

**An Important Message from
The Texas Health and Human Services Commission (HHSC)
State of Texas Access Reform (STAR+PLUS) Authorization for
Services that Require the Use of EVV**

Background:

Effective September 1, 2024, the new STAR+PLUS managed care organizations (MCOs) contracts begin. Medicaid members may be assigned to or have chosen a new MCO due to the procurement requiring the issuance of new authorizations to program providers, Financial Management Services Agencies (FMSAs), and Proprietary System Operators (PSOs).

Key Details:

Program providers, FMSAs, and PSOs should continue to use the current authorization for their members in their Electronic Visit Verification (EVV) system until they receive the authorization from the new MCO. Once they receive a new authorization for their members from the MCO, they must manually add it to their EVV system.

Action Items:

MCOs must ensure that their program providers, FMSAs, and PSOs are aware that they should continue using their current authorization in the EVV system until they receive the new authorization. MCOs must instruct the program providers, FMSAs, and PSOs of the MCO's billing requirements.

Resources:

EVVMCO@hhs.texas.gov