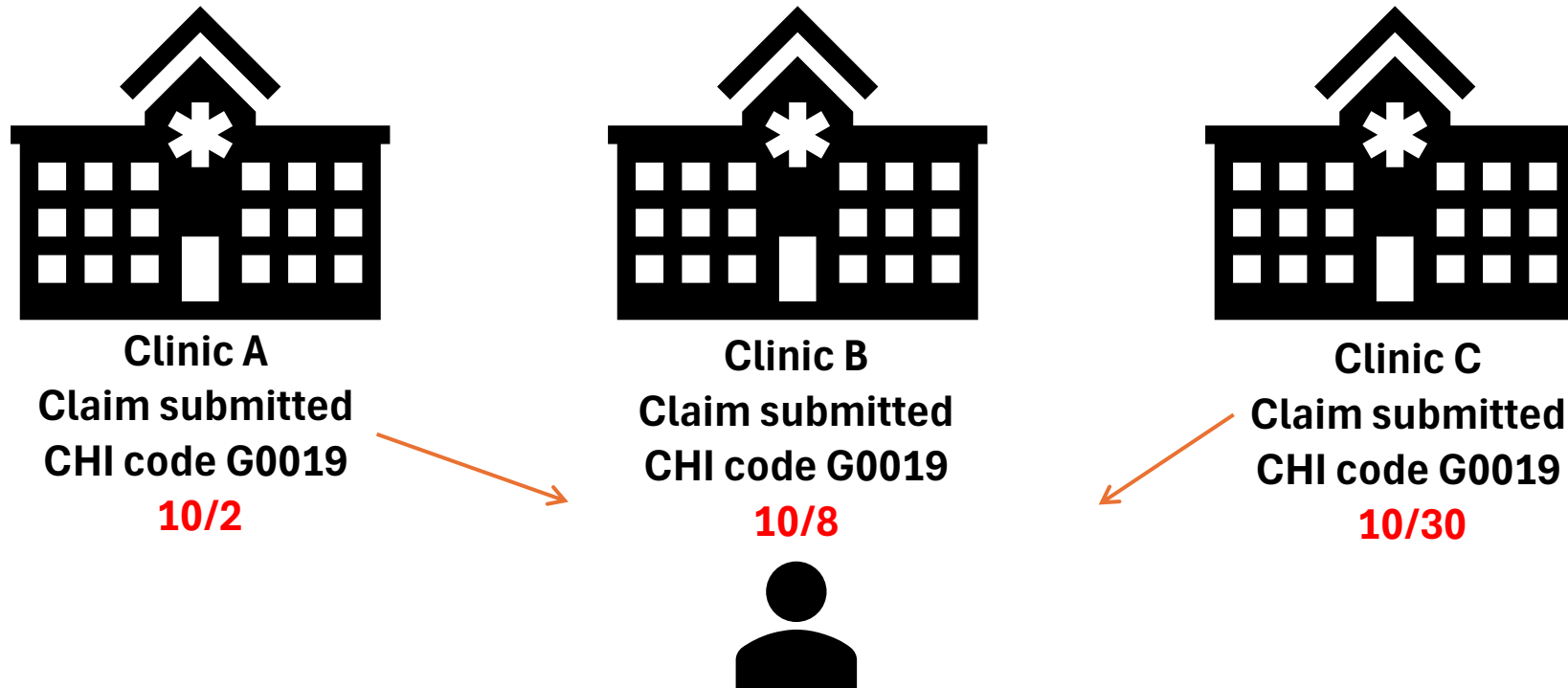
*** If additional time is needed or spent, remove modifier before using add ons.**

CHI/PIN SERVICE BILLING GUIDANCE: PRIMARY CODE G0019/G0023

2026 Guidance

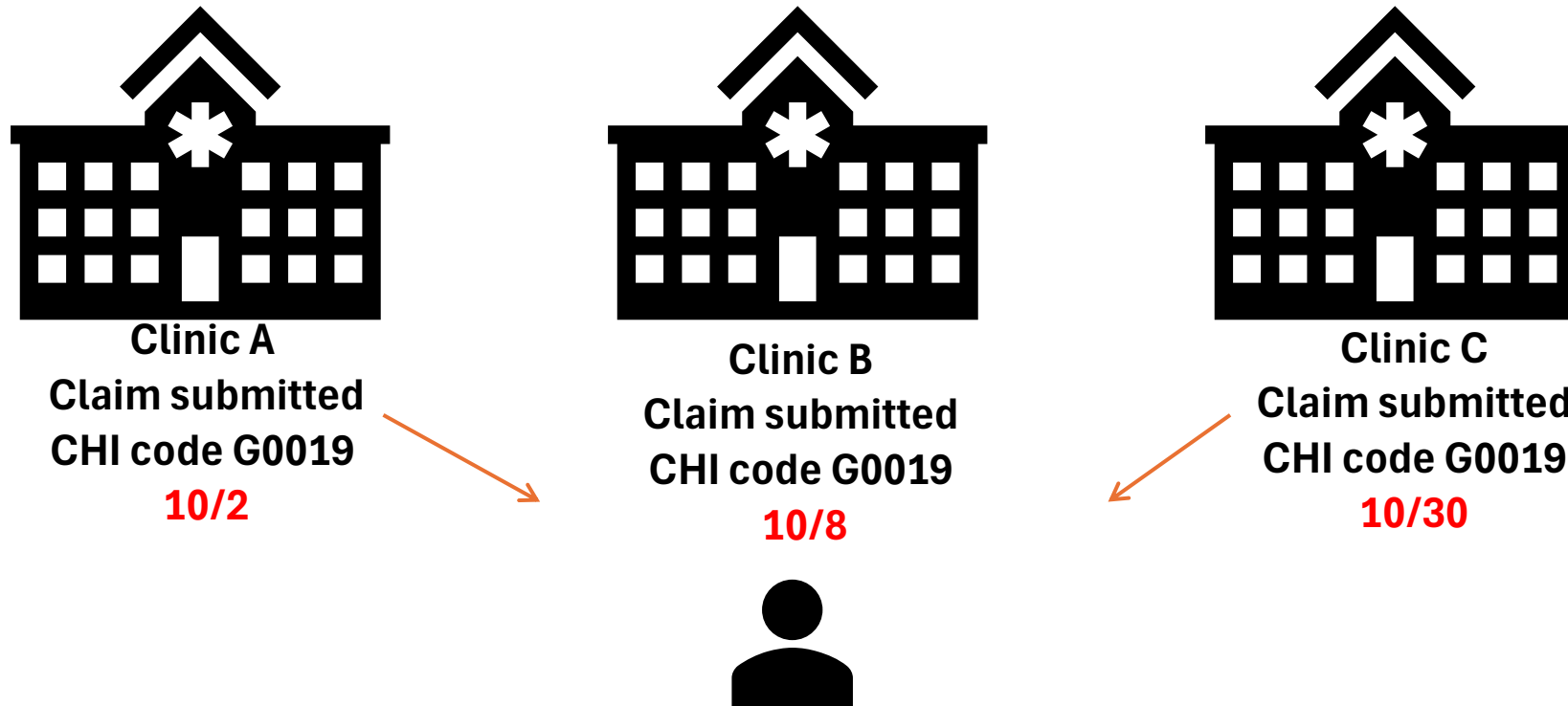
- Services **MUST** equal 30 mins or 60 mins to bill for CHI/PIN services
- Modifier 52 can be used, with the primary code, to bill **30 minutes** of CHW services are provided. Use of modifier voids any use of add on code.
- First CHW visit of **each month** can be performed in person or via telemedicine.
- Includes services provided directly or on behalf of client including administrative task
- Any billing provider (**agency**) can bill once per month per client for CHI/PIN services.

2025 CHW BILLING: MULTIPLE BILLING PROVIDERS- SAME SERVICE CODE



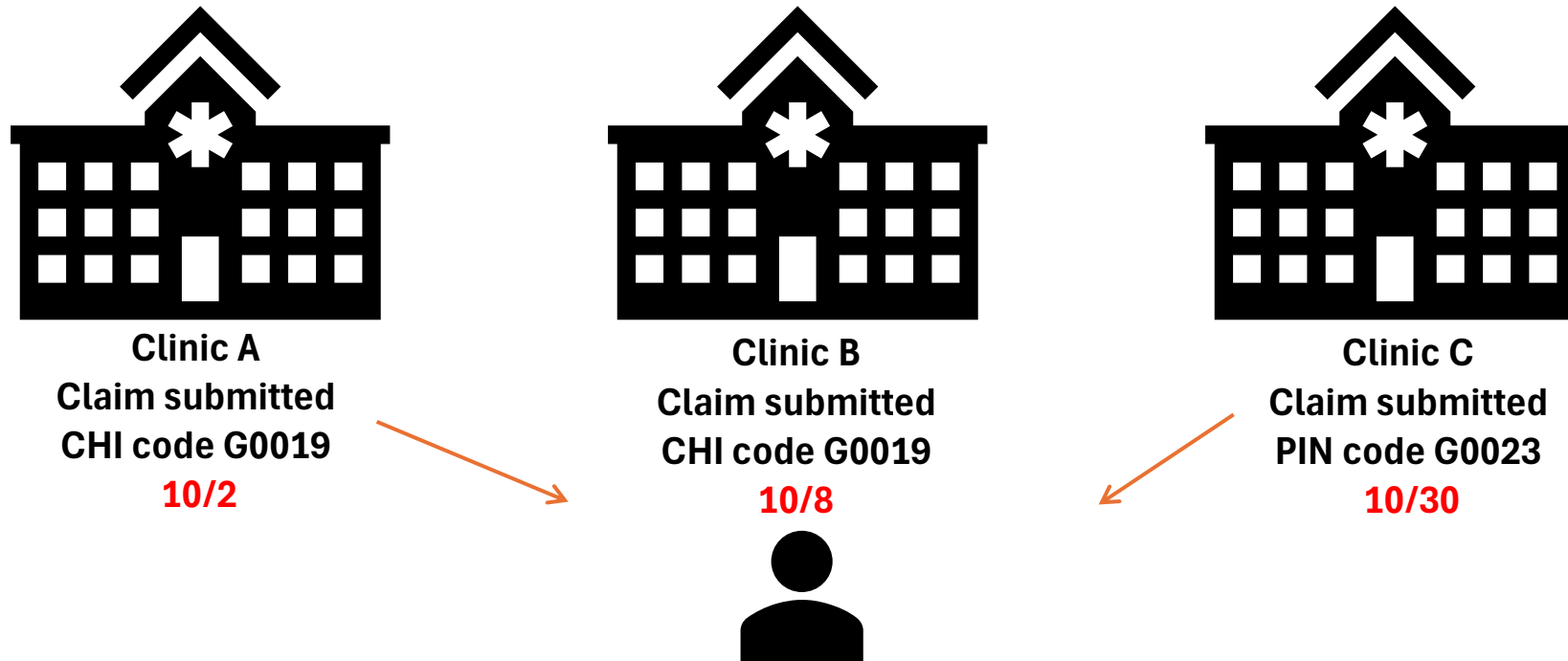
- If **Clinic A** bills G0019 or G0023 for a client first, that claim is accepted.
- Clinics **B** and **C** claims are denied.
- Any use of the add on codes (G0022 or G0024) must be listed on claim with primary codes.
- The monthly billing covers services provided by **one CHW per client**.
- All CHW services must be billed using the clinic's NPI as the billing provider.

2026 CHW BILLING (01/01/26): MULTIPLE BILLING PROVIDERS-SAME SERVICE CODE



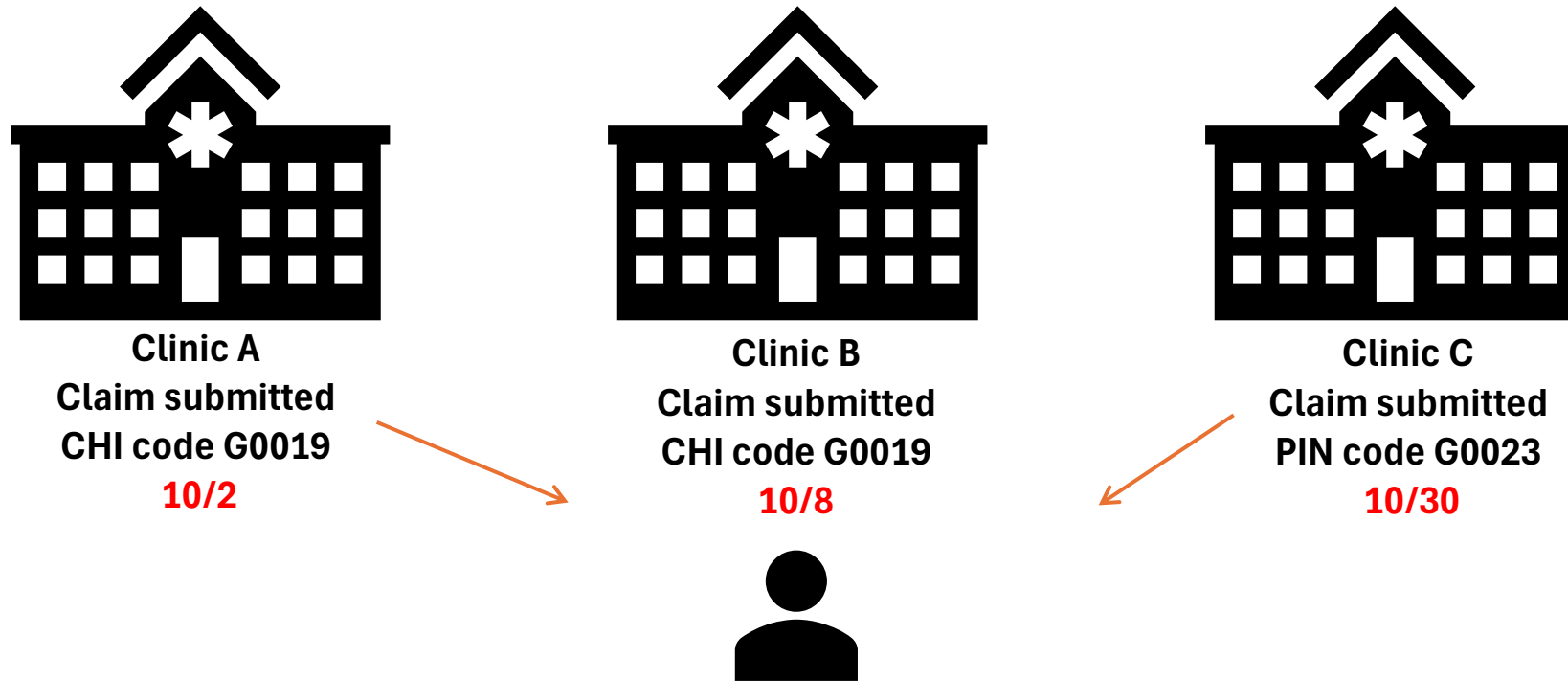
- Each clinic may bill G0019 or G0023, including their add-on codes, once per month per client.
- The monthly billing covers services provided by **one CHW per client**.
- Any use of the add on codes (G0022 or G0024) must be listed on claim with primary codes.
- All CHW services must be billed using the clinic's NPI as the billing provider.

2025 CHW BILLING: MULTIPLE BILLING PROVIDERS- DIFFERENT SERVICE CODE



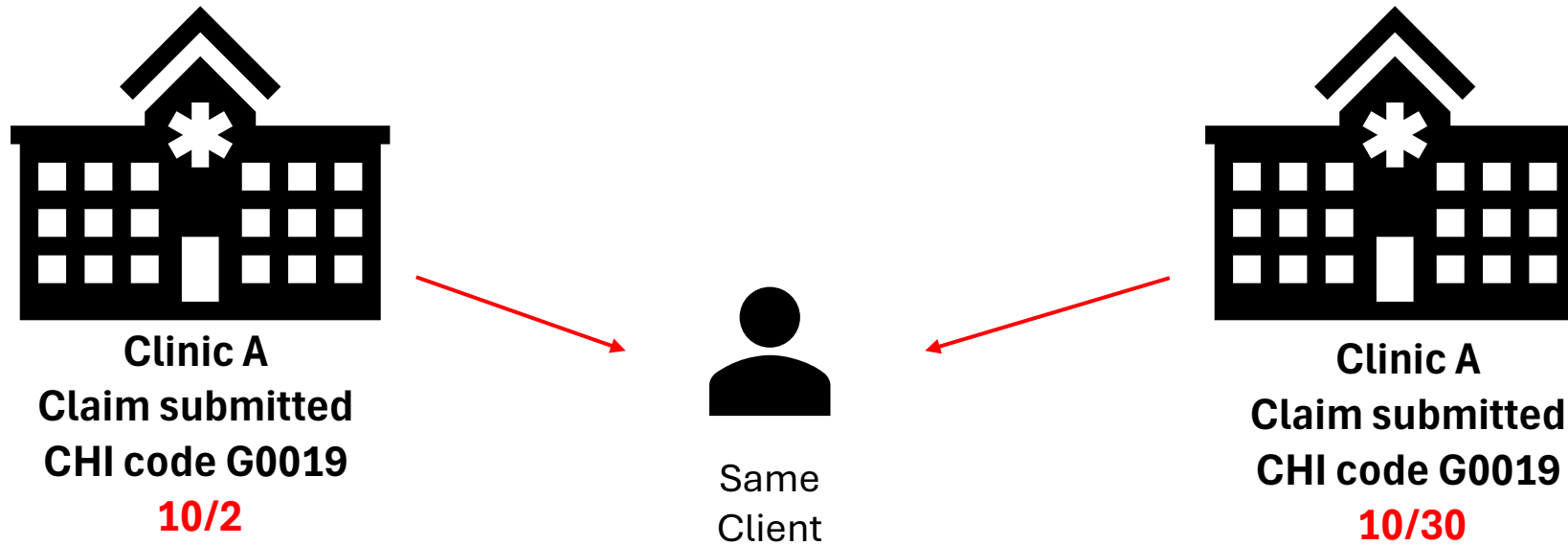
- The monthly billing covers services provided by **one CHW, per client, per month**.
- Clinic A** bills CHI (G0019) or PIN (G0023) first for the month → claim is accepted. **Clinic B** claim is denied because Clinic A already billed CHI first.
- Clinic C** bills PIN (G0023) in the same month → claim is accepted because they are billing **a different service type**.
- Any use of the add on codes (G0022 or G0024) must be listed on claim with primary codes.
- All CHW services must be billed using the clinic's NPI as the billing provider.

2026 CHW BILLING: MULTIPLE BILLING PROVIDERS- DIFFERENT SERVICE CODE



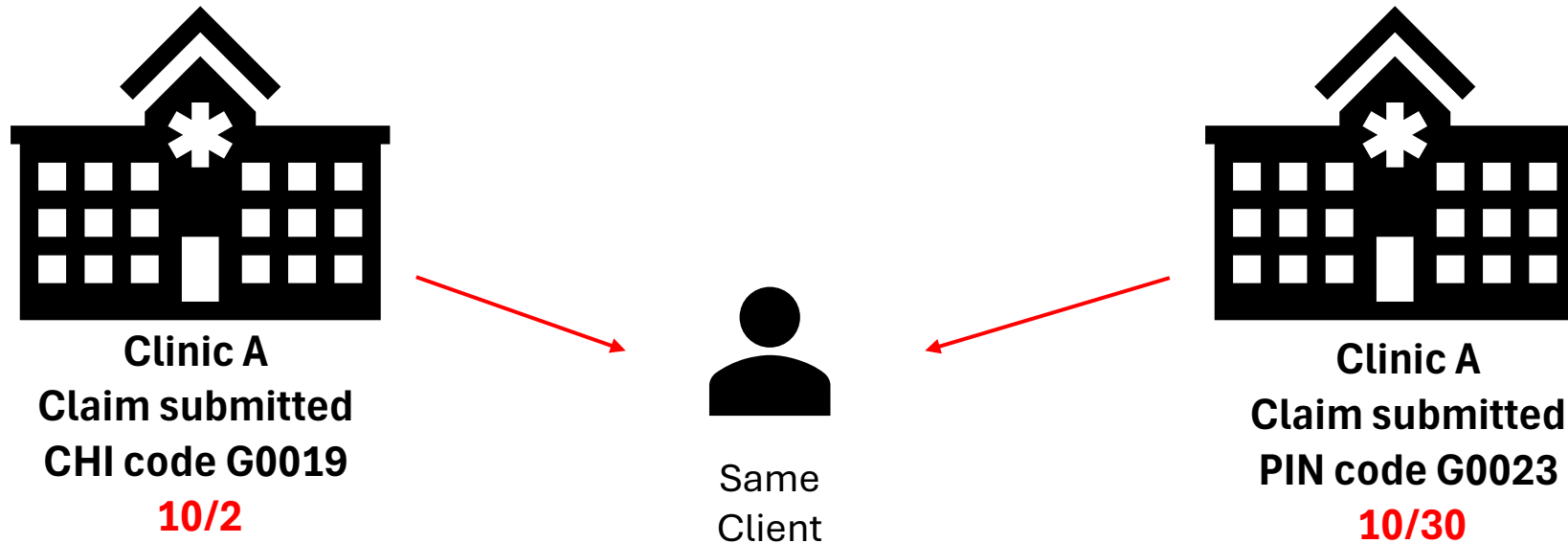
- Each clinic may bill G0019 or G0023, including their add-on codes, once per month per client.
- The monthly billing covers services provided by **one CHW per client**.
- Any use of the add on codes (G0022 or G0024) must be listed on claim with primary codes.
- All CHW services must be billed using the clinic's NPI as the billing provider.

CURRENT CHW BILLING: SAME BILLING PROVIDERS- SAME SERVICE CODE



- If Clinic A has two CHWs serving the same client
- Clinic A may bill:
 - CHI for one CHW and PIN for a different CHW
- Clinic A may **NOT** bill:
 - CHI twice (across two CHWs), or PIN twice (across two CHWs)
 - All CHW services must be billed using the clinic's NPI as the billing provider

CURRENT CHW BILLING: SAME BILLING PROVIDERS- DIFFERENT SERVICE CODE



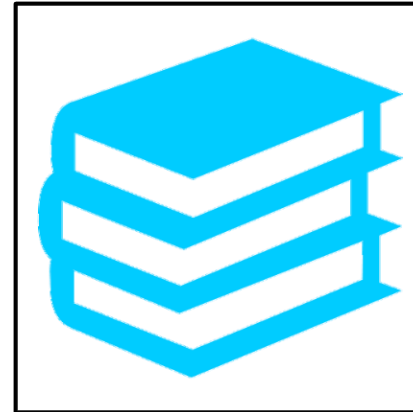
- If Clinic A has two CHWs serving the same client
- Clinic A may bill:
 - CHI for one CHW and PIN for a different CHW
- Clinic A may **NOT** bill:
 - CHI twice (across two CHWs), or PIN twice (across two CHWs)
 - All CHW services must be billed using the clinic's NPI as the billing provider.

S9446: HEALTH EDUCATION & TRAINING

Education to address serious, high-risk
condition

Primary code:

- S9446 (groups)
- \$5.26 (NFS); \$5.26 (FS)
- No time limit
- 2 or more clients



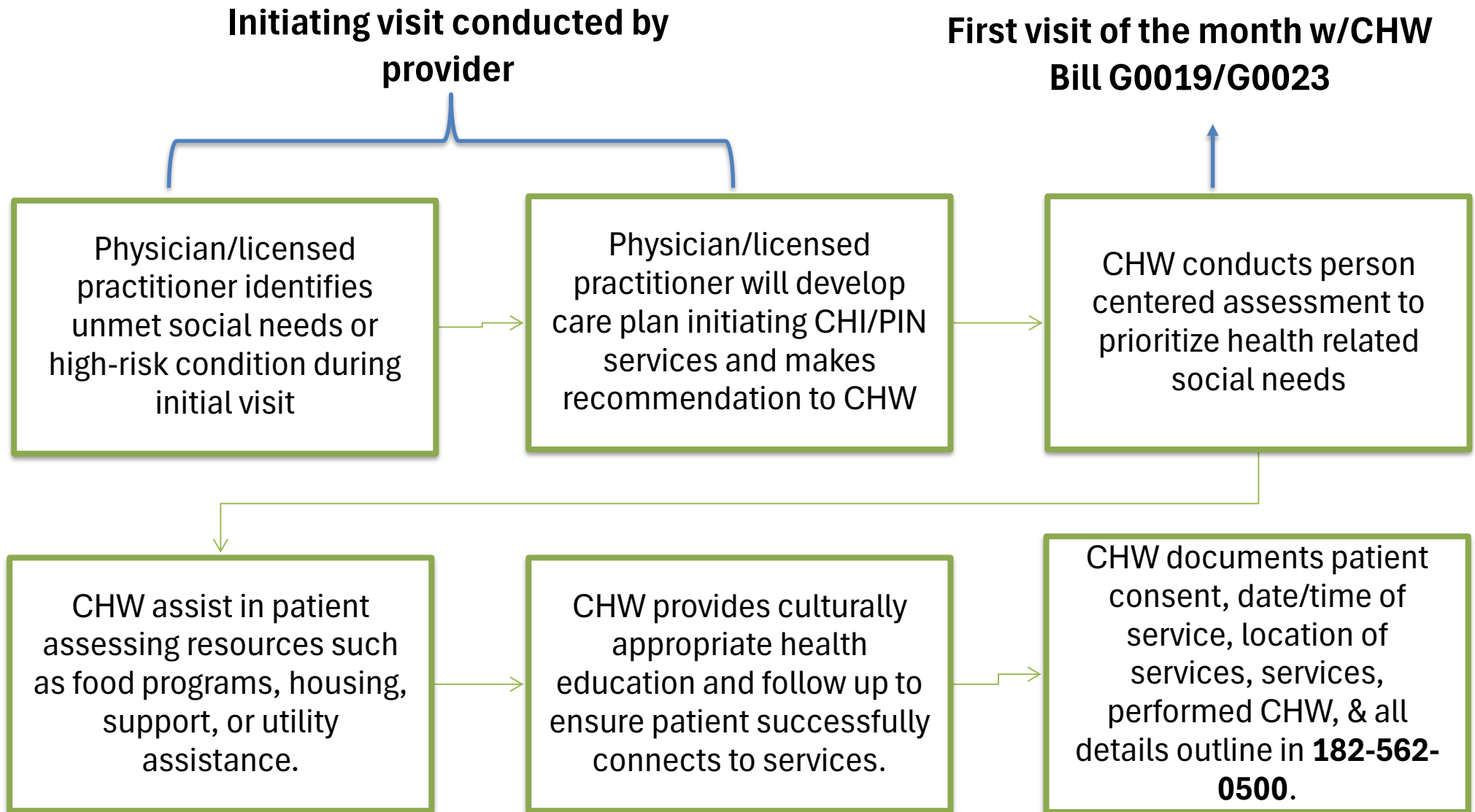
Health education & targeted skill
building

NFS-maximum fee for non-facility setting
FS-maximum fee for facility setting

S9446: HEALTH EDUCATION & TRAINING

- Covers group education for chronic/high risk conditions per session
- Must be billed with **HQ modifier**
- Can only bill 2 sessions per day
- Max allowance is 8 sessions per month
 - More than 8 sessions warrants a limitation ext (LE)
- Services allowed in-person and via telemedicine (**audio-visual only**)

CHI/PIN SERVICE EXAMPLE



SUMMARY OF CHW & PROVIDER REQUIREMENTS

- Agency must be enrolled with its own NPI to bill directly.
 - *Community-based organizations (CBOs) without an NPI must contract with an entity that has one.*
- For Apple Health clients enrolled in Managed Care:
 - *Agencies must have an active contract with the MCO to receive reimbursement.*
- A licensed provider must conduct the initiating visit before CHW services can be billed.
- CHWs must meet all requirements in WAC 182-562, including training, documentation, and service expectations.
- CHWs must operate under—and be supervised by—a licensed provider as outlined in WAC 182-562.

FREQUENTLY ASKED QUESTIONS

CAN CHW ENCOUNTER TIME BE SPLIT ACROSS MULTIPLE VISITS?

Visit #	Service Type	Time Spent (minutes)	Cumulative Minutes	Billing Action	Notes / Included Tasks
1	Home visit / face-to-face	25	25	None	Education, care coordination
2	Phone follow-up / indirect	20	45	None	Scheduling appointments, documentation
3	Clinic visit / face-to-face	15	60	G0019 (1 unit)	Health coaching, care plan review
4	Phone follow-up / indirect	30	90	G0022 (1 unit)	Updating chart, communicating with providers
5	Home visit / face-to-face	30	120	G0022 (2nd unit)	Medication review, teaching self-care
6	Administrative tasks / indirect	30	150	G0022 (3rd unit)	Documentation, reporting, coordinating care

CHW encounter time **may** be split across multiple visits. CHWs are required to:

- Track cumulative time accurately, and
- Meet all documentation requirements outlined in **WAC 182-562-0500**.

DOES THE BENEFIT EXCLUDE COMMUNITY BASED ORGANIZATIONS (CBO)?

The benefit does not exclude community-based organizations. To reimburse for CHW services, CBO must:

- Contract with a Medicaid enrolled agency or MCO;
- Hire/contract a licensed professional to oversee supervision; and
- Recommendations must come from a licensed practitioner.

HOW CAN BEHAVIORAL HEALTH AGENCIES (BHA) BILL FOR CHW SERVICES?

To reimburse for CHW services, BHAs must:

- BHA must bill using their agency's NPI/Taxonomy for AH clients
- For Managed Care Clients, BHA must contract with MCOs

WHAT DOES THIS LOOK LIKE THROUGH A COMMUNITY CARE HUB?

- Accountable Communities of Health (ACHs) oversee and operate a regional Community Care Hub (CCH). All nine ACHs have access to P1 and NPIs. Under the MTP waiver, ACHs have not been tasked to bill for any services.
- **CHI services** addressing HRSN are covered under the MTP waiver. Community-based Workers (CBWs)/CHWs working for CCHs can not bill for CHI services under the CHW-SPA.
- **PIN services** are not covered under the MTP waiver. CBWs/CHWs working for CCHs can bill for PIN services under the CHW-SPA.
- MTP waiver funds cannot be used to set up and/or provide technical assistance on billing PIN services.
- If ACHs are interested in billing for PIN services, ACHs will need to ensure:
 - CBW/CHW meet CHW requirements, per CHW-SPA.
 - The provider they are contracting with is an allowable billable provider, per CHW-SPA.

CAN FQHCS & RHC BILL UNDER THE MEDICAID BENEFIT WHILE?

FQHCs and RHCs are paid using a bundled, all-inclusive rate (PPS or AIR). This rate is based on the clinic's **overall cost of delivering care**, which includes:

- staff salaries
- benefits
- overhead
- supplies
- administrative expenses
- the cost of employing CHWs

CHW services are not encounter-eligible under the FQHC/RHC encounter payment structure. FQHCs and RHCs may still bill for CHW services using the CHW preventive service codes in the same way they would in any other setting.

WILL CHW/CHRS RECEIVED THE ENCOUNTER RATE FOR THE SPECIFIED SERVICES?

- CHW/CHRs **will not** receive the encounter rate for the following codes:
 - G0019, G0022
 - G0023, G0024
 - S9446
- To bill encounter eligible services, tribes will be allowed to use the **T1015 modifier** with benefit codes. The **T1015** can be used for the following services:
 - Medical,
 - Behavioral health,
 - Dental,
 - Pharmacy etc.



Thank you!

For information regarding MTP waiver projects:
medicaidtransformation@hca.wa.gov

Questions regarding the billing process for FQHCs: FQHCRHC@HCA.WA.GOV

Questions regarding rates can be submitted by emailing:
ProfessionalRates@hca.wa.gov

Nikeisha 'Nikki' Banks, MPH
Community Integration Program Manager
Clinical Quality Care Transformation
hcachwbenefit@hca.wa.gov