

Past newsletters are available on the NM Medicaid Portal under provider information at:
<https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm#Palco-Welcome>

September 8, 2021

Critical Updates

EVV Compliance / Compliance with Cures Act

Per the 21st Century Cures Act Federal Legislation, New Mexico was required to implement Electronic Visit Verification (EVV) by January 1, 2021. Approximately 60% of Self-Directed Community Benefit (SDCB) members are using EVV, but many others are not yet using the AuthentiCare system to clock-in and out for SDCB Personal Care (PCS) and Respite services. Caregivers for PCS and Respite are required to use AuthentiCare to record their time worked unless the employer of record (EOR) has an electronic timesheet exception. If you have questions about how to use AuthentiCare, the EVV system, please work with your Support Broker and Care Coordinator.

EOR Transition Packets

We have identified those individuals who have not submitted a completed EOR Transition Packet. Conduent will be sending EOR Transition packets to those employers in the coming weeks. Be on the lookout for that packet and please complete and submit it by 9/17/21.

By completing this EOR Transition Packet, you are authorizing Palco to be the fiscal/employer agent. This means that Palco will make sure all employer paperwork and taxes are submitted on your behalf to the Internal Revenue Service (IRS) as well as the NM Taxation and Revenue Department and the NM Department of Workforce Solutions.

After you have completed (and signed) all forms in the packet, please return the packet to Conduent via:

Fax: 1-866-302-6787;

Email: docprocessing@conduent.com; OR

Mail: Conduent

1720A Randolph Rd SE

Albuquerque, NM 87103

Major Issues and Resolutions

New Payment Request Form (PRF) and Invoices Submission Process

Conduent has provided a new way to submit your Payment Request Form (PRF) and invoices. Users can upload PRFs and invoices through the Medicaid Portal. This option is now available to users with a member/participant Medicaid number. No user ID or sign in is required.

This option is just another way to upload PRFs and invoices. The options to submit to the docprocessing@Conduent.com mailbox, via fax 1-866-302-6787 or by mail PO Box 27460, Albuquerque NM 87125 are still available.

You will receive a confirmation number once your upload has been successful. These uploads will be sent directly to the Conduent indexing queue for faster processing.

Please see steps below on how to submit your Payment Request Form (PRF) and invoices. If you have any questions please call the Consolidated Customer Service Center (CCSC) at 1-800-283-4465 then press 5.

Upload Payment Request Form tool

<https://nmmedicaid.portal.conduent.com/webportal/uploadPayment>

or
<https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm> Click on Upload Payment Request Form (PRF) on the left menu



New Mexico Department of Health
Coronavirus Update

New Mexico Medicaid
Coronavirus Update

New Mexico Medicaid Portal

Providers

HOME

PROVIDER

- Provider Login
- Provider Information
- FAQ
- E-News and Notices
- Links
- Contact Us
- Coronavirus Update
- Provider Search
- Chat with HSD
- Upload Payment Request Form (PRF)

Provider Information

Electronic Data Exchange (EDI)
Downloading Tips

What's new with EDI	Word	Adobe
ANSI ASC X12N 5010 Implementation Guides		
EDI Forms	Word	Adobe
EDI Form Description / Usage	Not Available	PDF Format
EDI Provider Trading Partner Agreement	Word Format	PDF Format
EDI Submitter Trading Partner Agreement	Word Format	PDF Format
EDI Authorization Form	Word Format	PDF Format

This new page allows completed Payment Request Forms and supporting documentation to be uploaded and submitted electronically on the web portal. No user ID or sign in is required.

New Mexico Medicaid Portal

Home Contact Us

GO

INFORMATION

[Provider Information](#)

[FAQ](#)

WEB REGISTRATION

PROVIDER ENROLLMENT

[Enroll Online](#)

[Check Enrollment Status](#)

[Download Enrollment Application](#)

[Upload License Attachment](#)

Upload Participant/Self-Direction Payment Request Form (PRF)

This page is a faster way to submit payment request forms (PRF). You must enter the participant Medicaid Card number in the first field below. Please enter the Vendor Federal Tax ID Number, if available. You can upload and submit a completed PRF form on this page. You will get a confirmation number if your submission is successful.

You can find a copy of the Participant/Self-Direction Payment Request Form (PRF) in [Self Direction](#) section

Please contact the Consolidated Customer Service Center (CCSC) at 1-800-283-4465 if you have any questions or need assistance.

Member/Participant Medicaid Card Number	
Vendor Federal Tax	

Upload Attachments
Submit

[Please click here to cancel attachments.](#)

Member ID and at least one attachment are required in order to submit

New Mexico Medicaid Portal

Home Contact Us

GO

INFORMATION

[Provider Information](#)

[FAQ](#)

WEB REGISTRATION

PROVIDER ENROLLMENT

[Enroll Online](#)

[Check Enrollment Status](#)

[Download Enrollment Application](#)

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Upload Participant/Self-Direction Payment Request Form (PRF)

• Member ID is required and must be 9-14 digits long.

• Please upload payment request form (PRF) attachment

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Member/Participant Medicaid Card Number	
Vendor Federal Tax	

Upload Attachments
Submit

[Please click here to cancel attachments.](#)

Each attachment may have a maximum size of 5 MB. It's recommended to attach PDF, JPG, TIF, PNG, and Word document files. Please do not attach ZIP files, PowerPoint, Excel or password-protected files.

New Mexico Medicaid Portal

Home
Contact Us

Search

GO

INFORMATION

[Provider Information](#)

[FAQ](#)

WEB REGISTRATION

PROVIDER ENROLLMENT

[Enroll Online](#)

[Check Enrollment Status](#)

[Download Enrollment Application](#)

[Upload License Attachment](#)

Upload Participant/Self-Direction Payment Request Form (PRF)

Provider Update — Mozilla Firefox

This page is not secure. <https://nmmedicaid.portal.conduent.com/webportal/updateDocumentUpload?docu>

Provider Update Documents - Add OTHER_PROOF Document

Description	<div style="border: 1px solid #ccc; height: 20px;"></div>
Document	<div style="border: 1px solid #ccc; padding: 2px;">Browse...</div> <div>No file selected.</div>

Each attachment may have a maximum size of 5 MB. It's recommended to attach PDF, JPG, TIF, PNG, and Word document files. Please do not attach ZIP files, PowerPoint, Excel or password-protected files.

Add
Reset

If submission is successful, then a confirmation page with web reference number will appear

New Mexico Medicaid Portal

Home
Contact Us

Search

GO

INFORMATION

[Provider Information](#)

[FAQ](#)

WEB REGISTRATION

PROVIDER ENROLLMENT

[Enroll Online](#)

[Check Enrollment Status](#)

[Download Enrollment Application](#)

[Upload License Attachment](#)

Upload Payment Request Form (PRF) CONFIRMATION

Thank you for your submission. Your reference number is listed below. Please allow 24 hours before using this number to request status of your submission. If you have ANY questions at all or would like to confirm status, please do not hesitate to contact the Consolidated Customer Service Center (CCSC) at 1-800-283-4465.

The Web Reference Number for your license update is NL7FREWNQWIG
The Submitted Date for your license update is Wed Jul 28 10:59:49 EDT 2021

 CENTENNIALCARE



