Comments and Responses: CareLink New Mexico 2021 Policy Manual Updates

Comment: One commenter requested the Human Services Department define "co-location".

Department Response: Co-location is a description of multiple services provided at one site (e.g. physical and behavioral health services provided at one location, though not necessarily in the same building).

Comment: One commenter recommended removing the verbiage "must either update existing contracts with all Medicaid MCO or develop a new contract if none exists", in the Participation Requirements for Providers section of the Manual.

Department Response: The Department agrees with the commenter and has revised the section to read: "A CLNM provider must (1) be enrolled as a New Mexico Medicaid provider; (2) meet all applicable CLNM standards and (3) secure a Medicaid contract with all MCOs."

Comment: One commenter suggested adding "proficient" to the bilingual Community Liaison language requirements to ensure the Community Liaison's skills are appropriate and sufficient.

Department Response: The Department appreciates the comment. The language has been revised to include the requirement for proficiency.

Comment: One commenter stated that the initial amendment was developed in collaboration with the State and all MCOs. The commenter requests confirmation that this is no longer the State's expectation.

Department Response: The original amendment was a template provided by the State as a guide for CLNM providers. All providers are responsible for contracting directly with each Managed Care Organization (MCO); the State is not involved in those negotiations.

Comment: One commenter stated that MOU and MOA are often used interchangeably throughout the Manual and recommended only one be used for clarification.

Department Response: Providers should determine which type of agreement is most appropriate and establish that agreement with the entity in question.

Comment: One commenter requested the effective date of the addition of SUD eligibility criteria be included in the Manual.

Department Response: The effective date of the change in SUD eligibility criteria will be communicated through published Provider Alerts and provider meetings.

Comment: One commenter requested the addition of other state certified behavioral health professionals to the staffing models.

Department Response: The staffing positions listed in the Policy Manual have been approved by the Centers for Medicare and Medicaid through a State Plan Amendment.

Providers have the flexibility to add additional staffing positions they deem appropriate, such as Community Health Workers.

Comment: One commenter asked how the Family Peer Support Specialist differed from the Family Peer Support Worker position.

Department Response: The positions are the same. The title will be changed in the Policy Manual to reflect the Certified Family Peer Support Worker title certified through NMCBBHP.

Comment: One commenter stated that the Manual implies FPSS must be employed full-time.

Department Response: Full-time employment for CLNM positions is not required, and providers may hire staff members on a part-time basis or employ them in other roles within their agency.

Comment: One commenter requested additional certified behavioral health professionals (e.g. CWS, CPSW) be eligible to provide clinical supervision, and this role not be restricted to independently licensed behavioral health practitioners.

Department Response: The Department believes that, given the acuity of conditions of many members enrolled in CareLink, supervision of staff by an independently licensed clinical supervisor is indicated.

Comment: One commenter requested that a Physician's Assistant be added to the list of eligible physical health consultants.

Department Response: The current list of providers eligible to deliver CareLink services has been reviewed and approved by the Centers for Medicare and Medicaid through a State Plan Amendment. The Department will consider the addition of this provider in the next update to the State Plan Amendment for the CareLink program.

Comment: One commenter asked if the term "required" should be changed to "other" in reference to mandatory CLNM staff positions.

Department Response: The statement refers to staffing required by the CLNM program. Some staff positions may already exist within a provider agency, and the agency may use existing employees to fill positions required by the CLNM program. Other positions listed in the Manual may be added as a provider deems appropriate but are not required.

Comment: One commenter asked how CYFD Wraparound services impact services and report of CareLink Health Home providers.

Department Response: Wraparound staff are trained and monitored by CYFD and are dedicated to the Wraparound program. Wraparound fidelity and reporting requirements are separate and apart from those of Health Home programs and are overseen and monitored by CYFD Wraparound staff in conjunction with the CLNM program manager.

Comment: One commenter asked for clarification of the Community Liaison position.

Department Response: The description for this position appears on pages 20 and 23 of the CLNM Policy Manual.

Comment: One commenter asked if the diagnosis of SUD could be added to criteria for potential recipients of referral letters for the CLNM program.

Department Response: The SUD diagnosis has been included in the criteria for referral letters.

Comment: One commenter requested that SUD be added to the list of criteria from which a member may recover and no longer be eligible for CLNM services.

Department Response: SUD has been added to the list of criteria from which a member may recover and no longer be eligible for CLNM services.

Comment: One commenter wondered if there were exceptions to the 24/7 service accessibility clause for non-licensed team members.

Department Response: The Manual does not specify the licensure level of team members that may be available to members in the event of an emergency, so an exception for non-licensed staff need not be specified.

Comment: One commenter asked the frequency of UNM analyses, and if reports are publicly distributed.

Department Response: There is no established frequency for this level of extensive review; however, other monitoring and oversight processes are conducted regularly, and are now underway. When such data are available for distribution, the Department will make them available to the public.