



Date: January 25, 2021

To: Financial Management Services Agencies (FMSAs)

Subject: Information Letter 2021-06
COVID-19 Vaccine Resource for Consumer Directed Services (CDS)
Employees

The purpose of this information letter is to provide a resource for CDS employees who are experiencing challenges accessing the COVID-19 vaccine.

Not all CDS employees have a badge or other photo identification to verify that they are home health care workers eligible to receive the COVID-19 vaccine. To help address this issue, HHSC provides the attached template that FMSAs can complete and provide to CDS employees to assist in verifying that they are home health care workers.

Please send any questions to CDS@hhsc.state.tx.us

Sincerely,

[signature on file]

Michelle Erwin
Deputy Associate Commissioner
Office of Policy and Program
Medicaid and CHIP Services

FMSA Letterhead

(date), 2021

To Whom It May Concern,

_____ [*name of FMSA*] is a financial management services agency (FMSA). An FMSA is entity that contracts with the Texas Health and Human Services Commission or a managed care organization to assist individuals who receive health care to self-employ their health care workers.¹ This letter is to notify you that _____ [*Worker's full name*] is a home health care worker who directly interfaces with vulnerable and high-risk individuals. As such, this person is included in Phase 1A of COVID-19 vaccine distribution, as defined by the Texas Department of State Health Services (DSHS).² As the FMSA, we can provide employment verification for this person upon request. To request verification, please use the contact information shown below.

_____ (signed name of FMSA representative)

_____ (printed name of FMSA representative)

_____ (title)

Name of FMSA: _____

FMSA Contact Person: _____

Phone Number: _____

¹ More information about an FMSA is available at hhs.texas.gov.

² <https://dshs.texas.gov/coronavirus/immunize/vaccine/EVAP-Phase1A.pdf>