

## **Subject: Update on Medicaid Enrollment Revalidation Process for Home and Community-based Services (HCS) Program Providers**

On February 13, 2024, the Health and Human Services Commission (HHSC) posted [a notice for HCS program providers about completing Medicaid enrollment revalidation](#); HHSC is providing an update to this previous notification.

Effective for all Medicaid enrollment revalidations due on or after June 1, 2024, HCS program providers must disclose and maintain all practice locations in the Provider Enrollment Management System (PEMS). For the HCS waiver program, practice locations include:

- Host home/companion care residences;
- 3-person residences; and,
- 4-person residences.

In addition to the residential locations listed above, Medicaid enrollment requires the provider's billing office(s) be disclosed as a practice location.

HHSC will publish an information letter to document the requirements related to HCS practice locations.

Federal regulations ([42 CFR 455.432](#)) for Medicaid enrollment require pre-enrollment and post-enrollment site visits of practice locations for providers designated as "moderate" or "high" risk categories. HHSC has categorized HCS waiver providers as a "moderate" risk provider type, which means the Texas Medicaid & Healthcare Partnership (TMHP) must conduct site visits of all HCS practice locations as part of the Medicaid enrollment and revalidation process.

The required pre-enrollment site visit can be satisfied by the [on-site assessments that were completed by HHSC and TMHP in 2022 and 2023](#) to comply with the federal Home and Community Based (HCBS) Settings Rule under certain conditions. Therefore, before conducting a new site visit, TMHP will first check if the practice location was previously visited as part of the HCBS settings process and leverage that previous on-site review to satisfy the Medicaid enrollment requirement when possible.

Below you will find instructions on actions you need to take based on the Medicaid enrollment revalidation date for your National Provider Identifier

(NPI). HHSC and TMHP have established “groups” to identify the actions required; the groups are based on the Medicaid enrollment revalidation status for your NPI.

**Group 0 - If you completed your Medicaid enrollment revalidation in PEMS** (i.e., your application is “closed enrolled” in PEMS), and you did not disclose all of your practice locations at the time you were revalidated:

- You must disclose all of your practice locations in PEMS through an “existing enrollment request” by July 30, 2024.
- TMHP will conduct a site visit of each practice location disclosed in PEMS. TMHP will leverage prior HCBS settings reviews when possible.

**Group 1 – If your Medicaid enrollment revalidation due date was prior to January 1, 2024, and you did not submit a revalidation application before your due date:**

- You must re-enroll in PEMS immediately if you wish to continue participating in the Medicaid program.
- You must disclose all practice locations on your re-enrollment application in PEMS. You must add the practice locations yourself.
- You will undergo a modified site visit process.
  - TMHP will conduct a pre-enrollment site visit of your billing office.
  - TMHP will conduct a pre-enrollment site visit of any non-HCS practice locations associated with your NPI.
  - TMHP will **defer** pre-enrollment site visits for HCS practice locations.
  - After your application has been processed, TMHP will conduct a lookback process to complete the deferred pre-enrollment site visits of each practice location disclosed in PEMS. TMHP will leverage prior HCBS on-site reviews when possible.

- TMHP will conduct a post-enrollment site visit of each practice location disclosed in PEMS within a year after your pre-enrollment site visit is completed.
- Because you did not submit your Medicaid enrollment revalidation application timely, your Medicaid enrollment period will have a gap starting from the date after your revalidation due date to the date your re-enrollment application is approved (i.e., your application is “closed enrolled” in PEMS). Payments made during an enrollment gap are subject to potential recoupment.
  - For example, if your revalidation due date was February 15, 2024, and your re-enrollment application is approved on May 25, 2024, your Medicaid enrollment will have a gap from February 16, 2024, through May 24, 2024.
- If you fail to submit your re-enrollment application with all associated practice locations by June 1, 2024, you may be subject to additional sanctions including, recoupment, vendor hold, and contract termination.

**Group 2 - If your Medicaid enrollment revalidation due date is *before* June 1, 2024:**

- Your revalidation due date will be moved to a future date. TMHP will contact you by email and phone to inform you of your new revalidation date.
- You must disclose all practice locations on your revalidation application in PEMS. TMHP can help you do a mass upload of practice locations, or you can add them yourself.
- Regardless of your new revalidation date, you will undergo a modified site visit process.
  - TMHP will conduct a pre-enrollment site visit of your billing office.
  - TMHP will conduct a pre-enrollment site visit of any non-HCS practice locations associated with your NPI.

- TMHP will **defer** pre-enrollment site visits for HCS practice locations.
- After your revalidation application has been processed, TMHP will conduct a lookback process to complete the deferred pre-enrollment site visits of each practice location disclosed in PEMS. TMHP will leverage prior HCBS on-site reviews when possible.
- TMHP will conduct a post-enrollment site visit of each practice location disclosed in PEMS within a year after your pre-enrollment site visit is completed.

**Group 3 - If your Medicaid enrollment revalidation due date is *between June 1, 2024, and September 30, 2024*:**

- You must disclose all practice locations on your revalidation application in PEMS. TMHP can help you do a mass upload of practice locations, or you can add them yourself.
- You will undergo a modified site visit process.
  - TMHP will conduct a pre-enrollment site visit of your billing office.
  - TMHP will conduct a pre-enrollment site visit of any non-HCS practice locations associated with your NPI.
  - TMHP will **defer** pre-enrollment site visits for HCS practice locations.
  - After your revalidation application has been processed, TMHP will conduct a lookback process to complete the deferred pre-enrollment site visits of each practice location disclosed in PEMS. TMHP will leverage prior HCBS on-site reviews when possible.
  - TMHP will conduct a post-enrollment site visit of each practice location disclosed in PEMS within a year after your pre-enrollment site visit is completed.

**Group 4 - If your Medicaid enrollment revalidation due date is *after September 30, 2024*:**

- You must disclose all practice locations on your revalidation application in PEMS. You must add the practice locations yourself. TMHP can assist with a walkthrough.
- You will undergo the standard site visit process.
  - TMHP will conduct a pre-enrollment site visit of your billing office.
  - TMHP will conduct a pre-enrollment site visit of any non-HCS practice locations associated with your NPI.
  - TMHP will conduct a pre-enrollment site visit of any HCS practice locations associated with your NPI. TMHP will leverage prior HCBS on-site reviews when possible.
  - TMHP will conduct a post-enrollment site visit of each practice location disclosed in PEMS within a year after your pre-enrollment site visit is completed.

### **Updating Your Enrollment Record**

Irrespective of which group you are in, it is your responsibility to update your enrollment record in PEMS to reflect all changes to the information included in your enrollment record, including updates to practice locations, within 90 days of a change.

- Use a PEMS maintenance request to make changes to practice locations already included in the enrollment application, such as office closures or updates to demographic information.
- Submit an existing enrollment application in PEMS to add new practice locations associated with your National Provider Identifier (NPI).

Failure to make updates to your enrollment record as required could result in sanctions including, recoupment, vendor hold, and contract termination.

### **Important Tips for Completing Revalidation**

- Providers can find their revalidation due dates on the Provider Information page in PEMS.

- Providers must complete their revalidation enrollment before the end of their enrollment period. Providers can revalidate their enrollment in PEMS up to 120 calendar days before the revalidation due date.
- Ensure your application is in submitted status (not in draft form) prior to the due date to avoid enrollment gaps.

### **Additional Resources**

TMHP will provide additional training resources and webinars to explain the required actions and steps. A TMHP provider relations representative may also contact you directly to assist with this process. If you have questions about this notification, please contact the following:

- For questions about PEMS and how to take the required actions, please contact TMHP at either 1-800-925-9126 (Option 3 for Provider Enrollment) or by email at [provider.relations@tmhp.com](mailto:provider.relations@tmhp.com).
- For questions about the state and federal requirements: [providerenrollmentmanagementsystem@hhs.texas.gov](mailto:providerenrollmentmanagementsystem@hhs.texas.gov).

The following resources provide more information about Medicaid provider revalidation requirements and common deficiencies you can avoid:

- Review [common deficiencies identified by OIG](#).
- Review this article on TMHP.com about [Provider Enrollment Revalidation in PEMS](#).
- Review [ACA Screening Requirements](#).