

**205.648 Plan amendment, waiver, or alternative payment model for services of certified community health workers -- Reimbursement -- Services provided -- Not be considered duplicative -- Administrative regulations and approvals.**

- (1) As used in this section, "certified community health worker" has the same meaning as in KRS 309.460.
- (2)
  - (a) By January 1, 2023, the Department for Medicaid Services shall seek approval from the federal Centers for Medicare and Medicaid Services for a state plan amendment, waiver, or alternative payment model, including public-private partnerships, for services delivered by certified community health workers.
  - (b) Any state plan amendment, waiver, or alternative payment sought by the Department for Medicaid Services pursuant to paragraph (a) of this subsection shall provide reimbursement for services described in subsection (3) of this section when provided by a certified community health worker who is employed and supervised by a Medicaid participating provider who is employed by:
    1. An alcohol and other drug treatment entity;
    2. A behavioral health services organization;
    3. A community mental health center;
    4. A federally qualified health center or a federally qualified health center look-alike;
    5. A health system consisting of either at least one (1) hospital and at least one (1) group of physicians or more than one (1) group of physicians;
    6. A hospital;
    7. A local health department;
    8. A primary care clinic;
    9. A rural health clinic; or
    10. Another Medicaid participating provider approved by the Department for Medicaid Services.
- (3) A certified community health worker may provide the following services:
  - (a) Direct preventative services or services designed to slow the progression of chronic diseases, including screenings for basic human needs and referrals to appropriate services and agencies to meet those needs;
  - (b) Health promotion education to prevent illness or disease, including the promotion of healthy behaviors to increase awareness and prevent the development of illness or disease;
  - (c) Facilitation between a beneficiary and a provider when cultural factors, such as language, socioeconomic status, or health literacy, become a barrier to properly understanding treatment options or treatment plans;
  - (d) Diagnosis-related patient education regarding self-management of physical, dental, or mental health; and
  - (e) Any other service approved by the Department for Medicaid Services.

- (4) Certified community health workers shall not enroll as independent Medicaid participating providers.
- (5) If a Medicaid managed care organization contracted by the Department for Medicaid Services for the delivery of Medicaid services employs a certified community health worker, the services provided by that certified community health worker shall not be considered to be duplicative of services, and shall not provide a basis to deny services or reimbursement for services, provided by a certified community health worker employed by an entity described in subsection (2)(b) of this section.
- (6) The Department for Medicaid Services shall, in accordance with KRS Chapter 13A, promulgate administrative regulations necessary to carry out the provisions of this section and obtain all necessary approvals from the federal Centers for Medicare and Medicaid Services.

**Effective:** July 14, 2022

**History:** Created 2022 Ky. Acts ch. 86, sec. 1, effective July 14, 2022.