

Provider Network News

New Managed Care Benefit: Case Management for Children and Pregnant Women (CPW) effective September 1, 2022

What is CPW?

Case Management for Children and Pregnant Women (CPW) is a Medicaid benefit that provides health-related case management services to children birth through 20 years of age with a health condition and to high-risk pregnant women of any age. Case managers help members gain access to needed medical, social, educational, and other services.

What does this mean to PCHP members?

Effective September 1, 2022, Case Management for Children and Pregnant Women (CPW) services will be provided through Medicaid Health Plans. This service applies to members who are enrolled in STAR, STAR Health, STAR Kids, STAR+PLUS, or a Medicare-Medicaid Plan (MMP).

Members who are currently seeing a CPW provider can keep their current CPW provider for up to 90 days after September 1, 2022.

What does this mean to PCHP providers?

Referrals for CPW services should be sent to PCHP. To be eligible for CPW services, a member must:

- Be eligible for Texas Medicaid.
- Be a pregnant woman who has a high-risk condition or a child (birth through 20 years of age) who has a health condition or health risk.
- Need assistance in gaining access to necessary medical, social, educational and other services related to their health condition, health risk, or high-risk condition.
- Want to receive case management services.

Pregnant women who have a high-risk condition are defined as those who have a medical or psychosocial condition that places them and their fetuses at a greater than average risk for complications, either during pregnancy, delivery, or following birth. Children with a health condition are defined as children who have a health condition or health risk or children who have or are at risk for a medical condition, illness, injury, or disability that results in the limitation of function, activities, or social roles in comparison with healthy same-age peers in the general areas of physical, cognitive, emotional, or social growth and development.

For PCHP members enrolled in CPW managed care, CPW providers must submit to PCHP:

1. [Prior Authorizations](#)
2. [CPW Claims:](#)
 - Providers must file claims within 95 days of the date of service.
 - MCOs must adjudicate most clean claims within 30 days, including CPW claims.
 - CPW providers will continue billing for G9012 and related modifiers U2, U5, and TS. Refer to the [TMPPM Behavioral Health and Case Management Services Handbook, Section 3](#) for the most up-to-date codes.
 - FQHCs will bill using G9012 and related modifiers U2, U5, and TS. Refer to the [TMPPM Clinics and Other Outpatient Facility Services Handbook, Section 4.1.2](#) for the most up-to-date codes.



For more information on CPW services, please see the [TMPPM Behavioral Health and Case Management Services Handbook, Section 3](#) and [HHSC Care management Provider for Children & Pregnant Women](#).