PARTNERSHIP HEALTHPLAN OF CALIFORNIA

POLICY/ PROCEDURE

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<tr><td colspan="4">Approval Signature: Mark Netherda, MD</td><td colspan="3">Approval Date: 02/11/2026</td></tr>
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I. RELATED POLICIES

A. MCAP7002 CalAIM Enhanced Care Management (ECM)
B. MCAP7001 CalAIM Authorization Process for Enhanced Care Management (ECM) and/or Community Supports (CS)
C. MPAP7003 CalAIM Community Supports (CS)
D. MPAP7004 – Community Health Worker (CHW) Services Benefit

II. IMPACTED DEPTS:

A. Health Services
B. Provider Relations
C. Claims

III. DEFINITIONS:

A. Community Health Worker (CHW): Individuals known by a variety of job titles, such as promoters, community health representatives, navigators, and other non-licensed public health workers, including violence prevention professionals, who connect and engage with their community to provide equitable health care through culturally competent services. CHWs are trusted members of their community who help address chronic conditions, preventive health care needs, and health related social needs within their communities.
B. Community Health Worker (CHW) services: Preventive health services as defined in 42 CFR health 440.130(c) delivered by a CHW to prevent disease, disability, and other health conditions or their progression; to prolong life; and to promote physical and mental health and wellbeing. CHW services can help members receive appropriate services relate to perinatal care, preventive care, sexual and reproductive health, environmental and climate-sensitive health issues, oral health, aging, injury, and domestic violence and other violence prevention services.
C. Supervising Providers: The organizations with which Partnership HealthPlan of California (Partnership) contracts that employ or otherwise oversee the CHWs. The Supervising Provider must be a licensed provider, a hospital including the Emergency Department (ED), outpatient clinic, local health jurisdiction (LHJ), or community-based organization (CBO). The Supervising Provider ensures that CHWs meet Department of Health Care Services (DHCS) qualifications as listed in All Plan Letter (APL) 24-006, oversees CHWs and the services delivered to Partnership Members, and submits claims for services provided by CHWs.

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IV. ATTACHMENTS:

A. Supervising Provider Attestation for Community Health Workers form

V. PURPOSE:

The purpose of this policy is to define the criteria for the credentialing of Community Health Worker (CHW) Supervising Providers per APL 24-006.

VI. POLICY / PROCEDURE:

A. Partnership Health Plan of California (Partnership) credentials the Supervising Provider of Community Health Workers (CHWs). The required criteria for credentialing the Supervising Provider of CHWs are:
   1. Supervising Provider
      a. The Supervising Provider must be enrolled in Medi-Cal if there is a state-level enrollment pathway for them to do so.
         1) When there is no state-level Medi-Cal enrollment pathway, Partnership will vet the qualifications of the Provider or Provider organization (as described below) to ensure they can meet the standards and capabilities required to be a Supervising Provider.
      b. The Supervising Provider must be a licensed provider, a hospital, an outpatient clinic, a local health jurisdiction (LHJ), or a community-based organization (CBO).
      c. The practitioner/organization acting as the Supervising Provider must sign a statement acknowledging and accepting the responsibilities as outlined in Attachment A: Supervising Provider Attestation for Community Health Workers form.
      d. Supervising Provider must have a business license that meets industry standards.
      e. Partnership will confirm the practitioner is free of sanctions, limitations, history of liability claims, or criminal history, and will conduct a query on the following sites:
         1) Office of Inspector General (OIG): Exclusions from Federally Funded Programs
         2) Department of Health Care Services (DHCS): Medi-Cal Suspended and Ineligible Provider List
         3) Centers for Medicare and Medicaid Services (CMS): Exclusions from Medicare and Medicaid
         4) System for Award Management (SAM): Exclusions from US Government Programs
         5) National Practitioner Data Bank (NPDB)
      f. Any practitioners found on any sanction reports cannot participate in the State Medi-Cal Program and/or Managed Medi-Cal Program.
      g. A query and documentation is obtained from the NPDB to address malpractice history and confirm the past five years of malpractice settlements, as applicable.
      h. Proof of professional liability coverage in the amount as outlined in the Provider Contract.
      i. Agree to submit Community Health Medical Records if requested by Partnership for an audit.

B. RE-CREDENTIALING
   a. All practitioners who have an individual relationship with Partnership will be re-credentialed every thirty-six (36) months. The 36-month re-credentialing cycle begins on the date of the previous credentialing decision. The 36-month review cycle is counted to the month, not the day. All initial credentialing criteria within this policy apply to the re-credentialing criteria.

VII. REFERENCE:

A. Department of Health Care Services (DHCS) All Plan Letter (APL) 24-006 Community Health Worker Services Benefit (05/13/2024) *supersedes* APL 22-016
B. DHCS APL 22-013 Provider Credentialing and Recredentialing and Screening/Enrollment (revised 01/02/2025) *supersedes* APL 19-004
C. Title 22, California Code of Regulations (CCR), Sections 51184; 51242; 51340; 51532

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VIII. DISTRIBUTION:
A. Partnership Provider Manual

IX. PERSON RESPONSIBLE FOR IMPLEMENTING PROCEDURE:
Director, Network Services

X. REVISION DATES: 1/11/2023, 01/10/2024, 01/08/25, 02/11/26

XI. PREVIOUSLY APPLIED TO: N/A