

January 19, 2018

# RE: Tribal Notification Letter 17-10: Amendment to 8.310.10 NMAC Health Home Services

Dear Tribal Leadership, Indian Health Service (IHS), Tribal Health Providers and other interested parties,

Seeking advice and comments from New Mexico's Indian Nations, Tribes, Pueblos and their health care 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's) Tribal Notification to Request Advice and Comments process, this letter is to provide information that that HSD, through the Medical Assistance Division (MAD), is proposing to amend 8.310.10 NMAC Health Homes Services and is accepting comments until **5:00 Mountain Standard Time (MST) on Februaru 19, 2018** regarding the proposed changes.

Section 9-8-6 NMSA 1978, authorizes the Department Secretary to promulgate rules and regulations that may be necessary to carry out the duties of the Department and its divisions.

Notice Date: November 28, 2017 Hearing Date: February 19, 2018 Adoption Date: Proposed as May 1, 2018 Technical Citations: Social Security Act Sec 1945 which may be found at <u>https://www.ssa.gov/OP\_Home/ssact/title19/1945.htm</u> Centers for Medicare and Medicaid Services – Health Homes which may be found at <u>https://www.medicaid.gov/medicaid/ltss/health-homes/index.html</u>

The Department has analyzed data from Health Home Services' first year of operation and determined a number of amendments are necessary to increase the effectiveness of the service. The proposed amendments include:

# Section 8 Mission Statement

The Department is removing the mission statement from each New Mexico Administrative Code (NMAC) rule as it is amended or a new rule is proposed in order to make it consistent with other rules. No changes in the program operation will result from this change.

#### Section 10 Eligible Providers and Practitioners Subsection A

# The provision of Comprehensive Community Support Services (CCSS) is a CareLink New Mexico Health Home requirement. MAD no longer requires the Children, Youth and Families Department or Department of Health, Division of Health Improvement to certify an agency to render CCSS. MAD requires an attestation that the agency has completed CCSS training.

### Subsection B, Paragraphs (3) through (7)

The Department is expanding the role of the Health Home Services supervisor to include supervision of two new types of practitioners: certified peer and family support workers. In addition the supervisor will no longer supervise physical health and psychiatric consultants as they will comply with their respective licensing boards' requirements for supervision.

The Department is adding a Registered Nurse as another option for Care Coordination providers. It also adds waiver availability through the CareLink Steering Committee.

### Section 11 Provider Responsibilities, Subsection D, Paragraph 5

MAD Health Home Services has completed its first year of operation. The Department has analyzed data and found the caseload ratios are not providing the intensity level necessary to meet the needs of some recipients. The Department also found for combined Care Coordination Levels 6 and 7 the average care coordinator caseload is 50 to 65 recipients. Based on these results, the Department is proposing to change the caseloads for Care Coordination Levels 6 and 7, and add 8 and 9 in order to provide better support to recipients with high intensity needs.

### Section 12 Identified Population, Subsection B

The Department is expanding access to Health Home CareLink NM services to an eligible recipient regardless of whether he or she resides in the same county as the approved health home provider.

#### **Section 13 Covered Services**

The Centers for Medicare and Medicaid Services (CMS) amended the Health Home Services' six service requirements to no longer reimburse separately for linkage through health information technology. However, it remains a required element for Health Home Services. The Department also proposes to separate out Health Promotion as a distinct service category in order to bring focus to this service.

<u>Tribal Impact</u>: HSD does not believe there will be any impact for IHS or other tribal health providers. HSD also believes that the effect of streamlining the process for a provider to offer CCSS services, changing the supervisory structure and reducing caseloads, allowing recipients in one county to participate in the Health Home agency of another county, and encouraging Health Promotion will all benefit Native Americans who use this service.

Tribes and their healthcare providers may view the proposed 8.310.10 NMAC, on the HSD webpage at: <u>http://www.hsd.state.nm.us/providers/written-tribal-consultations.aspx</u>, *Notification Letter* 17-10.

#### **Important Dates:**

- A public hearing on this rule is scheduled to be held in Hearing Room 1, Toney Anaya Building, 2550 Cerrillos Road, Santa Fe, New Mexico on February 19, 2018 from 10 a.m. to 11 a.m. MST.
- Written comments must be submitted by 5:00 p.m. Mountain Standard Time (MST) on February 19, 2018. 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>.

• All comments and responses will be compiled and available *after March 1, 2018*.

Sincerely,

Marray Sunh Leslie

Nancy Smith-Leslie, Director Medical Assistance Division

CC: Theresa Belanger PPB