An Important Message from

The Texas Health and Human Services Commission (HHSC)

Requirement for Medicaid Nursing Facilities to Enroll in Medicare Prior to Medicaid Enrollment

Background:

Effective July 15, 2024, the Texas Health and Human Services Commission (HHSC) will no longer accept letters from Medicare Administrative Contractors containing Medicare enrollment status updates as evidence of Medicare enrollment. HHSC will require a nursing facility delivering Medicare-covered services to demonstrate enrollment in Medicare prior to enrolling in Medicaid or contracting with HHSC. Described in Texas Administrative Code, Title 1, Part 15, Section 352.13, Medicare Certification or Enrollment in Medicare, HHSC requires all providers who deliver services to individuals enrolled in Medicare and Medicaid to enroll in Medicare prior to Medicaid enrollment. Exceptions for this requirement are outlined in the Texas Medicaid Provider Procedures Manual, Section 1 Provider Enrollment and Responsibilities, Subsection 1.1.9.10 Medicare Participation. The provider manual is available online at https://www.tmhp.com/resources/provider-manuals/tmppm.

Action Items:

To ensure timely enrollment and avoid delays or potential for an application to time out in the Provider Enrollment and Management System (PEMS), HHSC recommends new providers or providers undergoing a change of ownership (CHOW) complete all required licensing and Medicare enrollment activities prior to beginning an enrollment in PEMS or applying for a contract with HHSC. Following these steps in sequential order will minimize processing delays for Medicaid enrollment and Medicaid contract processing.