The Agency Based Community Benefits Program (ABCB) Provider Type 363
Enrollment Information for New Providers

Services that provide assistance to individuals that require long-term supports and services so they may remain in the family residence, in their own home or in community residences. This program serves as an alternative to a Nursing Facility (NF).

ABCB services are a supplement to the member’s natural supports and are not intended to replace family support. Community Benefits do not provide 24-hour care. The services are designed to increase independence and achieve personal goals while providing care and support to enable individuals to live as active members of the community while ensuring health and safety.

The following is a list of ABCB covered services along with the link to the Managed Care Policy Manual where the provider standards for each service can be found:


Adult Day Health
Assisted Living
Behavior Support Consultation
Community Transition Services
Emergency Response
Employment Supports
Environmental Modifications
Home Health Aid
Nursing Respite
Occupational Therapy for Adults

Personal Care Services – 21 and older – (currently closed for new provider enrollment)

Physical Therapy for Adults – RN and LPN

Private Duty Nursing RN and LPN

Respite

Speech Therapy for Adults

New provider enrollment for providers is a critical function to maintain an existing network of providers statewide for all ABCB services in Centennial Care. A provider interested in becoming a New Mexico Medicaid Centennial Care ABCB provider must first receive approval from the Human Services Department/Medical Assistance Division (HSD/MAD) ABCB Program for one or more ABCB services before submitting the Medical Assistance Division Provider Participation Agreement Form (MAD 335) application to Conduent (formerly Xerox) Provider Enrollment. Additionally, providers are not able to enter into a contract with the Centennial Care Managed Care Organizations (MCOs) until approval from HSD/MAD is obtained. Providers are advised to review the Managed Care Policy Manual prior to completion of the ABCB provider application packet. The link to the Managed Care Policy Manual is:

Providers must complete the ABCB provider application packet checklist (MAD 500A). All information listed on the checklist (MAD 500A) must be provided to and approved by HSD/MAD ABCB Program before the application is submitted to Conduent. A provider packet must be submitted in a three ring binder, tabbed and in the order of the checklist provided (MAD 500A). Completed enrollment packets are to be mailed to:

HSD/MAD
P.O. Box 2348
Santa Fe, New Mexico 87504-2348
Attention: Long Term Services and Supports Bureau (LTSSB)
Darlene Velasquez

Note: Incomplete enrollment packets will not be processed.

For questions or assistance with the enrollment process you can contact Darlene Velasquez at (505)827-6297 or email at darlene.velasquez@state.nm.us.

Once the enrollment packet is approved by HSD/MAD, an approval letter is submitted to the provider by the HSD/MAD ABCB Program staff. Instructions are provided for the agency/provider to go online and apply with Xerox at the following link:

https://nmmedicaid.acs-inc.com/static/ProviderInformation.htm#ProviderEnrollment

To enroll as a provider for the ABCB Program, click on the following links for the ABCB Provider Enrollment Required Forms and Documents.