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Valued Providers

El Paso Health

7/16/2025

Rider 32 Provider Notification

Beginning September 1, 2025, the Texas Health and Human Services Commission (HHSC) will transition Medicaid-only services for dually eligible clients (clients who are eligible for both Medicare and Medicaid) enrolled in Medicaid managed care from a fee-for-service (FFS) to a managed care service delivery system. El Paso Health will be responsible for the adjudication of these claims.

Provider Responsibilities:

Providers must submit claims for Medicaid-only services for dual eligible clients enrolled in Medicaid managed care directly to El Paso Health. If a provider submits a claim to TMHP in error:

- TMHP will forward the claim to the appropriate MCO; and
- TMHP's claim response will reflect that the claim was forwarded, but TMHP will not issue an Electronic Remittance and Status (ER&S) Report.

TMHP will forward these claims based on dates of service on or after September 1, 2025. TMHP will no longer adjudicate these claims.

Providers should contact El Paso Health directly for claim status updates and questions related to adjudication.

To view a list of Medicaid-only services affected by this change, please refer to the <u>Rider 32</u> <u>Procedure Code List</u> available on our website at <u>www.elpasohealth.com</u>. You can find it under the "Providers" tab, within the "HHSC Updates for Providers" section, under "Resources."

If you have any questions regarding this communication please contact our Provider Relations team at 915-532-3778 or email us at <u>ProviderRelationsDG@elpasohealth.com</u>.

TO: FROM: DATE: RE: