El Paso Health
HEALTH PLANS FOR EL PASOANS. BY EL PASOANS.

URGENT ACTION REQUIRED

Medicaid & CHIP Provider Revalidation



Why You Are Receiving This Notice

Maintaining an **active, error-free Medicaid and/or CHIP enrollment through HHSC** (via TMHP PEMS) is a strict prerequisite for your El Paso Health network contract.

CRITICAL WARNING: If your enrollment lapses, **no claims will be reimbursed** for services rendered on or after your inactivation date. Furthermore, active credentialing with El Paso Health **does not** substitute for state-level HHSC revalidation.

Step 1: Know Your Revalidation Date Today

Every provider has a strict revalidation deadline. Do not wait for a notification letter.

1. Log into the **TMHP Provider Enrollment and Management System (PEMS).**
2. Check your dashboard for your **Revalidation Due Date.**
3. Remember: You can—and should—start your revalidation up to **180 days (6 months)** before your due date.

Step 2: Action Plan Based on Your Status

If Your Due Date is Within 6 Months (And You Haven't Started)

- **Log In & Initiate Immediately:** Go to Welcome Texas Medicaid Providers | TMHP.
- **Submit Complete Documentation:** Upload all required materials promptly.
- **Monitor Closely:** Respond to state requests immediately and ensure your application reaches **"Closed-Enrolled"** status before your deadline.

If Your Application is Currently "In-Flight" / Pending State Review

- **The Backlog Risk:** HHSC and TMHP are experiencing massive processing volumes, causing delays. While HHSC attempts to prevent disenrollment for applications stuck in processing queues, **processing delays do not guarantee protection against gaps in status.**
- **Best Defense:** Submitting early and responding to OIG/TMHP requests within 24–48 hours is your only safeguard against claim denials and payment freezes.

What Happens If You Fail to Revalidate?

Missing your revalidation deadline triggers immediate, severe consequences:

- **Immediate Disenrollment:** You will be dropped from Texas Medicaid/CHIP programs.
- **Program Exclusion:** Loss of access to critical **State-Directed Payment Programs (DPP)** and **Quality Incentive Payment Programs (QIPP).**
- **Prescription Rejections:** Pharmacy claims will hard-deny at the point of sale.
- **Ordering/Referring Blocks:** Even compliant DME and specialty providers will face claim rejections if their ordering/referring provider is inactive.

Direct Impact by Provider Type

- **Hospitals:** Inactive status halts participation in Directed Payment Programs (DPP) and enhanced reimbursements.
- **Nursing Facilities:** Quality Incentive Payment Program (QIPP) funding and quality-based payments will be suspended.
- **Pharmacies:** Point-of-sale prescription hard-denials will immediately disrupt patient access to vital medications.
- **Long-Term Care (ICFs, NFs, HCS, SSLCs, ALFs, PPECCs):** Facilities face severe financial strain due to mandated care continuity obligations paired with halted state reimbursements.
- **DME Providers:** Claims will be rejected if the ordering physician's state enrollment has lapsed.

Action Item for Practice Leadership

Please cascade this notice immediately to your:

- Credentialing and Billing Staff
- Practice Managers & Administrative Leads
- Third-Party Billing Contractors

Need Assistance?

We are here to help you navigate this process before it impacts your revenue.

- **Contact your local El Paso Health Provider Representative** 915-532-3778 Provider Relations or
- **Email:** ProviderServicesDG@elpasohealth.com and a representative will reach out to guide you.
- **Revalidation Guide:** https://elpasohealth.com/pems-revalidation.html
- **Provider Enrollment:** https://www.elpasohealth.com/providers/provider-enrollment.html
- **Enrollment Help:** Provider Enrollment Help | TMHP
- **YouTube Assistance Videos:** https://texashhs.org/TMHP-YouTube