

**An Important Message from
The Texas Health and Human Services Commission (HHSC)**

Update - Requirement for Medicaid Nursing Facilities to Enroll in Medicare Prior to Medicaid Enrollment

Background:

Effective January 1, 2025, the Texas Health and Human Services Commission will no longer accept letters from Medicare administrative contractors containing Medicare enrollment status updates as evidence of Medicare enrollment.

Key Details:

Applications submitted in the Provider Enrollment and Management System (PEMS) January 1, 2025, and forward will require evidence of Medicare enrollment prior to approving Medicaid enrollment.

As described in [Texas Administrative Code, Title 1, Part 15, Section 352.13, Medicare Certification or Enrollment in Medicare](#), HHSC requires all providers who deliver services to individuals enrolled in Medicare and Medicaid to enroll in Medicare prior to Medicaid enrollment.

Exceptions for this requirement are outlined in the [Texas Medicaid Provider Procedures Manual](#), Section 1, Provider Enrollment and Responsibilities, Subsection 1.1.9.10, Medicare Participation.

Action Items:

To ensure timely enrollment and avoid delays, or the potential for an application to time out in PEMS, HHSC recommends new providers or providers undergoing a change of ownership complete all required licensing (as applicable) and Medicare enrollment activities prior to beginning an enrollment in PEMS or applying for a contract with HHSC.

Please remember, an application in PEMS will time out and delete if it is not submitted within 120 days of starting the application.

Following these steps in order will minimize processing delays for Medicaid enrollment and Medicaid contract processing.