

# Community Health Worker Services Reimbursement

## MEDICAID AND MEDICARE BILLING IN MINNESOTA - 2025

### Background

- Minnesota's Medicaid program, Minnesota Health Care Programs (MHCP), which includes Medical Assistance and MinnesotaCare, has covered Community Health Worker (CHW) Education services since 2009.
- As of 2024, MHCP covers Health Related Social Need (HRSN) related services defined by Medicare and performed by CHWs.
- As a result of this expansion of coverage for Medicare defined codes, the covered CHW services in Minnesota are more closely aligned with the CHW scope of practice.

### CHW Services Covered

According to the Minnesota Department of Human Services (DHS), MHCP, CHW covered services include:

- **CHW Education Services:** “Diagnosis-related health education” services for health promotion and disease management for individuals and groups.
- **Community Health Integration (CHI) services:** Services that address unmet HRSN needs that affect the diagnosis and treatment of the patient including assessment and planning, system navigation, facilitating access to resources, care coordination, health education, self-advocacy, social and emotional support, and health coaching or motivation to reach care plan goals.

### General Steps for MHCP Enrollment and Billing

1. **Education:** CHWs must complete a CHW Certificate Program from the Minnesota State Colleges and Universities System.
2. **Employment/Contracting:** CHWs need to be employed or contract with an MHCP eligible provider to obtain a provider number and bill for services.
3. **Provider number:** CHWs must obtain a MHCP Unique Minnesota Provider Identifier (UMPI) number or a National Provider Identifier (NPI) to enroll with DHS.
4. **Enrollment:** CHWs and employer must become MHCP-enrolled providers with DHS.
5. **Billing Systems:** CHWs and organization set-up workflows and processes to meet service, documentation, supervision, and billing requirements for each code and payor.
6. **Billing:** Submit claims electronically following MHCP and CMS guidelines.

Questions on how to get started? Contact: [health.chw.MDH@state.mn.us](mailto:health.chw.MDH@state.mn.us)

## Resources

1. [Minnesota Department of Human Services Provider Manual \(https://tinyurl.com/4ub293x2\)](https://tinyurl.com/4ub293x2)
2. [Understanding Billing for CHW Services in Minnesota—Health Care Home Webinar Part 1 \(www.health.state.mn.us/facilities/hchomes/collaborative/documents/chwbillweb.pdf\)](http://www.health.state.mn.us/facilities/hchomes/collaborative/documents/chwbillweb.pdf)
3. [Understanding Billing for CHW Services in Minnesota—Health Care Home Webinar Part 2 \(www.health.state.mn.us/facilities/hchomes/collaborative/documents/chwwebinar.pdf\)](http://www.health.state.mn.us/facilities/hchomes/collaborative/documents/chwwebinar.pdf)
4. [CMS Medicare Booklet on Health Equity Services in the 2024 Physician Fee Schedule Final Rule \(https://tinyurl.com/4hahjaja\)](https://tinyurl.com/4hahjaja)
5. [CHW Certificate Program and Scholarship Information \(Education Opportunities – Minnesota Community Health Worker Alliance\)](#)

## Summary of Billing Requirements

1. **Initiation of Services:** An order or initiating visit is required by an authorized provider.
  - a. **CHW Education:** Requires order signed by an MHCP enrolled physician, APRN, dentist, MHP or non-enrolled RN or PHN working for an enrolled organization.
  - b. **CHI:** Initiating medical visit (E&M or AWV) with patients regular CMS enrolled primary care practitioner.
2. **Billing Supervision:** CHWs must provide services under the general supervision of a qualified MHCP or CMS provider.
  - a. **Documentation:** All services are documented according to MHCP and CMS standards.
  - b. **Billing Provider:** Use the NPI of the MHCP or CMS specific billing practitioner as the pay-to provider and the CHW NPI/UMPI as the rendering provider.

## Billing Codes and Fee Schedules

Description of Services	Visit Length and Frequency	Codes	MHCP Fee Schedule*	Medicare FFS Fee Schedule**
<b>CHW Education Services</b> Services must be provided face-to-face (including telemedicine) individually or groups	30-minute increments by group size. Limit 4 units/24 hours; no more than 24 units/calendar month per member	98960: 1 patient 98961: 2–4 patients 98962: 5–8 patients 98962 U9: > 8	\$23.53 \$11.26/person \$8.26/person \$8.26/person	Not covered
<b>Community Health Integration</b> Services include face-to-face visits (including telemedicine) as well as non-face-to-face time on behalf of the client	Initial 60-minute visit and then 30-minute increments for individuals (no group visits). Billed monthly and calculated in aggregate; no frequency limitation	G0019: First 60 min G0022: Additional 30 min  <i>As of July 2025 FQHC/RHC use these codes as well</i>	Non-facility: \$59.84 Facility: \$35.80 Non-facility: \$37.05 Facility: \$25.04	Non-facility: \$79.96 Facility: \$47.55 Non-facility: \$48.52 Facility: \$33.32

\* MHCP Fee Schedule as of 1/1/25

\*\*CY2025 CMS rates listed are published national rates, market rate may vary.