



Native American Technical Advisory Committee (NATAC)

Minutes for March 11, 2024

Time: Start 1:00 pm **End:** 3:54 pm **Place:** Virtual meeting

Chair: Shelly Begay, Human Services Department (HSD) Native American Liaison

Committee Members Call In: Dana Flannery, Medicaid Director Medical Assistance Division (MAD); Lorelei Kellogg, Acting MAD Director; Elisa Walker-Moran, MAD Deputy Director; Deputy Secretary Kyra Ochoa, HSD; Shelly Begay, Tribal Liaison OOS; Theresa Belanger, MAD Tribal Liaison; Brandi Reano, BHSD Tribal Liaison; Harriet Zamora, Taos Pueblo; Lena Gachupin and Anthony Yepa, Kewa Pueblo; Emily Haozous, Ft. Sill Apache; Leonard Montoya, Ohkay Owingeh; Racheal Pyne, Picuris Pueblo; April Ruben, Laguna Pueblo; Dr. Yolandra Gomez, Jicarilla Apache; Nick Boukas, BHSD; Michele Morris, Navajo Nation; Randall Morgan, AAIHS; Vida Tapia Sanchez, ISD; Patricia Wade, ISD; Ray Tafoya, IAD.

Guest speakers: Steven Fernandez, Aging and Long-Term Services Division (ALTSD)

DISCUSSION ITEM	OUTCOME	FOLLOW-UP ACTION	RESPONSIBLE PERSON/ DEPARTMENT	EXPECTED OR REQUIRED COMPLETION DATE
I. Invocation/Introductions	Leonard Montoya from Ohkay Owingeh provided the opening prayer at the start of today’s meeting. Introductions were completed. Theresa welcomed new members Dana Flannery-MAD Director; Brandi Tafoya-BHSD Tribal Liaison, Dr. Yolandra Gomez-Jicarilla Apache; Kyra Ochoa, Deputy Secretary, OOS.	Completed	All	Completed
II. Review/approval of December 18, 2023 minutes	Motion to approve minutes; minutes approved with no changes.	Completed	All	Completed
III. Billable Services for Tribes – Lorelei Kellogg <ul style="list-style-type: none"> Approved State Plan Amendments (SPA) Update on Enhanced Medicaid Rate (EMR) for Tribal long term care facilities 	Lorelei Kellogg went over State Plan Amendments (SPAs) approved in recent months: <ul style="list-style-type: none"> Opioid Treatment Program (OTP) – This is an update to certification and accreditation requirements for treatment centers. Evidence Based Practices (EBP) – This allows behavioral health (BH) providers to bill for Community Based Mobile Crisis Intervention Services, Trauma Focused Cognitive Behavior Therapy (CBT), Eye Movement Desensitization and Reprocessing (EMDR), and Dialectical Behavior Therapy (DBT). These can be billed as modifiers on claims submitted to the state. There is language also allowing involuntary admission into Crisis Triage Centers. 	Completed	Lorelei Kellogg	Next NATAC

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	<ul style="list-style-type: none"> Community Health Worker/Representative SPA which will allow those provider types to enroll as providers and get reimbursed for the services they provide (health education, navigation, clinical support) <p>Lorelei talked about the process involved in a State Plan Amendment: There are system components that require Medicaid updates for billing these services that allow these provider types to enroll; MAD drafts and provides a letter of direction to the MCOs. The LODs are posted on the HSD website and distributed to Medicaid providers.</p> <ul style="list-style-type: none"> There is a SPA in the works for chiropractic services. This will be a benefit available to all adult Medicaid recipients. This is pending approval from CMS. <p>Comment: Regarding the CHR reimbursement, could the CHRs use a HCFA form when they bill? Could Dr. Dancis work with the CHRs and our IT people regarding billing for this service?</p>	Lorelei will follow up with Dr. Dancis to reach out to Mr. Yepa and the CHRs		
IV. Health Care Authority (HCA) – Lorelei Kellogg	<p>The Human Services Department (HSD) is converting to the Health Care Authority (HCA) July 1, 2024 (Senate Bill 16 from 2023). The HCA is designed to allow HSD to continue to leverage its purchasing power and create new innovative policies and health care initiatives in NM. We are working on making the organizational changes. Currently HSD has 4 Divisions, and 3 additional ones will be added making it 7 Divisions.</p> <p>Additional Divisions –</p> <ul style="list-style-type: none"> State Employee Health Benefits Division Developmental Disabilities Supports Division (DOH) Division of Health Improvement (in DOH). This Division is responsible for overseeing facilities throughout NM and the State Employee Health Benefits and responsible for purchasing the employee benefits plan. <p>The combination of these new Divisions will create the new HCA. The HCA will update our mission, vision and goals. We will be working on signage and updating our branding with the new HCA.</p> <p>Question: Where does the new Tribal liaison reside?</p> <p>Response: The existing Tribal liaisons Shelly, Theresa, and Brandi are not going anywhere. They will remain at their current work stations – Theresa at MAD, Shelly at OOS and Brandi at BHSD.</p>		Lorelei Kellogg	Next NATAAC

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	<p>Shelly added that she is working on creating an Office of Tribal Affairs (OTA) within HCA. With the addition of 3 agencies and the work HSD Tribal liaisons are doing right now, we need additional liaisons to support the Income Support Division and Child Support Enforcement Division. Shelly will continue to work on policy and oversee the OTA along with working with CYFD and DOH on Kevin S. NATAAC helps us to continue to work with Tribes and provide support where it is needed.</p> <p>Question- Can you talk about the roadshow that will be taking place soon? Can we get a schedule? There will be questions about how the HCA will integrate a new data analysis office. How will the new data analysis office integrate with the DOH Epi Center and the all-payor claims data committees that are currently in place?</p> <p>Response: Roadshow schedule will be posted to our HSD website</p>	Completed		
V. Major legislation from 2024 Session -Lorelei Kellogg	<p>SB 14 – Updates the HCA organization and moved the healthcare affordability fund from OSI to the HCA.</p> <p>SB 15 – Healthcare Consolidation Oversight Act – Grants permission to the HCA and OSI to review and approve mergers and acquisitions that may impact certain healthcare entities. When changes are considered by MCOs or insurance companies, we as the HCA and OSI can review those potential actions and ensure there won't be a significant impact to our population.</p> <p>SB 17 – Health Care Delivery and Access and Medicaid Directed Payment Program for Hospitals - This provides funding for the Medicaid agency to increase financial stability and ensure the availability of critical services for our hospitals and facilities, especially rural ones.</p> <p>SB 161 – Allows the HCA to award \$50 million in subsidies to smaller acute care facilities to cover losses.</p> <p>HB 7 – Health Care Affordability Fund. This will increase access to affordable health care for uninsured New Mexicans.</p> <p>HB 33 – Prescription Drug Transparency Act. This increases transparency across the prescription drug supply chain through annual reports with data about drug pricing and sales.</p> <p>We did receive funding for provider rate increases as well. They will go into effect January 1, 2025.</p> <p>Comment: Comment on House Bill 47 was signed by the Governor. Tribes that aren't currently health councils should establish as one.</p>	Completed	Lorelei Kellogg	Next NATAAC
VI. 1115 Waiver – Lorelei Kellogg	Centennial Care 2.0 was set to expire at the end of 2023, but CMS gave a 12-month extension on the Centennial Care 2.0 Waiver. This pushed out			

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	<p>the date of the 1115 Waiver. We have been able to get approval for the following:</p> <ul style="list-style-type: none"> • Expansion of evidence-based models for home visiting (4 additional models) • Continuous eligibility of Medicaid for children under the age of 6. Parents won't have to renew their Medicaid annually. • Approval to expand legally responsible individuals as providers of Home and Community Based Services. • Expanded access to the supportive housing slots through the BHSD team. • Additional Community Benefit slots provide more funding to help people onto this benefit. <p>We are still in negotiations with other services under our 1115 Waiver.</p>			
<p>VII. Turquoise Care – Lorelei Kellogg & Shelly Begay</p>	<p>We want to build a health care system where every Medicaid member has access to preventive and emergency care, including groups that have been historically disenfranchised to health care.</p> <p>We are negotiating with CMS on expanding services for health related social needs (food boxes for members with gestational diabetes, traditional healing benefit for Native Americans, home delivered meals for Community Benefit members, medical respite for homeless members who have been hospitalized, Medicaid services up to 90 days before someone is released from jail, a meal delivery program to help our elderly stay in their home under the Community Benefit and the last one is a request to receive funding for Assisted Living room and board).</p> <p>Question: The question was asked if people who have this coverage can get it on the reservation. It would be nice to get MAT services on the reservation. We don't have a resource for inpatient treatment for our Native American youth.</p> <p>Response: We do have some authority for substance use services from CMS. It is a different request from the list above. We are able to provide those services like MAT, behavioral health services and counseling prior to release from jail and transition them out of jail with the services already in place.</p> <p>Dr. Yolandra Gomez asked about how to get expanded access to the home visiting program for young children and their parents.</p> <p>Shelly: Reach out to ECECD for services they can help for young children. They collaborate with MAD for these services.</p>			

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	<p>Question: Is there respite for homeless people that have been released from incarceration?</p> <p>Response: Theresa will get information to Lena about resources there are through the MCOs under VAS.</p> <p>Question: How does room and board work?</p> <p>Response: Medicaid is very limited in what they can pay for, but we can pay for Assisted Living like the room and board portion of assisted living.</p> <p>Question: Is there a directory of facilities that provides services for people with mental health/substance abuse issues, like Life Link in Santa Fe?</p> <p>Response: Nick Boukas from BHSD talked about a program called Open Beds and how it works.</p> <p>Question: There was a question about Enhanced Medicaid Rate EMR funding from Medicaid. How can those funds be spent? Can it be used for senior center activities, for example?</p> <p>Response: Lorelei will take this back and get an answer for Laguna on that.</p> <p>Shelly Begay talked about the upcoming roadshow in April and May throughout the state regarding Turquoise Care. We will talk about the Health Care Authority as well. The road show schedule is almost final. The roadshow will start at the end of March and go through April and a few in May. We will be presenting in Tribal communities. The MCOs will be at all the events to talk to the public. Open enrollment is from April 1 to May 31. Selections will be effective 07/01/2024. More information to come.</p> <p>Question: Does your website have information about the calendar of events, links to MCOs and list of value-added services? Can we speak to the new MCOs?</p> <p>Response: Yes, the information will be on our website. You can speak to the new MCOs at the roadshows.</p> <p>Comment: WSCC has been helpful to Santo Domingo Pueblo more than the other MCOs.</p> <p>Response: Medicaid recipients will be getting a list of roadshow events.</p>	<p>Theresa will speak to MCOs about VAS for homeless</p> <p>BHSD follow up with Kewa.</p> <p>Follow up with Laguna -Dana</p>		
VIII. New Mexicare – Steven Fernandez	Steven Fernandez NM Aging and Long-Term Services (ALTSD) presented the New Mexicare program – Caregiver Help model. Other programs are also available through ALTSD. This program can help people who may be over income for other services. Assists with caregiver burn out. This program assists people who already have a caregiver working with them. They also provide training. This is for individuals that aren't eligible for	Fernandez, Steven, ALTSD Steven.Fernandez@altsd.nm.gov		

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	Medicaid. The maximum monthly allotment is \$1400/month. Limited to certain counties in NM. They must be 60 or over and need help with at least 2 ADLs. Not looking at assets. For more information, contact Steven at ALTSD.			
IX. BHSD – Nick Boukas, Jewel Kessler	As of March 1, 2024, 988 has received over 47,000+ phone calls. 94% are assisted on the phone call. People can also text and use the chat box. 47% are male and 47% are female. The number two group of people calling in is Native Americans. The most used age group is 17-34. There was a big 988 grant for Tribal providers. That grant was taken over by the Alb. Area Indian Health Board. Their awardees were Ramah, Jicarilla, Kewa, Tohajiilee, Zuni, Isleta, Mescalero, Ute Mountain and Southern Ute. 988 services can be billed to Medicaid. BHSD has many other services available to Tribes.	Nick Boukas Brandi Reano – Tribal Liaison		
X. Comments/questions/updates	There was a comment that the state is claiming to go out to the Navajo Nation but are going to the border towns. Also, the radio station that is being used is not the most listened to station for Navajos. Chapters aren't getting reach out for Turquoise Care roadshow events. There will be a prep meeting before our next NATAAC in June.	Update: Turquoise Care Roadshow events have included a presentation at the Crownpoint Chapter House in May.	Theresa Belanger	Next NATAAC

Respectfully submitted:

Theresa Belanger

May 3, 2024