To:	BHS Contracted Service Providers
From:	Behavioral Health Services
Date:	July 30, 2025
Title:	Enhanced Community Health Worker (E-CHW) Services – Overview and Implementation Guidance

Background

Effective April 11, 2025, Behavioral Health Plans (BHPs), including Mental Health Plans and Drug Medi-Cal Organized Delivery System (DMC-ODS) plans, along with Drug Medi-Cal (DMC) programs, can opt to cover Enhanced Community Health Worker (E-CHW) Services within Specialty Mental Health Services (SMHS), DMC, and/or DMC-ODS systems. These services are designed to support individuals with significant behavioral health needs, specifically those who meet the access criteria for SMHS and/or DMC/DMC-ODS services. The link to the BHIN 25-028 with additional information can be found here.

Who are E-CHWs?

E-CHWs provide tailored preventive support for individuals with significant behavioral health needs, including those eligible for specialty mental health or substance use disorder services. These services may include health education, care navigation, screening, and individual advocacy, and address a wide range of health issues such as chronic conditions, mental health, reproductive health, and violence prevention. The goal is to promote health, reduce barriers to care, and connect individuals to essential community resources.

E-CHW Scope of Services

E-CHWs provide a range of preventive services that support the physical, behavioral, and social well-being of Medi-Cal members. These services may include:

- Health education to increase understanding of health topics and encourage behavior change.
- Health system navigation, including assistance accessing care and connecting to community-based resources.
- Screening and assessments to identify unmet health or social needs and refer members to appropriate services.
- Individual advocacy and support to help prevent the development or worsening of health conditions or injuries.

E-CHWs may support members with managing chronic conditions, addressing behavioral health needs, accessing perinatal and reproductive health care, navigating oral and aging-related care, and responding to environmental or climate-related health risks. They also play a key role in violence prevention and recovery.

While E-CHW Services may be rendered in group settings, reimbursement is capped at a maximum of eight Medi-Cal members per session.

For More Information:
- Contact your Contracting Officer's Representative (COR), QI Matters at qimatters.hhsa@sdcounty.ca.gov or DHCS at CHWBenefit@dhcs.ca.gov.

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Certification or Work Experience Pathways

1. CHW Certificate*	2. Work Experience*
Any certificate issued by the State of California/State designee with **curriculum and training** in the following areas: • Communication • Interpersonal and relationship building • Service coordination and navigation • Capacity building • Advocacy • Education and facilitation • Individual and community assessment • Professional skills and conduct • Outreach • Evaluation and research • Basic knowledge of public health principles • Social determinants of health Certificate programs shall also include **field experience** as a requirement.	An individual who has **2,000 hours working as a CHW** in paid or volunteer positions within the previous three years. **Demonstrated skills and practical training** in the core competency areas as determined by the supervising provider may provide CHW Services without a certificate of completion for a maximum period of 18 months. A CHW who does not have a certificate of completion <u>must earn a certificate of completion within 18 months</u> of the first CHW visit provided to a Medi-Cal beneficiary.

Additional training: minimum 6 hours annual training in core competencies or area of special focus

We are currently pending the final development and guidance for the State-approved certification program from the Department of Health Care Services (DHCS).

Documentation Requirements

Clinical documentation of E-CHW Services must meet all requirements in BHIN 23-068 or subsequent DHCS guidance, including:

- Standardized assessment requirements for specialty behavioral health services;
- Development and maintenance of a problem list that may include a member's symptoms, conditions, diagnoses, social drivers, and/or risk factors; and
- Progress notes for all E-CHW Services delivered in individual and group settings.

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A standalone written plan of care is *not* required for E-CHW Services.

E-CHWs **must** be supervised by a licensed provider. The supervisor National Provider Identifier (NPI) is required on the claim along with co-signature.

A standard curriculum may be developed and utilized for group and individual sessions at the discretion of the program. DHCS has not outlined specific curriculum requirements but any established curriculum should focus on topics as outlined by BHIN 25-028.

Billing and Reimbursement

E-CHW Services must be recommended by a physician or other licensed practitioner of the healing arts (LPHA) acting within their scope of practice under state law. The recommending provider must ensure that the member meets eligibility criteria for E-CHW Services. DHCS has issued a statewide standing recommendation that all Medi-Cal members who meet defined eligibility criteria for receiving E-CHW services would benefit from receiving up to 6 hours annually of Medi-Cal-covered CHW Services for optional use. E-CHW staff utilizing this standing recommendation for Medi-Cal members should ensure the standing recommendation and the member's eligibility criteria are documented in the client record. E-CHW Services are billed in 30-minute units, with a maximum of four units (two hours) per member per day. Additional services may be provided if prior authorization is granted based on medical necessity, and a written plan of care is recommended if there is an identified need for multiple or ongoing E-CHW Services which would also be documented within the client chart. A written plan of care is *required* by an LPHA for justification of continued CHW Services **after 12 units of care (6 hours)** per Medi-Cal member in a single year from the initial date of service, per the DHCS Standing Recommendation for CHW Services document linked here.

E-CHW Services are billed using the following CPT codes:
- **98960** Education and Training for Patient Self-Management: for face-to-face education with one patient,
- **98961** Education and Training for Patient Self-Management: for face-to-face education with two to four patients, and,
- **98962** Education and Training for Patient Self-Management: for face-to-face education with five to eight patients.

DHCS also recognizes HCPCS codes **G0019**- Community Health Integration Services (60 minutes per calendar month) and **G0022**- Community Health Integration Services (each additional 30 mins per calendar month) for E-CHW use. These codes are intended for individual E-CHW Services focused on addressing social determinants of health, such as housing, income, or education, and may be used in lieu of CPT 98960 where appropriate. For more information regarding HCPCS codes G0019 and G0022, please see the

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[CHW G Codes FAQ.](#) The referenced procedure codes are available on the DHCS fee schedule that can be accessed [here](#).

Currently, CHWs are not required to obtain a NPI. Should this change, DHCS will provide notice and technical assistance in advance of implementation. Please see the [E-CHW Billing FAQs](#) for additional information.

E-CHW and ECM Coordination

Because Enhanced Care Management (ECM) encompasses the full range of E-CHW Services, DHCS prohibits billing both ECM and standalone E-CHW Services for the same member during the same treatment period. Providers may not double bill under both benefits. However, E-CHWs may engage in outreach to members not currently enrolled in ECM and bill for this activity through the E-CHW benefit—provided the outreach is not already occurring under ECM and all other E-CHW billing requirements are met.

E-CHW Services may also be billed for members prior to ECM enrollment or following ECM graduation, refusal, or ineligibility.

BHS is currently developing a process to support coordination with MCPs to avoid duplication of E-CHW and ECM services. Guidance will be forthcoming for this workflow. In the interim, it is encouraged at the first member contact that E-CHWs ask clients directly if they are engaged with ECM or working with a CHW through their managed care plan to avoid duplication of services. This should be documented in their initial service note for continuity of care.

Program Implementation Considerations

Organizations implementing E-CHW Services should consult with CORs to determine if E-CHWs are suitable for their programs. Exhibit C will need to be amended to include the provider type prior to the provision of services.

Program will develop internal workflows to ensure proper documentation and billing compliance. Programs must establish a process for documenting a standing recommendation for E-CHW Services when exceeding 12 units of care per member/per year as outlined in the initial DHCS standing recommendation and updating the member's health record accordingly. The member's problem list should reflect relevant social determinants of health targeted by the E-CHW intervention, and diagnosis documentation should be updated when appropriate.

Programs must identify a **supervising provider** to oversee E-CHWs. The supervising provider is an enrolled Medi-Cal provider who submits claims for services provided by CHWs. They ensure a CHW meets the qualifications listed, and directly or indirectly oversees a CHW and their services delivered to Medi-Cal

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members. The supervising provider can be a licensed provider, a hospital, an outpatient clinic, or as defined in [Title 42 Code of Federal Regulations (CFR) section 440.90.](#)

E-CHW and Peer Support Specialist Services

E-CHWs and Peer Support Specialists offer distinct services that should not overlap. A comprehensive grid outlining distinct differences between these two classification types is available via Optum and linked [here.](#)

Contact Information

For questions or additional guidance regarding E-CHW Services, please contact QI Matters at qimatters.hhsa@sdcounty.ca.gov or DHCS at CHWBenefit@dhcs.ca.gov

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