

Page Number	Current Language in Draft PM	Proposed Change	BCBSNM Comments
5	<p>Core Service Definitions</p> <p>CLNM providers must demonstrate the ability to deliver all core services and meet all data and quality reporting requirements described in this Manual. Providers may elect to meet the service needs of members by providing integrated physical and behavioral health services through an on-site, co-location model, or through memoranda of agreements (MOA), MOA are required with at least one primary care practice that serves members less than 21 years of age and at least one primary care practice that serves members 21 years of age and older.</p>	N/A	Please define “co-location”
17	<p>Participation Requirements for Providers Enrollment as a Medicaid Provider and Contracting with MCO</p> <p>Services offered to CLNM members are furnished by a variety of providers and provider groups. A CLNM provider must first be enrolled as a New Mexico Medicaid provider and meet all applicable standards and must either update existing contracts with all Medicaid MCO or develop a new contract if none exists.</p>	<p>Participation Requirements for Providers Enrollment as a Medicaid Provider and Contracting with MCO</p> <p>Services offered to CLNM members are furnished by a variety of providers and provider groups. A CLNM provider must first be (1) be enrolled as a New Mexico Medicaid provider and; (2) meet all applicable <u>CLNM</u> standards and must either update existing contracts with all Medicaid MCO or develop a new contract if none exists. <u>(3) secure a Medicaid contract with all MCO’s.</u></p>	Recommend editing this section for clarity.
20	<p>4. A bilingual Community Liaison who speaks a language used by a majority of non-fluent English-speaking CLNM members, and who is experienced with resources in a member’s local community. The community liaison works with an eligible recipient’s care coordinator in appropriately connecting and engaging the member with needed community</p>	<p>4. A <u>proficient</u> bilingual Community Liaison who speaks a language used by a majority of non-fluent English-speaking CLNM members, and who is experienced with resources in a member’s local community. The community liaison works with an eligible recipient’s care coordinator in appropriately connecting and engaging the member with needed</p>	Recommend addition of “proficient” to ensure language skills are appropriate and sufficient.

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	services, resources, and providers, including IHS and Tribal programs.	community services, resources, and providers, including IHS and Tribal programs.	
35	Additionally, MCO are responsible for: <ul style="list-style-type: none"> • Assisting CLNM providers in developing MOU with providers and identifying a referral network for CLNM Members; Collecting and reporting on CLNM Member outcome measures identified by the CLNM Steering Committee, and 	N/A	Recommend standardizing the MOU requirements with all MCOs.
35	MCO are also responsible for developing a contract amendment template to be used to amend MCO contracts with CLNM providers. The contract amendment template should include the following information: that CLNM members are excluded from the MCO care coordination ratio requirements; varying timelines are allowed for completing a CNA and Service plan for CLNM members, and HRA requirements for the MCO are waived if the HRA has not been completed.	N/A	The initial amendment was developed in collaboration with the state and all MCOs. Please confirm that this is no longer the state’s expectation.
N/A	N/A – General Feedback	N/A	It appears MOU and MOA are often used interchangeably throughout the document. Please clarify which one the state prefers to use.