

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

**Clarification Update: EVV Impacts due to the New STAR+PLUS MCO
Contracts Beginning Sept. 1, 2024**

Background:

Effective Sept. 1, 2024, the new STAR+PLUS managed care organizations (MCOs) contracts will begin. Program providers and financial management services agencies (FMSAs) can view the [STAR+PLUS Health Plans by Service Areas \(PDF\)](#) for a list of Health Plans that are leaving, staying or coming into a service area.

Key Details:

STAR+PLUS Authorizations in the EVV System

Program providers and FMSAs should create a new authorization if the member's payer information has been received from their new MCOs.

Program providers and FMSAs should log in to their MCO provider portals to obtain the new authorizations for their members. The new authorizations must then be manually added into the EVV system.

Clarification Update:

Payment of Services as of Sept. 1, 2024

EVV claims for EVV required services must be submitted to the Texas Medicaid & Healthcare Partnership (TMHP). Program providers and FMSAs using a third-party resource for billing need to notify the third-party entity about any changes in MCO contracts.

Resources:

- Review [Continuity of Care During STAR+PLUS Transition \(PDF\)](#) found on the [HHSC STAR+PLUS webpage](#).
- For more information about the STAR+PLUS transition, contact HHSC Managed_Care_Initiatives@hhs.texas.gov.