



True Health New Mexico Provider Connection

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- Our medical management resources are here to help you with patient care
- 2019 brings important pharmacy and medical drug benefit changes

Please forward this newsletter to all healthcare providers and administrative staff in your office.

We're working to help you focus on care delivery: A message from Mark Epstein, MD, Chief Medical Officer

The daily work of clinicians and their office personnel is increasingly burdened, whether due to the latest electronic medical record (EMR) implementation, specialist referral challenges, an unforeseen pharmacy-related formulary change or prior authorization requirement, or increasing expectation on satisfaction scores and the like. Recent posts among our physician colleagues reiterate a well-known phenomenon of “I’d rather just retire than live through another EMR implementation.”

As a physician-led health plan, we are very familiar with the day-to-day pains associated with simply working to deliver the best care possible to your patients. And as a health plan that invests heavily in our resources and staff to fully wrap ourselves around our insured population, we attempt daily to lighten your load wherever we can through the good work of our care coordinators, nurse care managers, disease managers, pharmacists, medical directors, and financial advisors, among others. All the steps your patients need to manage just to keep them in the highest state of health possible once they exit the exam room can be overwhelming and turn into additional burdens for you and your staff.

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2019 pharmacy changes for True Health New Mexico

The new year brings the following changes to the True Health New Mexico pharmacy benefit.

Formulary

The True Health New Mexico formularies (drug lists) are subject to change each year. For 2019, there will be two separate formularies for True Health New Mexico members: one for large group members and one for small group members. Members impacted by 2019 changes received notification letters in October 2018. Members may share their notification letter with prescribers when action is needed. When possible, letters will include alternative drugs that will be covered in 2019.

Zero-dollar generic list

True Health New Mexico covers select generic drugs to treat common chronic conditions at a zero-dollar cost share. This list may change each year. Members who are impacted by 2019 changes received notification letters in October 2018.

Medical benefit drug changes

Beginning **January 1, 2019**, True Health New Mexico will be adding coverage categories (preferred vs. non-preferred) for additional drugs that are reviewed *under the medical benefit*. New categories include the following: Factor IX Antihemophilic Factor Products, Erythropoiesis Stimulating Agents, Luteinizing Hormone-Releasing Hormone (LHRH), and Severe Asthma.

For all new-start patients, preferred agent(s) should be used first-line. Please note that existing authorizations will continue to be recognized, and patients stable on current therapy will not be required to change medication. ***This program is specific to drugs billed on the medical benefit and does not affect the pharmacy benefit.***

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Our satisfaction survey results show that you take good care of our members

Every year, True Health New Mexico asks members for their thoughts on and satisfaction with our provider network, our service to them, and the health plan in general. This year, almost 24 percent of those who received a survey responded. Some of the questions asked on the survey related to getting care quickly and when needed, as well as how well the member's provider coordinates their care and communicates with them.

[Continue reading for the survey results](#)

Handwritten paper claim submissions

Although we highly recommend filing claims electronically, some practices prefer to submit paper claims. **Please be advised that we will no longer accept handwritten claims.** Handwritten claims will be returned to you and will not be processed. You can ensure timely and accurate paper claim processing by using machine/computer generated printed forms. For a complete list of guidelines regarding paper claims, please refer to the [Provider Handbook](#) available on our website.

How will our members find you?

Keeping your practice information up-to-date is an important responsibility. Whenever you terminate a provider, add a new provider to your practice, or change your address or phone number, please let your Provider Network Relations Representative know. We have developed a reporting method using an Excel spreadsheet you can update and send to us via email when changes occur within your practice. Completing the roster spreadsheet takes very little time and ensures that members seeking your services have the most current information about your practice. Not sure what to report? Please contact your Provider Network Relations Representative for additional information.

- Find our most recent fax blasts, back issues of our provider newsletter, and useful writable PDF forms on our [Provider Forms & Other Resources page](#).
- Do you have an idea for a newsletter article? [Email the newsletter editor](#).

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