LM Advisory Board Minutes
Time/Date: 9:30a-12p, Friday June 29, 2018
Location: First Floor Large Conference Room, NW Valley Public Health Office
7704 2nd St. NW, ABQ (main number: 505-897-5700)
To call in: 641-715-3200, Passcode: 916237#

Present: Elena Campili-Stauss, Karen Marie Brown, Sarah McKinney, Katie Avery, Katrina Nardini, Jessi Sanchez
Absent: Louise Self, Jessica Frechette-Gutfreund, Felina Ortiz, Carolina Nkouaga, Sarah Gopman
Guest: Abigail Eaves

Minutes Approval (Katrina) - Conditionally Approved

Board member update (Katrina)
• Karen Brown and Sarah McKinney will have their last meeting in September 2018.
• Openings in September 2018 for 2 new board members
  o Please email Katrina with any suggested consumer member applicants

MCO reimbursement issues/newborn screening kits (Katie/Louise)
• The LMs are always considered out-of-network providers and are never considered in-network unless they have a contract with an MCO to become in-network. This is rare. To be in-network, needs to have malpractice insurance.
  o Kay will send metabolic screen when asked at no cost; this is a change.
  o Medicaid covers cost for pts of metabolic screen; private insurance is a bit different
  o Molina is not paying out to anyone

Medicaid Claims Reimbursement Training Update – Including Update from Abigail regarding
• With out-of-network costs the minimum deductible is typically always above the actual cost of a homebirth therefore nothing is being paid out/billed to the insurance company.
• Hearing screen and metabolic kit issues
  o Need names on the declining hearing screen form
  o Need to ask question on metabolic screen form:
    ▪ “When will you do the 2nd metabolic screen?”
    ▪ “Was hearing screen done – yes or no?”

New 2019 Contract (Katie/Abigail)
• Dar A Luz is getting paid, but it is still a tricky billing situation. Abigail is working with Carrie Bradley at MAD who is changing the billing coding in their system so that claims will match up correctly and follow a proper paper trail with correct billing codes.
  o She did submit a Medicaid claim and was paid. With Presbyterian most claims are getting paid.
  o Different billing is done depending if it is primary Medicaid and secondary Medicaid or just primary Medicaid alone. Also different if commercial insurance.
Blue Cross/Blue Shield (BC/BS) is a single case agreement and not a contract agreement and is decided per case. There is no centennial contract with BC/BS (they are waiting for this contract).

Dar A Luz has a contract with Molina and has had one since their beginning, so has not had any issues with them.

- Trying to change billing so claims talk to each other and can bill the same way.
- As of January 1, 2019 there will be 3 MCOs representing NM Medicaid (Centennial 2.0): Western Sky, Presbyterian, and Blue Cross/Blue Shield; Molina and United have been dropped.
- Abigail offered to be liaison between MCOs and BOP (OOH births); wants fee schedule that gets paid.
- Office of Superintendent of Insurance should weigh in on insurance and say “OOH birth not covered.”
  - ACA care: says should cover services for licensed providers

Procuring Medication update (Katie)
- OGC was going to talk to BOP legal. That position is appointed by the Attorney General office.
- No meeting has occurred yet. DOH is working on getting this set-up.

Student Handbook update (Katie/Louise)
- Student Handbook needs to be updated. Looking at volunteers for this work to begin in the fall.

Guidelines update (Katrina)
- Work team is updating a few things on the final draft
  - Katie will be done with reviewing guidelines by July 15, 2018

New business:
- Work team projects (Katrina)
  - Student handbook and training on website
  - Louise, Carolina, and Karen volunteered to work on student handbook

- BWRF
  - Need to add LMs

- CEUs
  - Will use CE Broker for LMs (and CNMs).

Next meeting: Sept 14, 2018 in Santa Fe