

Message from the Human Services Department's Medicaid Director

RE: Medicaid Transition to Turquoise Care on July 1, 2024

Date: April 17, 2024

Number: 2024-001

Dear Medicaid Members, Families, Providers, MCOs and Stakeholders:

As we approach July 1st, I wanted to take this opportunity to thank you for your partnership over the last several months in preparing for the Turquoise Care transition. As you know, this transition marks a change to the Medicaid delivery system, with one MCO exiting the program and two new MCOs joining to ensure the delivery of health services to New Mexicans enrolled in Medicaid. Over the course of the readiness period, we have appreciated your dedication and support to ensuring members have only a positive impact from the next iteration of managed care in New Mexico.

As is often the case with a transformation of this magnitude, the process has exposed us to new opportunities, while also serving as a vehicle for embracing a learning and growth mindset and remaining member-centric in all that we do. And though this transition has not been without challenges, undoubtedly our prior integration efforts have helped us to refine our approach and have laid the groundwork for the system change that is now only two months away.

Understanding the magnitude of this transition, New Mexico HSD (soon to be the New Mexico Health Care Authority) has established a series of critical protections aimed at allowing members continued access to services regardless of whether specific providers participate in the Turquoise Care plan's provider network. Those protections extend for the duration of treatment or three months, whichever occurs first, and include:

- Members receiving behavioral health and/or substance use disorder services from a specialist or hospital provider (treatment must be identified in the member's service plan)
- Members receiving an active course of treatment or ongoing care from a specialist or hospital provider for a serious and/or chronic physical, developmental, or behavioral health condition (treatment must be identified in the member's service plan)

Furthermore, Turquoise Care MCOs must:

- Provide, at a minimum, a 90- day transition period for members who have an established relationship with a Primary Care Physician
- Allow members that are children in state custody (CISC) to continue receiving services for the duration of their treatment or six months, whichever is first
- Ensure pregnant women in the third trimester or anticipated to deliver within 30 days of the transition are authorized to receive services from their OB provider and deliver at their chosen delivery site
- Honor previously approved authorizations for a minimum of 30 -days or until the service has been fulfilled, whichever is later

These protections are reliant upon the cooperation of all parties. In order for a member to access care from their established provider during the transition period, the member's provider must agree to serve the member and bill the member's health plan. Moreover, in order for the member to access ongoing services from the provider, beyond the transition period, the provider must ultimately agree to participate in the MCOs' provider network or sign a single case agreement with the member's health plan. In addition to extending member protections, over the last months, HSD MAD has carefully monitored the Turquoise Care plans' readiness activity, including, but not limited to the plans' work in building networks which include those providers that have historically served New Mexico's Medicaid population, their efforts to ensure the recruitment of high caliber staff with expertise in the full continuum of services and supports offered by integrated care products as well as their adherence to the contractual mandate requiring the availability of nurse triage services 24 hours a day, 7 days a week.

The success of this transition both on July 1st and beyond will ultimately rely on our shared commitment to ensuring that those we serve remain at the center of all decision-making. While we have taken extraordinary steps to mitigate issues over the course of the transition, challenges will invariably surface. And it is in those moments that we must commit to taking every step necessary to ensure members are able to seamlessly access care – understanding that, in certain instances, that may mean working through the details of a situation after-the-fact. Undoubtedly, our willingness to put members first will play an instrumental role, not only in the success of this transition, but also in the success of the delivery system reform effort more generally.

Should you need assistance over the course of the transition, I have included the contact information for New Mexico's HSD MAD as well as each of the Turquoise Care plans:

Human Services Department:	1-800-283-4465
BlueCross BlueShield:	1-866-689-1523
Molina Healthcare:	1-844-862-4543
Presbyterian Health Plan:	1-505-923-5256
UnitedHealthcare:	1-844-690-0775

Sincerely,

A handwritten signature in blue ink, appearing to read 'Dana Flannery', with a stylized flourish at the end.

Dana Flannery
Medicaid Director