

- Q1: [What is a CHW/CHR?](#)
- Q2: [What is a Certified CHW/CHR?](#)
- Q3: [What services do CHWs/CHRs provide?](#)
- Q4: [What Medicaid covered services will be billable by a CHW/CHR?](#)
- Q5: [Is CHW/CHR certification required in order to bill Medicaid for services provided?](#)
- Q6: [How does a CHW/CHR obtain voluntary certification?](#)
- Q7: [Does a CHW/CHR need to be an AHCCCS registered provider to bill for CHW/CHR services?](#)
- Q8: [What provider types can bill for CHW/CHR services?](#)
- Q9: [How does a CHW/CHR organization become an AHCCCS-registered provider?](#)
- Q10: [Will AHCCCS provide additional information about how CHW/CHR organizations can enroll and receive Medicaid reimbursement for CHW/CHR services?](#)
- Q11: [How does an employer bill for CHW/CHR services?](#)
- Q12: [Can CHW/CHR Medicaid covered services be provided via telehealth?](#)
- Q13: [Are case management services a billable service for CHW/CHRs?](#)
- Q14: [Can a CHWs/CHR bill for Peer Support Services \(PSS\)?](#)
- Q15: [Can CHWs/CHRs bill for travel expenses?](#)
- Q16: [When will CHW/CHRs be able to bill Medicaid for the services described in Q4?](#)
- Q17: [If I have additional questions about Medicaid reimbursement for CHW/CHRs, who should I contact?](#)

Q1: What is a CHW/CHR?

A1: A CHW/CHR is a non-physician, frontline public health worker who is a trusted member of and/or has an in-depth understanding of the community served, often because they are from those communities. This generally means they have deep connections with the vulnerable communities they serve, including experience-based knowledge on how to build individual and community capacity, how to effectively outreach and educate the community, and how to deliver culturally appropriate health education and information. A CHW/CHR serves as a liaison between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery, including the coordination of services to improve medical and behavioral health outcomes.

For purposes of these FAQs, Community Health Worker is an umbrella term used to encompass many different job descriptions including Community Health Representatives, Patient Navigator, Promotores de Salud, Community Health Advisors, and Cultural Health Navigators.

Q2: What is a Certified CHW/CHR?

A2: In May 2018, Governor Ducey signed [House Bill 2324](#) establishing the Community Health Worker Voluntary Certification in Arizona. A “Certified CHW” means the Arizona Department of Health Services (ADHS) has issued a certificate to an individual who meets the qualifications to practice as a certified CHW in the state of Arizona according to the requirements outlined in the [CHW Voluntary Certification Rules](#).

Q3: What services does a CHW/CHR provide?

A3: A CHW/CHR builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as community education, informal counseling, social support, and advocacy. Additional details regarding the CHW/CHR Scope of Practice are covered in the [CHW Voluntary Certification Rules](#).

Q4: What Medicaid covered services will be billable by a CHW/CHR?

A4: Member education and preventive services delivered by certified CHWs/CHRs may be provided to members with a chronic condition, at risk for a chronic condition, or with a documented barrier that is affecting the member’s health. Medicaid billable service codes include 98960, 98961, and 98962. The certified CHW/CHR employed by an AHCCCS registered provider can submit claims for a maximum of four units per day, up to 24 units per month, per member. Total units allowable is inclusive of all 3 billable codes; codes cannot be billed together on the same day for the same member. If additional services are medically necessary, prior authorization is required. For purposes of FQHCs billing the PPS/APM rate, services provided by a CHW/CHR do not meet the definition of a face-to-face encounter with a licensed, AHCCCS registered practitioner during which an AHCCCS-covered ambulatory service is provided. As a result, services provided by the CHW/CHR would be considered services “incident to” an ambulatory service. FQHCs may submit a scope of service change to account for CHW/CHR services as part of the PPS/APM rate calculation until the next rate rebase. For purposes of IHS/638 billing, facilities shall bill the fee schedule rate as opposed to the all-inclusive rate (AIR) based on the same logic provided above for FQHCs.

Q5: Is CHW/CHR certification required in order to bill Medicaid for services provided?

A5: Yes. While a CHW/CHR may provide community health services in Arizona without obtaining voluntary certification, AHCCCS will only reimburse services provided to eligible members by a certified CHW/CHRs. Providers may employ CHWs/CHRs who are not certified, but they will not be able to bill Medicaid for service provided by non-certified CHWs/CHRs.

Q6: How does a CHW/CHR obtain voluntary certification?

A6: Obtain voluntary certification through the Arizona Department of Health Services (ADHS). See the ADHS [Community Health Worker Licensing Management System \(LMS\)](#) for more information.

Q7: Does a CHW/CHR need to be an AHCCCS-registered provider to bill for CHW/CHR services?

A7: No, a certified CHW/CHR is not individually registered with AHCCCS. Instead, the CHW/CHR must be employed by an AHCCCS-registered provider. A CHW/CHR can be employed by multiple AHCCCS-registered providers, and AHCCCS-registered providers may employ multiple CHWs/CHRs. Claims for covered services provided by the certified CHW/CHR would be submitted by the registered provider. AHCCCS-registered providers seeking Medicaid reimbursement must provide proof of certification of employed CHW/CHR upon request by AHCCCS.

Q8: What provider types can bill for CHW/CHR services?

A8: In order to obtain Medicaid reimbursement, a certified CHW/CHR may deliver covered services within their scope of practice under the employment of one of the following AHCCCS-registered provider types with category of service “COS01”:

<ul style="list-style-type: none"> ○ 638 FQHC (PT C5), ○ Behavioral Outpatient Clinics (PT 77), ○ Clinics (PT 05), ○ Community/Rural Health Centers (RHCs) (PT 29), ○ Community Health Worker Organizations (PT CH), ○ DO-Physician Osteopaths (PT 31), 	<ul style="list-style-type: none"> ○ Federally Qualified Health Centers (FQHCs) (PT C2), ○ Hospitals (PT 02), ○ Integrated Clinics (PT IC), ○ MD-Physicians (PT 08), ○ Physician’s Assistants (PT 18), and ○ Registered Nurse Practitioners (PT 19)
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Q9: How does a CHW/CHR organization become an AHCCCS-registered provider?

A9: AHCCCS has established a “CHW/CHR Organization” provider type (PT CH) for organizations which have not historically been able to register as AHCCCS providers. As of February 19, 2024, CHW/CHR Organizations are able to enroll as AHCCCS providers using the [AHCCCS Provider Enrollment Portal](#). During the enrollment process, entities enrolling as a “CHW Organization” (PT CH) need to ensure all required information is provided through the AHCCCS Provider Enrollment Portal, pay an enrollment fee, complete a background check, and coordinate a site visit with AHCCCS Provider Enrollment staff.

Current AHCCCS providers described above will not need to register as a “CHW/CHR Organization” in addition to their current provider type. Current AHCCCS registered providers that wish to employ and bill Medicaid for CHWs but are not reflected in the list above (A #8) may enroll as a “CHW Organization” and bill for CHW services under that provider type, so long as all “CHW Organization” provider qualifications are met.

Q10: Will AHCCCS provide additional information about how CHW/CHR organizations can enroll and receive Medicaid reimbursement for CHW/CHR services?

A10: Yes, AHCCCS will work with CHW/CHR partners to deliver community presentations on topics pertinent to Medicaid reimbursement, such as provider registration and billing. Questions related to the CHW Organization provider type or CHW billing generally can be directed to publicinput@azahcccs.gov.

Q11: How does an employer bill for CHW/CHR services?

A11: Regardless of provider type, once an employer is registered with AHCCCS, it must ensure all CHWs/CHRs it submits Medicaid claims for are certified. The employer may then submit claims using the allowed codes for the covered services provided by its CHWs/CHRs. While CHWs/CHRs are able to continue providing services consistent with their job duties within the state without being certified, they must be certified in order to bill Medicaid. Additional billing guidance is available in the [AHCCCS Fee-for-Service Provider Billing Manual](#).

Q12: Can CHW/CHR Medicaid covered services be provided via telehealth?

A12: CHW/CHR Medicaid covered services may be provided via telehealth so long as they align with the telehealth requirements outlined in the [AHCCCS Medical Policy Manual 320-I](#).

Q13: Are case management services a billable service for a CHW/CHR?

A13: Case management is not a billable service for a CHW/CHR. Current billable codes are limited to 98960, 98961, and 98962.

Q14: Can a CHW/CHR bill for Peer Support Services (PSS)?

A14: No. However, a CHW/CHR can become credentialed as Peer Recovery Support Specialist (PRSS) if they have lived experience with behavioral health or substance use needs and meet the qualifications outlined in [AMPM 963](#). Similarly, a PRSS can become a CHW/CHR if they are uniquely situated to serve their community in the role of a CHW/CHR as described above. If a certified CHW/CHR is credentialed as a PRSS, they would be able to bill for PSS if they are operating within their role as a PRSS. A CHW/CHR without a peer credential may not bill for PRSS. CHW/CHR services must always be billed through the employer.

Q15: Can a CHW/CHR bill for travel expenses?

A15: No, travel expenses may not be specifically billed, as they are incorporated into the general rate of the services being delivered.

Q16: When will CHWs/CHRs be able to be reimbursed by Medicaid for services.

A16: AHCCCS began reimbursing for services provided by certified CHWs/CHRs employed by AHCCCS registered providers on 4/1/23. AHCCCS implemented the “CHW Organization” provider type effective February 19, 2024.

Q17: If I have additional questions about Medicaid reimbursement for CHWs/CHRs, who should I contact?

A17: AHCCCS Medical Policy Manual 310-W and the [AHCCCS Fee-for-Service Provider Billing Manual](#) provide guidance on Medicaid reimbursement for CHWs/CHRs. This document will also be updated as additional information becomes available. Please direct any additional questions, suggestions, necessary clarifications, or feedback on CHW/CHR to publicinput@azahcccs.gov.