Provider Toolkit 2021



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Introduction

Welcome. Thank you for your interest in joining a field of dedicated professionals delivering behavioral health services in New Mexico.

The New Mexico Human Services Department (HSD)/Behavioral Health Services Division (BHSD) has created this Provider Toolkit for those interested in becoming an agency providing behavioral health services in New Mexico. This toolkit contains information about the process, documents, forms, links, and resources to assist in establishing a publicly funded behavioral health agency.

There are many things to consider when opening a new behavioral health agency, adding services, or enrolling as a practitioner. What services will you or your agency provide? Which population(s) will you serve? What type of practitioner are you? What types of practitioners will be working at your agency? There are regulations, licensing, contracting with MCOs, working with state Departments and Divisions, sustainability, policies and procedures, and quality assurance to name a few. BHSD is here to provide technical assistance regardless of the starting point.

In New Mexico, behavioral health programs and facilities operate under the oversight of the Behavioral Health Services Division (BHSD) of the New Mexico Human Services Department (HSD), the Children, Youth and Families Department (CYFD), the Department of Health (DOH), or through some collaboration of these agencies. Our behavioral health services system has three major sources of public funding: Medicaid (includes managed care Medicaid and fee-for-service Medicaid), federal grants, and/or the state general fund. Understanding which funding sources and oversight agencies are relevant to the services you choose to provide is a key element of determining next steps. The Behavioral Health Collaborative, which administers state general funds, is the payor of last resort for behavioral health services for adults and children covered by Medicaid. When a Medicaid covered service is provided to a Medicaid eligible client, those services must be billed to Medicaid. Effective use of federal Medicaid funds allows the State greater opportunity to devote its own funds to New Mexico priorities. This toolkit will provide information on each of these funding sources and agencies, as well as how to apply for funding.

While every attempt has been made to identify the most crucial components of starting a new agency or adding a service, this toolkit should be considered a living-document. Our world is one of change; change in systems, change in State regulations and service requirements, change in federal requirements, just to name a few. BHSD will be responsive, effective and efficient in all efforts to meet the needs of its citizens. BHSD will make every effort to update and disseminate new information to New Mexico agencies and providers.

There are two paths in this toolkit, one for providers currently enrolled or recently termed in Medicaid who want to change or add services, and the second for providers new to the New Mexico behavioral health services system. In each section, both options are addressed. BHSD is here to help navigate a complicated system with the goal of making it easier to become a behavioral health agency or provider.

Welcome, and thank you for your commitment to provide much needed behavioral health services to the residents of New Mexico!

Making Decisions

Before starting down the path to becoming a Medicaid provider, there are decisions to be made about what your agency or you as a provider want to do and what you need to do to get there. There are many choices, such as deciding whether to be a Behavioral Health Agency. Do you want to serve adults or children? What service(s) are you interested in providing? Dozens of specific services are covered in the Medicaid benefit package, including everything from evaluation and therapy, to Intensive Outpatient (IOP) and Comprehensive Community Support Services (CCSS), to name a few.

Deciding which path to follow focuses the journey as each decision has unique requirements. Before starting, will you be:

- Serving children or adults?
- Enrolling as an agency/business in Medicaid?
- Enrolling as a practitioner?
- Providing a specific service?
- Adding a new credential?
- Adding a new service to expand your service array?
- Adding a new practitioner to your agency/business?

These decisions may be different if you have experience in the NM Medicaid system or if you are new to the NM behavioral health system.

An Experienced New Mexico Agency or Provider

Agencies and providers with experience – either currently or previously enrolled in Medicaid - are most likely familiar with the Council for Affordable Quality Healthcare (CAQH) and the National Provider Identifier (NPI), but may not be familiar with the current MCOs, new services and provider types, and needed approvals.

New to the New Mexico Behavioral Health system

Agencies and providers starting in New Mexico need first step information. The Getting Started Step-by-Step will cover all topics to understand where to begin.

Many of the steps are the same – experienced or not. In cases where there is a difference, the Toolkit will indicate a difference in the path.

Always remember, the BHSD Provider Support team is available, regardless of your prior experience in the BHSD system, to provide technical assistance. Our team is dedicated to providing you with handson guidance and assistance to make the process as easy as possible for you and your agency.

Funding Sources

First, let's talk about funding. There are three public funding sources available: Medicaid, federal grants, and the state's general fund.

Medicaid is a government health insurance program that primarily serves low income and disabled New Mexicans, using a combination of state and federal dollars. Income is not the only criteria for eligibility, and the state's program has many different categories of eligibility and several different benefit packages. Currently, about 40 percent of the state's population receives at least some Medicaid coverage. Most Medicaid in New Mexico is delivered under a managed care system called Centennial Care, where the program is administered by three managed care organizations (MCOs). Current MCOs are Blue Cross Blue Shield of New Mexico (BCBSNM), Presbyterian Health Plan, and Western Sky Community Care.

Fee-for-Service Medicaid is administered directly by the state's administrative services organization, Conduent, not an MCO. Under federal law, Native Americans are exempt from the requirement to participate in managed care, and in New Mexico Native Americans can decide whether they want to enroll in fee-for-service Medicaid or managed care Medicaid. Fee-for-service Medicaid also covers recipients who are eligible for partial benefit packages, such as people enrolled in the family planning category, or people who are on Medicare and meet the criteria for Medicaid assistance with their copayments and other out of pocket costs.

To receive reimbursement for services provided to any Medicaid recipient, providers and practitioners must first enroll in the Medicaid program. To receive reimbursement for managed care Medicaid clients, providers must also become credentialed members of the MCO provider networks.

State General Fund Programs and Numerous Federal Grants are made available through BHSD. BHSD works with the department's administrative services organization (ASO), Falling Colors. These funding sources can only be used to pay for non-Medicaid covered services or services provided to people who are not eligible for Medicaid. Some of these programs include:

- Housing
- Community funded behavioral health programs for both mental health and substance use
- Native American programs
- Women's programs
- Residential treatment programs (for non-Medicaid clients only)
- Jail diversion
- Veterans Services
- Sexual Assault Services

This is not an exhaustive list. Opportunities for funding are announced on the New Mexico Network of Care website: https://newmexico.networkofcare.org/mh/ However, even if some of your clients or services may be non-Medicaid, if you will be providing any Medicaid covered services to any Medicaid clients you will need to be enrolled with Medicaid before you will be able to receive state general fund or grant funding.

Getting Started

Conduent System

This section introduces the Conduent system. Conduent is the fiscal management agent for the Human Services Department and handles provider enrollment as well as billing for fee for service Medicaid. The steps to take differ between experienced providers and providers who are new to the New Mexico behavioral health system. Also, in this section are national organizations' enrollment requirements.

Experienced New Mexico Provider

Contact Conduent to add or update information

For the experienced New Mexico provider, review the Conduent Provider Type and Specialties document for requirements. The Excel spreadsheet in the Resources section under Provider Types and Specialties includes information on provider type, specialty, needed licenses and approval letters.

Experienced providers need to ensure that their registration with the Council for Affordable Quality Healthcare (CAQH) or National Provider Identifier (NPI) includes their most current information.

When a provider is re-enrolling in Medicaid, review the Excel spreadsheet and contact Conduent to provide updates.

New to New Mexico Behavioral Health System

Contact Conduent to Get a Medicaid ID -

Step one when new to the system is to acquire a State of New Mexico provider Medicaid ID. This is done through the Medical Assistance Division (MAD) Medicaid Portal (Conduent). The portal links to the application: https://nmmedicaid.portal.conduent.com/static/index.htm

When all the required information is submitted, the process should take no more than 7-10 business days to complete. Conduent recommends contacting them with any questions you may have before submitting any applications or forms.

Conduent provider enrollment can be reached at (505) 767-8712. The current Conduent BH Provider Enrollment Manager is William Landgraf at william.landgraf@conduent.com The Provider Enrollment Manager can assist with application and other issues. Also available to support the process is the BHSD Provider Support Team, they can provide technical assistance and can be reached at 505-476-6238 or 505-476-9256.

Council for Affordable Quality Healthcare, Inc. (CAQH)

The Council for Affordable Quality Healthcare, Inc. (CAQH) credentialing is required by the state and all MCOs. This is a data-collection system that is used in all 50 states. It is free-of-charge and reduces paperwork and the administrative burden of collecting information. The CAQH process can take up to 45 days to complete. Experienced providers are usually already in the CAQH system and can easily update their records.

If you are not familiar with the CAQH system, completing the online form requires five steps:

- 1. Register with CAQH ProView.
- 2. Complete the online application and review the data.
- 3. Authorize access to the information.
- 4. Verify the data and/or attest to it.
- 5. Upload and submit supporting documents.

You can learn more at https://www.cagh.org/solutions/cagh-proview-fags

National Provider Identifier (NPI)

Having a National Provider Identifier (NPI) is required for all Medicaid healthcare providers in New Mexico. The NPI is easy to obtain and update. To create or update an account, go to https://nppes.cms.hhs.gov/#/

Getting Approved for a Service or Adding a Service

Since 2014, the New Mexico behavioral health provider network has grown. Provider types have expanded, and new provider types and specialties added to support providers in delivering the most needed services.

In this section, information on these topics is presented. If there is a need for additional information from the BHSD Provider Outreach and Support Team, please reach out, we are happy to help.

Types of Agencies

Agency approval can come from Department of Health (DOH), the Children, Youth and Families Department (CYFD), and in some instances the Behavioral Health Services Division (BHSD). Refer to the Behavioral Health Policy and Billing Manual for details on agency approvals. Here is the link to the current manual: https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-policy-andbilling-manual/

The 2020 New Mexico Administrative Code (NMAC) 8.321.2 Specialized Behavioral Health Services and the Behavioral Health Manual list the following as eligible to provide behavioral health professional services; each provider type must meet certain conditions as explained in the manual.

- Community Mental Health Center (CMHC)
- Federally Qualified Health Center (FQHC)
- Indian Health Services (IHS) hospital, clinic, or FQHC
- PL-93-638 tribal operated hospital, clinic, or FQHC
- Children Youth and Families Department (CYFD) facility
- Hospital and its outpatient facility
- Core Service Agency (CSA)
- CareLink NM health home (CLNM HH)
- Crisis Triage Center (licensed by DOH)
- Behavioral Health Agency (BHA) (some require Supervisory Certification)
- Opioid Treatment Program (OTP) (methadone clinic)
- Political Subdivision of the state of New Mexico
- Crisis Services Community Provider as a BHA

Many of the behavioral health specialty services are delivered by Behavioral Health Agencies (BHAs). Approval for services delivered by BHAs are approved by BHSD, MAD, DOH and CYFD. An additional certification of Supervisory Certification may also be required.

The Opioid Treatment Programs, or methadone clinics, are also approved by the State Opiate Treatment Authority (SOTA), who is housed within BHSD.

Approval of the agency type generally requires approval to deliver the service, business licenses, professional licenses, proof on insurance, and other documents depending on agency type. For specific details, go the NM Medicaid portal website:

https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm#sandbox_title

Scroll down to the *Provider Enrollment* section and click on the Provider Type & Specialty Listing. This link opens an Excel file that lists requirements for all agency and provider types. This document includes provider type and specialty numbers.

Provider Type and Specialty

Every Medicaid approved and enrolled agency or provider will have a provider type number and in most cases a specialty number. In 2019, new provider types were approved (e.g., Peer Support Workers) and specialty provider types were also approved (e.g., Board Certified Behavioral Analyst). When deciding about the work that an agency will do, select the appropriate provider types and specialties that will reflect the services to be rendered.

Experienced and new to New Mexico providers are encouraged to review the provider types and specialties defined in the behavioral health manual found at website: https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-policy-and-billing-manual/

If there are questions, contact the BHSD Provider Support team (see above for contact numbers).

Behavioral Health Agencies and BHSD

Some of the behavioral health specialty services that are delivered by Behavioral Health Agencies (BHA -432) require Supervisory Certification approval.

Supervisory Certification is a major component of a wider workforce development strategy for New Mexico's behavioral health service delivery system. The purpose of this certification process is for Behavioral Health Agencies (BHA 432), Opioid Treatment Programs (OTP 343), Adult Accredited Residential Treatment Centers (AARTC 216/261), and non-FQHC School Based Health Centers (321) to demonstrate that there is ongoing education, learning and oversight of clinical supervisors and nonindependently licensed (NIL) practitioners, Certified Peer Support Workers, and student interns. Additionally, this certification is in place to support competent consultation and supervision. It is required in order to be eligible for reimbursement for services from Medicaid delivered by a nonindependently licensed provider, CPSW, or student intern.

Please contact BHSD Deputy Director Tiffany Wynn for information related to supervisory certification (tiffany.wynn@state.nm.us) or (505) 469-2495. Supervisory Certification approval also applies to the services listed below, and approval for these is done by BHSD, CYFD, and MAD.

BHSD Approved Services and Specialty Numbers

- Assertive Community Treatment (ACT) 130
- Comprehensive Community Support Services (CCSS) 107
- Intensive Out Patient (IOP) 108

MAD Approved Service and Specialty Number

Applied Behavioral Analysis (ABA) - 132

Contact MAD, Annabelle Martinez at annabellem.martinez@state.nm.us for assistance.

CYFD Approved Services and Specialty Numbers

- Behavioral Management Services (BMS) 081
- Day Treatment Services (DTS) 082
- Multi-Systemic Therapy (MST) 131

Contact the CYFD Licensing and Certification Authority Bureau, Lillian Rainer, at lillian.rainer@state.nm.us or (505) 827-8429.

DOH Approved Services and Specialty Numbers

• Psychosocial Rehabilitation (PSR) - 080

Contact the DOH Division of Health Improvement, Chris Burmeister, at Christopher.Burmeister@state.nm.us or (505) 476-9074.

When approved for any of these services, a BHA automatically is approved for Evaluation and Therapy (133).

Once approved, the agency or provider is sent an approval letter. The agency or provider submits the service approval letter to Conduent, and when appropriate also submits an approved staff roster, and then the service is added to their profile. The letter also need to be submitted to the Managed Care Organizations (MCOs) (discussed later).

BHSD existing/current agencies have an approved Supervisory Certification Attestation Application on file. Please note: as of January 1, 2020, current "grandfathered" agencies must now apply prior to being approved or submitting a Supervisor Certification Roster for review. MCOs will request a copy of the approval letter to ensure compliance for billing reimbursement.

Attaining Supervisory Certification from BHSD

Behavioral Health Agencies (BHA 432), Opioid Treatment Programs (OTP 343), Adult Accredited Residential Treatment Centers (AARTC 216/261), and non-FQHC School Based Health Centers (321) are required to apply and qualify for Supervisory Certification to deliver some behavioral health specialty services. Supervisory Certification also allows billing for services rendered by master's level nonindependently licensed practitioners – such as LMHC, LMSW, LPC, LAMFT, and LSAA – who are working under supervision of an independently licensed practitioner. Also allowed under Supervisory Certification is approval for unlicensed behavioral health staff such as master's level behavioral health interns, psychology post doctorate students, and Certified Peer Support Workers.

For non-independently licensed practitioners that are not yet fully licensed, a U7 modifer can be used for a maximum of 6 months. This time is intended for the provider to test and get fully licensed.

All providers, including non-independently licensed, require an NPI number and to be an approved Medicaid provider with a Medicaid ID. Only short-term practitioners – psychology interns, master's level interns, and post-doctoral interns – are not required to obtain a Medicaid ID.

The behavioral health manual includes additional information on the Supervisory Certification approval process and billing procedures. If there are any questions, contact the BHSD Clinical Services Manager or the BHSD Provider Support team.

Behavioral Health Services

There are 20 behavioral health services that are currently billable to Medicaid:

Accredited Residential Treatment Centers for Substance Use Disorders Applied Behavior Analysis (ABA) Assertive Community Treatment Services (ACT) Cognitive Enhancement Therapy (CET) Comprehensive Community Support Services (CCSS) **Crisis Intervention Services Crisis Triage Centers** Family Support Services (MCO members only)

Family Peer Support Services (FPSS)

SUD Ambulatory Withdrawal Management (ASAM Level 2-WM)

Intensive Outpatient Program for Substance Use Disorders (ASAM 2.1)

Intensive Outpatient Program for Mental Health Conditions

Medication Assisted Treatment for Buprenorphine (MAT)

Opioid Treatment Program (OTP)

Partial Hospitalization Services in Acute Care or Psychiatric Hospital

Peer Support Services

Psychosocial Rehabilitation Services (PSR)

Recovery Services

Smoking Cessation Counseling

Supportive Housing

Seven are recently added services. Full details on the service and billing codes are available in the Behavioral Health Providers Manual.

Seven Recently Added Services

In 2019, BHSD added new services. The new services that have program managers are noted below. The program managers work in partnership with the agency during the application and approval process, Medicaid enrollment, and program oversight. These services are:

- Adult Accredited Residential Treatment Centers (AARTC) for adults with Substance Use Disorders (SUD)
 - Following ASAM levels of care, residential treatment is now a billable Medicaid service. Accreditation by an approved accreditation organization is required.
 - This service has a program manager.
- **Interdisciplinary Teaming**
 - This person-centered service allows multiple providers to work together to provide most informed, effective plans and delivery of services.
- Screening Brief Intervention Referral to Treatment (SBIRT)
 - This intervention service is designed for the client to prevent adverse behavioral health outcomes. Service can be delivered by nearly every provider type. Training is required. SBIRT affords the ability to treat clients in a more holistic manner aimed at increased patient awareness and minimizing behavioral health stigma.
- Supportive Housing
 - This is a flexible supportive service designed to assist a client before and after successful tenancy. There is pre-tenancy support and ongoing support. This is not a rental assistance service.
 - This service has a program manager.
- Cognitive Enhancement Therapy (CET)
 - This long-term service (18-months), helps people with schizophrenia and related cognitive disorders improve brain and cognitive development, social cognition, and

increase vocational capabilities. Training by UNM is required. The service can be delivered by all Specialized Behavioral Health Service providers.

- Behavioral Health Respite
 - This service is covered by the MCOs. Core Service Agencies, Behavioral Health Agencies, and Treatment Foster Care can provide behavioral health respite services. Annual limit of 720 hours or 30 days.
- Crisis Triage Centers (CTC)
 - A residential crisis center to provide voluntary treatment. The service requires approval from the Department of Health.

Additional information is available in the Behavioral Health Policy and Billing Manual and NMAC 8.321.2.

State General Fund Programs and Federal Grants

BHSD oversees non-Medicaid programs that support unmet needs and fill service gaps. A program manager works directly with providers on program delivery, resolution of issues, and program oversight. These services are paid for through the administrative services organization, BHSD Star (Falling Colors).

These programs are:

- Career Readiness
- Transitional Housing
- Jail Diversion
- Justice Involved services
- LGBTQ+ services
- Native American services
- Office of Peers, Recovery and Engagement (OPRE)
- Prevention programs
- Sexual Assault services
- Wellness Centers
- Workforce Development
- Women's Programs Sexual Assault
- Veterans services

The Request for Application (RFA) process is announced when funding becomes available. Billable services must be delivered by providers with the appropriate credentials and follow the service requirements as defined in the Behavioral Health Manual and NMAC 8.321.2. These services are paid through the BHSD Star system. Contact the Behavioral Health Provider Outreach and Support Team for additional information and program manager information.

Fee Schedules

The Medicaid behavioral health fee schedule provides information on billing codes (i.e., revenue, CPT, and HCPCS), appropriate provider type, and reimbursement per unit or product. The rates on the fee schedule are the base rate. Rates with MCOs may be negotiated, but these rates should not be lower than what is on the fee schedule.

The behavioral health fee schedule is available at: https://www.hsd.state.nm.us/providers/fee-for-service/ under *Behavioral Health Fee Schedule*.

Applied Behavior Analysis codes and costs are not included in the behavioral health fee schedule. The Applied Behavior Analysis (ABA) Fee Schedule is available at: https://www.hsd.state.nm.us/providers/fee-for-service/ under Applied Behavior Analysis (ABA) Fee Schedule.

Adult Accredited Residential Treatment codes are included in the behavioral health fee schedule, but the reimbursement rates are not, because they are individually set with each agency. Please contact Melissa Lopez, BHSD's residential treatment coordinator, at Melissa.Lopez@state.nm.us for additional information on this service.

The fee schedules are updated often, and proposed fee schedules are open for public comment. Providers are advised to go to the Fee for Service page on the HSD website to find the most current fee schedule.

New Process for Service Delivery - Treat First

Treat First is a new practice intended to help behavioral health facilities improve their ability to serve clients immediately and effectively. https://treatfirst.org/

Treat First de-emphasizes completion of extensive, initial diagnostic assessment prior to treatment. Instead, Treat First engages clients quickly in services that address immediate needs. Treat First model allows four visits to resolve what brought the client in before a full diagnostic assessment needs to be completed.

Treat First allows for the development of a therapeutic relationship while gathering needed behavioral health historical, assessment and treatment planning information over the course of a small number of therapeutic encounters.

The Treat First Model is approved for use by Medicaid enrolled behavioral health providers, and can be used with both Medicaid and non-Medicaid eligible clients. Completion of the self-guided learning modules is required prior to approval.

For more information about how to become certified as a Treat First provider, click the following link: https://treatfirst.org/talks/how-to-become-a-treat-first-agency/

The Managed Care Organization (MCO) Process

After becoming an approved Medicaid agency or provider, the last step prior to billing is the MCO enrollment process. Medicaid services cannot be billed prior to completion of this step.

Enrolling with an MCO can take from two weeks up to three months. This step cannot be started until the Conduent and state agency approvals are complete and credentialing is completed through CAQH. Billing cannot begin until enrollment with the MCO system is complete.

There are three MCOs. It is recommended to enroll in all three. Each has a similar system and that requires the same documentation that Conduent and the state agencies require. The MCOs are headquartered in Albuquerque, NM.

BlueCross BlueShield of New Mexico

Provider website https://www.bcbsnm.com/provider/index.html 505-837-8800 or 800-567-8540

Presbyterian

Provider website https://www.phs.org/providers/Pages/default.aspx Letter of Interest (online application) https://www.phs.org/providers/our-networks/healthplan/Pages/letter-of-interest.aspx

Presbyterian behavioral health liaison at 800-424-6035

Western Sky Community Care

Provider website https://www.westernskycommunitycare.com/providers/become-a-provider.html Email Contracting@WesternSkyCommunityCare.com 1-844-738-5019

Checklist

- ✓ Step 1 National Enrollments and Licensing
 - Copy of license
 - National Provider Identification
 - Council for Affordable Quality Healthcare
- ✓ Step 2 Contact Conduent
 - Add information
 - Update information
 - or
 - Acquire a NM Medicaid ID
 - Review Provider Types and Specialties document for needed information
- ✓ Step 3 Getting Approved for Service or Adding A Service
 - Type of service
 - Agency type
 - Provider type for the service
 - Specialty for the service
 - Required approvals
- ✓ Step 4 Approval order process
 - Practitioners obtain individual Medicaid numbers
 - Program or Specialty Service approval letter from BHSD, MAD, DOH, CYFD if
 - Agency/Provider type approval from Conduent and agency Medicaid enrollment
 - Supervisory Certification rosters submitted to BHSD, MAD, and MCOs if applicable
 - Complete contracts with the MCOs
 - MCO approval to begin billing

Resources and Information

Behavioral Health Policy and Billing Manual

The Behavioral Health Policy & Billing Manual (Behavioral Health Manual) provides a reference for the policies and processes related to Behavioral Health for administration of Medicaid behavioral health services, as defined in New Mexico Administrative Code (NMAC), Section 8.321.2.

The Behavioral Health Manual will be updated on a regular basis, and HSD reserves the right to change, modify or supersede any of these policies and procedures with or without notice at any time. As policies are revised throughout the year, they will be incorporated into the Behavioral Health Manual. The Behavioral Health Manual may be viewed or downloaded from MAD's home page at www.hsd.state.nm.us, and on the Network of Care

http://newmexico.networkofcare.org/mh/. A summary list of the policy revisions will also be posted each year.

The following is a link to the Behavioral Health Manual:

https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-policy-and-billing-manual/ **Behavioral Health Collaborative NM Resource Map**

https://pulltogether.org/resources-by-county/statewide-resource-map

This is a resource to find services throughout the state. This navigation guide is maps where resources are in NM. Multiple services can be selected at one time by clicking on a location, information about the provider appears.

Behavioral Health Fee Schedule

Behavioral health fee schedule which has information on providers who can bill specific procedure codes, payment information, referring and rendering provider requirements, and information on billing units.

Here is a link to the behavioral health fee schedule: https://www.hsd.state.nm.us/providers/fee-forservice/

Behavioral Health Providers Association of New Mexico (NMBHPA):

https://www.nmbhpa.org/

The BHPA represents the NM provider's voice. The association regularly attends meetings with the NM Human Services Department/Behavioral Health Services Division to discuss system relevant topics and updates. To inquire about membership please contact:

Behavioral Health Providers Association of NM

Attn: Maggie McCowen

RE: Membership

2400 Wellesley Drive, NE Albuquerque, NM 87107

Behavioral Health Services Division (BHSD)

https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-services-division/

The Behavioral Health Services Division's (BHSD) primary role is to serve as the Mental Health and Substance Abuse State Authority for the State of New Mexico. The Authority's role is to address need, services, planning, monitoring, and continuous quality systemically across the state. BHSD works with the Behavioral Health Collaborative in establishing policy and in its contractual relationship with the Statewide Entity to implement strategies to manage the behavioral health system. Specific contact information for key individuals and programs can be found throughout this document. General division contact information:

Behavioral Health Services Division Physical address 37 Plaza La Prensa Santa Fe, NM 87507

Mailing address

P.O. Box 2348 Santa Fe, New Mexico 87504

Phone: (505) 476-9266

Fax: (505) 476-9277 or (505) 476-9272

BHSD Star

BHSD Star (Falling Colors) is the administrative services organization for the NM Behavioral Health Collaborative. They process funding requests, invoices, and claims for Aging and Long-Term Services Department, Department of Health, Children Youth and Families Department, and BHSD. https://www.bhsdstar.org/

Care Coordination

Care Coordination is a service under which treatment is organized across healthcare providers. Under a Care Coordinator, a patient's needs are coordinated with the assistance of a primary point of contact. Care Coordination is offered through the Managed Care Organizations, and this service can be accessed by contacting your Managed Care Organization and conducting a Health Risk Assessment to determine the level of care coordination required. For more information, contact the MCOs.

Critical Incident Reporting (CIR)

It is important to work with your contracted MCOs and/or Conduent as appropriate on reporting critical incidents. Each New Mexico State Department may have its own reporting protocols. Anyone billing Medicaid, state, or other federal funds received through the state must report critical incidents. The Behavioral Health CIR Reporting Protocol and forms are located on the HSD website and can be found directly at the following link:

https://www.hsd.state.nm.us/providers/critical-incident-reporting/

Human Services Department Data Book

https://www.hsd.state.nm.us/2021-data-book/

The HSD Data Book is a summary of social, economic, and health statistics of our state. The Data Book presents, in one reference document, a diversity of information and is designed to facilitate comparisons of national, state, and county-level data.

New Mexico Administrative Code (NMAC)

The State Rules Act mandates that the creation of the New Mexico Administrative Code (NMAC) to assist the public in finding current rules. There are several NMAC rules that are necessary to

understand when becoming a NM Medicaid provider. Once you are an approved Medicaid provider for behavioral health the rule that will be most significant for you is NMAC 8.321.2 Specialized Behavioral Health Provider Enrollment and Reimbursement. To read the rule, go to the HSD web page and scroll down to find 8.321.2: https://www.hsd.state.nm.us/providers/rules-nmadministrative-code/

New Mexico Behavioral Health Collaborative information:

The Collaborative was created by Governor Bill Richardson and the New Mexico State Legislature in 2004, and allows several state agencies and resources involved in behavioral health prevention, treatment and recovery to work as one in an effort to improve mental health and substance abuse services in New Mexico. This cabinet-level group represents 15 state agencies and the Governor's office and aims to be a single statewide behavioral health delivery system.

New Mexico Crisis and Access Line (NMCAL) / Peer Warm-line (1-855-662-7474) http://www.nmcrisisline.com

NMCAL is a toll free behavioral health line that is staffed by mental health professionals 24 hours a day, 7 days a week. NMCAL coordinates with local provider agencies, respite, warm lines, emergency rooms, law enforcement agencies and correctional facilities to provide crisis support and help locating needed services.

New Mexico Prevention:

The Office of Substance Abuse Prevention (OSAP) is part of the Behavioral Health Services Division with the New Mexico Human Services Department. The OSAP is dedicated to improving and maximizing the impact of New Mexico's substance abuse prevention system. To this end, OSAP seeks to build the capacity of the state's local prevention providers to deliver effective prevention services aimed at reducing alcohol, tobacco and other drug abuse. OSAP has two excellent websites with many resources: http://www.nmprevention.org/ and https://doseofreality.com/

State of New Mexico Behavioral Health Services Site – Network of Care (NOC):

This site is a behavioral health resource for individuals, families and agencies. It provides information about behavioral health services, laws, and related news, as well as communication tools and other features. It is important for all providers to ensure that their information is entered and updated as appropriate. http://newmexico.networkofcare.org/mh/

Technical Assistance

You may request Technical Assistance (TA) from either the MCO or the State Department from which you are seeking reimbursement to help inform your practice and to understand how the rules above apply and/or should be operationalized.

Email: HSD.CSMBHSD@state.nm.us for information on TA for behavioral health related service and program delivery or provider allowances.

National Resources

American Counseling Association

https://www.counseling.org/

American Psychiatric Association

http://www.psychiatry.org/

American Psychiatric Nurses Association

http://www.apna.org

American Psychological Association

http://apa.org/

ASAM – American Society of Addiction Medicine.

https://www.asam.org/

CARF – Commission on Accreditation of Rehabilitation Facilities.

http://www.carf.org/home/

CMS – Center for Medicare and Medicaid Survey and Certification Compliance.

https://www.cms.gov/Medicare/Provider-Enrollment-and-

Certification/CertificationandComplianc/index.html?redirect=/certificationandcomplianc/02 ascs.as р

COA – Council on Accreditation. An international, independent, nonprofit, human service accrediting organization.

http://coanet.org/home/

GPO eCFR – U.S. Government Publishing Office for Electronic Code of Federal Regulation.

http://www.ecfr.gov/cgi-bin/ECFR?page=browse

Medicaid – Federal Policy Guidelines.

http://www.medicaid.gov/federal-policy-guidance/federal-policy-guidance.html

Medicare – Information.

https://www.medicare.gov/

National Association of Addiction Professionals

http://www.naadac.org/NCPRSS

National Association of Social Workers

https://www.socialworkers.org/

NASADAD – National Association of State Alcohol and Drug Abuse Directors.

http://nasadad.org

NASHMD – National Association of State Mental Health Program Directors, http://nasmhpd.org/

NCQA – National Committee for Quality Assurance sets standards and performance measures for providers and health plan organizations to follow. http://www.ncga.org/

SAMHSA – Substance Abuse and Mental Health Services Administration.

http://www.samhsa.gov/

TIP Series - Treatment Improvement Protocols (TIPS)

https://store.samhsa.gov/series/tip-series-treatment-improvement-protocols-tips

Trauma Informed Care

https://www.integration.samhsa.gov/clinical-practice/trauma-informed

South Southwest ATTC

The South Southwest Addiction Technology Transfer Center (SSW ATTC) is located in the Addiction Research Institute at the Steve Hicks School of Social Work in Austin, TX. We are funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) to help people and organizations implement effective practices for substance use disorder treatment and recovery services. In addition, we work with higher education institutions to support incorporation of evidence based practices into addictions curricula. We serve Arkansas, Louisiana, Oklahoma, Texas, New Mexico, and American Indian Tribes and Communities (Health & Human Services Region 6). https://attcnetwork.org/centers/south-southwest-attc/home

The Joint Commission – Accredits provider agencies of programs/services for persons with intellectual and developmental disabilities, including mental health and chemical dependency services. Today, The Joint Commission accredits more than 2,100 behavioral health care organizations under the Comprehensive Accreditation Manual for Behavioral Health Care. http://www.jointcommission.org/facts about behavioral health care accreditation/

The National Council for Behavioral Health – The National Council coordinates the Mental Health First Aid program across the U.S and operates the SAMHSA-HRSA Center for Integrated Health Solutions to provide nationwide technical assistance on integrating primary and behavioral healthcare. We offer the annual National Council Conference featuring the best in leadership, organizational development, and excellence in mental health and addictions practice. https://www.thenationalcouncil.org/and https://www.thenationalcouncil.org/integrated-healthcoe/about-us/

Acronyms

A list of terms and acronyms from the HSD website:

https://www.hsd.state.nm.us/lookingforinformation/glossary-of-acronyms-abbreviations-and-termsfor-recipients/

Helpful Acronyms

- A -

ABA - Applied Behavioral Analysis

ABP - Alternative Benefit Plan

ACA - Affordable Care Act (Patient Protection and Affordable Care Act)

ACIP - Advisory Committee on Immunization Practices

ACLU - American Civil Liberties Union

ACRA – Adolescent and Community Reinforcement

ACS - American Community Support

ACT - Assertive Community Treatment

ADA - Americans with Disabilities Act

ADL - Activities of Daily Living

ADMS - Alcohol, Drug Abuse and Mental Health Service block grant

AHP - Affordable Housing Program

AHRO - Agency for Healthcare Quality and Research

ALTSD - Aging and Long - Term Services Department (NM)

AMI - Area Median Income

AOC - Administrative Office of the Courts (NM)

APRIL - Association of Programs for Rural Independent Living

APS - Adult Protective Services Division (ALTSD)

ARRA - American Recovery and Reinvestment Act

ARTC - Accredited Residential Treatment Center

ASAM - American Society of Addiction Medicine

ASD - Autism Spectrum Disorder

ASD - Administrative Services Division (HSD)

ASI - Addiction Severity Index

ATR - Access to Recovery or Accounting Transaction Request (context)

AVRS - Automated Voice Response System (ACS)

- B-

BA – Behavioral Analyst

BAA - Business Associate Agreement

BBER - Bureau of Business and Economic Research (UNM)

BCBA – Board Certified Behavioral Analyst

BC - DR - Business Continuity and Disaster Recovery

BG - Block Grant

BH - Behavioral Health

BHA – Behavioral Health Agency

BHC - Behavioral Health Collaborative

BHH - Behavioral Health Home

BHPC - Behavioral Health Planning Council

BHSD - Behavioral Health Services Division (HSD)

BIA - Bureau of Indian Affairs (federal)

BMS - Behavioral Management Service

BP - Blood Pressure

- C -

C/FSP - Consumer/Family Satisfaction Project (NM)

CAFAS - Child and Adolescent Functional Assessment Scale

CAFE - Consumer and Family Engagement, Office of (HSD

CAHPS - Consumer Assessment of Healthcare Providers and Systems

CNA - Comprehensive Needs Assessment

CAP - Corrective Action Plan

CAS - Claims Adjustment Code identifying the detailed reason the adjustment was made

CAT - Cross - Agency Team

CBHTR - Consortium for Behavioral Health Research and Training (NM)

CC – Centennial Care

CCC - Children with Chronic Conditions

CCL - Care Coordination Level

CCP - Comprehensive Care Plan

CCSS - Comprehensive Community Support Services

CD - Compact Disc

CDBG - Community Development Block Grant

CDD - Center for Development & Disability

CDFI - Community Development Financial Institution

CEO - Chief Executive Officer

CEU - Continuing Education Unit

CFDA - Catalog of Federal Domestic Assistance

CFO - Chief Financial Officer

CFR - Code of Federal Regulations

CFSR - Child and Family Services Review

CFT - Child and Family Team

CHW - Community Health Worker

CIO - Chief Information Officer

CIP - Community Investment Program

CIR – Critical Incident Report

CIT - Crises Intervention Training

CLAS - Culturally and Linguistically Appropriate Services

CLIA - Clinical Laboratory Improvement Amendments

CLP - Computer Loan Program

CMHC - Community Mental Health Center

CMHSBG - Community Mental Health Services Block Grant (context)

CMP - Civil Monetary Penalties

CMS - Centers for Medicare and Medicaid Services (DHHS)

CMMI - Center for Medicare and Medicaid Innovation

CMO - Chief Medical Officer

CMS - Centers for Medicare & Medicaid Services

CNA – Comprehensive Needs Assessment

CNP - Certified Nurse Practitioner

CNS - Clinical Nurse Specialist

COBA - Coordination of Benefits Agreement

COO - Chief Operating Officer

CPS - Certified Peer Specialist; Child Protective Services (CYFD)

CPSW – Certified Peer Support Worker

CPT - Current Procedural Terminology

CQI - Continuous Quality Improvement

CRAFT - Community Reinforcement and Family Training

CSA - Core Service Agencies

CSAT - Center for Substance Abuse Treatment (SAMHSA)

CSED - Child Support Enforcement Division (HSD)

CSP - Consumer Satisfaction Project

CSS - Community Support

CSW – Community Support Worker

CY - Calendar Year

CYFD - New Mexico Children, Youth and Families Department

- D -

DASIS - Drug and Alcohol Services Information System (SAMHSA)

DBA - Doing Business As

DCAP - Directed Corrective Action Plan

DD - Developmental Disability

DDPC - Developmental Disabilities Planning Council

DDSD - Developmental Disabilities Services Division

DEA - Drug Enforcement Administration (federal)

DFA - Department of Finance and Administration (NM)

DHHS - Department of Health and Human Services

DHI - Division of Health Improvement (DOH)

DM - Disease Management

DME - Durable Medical Equipment

DMZ - DMZ is short for De - Militarized Zone and is software/web page for the transmission and storage of data.

DOB - Date of Birth

DOH - New Mexico Department of Health

DOT - Department of Transportation (NM)

DSM - Diagnostic and Statistical Manual of Mental Disorders

DST - Documented Staff Training

DTR - Double Trouble in Recovery DV - Domestic Violence

DVR - Division of Vocational Rehabilitation (PED)

DWI - Driving While Intoxicated

DWS - Department of Workforce Solutions (NM)

- E -

EAP - Employee Assistance Program

EBP - Evidence - Based Practices

ECHO - Extension for Community Healthcare Outcomes

EDI - Electronic Data Interchange

EEO - Equal Employment Opportunity

EHR - Electronic Health Record

ENT - Ear, Nose, Throat

EOR - Employer of Record

EPSDT - Early and Periodic Screening, Diagnosis, and Treatment

EQRO - External Quality Review Organization

ER - Emergency Room

ESG - Emergency Grant Shelter Program

- F-

FACT - Functional Assessment of Cognitive Transit Skills

FAQ - Frequently Asked Question

FBI - Federal Bureau of Investigation

FDA - U.S. Food and Drug Administration

FDIC - Federal Deposit Insurance Corporation

FEIN - Federal Employer Identification Number

FEMA - Federal Emergency Management Agency

FICA - Federal Insurance Contributions Act

FIT - Family Infant Toddler program (DOH)

FFS - Fee for Service

FFT - Functional Family Therapy

FHLB - Federal Home Loan Bank

FINS - Family in Need of Services

FMA - Fiscal Management Agency

FMR - Fair Market Rate

FQHC - Federally Qualified Health Center

FS - Family Services (CYFD)

FTE - Full - time Equivalent

FTP - File Transfer Protocol

FUTA - Federal Unemployment Tax Act

FY - Fiscal Year

- G -

GAO - General Accounting Office (federal)

GCD - Governor's Commission on Disability (NM)

GH - Group Home

GHPC - Governor's Health Policy Coordinator (NM)

GNMA - Government National Mortgage Association

GOI - General Organization Index

GPM - Governor's Performance Measures

GPRA - Government Performance Results Act

GPS - Global Positioning System

- H-

HB - House Bill

HCAC - Health Care Acquired Condition

HCBS - Home and Community - Based Service

HCPCS - Healthcare Common Procedure Coding System

HCSC - Health Care Service Corporation

HCV - Housing Choice Vouchers

HEDIS - Healthcare Effectiveness Data and Information Set

HH - Health Home (CareLink)

HIE - Health Information Exchange

HIPAA - Health Insurance Portability and Accountability Act

HITECH Act - Health Information Technology for Economic and Clinical Health Act

HIT - Health Information Technology

HIV - Human Immunodeficiency Virus

HIX - Health Insurance Exchange

HMIS - Homeless Management Information System (HUD)

HOP - Housing Option Program

HOPWA - Housing Opportunities for Persons with AIDS Program

HPC - Health Policy Commission (NM)

HRA - Health Risk Assessment

HSD - New Mexico Human Services Department

HST - Housing Support Team

HTN - Hypertension

HUD - Department of Housing and Urban Development (federal)

- |-

I - SATS - Inventory of Substance Abuse Treatment Services

I/T/U - Indian Health Service, Tribal health provider, and Urban Indian provider

IAD - Indian Affairs Department (NM)

IADL - Instrumental Activities of Daily Living

IBNR - Incurred but Not Received

ICD - 10 - International Classification of Diseases 10

ICD - 9 - International Classification of Diseases 9

ICF/MR/DD - Intermediate Care Facility for Individuals with Mental Retardation or Developmental Disabilities

ICSS - Independent Consumer Supports System

ICWA - Indian Child Welfare Act

ID - Identification

IEP - Individualized Education Plan

IDT - Interdisciplinary Team

IEP - Individualized Education Program

IFN - Interagency Forensic Network

IHS - Indian Health Service

INS - Immigration and Naturalization Service (federal)

IOP - Intensive Outpatient Program

IPF - Inpatient Psychiatric Facility/Unit

Epoch - Individualized Plan of Care

IPRA - Inspection of Public Records Act

IRS - Internal Revenue Service

IS - Information Systems

ISO - Income Support Division (HSD)

ISHCN - Individual with Special Health Care Needs

ISOC - Integrated System of Care

ISP - Individual Service Plan

ISP - Intensive Supervision Program

ISU - Intensive Supervision Unit

IT - Information Technology

IV - Intravenous

- J -

JJS - Juvenile Justice Services

- L-

LADAC - Licensed Alcohol and Drug Abuse Counselor

LC - Local Collaborative

LEIE - List of Excluded Individuals and Entities

LIHTC - Low Income Housing Tax Credit

LOC – Level of Care

LOD - Letter of Direction

LPN Licensed Practical Nurse

LSP - Local Selection Panel

LTTF - Land Title Trust Fund

LVMC - Las Vegas Medical Center (DOH)

LEIE - List of Excluded Individuals/Entities

LEP - Limited English Proficiency

LISW - Licensed Independent Social Worker

LMFT - Licensed Marriage and Family Therapist

LPCC - Licensed Professional Clinical Counselor

LPN - Licensed Practical Nurse

LSP - Local Selection Panel

LTTF - Land Title Trust Fund

LTC - Long - Term Care

LTSS - Long - Term Services and Supports

LVMC - Las Vegas Medical Center (DOH)

- M -

MAD - Medical Assistance Division

MCO - Managed Care Organization

MD - Doctor of Medicine

MDS - Minimum Data Set

MDT - Multi - Disciplinary Team

MFA - Mortgage Finance Authority (NM)

MFCU - Medicaid Fraud Control Unit

MFEAD - New Mexico Medicaid Fraud & Elder Abuse Division

MH BG - Mental Health Block Grant

MHSIP - Mental Health Statistics Improvement Project

MHT - SIG or TSIG - Mental Health Transformation State Incentive Grant

MI - Motivational Interviewing

MIC - Medicaid Integrity Contractor

MIS - Management Information System

MMIS - Medicaid Management Information System

MMIS - Medicaid Management Information System

MOE - Maintenance of Effort

MOU - Memorandum of Understanding

MST - Multi - Systemic Therapy

MTFC - Multidimensional Treatment Foster Care

- N -

N - SSATS - National Survey of Substance Abuse Treatment Services

NAMI - National Alliance for the Mentally III

NARMH - National Association for Rural Mental Health

NBD - Neurobiological Disorder

NCADI - National Clearinghouse for Alcohol and Drug Information (SAMHSA) NIST - National Institute of Standards and Technology

NCPDP - National Council of Prescription Drug Programs

NCQA - National Committee for Quality Assurance

NFLOC - Nursing Facility Level of Care

NMAC - New Mexico Administrative Code

NMCD - New Mexico Corrections Department NMFI - National Master Facility Inventory

NMSA - New Mexico Statutes Annotated

NMHIC - New Mexico Health Information Collaborative

NMMIP - New Mexico Medical Insurance Pool

NMSA - New Mexico Statute Annotated

NOFA - Notice of Funding Availability

NOGA - Notice of Grant of Award

NOMS - National Outcome Measures

NPI - National Provider Identifier

NQMC—National Quality Measures Clearinghouse

- 0 -

OAA - Older Americans Act

OB - GYN—Obstetrics and Gynecology

OCA - Office of Consumer Affairs (BHSD), now CAFE

ODBC - Open Database Connectivity

OEM - Original Equipment Manufacturer

OHR - Office of Human Resources (HSD)

OIG - Office of Inspector General (HSD)

OMB - Office of Management and Budget

OPPC - Other Provider Preventable Condition

OOS - Office of the Secretary (HSD)

OSAH - Office of School and Adolescent Health (DOH)

OSAP - Office of Substance Abuse Prevention (DOH)

OT - Oversight Team

- P -

PASRR - Pre - Admission Screening and Resident Review

PCMH - Patient - Centered Medical Home

PCP - Primary Care Physician/ Primary Care Provider

PCS - Personal Care Service

PD - Public Defender Department (NM)

PDL - Preferred Drug List

PED - Public Education Department (NM) PHA - Public Housing Agency

PHH - Physical Health Home

PHI - Protected Health Information

PI - Performance Improvement Project

PL - Public Law

PM - Performance Measure

PMPM - Per - Member Per - Month

PPACA - Patient Protection and Affordable Care Act

PPC - Provider Preventable Condition

PPS - Prospective Payment System

PRAC - Project Rental Assistance Contract

PS - Protective Services

PSC - Professional Services Contract

PSR - Psychosocial Rehabilitation

PTSD - Post Traumatic Stress Syndrome

- Q-

Q1 - First Quarter

Q2 - Second Quarter

Q3 - Third Quarter

Q4 - Fourth Quarter

QAP - Qualified Allocation Plan

QI - Quality Improvement

QM - Quality Management

QM/QI - Quality Management/ Quality Improvement

- R-

RAC - Recovery Audit Contractor

RBT – Registered Behavior Technician

RCCP - Regional Care Coordination Plan

RCPNNM - Rural and Community Psychiatry Network of New Mexico

RES - Recovery Empowerment Specialist

RFP - Request for Proposal

RHC - Rural Health Clinic

RN - Registered Nurse

RSS - Recovery Support Services

RTC - Residential Treatment Center

- S-

SAMHSA—Substance Abuse and Mental Health Services Administration

SB - Senate Bill

SBHC - School - Based Health Center

SBIRT - Screening, Brief Intervention and Treatment

S-CHIP - State Children's Health Insurance Program

SCI - State Coverage Insurance

SDCB - Self - Directed Community Benefit

SDF - Software Development Firm

SE - Statewide Entity

SED - Serious Emotional Disturbance

SFY - State Fiscal Year

SIG - State Incentive Grant

SHD - Systems Help Desk

SHP - Supportive Housing Program

SJM - Senate Joint Memorial

SMI - Serious Mental Illness

SNP - Special Needs Plan

SPC - Specialty Care Provider (ABA)

SOE - Summary of Evidence

SQL - Structured Query Language

SOC - System of Care

SPF - SIG - Strategic Prevention Framework State Incentive Grant

SSI - Supplemental Security Income

SSDI - Supplemental Security Disability Insurance

SSN - Social Security Number

SSRI - Selective Serotonin Reuptake Inhibitor

- T-

TANF - Temporary Assistance for Needy Families (HSD)

TBD - To Be Determined

TBI - Traumatic Brain Injury

TBRA - Tenant - Based Rental Assistance TCA - Total Community Approach

TCN - Transaction Control Number

TDD - Text Telephone

TDM - Team Decision - Making

TEDS - Treatment Episode Data Set

TFC - Treatment for Foster Care

TLS - Transitional Living Services

TM - Tracking Measure

TPL - Third Party Liability

TQM - Total Quality Management

T - SIG - Transformation State Incentive Grant

TTY - Telecommunication Device for the Deaf

- U -

UM - Utilization Management

UNM/CDD - University of New Mexico Center for Development and Disability

UNM - University of New Mexico

URS - Uniform Reporting System

USC - United States Code

- V -

VMS - Voucher Management System **VONM - Value Options New Mexico** VPN - Virtual Private Network

- W-

WDI - Working Disabled Individual

WIC - The Special Supplemental Nutrition Program for Women, Infants, and Children

WICHE - Western Interstate Commission on Higher Education

WRAP - Wellness Recovery Action Plan

- Y -

YTD - Year - to - Date