As a Reminder, All Providers Must Re-enroll in Texas Medicaid by March 24, 2016, to Comply with Federal Regulations

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As a reminder, Texas Medicaid must comply with federal regulations which require all providers to revalidate their enrollment information every three to five years. In accordance with this mandate, the Centers for Medicare & Medicaid Services requires that states complete the initial re-enrollment of all providers by March 24, 2016. This re-enrollment requirement applies to providers that render services through Medicaid managed care organizations or through traditional fee-for-service Medicaid.

Department of Aging and Disability Services (DADS) Long Term Services and Supports (LTSS) providers are required to comply with this re-enrollment requirement by March 24, 2016. The Health and Human Services Commission (HHSC) and DADS are in the process of developing a re-enrollment process compliant with the federal mandate specific to DADS LTSS providers, and will communicate that process in the near future.

DADS LTSS providers who also provide acute care services, (for example: Nursing Facilities, home health agencies, etc.) are required to re-enroll with Texas Medicaid & Healthcare Partnership (TMHP) now and are encouraged to attend one of the TMHP workshops pertaining to the federally-mandated provider re-enrollment. Refer to the TMHP Workshop Registration web page for additional information.

Note: These workshops are focused primarily on the acute care re-enrollment process. DADS will reach out to the LTSS provider community in the near future to provide additional information about the DADS and HHSC LTSS re-enrollment process.

Additionally, a DADS provider re-enrollment website and mailbox are being established and detailed website and mailbox information will be communicated to providers upon availability. Providers are encouraged to monitor the DADS and TMHP websites for additional information.

For more information, call the Long Term Care (LTC) Help Desk at 1-800-626-4117, Option 1.