

# New Mexico Interagency Behavioral Health Purchasing Collaborative

Collaboration for Recovery, Resiliency and Empowerment



Aging and Long-Term Services Department

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## New Mexico's New Behavioral Health System of Care Receives High Marks for Access to Care

### Audit and Survey Examine the First Year of the New System for Publicly Funded Mental Health and Substance Abuse Services

*Santa Fe, August 25, 2006* – The first phase of New Mexico's Behavioral Health care system transformation has been evaluated through audits and surveys to determine how New Mexico is doing as the first state in the nation to move to a single statewide entity to manage all publicly funded mental health and substance abuse services. "It is important that the Behavioral Health Collaborative (Collaborative) is evaluating our own efforts and the efforts of ValueOptions to make sure we know what we and they are doing well and where we need improvements," said Pamela Hyde, Human Services Department Secretary and Collaborative co-chair.

Two reports are now complete, rating the Collaborative's contract with ValueOptions New Mexico on compliance and provider satisfaction. The third and fourth reports on consumer satisfaction and claims are due out later this year.

The reports find that ValueOptions is doing a great job in some areas, such as access to care and client transition of care, where they received 100% compliance, while in other areas such as services for individuals with special health care needs and preventative health services need improvements. As a requirement of ValueOptions' participation in the Medicaid SALUD! Program, ValueOptions must undergo a comprehensive compliance audit. The New Mexico Medical Review Association (NMMRA) serves as the External Quality Review Organization (EQRO) for the Collaborative. The EQRO Compliance Audit found ValueOptions to be "minimally compliant" for both services and information technology systems. The minimally compliant grade means that ValueOptions will be placed into corrective action.

"We are making a big, historic change by moving to a single statewide entity to manage publicly funded mental health and substance abuse services," said Secretary Hyde. "With a transition this monumental, we expected to see some areas that lagged behind others, and these findings are in line with those expectations."

"Even before the compliance audit was complete ValueOptions New Mexico began making changes and improvements, especially in the area of services for individuals with special health care needs," said Pamela Galbraith, ValueOptions New Mexico CEO.

The Collaborative Contract Oversight Committee also conducted a review of ValueOptions last year, and after a re-review saw significant improvements. "We are looking forward to year two to be even better, and with the strong leadership of both Pam Galbraith and Pam Hyde in New Mexico we know this will get accomplished," Barbara Hill, ValueOptions CEO.

The second report on provider satisfaction, also conducted by the NMMRA, found that for the most part, many behavioral health providers are satisfied with ValueOptions' management of behavioral health services, but overall the findings are divided. While 44 percent are satisfied, 28 percent are not. Some providers, 27 percent, feel that combining services under ValueOptions has had a positive impact, while 26 percent feel there has been a negative impact. Finally, 16 percent of providers say they see more behavioral health consumers since contracting with ValueOptions than they did a year ago with SALUD! Managed Care, while 23 percent say they see fewer consumers and 53 percent say they see approximately the same number of consumers.

(more)

New Mexico's new behavioral health care system began July 1, 2005 when ValueOptions began serving as the statewide entity to manage all public mental health and substance abuse services funded by multiple state agencies.

"The Collaborative recognizes what a complex transition this has been for both ValueOptions and providers, and the results of the provider survey show us ValueOptions has made a good start in this first year," said Michelle Lujan Grisham, Department of Health Secretary and Collaborative co-chair. "We know things will only get better, and we will use the evaluation process to continually improve services across the state."

The evaluation process has also brought attention to the possibility that some of the states own rules and regulations may need revision due to the way behavioral health services are now being delivered. "We, too, faced a very short transition period and may have some regulations that cannot be applied to ValueOptions in exactly the same manner, as they have applied to the Medicaid Managed Care Organizations. We will be working with ValueOptions to help identify any revisions that may need to be made," said Hyde.

As of July 1, 2006 69,380 individuals have been served through ValueOptions. This represents only a portion of the first year's efforts since claims and billing are still coming in.

To read the complete Compliance and Provider Satisfaction reports, please visit <http://www.state.nm.us/hsd/bhdwg/history.html> .

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