

March 2015 Texas Medicaid Provider Procedures Manual

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Features STAR Health STAR+PLUS Children's Medicaid Dental Services Texas Managed Care Program Features, as of 2015 Provider Value-Based Purchasing: State pays provider-based entities (such as ACOs or PCMHs) directly for value/quality outcomes using shared-risk or shared-savings methods

~~Texas Managed Care Program Features, as of 2015 Medicaid~~

STAR+PLUS is a Texas Medicaid managed care program for people who have disabilities or are age 65 or older. STAR+PLUS participants get Medicaid health-care and long-term services and support through a medical plan that they choose. Prior to March 1, 2015 nursing facility residents and their expenses were carved out from STAR+PLUS and paid

~~STATE OF TEXAS MEDICAID MANAGED CARE STAR+PLUS PROGRAM ...~~

TEXAS MEDICAID PROVIDER PROCEDURES MANUAL: VOL. 1 - FEBRUARY 2015 Welcome: Texas Medicaid Provider Procedures Manual This manual is a comprehensive guide for Texas Medicaid providers. It contains information about Texas Medicaid fee-for-service benefits, policies, and procedures including medical, dental, and children's services benefits.

~~TEXAS MEDICAID PROVIDER PROCEDURES MANUAL: VOL. 1 ...~~

Medicaid-only coverage beginning March 1, 2015 For Medicaid-only individuals, the hospice agency bills for all services pertaining to the terminal illness, including the room and board payments for the NF. Medicaid-only residents receiving hospice services are required to choose a STAR+PLUS health plan and a primary care physician (PCP).

~~© Jon Weizenbaum - Texas Health and Human Services~~

The Medicaid Medicare Program (MMP). Enrollment will begin no sooner than March 2015. The Texas MMP removes fragmentation in care and promotes care coordination, improved beneficiary health and is cost - effective. Members will receive high quality care and enhanced benefits from one health plan, like Molina Healthcare of

~~Texas Medicaid Medicare Program Provider Orientation~~

Texas Medicaid Provider & Client Population 16 Enrolled Providers FFS Medicaid: 273,716 (linked to 102,804 NPIs) Long Term Care: 5,352 NPIs (linked to 8,629 active contracts) Enrolled Clients FFS Medicaid & Managed Care: 4,058,618 Long Term Care 265,032 (active LTC service auth) Other 2,033 (Children with Special Healthcare Needs | CSHCN)

~~CORE Certification with Texas Medicaid - March 30~~

Currently, HHSC's MMIS is a massive, fully integrated, highly complex ecosystem composed of applications, processes, call center, mainframe computers and datacenter infrastructure used in support of the Texas Medicaid delivery system. In 2015, Centers for Medicare and Medicaid Services (CMS) directed states to modernize their MMIS.

~~State of Texas Health and Human Services Commission~~

Deadline to Apply for Federal COVID-19 Relief Fund for Providers is Today, November 6, 2020 11/06/2020 November 13 NF Provider COVID-19 Webinar with HHSC LTC Regulation & DSHS

~~Welcome Texas Medicaid Providers | TMHP~~

Medicaid is a jointly funded state and federal health care program. The program was established in Texas in 1987. It is administered by the State of Texas, namely the Health and Human Services Commission (HHS). As of July 2013, one in seven Texans (3.7 million) relied on Medicaid for health coverage or long-term services and supplies. There are approximately 57,000 Medicaid providers in ...

~~Texas Medicaid Fraud Investigations, Prosecutions Flawed~~

For the March 1, 2015, transition to managed care and ongoing, providers should contact a resident's MCO concerning pending CPWC prior authorization requests. The Texas Medicaid Healthcare Partnership (TMHP) will provide CPWC prior authorization requests in progress to resident's MCO to ensure continuity of care.

~~This information letter is provided as a follow up to the ...~~

We conducted our audit work from May 2014 through March 2015, which included contacting 57 Texas providers that received the selected Medicaid payments. METHODOLOGY . To accomplish our objective, we: reviewed applicable Federal and State laws, regulations, and guidance; held discussions with the State agency;

~~Department of Health and Human Services~~

Re-enrollment requires a new submission of the Texas Medicaid provider enrollment application, all additional documentation, the application fee, and a surety bond for each location of no less than \$ 50,000 per location. This surety bond is required to be separate from a Medicare surety bond. The application fee for 2015 is \$ 553.00 for each enrolled location.

~~Re-enrollment Information to TMHP is due March 24, 2016~~

Programs Required to Enroll All providers that want to participate in state health-care programs must enroll in Texas Medicaid. This enrollment requirement applies to providers who participate in:

~~Medicaid Provider Enrollment | Texas Health and Human Services~~

Effective March 1, 2015, STAR+PLUS MCOs will begin paying providers for most Medicaid nursing facility services for Medicaid recipients ages 21 and older. Services available to nursing facility residents and access to services provided by and in a nursing facility will not be impacted by transitioning services to the STAR+PLUS program.

~~Operations Inquiries: STAR+PLUS Nursing Facility Services~~

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Texas Healthcare Transformation and Quality Medicaid Texas Health and Human Services Commission .. from managed care expansion and the other from diverted supplemental payments, to reimburse

~~Texas Medicaid Reimbursement - Medicare add~~

an authorized pharmacy provider. CHIP & CHIP Perinatal Program DME/Supplies is modified to add a limited set of disposable medical supplies when they are obtained from an authorized pharmacy provider. Revision 2.12 October 1, 2014 Contract amendment did not revise Attachment B-2.1, "CHIP Covered Services." Revision 2.13 March 1, 2015

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