

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.
 - o These services are the same as those that CoLTS 'c' waiver recipients received
 - o 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 the Community Benefit

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

3. Community Benefit Eligibility:

- ▶ All members must have full Medicaid coverage or have a waiver category of eligibility.
- ▶ All members must meet the nursing facility level-of-care (NFLOC) criteria.
- ► Must be a New Mexico resident

4. Community Benefit Options:

- ▶ Agency Based Community Benefit (ABCB) members work with their care coordinators to develop a care plan and select a community provider in the MCO network. The member's MCO ensures payment to the 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 wants long term care services, the member must contact his/her MCO to request an assessment for community benefits. The assessment will determine whether the member is eligible to receive these services.
- ▶ If an individual does NOT currently have 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.

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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.

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