



Parents Reaching Out Health Care Tips 4

Navigating the Medicaid System

Parents Reaching Out provides resources that focus on helping families make informed decisions about the care and education of their children. Keeping your family healthy means knowing how to navigate the health care system and talk with your doctor or other providers. We hope these tip sheets will give you the information you may need to access the best, most cost-effective medical and related services to meet the needs of your family.

*One of the most important tools to help you find your way through the Medicaid System is the Member Handbook that is provided to you by your Managed Care Organization (MCO). Read and familiarize yourself with your **Member Handbook**. It is a good resource for when you have questions.*

When do I call Member Services or Care Coordination at my Managed Care Organization?

- If you need help with multiple appointments, transportation, have a lot of medical services or need help coordinating your care.
- To request a change in your Primary Care Physician (PCP) at any time.
- To make complaints.
- You can also make complaints by calling the Medicaid office: 1-888-997-2583

Tips for working with your Primary Care Physician (PCP)

- When you call to make an appointment, you may request a longer appointment time if you have concerns regarding your child's health or if you need extra time to ask questions.
- You have the right to a second opinion, if you disagree with your provider, or if you want a different provider to look at your treatment plan. There is no charge if the provider is in the network, but you will need a referral from your PCP.
- If you need to see a specialist, it must be within the network. If there is not a specialist in the network, your PCP will send a form to your MCO for approval.

Other important information:

- In order to get medications paid for that are not on the formulary list you must have prior approval from your Managed Care Organization (MCO).
- To obtain durable medical equipment, your Primary Care Physician (PCP) will have to get prior approval from your MCO, and you will need a referral.
- If you are traveling outside of NM but within the United States & need care, your MCO will cover emergency services. Contact your MCO as soon as possible to let them know.
- The MCO will pay for cosmetic dentistry if deemed medically necessary by the dentist, and the dentist must get prior approval.

"Health Care Tips" are publications of Parents Reaching Out and developed under a grant from the Center for Medicare and Medicaid Services (CMS). Views expressed do not necessarily represent their policy and should not be assumed to be an endorsement by the Center for Medicaid and Medicare Service

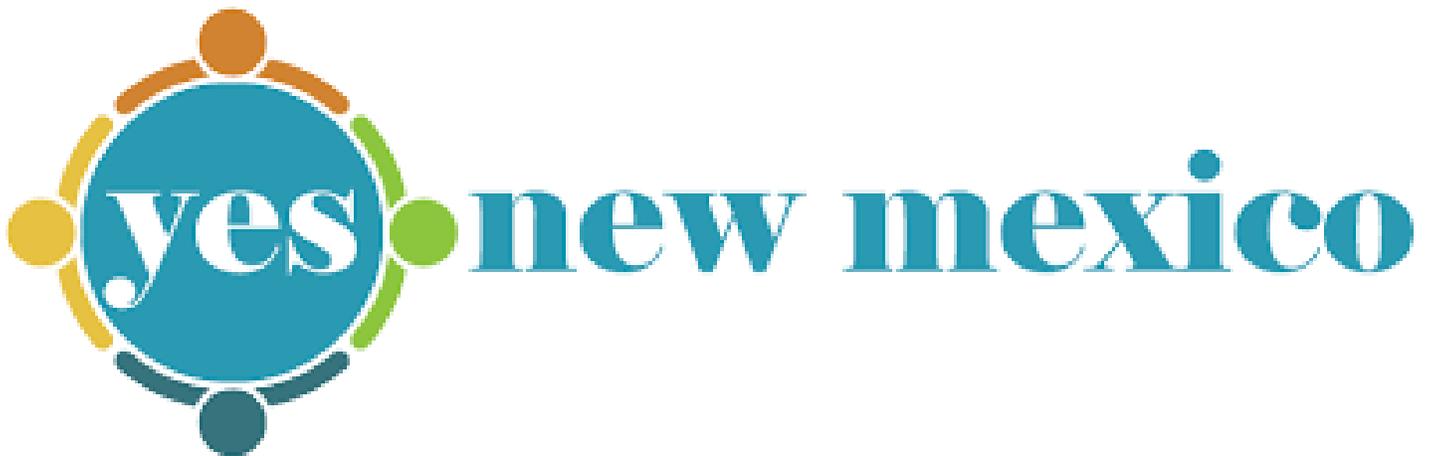
The Managed Care Organizations in New Mexico as of 2019:

- Blue Cross Blue Shield Centennial Care – 1-866-689-1523
- <https://www.bcbsnm.com/community-centennial/>

- Presbyterian Centennial Care – 1-888-977-2333
- <https://www.phs.org/health-plans/centennial-care-medicaid/Pages/default.aspx>

- Western Sky Community Care – 1-844-543-8996
- <https://www.westernskycommunitycare.com/>

Usually, you would have to wait until open enrollment to change your MCO, although members, including children with special health care needs may request to “break a lock-in”. You would need to write to the Medicaid office and make that request.



<https://www.yes.state.nm.us/yesnm/home/index>

New Mexico Medicaid Portal

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