

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2024198 DECEMBER 10, 2024

IHCP updates CHW certification requirements; reminds providers of service coverage

In *Indiana Health Coverage Programs (IHCP) Bulletin [BT201826](#)*, the IHCP announced coverage of services performed by community health workers (CHWs). In January 2024, the CHW was included under the certification of Certified Peer Support Professional (CPSP).

The IHCP will recognize certification from the following entities to demonstrate that the core competencies of a CHW have been met:

- Affiliated Service Providers of Indiana (ASPIN)
- Division of Mental Health and Addiction (DMHA)
- Indiana Community Health Workers Association (INCHWA)



Besides obtaining certification from one of the entities listed above, the IHCP recognizes certifications from other training organizations that address the following identified CHW competencies:

- Communication skills
- Interpersonal and relationship building skills
- Service coordination and navigation skills
- Capacity-building skills
- Advocacy skills
- Education and facilitation skills
- Individual and community assessment skills
- Outreach skills
- Professional skills and conduct
- Evaluation and research skills
- Knowledge base

Certification recognition may include individuals who have an academic degree (at least an associate's degree) in a healthcare-related field or have employer-based training around health promotion and community health integration that provides training in the above identified CHW competencies.

Evidence shows that using CHWs to extend the reach of healthcare providers in underserved communities reduces health disparities, enhances provider communication, and improves health outcomes and overall quality measures. The IHCP reimburses services provided by CHWs. Coverage for CHW services applies to all IHCP programs subject to limitations established for certain benefit packages, for dates of service (DOS) on or after **July 1, 2018**.

The IHCP adopted the definition of a CHW from the American Public Health Association: *A community health worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served.* This trusting relationship enables the CHW 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. A CHW also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy.



CHWs do not enroll as providers with the IHCP. Rather, CHWs are required to be employed by an IHCP-enrolled billing provider and to deliver services under the supervision of one of the following IHCP-enrolled provider types:

- Physician
- Health services provider in psychology (HSPP)
- Advanced practice registered nurse (APRN)
- Physician assistant
- Podiatrist
- Chiropractor

The billing provider must maintain documentation of CHW certification for the individual providing the CHW services.

Covered and noncovered CHW services

The IHCP covers the following CHW services:

- Diagnosis-related patient education for members regarding self-managing physical or mental health, in conjunction with a healthcare team – This service allows a CHW to extend education efforts associated with any physical or mental health concern that a member may encounter.
- Facilitation of cultural brokering between a member and the member's healthcare team – This service allows a CHW to act as a facilitator between a Medicaid member and a provider when cultural factors (such as language or socioeconomic status) become a barrier to properly understanding treatment options or treatment plans.
- Health promotion education to a member on behalf of the healthcare team to prevent chronic illness – This service allows a CHW to discuss and promote healthy behaviors with a member to increase awareness and avoid the development of chronic illnesses.
- Direct preventive services or services aimed at slowing the progression of chronic diseases

The IHCP does **not** cover the following CHW services:

- Insurance enrollment and “navigator” assistance
- Case management and care coordination
- Arranging for transportation or providing transportation for a member to and from services
- Direct patient care outside the level of training and certification an individual has attained

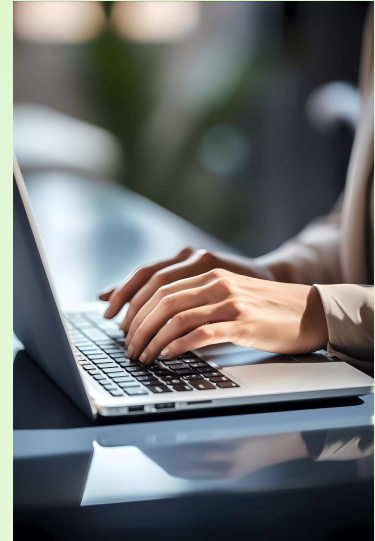
Billing for CHW services

IHCP billing providers can submit claims for employed CHWs who are under the supervision of one of the provider types mentioned previously in this bulletin. The following procedure codes will be covered for billing CHW services:

- 98960 – *Self-management education & training, face-to-face, 1 patient*
- 98961 – *Self-management education & training, face-to-face, 2–4 patients*
- 98962 – *Self-management education & training, face-to-face, 5–8 patients*

These procedure codes have been covered for DOS on or after **July 1, 2018**, and are only used to indicate CHW services. The following reimbursement guidelines apply:

- Coverage parameters and limitations – The IHCP applies the following coverage parameters and limitations to CHW services:
 - Covered CHW services must be provided face-to-face with the member, individually or in a group, in an outpatient, home, clinic or other community setting.
 - Covered CHW services are limited to four units (or two hours) per day, per member.
 - Covered CHW services are limited to 24 units (or 12 hours) per month, per member.
 - Prior authorization – Prior authorization (PA) is not required for CHW services. The billing provider must maintain documentation of medical necessity for any services provided by a CHW. Providers are expected to adhere to the established unit limitations; adherence will be subject to postpayment review.
 - Pricing – 50% of resource-based relative value scale (RBRVS)
 - Billing guidance – The following billing guidance applies:
 - Services must be billed on a professional claim (*CMS-1500* claim form or its electronic equivalent). *Hospital Assessment Fee (HAF) adjustments are not available for CHW services.*
 - The supervising provider should be billed as the rendering provider on the claim.
 - Claims must include the name of the CHW in the claim notes.
 - Procedure codes for CHW services should be billed in 30-minute units.
 - Separate claim lines should be billed for each DOS that services are provided.
 - Claims must include an appropriate diagnosis.



QUESTIONS?

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