



**Louisiana Department of Health**  
**Informational Bulletin 22-21**  
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**Community Health Workers in Federally Qualified Health Centers and Rural Health Clinics**

Medicaid received approval from the Centers for Medicare and Medicaid Services (CMS) to reimburse services rendered by qualified Community Health Workers (CHW) in federally qualified health centers (FQHC) and rural health clinics (RHC) effective for dates of service on or after January 1, 2022.

CHW service reimbursement is based on an alternative payment methodology, which allows reimbursement outside of the current Prospective Payment System rate for CHW services provided in FQHC and RHC settings. Providers will receive payment for services at the rate on file for the date of services as published on the Professional Service fee schedule on [www.lamedicaid.com](http://www.lamedicaid.com).

In order to be considered for reimbursement, FQHC and RHC claims for CHW service reimbursement ~~may~~ must include all of the following:

- A Healthcare Common Procedure Coding System (HCPCS) for the visit (T1015, H2020, or D0999);
- An evaluation and management code; and
- The corresponding Current Procedural Terminology (CPT) code for the CHW services to receive reimbursement.

If an evaluation and management code is included on the claim, reimbursement will be the rate on file for the encounter visit in addition to the rate on file for the CHW services for the date of service.

If an evaluation and management code is **NOT** included on the claim, reimbursement will be the rate on file for the CHW services for the date of service.

An evaluation and management visit must be conducted within 30 days of the CHW services.

~~FQHCs/RHCs will be reimbursed the rate on file for the encounter visit in addition to the rate on file for the CHW services for the date of service.~~

The policy for CHW services is located in the Professional Services Provider Manual on [www.lamedicaid.com](http://www.lamedicaid.com).

FQHC and RHC policy regarding billing of CHW services is located on [www.lamedicaid.com](http://www.lamedicaid.com) in the respective provider manuals.

Fee-for-Service (FFS) system updates are pending and this notice will be updated once system changes are implemented. Claims will be recycled upon implementation.

Managed care organizations (MCO) must make system updates and recycle any claims that were paid incorrectly according to this change within 60 days of this notice. MCOs must also notify providers of their process and timeline for implementing the changes, as well as their plan to recycle impacted claims.

Questions regarding FFS claims processing should be directed to Gainwell Technologies Provider Services at (800) 473-2783 or (225) 924-5040.

Questions regarding managed care claims processing should be directed to the appropriate MCO.

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