

December 8, 2025

PROVIDER ENROLLMENT: UPDATED GUIDANCE FOR RETROACTIVE ENROLLMENT **EFFECTIVE DATES AND REVALIDATION EXTENSIONS**

BACKGROUND

Medicaid providers have been experiencing significant challenges complying with Medicaid provider enrollment revalidation requirements and timelines. In response, HHSC implemented provider enrollment revalidation flexibilities and required all Medicaid and Children's Health Insurance Program (CHIP) payers to support these flexibilities.

HHSC plans to end the retroactive enrollment periods. Providers within their revalidation window or with an in-flight revalidation request may still receive extensions to complete the process.

KEY DETAILS

Revalidation Due Date Extensions

Summary of current flexibility:

- Providers with revalidation dates between Dec. 13, 2024, and Nov. 30, 2025, will receive a onetime 180-day extension if they have not completed revalidation by their due date.
- Providers who received a first extension and do not complete revalidation by their new due date, and the due date is on or before Nov. 30, 2025, will receive a second extension of 180 days.

Update to flexibility:

HHSC will continue to provide first and second extensions for providers who are due for revalidation through May 31, 2026. Providers who have received two extensions and have an in-flight application will receive a third and final extension of 60 days to complete revalidation.

Retroactive Enrollment Period Effective Dates

Summary of current flexibility: Providers disenrolled for not revalidating timely between Nov. 1, 2023, and Dec. 12, 2024, who successfully reenroll by Nov. 30, 2025, receive a retroactive enrollment period up to one year in the past.

Update to flexibility:

Providers with an in-flight reenrollment as of Nov. 30, 2025, HHSC will provide a final extension of 60 days to complete reenrollment and qualify for retroactive enrollment. "In-flight" means the provider has completed all necessary fields on their reenrollment application and officially submitted it in PEMS for TMHP's review.



HHSC will not provide retroactive enrollment periods (as a blanket flexibility) for providers who submit their reenrollment application after Nov. 30, 2025.

By end of day on Nov. 30, 2025, providers will receive a final 60-day extension if they have a reenrollment application in-flight. To qualify for retroactive enrollment, providers must complete reenrollment within these 60 days. Retroactive enrollment will be limited to a maximum of 365 days. Providers who submit a reenrollment application after Nov. 30, 2025, will not be eligible for retroactive enrollment.

Important: A provider's revalidation or reenrollment is not complete until the request is in a "closedenrolled" status. Submitting the revalidation or reenrollment request is the first step of the process. The revalidation or reenrollment request must then go through the review process and be approved and closed by TMHP.

ADDITIONAL INFORMATION

A notice was posted to TMHP on May 29 and can be found here: Revalidation Due Dates and Retroactive Enrollment Period Gap Closures Extended to November 30, 2025.

RESOURCES

Providers may refer to the PEMS educational videos on TMHP's Provider Enrollment & Management System Playlist on YouTube, which includes the following:

- Revalidating an Individual
- Revalidating a Performing Provider
- Revalidating a Clinic/Group Practice or Facility

The following resources provide more information about Medicaid provider revalidation requirements and common deficiencies to avoid:

- Common Deficiencies Identified by OIG
- **Provider Enrollment Revalidation in PEMS**
- **ACA Screening Requirements**

Providers may refer to the <u>Provider Enrollment Help</u> page or the <u>PEMS Instructional Site</u> on tmhp.com for additional revalidation or reenrollment support.



QUESTIONS

For any questions regarding this notice, please contact your Community Provider Performance Manager (provider representative). E-mail: ProviderRelationsInquiries@CommunityHealthChoice.org