

UnitedHealthcare Community Plan in Texas

Requirements for financial management service agencies and consumer directed services

The Texas Health and Human Services Commission has requirements for financial management service agencies (FMSAs) using consumer directed services (CDS) when working with UnitedHealthcare Community Plan members or their legally authorized representatives (LARs). FMSAs must meet several requirements to perform services for our members.

FMSA requirements

- Enroll in Texas Medicaid through the open enrollment process
- Complete the Texas Health and Human Services Commission (HHSC) mandatory FMSA enrollment training
 - For information about the required training, go to [hhs.texas.gov > Providers > Provider Training > Financial Management Services Agencies \(FMSA\) Training](https://www.hhs.texas.gov/providers/provider-training/financial-management-services-agencies-fmsa-training)
- Submit the CDS budgets by email or fax to UnitedHealthcare Community Plan for approval:

STAR Kids

- Email: uhctxskservicecoordination@uhc.com
- Fax: 888-843-7061

STAR+PLUS and UnitedHealthcare Connected (Medicare-Medicaid Plan)

- Email: uhctxskservicecoordination@uhc.com
- Fax: 877-940-1972

FMSA required services

Once you meet the FMSA requirements, you must perform certain services for our members or their LARs. Required services include:

- An initial face-to-face orientation for members or members' LARs when they first choose the CDS option
- Training the member or member's LAR on being an employer, verifying health care professional qualifications (e.g., criminal history and registry checks) and approving the CDS budget
- Monitor the service health care professional's eligibility
- Monitor prior authorizations for long-term services and supports (LTSS)
- Help ensure LTSS health care professionals are following scheduled LTSS authorizations (e.g., the health care professional is working 6 hours per day for 5 days a week, not working 3, 10-hour shifts)
- Ensure CDS costs are within budget
- Remind the member or the member's LAR to verify Electronic Visit Verification (EVV) information is entered and correct
- Submit EVV claims to Texas Medicaid & Healthcare Partnership (TMHP)



Resources

For more information about FMSAs, go to [hhs.texas.gov > Regulations > Handbooks > Consumer Directed Services Handbook > Section 2000, Rules > Subchapter C](https://www.hhs.texas.gov/regulations/handbooks/consumer-directed-services-handbook/section-2000-rules).

For more information about CDS, go to [hhs.texas.gov > Regulations > Handbooks > Consumer Directed Services Handbook](https://www.hhs.texas.gov/regulations/handbooks/consumer-directed-services-handbook).

We're here to help

If you have questions, email uhc_cp_prov_relations@uhc.com or call LTSS Customer Service at **888-787-4107**, 8 a.m.–5 p.m. CT, Monday–Friday.