



New Mexico Human Services Department
Medical Assistance Division
Long-Term Services and Supports Bureau
October 2019

Centennial Care

- Centennial Care began 1/1/14
- 1115 Waiver approved by Centers for Medicaid and Medicare (CMS)
- Renewed 1115 Waiver 1/1/19
- Integrated managed care program that offers all health care services to eligible recipients, delivered by three managed care organizations (MCOs)
 - Blue Cross Blue Shield, Presbyterian, Western Sky
 - Physical health, behavioral health, long-term services and supports (LTSS)

Centennial Care Community Benefits

- The Community Benefit (CB) is the name for the home and community based long-term care program in Centennial Care
- Provides in-home/community services so that members remain in the community and out of nursing facilities
- Agency-based (ABCB) or self-directed (SDCB) model

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Community Benefit (CB) Eligibility

- To be eligible for the community benefit, individuals must meet a nursing facility level of care (NF LOC) and have an assessed need for services
 - NF LOC=individual must require assistance with two or more activities of daily living (ADLs)
- Individual must also qualify financially with the Income Support Division (ISD)

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Community Benefit (CB) Eligibility

Two ways to enter the CB:

1. If already eligible/enrolled in Medicaid, member can let MCO/care coordinator know that he/she needs CB services.

- MCO will assess member for NF LOC and CB services (comprehensive needs assessment)
- If member meets NF LOC, MCO will develop comprehensive care plan based on the member's assessed needs

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Community Benefit (CB) Eligibility

2. If individual has applied for Medicaid and is not eligible he/she should contact the Aging and Disability Resource Center (ADRC) to be placed on the Central Registry.

- ADRC will perform an assessment of needs by telephone
- ADRC will assign an allocation category
- Regular, expedite, community reintegration, exception
- HSD Allocations Unit sends packet including Medicaid application to individual for completion, and assists with the process

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Community Benefit (CB) Eligibility

- If an individual has already been placed on the central registry, and his/her health condition changes, he/she should contact the ADRC for a new assessment
- If member is in Medicaid (receiving the CB) and loses eligibility due to age or excess income, he/she should contact the ADRC to request an exception allocation to ensure continuity of care
- ADRC: 1-800-432-2080 www.nmaging@state.nm.us

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Community Benefit Services	Individuals under 21	Agency Based	Self-Directed
Adult Day Health		X	
Assisted Living		X	
Behavior Support Consultation	X	X	X
Community Transition Services *		X	
Customized Community Supports			X
Emergency Response		X	X
Environmental Modifications *	X	X	X
Home Health Aide		X	X
Personal Care		X	
Self-Directed Personal Care			X
Nutritional Counseling		X	X
Private Duty Nursing		X	X
Related Goods *	X		X
Respite	X	X	X
Skilled Maintenance Therapies		X	X
Specialized Therapies *	X		X
Start-Up Goods *	X		X
Transportation (non-medical) *			X
* Limits and restrictions may apply			8

Agency Based Community Benefit

ABCB members under the age of 21:

- Are able to receive PCS and other services through EPSDT
- Will most likely only be eligible for Respite (300 hours per year limit) and possibly Behavior Support Consultation
- Based on need, may be eligible for other services offered under the SDCB model such as related goods and specialized therapies
 - 120 day requirement
 - Minors cannot be their own Employer of Record

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Self-Directed Community Benefit

- CB members can switch to the SDCB model anytime after receiving services for at least 120 days in ABCB
 - Must work with MCO/care coordinator
 - Support Broker
- Employer of Record requirements
 - Added responsibilities of being the employer of providers
 - hire, fire, train, ensure background checks are completed, submit timesheets and invoices to Conduent, arrange for back-up caregivers, coordinate with NM Department of Labor

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Community Benefit Rule and Policy

Rule:

- <http://164.64.110.134/parts/title08/08.308.0012.html>

Policy:

- <http://www.hsd.state.nm.us/providers/managed-care-policy-manual.aspx>

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Contact Information

- Tallie Tolen, Bureau Chief
(505) 476-7013 or Tallie.tolen@state.nm.us
- Jeannette Gurule, Community Benefit Manager
(505) 827-7765 or Jeannette.C.Gurule@state.nm.us
- ADRC: 1-800-432-2080 www.nmaging@state.nm.us

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