****Human Services Department

Medical Assistance Division

**Community Benefit**

Fact Sheet

**1. What Is the Community Benefit?**

* The Community Benefit (CB) is Centennial Care’s name for the home and community based services (HCBS) benefit package.
  + These services are the same as those that CoLTS ‘c’ waiver recipients received
  + The Personal Care Services benefit is also part of CB (this was called Personal Care Option through CoLTS)
* Community Benefits are services that allow eligible members to receive care in their home or community as an alternative to being placed in a long-term care facility.
* Community Benefits are intended to supplement natural supports and support community living.

**2. Goals of Community Benefits**

* Allow New Mexicans who require long-term care to remain in their homes and in their communities.
* Reduce the number of unnecessary nursing home admissions

**3. Community Benefit Eligibility:**

* All members must have a full Medicaid category or have Waiver category of eligibility.
* All members must meet the nursing facility level-of-care (NFLOC) criteria.
* Be a New Mexico resident

**4. Community Benefit Options Choices**

* Agency Based Community benefit (ABCB) – members work with their care coordinator to develop a care plan and select a community provider in the MCO network. The member’s MCO ensures payment to community benefit providers.
* Self-Directed Community Benefit (SDCB) – members work with a support broker, develop a care plan, select their own vendors and authorize timesheets and ensure payment to their vendors.
* All members who meet eligibility requirements must participate in the ABCB for at least 120 days before they can switch to SDCB. (\*\*\*\*Please refer to SDCB fact sheet for more details on this option).

**5. ABCB Enrollment:**

* If a member currently has full Medicaid and needs or wants long term care, the member must contact his/her MCO and request community benefits. A care coordinator will assess the member to determine if the member is eligible to receive these services.
* If an individual does NOT currently have full Medicaid, the individual will need to contact the Aging & Long Term Services Department, Resource Center at 1-800-432-2080 and place his/her name on the Central Registry to wait for a waiver allocation.

**6. ACBC Benefit Package:**

* Assisted living
* Adult day health
* Behavior support consultation
* Community transition services
* Emergency response
* Employment supports
* Environmental modifications
* Home health aide
* Personal Care
* Private duty nursing for adults,
* Respite
* Skilled maintenance therapy for adults

**7. ABCB Provider Network**

* Members must check with their Centennial Care MCO for an in-network community benefit provider list.