




Michelle Lujan Grisham, Governor  
Kari Armijo, Cabinet Secretary  
Dana Flannery, Medicaid Director

## Letter of Direction #121

**Date:** 5/30/2024

**To:** Centennial Care 2.0 Managed Care Organizations

**From:** Dana Flannery, Director, Medical Assistance Division 

**Subject:** Implementation of Community Health Workers (CHW) and Community Health Representatives (CHR)

**Title:** Community Health Workers (CHW) and Community Health Representatives (CHR) Benefit

The New Mexico Human Services Department, Medical Assistance Division (HSD/MAD) is issuing this Letter of Direction (LOD) to Managed Care Organizations (MCO) as guidance in implementing reimbursement to increase access to Community Health Workers (CHW) and Community Health Representatives (CHR) services in an outpatient setting starting July 1, 2023. CHW/CHR services include health education, health navigation, and clinical support. Research into CHW/CHR interventions indicates reduced healthcare costs, improved control of chronic conditions including hypertension, diabetes, and pediatric asthma, reduced use of emergency services, and reductions in rehospitalizations.

CHW services are preventive health services, as defined in 42 CFR 440.130(c), to prevent disease, disability, and other health conditions or their progression and to promote physical and mental health and efficiency.

New Mexico Medicaid recognizes that CHR are an integral part of tribal communities. A CHR is an individual who has completed an approved CHR training program through Indian Health Service (IHS) and works under the American Public Health Association (APHA) definition of a CHW and the IHS definition of a CHR.

### 1. Provider Requirements

- a. CHW/CHR must have an active enrollment with New Mexico Medicaid. Enrollment information such as Online Application, Forms, Provider Type & Specialty Spreadsheet and Provider Enrollment Workshop can be found on the New Mexico Medicaid Portal at <https://nmmedicaid.portal.conduent.com/static/index.htm>.

- i. Providers will complete a Provider Participation Agreement (PPA) MAD 312 for individual applicants who perform services within a group or other organization or MAD 335 for groups, organizations, or individual applicants to whom payments will be made.
  - ii. Complete enrollment as a Provider Type 462 and Provider Specialty 230 Certified Community Health Worker (CHW) /Community Health Representative (CHR).
  - iii. Attestation issued from New Mexico Department of Health (DOH) Office of Community Health that an individual, or group may bill Medicaid.
- b. CHW/CHRs are responsible for verifying eligibility of the recipient before providing services using the New Mexico Medicaid Portal.
- c. CHW/CHRs are required to complete New Mexico Statewide Standing Order & Form for Community Health Workers (CHW) and Community Health Representatives (CHR) for each date of service. This completed form must be attached to each claim for potential auditing by the Office of CHWs or HSD.
  - i. Incomplete/inaccurate standing order forms are subject to recoupment. See Attachment #1: New Mexico Statewide Standing Order & Form for Community Health Workers (CHW) and Community Health Representatives (CHR) services in an outpatient setting. The standing order can also be found at New Mexico Medicaid Portal <https://nmmedicaid.portal.conduent.com/static/index.htm>

## 2. Eligible Recipient Requirements

Individuals must be a New Mexico Medicaid eligible recipient.

## 3. Services

CHW/CHR services include system navigation, health promotion and health coaching, and clinical support. CHW/CHR services will be reimbursed for outpatient Medicaid eligible recipients, when the services adhere to the quality guidelines as set out by DOH, Office of CHWs, and when the services are medically necessary. Oversight and program integrity are managed with DOH, Office of CHWs. The work of CHW/CHRs will operate independently under the standing orders generated and signed by the Chief Medical Officer of the Medical Assistance Division. CHW/CHRs should utilize the HSD/MAD CHW Scope of Work form as their standing order form and save this document for potential auditing by the DOH, Office of CHWs or HSD.

- a. Standing Orders Scope of Work:
  - i. System Navigation
    - 1. Address basic needs such as food, shelter and safety;
    - 2. Navigate health and social service system;
    - 3. Facilitate enrollment in health programs and services;
    - 4. Translate and interpret; and
    - 5. Arrange transportation.
  - ii. Health Promotion and Health Coaching
    - 1. Identify individual strengths and needs;
    - 2. Set goals and provide action planning;
    - 3. Teach health promotion and prevention;
    - 4. Coach on problem solving, self-care, and self-management;
    - 5. Utilize harm reduction principles;
    - 6. Support and model behavior change;
    - 7. Promote understanding of health information and health education materials;

- 8. Promote self-sufficiency;
- 9. Lead educational and support groups; and
- 10. Teach families how to self-advocate.
- iii. Clinical Support
  - 1. Conduct home safety assessments;
  - 2. Measure and respond to vital signs;
  - 3. Promote follow-up/maintenance of medical treatment plans;
  - 4. Provide feedback to medical providers; and
  - 5. Coordinate referrals, care, and follow-up.
- b. Non-Covered Services: The CHW/CHR benefit is based on preventive health services and case management services. Several CHW roles do not fall within this benefit including:
  - i. Population health activities such as community outreach, community organizing, community needs assessments, and community advocacy.
  - ii. Duplicative services such as care coordination activities including performing Health Risk Assessments (HRAs) and Comprehensive Needs Assessments (CNAs).
    - 1. These services may be covered when a contract is in place with an MCO to take this responsibility on as a delegated care coordination entity.
  - iii. Transportation of members.
  - iv. Personal and in-home care services such as childcare, assistance with Activities of Daily Living (ADLs), and housekeeping.

**4. Billing**

- a. Claims must be submitted on CMS-1500 claim form.
  - i. Allow taxonomy 172V00000X.
  - ii. Allow CHW/CHR’s individual NPI number must be entered in the “rendering provider” field on the claim form.
  - iii. Require CHW/CHR’s providing services through a clinic the NPI number for the clinic must be entered in the billing provider field on the claim form.
- b. Reimbursement methodology is at the fee schedule rate.
- c. The following Current Procedural Terminology (CPT) codes may be billed by CHW/CHRs:

| Procedure Code | Description   |
|----------------|---|
| 98960          | Education and training for patient self-management, each 30 minutes               |
| 98961          | Education and training for patient self-management, 2-4 patients, each 30 minutes |
| 98962          | Education and training for patient self-management, 5-8 patients, each 30 minutes |

- d. A CHW service provided via telehealth in accordance with NMAC 8.310.2.12.M may be billed using one of the following modifiers:
  - i. GT: Interactive telecommunication (or)
  - ii. 95: Synchronous Telemedicine Service Rendered via Real-Time Interactive Audio and Video Telecommunications System.
- e. Reimbursement limitations:
  - i. A CHW/CHR is limited to 10 units or 5 hours per day of member facing time; and
  - ii. A member is limited to 16 units or 8 hours per 30-day period without prior authorization.

## **5. Claim Adjustments**

The MCO's must allow providers who have met the requirements listed above and provided CHW services to Medicaid eligible individuals within dates of service July 1, 2023, to the present resubmit a corrected claim using the instructions above. MCOs must waive timely filing for any resubmitted claim that denies for timely filing for 90 days from the date of this LOD. MCOs must review the claims submitted or resubmitted prior to this LOD to ensure the claims are paid based on the direction in this LOD.

This LOD will sunset upon completion of the Centennial Care Program on June 30, 2024. If the policies and/or procedures in this LOD will continue to apply in Turquoise Care, HSD will reissue the LOD under Turquoise Care or will include the direction in one or more of the following: Turquoise Care Agreement, Policy Manual, NMAC, or Systems Manual.

**Attachment #1**  
**New Mexico Statewide Standing Order & Form for Community Health Workers (CHW) and**  
**Community Health Representatives (CHR) services in an outpatient setting**  
**Starting July 1, 2023**

**Section A: Authority**

This standing order authorizes any New Mexico Community Health Workers (CHW) and Community Health Representatives (CHR), for system navigation, health promotion and health coaching, and clinical support services

The purpose of this standing order is to implement reimbursement to increase access to CHW & CHR services in an outpatient setting starting July 1, 2023. CHW/CHR services include health education, health navigation, and clinical support. Research into CHW/CHR interventions indicates reduced healthcare costs, improved control of chronic conditions including hypertension, diabetes, and pediatric asthma, reduced use of emergency services, and reductions in rehospitalizations.

This standing order may be used by a CHW, CHR & agencies that provide CHW/CHR services for New Mexico Medicaid eligible recipients as a valid order. This standing order is generated and signed by the Chief Medical Officer of the Medical Assistance Division. CHW/CHRs should utilize the HSD/MAD CHW Scope of Work form as their standing order form and save this document for potential auditing by the Office of CHWs or HSD.

**Section B: Purpose**

This standing order is intended to provide CHW/CHR interventions to reduce healthcare costs, improved control of chronic conditions including hypertension, diabetes, and pediatric asthma, reduced use of emergency services, and reductions in rehospitalizations.

**Section C: Standing Order Scope of Work**

- i. Address basic needs such as food, shelter and safety
- ii. Navigate health and social service system
- iii. Facilitate enrollment in health programs and services
- iv. Translate and interpret
- v. Arrange transportation
- b. Health Promotion and Health Coaching
  - i. Identify individual strengths and needs
  - ii. Set goals and provide action planning
  - iii. Teach health promotion and prevention
  - iv. Coach on problem solving, self-care, and self-management
  - v. Utilize harm reduction principles
  - vi. Support and model behavior change
  - vii. Promote understanding of health information and health education materials
  - viii. Promote self-sufficiency
  - ix. Lead educational and support groups
  - x. Teach families how to self-advocate
- c. Clinical Support
  - i. Conduct home safety assessments

**New Mexico Statewide Standing Order & Form for Community Health Workers (CHW) and  
Community Health Representatives (CHR) services in an outpatient setting  
Starting July 1, 2023**

- ii. Measure and respond to vital signs
- iii. Promote follow-up/maintenance of medical treatment plans
- iv. Provide feedback to medical providers
- v. Coordinate referrals, care and follow-up

**Section D: Non-Covered Services:** The CHW/CHR benefit is based on preventive health services and case management services. Several CHW roles do not fall within this benefit including:

- a. Population health activities such as community outreach, community organizing, community needs assessments, and community advocacy.
- b. Duplicative services such as care coordination activities including performing Health Risk Assessments (HRAs) and Comprehensive Needs Assessments (CNAs).
  - i. These services may be covered when a contract is in place with an MCO to take this responsibility on as a delegated care coordination entity.
- c. Transportation of members
- d. Personal and in-home care services such as childcare, assistance with Activities of Daily Living (ADLs), and housekeeping

**Section E: Results Reporting**

There are no reporting requirements.

**CHW/CHR Standing Orders Form**

**Billing information:**

|                                      |  |
|--------------------------------------|--|
| 1. Recipient/Member Name:            |  |
| 2. Date of Service:                  |  |
| 3. Recipient/Member DOB:             |  |
| 4. Recipient/Member Medicaid Number: |  |
| 5. MCO:                              |  |
| 6. Name of CHW/CHR:                  |  |
| 7. Name & NPI of CHW/CHR agency:     |  |

**ICD-10:** *initial each applicable ICD-10 diagnosis code(s) for the service provided. The same diagnosis that are selected must in the first five positions in the claim)*

|  |  |
|--|--|
|  | Z55: Problems related to education and literacy                                |
|  | Z56: Problems related to employment and unemployment                           |
|  | Z58: Problems related to physical environment                                  |
|  | Z59: Problems related to housing and economic circumstances                    |
|  | Z60: Problems related to social environment                                    |
|  | Z62: Problems related to upbringing  |
|  | Z63: Problems related to primary support group, including family circumstances |

**New Mexico Statewide Standing Order & Form for Community Health Workers (CHW) and  
Community Health Representatives (CHR) services in an outpatient setting  
Starting July 1, 2023**

**Standing Order:** *initial all services that will be provided for the date of service listed in the billing information section in line #2, for the recipient identified on this standing order form.*

|  |   |
|--|---|
|  | <b>System Navigation</b>  |
|  | Address basic needs such as food, shelter, and safety                                     |
|  | Navigate health and social service system   |
|  | Facilitate enrollment in health programs and services                                     |
|  | Interpret information on social services or medical care                                  |
|  | Arrange transportation  |
|  | <b>Health Promotion and Health Coaching</b>   |
|  | Identify individual strengths and needs   |
|  | Set goals and provide action plan   |
|  | Educate on health prevention  |
|  | Coach on problem solving, self-care, and self-management                                  |
|  | Utilize harm reduction principles   |
|  | Support and model behavior change   |
|  | Promote understanding of health information and health education materials                |
|  | Lead educational and support groups   |
|  | Teach families how to self-advocate   |
|  | <b>Clinical Support</b>   |
|  | Conduct home safety assessments   |
|  | Measure and respond to vital signs (with additional training and certification from OCHW) |
|  | Promote follow-up/maintenance of medical treatment plans                                  |
|  | Provide feedback to medical providers   |
|  | Coordinate referrals, care and follow-up  |

The standing order form must be completed for each date of service, submitted with each claim and retained in the recipient’s record for potential auditing by the Office of CHWs or HSD.

This standing order will be reviewed and updated as needed.



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