



ACT New Mexico

Access Community Together

Insurance Basics

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Insurance

Sometimes insurance is a puzzle.



Insurance Basics

Types of Healthcare Insurance we work with:

- Commercial
- Medicare
- Medicaid



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Commercial insurance

- Employer provided
- Private
- Group purchase, such as AARP, your bank or school
- Different types such HMO, PPO, etc.



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Medicare

- Federally funded
- Medicare and Medicare Advantage
- Medicare Supplements are available, but rarely purchased by those using Medicaid



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Medicare Parts

- A: Hospital and facility
- B: Outpatient, such as office visits
- D: Drugs

Medicare A, B and D are required under federal guidelines for Medicaid



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Medicaid

- Differs from state to state
- Federal and state funded
- Different programs and different categories of eligibility

Medicaid is always the payor of last resort



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Centennial Care is New Mexico's Managed Medicaid Program.

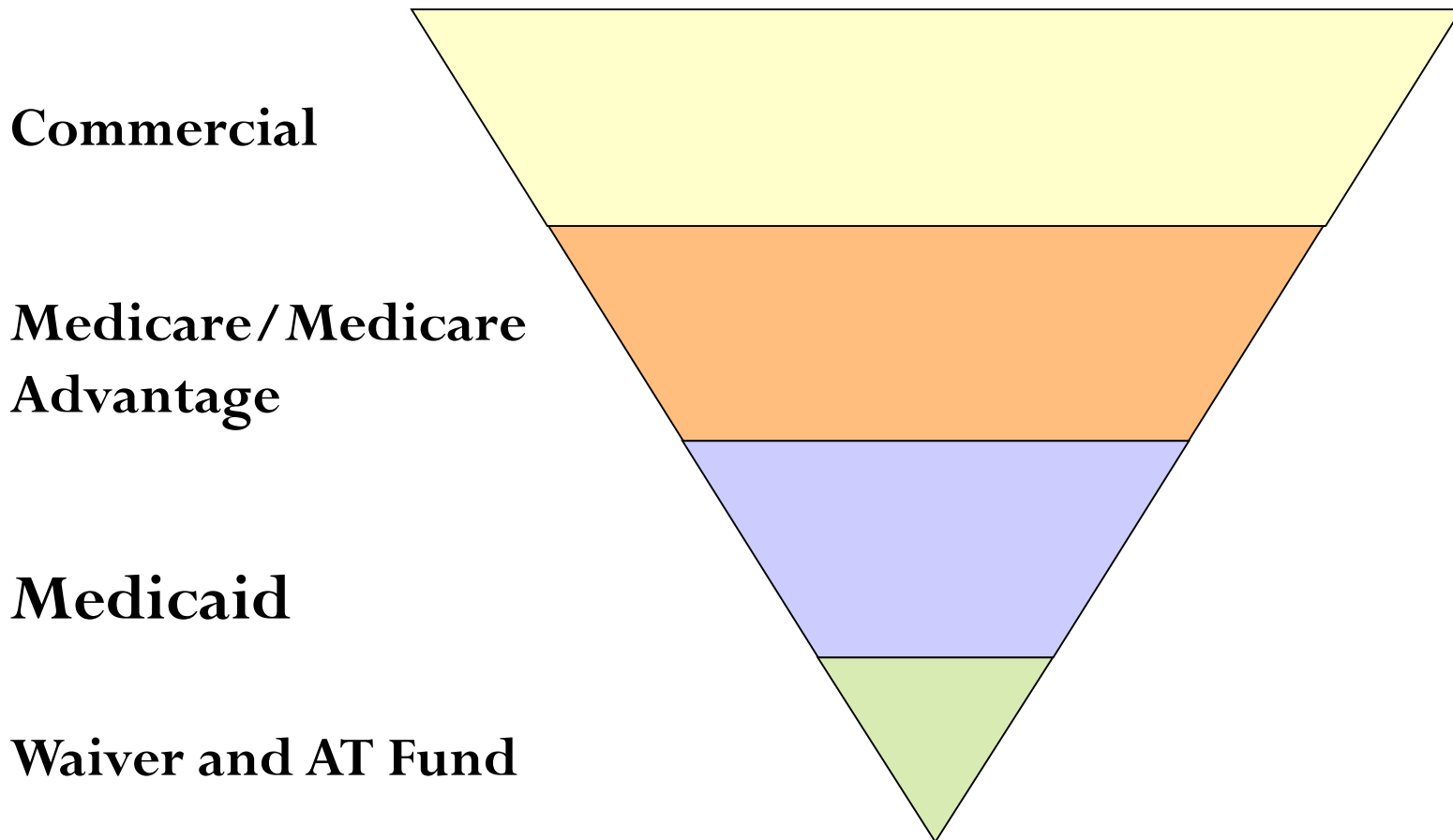


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Hierarchy of Insurance Coverage



Insurance Basics

Have you looked at your Member Handbook?

Every plan has:

- **Covered services**
- **Non-covered services**
- **Limitations**



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Authorizations

When an authorization is needed:

➤ Always:

- Use the primary health plan first
- Use the primary health plan MCO network
- Doctor's order for evaluation may be needed for Home Care, Wound Care, DME and Therapies. Recommendations are then sent back to the doctor.
- Dr. Order or Prescription for needed items and services is necessary
- Prescription and authorization request is sent to the health plan by the provider or the doctor.



Approvals and Denials

- **Approvals may be received by phone and by fax. Electronic notification may be provided on a provider web portal**
- **If additional information has been requested during the decision process, a delay in providing the information may result in a denial, because the decision must be made within a specific time frame and with the information on hand.**
- **Denials must be provided in writing, though a phone or faxed decision may also be given. The written denial will be sent to the member and to the requestor. Information will be present for appeal rights.**

Centennial Care

- **Centennial Care is the New Mexico's Managed Medicaid Managed Care Companies**
 - **Blue Cross Blue Shield**
 - **Molina Healthcare**
 - **Presbyterian Health Plan**
 - **United Healthcare**
- **Medical Care and Behavioral Health Care are with the same MCO**
- **A Care Coordinator may be assigned to your client. This can be helpful in complicated situations. You may call Customer Service to request assistance.**

Centennial Care cont.

- **If an individual has Medicare and Centennial Care which do you use?**
 - ❖ **Medicare then Centennial Care, because Medicaid pays last.**

Durable Medical Equipment

- Often requires the use of a contracted provider
- Usually requires an authorization
- Benefit limitations apply
- Medical requirements for all equipment and attachments/accessories can be expected



Documentation for Authorizations

- Include the diagnosis and conditions that relate to the medical necessity of the item or service
- List parts if necessary
- If an accessory or part is needed for safety, clearly document the client need for the item
- Remember the client is the insured person, not the caregiver
- Documentation is best when presented in a clear concise manner. Your message can be lost when pages of documentation are submitted.

Care Coordination

- Know what insurance plans your client has
- Encourage the use of the Centennial Care Care Coordinator
- Centennial Care requires the use of a primary care practitioner, medical home and the use of HRA as well as additional screening for at risk members
- Centennial Care Customer Service is available for benefit information, provider location and can be called for a Care Coordinator



Care Coordination

- Case Managers at the health plans now service the individuals with the highest level of need such as transplants or coordination of services out of state.
- From the DDSD- Archive site: click on Clinical Services ; click Resources tab and then select the Health Care Coordination Tab. Select the **Health Care Coordination Toolkit** from the list of available resources.

<http://archive.nmhealth.org/ddsd/resourcesupportbureaupublications/HandbooksGuides/HCCToolKit.htm#Sec2>



Insurance Basics Applied

- What scenarios would you like to walk through ?



Resources

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

Contacts for BlueCross BlueShield:

- Provider Services Unit:
- (888) 349-3706

Contacts for Molina Healthcare:

- Provider Services
- (505) 341-7493

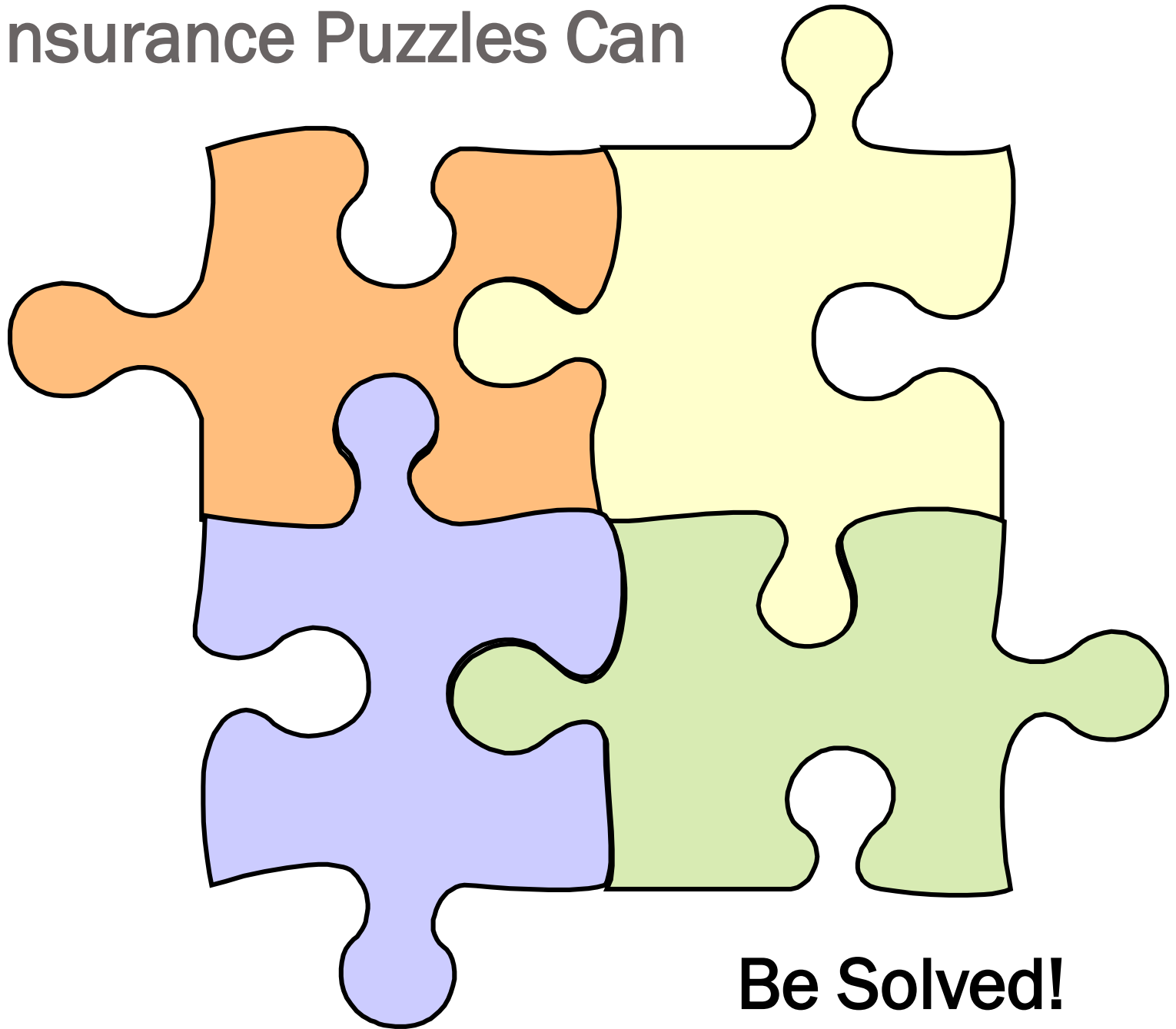
Contacts for Presbyterian:

- myPRES eHelp Desk
- Weekdays, 8:00 a.m. - 5:00 p.m.
- (505) 923-5590

Contacts for UnitedHealthcare:

- Provider Call Center
- (888) 702-2202

Insurance Puzzles Can



Be Solved!