

Susana Martinez, Governor Brent Earnest, Secretary Nancy Smith-Leslie, Director

December 21, 2016

## RE: Tribal Notification Letter 16-18: Managed Care Policy Manual

Dear Tribal Leadership, IHS, Tribal Facility or other interested parties,

Consultation with New Mexico's Indian Nations, Tribes, Pueblos and their healthcare providers is an important component of the government-to-government relationship with the State of New Mexico. In accordance with the New Mexico Human Services Department's (HSD) Tribal Consultation requirements, this letter is to inform you that HSD, through the Medical Assistance Division (MAD), is accepting written comments January 3, 2017 through February 3, 2017, regarding proposed revisions to the following Managed Care Policy Manual sections:

Section 02 Provider Network
 The Core Service Agency (CSA) section has been removed due to Managed Care
 Organizations not having the authority to designate CSAs. Added language about monitoring MCO provider access.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

2) Section 04 Care Coordination
Added information on the MCO requirements for implementation of the Community Benefit Services Questionnaire (CBSQ).

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

3) Section 05 Transitions of Care
Added language about transitioning a member from a nursing facility (NF) to the community.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

4) Section 07 Community Benefit
Added definitions to clarify the policy. Added information about when members do not need an
allocation. Clarified allocation processes for all categories of registration. Added language to
describe the circumstances under which a member may request an Exception to his/her
category of registration, and when an Expedited allocation may be granted using the Exception

process. Added medical eligibility timelines for the Managed Care Organization (MCO) to determine the Nursing Facility Level of Care (NF LOC) and when the NF LOC determination must be transmitted to the ISD and MMIS eligibility systems.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

5) Section 08 Agency-Based Community Benefit (ABCB)
Added provider requirements to ensure compliance with the Federal Home and Community
Based Settings Rule. Clarified Electronic Visit Verification requirements for personal care
services (PCS). Removed references to timesheets for PCS. Removed the requirement that the
individualized plan of care (IPoC) for PCS services must be sent to the MCO for approval.
Clarified the description of respite services.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

6) Section 09 Self-Directed Community Benefit (SDCB)

Added provider requirements to ensure compliance with the Federal Home and Community
Based Settings Rule. Added additional information to clarify allowable cell phone services
under related goods. Clarified the description of respite service to align with SDCB. Added
that non-medical transportation for minors is not a covered service.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

7) Section 13 Alternative Benefit Package – Medically Frail & ABP Exempt Chronic Substance Dependency (CSD) has been removed and replaced with Substance Use Disorder (SUD) Criteria.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

8) Section 14 School Based Health Centers Eliminated the requirement for site visits by Department of Health Office of School and Adolescent Health (DOH/OSAH) and HSD/MAD for initial certification of SBHCs for Medicaid billing.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

9) Section 17 Managed Care Reports
Added the process for submission, resubmission, and review of Centennial Care Reports.

<u>Tribal Impact</u>: HSD does not anticipate a service or financial impact to individual, tribes or their healthcare providers.

## <u>Tribal Consultation Comments</u> –

Tribes and their healthcare providers may view the proposed Managed Care Policy Manual revisions on the Human Services Department's webpage at: <a href="http://www.hsd.state.nm.us/providers/written-tribal-consultation-letters.aspx">http://www.hsd.state.nm.us/providers/written-tribal-consultation-letters.aspx</a>. Letter 16-10

## **Important Dates**

- Written comments must be submitted by 5:00 p.m. Mountain Standard Time (MST) on February 3, 2017. Please send your comments and questions to the MAD Native American Liaison, Theresa Belanger, at (505) 827-3122 or by email at: <u>Theresa.Belanger@state.nm.us</u>.
- Comments and responses will be compiled and made available upon request by March 1,
   2017. After considering the comments received and making changes deemed necessary, the final version of the Managed Care Policy Manual will also be available and effective March 1,
   2017 on the HSD website:

http://www.hsd.state.nm.us/LookingForInformation/managed-care-policy-manual.aspx.

Sincerely,
- Mary Surh-USIL

Nancy Smith-Leslie, Director

cc: Theresa Belanger, Native American Liaison, HSD/MAD
Angela Medrano, Deputy Director, HSD/MAD
Kim Carter, Bureau Chief, HSD/MAD, Centennial Care Contracts Bureau
Megan Pfeffer, Bureau Chief, HSD/MAD, Quality Bureau
Tallie Tolen, Bureau Chief, HSD/MAD, Long-Term Services and Supports Bureau