

NEW MEXICO HUMAN SERVICES DEPARTMENT

Medicaid Management Information System Replacement (MMISR) Project



**PROPOSAL ADDENDUM 3 (Three)
ADDENDUM TITLE: HHS 2020 Work Flows**

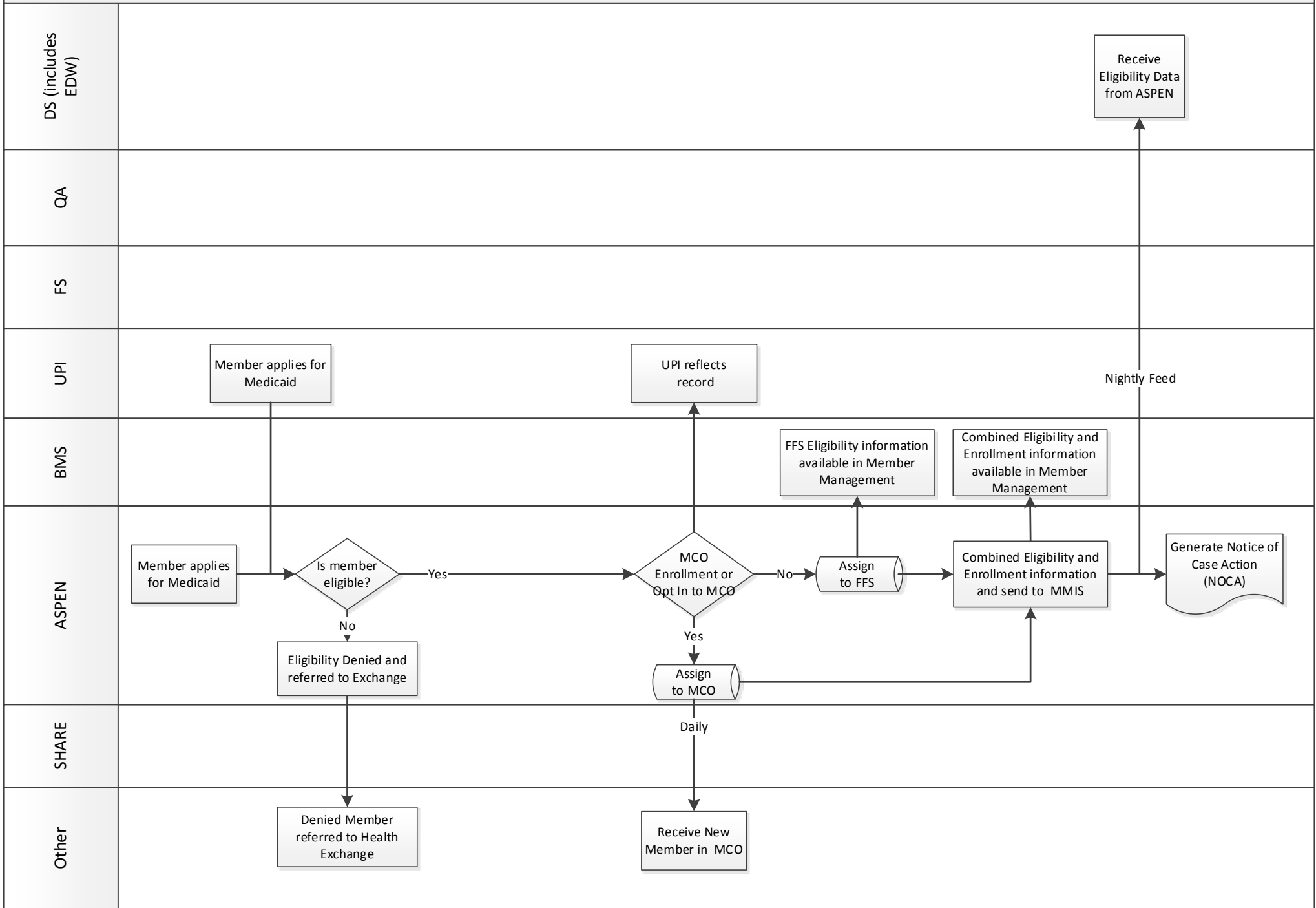
Created/Updated: January 31, 2018
Version: 1.2

MMISR Vision Work Flows

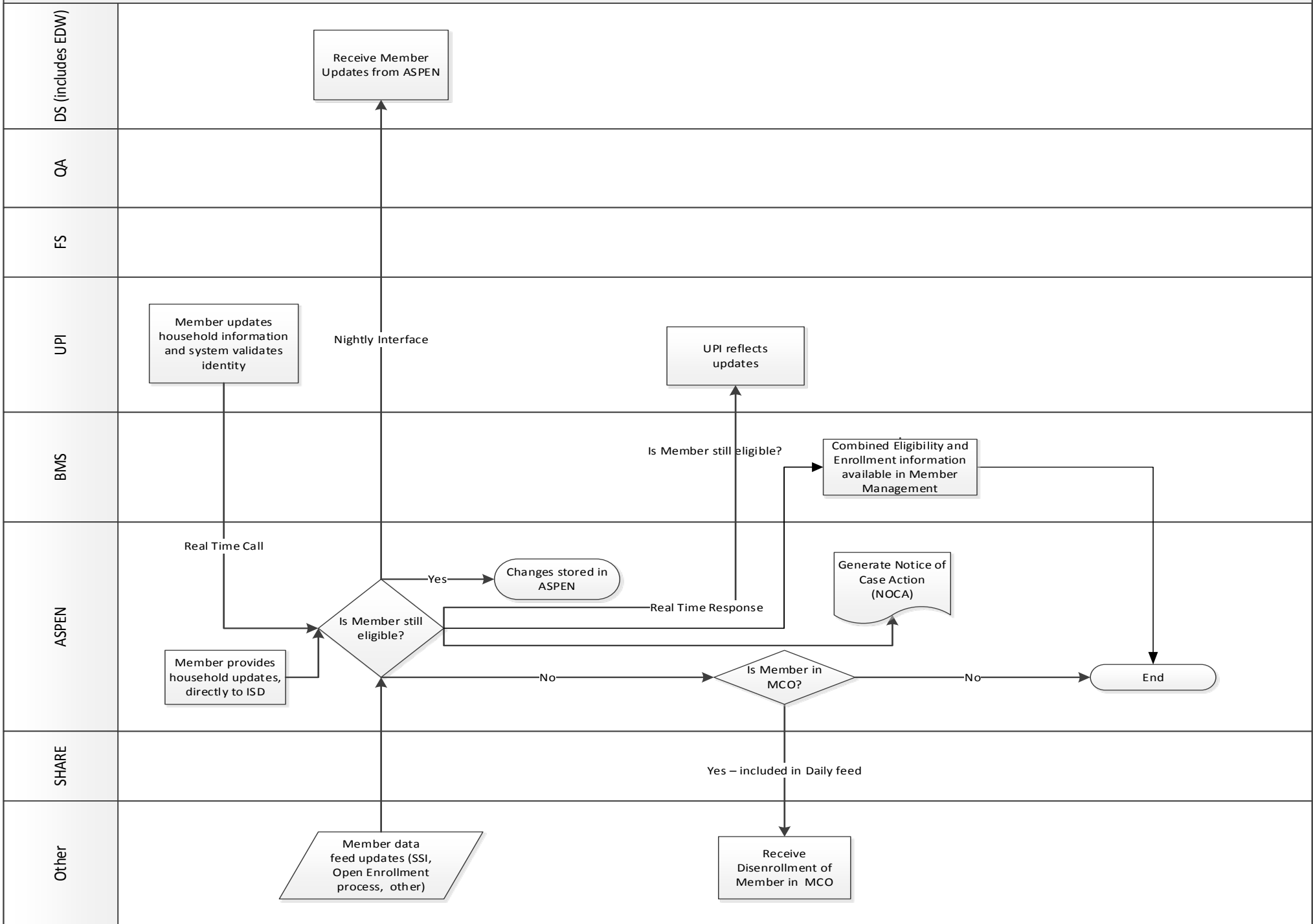
The following flows are high level samples of the integration and interdependence of the various modules as of January 2018 which is subject to change. The Enterprise Service Bus (ESB) provides the mechanism for the transfer of data between the modules. Data received in the system is stored in the Enterprise Data Warehouse and is available for reporting through the Data Services module. Some data will not be stored in the system but will be retrieved via Service Calls through the ESB. This document is not intended to be detailed Business Process Flows.

Key: Statewide Human Resources, Accounting, and Management Reporting System of NM (SHARE), Automated System Program and Eligibility Network (ASPEN) Benefit Management Services (BMS), Unified Public Interface (UPI), Consolidated Customer Support Center (CCSC), Financial Services (FS), Quality Assurance (QA), Data Services (DS), Enterprise Data Warehouse (EDW).

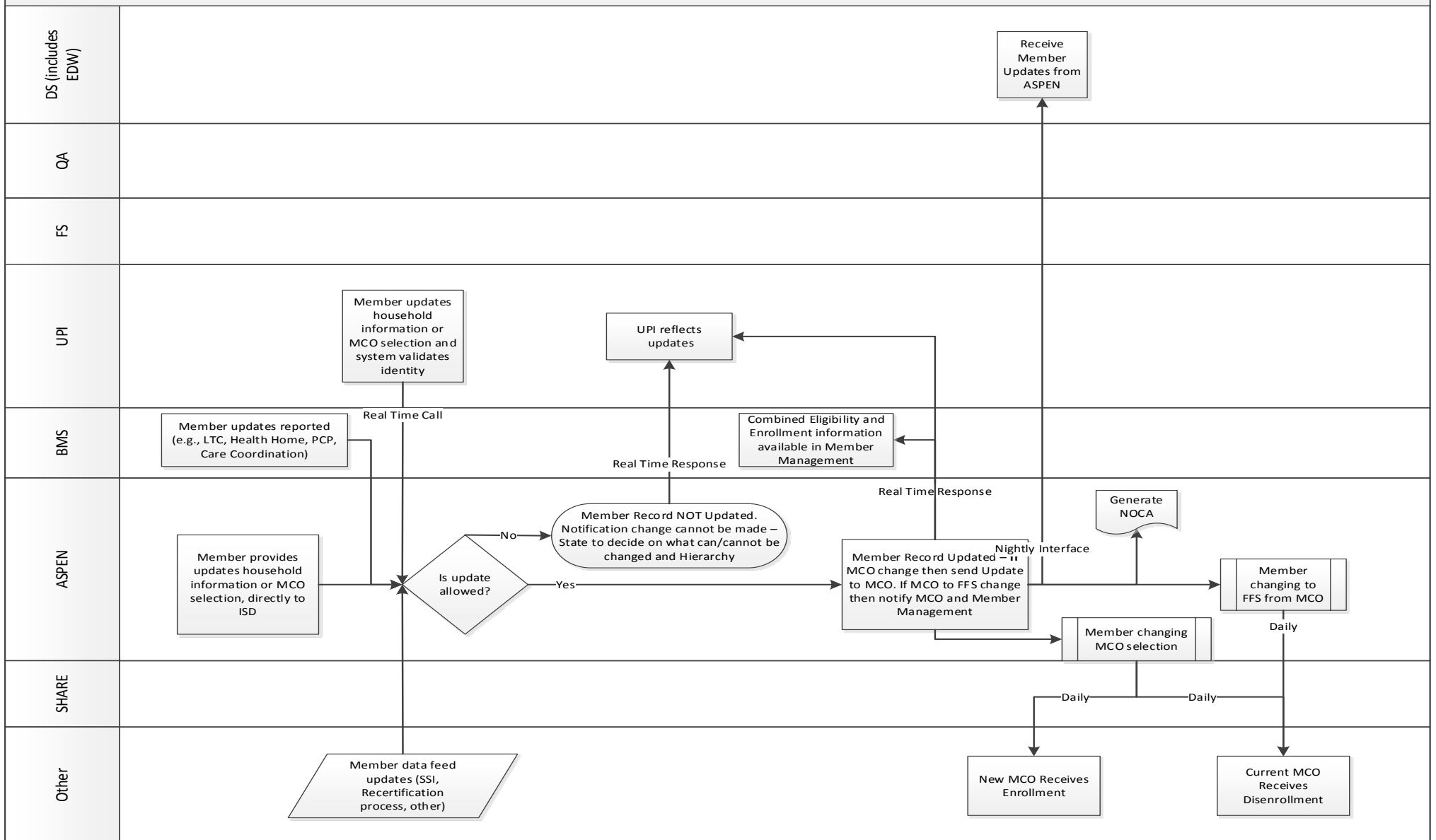
Member Eligibility and Enrollment



Member Disenrolled – not eligible

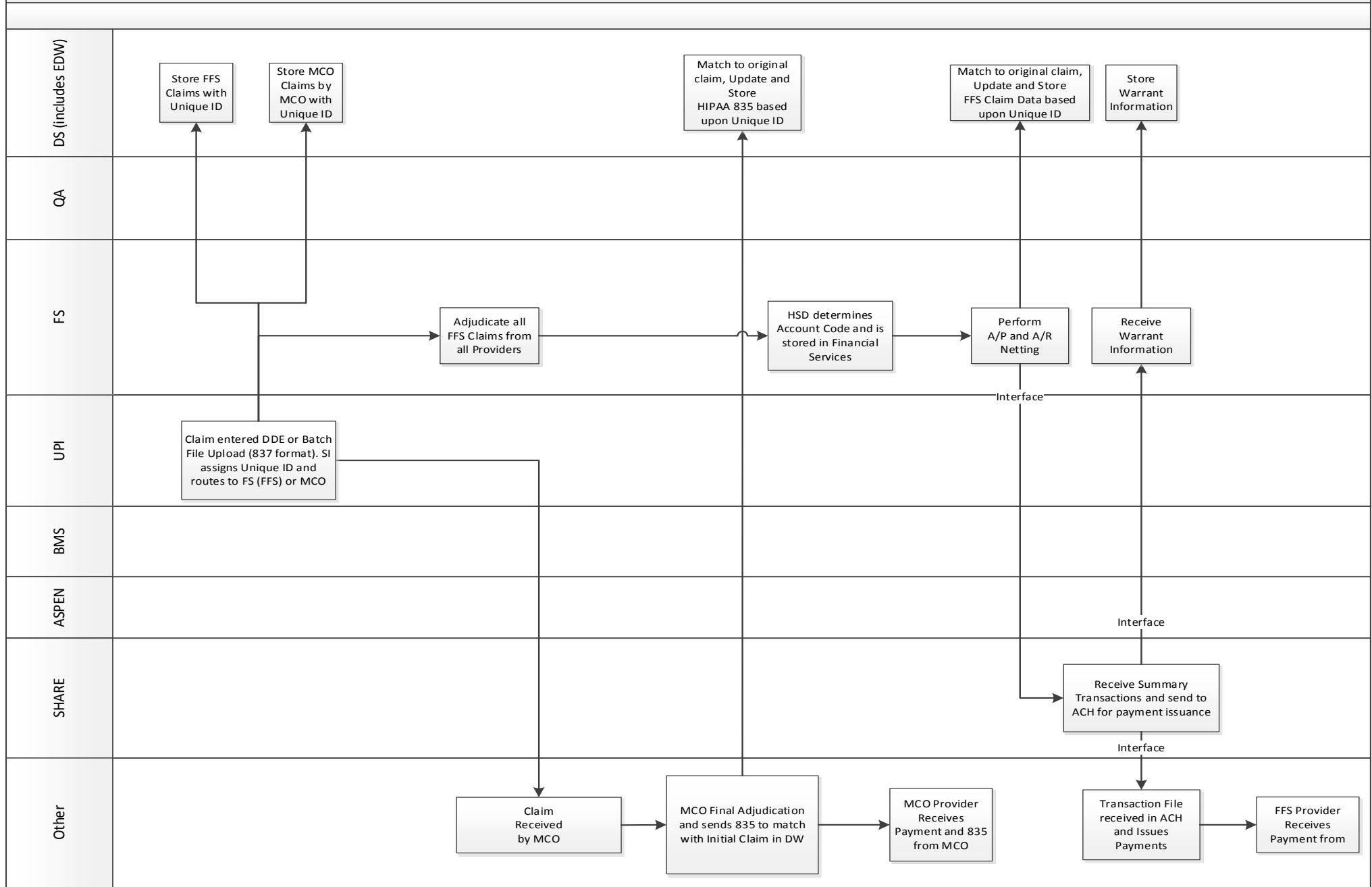


Member Updates MCO and/or FFS Selection



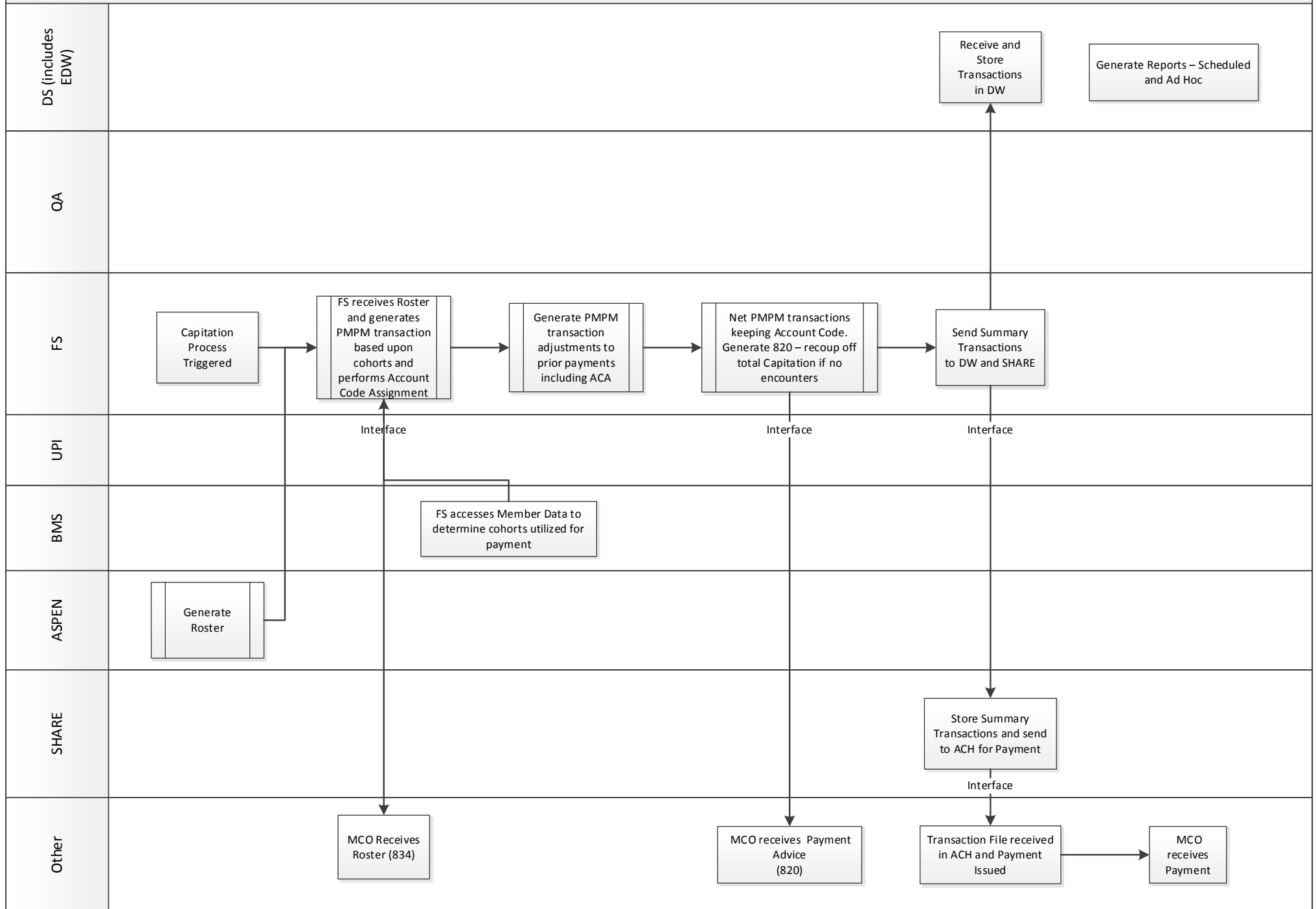
- Native American Members are not required to be in MCO but can opt into MCO and change option at any time
- Only Members with Full Medicaid are allowed to enroll in MCO
 - Newborn Member is enrolled in same MCO as mom
 - Members with a break in coverage, of less than 180 days, are re-enrolled in same MCO as prior enrollment
 - Open Enrollment is annually and member can change selection for up to 45 days of Open Enrollment date
- MCO Enrollment starts the first of the month after selection and capitation generation
 - if capitation has not run, then first of the next calendar month
 - if capitation has run then first of month after next calendar month

Claims/Encounter Processing

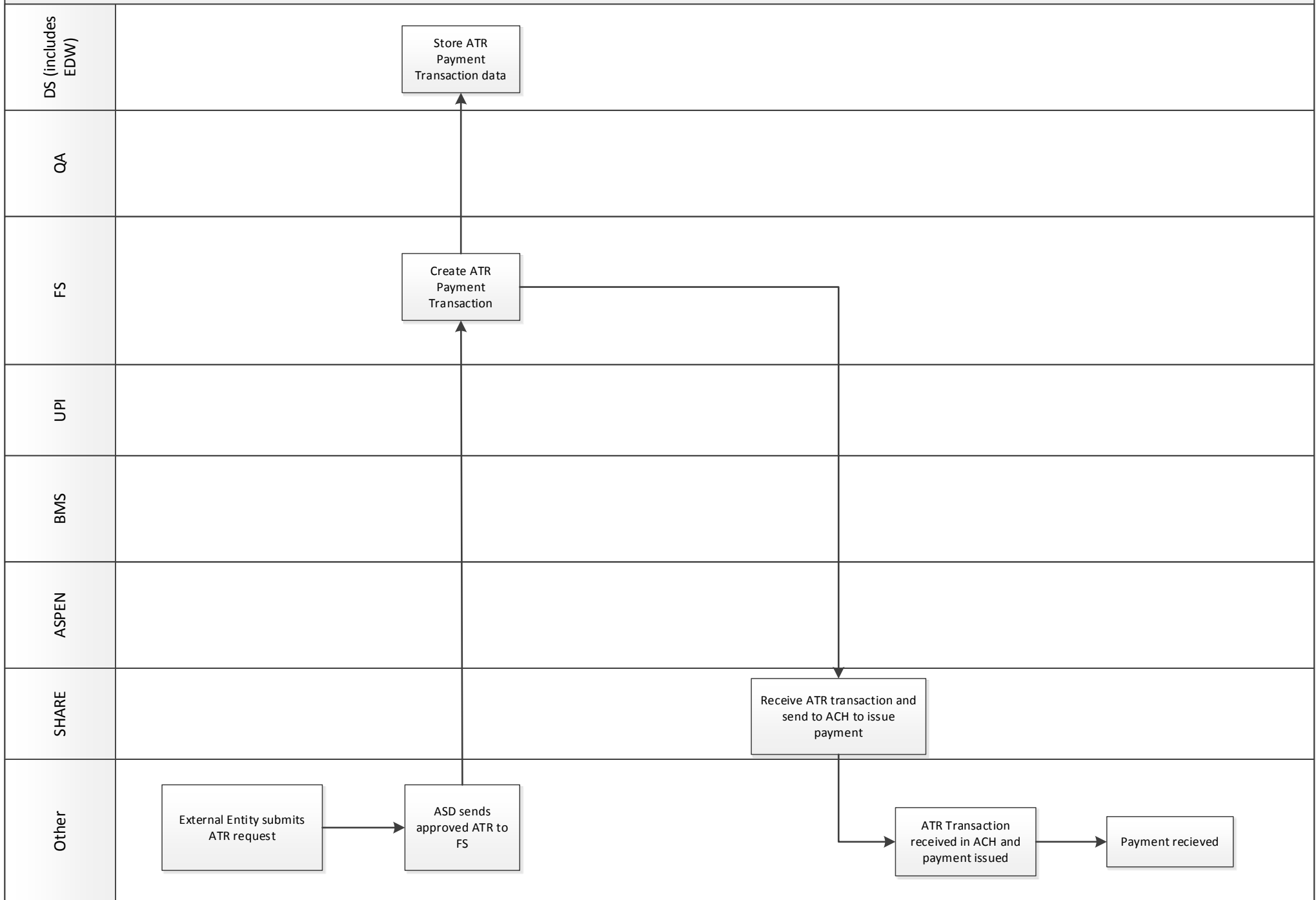


All Providers will be required to submit a separate file for FFS claims as well as each MCO. The SI will assign Unique ID and send the files to the MCO or FFS Contractor.

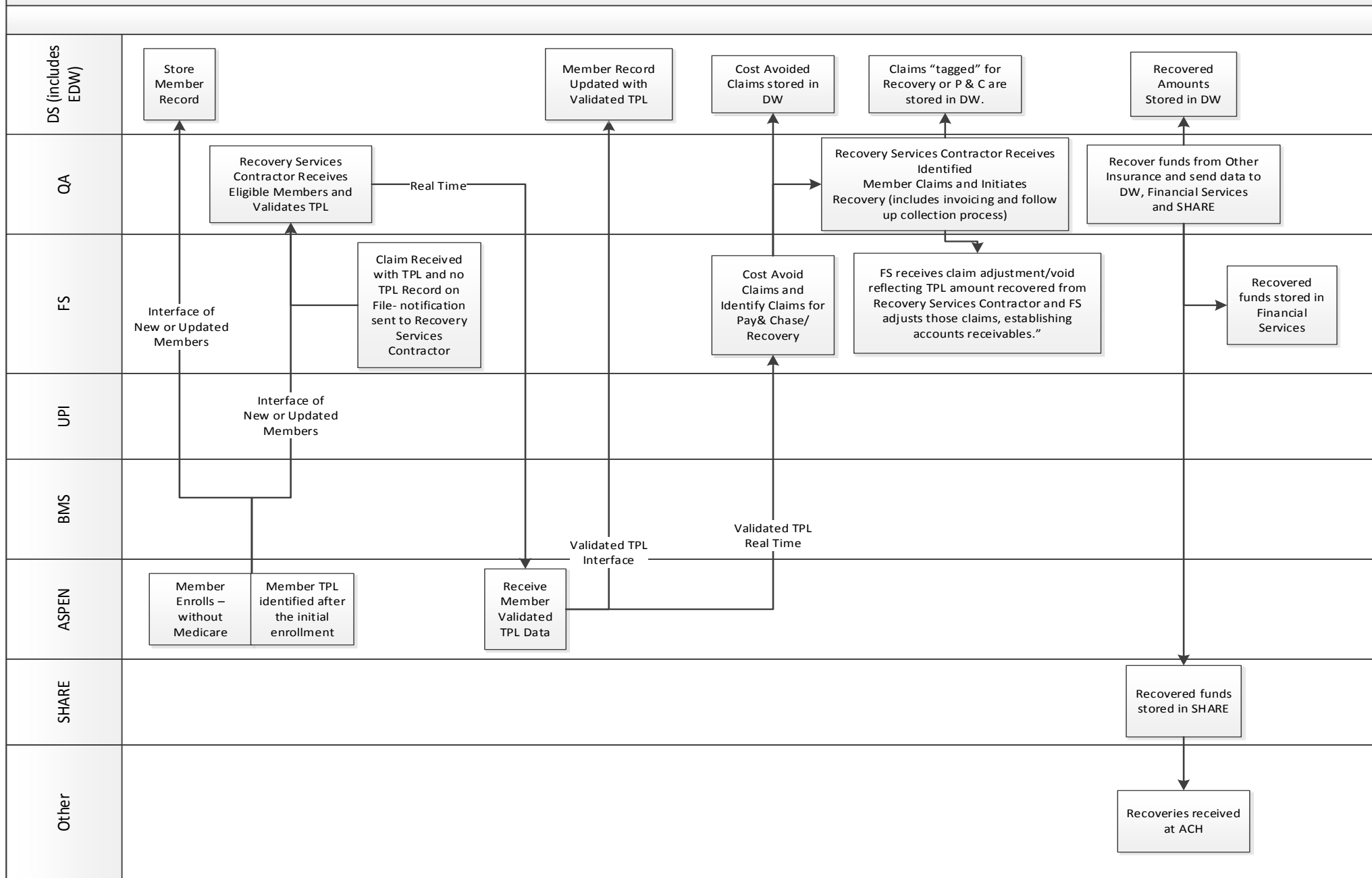
Capitation Process



Other Payments

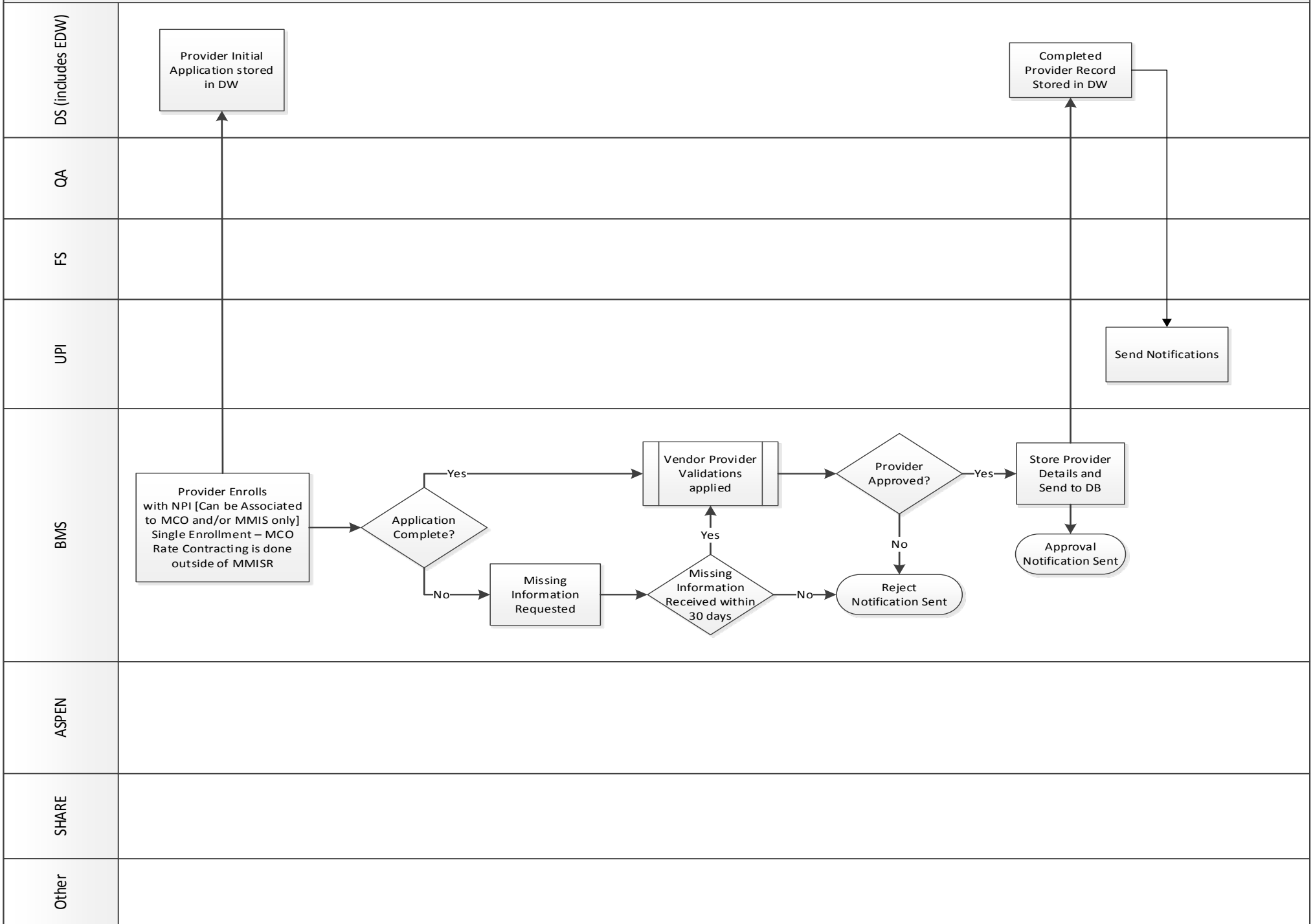


Third Party Liability (TPL)

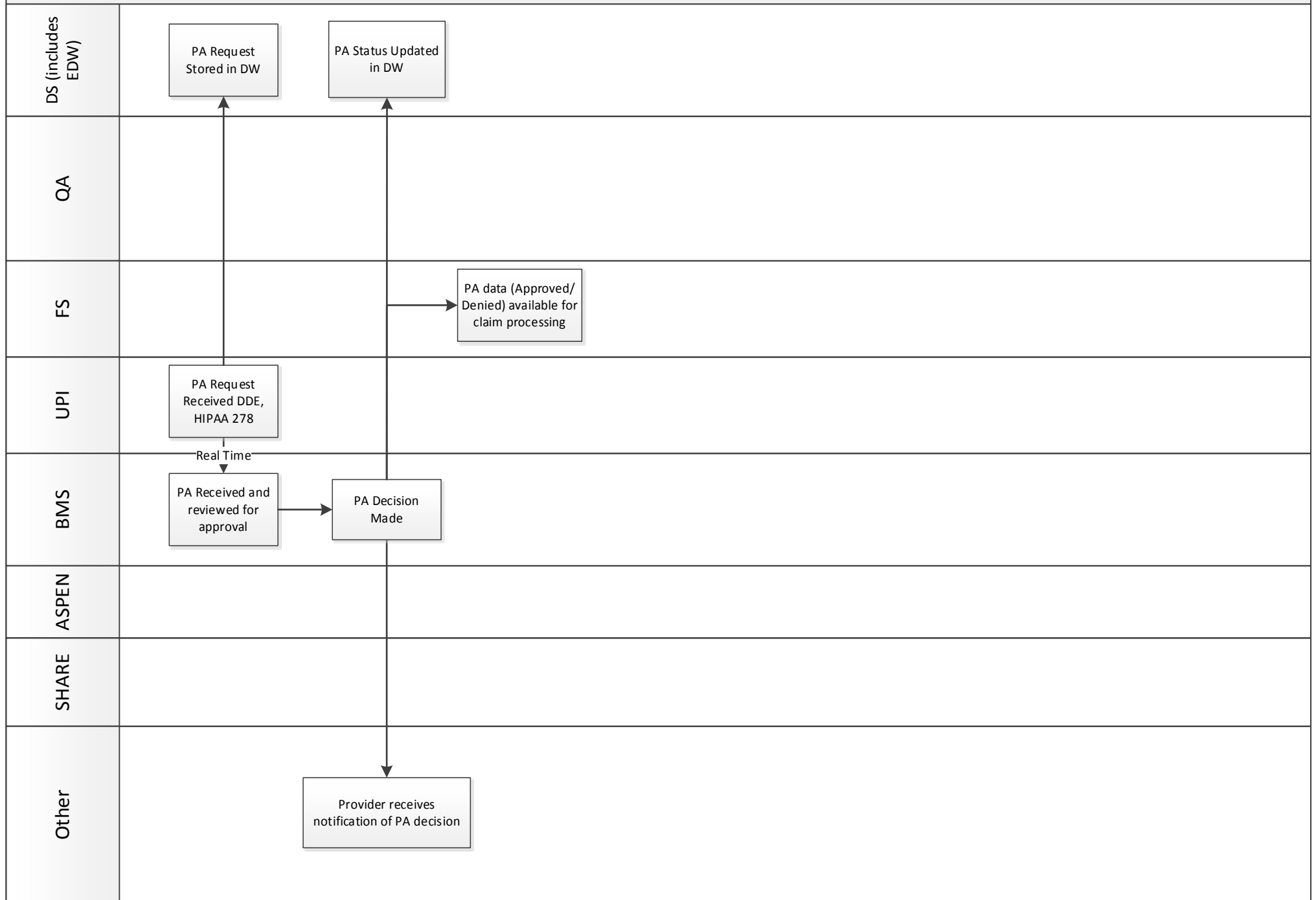


DSH, UPL, SNCP all work the same way – calculated outside and payment is just issued through the MMIS
 HR, IHS supplemental payment – calculated outside and payment is just made through ASD

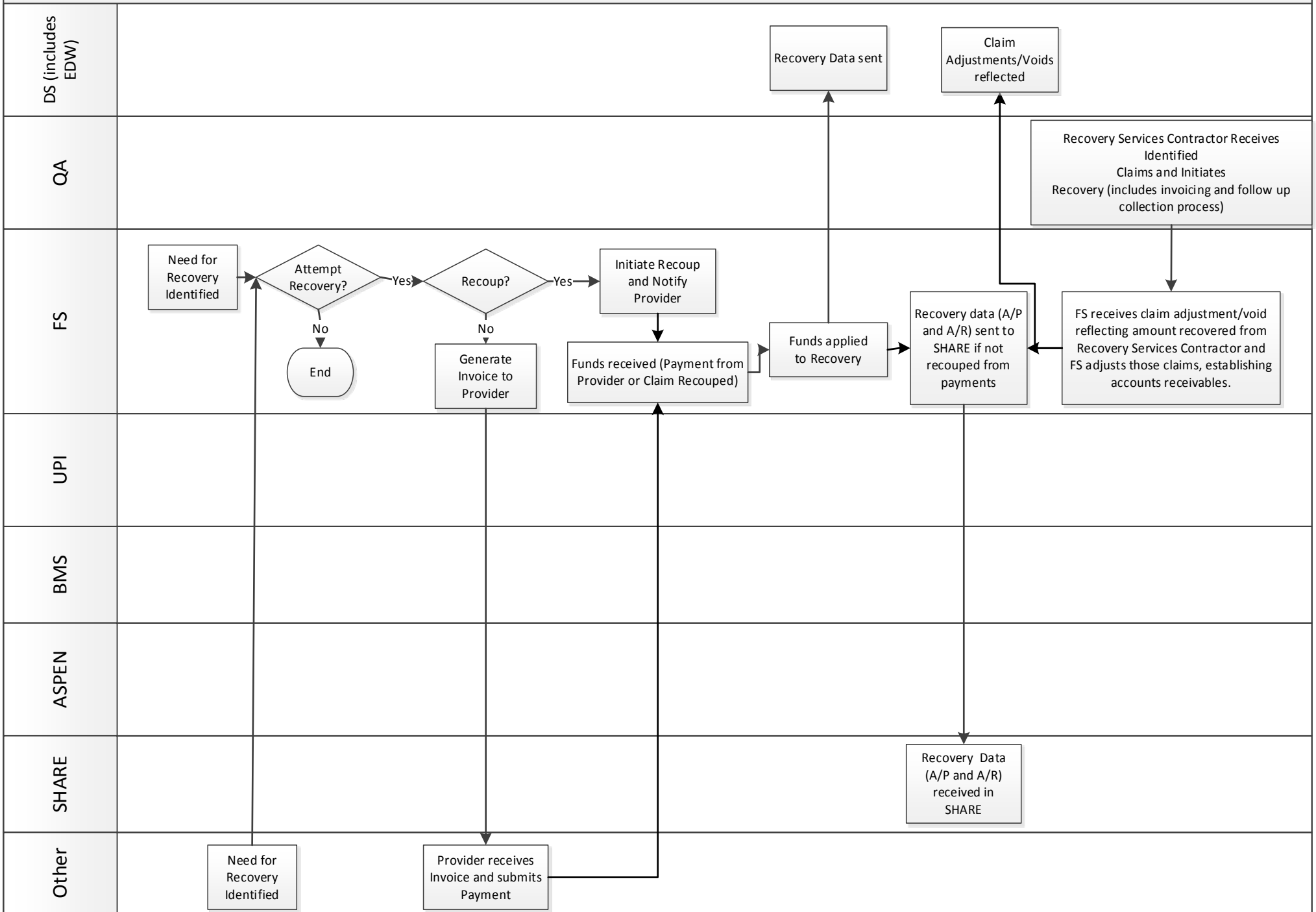
Provider Management



FFS Prior Authorization (PA) – MCO PA done in MCO System



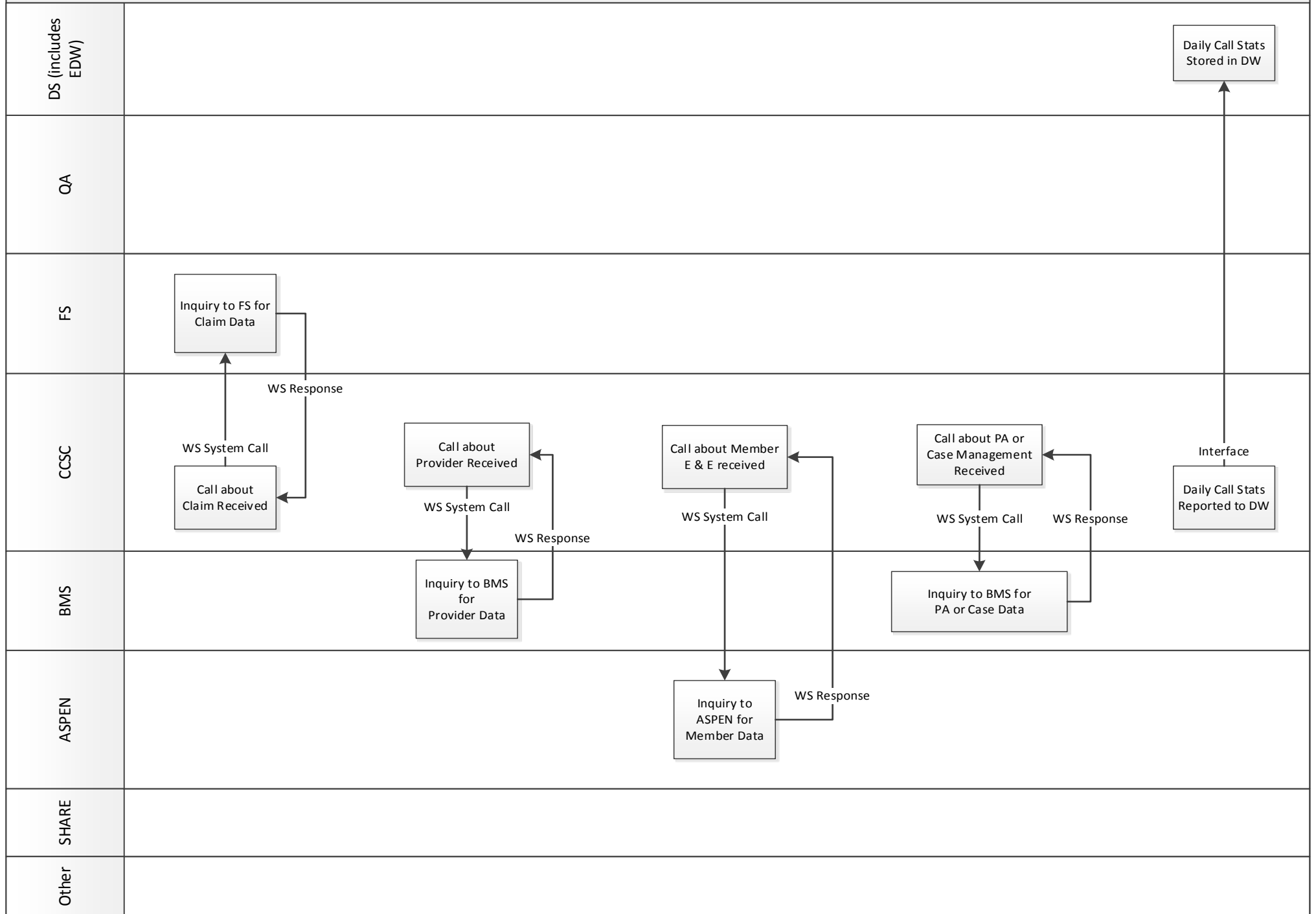
Other Recoveries



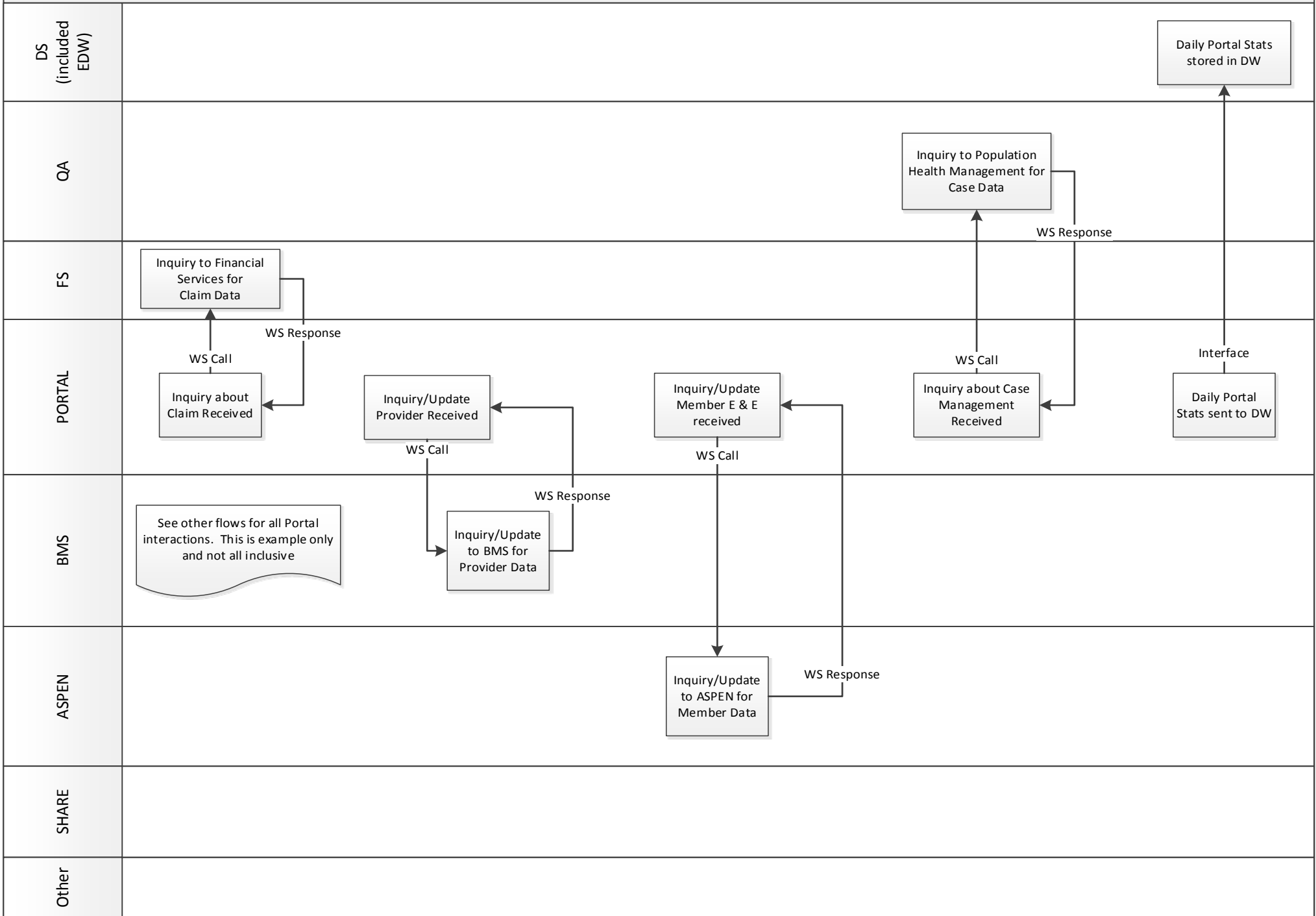
Reporting

DS (includes EDW)	<pre>graph LR; A[Scheduled Report Generated and Available for Viewing] --> B[Notification Report has Generated is Sent]; B --> C[Super User Completes Ad Hoc Query and Views Report]; C --> D[DS stores Ad Hoc Query for future use]; D --> E[Enterprise Partner Access to Reports and Data]; F[Ad Hoc Reports are not store in DS. The query can be stored for reuse but not the results];</pre>
QA	
FS	
UPI	
BMS	
ASPEN	
SHARE	
Other	

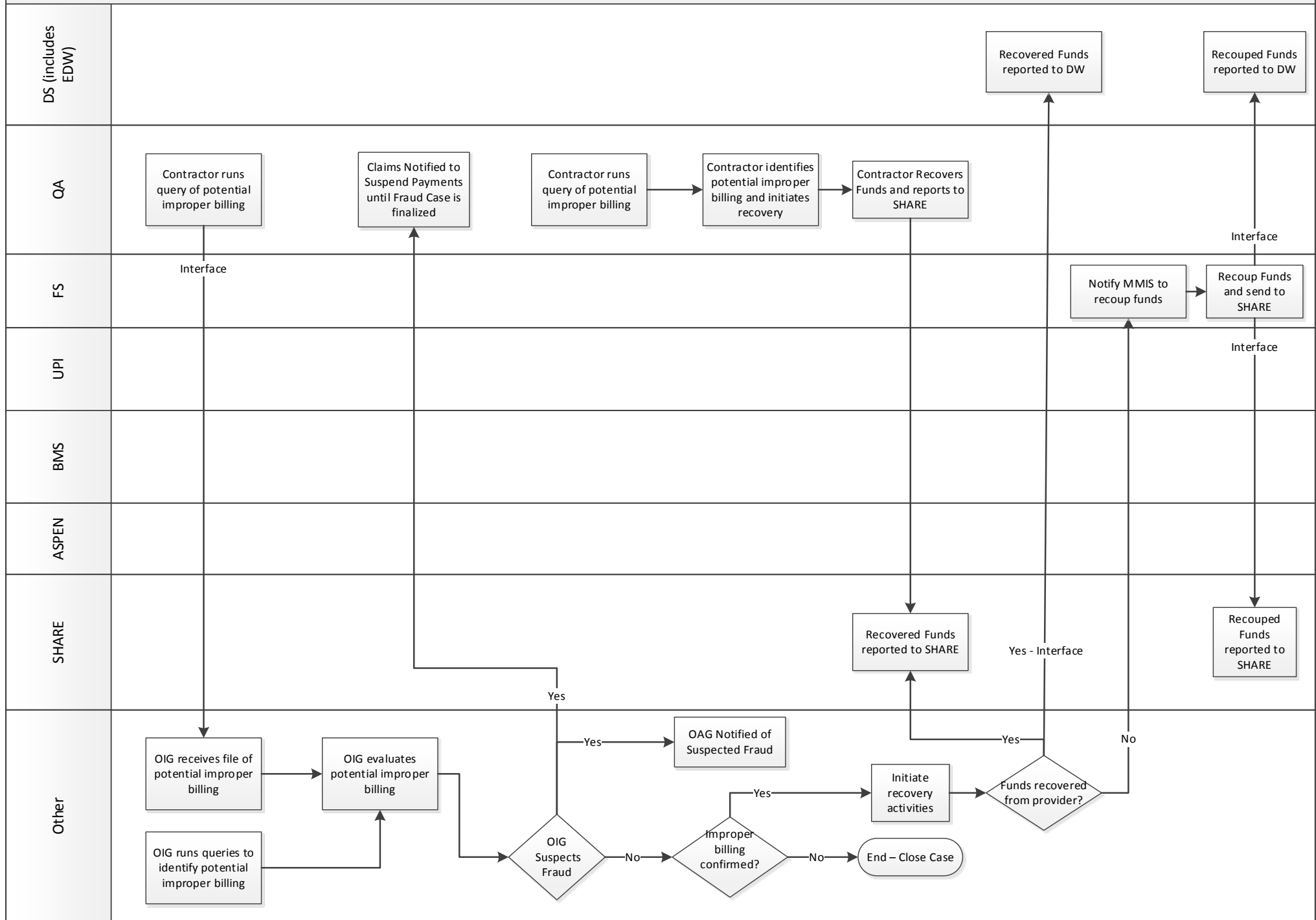
Consolidated Customer Service Center (CCSC) [Web Calls and Responses through ESB not direct]



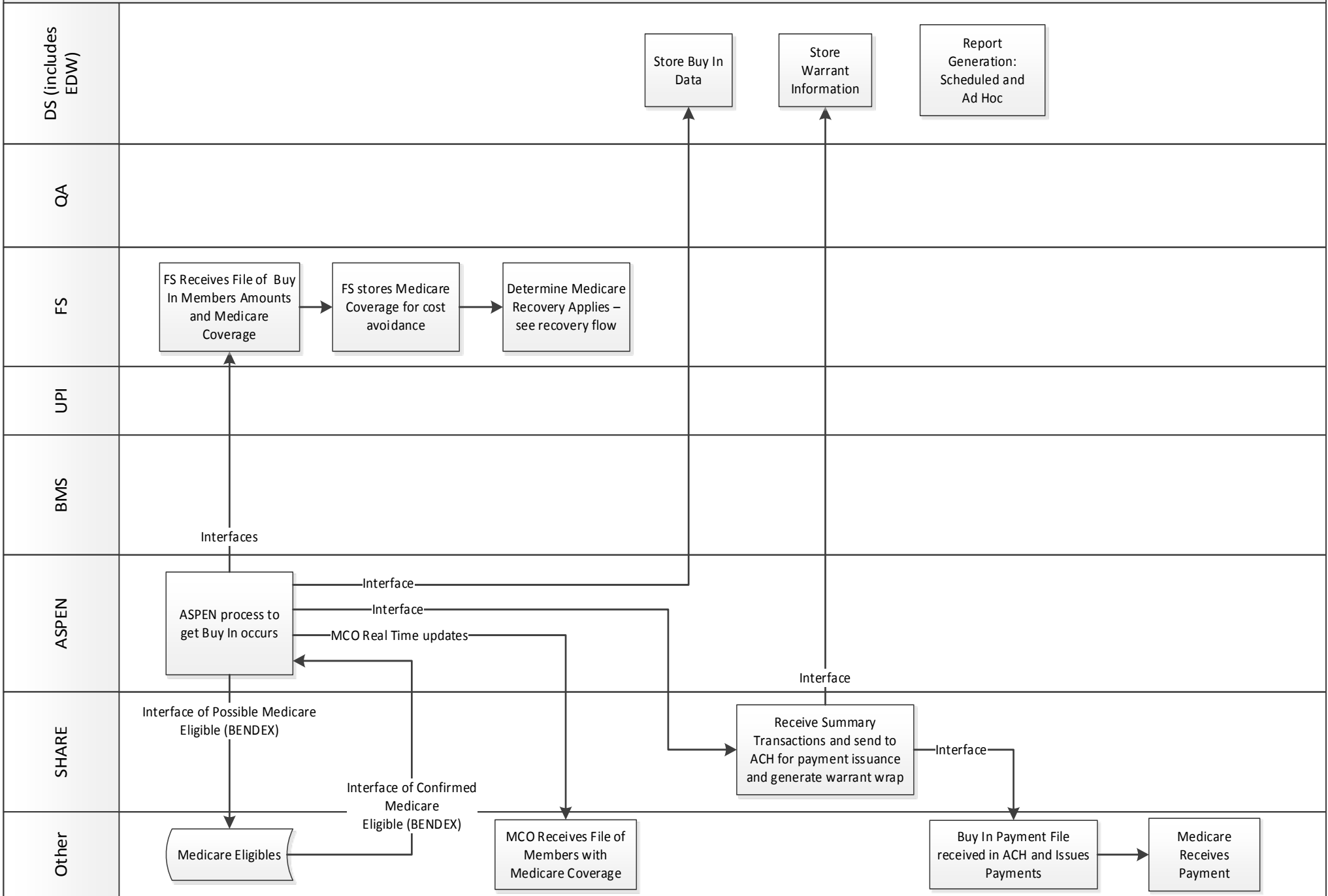
Portal Inquiry (Web Calls and Responses through ESB not direct)



Program Integrity



Buy In



Presumptive Eligibility (Provider Eligibility)

DS (include s EDW)	
QA	
FS	
UPI	<p>PED Applies to perform PE enrollments</p>
BMS	<pre> graph TD Start([End]) --> Eval[Application Evaluated] Eval --> Cond{Training & Code of Conduct completed} Cond -- No --> End1([End]) Cond -- Yes --> Notify[Send Notification of Approved PED to ASPEN] Notify --> Comp[MAD performs monthly analysis to confirm compliance with Code of Conduct and MOSAA completion] Comp --> Compl{PED compliant?} Compl -- Yes --> End2([End]) Compl -- No --> Terminate[Send PED end to ASPEN] </pre> <p>Real Time</p>
ASPEN	<p>PED Established in ASPEN to do PE through Portal</p> <p>PED terminated in ASPEN from doing PE</p>
SHARE	
Other	

Presumptive Eligibility (Member Application)

DS (includes EDW)	
QA	
FS	
UPI	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; text-align: center;"> PED Establishes PE for child or pregnant woman </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> PED performs MOSAA (Complete Medicaid Application) for child or pregnant woman previously enrolled with PE </div> </div>
BMS	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> Real Time ↓ </div> <div style="text-align: center;"> Realtime ↓ </div> </div>
ASPEN	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; text-align: center;"> Member established in ASPEN with PE for up to 60 days </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> Member received in ASPEN and goes through normal enrollment process </div> </div>
SHARE	
Other	