



# Molina Healthcare of California CHW Medi-Cal Benefit Frequently Asked Questions (FAQs)

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On January 1, 2023, Community Health Workers (CHW) services became a benefit for all Medi-Cal members. Studies of Community Health Workers have shown a positive impact on improving health outcomes for individuals who experience systemic barriers to care caused by geographic location, language and literacy, and other Social Determinants of Health (SDOH).

Molina's goal is to have access to a broad network of Community Health Workers to support the wellness and health of all our members. Molina aims to accomplish this by adhering to the guidance outlined in the Department of Health Care Services (DHCS) All Plan Letter **(APL) 22-016**: CHW benefit and monitoring referrals, usage and outcomes.

This FAQ document is provided as a resource for community-based organizations that are interested in contracting with Molina to provide CHW services to Molina Medi-Cal members.





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# Community Health Workers (CHWs)

## 1. Who are CHWs?

CHWs are trusted members of their community who help address the issues that are affecting the physical and mental health of their community members. CHWs are not licensed clinicians. CHWs may include individuals such as promoters, community health representatives, navigators, and other non-licensed public health workers, including violence prevention professionals.

### Job titles may include:

- Asthma Educator
- Care Coordinator
- Case Manager
- Community Health Advocate
- Community Health Care Worker
- Community Health Outreach Worker
- Comprehensive Prenatal Health Worker
- Health Coach
- Health Educator
- Health Navigator
- Outreach Specialist
- Peer Community Health Worker
- Perinatal and Pediatric Coordinator
- Trabajador/a Comunitario/a

More job titles can be found in Understanding California's Community Health Worker/Promotor Workforce: A Survey of CHW/Ps on [Page 22](#).

[chcf.org/wp-content/uploads/2022/11/UnderstandingCHWPWorkforceSurveyCHWPs.pdf](https://chcf.org/wp-content/uploads/2022/11/UnderstandingCHWPWorkforceSurveyCHWPs.pdf).

## 2. What services can CHWs provide and charge for as part of the CHW Medi-Cal covered benefit?

- Health education
- Health navigation
- Individual support or advocacy
- Complete screenings and assessments

More detailed definitions of these services can be found in the Glossary of this FAQ document. CHWs can provide these services to members or to a parent or legal guardian of a member under 21 years old. Services provided by CHWs are considered preventive.

### 3. What services cannot be provided/billed by CHWs as part of the CHW Medi-Cal covered benefit?

- Clinical case management/care management that requires a license
- Childcare
- Chore services, including shopping and cooking meals
- Companion services
- Employment services
- Helping a member enroll in government or other assistance programs that are not related to improving their health as part of a plan of care
- Delivery of medication, medical equipment or medical supply
- Personal care services/homemaker services
- Respite care
- Services that duplicate another covered Medi-Cal service already being provided to a member
- Socialization
- Coordinate or assist with transportation
- Services that require a license
- Substance use disorder peer support services

### 4. Why would a CHW work with a member?

#### A CHW may:

- Assist a member with finding an appointment to treat a behavioral health condition.
- Provide a member with health education to control a chronic condition.
- Provide a member with resources to prevent infections.
- Assist a member with accessing services for their sexual or reproductive health.
- Educate a member on the importance of prenatal and postpartum health care.
- Encourage a member to attend preventive appointments including for cancer screenings and immunizations.
- Refer a member to domestic or intimate partner violence support services.
- Help a member get necessary resources following an injury.
- Assist a member with accessing dental services for prevention or treatment.

### 5. How and where can CHW services be provided?

CHW services can be provided as individual or group sessions. The services can also be provided virtually or in-person with locations in any setting including, but not limited to, outpatient clinics, hospitals, homes, or community settings. There are no service location limits for CHWs.



## 6. Who can be a Community Health Worker?

CHWs must have life experience that aligns with and provides a connection between the CHW, and the member or population being served. CHWs must be certified when starting as a CHW for Medi-Cal or get certified within 18 months.

### Certification is determined in three (3) ways:

- 1) The CHW can have a valid certificate of completion of a CHW general curriculum which includes field experience.
- 2) A CHW who only does violence prevention services will need a Violence Prevention Professional (VPP) Certificate issued by [Health Alliance for Violence Intervention thehavi.org/violence-prevention-professional-training](https://thehavi.org/violence-prevention-professional-training) or a certificate of completion in gang intervention training from the [Urban Peace Institute urbanpeaceinstitute.org/our-work-urban-peace-academy/](https://urbanpeaceinstitute.org/our-work-urban-peace-academy/).
- 3) A CHW who does Asthma Preventive Services (APS) must have completed either a certificate from the [California Department of Public Health Asthma Management Academy cdph.ca.gov/Programs/CCDPHP/DEODC/EHIB/CPE/pages/asma.aspx](https://cdph.ca.gov/Programs/CCDPHP/DEODC/EHIB/CPE/pages/asma.aspx), or a certificate demonstrating completion of a training program consistent with the guidelines of the [National Institutes of Health's nhlbi.nih.gov/health-topics/asthma-management-guidelines-2020-updates](https://nhlbi.nih.gov/health-topics/asthma-management-guidelines-2020-updates) Guidelines for the Diagnosis and Management of Asthma.

## 7. What is the difference in the certification requirements between a CHW that provides all covered CHW services and a CHW that only does violence prevention services?

CHWs with a general curriculum certification are allowed to provide all covered CHW services to members including violence prevention services. CHWs that only have a Violence Prevention Professional (VPP) Certificate can only provide violence prevention services to the member. CHWs are encouraged to get one or more certifications to support the members they serve, especially as members' needs change/evolve over time.

## 8. What is the difference in the certification requirements between a CHW that provides all covered CHW services and a CHW that can provide Asthma Preventive Services?

CHWs with a general curriculum certification can provide services to individuals with asthma, but only a CHW trained to provide Asthma Preventive Services (APS) can provide evidence-based asthma self-management education and asthma trigger assessments. CHWs are encouraged to get one or more certifications to support the members they serve, especially as members' needs change/evolve over time.

## 9. A CHW must have lived experience. What are some examples of lived experience?

- A CHW may work with a member who has a similar **cultural background**.
- A CHW who is fluent in a **language other than English** may work with a member who speaks the same language.
- A CHW may work with a member with a similar **ethnicity**.
- A CHW may work with a member with a similar **sexual orientation**.
- A CHW may work with a member with a similar **gender identity**.
- A CHW who has experienced foster care may work with a member who was placed in the **foster system**.
- A CHW who has experienced **homelessness** may work with a member who is currently experiencing homelessness or who has experienced homelessness at other times in their life.
- A CHW who has a **disability** may work with a member who has a disability.
- A CHW who has a **mental health condition** may work with a member who has a mental health condition.
- A CHW who has been **incarcerated** may work with a member who is incarcerated or who has family that are incarcerated.
- A CHW who is in the military, retired from the military, or grew up in a family with parents in the military may work with a member with similarly close ties to **military service**.
- A CHW who has experienced **pregnancy, childbirth, or perinatal events** may work with a member with a similar experience.
- A CHW who has a **history of alcohol or drug misuse** may work with a member with a similar history.
- A CHW who is a **survivor of domestic violence, intimate partner violence, or community violence** may work with a member who is also a survivor of violence.

## 10. Can work experience be substituted for a CHW completion certification?

An individual who has at least 2,000 hours working as a CHW in paid or volunteer positions within the previous three years can begin as a CHW for Medi-Cal but must get a valid certificate of completion of a CHW general curriculum within 18 months. There is no work experience substitution for CHWs that can provide Asthma Preventive Services (APS).

## 11. Does a CHW have to complete a specific general curriculum program?

No. The CHW's Supervising Provider determines which valid curriculum a CHW must complete. The curriculum should ensure that by completion the CHW has demonstrated skills and/or practical training in the following areas: communication, interpersonal and relationship building, service coordination and navigation, capacity building, advocacy, education and facilitation, individual and community assessment, professional skills and conduct, outreach, evaluation and research, and basic knowledge in public health principles and social drivers of health (SDOH). The curriculum must also include field experience. However, if a CHW wants to provide Asthma Preventive Services (APS) or only Violence Prevention Services, then the certification completed must be provided by the specific organization(s) allowable.

# Supervising Providers

## 1. What is a Supervising Provider?

A Supervising Provider is the organization employing or otherwise overseeing the CHW. The Supervising Provider must be a licensed provider, a hospital, an outpatient clinic, a local health jurisdiction (LHJ), or a community-based organization (CBO). A Supervising Provider must have a National Provider Identifier (NPI). The Supervising Provider does not need to be the same entity as the provider who made the written recommendation for CHW services.

## 2. Is the Supervising Provider the employer of the Community Health Worker?

Yes, the Supervising Provider is the employer of the CHW. The Supervising Provider will be the signatory on the Molina contract and will be billing Molina for CHW services rendered. Supervising Providers that already have a Molina contract for other Medi-Cal services will need to sign a Molina CHW Regulatory Amendment. Providers new to Molina will need to sign the complete Molina contract, which includes CHW specific services. Guidance is offered in the [Molina Provider Manual](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf) [molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf) in Section 22: Claims & Compensation to new Providers regarding submitting claims.

## 3. Who can be a Supervising Provider?

The Supervising Provider must be a licensed provider, a hospital, an outpatient clinic, a local health jurisdiction (LHJ), or a community-based organization (CBO). In addition, a Supervising Provider must be able to:

- Demonstrate sufficient experience providing similar services within the service area.
- Submit claims or invoices using standardized Medi-Cal protocols.
- Hold and maintain business licensing that meets industry standards.
- Comply with all reporting and oversight requirements.

## 4. What are the responsibilities of a Supervising Provider?

The Supervising Provider is responsible for ensuring the CHW services are in compliance with the DHCS APL [22-016 dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-016.pdf](https://dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-016.pdf). CHW Benefit, the [Molina Provider Manual](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf) [molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf), and the DHCS Medi-Cal Provider Manual: [CHW Preventive Services files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf) and [Asthma Preventive Services files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/asthprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/asthprev.pdf). Responsibilities of the Supervising Provider include ensuring CHWs properly document member interactions, meet necessary qualifications, and submit claims in a timely and accurately. Supervising Providers must provide direct or indirect oversight to CHWs. The Supervising Provider ensures that CHWs have adequate experience, supervision, education, certifications, and training. The Supervising Provider must be able to provide reporting to Molina on CHW services as requested, in a mutually agreed upon format.

## 5. Does a Supervising Provider have to manage the day-to-day supervision of the CHWs they supervise?

No. Supervising Providers do not need to manage the day-to-day supervision of CHWs. The Supervising Provider can delegate the management and day-to-day supervision of CHWs. Supervising Providers do not need to be physically present at the location when CHWs provide services to beneficiaries.

## 6. What reporting, outside of the normal billing process, is the Supervising Provider responsible for?

Quarterly reporting from Supervising Providers to Molina will consist of the following data elements at minimum: Supervising Provider National Provider Identifier (NPI), Name of the Supervising Provider, CHW NPI (if applicable), Name of the CHW, Full-time equivalent (FTE) for the CHW, number of Molina Members currently assigned to the CHW, estimated number of Members that the CHW can see at caseload capacity (range), demographic information for the CHW including age, race, ethnicity, sexual orientation, gender identity, languages spoken, home zip code, lived experience or specialty (if any). Additional reporting may be necessary, if the CHW is unable to use Molina's Clinical Care Advance (CCA) system for documenting Member engagement.

# Billing and prior authorization

## 1. What type of payment do CHWs get through the CHW Medi-Cal benefit?

CHWs get paid a fee-for-service rate for claims submitted using the designated CHW billing codes per the DHCS Medi-Cal Provider Manual.

## 2. Who is responsible for the CHW Medi-Cal benefit payment?

Molina is the health plan payor for Molina Medi-Cal members. The Division of Financial Responsibility (DOFR), a section of the Molina contract, should be referenced if there are additional questions.

## 3. Does a Supervising Provider have to have a National Provider Identifier (NPI)?

Yes. A Supervising Provider must have a National Provider Identifier (NPI).

## 4. Does a CHW have to have a National Provider Identifier (NPI)?

No. CHWs do not need to have an NPI to work as a CHW for Medi-Cal. A CHW can work as a CHW for Medi-Cal and bill using the Supervising Provider's NPI. However, CHWs can have an NPI and can apply for an NPI.

## 5. How does a Supervising Provider or CHW get paid for CHW services rendered to Molina Medi-Cal members?

Claims must be submitted for CHW services through the CHW Supervising Provider or directly if the CHW is a Medi-Cal enrolled provider. Claims for CHW services must be submitted with allowable current procedural terminology codes as outlined in the DHCS Medi-Cal Provider Manual sections: [CHW \(CHW\) Preventive Services files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf), [Asthma Preventive Services \(APS\) files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/asthprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/asthprev.pdf), [Medicine: Telehealth files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/mednetele.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/mednetele.pdf), and [Modifiers Used with Procedure Codes files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/modifused.pdf](https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/modifused.pdf). Guidance is offered in the [Molina Provider Manual molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf) in Section 22: Claims & Compensation to Providers regarding submitting claims. New Molina network providers receive an orientation via their assigned local Provider Services Representative in person or virtual, depending on provider preference. Orientation offers new providers an opportunity to ask questions and interact with their assigned Provider Services Representative. Training materials are easily accessible to providers and their staff 24/7/365 through the Molina website, provider portal, or requested hard copy.



## 6. Are there other codes needed for submitting claims or encounters to Molina for CHW services?

In addition to the appropriate CHW benefit CPT® codes and modifiers required to submit claims and encounter information for CHW Medi-Cal services rendered, the Department of Health Care Services has identified 25 Priority Social Determinants of Health (SDOH) Codes, based on the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), when coding for SDOH in claims and encounters to ensure correct coding and capture of reliable data. The full list and details can be found in [APL 21-009 dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf](https://dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf). Collecting Social Determinants of Health Data. Relevant codes should be included in the claim's submission, in addition to the appropriate CHW billing codes.

## 7. Is a prior authorization required before providing Medi-Cal Members with CHW services?

Since CHW services are considered preventive, prior authorization is not required. For members who need multiple ongoing CHW services or continued CHW services after 12 units of services as defined in the DHCS Medi-Cal [Provider Manual files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf), a plan of care must be written by one or more individual licensed providers, which may include the recommending provider and other licensed providers affiliated with the CHW Supervising Provider. The Supervising Provider is responsible for ensuring a written plan of care is created for any member continuing services and must document this plan of care.

## 8. Is the prior authorization requirement different for CHWs for Asthma Preventive Services (APS)?

Since APS specific CHW services are a preventive service, prior authorization is not required. For members who need multiple ongoing APS specific CHW services after 8 units of services as defined in the DHCS Medi-Cal Provider Manual, a plan of care must be written by one or more individual licensed providers, which may include the recommending provider and other licensed providers affiliated with the CHW Supervising Provider. The Supervising Provider is responsible for ensuring a written plan of care is created for any member continuing services and must document this plan of care.

## 9. Does the provider ordering the plan of care need to be the same provider who initially recommended CHW services or the Supervising Provider for CHW services?

No, the provider ordering the plan of care does not need to be the same provider who initially recommended CHW services or the Supervising Provider for CHW services. CHWs may participate in the development of the plan of care and may take a lead role in drafting the plan of care if done in collaboration with the member's care team and/or other providers.

## 10. What is a plan of care?

The plan of care is a document that details the needs of the member and the plan to resolve identified concerns. The plan of care cannot exceed a period of one year. The plan of care must:

- Specify the condition that the service is being ordered for and be relevant to the condition.
- Include a list of other health care professionals providing treatment for the condition or barrier.
- Contain written objectives that specifically address the recipient's condition or barrier affecting their health.
- List the specific services required for meeting the written objectives; and
- Include the frequency and duration of CHW services (not to exceed the Provider's order) to be provided to meet the plan's objectives.

## 11. How often does a plan of care need to be reviewed?

A licensed provider must review the member's plan of care at least every six months from the effective date of the initial plan of care. The plan of care may be reviewed more frequently depending on changes in the individual member's conditions and progress toward goals. The licensed provider must determine if progress is being made toward the written objective and whether services are still medically necessary. If there is a significant change in the recipient's condition, providers should consider amending the plan for continuing care or discontinuing services if the objectives have been met.

# Member referrals and reporting

## 1. How do members qualify for CHW services?

Members are eligible for CHW services if they meet one or more of the criteria below:

- Chronic health condition suspected or diagnosed.
- Behavioral health condition suspected or diagnosed.
- Presence of medical indicators of rising risk of chronic disease.
- Any stressful life event presented via the Adverse Childhood Events screening.
- Risk factors including domestic or intimate partner violence, tobacco use, alcohol misuse, and/or drug misuse.
- Social Determinant of Health (SDOH) needs like housing or food insecurity.
- One or more visits to a hospital emergency department within the previous six months.
- One or more hospital inpatient stays, including stays at a psychiatric facility, within the previous six months.
- At risk of institutionalization within the previous six months.
- One or more stays at a detox facility within the previous year.
- Two or more missed medical appointments within the previous six months.
- Member expressed need for support in health system navigation or resource coordination services.
- Need for recommended preventive services, including updated immunizations, annual dental visit, and well child/care visits for children.
- Community violence: injured because of community violence, significant risk of experiencing violent injury as a result of community violence or has experienced chronic exposure to community violence.
- Environmental health exposure.

## 2. How are members eligible for Asthma Preventive Services (APS)?

Members are eligible for APS if they meet one or more of the criteria below:

- Diagnosis of asthma.
- Current diagnosis of poorly controlled asthma.

A current diagnosis of poorly controlled asthma is required for a member to get an in-home environmental trigger assessment.

## 3. Who cannot enroll in Medi-Cal CHW services?

Members enrolled in Enhanced Care Management (ECM) cannot also receive CHW services outside of their ECM Care Team. CHW services are not eligible for separate reimbursement when billed for members enrolled in the ECM program.

#### 4. Does a member need a provider referral to receive CHW services?

Yes. To get CHW services, including those for Asthma Preventive Services (APS), a member needs a written recommendation submitted to Molina by a physician or other licensed practitioner of the healing arts within their scope of practice under state law. Other licensed practitioners who can recommend CHW services within their scope of practice include physician assistants, nurse practitioners, clinical nurse specialists, podiatrists, nurse midwives, licensed midwives, registered nurses, public health nurses, psychologists, licensed marriage and family therapists, licensed clinical social workers, licensed professional clinical counselors, dentists, registered dental hygienists, licensed educational psychologists, licensed vocational nurses, and pharmacists. This is not the same as a prior authorization.

#### 5. How are Members identified for CHW services?

Members are identified for CHW services including those for Asthma Preventive Services (APS) by referral from a physician or other licensed practitioner of the healing arts within their scope of practice or through Molina's internal data analysis process. For a provider to refer a member for CHW services, they must complete a CHW Referral Form found on the [Frequently Used Forms molinahealthcare.com/providers/ca/medicaid/forms/fuf.aspx](https://molinahealthcare.com/providers/ca/medicaid/forms/fuf.aspx) page on the [Molina Healthcare Provider website molinahealthcare.com/providers/ca/medicaid/home](https://molinahealthcare.com/providers/ca/medicaid/home). The form must then be emailed, faxed, or called in to designated staff at Molina. The Molina staff will link the member with the CHW they selected or assign a CHW that is available for them based on their specific needs.

#### 6. How do CHWs know they have been assigned a member?

Molina staff will reach out to the CHW and the Supervising Provider via secure communication to notify them of newly assigned members. Members may be assigned one at a time or many at a time. CHWs will only be assigned a member if there is a provider referral on record.

#### 7. Does the CHW need to use a specific system to document member engagement?

Molina asks that all CHWs register for the Clinical Care Advance (CCA) system, Molina's care management platform. This system is the best way for Molina to track Member enrollment, care status, and disenrollment. Upon contracting with Molina, we will work with the Supervising Provider to get all CHWs on their staff access to CCA. Once a member is assigned to a CHW, the CHW will outreach to the member. All tracking for initial member engagement can be done in the CHW enrollment assessment form. Additional guidance on what systems should be accessed to meet Molina's Medi-Cal member needs can be found in the [Molina Provider Manual molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf](https://molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf) in Section 6: Provider Responsibilities and Information. Additional reporting and data exchange will be necessary if the CHW is unable to use Molina's Clinical Care Advance (CCA) system for documenting member engagement.

#### 8. Once a member is engaged with a Community Health Worker, now what?

CHWs will provide the member with health education, health navigation, individual support or advocacy, and complete appropriate screenings and assessments. CHWs are required to document the dates and time/duration of services provided to members. Documentation should also reflect information on the nature of the service provided and support the length of time spent with the patient. Documentation must be accessible to the Supervising Provider and Molina upon request. Documentation should be integrated into the member's medical record. If a CHW has a National Provider Identifier (NPI), that should be included in the documentation.

## 9. If a member needs ongoing CHW services, what needs to be completed?

For members who need multiple ongoing CHW services or continued CHW services after 12 units of service as defined in the DHCS Medi-Cal [Provider Manual files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf), a plan of care must be written by one or more individual licensed providers, which may include the recommending provider and other licensed providers affiliated with the CHW Supervising Provider. The Supervising Provider is responsible for ensuring a written plan of care is created for any member continuing services after 12 units.

## 10. What does the CHW do when the member is ready to disenroll?

Molina asks that all CHWs register for the Clinical Care Advance (CCA) system, Molina's care management platform. This system is the best way for Molina to track Member enrollment, care status, and disenrollment. Upon contracting with Molina, we will work with the Supervising Provider to get all CHWs on their staff access to CCA. Once a member is ready to disenroll, the CHW will complete a CHW disenrollment form in CCA. All tracking for member disenrollment can be done in the CHW disenrollment form. Additional reporting will be necessary if the CHW is unable to use Molina's Clinical Care Advance (CCA) system for documenting member engagement.

# Glossary

- 1. All Plan Letter (APL):** The means by which Department of Health Care Services conveys information or interpretation of changes in policy or procedure at the Federal or State levels and provides instruction to contractors on how to implement these changes on an operational basis.
- 2. APL 21-009:** Collecting Social Determinants of Health: The All-Plan Letter that describes the Z codes prioritized by the Department of Health Care Services for collecting Social Determinants of Health data for Medi-Cal Members. This APL can be found [here dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf](https://dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf).
- 3. APL 22-016:** CHW Benefit: The All-Plan Letter that describes the CHW Benefit. This APL can be found [here dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-016.pdf](https://dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-016.pdf).
- 4. Asthma Preventive Services:** Information about the basic facts of asthma, proper use of long-term controllers and quick relief medications, evidence-based self-management techniques and self-monitoring skills, and actions to mitigate or control environmental exposures that exacerbate asthma symptoms.
- 5. Clinical Care Advance (CCA) system:** Molina's Care Management system that is used to track enrollment, disenrollment, and contact with Molina members eligible for CHW services.
- 6. CHW (CHW):** A frontline public health worker who is a trusted member or has a particularly good understanding of the community served. A CHW serves as a liaison between health and social services and the community to facilitate access to services and to improve the quality and cultural competence of service delivery. (Centers for Disease Control, [cdc.gov cdc.gov/chronicdisease/center/community-health-worker-resources.html](https://cdc.gov/cdc.gov/chronicdisease/center/community-health-worker-resources.html))
- 7. Current Procedural Terminology (CPT®) code:** Every medical, diagnostic, or surgical procedure or service has an associated 5-digit CPT® code assigned to it.



- 8. Department of Health Care Services (DHCS):** The regulatory agency for Medi-Cal, California's Medicaid.
- 9. DHCS Medi-Cal Provider Manual:** Guidance from the Department of Health Care Services on appropriate CPT® Codes and modifiers required to submit claims and encounter information for Medi-Cal services rendered. The Medi-Cal Provider Manual section for CHW(CHW) Preventive Services can be found [here files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/chwprev.pdf). The Medi-Cal Provider Manual section for Asthma Preventive Services can be found [here files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/asthprev.pdf](https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/asthprev.pdf).
- 10. Direct oversight:** Includes, but is not limited to, guiding CHWs in providing services, participating in the development of a plan of care, and following up on the progression of CHW services to ensure that services are provided in compliance with all applicable requirements.
- 11. Enhanced Care Management (ECM):** A Medi-Cal benefit that is a whole-person, interdisciplinary approach to comprehensive care management intended to address the clinical and non-clinical needs of high-cost, high-need managed care Members through systematic coordination of services that is community-based, interdisciplinary, high-touch, and person-centered. Medi-Cal members enrolled in ECM cannot also receive the CHW Medi-Cal benefit.
- 12. Health Education:** Promoting a member's health or addressing barriers to physical and mental health care, such as through providing information or instruction on health topics. Health Education content must be consistent with established or recognized health care standards and may include coaching and goal setting to improve a member's health or ability to self-manage their health conditions.
- 13. Health Navigation:** Providing information, training, referrals, or support to assist Members to access health care, understand the health care delivery system, or engage in their own care. This includes connecting members to community resources necessary to promote health; address barriers to care, including connecting to medical language translation/interpretation or transportation services; or address health-related social needs. Health navigation can also be serving as a cultural liaison or assisting a licensed health care provider to participate in the development of a plan of care, as part of a health care. Health navigation can also be performing outreach and resource coordination to encourage and facilitate the use of appropriate preventive services. Health navigation can also be helping a member enroll or maintain enrollment in government or other assistance programs that are related to improving their health.
- 14. Indirect oversight:** Includes, but is not limited to, ensuring connectivity of CHWs with the ordering entity and ensuring appropriate services are provided in compliance with all applicable requirements.
- 15. Individual Support or Advocacy:** Assisting a member in preventing the onset or exacerbation of a health condition or preventing injury or violence. This includes peer support.
- 16. In-home environmental trigger assessment:** the identification of environmental asthma triggers commonly found in and around the home, including allergens and irritants. This assessment will guide the self-management education about actions to mitigate or control environmental exposures.

- 17. Licensed practitioner of the healing arts:** A physician or other practitioner that can provide written recommendation for CHW services for a Medi-Cal member. Other licensed practitioners who can recommend CHW services within their scope of practice include physician assistants, nurse practitioners, clinical nurse specialists, podiatrists, nurse midwives, licensed midwives, registered nurses, public health nurses, psychologists, licensed marriage and family therapists, licensed clinical social workers, licensed professional clinical counselors, dentists, registered dental hygienists, licensed educational psychologists, licensed vocational nurses, and pharmacists.
- 18. Lived experience:** Includes, but is not limited to, experience related to incarceration, military service, pregnancy and birth, disability, foster system placement, homelessness, mental health conditions or substance use, or being a survivor of domestic or intimate partner violence or abuse and exploitation. Lived experience may also include shared race, ethnicity, sexual orientation, gender identity, language, or cultural background with one or more linguistic, cultural, or other groups in the community for which the CHW is providing services.
- 19. Molina Medi-Cal Members (Member):** Medi-Cal beneficiaries that are enrolled in Molina Healthcare of California.
- 20. Molina Provider Manual:** The provider handbook that outlines provider resources and guidance. It can be found on the Molina website [here \*\*molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf\*\*](https://www.molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/ca/Medicaid/2023-Medi-Cal-Provider-Manual.pdf).
- 21. National Provider Identifier:** A numeric identifier that is assigned to a health care provider by the Centers for Medicare & Medicaid Services (CMS).
- 22. Poorly controlled asthma:** A Member that has 1) a score of 19 or lower on the Asthma Control Test, or 2) has an asthma-related emergency department visit or hospitalization, or 3) two instances of sick or urgent care asthma-related visits in the past 12 months.
- 23. Social Determinants of Health or Social Drivers of Health (SDOH):** The nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems. (Centers for Disease Control, [cdc.gov \*\*cdc.gov/about/sdoh/index.html\*\*](https://www.cdc.gov/about/sdoh/index.html))
- 24. Screening and Assessment:** CHWs can provide screening and assessment services that do not require a license and assist a member with connecting to appropriate services to improve their health. Screening and assessment are different processes that serve different purposes. Screening is a preliminary evaluation that looks for possible signs of a problem or a need for further examination. Screening does not diagnose or measure the extent of a problem. Assessment is a more detailed and systematic examination that measures specific aspects of a problem. Assessment confirms the presence and severity of a problem and suggests treatment options.
- 25. Understanding California's Community Health Worker/Promotor Workforce:** A Survey of CHW/Ps: A resource published by the California Health Care Foundation (CHCF) in November 2022. It can be found online [here \*\*chcf.org/wp-content/uploads/2022/11/UnderstandingCHWPWorkforceSurveyCHWPs.pdf\*\*](https://www.chcf.org/wp-content/uploads/2022/11/UnderstandingCHWPWorkforceSurveyCHWPs.pdf).