

Provider
Toolkit
2021



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Introduction

Welcome. Thank you for your interest in joining a field of dedicated professionals delivering behavioral health services in New Mexico.

The New Mexico Human Services Department (HSD)/Behavioral Health Services Division (BHSD) has created this Provider Toolkit for those interested in becoming an agency providing behavioral health services in New Mexico. This toolkit contains information about the process, documents, forms, links, and resources to assist in establishing a publicly funded behavioral health agency.

There are many things to consider when opening a new behavioral health agency, adding services, or enrolling as a practitioner. What services will you or your agency provide? Which population(s) will you serve? What type of practitioner are you? What types of practitioners will be working at your agency? There are regulations, licensing, contracting with MCOs, working with state Departments and Divisions, sustainability, policies and procedures, and quality assurance to name a few. BHSD is here to provide technical assistance regardless of the starting point.

In New Mexico, behavioral health programs and facilities operate under the oversight of the Behavioral Health Services Division (BHSD) of the New Mexico Human Services Department (HSD), the Children, Youth and Families Department (CYFD), the Department of Health (DOH), or through some collaboration of these agencies. Our behavioral health services system has three major sources of public funding: Medicaid (includes managed care Medicaid and fee-for-service Medicaid), federal grants, and/or the state general fund. Understanding which funding sources and oversight agencies are relevant to the services you choose to provide is a key element of determining next steps. The Behavioral Health Collaborative, which administers state general funds, is the payor of last resort for behavioral health services for adults and children covered by Medicaid. When a Medicaid covered service is provided to a Medicaid eligible client, those services must be billed to Medicaid. Effective use of federal Medicaid funds allows the State greater opportunity to devote its own funds to New Mexico priorities. This toolkit will provide information on each of these funding sources and agencies, as well as how to apply for funding.

While every attempt has been made to identify the most crucial components of starting a new agency or adding a service, this toolkit should be considered a living-document. Our world is one of change; change in systems, change in State regulations and service requirements, change in federal requirements, just to name a few. BHSD will be responsive, effective and efficient in all efforts to meet the needs of its citizens. BHSD will make every effort to update and disseminate new information to New Mexico agencies and providers.

There are two paths in this toolkit, one for providers currently enrolled or recently termed in Medicaid who want to change or add services, and the second for providers new to the New Mexico behavioral health services system. In each section, both options are addressed. BHSD is here to help navigate a complicated system with the goal of making it easier to become a behavioral health agency or provider.

Welcome, and thank you for your commitment to provide much needed behavioral health services to the residents of New Mexico!

Making Decisions

Before starting down the path to becoming a Medicaid provider, there are decisions to be made about what your agency or you as a provider want to do and what you need to do to get there. There are many choices, such as deciding whether to be a Behavioral Health Agency. Do you want to serve adults or children? What service(s) are you interested in providing? Dozens of specific services are covered in the Medicaid benefit package, including everything from evaluation and therapy, to Intensive Outpatient (IOP) and Comprehensive Community Support Services (CCSS), to name a few.

Deciding which path to follow focuses the journey as each decision has unique requirements. Before starting, will you be:

- Serving children or adults?
- Enrolling as an agency/business in Medicaid?
- Enrolling as a practitioner?
- Providing a specific service?
- Adding a new credential?
- Adding a new service to expand your service array?
- Adding a new practitioner to your agency/business?

These decisions may be different if you have experience in the NM Medicaid system or if you are new to the NM behavioral health system.

An Experienced New Mexico Agency or Provider

Agencies and providers with experience – either currently or previously enrolled in Medicaid - are most likely familiar with the Council for Affordable Quality Healthcare (CAQH) and the National Provider Identifier (NPI), but may not be familiar with the current MCOs, new services and provider types, and needed approvals.

New to the New Mexico Behavioral Health system

Agencies and providers starting in New Mexico need first step information. The Getting Started Step-by-Step will cover all topics to understand where to begin.

Many of the steps are the same – experienced or not. In cases where there is a difference, the Toolkit will indicate a difference in the path.

Always remember, the BHSD Provider Support team is available, regardless of your prior experience in the BHSD system, to provide technical assistance. Our team is dedicated to providing you with hands-on guidance and assistance to make the process as easy as possible for you and your agency.

Funding Sources

First, let's talk about funding. There are three public funding sources available: Medicaid, federal grants, and the state's general fund.

Medicaid is no-cost health insurance for eligible individuals. It is paid for using a combination of state and federal dollars. New Mexico has over 40 different categories of eligibility, each with its own eligibility criteria and benefit package. Currently, over 40 percent of the state's population receives at least some Medicaid coverage.

Most New Mexicans receive Medicaid services through *Centennial Care*, the state's Medicaid Managed Care program. Centennial Care uses managed care organizations (MCOs), which deliver services to their members. The current MCOs are Blue Cross Blue Shield of New Mexico (BCBSNM), Presbyterian Health Plan, and Western Sky Community Care.

Fee-for-Service (FFS) Medicaid is administered by the Human Services Department's Medical Assistance Division (MAD). FFS providers are contracted directly with the state to provide services and are then reimbursed by Conduent, the NM Medical Fiscal Agent. Under New Mexico's 1115 Federal Waiver, most Native Americans are exempt from the requirement to participate in managed care. Those that are exempt can choose to enroll in managed care Medicaid or receive services through FFS Medicaid. Fee-for-service Medicaid also covers clients who are eligible for partial benefit packages, such as the family planning category, or for Medicaid Savings Programs (MSP). MSPs help pay Medicare premiums and other out of pocket costs such as deductibles, coinsurance, copayments and prescription drug coverage costs.

To receive reimbursement for services provided to any New Mexico Medicaid client, providers and practitioners must first enroll as a provider in the NM Medicaid program. To receive reimbursement for managed care Medicaid clients, providers must also become credentialed members of the MCO provider networks.

State General Fund Programs and Numerous Federal Grants are made available through BHSD. BHSD works with the department's administrative services organization (ASO), Falling Colors. These funding sources can only be used to pay for non-Medicaid covered services or services provided to people who are not eligible for Medicaid. Some of these programs include:

- Housing
- Community funded behavioral health programs for both mental health and substance use
- Native American programs
- Women's programs
- Residential treatment programs (for non-Medicaid clients only)
- Jail diversion
- Veterans Services
- Sexual Assault Services

This is not an exhaustive list. Opportunities for funding are announced on the New Mexico Network of Care website: <https://newmexico.networkofcare.org/mh/> However, even if some of your clients or services may be non-Medicaid, if you will be providing any Medicaid covered services to any Medicaid clients you will need to be enrolled with Medicaid before you will be able to receive state general fund or grant funding.

Getting Started

Conduent

This section introduces Conduent, the NM Medicaid fiscal agent. Conduent operates the Omnicaid system and the NM Medicaid Portal. These systems are utilized for provider enrollment and claims processing, and house Medicaid client eligibility and claim information. The steps to enroll differ between experienced providers and providers who are new to the New Mexico behavioral health system. Also, in this section are national organizations' enrollment requirements.

Experienced New Mexico Provider

Contact Conduent to add or update information

For the experienced New Mexico provider, review the Conduent *Provider Type and Specialties* spreadsheet on the NM Medicaid Portal. This document can be found in the *Provider Information* section of the Portal, and includes information on provider type, specialty, needed licenses and approval letters.

Experienced providers need to ensure that their registration with the Council for Affordable Quality Healthcare (CAQH) or National Provider Identifier (NPI) includes their most current information.

When a provider is re-enrolling in Medicaid, review the Excel spreadsheet and contact Conduent to provide updates.

Providers New to New Mexico Medicaid Behavioral Health System

Contact Conduent to Get a Medicaid ID

Step one when new to the system is to acquire a State of New Mexico provider Medicaid ID. Enrollment can be completed on the NM Medicaid Portal. The Portal links to the application from this page: <https://nmmedicaid.portal.conduent.com/static/index.htm>

After all the required information has been submitted, enrollment should take no more than 7-10 business days to complete. Conduent recommends contacting them with any questions you may have before submitting any applications or forms.

Conduent provider enrollment can be reached at (800) 283-4465. The current Conduent BH Provider Enrollment Manager is William Landgraf at william.landgraf@conduent.com. The Provider Enrollment Manager can assist with application and other provider enrollment issues. Also available to support the process is the BHSD Provider Support Team, they can provide technical assistance and can be reached at 505-476-6238 or 505-476-9256.

Council for Affordable Quality Healthcare, Inc. (CAQH)

The Council for Affordable Quality Healthcare, Inc. (CAQH) credentialing is required by the state and all MCOs. This is a data-collection system that is used in all 50 states. It is free-of-charge and reduces paperwork and the administrative burden of collecting information. The CAQH process can take up to 45 days to complete. Experienced providers are usually already in the CAQH system and can easily update their records.

If you are not familiar with the CAQH system, completing the online form requires five steps:

1. Register with CAQH ProView.
2. Complete the online application and review the data.
3. Authorize access to the information.
4. Verify the data and/or attest to it.
5. Upload and submit supporting documents.

You can learn more at <https://www.caqh.org/solutions/caqh-proview-faq>

National Provider Identifier (NPI)

Having a National Provider Identifier (NPI) is required for all Medicaid healthcare providers in New Mexico. The NPI is easy to obtain and update. To create or update an account, go to <https://nppes.cms.hhs.gov/#/>

Getting Approved for a Service or Adding a Service

Since 2014, the New Mexico behavioral health provider network has grown. Provider types have expanded, and new provider types and specialties have been added to support providers in delivering the most needed services.

In this section, information on these topics is presented. If there is a need for additional information from the BHSD Provider Outreach and Support Team, please reach out, we are happy to help.

Types of Agencies

Agency approval for BH providers can come from Department of Health (DOH), the Children, Youth and Families Department (CYFD), and in some instances the Behavioral Health Services Division (BHSD). Refer to the Behavioral Health Policy and Billing Manual for details on agency approvals. Here is the link to the current manual: <https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-policy-and-billing-manual/>

The 2020 New Mexico Administrative Code (NMAC) 8.321.2 Specialized Behavioral Health Services and the Behavioral Health Policy and Billing Manual list the entity types eligible to provide behavioral health

professional services; each provider type must meet certain conditions as explained in the manual. The list of qualified entities includes:

- Community Mental Health Center (CMHC)
- Federally Qualified Health Center (FQHC)
- Indian Health Services (IHS) hospital, clinic, or FQHC
- PL-93-638 tribal operated hospital, clinic, or FQHC
- Children Youth and Families Department (CYFD) facility
- Hospital and its outpatient facility
- Core Service Agency (CSA)
- CareLink NM health home (CLNM HH)
- Crisis Triage Center (licensed by DOH)
- Behavioral Health Agency (BHA) (some require Supervisory Certification)
- Opioid Treatment Program (OTP) (methadone clinic)
- Political Subdivision of the state of New Mexico
- Crisis Services Community Provider as a BHA

Many of the behavioral health specialty services are delivered by Behavioral Health Agencies (BHAs). Approval for services delivered by BHAs are approved by BHSD, MAD, DOH and CYFD. An additional certification of Supervisory Certification may also be required.

The Opioid Treatment Programs, or methadone clinics, are also approved by the State Opiate Treatment Authority (SOTA), who is housed within BHSD.

Depending on the provider agency type, approval generally requires approval to deliver the specified service(s), and current business licenses, professional licenses, proof of insurance, and other documents. For specific details, go the Provider section of the NM Medicaid portal website:

https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm#sandbox_title

Scroll down to the *Provider Enrollment* section and click on the Provider Type & Specialty Listing. This link opens an Excel file that lists requirements for all agency and provider types, including provider type and specialty numbers.

Provider Type and Specialty

Every Medicaid approved and enrolled agency or provider will have a provider type number and in most cases a specialty number. In 2019, new provider types were approved (e.g., Peer Support Workers) and specialty provider types were also approved (e.g., Board Certified Behavioral Analyst). When deciding about the work that an agency will do, select the appropriate provider types and specialties that will reflect the services to be rendered.

All provider types, whether experienced or new to New Mexico, are encouraged to review the provider types and specialties defined in the Behavioral Health Policy and Billing Manual, available on the HSD

website at: <https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-policy-and-billing-manual/>

If there are questions, contact the BHSD Provider Support team (see above for contact numbers).

Behavioral Health Agencies and Supervisory Certification

Some of the behavioral health specialized services that are delivered by Behavioral Health Agencies (BHA - 432) require Supervisory Certification approval.

Supervisory Certification is a major component of a wider workforce development strategy for New Mexico's behavioral health service delivery system. The purpose of this certification process is for Behavioral Health Agencies (BHA 432), Opioid Treatment Programs (OTP 343), Adult Accredited Residential Treatment Centers (AARTC 216/261), and non-FQHC School Based Health Centers (321) to demonstrate that there is ongoing education, learning and oversight of clinical supervisors and non-independently licensed (NIL) practitioners, Certified Peer Support Workers, and student interns. Additionally, this certification is in place to support competent consultation and supervision. It is required in order to be eligible for reimbursement for services from Medicaid delivered by a non-independently licensed provider, CPSW, or student intern.

For more information related to supervisory certification, please contact BHSD Deputy Director Tiffany Wynn at tiffany.wynn@state.nm.us or (505) 469-2495. Supervisory Certification approval also applies to the services listed below, and approval for these is done by BHSD, CYFD, and MAD.

BHSD Approved Services and Specialty Numbers

- Assertive Community Treatment (ACT) – 130
- Comprehensive Community Support Services (CCSS) - 107
- Intensive Out Patient (IOP) – 108

Contact BHSD, Tiffany Wynn at tiffany.wynn@state.nm.us or (505) 490-7564.

MAD Approved Service and Specialty Number

- Applied Behavioral Analysis (ABA) - 132

Contact MAD, Annabelle Martinez at annabellem.martinez@state.nm.us for assistance.

CYFD Approved Services and Specialty Numbers

- Behavioral Management Services (BMS) – 081
- Day Treatment Services (DTS) – 082
- Multi-Systemic Therapy (MST) - 131

Contact the CYFD Licensing and Certification Authority Bureau, Lillian Rainer, at lillian.rainer@state.nm.us or (505) 827-8429.

DOH Approved Services and Specialty Numbers

- Psychosocial Rehabilitation (PSR) - 080

Contact the DOH Division of Health Improvement, Chris Burmeister, at Christopher.Burmeister@state.nm.us or (505) 476-9074.

When approved for any of these services, a BHA automatically is approved for Evaluation and Therapy (133).

Once approved, the agency or provider is sent an approval letter. The agency or provider submits the service approval letter to Conduent, and when appropriate also submits an approved staff roster, and then the service is added to their profile. The letter also need to be submitted to the Managed Care Organizations (MCOs) (discussed later).

BHSD existing/current agencies have an approved Supervisory Certification Attestation Application on file. **Please note:** as of January 1, 2020, previously “grandfathered” agencies must now apply prior to being approved or submitting a Supervisor Certification Roster for review. MCOs will request a copy of the approval letter to ensure compliance for billing reimbursement.

Attaining Supervisory Certification from BHSD

Behavioral Health Agencies (BHA 432), Opioid Treatment Programs (OTP 343), Adult Accredited Residential Treatment Centers (AARTC 216/261), and non-FQHC School Based Health Centers (321) are required to apply and qualify for Supervisory Certification to deliver some behavioral health specialty services. Supervisory Certification also allows billing for services rendered by master’s level non-independently licensed practitioners – such as LMHC, LMSW, LPC, LAMFT, and LSAA – who are working under supervision of an independently licensed practitioner. Also allowed under Supervisory Certification is approval for unlicensed behavioral health staff such as master’s level behavioral health interns, psychology post doctorate students, and Certified Peer Support Workers.

For non-independently licensed practitioners that are not yet fully licensed, a U7 modifier can be used for a maximum of 6 months. This time is intended for the provider to test and get fully licensed.

All providers, including non-independently licensed, require an NPI number and to be an approved Medicaid provider with a Medicaid ID. Only short-term practitioners – psychology interns, master’s level interns, and post-doctoral interns – are not required to obtain a Medicaid ID.

The Behavioral Health Policy and Billing Manual includes additional information on the Supervisory Certification approval process and billing procedures. If there are any questions, contact the BHSD Clinical Services Manager or the BHSD Provider Support team.

Behavioral Health Services

There are 20 behavioral health services that are currently billable to Medicaid:

- Accredited Residential Treatment Centers for Substance Use Disorders
- Applied Behavior Analysis (ABA)

Assertive Community Treatment Services (ACT)
Cognitive Enhancement Therapy (CET)
Comprehensive Community Support Services (CCSS)
Crisis Intervention Services
Crisis Triage Centers
Family Support Services (MCO members only)
Family Peer Support Services (FPSS)
SUD Ambulatory Withdrawal Management (ASAM Level 2-WM)
Intensive Outpatient Program for Substance Use Disorders (ASAM 2.1)
Intensive Outpatient Program for Mental Health Conditions
Medication Assisted Treatment for Buprenorphine (MAT)
Opioid Treatment Program (OTP)
Partial Hospitalization Services in Acute Care or Psychiatric Hospital
Peer Support Services
Psychosocial Rehabilitation Services (PSR)
Recovery Services
Smoking Cessation Counseling
Supportive Housing

Seven are recently added services. Full details on the service and billing codes are available in the Behavioral Health Policy and Billing Manual.

Seven Recently Added Services

In 2019, BHSD added new services. The new services that have program managers are noted below. The program managers work in partnership with the agency during the application and approval process, Medicaid enrollment, and program oversight. These services are:

- Adult Accredited Residential Treatment Centers (AARTC) for adults with Substance Use Disorders (SUD)
 - Following ASAM levels of care, residential treatment is now a billable Medicaid service. Accreditation by an approved accreditation organization is required.
 - This service has a program manager.
- Interdisciplinary Teaming
 - This person-centered service allows multiple providers to work together to provide most informed, effective plans and delivery of services.
- Screening - Brief Intervention – Referral to Treatment (SBIRT)
 - This intervention service is designed for the client to prevent adverse behavioral health outcomes. Service can be delivered by nearly every provider type. Training is required. SBIRT affords the ability to treat clients in a more holistic manner aimed at increased patient awareness and minimizing behavioral health stigma.

- Supportive Housing
 - This is a flexible supportive service designed to assist a client before and after successful tenancy. There is pre-tenancy support and ongoing support. This is not a rental assistance service.
 - This service has a program manager.
- Cognitive Enhancement Therapy (CET)
 - This long-term service (18-months), helps people with schizophrenia and related cognitive disorders improve brain and cognitive development, social cognition, and increase vocational capabilities. Training by UNM is required. The service can be delivered by all Specialized Behavioral Health Service providers.
- Behavioral Health Respite
 - This service is covered by the MCOs. Core Service Agencies, Behavioral Health Agencies, and Treatment Foster Care can provide behavioral health respite services. Annual limit of 720 hours or 30 days.
- Crisis Triage Centers (CTC)
 - A residential crisis center to provide voluntary treatment. The service requires approval from the Department of Health.

Additional information is available in the Behavioral Health Policy and Billing Manual and NMAC 8.321.2.

State General Fund Programs and Federal Grants

BHSD oversees non-Medicaid programs that support unmet needs and fill service gaps. A program manager works directly with providers on program delivery, resolution of issues, and program oversight. Billing for these services is paid for through the administrative services organization (ASO), Falling Colors. Falling Colors operates and manages the BHSD Star system to facilitate provider enrollment and payment for services.

These programs are:

- Career Readiness
- Transitional Housing
- Jail Diversion
- Justice Involved services
- LGBTQ+ services
- Native American services
- Office of Peers, Recovery and Engagement (OPRE)
- Prevention programs
- Sexual Assault services
- Wellness Centers
- Workforce Development
- Women’s Programs – Sexual Assault
- Veterans services

The Request for Application (RFA) process is announced when funding becomes available. Billable services must be delivered by providers with the appropriate credentials and follow the service requirements as defined in the Behavioral Health Policy and Billing Manual and NMAC 8.321.2. These services are paid through the BHSD Star system. Contact the Behavioral Health Provider Outreach and Support Team for additional information and program manager information.

Fee Schedules

The Medicaid behavioral health fee schedule provides information on billing codes (i.e., revenue, CPT, and HCPCS), appropriate provider type, and reimbursement per unit or product. The rates on the fee schedule are the base rate. Rates with individual MCOs may be negotiated, but these rates should not be lower than what is on the fee schedule.

The behavioral health fee schedule is available at: <https://www.hsd.state.nm.us/providers/fee-for-service/> under *Behavioral Health Fee Schedule*.

Applied Behavior Analysis codes and costs are not included in the behavioral health fee schedule. The Applied Behavior Analysis (ABA) Fee Schedule is available at: <https://www.hsd.state.nm.us/providers/fee-for-service/> under *Applied Behavior Analysis (ABA) Fee Schedule*.

Adult Accredited Residential Treatment codes are included in the behavioral health fee schedule, but the reimbursement rates are not, because they are individually set with each agency. Please contact Melissa Lopez, BHSD's residential treatment coordinator, at Melissa.Lopez@state.nm.us for additional information on this service.

The fee schedules are updated often, and proposed fee schedules are open for public comment. Providers are advised to go to the Fee for Service page on the HSD website to find the most current fee schedule.

New Process for Service Delivery – Treat First

Treat First is a new practice intended to help behavioral health facilities improve their ability to serve clients immediately and effectively. <https://treatfirst.org/>

Treat First de-emphasizes completion of extensive, initial diagnostic assessment prior to treatment. Instead, Treat First engages clients quickly in services that address immediate needs. Treat First model allows four visits to resolve what brought the client in before a full diagnostic assessment needs to be completed.

Treat First allows for the development of a therapeutic relationship while gathering needed behavioral health historical, assessment and treatment planning information over the course of a small number of therapeutic encounters.

The Treat First Model is approved for use by Medicaid enrolled behavioral health providers, and can be used to treat both Medicaid and non-Medicaid clients. Completion of the self-guided learning modules is required prior to approval.

For more information about how to become certified as a Treat First provider, click the following link:

<https://treatfirst.org/talks/how-to-become-a-treat-first-agency/>

The Managed Care Organization (MCO) Enrollment Process

After becoming an approved Medicaid agency or provider, the last step prior to billing is the MCO contracting and enrollment process. Medicaid managed care services cannot be billed prior to completion of this step.

Enrolling with an MCO can take from two weeks up to three months. Enrolling with an MCO cannot begin until the Conduent and state agency approvals are complete, and credentialing is completed through CAQH. Billing cannot begin until enrollment with the MCO system is complete.

There are three MCOs. To ensure that you are able to serve all Medicaid managed care clients, it is recommended that you enroll with all three. Each has a similar system and requires the same documentation that Conduent and the state agencies require. The MCOs have administrative offices in Albuquerque, NM.

BlueCross BlueShield of New Mexico

Provider website <https://www.bcbsnm.com/provider/index.html>

505-837-8800 or 800-567-8540

Presbyterian

Provider website <https://www.phs.org/providers/Pages/default.aspx>

Letter of Interest (online application) <https://www.phs.org/providers/our-networks/health-plan/Pages/letter-of-interest.aspx>

Presbyterian behavioral health liaison at 800-424-6035

Western Sky Community Care

Provider website <https://www.westernskycommunitycare.com/providers/become-a-provider.html>

Email Contracting@WesternSkyCommunityCare.com

1-844-738-5019

Checklist

- ✓ Step 1 – National Enrollments and Licensing
 - Copy of license
 - National Provider Identification
 - Council for Affordable Quality Healthcare
- ✓ Step 2 - Contact Conduent
 - Add information
 - Update information
or
 - Acquire a NM Medicaid ID
 - Review Provider Types and Specialties document for needed information
- ✓ Step 3 – Getting Approved for Service or Adding A Service
 - Type of service
 - Agency type
 - Provider type for the service
 - Specialty for the service
 - Required approvals
- ✓ Step 4 - Approval order process
 - Practitioners obtain individual Medicaid numbers
 - Program or Specialty Service approval letter from BHSD, MAD, DOH, CYFD if applicable
 - Agency/Provider type approval from Conduent and agency Medicaid enrollment
 - Supervisory Certification rosters submitted to BHSD, MAD, and MCOs if applicable
 - Complete contracts with the MCOs
 - MCO approval to begin billing

Resources and Information

Behavioral Health Policy and Billing Manual

The Behavioral Health Policy and Billing Manual provides a reference for the policies and processes related to Behavioral Health for administration of Medicaid behavioral health services, as defined in New Mexico Administrative Code (NMAC), Section 8.321.2.

The Behavioral Health Policy and Billing Manual will be updated on a regular basis, and HSD reserves the right to change, modify or supersede any of these policies and procedures with or without notice at any time. As policies are revised throughout the year, they will be incorporated into the Behavioral Health Policy and Billing Manual. The manual may be viewed or downloaded from the HSD web site at <https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-policy-and->

[billing-manual](#) and on the Network of Care <http://newmexico.networkofcare.org/mh/>. A summary list of the policy revisions will also be posted each year.

Behavioral Health Collaborative NM Resource Map

<https://pulltogether.org/resources-by-county/statewide-resource-map>

This is a resource to find services throughout the state. This navigation guide is maps where resources are in NM. Multiple services can be selected at one time by clicking on a location, information about the provider appears.

Behavioral Health Fee Schedule

The Medicaid behavioral health fee schedule has information on providers who can bill specific procedure codes, payment information, referring and rendering provider requirements, and information on billing units. Here is a link to the behavioral health fee schedule:

<https://www.hsd.state.nm.us/providers/fee-for-service/>

Behavioral Health Provider Associations

New Mexico Behavioral Health Provider Association of New Mexico (NMBHPA)

<https://www.nmbhpa.org/>

The BHPA represents the voices of many NM providers. The association regularly attends meetings with the NM Human Services Department/Behavioral Health Services Division to discuss system relevant topics and updates. To inquire about membership please contact:

Behavioral Health Providers Association of NM

Attn: Maggie McCowen

RE: Membership

2400 Wellesley Drive, NE

Albuquerque, NM 87107

New Mexico Tribal Behavioral Health Provider's Association (NMTBHPA)

<http://www.nmtribalbehavioralhealth.org>

The New Mexico Tribal Behavioral Health Provider's Association represents the Tribal Behavioral Health Provider's voice. It's important to have a unified voice as tribal behavioral health providers. The association meets once a month on the 3rd Friday of every month. Our meetings include participation from the New Mexico Human Services Department office of the Secretary (Tribal Liaison), Behavioral Health Services Division (Director), and Medicaid Assistance Division (Tribal Liaison). Meetings include state updates, funding opportunities, Tribal updates, and an opportunity to share and discuss system level topics. To inquire about membership, please contact:

New Mexico Tribal Behavioral Health Provider's Association

Attn: Sindy Bolaños-Sacoman

Re: membership
admin@sbsconsulting.org
505-818-8021

Behavioral Health Services Division (BHSD)

<https://www.hsd.state.nm.us/lookingforinformation/behavioral-health-services-division/>

The Behavioral Health Services Division's (BHSD) primary role is to serve as the Mental Health and Substance Abuse State Authority for the State of New Mexico. The BHSD's role is to address need, services, planning, monitoring, and continuous quality systemically across the state. BHSD works with the Behavioral Health Collaborative in establishing policy and in its contractual relationship with the MCOs and the ASO to implement strategies to manage the behavioral health system. Specific contact information for key individuals and programs can be found throughout this document. General division contact information:

Behavioral Health Services Division

Physical address

37 Plaza La Prensa
Santa Fe, NM 87507

Mailing address

P.O. Box 2348
Santa Fe, New Mexico 87504

Phone: (505) 476-9266
Fax: (505) 476-9277 or (505) 476-9272

BHSD Star

BHSD Star (Falling Colors) is the administrative services organization for the NM Behavioral Health Collaborative. They process funding requests, invoices, and claims for Aging and Long-Term Services Department, Department of Health, Children Youth and Families Department, and BHSD.

<https://www.bhsdstar.org/>

Care Coordination

Care Coordination is a service under which treatment is organized across healthcare providers. Under a Care Coordinator, a patient's needs are coordinated with the assistance of a primary point of contact. Care Coordination is offered through the Managed Care Organizations, and this service can be accessed by contacting your Managed Care Organization and conducting a Health Risk Assessment to determine the level of care coordination required. For more information, contact the MCOs.

Critical Incident Reporting (CIR)

It is important to work with your contracted MCOs and/or Conduent as appropriate on reporting critical incidents. Each New Mexico State Department may have its own reporting protocols. Anyone

billing Medicaid, state, or other federal funds received through the state must report critical incidents. The Behavioral Health CIR Reporting Protocol and forms are located on the HSD website and can be found directly at the following link:

- <https://www.hsd.state.nm.us/providers/critical-incident-reporting/>

Human Services Department Data Book

<https://www.hsd.state.nm.us/2021-data-book/>

The HSD Data Book is a summary of social, economic, and health statistics of our state. The Data Book presents, in one reference document, a diversity of information and is designed to facilitate comparisons of national, state, and county-level data.

New Mexico Administrative Code (NMAC)

The State Rules Act mandates that the creation of the New Mexico Administrative Code (NMAC) to assist the public in finding current rules. There are several NMAC rules that are necessary to understand when becoming a NM Medicaid provider. Once you are an approved Medicaid provider for behavioral health, the rule that will be most significant for you is NMAC 8.321.2 Specialized Behavioral Health Provider Enrollment and Reimbursement. To read the rule, go to the HSD web page and scroll down to find 8.321.2: <https://www.hsd.state.nm.us/providers/rules-nm-administrative-code/>

New Mexico Behavioral Health Collaborative information:

The Collaborative was created by Governor Bill Richardson and the New Mexico State Legislature in 2004, and allows several state agencies and resources involved in behavioral health prevention, treatment and recovery to work as one in an effort to improve mental health and substance abuse services in New Mexico. This cabinet-level group represents 15 state agencies and the Governor's office and aims to be a single statewide behavioral health delivery system.

New Mexico Crisis and Access Line (NMCAL) / Peer Warm-line (1-855-662-7474)

<http://www.nmcrisisline.com>

NMCAL is a toll free behavioral health line that is staffed by mental health professionals 24 hours a day, 7 days a week. NMCAL coordinates with local provider agencies, respite, warm lines, emergency rooms, law enforcement agencies and correctional facilities to provide crisis support and help locating needed services.

New Mexico Prevention:

The Office of Substance Abuse Prevention (OSAP) is part of the Behavioral Health Services Division with the New Mexico Human Services Department. The OSAP is dedicated to improving and maximizing the impact of New Mexico's substance abuse prevention system. To this end, OSAP seeks to build the capacity of the state's local prevention providers to deliver effective prevention services aimed at reducing alcohol, tobacco and other drug abuse. OSAP has two excellent websites with many resources: <http://www.nmprevention.org/> and <https://doseofreality.com/>

State of New Mexico Behavioral Health Services Site – Network of Care (NOC):

This site is a behavioral health resource for individuals, families and agencies. It provides information about behavioral health services, laws, and related news, as well as communication tools and other features. It is important for all providers to ensure that their information is entered and updated as appropriate. <http://newmexico.networkofcare.org/mh/>

Technical Assistance

You may request Technical Assistance (TA) from either the MCO or the State Department from which you are seeking reimbursement to help inform your practice and to understand how the rules above apply and/or should be operationalized.

Email: HSD.CSMBHSD@state.nm.us for information on TA for behavioral health related service and program delivery or provider allowances.

National Resources

American Counseling Association

<https://www.counseling.org/>

American Psychiatric Association

<http://www.psychiatry.org/>

American Psychiatric Nurses Association

<http://www.apna.org>

American Psychological Association

<http://apa.org/>

ASAM – American Society of Addiction Medicine.

<https://www.asam.org/>

CARF – Commission on Accreditation of Rehabilitation Facilities.

<http://www.carf.org/home/>

CMS – Center for Medicare and Medicaid Survey and Certification Compliance.

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/index.html?redirect=/certificationandcompliance/02_ascsp

COA – Council on Accreditation. An international, independent, nonprofit, human service accrediting organization.

<http://coanet.org/home/>

GPO eCFR – U.S. Government Publishing Office for Electronic Code of Federal Regulation.

<http://www.ecfr.gov/cgi-bin/ECFR?page=browse>

Medicaid – Federal Policy Guidelines.

<http://www.medicare.gov/federal-policy-guidance/federal-policy-guidance.html>

Medicare – Information.

<https://www.medicare.gov/>

National Association of Addiction Professionals

<http://www.naadac.org/NCPRSS>

National Association of Social Workers

<https://www.socialworkers.org/>

NASADAD – National Association of State Alcohol and Drug Abuse Directors.

<http://nasadad.org>

NASHMD – National Association of State Mental Health Program Directors,

<http://nasmhpd.org/>

NCQA – National Committee for Quality Assurance sets standards and performance measures for providers and health plan organizations to follow.

<http://www.ncqa.org/>

SAMHSA – Substance Abuse and Mental Health Services Administration.

<http://www.samhsa.gov/>

TIP Series - Treatment Improvement Protocols (TIPS)

<https://store.samhsa.gov/series/tip-series-treatment-improvement-protocols-tips>

Trauma Informed Care

<https://www.integration.samhsa.gov/clinical-practice/trauma-informed>

South Southwest ATTC

The South Southwest Addiction Technology Transfer Center (SSW ATTC) is located in the Addiction Research Institute at the Steve Hicks School of Social Work in Austin, TX. SSW ATTC is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) to help people and organizations implement effective practices for substance use disorder treatment and recovery services. In addition, we work with higher education institutions to support incorporation of evidence based practices into addictions curricula. SSW ATTC serves Arkansas, Louisiana, Oklahoma, Texas, New Mexico, and American Indian Tribes and Communities (Health & Human Services Region 6).

<https://attcnetwork.org/centers/south-southwest-attc/home>

The Joint Commission – Accredits provider agencies of programs/services for persons with intellectual and developmental disabilities, including mental health and chemical dependency

services. Today, The Joint Commission accredits more than 2,100 behavioral health care organizations under the Comprehensive Accreditation Manual for Behavioral Health Care. http://www.jointcommission.org/facts_about_behavioral_health_care_accreditation/

The National Council for Behavioral Health – The National Council coordinates the Mental Health First Aid program across the U.S and operates the SAMHSA-HRSA Center for Integrated Health Solutions to provide nationwide technical assistance on integrating primary and behavioral healthcare. The National Council offers the annual National Council Conference featuring the best in leadership, organizational development, and excellence in mental health and addictions practice. <https://www.thenationalcouncil.org/> and <https://www.thenationalcouncil.org/integrated-health-coe/about-us/>

Acronyms

A list of terms and acronyms from the HSD website:

<https://www.hsd.state.nm.us/lookingforinformation/glossary-of-acronyms-abbreviations-and-terms-for-recipients/>

Helpful Acronyms

- A -

ABA - Applied Behavioral Analysis
ABP - Alternative Benefit Plan
ACA - Affordable Care Act (Patient Protection and Affordable Care Act)
ACIP - Advisory Committee on Immunization Practices
ACLU – American Civil Liberties Union
ACRA – Adolescent and Community Reinforcement
ACS – American Community Support
ACT - Assertive Community Treatment
ADA – Americans with Disabilities Act
ADL - Activities of Daily Living
ADMS - Alcohol, Drug Abuse and Mental Health Service block grant
AHP - Affordable Housing Program
AHRO - Agency for Healthcare Quality and Research
ALTSD - Aging and Long - Term Services Department (NM)
AMI - Area Median Income
AOC - Administrative Office of the Courts (NM)
APRIL - Association of Programs for Rural Independent Living
APS - Adult Protective Services Division (ALTSD)
ARRA - American Recovery and Reinvestment Act
ARTC - Accredited Residential Treatment Center
ASAM - American Society of Addiction Medicine
ASD - Autism Spectrum Disorder
ASD - Administrative Services Division (HSD)
ASI - Addiction Severity Index
ATR - Access to Recovery or Accounting Transaction Request (context)
AVRS - Automated Voice Response System (ACS)

- B -

BA – Behavioral Analyst
BAA - Business Associate Agreement
BBER - Bureau of Business and Economic Research (UNM)
BCBA – Board Certified Behavioral Analyst
BC - DR - Business Continuity and Disaster Recovery
BG - Block Grant
BH - Behavioral Health

BHA – Behavioral Health Agency
BHC - Behavioral Health Collaborative
BHH - Behavioral Health Home
BHPC - Behavioral Health Planning Council
BHSD - Behavioral Health Services Division (HSD)
BIA - Bureau of Indian Affairs (federal)
BMS - Behavioral Management Service
BP - Blood Pressure

- C -

C/FSP - Consumer/Family Satisfaction Project (NM)
CAFAS - Child and Adolescent Functional Assessment Scale
CAFE - Consumer and Family Engagement, Office of (HSD)
CAHPS - Consumer Assessment of Healthcare Providers and Systems
CNA - Comprehensive Needs Assessment
CAP - Corrective Action Plan
CAS - Claims Adjustment Code identifying the detailed reason the adjustment was made
CAT - Cross - Agency Team
CBHTR - Consortium for Behavioral Health Research and Training (NM)
CC – Centennial Care
CCC - Children with Chronic Conditions
CCL - Care Coordination Level
CCP - Comprehensive Care Plan
CCSS - Comprehensive Community Support Services
CD - Compact Disc
CDBG - Community Development Block Grant
CDD - Center for Development & Disability
CDFI - Community Development Financial Institution
CEO - Chief Executive Officer
CEU – Continuing Education Unit
CFDA - Catalog of Federal Domestic Assistance
CFO - Chief Financial Officer
CFR - Code of Federal Regulations
CFSR – Child and Family Services Review
CFT - Child and Family Team
CHW - Community Health Worker
CIO - Chief Information Officer
CIP – Community Investment Program
CIR – Critical Incident Report
CIT - Crises Intervention Training
CLAS - Culturally and Linguistically Appropriate Services
CLIA - Clinical Laboratory Improvement Amendments
CLP - Computer Loan Program
CMHC - Community Mental Health Center
CMHSBG - Community Mental Health Services Block Grant (context)
CMP - Civil Monetary Penalties
CMS - Centers for Medicare and Medicaid Services (DHHS)

CMMI - Center for Medicare and Medicaid Innovation
CMO - Chief Medical Officer
CMS - Centers for Medicare & Medicaid Services
CNA – Comprehensive Needs Assessment
CNP - Certified Nurse Practitioner
CNS - Clinical Nurse Specialist
COBA - Coordination of Benefits Agreement
COO - Chief Operating Officer
CPS - Certified Peer Specialist; Child Protective Services (CYFD)
CPSW – Certified Peer Support Worker
CPT - Current Procedural Terminology
CQI - Continuous Quality Improvement
CRAFT - Community Reinforcement and Family Training
CSA - Core Service Agencies
CSAT - Center for Substance Abuse Treatment (SAMHSA)
CSED - Child Support Enforcement Division (HSD)
CSP – Consumer Satisfaction Project
CSS – Community Support
CSW – Community Support Worker
CY - Calendar Year
CYFD - New Mexico Children, Youth and Families Department

- D -

DASIS - Drug and Alcohol Services Information System (SAMHSA)
DBA - Doing Business As
DCAP - Directed Corrective Action Plan
DD - Developmental Disability
DDPC - Developmental Disabilities Planning Council
DDSD - Developmental Disabilities Services Division
DEA - Drug Enforcement Administration (federal)
DFA - Department of Finance and Administration (NM)
DHHS - Department of Health and Human Services
DHI - Division of Health Improvement (DOH)
DM - Disease Management
DME - Durable Medical Equipment
DMZ - DMZ is short for De - Militarized Zone and is software/web page for the transmission and storage of data.
DOB - Date of Birth
DOH - New Mexico Department of Health
DOT - Department of Transportation (NM)
DSM - Diagnostic and Statistical Manual of Mental Disorders
DST - Documented Staff Training
DTR - Double Trouble in Recovery DV - Domestic Violence
DVR - Division of Vocational Rehabilitation (PED)

DWI - Driving While Intoxicated
DWS - Department of Workforce Solutions (NM)

- E -

EAP - Employee Assistance Program
EBP - Evidence - Based Practices
ECHO - Extension for Community Healthcare Outcomes
EDI - Electronic Data Interchange
EEO - Equal Employment Opportunity
EHR - Electronic Health Record
ENT - Ear, Nose, Throat
EOR - Employer of Record
EPSDT - Early and Periodic Screening, Diagnosis, and Treatment
EQRO - External Quality Review Organization
ER - Emergency Room
ESG - Emergency Grant Shelter Program

- F -

FACT - Functional Assessment of Cognitive Transit Skills
FAQ - Frequently Asked Question
FBI - Federal Bureau of Investigation
FDA - U.S. Food and Drug Administration
FDIC - Federal Deposit Insurance Corporation
FEIN - Federal Employer Identification Number
FEMA - Federal Emergency Management Agency
FICA - Federal Insurance Contributions Act
FIT - Family Infant Toddler program (DOH)
FFS – Fee for Service
FFT - Functional Family Therapy
FHLB - Federal Home Loan Bank
FINS - Family in Need of Services
FMA - Fiscal Management Agency
FMR – Fair Market Rate
FQHC - Federally Qualified Health Center
FS - Family Services (CYFD)
FTE - Full - time Equivalent
FTP - File Transfer Protocol
FUTA - Federal Unemployment Tax Act
FY – Fiscal Year

- G -

GAO - General Accounting Office (federal)
GCD - Governor's Commission on Disability (NM)
GH - Group Home

GHPC - Governor's Health Policy Coordinator (NM)
GNMA - Government National Mortgage Association
GOI - General Organization Index
GPM - Governor's Performance Measures
GPRA - Government Performance Results Act
GPS - Global Positioning System

- H -

HB - House Bill
HCAC - Health Care Acquired Condition
HCBS - Home and Community - Based Service
HCPCS - Healthcare Common Procedure Coding System
HCSC - Health Care Service Corporation
HCV - Housing Choice Vouchers
HEDIS - Healthcare Effectiveness Data and Information Set
HH – Health Home (CareLink)
HIE - Health Information Exchange
HIPAA - Health Insurance Portability and Accountability Act
HITECH Act - Health Information Technology for Economic and Clinical Health Act
HIT - Health Information Technology
HIV - Human Immunodeficiency Virus
HIX - Health Insurance Exchange
HMIS - Homeless Management Information System (HUD)
HOP - Housing Option Program
HOPWA - Housing Opportunities for Persons with AIDS Program
HPC - Health Policy Commission (NM)
HRA - Health Risk Assessment
HSD - New Mexico Human Services Department
HST - Housing Support Team
HTN - Hypertension
HUD - Department of Housing and Urban Development (federal)

- I -

I - SATS - Inventory of Substance Abuse Treatment Services
I/T/U - Indian Health Service, Tribal health provider, and Urban Indian provider
IAD - Indian Affairs Department (NM)
IADL - Instrumental Activities of Daily Living
IBNR - Incurred but Not Received
ICD - 10 - International Classification of Diseases 10
ICD - 9 - International Classification of Diseases 9
ICF/MR/DD - Intermediate Care Facility for Individuals with Mental Retardation or Developmental Disabilities
ICSS - Independent Consumer Supports System
ICWA - Indian Child Welfare Act
ID - Identification
IEP - Individualized Education Plan
IDT - Interdisciplinary Team

IEP - Individualized Education Program
IFN - Interagency Forensic Network
IHS - Indian Health Service
INS - Immigration and Naturalization Service (federal)
IOP - Intensive Outpatient Program
IPF - Inpatient Psychiatric Facility/Unit
Epoch - Individualized Plan of Care
IPRA - Inspection of Public Records Act
IRS - Internal Revenue Service
IS - Information Systems
ISO - Income Support Division (HSD)
ISHCN - Individual with Special Health Care Needs
ISOC - Integrated System of Care
ISP - Individual Service Plan
ISP - Intensive Supervision Program
ISU - Intensive Supervision Unit
IT - Information Technology
IV - Intravenous

- J -

JJS - Juvenile Justice Services

- L -

LADAC - Licensed Alcohol and Drug Abuse Counselor
LC - Local Collaborative
LEIE - List of Excluded Individuals and Entities
LIHTC - Low Income Housing Tax Credit
LOC – Level of Care
LOD - Letter of Direction
LPN Licensed Practical Nurse
LSP - Local Selection Panel
LTTF - Land Title Trust Fund
LVMC - Las Vegas Medical Center (DOH)
LEIE - List of Excluded Individuals/Entities
LEP - Limited English Proficiency
LISW - Licensed Independent Social Worker
LMFT - Licensed Marriage and Family Therapist
LPCC - Licensed Professional Clinical Counselor
LPN - Licensed Practical Nurse
LSP - Local Selection Panel
LTTF - Land Title Trust Fund
LTC - Long - Term Care
LTSS - Long - Term Services and Supports
LVMC - Las Vegas Medical Center (DOH)

- M -

MAD - Medical Assistance Division

MCO - Managed Care Organization
MD - Doctor of Medicine
MDS - Minimum Data Set
MDT - Multi - Disciplinary Team
MFA - Mortgage Finance Authority (NM)
MFCU - Medicaid Fraud Control Unit
MFEAD - New Mexico Medicaid Fraud & Elder Abuse Division
MH BG - Mental Health Block Grant
MHSIP - Mental Health Statistics Improvement Project
MHT - SIG or TSIG - Mental Health Transformation State Incentive Grant
MI - Motivational Interviewing
MIC - Medicaid Integrity Contractor
MIS - Management Information System
MMIS - Medicaid Management Information System
MMIS - Medicaid Management Information System
MOE - Maintenance of Effort
MOU - Memorandum of Understanding
MST - Multi - Systemic Therapy
MTFC - Multidimensional Treatment Foster Care

- N -

N - SSATS - National Survey of Substance Abuse Treatment Services
NAMI - National Alliance for the Mentally Ill
NARMH - National Association for Rural Mental Health
NBD - Neurobiological Disorder
NCADI - National Clearinghouse for Alcohol and Drug Information (SAMHSA) NIST - National Institute of Standards and Technology
NCPDP - National Council of Prescription Drug Programs
NCQA - National Committee for Quality Assurance
NFLOC - Nursing Facility Level of Care
NMAC - New Mexico Administrative Code
NMCD - New Mexico Corrections Department NMFI - National Master Facility Inventory
NMSA - New Mexico Statutes Annotated
NMHIC - New Mexico Health Information Collaborative
NMMIP - New Mexico Medical Insurance Pool
NMSA - New Mexico Statute Annotated
NOFA - Notice of Funding Availability
NOGA - Notice of Grant of Award
NOMS - National Outcome Measures
NPI - National Provider Identifier
NQMC—National Quality Measures Clearinghouse

- O -

OAA - Older Americans Act
OB - GYN—Obstetrics and Gynecology
OCA - Office of Consumer Affairs (BHSD), now CAFE

ODBC - Open Database Connectivity
OEM - Original Equipment Manufacturer
OHR - Office of Human Resources (HSD)
OIG - Office of Inspector General (HSD)
OMB - Office of Management and Budget
OPPC - Other Provider Preventable Condition
OOS - Office of the Secretary (HSD)
OSAH - Office of School and Adolescent Health (DOH)
OSAP - Office of Substance Abuse Prevention (DOH)
OT - Oversight Team

- P -

PASRR - Pre - Admission Screening and Resident Review
PCMH - Patient - Centered Medical Home
PCP - Primary Care Physician/ Primary Care Provider
PCS - Personal Care Service
PD - Public Defender Department (NM)
PDL - Preferred Drug List
PED - Public Education Department (NM) PHA - Public Housing Agency
PHH - Physical Health Home
PHI - Protected Health Information
PI - Performance Improvement Project
PL - Public Law
PM - Performance Measure
PMPM - Per - Member Per - Month
PPACA - Patient Protection and Affordable Care Act
PPC - Provider Preventable Condition
PPS - Prospective Payment System
PRAC - Project Rental Assistance Contract
PS - Protective Services
PSC - Professional Services Contract
PSR - Psychosocial Rehabilitation
PTSD - Post Traumatic Stress Syndrome

- Q -

Q1 - First Quarter
Q2 - Second Quarter
Q3 - Third Quarter
Q4 - Fourth Quarter
QAP - Qualified Allocation Plan
QI - Quality Improvement
QM - Quality Management
QM/QI - Quality Management/ Quality Improvement

- R -

RAC - Recovery Audit Contractor

RBT – Registered Behavior Technician
RCCP - Regional Care Coordination Plan
RCPNNM - Rural and Community Psychiatry Network of New Mexico
RES - Recovery Empowerment Specialist
RFP - Request for Proposal
RHC - Rural Health Clinic
RN - Registered Nurse
RSS - Recovery Support Services
RTC - Residential Treatment Center

- S -

SAMHSA—Substance Abuse and Mental Health Services Administration
SB - Senate Bill
SBHC - School - Based Health Center
SBIRT - Screening, Brief Intervention and Treatment
S-CHIP - State Children's Health Insurance Program
SCI - State Coverage Insurance
SDCB - Self - Directed Community Benefit
SDF - Software Development Firm
SE - Statewide Entity
SED - Serious Emotional Disturbance
SFY - State Fiscal Year
SIG - State Incentive Grant
SHD - Systems Help Desk
SHP - Supportive Housing Program
SJM - Senate Joint Memorial
SMI - Serious Mental Illness
SNP - Special Needs Plan
SPC - Specialty Care Provider (ABA)
SOE - Summary of Evidence
SQL - Structured Query Language
SOC - System of Care
SPF - SIG - Strategic Prevention Framework State Incentive Grant
SSI - Supplemental Security Income
SSDI - Supplemental Security Disability Insurance
SSN - Social Security Number
SSRI - Selective Serotonin Reuptake Inhibitor

- T -

TANF - Temporary Assistance for Needy Families (HSD)
TBD - To Be Determined
TBI - Traumatic Brain Injury
TBRA - Tenant - Based Rental Assistance TCA - Total Community Approach
TCN - Transaction Control Number
TDD - Text Telephone
TDM - Team Decision - Making

TEDS - Treatment Episode Data Set
TFC - Treatment for Foster Care
TLS - Transitional Living Services
TM - Tracking Measure
TPL - Third Party Liability
TQM - Total Quality Management
T - SIG - Transformation State Incentive Grant
TTY - Telecommunication Device for the Deaf

- U -

UM - Utilization Management
UNM/CDD - University of New Mexico Center for Development and Disability
UNM - University of New Mexico
URS - Uniform Reporting System
USC - United States Code

- V -

VMS - Voucher Management System
VONM - Value Options New Mexico
VPN - Virtual Private Network

- W -

WDI - Working Disabled Individual
WIC - The Special Supplemental Nutrition Program for Women, Infants, and Children
WICHE - Western Interstate Commission on Higher Education
WRAP - Wellness Recovery Action Plan

- Y -

YTD - Year - to - Date