

Provider Frequently Asked Questions

1. When will Centennial Care 2.0 start?

- January 1, 2019

2. What MCOs have been contracted to provide Centennial Care 2.0 services and who are the contact people for provider issues?

- Blue Cross and Blue Shield – Contact information is available online at https://www.bcbsnm.com/provider/contact_us.html
- Presbyterian Health Plan – Provider Network Management, contact information available online at www.phs.org/contactguide
- Western Sky – Contact information will be available online at www.westernskycommunitycare.com for provider issues after 1/1/19.

3. How do I access each MCO's provider portal?

- Blue Cross and Blue Shield-<https://www.bcbsnm.com/provider/index.html>
- Presbyterian Health Plan
 - Physical Health www.phs.org/mypres
 - Behavioral Health www.magellanprovider.com
- Western Sky – www.westernskycommunitycare.com (The Western Sky public website is available, but please note that additional content is under development.)

4. How do I access the Provider Services Call Center for general questions and what are the hours of operation?

- Blue Cross and Blue Shield:
 - Phone: Provider Customer Service 1-800-693-0663
 - Hours: Monday-Friday 8am-5pm
- Presbyterian Health Plan:
 - Phone: 505 923 -5757 Toll Free 1 888 923 5757
 - Hours: Monday-Friday 8am-5pm
- Western Sky:
 - Phone: Toll free 1-855-688-6589 (until 1/1/19)
 - Phone: Effective 1/1/19: Toll free 1-844-738-5019
 - Hours: Monday – Friday 8am-5pm

- 5. Do I need to enroll with the New Mexico Human Services Department (HSD) as a Medicaid provider to participate in Centennial Care?**
- Yes. With very few exceptions, current federal regulation requires that all providers, including those who order or refer services, be enrolled via an executed provider participation agreement with the State Medicaid Agency (HSD). Enrollment does not require that you see both fee-for-service and managed care Medicaid recipients. If you are not currently enrolled, or if you do not have a current provider participation agreement approved by HSD, please visit the New Mexico Medicaid Web Portal at: <https://nmmedicaid.portal.conduent.com/webportal/enrollOnline> to submit your provider application. Upon approval by HSD, you will be eligible to contract with the Centennial Care MCOs.
- 6. As a provider do I need to be re-credentialed if I want to re-contract (rather than renew) with BCBS and PHP?**
- Credentialing will not need to be renewed with Blue Cross and Blue Shield or Presbyterian Health Plan in order to re-contract; as long as credentialing is current the standard re-credentialing cycle applies.
- 7. How long does the credentialing process take?**
- MCOs must complete the credentialing process within 45 calendar days from receipt of the completed application with all required primary source documentation.
- 8. Will I need to have a contract in place in order to have claims paid beginning January 1, 2019?**
- Yes. The MCOs will work diligently with you prior to January 1, 2019 to see that you become credentialed and have a contract in place.
- 9. Will I continue to be paid for seeing my Medicaid clients while I am going through the contracting process?**
- Yes, if the provider is Medicaid enrolled but not yet contracted with the MCO, the MCO will continue to reimburse for care for up to 90 days while the provider is going through the MCO contracting process as long as the provider obtains an authorization from the MCO. If the provider is not Medicaid enrolled, the MCO will not reimburse until the provider is a Medicaid enrolled provider. If the provider fails to contract with the MCO for any reason and received reimbursement, the MCO may recoup those funds.
- 10. Will MCOs honor another MCO's prior authorizations after 1/1/19?**
- Yes, per the Transition Management Agreement, approved prior

authorizations must be honored for the first 60 calendar days after December 31, 2018.

11. How do I submit claims with dates of service prior to December 31, 2018, to MCOs who not Centennial Care 2.0 MCOs?

- You would continue to submit claims to the appropriate legacy MCO. All claims submitted, including those after 1/1/19 will remain subject to timely filing requirements.

12. How do I file a provider grievance or appeal?

- Blue Cross and Blue Shield:
 - To file a grievance or appeal, call 1-866-689-1523, or write to:
Blue Cross Community Centennial
ATTN: Grievance Coordinator OR
ATTN: Appeals Coordinator
P.O. Box 27838
Albuquerque, NM 87125-7838
FAX: 1-888-240-3004
- Presbyterian Health Plan:
 - Online: www.phs.org/providers/resources/appeals-grievances
 - Mail: PO Box 27489, Albuquerque, NM 87125 Attention: Provider Appeals and Grievance
 - Fax: 505 923 6111
- Western Sky: All information below is effective 1/1/19
 - Western Sky Community Care
ATTN: Provider Appeals
P.O. Box 8010
Farmington, MO 63640-8010
 - For more information on how to file an appeal, 1-844-738-5019
- **What types of provider trainings do MCOs offer and how can I access them?**
- Blue Cross and Blue Shield:
 - We offer Provider Trainings and Educational Webinars for the provider community throughout the year via webinar and in person, <https://www.bcbsnm.com/provider/training/index.html>
- Presbyterian Health Plan:
 - We offer multiple trainings throughout the year via webinar and in person. In addition, the most current material/presentation can be found at:
<https://www.phs.org/providers/resources/training-education>
- Western Sky:
 - We will offer Provider Training and Educational Webinars: on-line,

via phone, and in person. More information will be available this summer at:

<https://www.westernskycommunitycare.com>