



NATIVE AMERICAN TECHNICAL ADVISORY COMMITTEE (NATAC)

Meeting minutes

December 16, 2024

Time: Start 1:00 pm **End:** 4:10 pm **Place:** Virtual meeting

Chair: Shelly Begay, Health Care Authority (HCA) Cabinet Liaison

Recorder: Theresa Belanger, Native American Liaison, NM Medicaid


Attendees: Dana Flannery (Medicaid Director), Alanna Dancis (MAD), Alicia Salazar (HCA), April Ruben (Laguna Pueblo), Brandi Reano (BHSD), Elisa Walker-Moran (Deputy Director MAD), Lena Gachupin (Kewa Pueblo), Governor Quanchello, Lt. Gov. Racheal Pyne (Picuris Pueblo); Ray Tafoya (IAD), Ezra Bayles (Taos Pueblo), Anthony Yepa (Kewa Pueblo), Dr. Yolandra Gomez (Jicarilla Apache)

Guests: Ann Ritter, ? Business Strategies

| DISCUSSION ITEM | OUTCOME | FOLLOW-UP ACTION | RESPONSIBLE PERSON/ DEPARTMENT | EXPECTED OR REQUIRED COMPLETION DATE |
|---|---|---|----------------------------------|--------------------------------------|
| I. Invocation/Introductions | Invocation/Introductions completed | None | All | N/A |
| II. Review of 9/16/24 minutes | No corrections needed. | None | All | N/A |
| III. Dana Flannery, Medicaid Director Elisa Walker-Moran, Deputy Medicaid Director | <p>There was a request to go over the Governor's budget for 2025. High points of HCA request were discussed. We are close in alignment with what Medicaid recommended and what was accepted.</p> <ul style="list-style-type: none"> • Costs for rate increase for all providers (100% or 150% of Medicare rate) • Maintain these rate increases into FY 26 • Increase to address medical cost increases • Expansion money for 1115 waiver services (Justice Involved, Food as Medicine, Housing) • Increase for PACE providers, assisted living facilities • Behavioral Health rate increases starting FY 26 • Additional funding to hire staff to have more oversight over TC MCOs to ensure they are maintaining their contracts | <p>Update at next NATAC</p> <p>Additional information can be found on the Department of Finance website</p> | Dana Flannery/Elisa Walker-Moran | Ongoing |

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| | <ul style="list-style-type: none"> • Value Based Purchasing (VBP) payments for providers • Funding increase to address additional Divisions that are now under the HCA • MAD is looking at other programs under the HCA that could receive a larger federal match • Additional dollars for contract money to support additional efforts <p>Recommendation: It would be nice to see what funding the MCOs are putting towards Native Americans.</p> | Invite MCO CEOs and Tribal liaisons to the next meeting | Theresa Theresa | Next NATAAC |
| IV. Update on CHR training – Alanna Dancis, Christopher Bartsch | <p>Kudos to Chris, Dr. Dancis and DOH for helping to get reimbursement to the CHR/CHW program.</p> <ul style="list-style-type: none"> • Held a training at Santo Domingo Pueblo November 18th hosted by the Kewa CHRs (in person and virtual) and a training December 3rd at the NM & Southern CO CHR Association • Built a FAQ resource web page • Sent out a request to Tribes on who would like to host a CHR training beginning in February 2025. Twelve Tribes expressed interest in hosting one of these events <p>Question – Is there documentation on what we need to submit to the state for CHR/CHW reimbursement?</p> <p>Response – This is included in the CHR 101 training. CHRs need to be recognized through the DOH and complete their attestation form that is online. Then they need to get set up with Medicaid to be a provider in our system. Once they are active with provider type 462 and specialty 230 then they can work with the MCOs to work with members within the MCO. To bill they would use the CMS 1500 form for claims. We have a standing order CHRs can use to bill the ICD10 codes. CHRs need to keep documentation of their visits in case the service is audited.</p> <p>Santo Domingo/Kewa is working with EHR-BEHR on inputting the necessary documents.</p> | Update at next NATAAC | Theresa/ Christopher | Next NATAAC |
| V. Justice involved – Heidi Capriotti | <p>NM is one of the first seven states to get approval from CMS for the Justice Re-Entry program. We have national partners to help with tech. assistance. The 1115 Waiver grants us the authority to remove the inmate exclusion that allows Medicaid to pay for services. Medicaid can now work with jails and prisons for up to 90 prior to release to implement care coordination, MAT, and a 30-day supply of medication prior to release. We need to submit an implementation plan, readiness assessment and financial reinvestment plan to CMS.</p> | <p>There will be 2 stakeholder meeting – December 19th and March 28, 2025.</p> <p>To register: https://bit.ly/JusticeReentry https://us02web.z</p> | Heidi Capriotti/Jean elle Romero | Next NATAAC |

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| | <p>There are a variety of other re-entry services we can offer subject to budget availability. We are going to look at state facilities such as CYFD facilities for incarcerated youth and NM Corrections Dept. facilities to be in our first phase as of January 1, 2025. Phases 2 and 3 will include the county jails.</p> | <p>oom.us/meeting/register/tZUrd-qsrl4pHNW9IF-6VMhYIWgdBxJJK_RQ</p> | | |
| <p>VI. Traditional Health Care Practices (THCP) – Theresa Belanger</p> | <p>On October 16, 2025 CMS announced that 4 states were approved for a demonstration waiver for reimbursement for THCP. NM is one of the 4 states identified. Today was our first meeting to greet and meet with NM Tribes and IHS on THCP. There were over 30 people on the call. To date, Navajo Nation is the only Tribe in NM that has requested to move forward with this opportunity. If other Tribes want to join later, they can do that. We have received special terms and conditions from CMS to develop this reimbursement. The goal is to improve access to culturally appropriate care, maintain and improve health outcomes and reduce existing health disparities.</p> | <p>Update at next NATAAC</p> | <p>Theresa Belanger</p> | <p>Next NATAAC</p> |
| <p>VII. Able Bodied Adults w/out Dependents (ABAWD)- Eli Gallegos, HCA</p> | <p>ABAWDs are between the ages of 18-54 who are physically able to work and don't have dependents to care for. Starting in January 2025 there will be ABAWD requirements for SNAP benefits. To keep getting SNAP ABAWDS must:</p> <ul style="list-style-type: none"> • Work 20 hours/week or 80 hours/month. Work can be paid or volunteer or • Participate in a work program 20 hours/week or 80 hours/month or • Any combo of work and work program hours for a total of 20 hours/week or 80 hours/month <p>Each year ABAWD SNAP requirements are re-evaluated. Due to economic changes in NM, some counties and Tribes will fall under the ABAWD requirements. However, 29 counties and 18 Pueblos/Nations will not be required to participate in ABAWD. The Pueblos that will be required to participate in ABAWD are San Ildefonso, Pojoaque, Santa Clara, and Laguna Pueblo. Of these 4 Tribal communities, only 114 individuals in all four communities would be required to work. If participants have had a change in income or circumstances, they need to reach out to their ISD office to see if they are required to participate in ABAWD requirements.</p> | <p>None</p> | <p>Eli Gallegos</p> | <p>Completed</p> |
| <p>VIII. Public Health Nurse (PHN) billing – Ezra Bayles</p> | <p>Not all Tribes have PHNs in their communities. They save Medicaid a lot of money due to the care they provide and keep people out of the hospital and ERs.</p> <p>What are billable PHN services today?</p> <p>What are services that PHNs provide that are not billable?</p> | <p>Theresa will look to see if other states are currently offering reimbursement for this</p> | <p>Theresa Belanger</p> | <p>Next NATAAC</p> |

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| | <p>Dana recommended that we research why the previous work that was done stopped. Look to see if other states are reimbursing for PHN visits. You can also reach out to CMS about this. Is this a direction that everyone wants to go? Looking at billing constraints on provider types and services rendered on what is not billable today would be good to look at.</p> | <p>and reach out to CMS to discuss further.</p> | | |
| <p>IX. Certified Community BH Clinics (CCBHC) – Brandi Reano</p> | <p>Ann Ritter and Alicia Salazar presented on CCBHC model in NM. CCBHC is a clinic that provides a broad range of mental health, SUD, and primary screening services regardless of diagnosis and ability to pay.</p> <ul style="list-style-type: none"> • CCBHC is a proven outpatient model that provides 24/7 comprehensive mental health and substance use treatment, crisis response and MAT • All CCBHCs must meet stringent criteria set up by NM for access, reporting, staffing, and coordinating with other systems (judicial/educational) • They receive funding through PPS – Prospective Payment System • No wrong door approach • Geared to the whole life span (children and adults) <p>This is part of the demonstration waiver. It would be reimbursed at the PPS rate.</p> <p>NM has 5 CCBHS: UNM in Bernalillo and Sandoval Counties, Life House in Carlsbad, Santa Fe Recovery Center in Santa Fe and McKinley Counties, PMS in Farmington, and Families & Youth Innovations in Las Cruces.</p> <p>There are 9 core services that all CCHBC’s provide.</p> <p>There will be a Tribal listening session planned for February 2025.</p> | <p>For more information, see https://nmrecovery.org/ccbhc</p> | <p>Brandi Reano, BHSD Tribal Liaison</p> | <p>Completed</p> |
| <p>X. Review of current NATAAC goals/objectives – Theresa</p> | <p>Theresa went over the current goals and objectives for NATAAC which was developed in 2019. The committee asked that the goals and objectives be sent out again for NATAAC to review.</p> <p>Some objectives need to be changed.</p> <ul style="list-style-type: none"> • There is a big need for youth treatment centers. We currently don’t have anywhere to send our youth. • For long term care services, there are still gaps in services based on income guidelines for some of our Native American elders. • How are MCOs tied to LTC services? | <p>Theresa will send out current goals and objectives for NATAAC to review prior to the next meeting</p>  <p>NATAAC Goals & Objectives from 12.1</p> | <p>Theresa</p> | <p>June NATAAC</p> |
| <p>Comments</p> | <p>The HCA will be sending out the annual NATAAC letter to the Tribal leadership to appoint someone to the NATAAC or keep the current</p> | <p>Discuss at next NATAAC</p> | <p>Theresa</p> | <p>Ongoing</p> |

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| | <p>representative. Current NATAC members are encouraged to reach out to their Tribal leadership to make sure someone is appointed to NATAC for 2025.</p> <p>It would be helpful to have the same reps from NATAC be on the AASTEC committee.</p> <p>It would be helpful to have a directory of data to include all Tribes for leadership each year.</p> <p>Send out the MER to NATAC monthly.</p> | | | |
| Next meeting | Monday, March 17, 2025 1-4 pm | Send out MER, send out draft minutes, send out invite for next NATAC | Theresa | Ongoing |

Respectfully submitted: _____ Theresa Belanger _____ January 29, 2025