

Updates on Coverage of Community Health Worker (CHW)

Effective Oct. 1, 2023, Healthfirst will reimburse Community Health Worker (CHW) services for pregnant and postpartum people as a preventive medical service when billed under a Medicaid-enrolled supervising licensed provider. Medicaid, HARP, and Connection Plan members are eligible for CHW services during pregnancy and **up to 12 months** after the end of pregnancy, regardless of how the pregnancy ends.

Additionally, Effective Jan. 1, 2024, NYS Medicaid has expanded the populations eligible for CHW services beyond pregnant and postpartum populations, noted above. As a result, Healthfirst will also reimburse CHW services for the expanded population below:

- All children under 21 years of age
- Adults with chronic conditions
- Justice-involved individuals
- Individuals experiencing community violence
- Individuals with unmet health-related social care needs in the domains of housing, nutrition, transportation, or interpersonal safety, which have been identified through screening using the [Centers for Medicare & Medicaid Services \(CMS\) Accountable Health Communities Health-Related Social Needs Screening Tool](#)

What is a CHW?

A CHW functions as a liaison between healthcare systems, social services, and community-based organizations to improve access to services and resources while also helping to improve health outcomes of the population they serve.

CHW services which shall include, but not be limited to, culturally appropriate patient education, health care navigation, care coordination including the development of a care plan, patient advocacy, and support services, when such services are recommended by a physician

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or other health care practitioner authorized under title eight of the education law, and provided by qualified community health workers, as determined by the commissioner of health.

The CHW is a public health worker, not otherwise recognized as a licensed or certified provider type, who reflects their community through lived experience that may include, but is not limited to:

- Pregnancy and birth
- Housing status
- Mental health conditions or substance use
- Shared race, ethnicity, language, or community of residence

Please note that CHWs will not enroll in or bill NYS Medicaid directly. CHW services are billed by the supervising NYS Medicaid-enrolled practitioners. The requirements for the role of CHW including the oversight and training can be found in the Community Health Worker Policy Manual located on the [eMedNY “Provider Manuals” webpage](#).

Eligible Supervising Entities

- Clinic
- Hospital Outpatient Department (OPDs)
- Physician
- Midwife
- Nurse Practitioner (NP)
- Psychologist
- Licensed Clinical Social Worker (LCSW)
- Licensed Mental Health Counselor (LMHC)
- Licensed Marriage and Family Therapist (LMFT)

Information on Billing and Reimbursement

The supervising licensed provider is the billing provider and must be enrolled as a Healthfirst Medicaid billable licensed provider or institution.

Services must be documented in the individual's record. Documentation must include dates, times, and duration of services provided to Medicaid members. Documentation must reflect information on the nature of the service and support the length of time spent with the individual that day.

The below grid details the codes and modifiers, benefit limitations, and reimbursement rates for CHW services:

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Codes & Modifiers	Description	Benefit Limitations	Reimbursement Rates
98960 (U1, U3)	Self-management education and training face to face using a standardized curriculum for an individual Medicaid member, each 30 minutes.	Annual per member allowance: (12) units total for adult populations (from the date of first service) (24) units total for pediatric population (under 21 years of age) (30 minutes = 1 *unit)	\$35.00
98961 (U1, U3)	Self-management education and training face to face using a standardized curriculum for two to four Medicaid members, each 30 minutes.		\$16.45
98962 (U1, U3)	Self-management education and training face to face using a standardized curriculum for five to eight Medicaid members, each 30 minutes.		\$12.25

*One unit must be a minimum of 16 minutes with a maximum of 37 minutes.

Please note: When billing Medicaid fee-for-service (FFS) or Medicaid Managed Care (MMC) Plans providers are to follow the billing guidance recommended by New York State Department of Health (NYSDOH).

Questions

If you have any questions, please contact your Network Account Manager, or call Provider Services at 1-888-801-1660, Monday to Friday, 8:30am-5:30pm.

You can also find more information at [NYSDOH September Medicaid Update](#).