ACQ (ADVISORY COUNCIL ON QUALITY)
MI VIA VENDOR STAKEHOLDER COMMITTEE MINUTES

3/10/2026

Attendees: Angelique Tafoya, Abby Aguilar, Alexis Hernandez, Andrea Perea, Cassandra DeCamp, CDD Raton, Cristalina Ford, Diane Brown, Eddie Romero, Ermanda King-Begay, Jennifer Hollins, Jennifer Madrid, Jessica Gutierrez, Jessica Jaramillo, Jim Copeland, Johanna Armendariz, Karen Garcia, Kathy Briseno, Molly Duersch, Nalisha Dickson, Steve Wrigley, Tonya Abernathy, Tracy Perry

State Partners: Elaine Hill, Selina Leyba

Discussion

Opening, agenda, and chair transition

- Angelique Tafoya reviewed the agenda and materials distributed ahead of the meeting, including an FAQ, House Bill 357 information, February meeting minutes, and the January Mi Via newsletter. She reminded attendees that she will roll off the ACQ on June 30th and is seeking an ACQ committee member to chair this committee before her departure.

Review of action items from the February 10th minutes

- The group walked through action items captured in the minutes, including requests to send billing issue examples to Selena and Elaine, confirmations about FAQ/newsletter distribution, and corrections to attendee name errors in the minutes. Assignments recorded for Selena and Elaine were recited, including consulting Conduent on billing forms, confirming GRT visibility in FOCoS, and sharing a hospitalization exemption memo.
- Billing and claim denials remain a standing agenda item and members were asked to send concrete examples to Selena and Elaine.

Billing identifiers and Turquoise Claims timing

- Selena sought clarification whether minimum billing requirements should reflect the current system or the forthcoming Turquoise Claims platform, noting Turquoise Claims launch communications and office hours with a March 23 go-live date. The group agreed to confirm current guidance and then update it for Turquoise Claims, and Selena committed to emailing clear directions about required claim identifiers (TCN, name, DOB, Medicaid ID) for claims research.
- Turquoise Claims email was referenced, and Angelique forwarded the email she received to the group after the meeting concluded.

GRT handling, denials, and vendor packet/invoice requirements

- Discussion turned to GRT updates and denials; Selena explained that FOCoS receives GRT updates via tax/revenue feeds and that errors should be emailed to the Mi Via systems manager, Deanna DeHerrera, for Conduent corrections. Vendors reported inconsistent RTPs and denials tied to GRT labeling and invoice line items, including specific requests to label GRT as T2033-GRT, and Selena agreed to verify vendor packet requirements and resend memos on invoice line-item formatting.

Conduent example and immediate billing clarifications

- Jessica agreed to locate and send an example to Selena for Conduent review to clarify billing/GRT treatment, and Selena instructed that Melanie be CC'd on the example so Conduent can be engaged for specific clarification.

DDSD communications and contact sharing

- Selena reviewed the need for Mi Via vendors to be added to DDSD communications and confirmed Tammy is the primary distributor; Angelique noted contact details are in the February minutes and will be re-posted to the chat for accessibility.

GRT testing contacts and auto-generated budget visibility

- Selena named Deanna DeHerrera as the contact for auto-generated GRT testing issues and committed to adding her information to the chat, while acknowledging uncertainty about who can view auto-generated GRT budget goals and promising follow-up.

Data migration and claims system transition

- Selena noted an outstanding item regarding confirming the database's capability for claims migration when switching to Turquoise Claims, with limited confirmation so far that claims history is being considered for incorporation.

SSP sharing project and vendor access

- Elaine Hill explained the SSP-sharing project status: the final draft has been submitted, logistical work is underway to divide budgets and email relevant sections to IHLS providers, and the approach aims to balance vendor access with participant privacy. She said the project will be communicated back to consultants and this group when finalized.

Budget access concerns and nonprofit GRT discrepancies

- Vendors and consultants discussed inconsistent SSP/budget language about GRT inclusion; Selena and Angelique acknowledged varying vendorships and committed to issue formal guidance to consultants and provide a non-profit vendor list to prevent incorrect GRT insertion into budgets.
    - A memo and nonprofit vendor list will be issued to consultants clarifying when GRT must or must not be included in budgets

Timely records memo and Home Studies

- Jessica requested a follow-up discussion on Tammy's memo about timely records and 48-hour entries, and Angelique asked for the memo date as a preface to that discussion. The memo was sent out in a distribution blast from Tammy Barth on 3/03. The memo was shared on the screen, and the timeline was discussed at length. This is not a "new" requirement, but rather one that will now be audited for possible claw backs if documentation isn't completed in a timely manner. Concerns were shared regarding the difficulties of this oversight. It was requested that DDSD issue a memo to providers regarding this requirement to alleviate pushback on vendor agencies.
- DDSD explained they are evaluating home studies and are not moving forward at this time, and they described a PERM audit that retrospectively reviewed three years of claims and found missing or retroactively created documentation, prompting the memo for timely billing entries. The state explained the 48-hour documentation requirement applies in business hours, provided an example for consultant visits, and emphasized accuracy improves with prompt documentation.
- The documentation requirement applies across programs, including Mi Via and the DD Waiver, and it is sourced from CMS.
- The memo requiring timely service documentation was issued after a CMS PERM audit finding that provider documentation was missing or created after the fact.
- Staff clarified the requirement spans Mi Via and DD Waiver services and noted difficulty recouping Mi Via funds when participants or providers are no longer in the system. Providers raised enforcement concerns,

including vendor variability, rural connectivity challenges, and whether the state will apply the rule uniformly; staff said they will perform internal audits and request documentation when needed.

- Missing documentation can force the state to repay federal funds, and the state can recoup funds from DD waiver agencies, but not easily from Mi Via participant-paid services.
- The state is enforcing a 48-hour documentation requirement measured in business hours and expects documentation to be completed promptly for accuracy and billing support.
- Participants sought clarity about whether time-in/time-out is required for in-home living supports, noting those services often run 24 hours; the memo shows time-in/time-out for consultants but not for vendors, prompting the need for clearer guidance and possible memo amendment or clarification. State staff agreed to provide clarification and to follow up with providers after the meeting.
- Providers asked whether agencies or the EOR decide not to bill when notes are missing/late; staff indicated agencies typically manage billing decisions but committed to clarifying the policy and to consult Deanna, the memo author, for definitive guidance. The state reiterated the 48-hour rule and noted they might need to define any exception process.
- Karen asked where to send IHLS logs for review; Elaine agreed to determine the recipient and requested contact information from Karen, while Selina confirmed audits will be handled by Deanna's team and invited providers to submit questions for an FAQ. The state committed to issuing follow-up memos if systemic issues are discovered during audits.

- **Information from Teams chat**:
  - Tammy Barth
    - tammy.barth@hca.nm.gov
  - Deanna Herrera
    - deanna.deherrera@hca.nm.gov
    - 505-629-7260
  - Selina Leyba
    - 505-372-9624

- **Action Items:**
  - DDSD:
    - Meeting participants will send Selena and Elaine examples of billing issues and claims denials for Conduent review.
    - Selena will:
      - email the committee clear direction on the required claim identifiers and billing information format for research (TCN, name, DOB, Medicaid ID) on denied claims
      - confirm whether vendor packets must include GRT and will follow up with Conduent or relevant teams to verify the requirement
      - resend memos and communications that specify GRT invoice formatting and the need for two separate line items (base and GRT) on invoices
      - follow up and confirm who can view auto-generated GRT budget goals and communicate the correct answer to Angelique
      - issue a memo to consultant agencies and provide a list of nonprofit vendor agencies clarifying when GRT should not be included in budgets
      - reach out to vendors via this committee if the decision about home studies changes
      - issue a frequently asked questions document if providers submit questions to the state regarding the recent memo (3/03)
    - Elaine will:
      - locate and share the original memo on hospitalization exemptions with the committee
      - share finalized SSP-sharing guidance and logistics with consultants and this committee
      - consult with Deanna to clarify who determines whether a provider can bill when notes are not submitted within 48 hours
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- Jessica Gutierrez will locate and send the example to Selena for Conduent clarification and follow-up as needed
- Karen Garcia will provide her contact information in the meeting notes so the state can advise where to send the IHLS log for review.
- Deanna's audit team will serve as the contact for documentation requests and will conduct the internal audits described by the state.
- Website to include Mi Via?

Next Mi Via Vendor Committee Meeting: April 14th, 2026

Join the meeting now

Meeting ID: 267 837 093 271 7

Passcode: cs2FZ7vA