Overview

This initial set of frequently asked questions (FAQs) is intended to help clarify some of the questions that providers have frequently raised about changes under way in New Mexico’s behavioral health system.

As part of the overall transformation of New Mexico’s behavioral health system, ValueOptions of New Mexico has been chosen to partner with the new Behavioral Health Collaborative in managing the New Mexico public behavioral health service system effective July 1, 2005. During the next few years, ValueOptions will manage selected funding from a range of state agencies. Although every effort will be made to minimize disruption, the improvements and streamlining being sought will drive changes in some key processes of provider payment, authorization, reporting, and oversight. The Collaborative wants to encourage ongoing comments/input and to share information on a regular and timely basis, as it is known. Where details are still pending we will convey as clearly as possible the principles and rules that will guide upcoming plans and decisions.

Our intention is to make these FAQs an ongoing series of communications to providers to ensure information is available to help all of us to make the transition goes as smoothly as possible. Please feel free to phone/ e-mail additional questions you would like to have answered, as well as requests for staff to meet with your agency or provider group, to our Provider Transition Liaison Fred Sandoval: fred.sandoval@doh.state.nm.us or 505-827-2663.

- **What are the primary objectives of the Collaborative beginning July 1, 2005?**

  The primary objectives for Phase One beginning July 1, 2005, emphasize a smooth transition: (1) services will continue to be delivered; (2) providers will continue to be paid in a timely fashion; (3) state and federally required data are collected and reported; and (4) service levels and performance standards are maintained.

- **Will current providers have contracts in place beginning July 1, 2005?**

  The SE will be expected to help smooth this transition by contracting with interested existing behavioral health providers for at least six months beginning July 1, 2005.
• **Who do we contact if we have questions about this transition?**

As indicated above, Fred Sandoval is coordinating provider transition liaison work. A staff person has also been designated in each major department of the Collaborative to address transition service issues and concerns that may develop. These designated state agency staff members are in place to work with providers and the SE in ensuring a smooth transition for both providers and the people they serve.

• **Will care coordination for consumers be available?**

Yes, care coordination as an administrative function is to be provided by the SE to ensure that individuals with high-risk, multiple and complex needs are assisted in obtaining access to appropriate and well-coordinated services. This service is intended to support the clinical work being done by case managers and direct service providers as well as to help achieve better clinical outcomes.

• **Will the SE begin a transition process with the Purchasing Collaborative on administrative support systems before July 1, 2005?**

ValueOptions is already working with the Collaborative to ensure a smooth transition when the contract formally takes effect July 1, 2005. Initial provider contact is being made in later April and early May. ValueOptions will also provide appropriate consultation, training and lead-time for any needed changes that affect provider practices. The Collaborative’s goal, as communicated in the RFP and in any contracting discussions, will be to protect provider capacity as a key resource for the goals of this change in process across the state.

• **Will the SE work with providers on administrative transition issues?**

Final administrative arrangements to develop provider networks — including credentialing, contracting and payment systems — are part of the ValueOptions/Collaborative transition plan. Our goal will be to represent the needs of providers for support and stability in key areas important to maintaining this important infrastructure. We welcome you input and consultation to help us make these decisions effectively. We also expect that as soon as possible this spring ValueOptions will begin working directly with providers to hear about support/training needs as well as the ways in which you would like to relate to this partner and system of service management.

• **Is the SE going to be providing direct services?**

The intent as described in the RFP is for the SE to use the current provider system to the greatest extent possible; any plans for the SE to provide direct services will require review and approval of the Collaborative based on convincing evidence that efforts have been made to develop the capacity and that no alternatives exist to meet the identified service needs. Again, our interest is to maintain and enhance existing community-based service capacity, not replace it.
• **Will services to be provided be changing?**

We have been working over the last year with stakeholder groups to get input and help in creating a new and enhanced set of service definitions and requirements to help us ensure best practices and better recovery/resiliency-related outcomes. This new set of cross-agency service definitions is intended to build on and improve, not reduce, the range of services available, ensuring greater consistency and helping to simplify administrative processes. Where service definition changes may affect provider service delivery practices, the Collaborative/ValueOptions wants to work with you to design training and support for any needed provider development. Specific information on the new service definitions will be made available on the Collaborative website.

• **How will this affect data we have to provide?**

Our plan is to use the new behavioral health delivery system to help streamline and ease provider burden in data reporting requirements. The SE will be expected to work with providers on any changed reporting procedures and methods, forms and instruments, and to provide training and technical support/ assistance as needed prior to the start of the contract period beginning July 1, 2005 and during FY 06.

• **How will our performance be evaluated and monitored?**

Once selected the SE will work with state staff and providers to develop specific quality assurance and quality improvement systems needed for all of us to meet our funder and public accountability requirements. Again, we will want to consult with you on these decisions and will require that training and technical assistance for providers be made available once these details are determined.

• **What will happen to Regional Care Coordinators (RCCs) and to the Managed Care Organizations (MCOs)?**

Contracts for state funded behavioral health services with the RCCs and MCOs are set to expire on June 30, 2005; some of the staff are likely to be employed by the new SE to help ensure continuity. MCOs are likely to continue providing physical health services to Medicaid consumers.

• **What are Local Collaboratives and how are providers going be involved with them?**

The Collaborative is interested in supporting the development of Local Collaboratives for each of the 13 Judicial Districts in New Mexico plus several Native American local collaboratives. The Local Collaboratives are local coordinating and planning groups formed at the community level to identify community needs, help develop a range of resources and ensure the responsiveness and relevance of behavioral health services. The composition of Local Collaboratives must be diverse and representative of the counties in the judicial district. Members on the Local Collaborative should include, but not limited to, health and behavioral health providers, family members, consumers, public agencies, and members of planning councils, schools, businesses, faith communities, local government and criminal/juvenile justice entities.
• **Who will select the new SE and when?**

The Collaborative hopes to select the SE by the end of February 2005. Prior to the selection, state staff will have completed a thorough evaluation of the proposals submitted on January 7, 2005 along with a consumer/family proposal review. After the SE is selected, contract negotiations are intended to occur during the month of March 2005 and a contract submitted to the Collaborative for approval by the end of that month. The contract will be effective July 1, 2005.

• **When will the SE begin transition work?**

The SE will begin transition work during the fourth quarter of FY 05 after the award is announced. The SE will work with state staff on transitioning into the single state behavioral health delivery system to address the issues identified in this FAQ. Transition for providers will involve communicating and meeting with the SE to begin the contracting process, as well as training and technical assistance. The SE will be charged with working with providers to address the wide spectrum of operating, clinical and administrative issues during the last quarter of FY 05 into FY 06.

• **Who can I contact for more information?**

As indicated above, Fred Sandoval will be coordinating provider liaison and communications for this transition. He can be reached at fred.sandoval@doh.state.nm.us or at 505-827-2663. There also will be staff liaisons announced for each major department in the Collaborative by late February/early March. You may also contact the coordinator for the Collaborative Leslie Tremaine at leslie.tremaine@state.nm.us or 827-1344.

• **Will there be a similar information process for consumers?**

We have developed a parallel process for informing consumers about the changes currently taking place. A brochure has been developed and is in the process of being finalized. As providers, you are a critical part of this process, and we ask that you help ensure you clients that the changes taking place will be carried out with their best interests in mind.