NETWORK CONNECTION
NOVEMBER 2026

YOUR VOICE MATTERS: COMPLETE THE PROVIDER SATISFACTION SURVEY

As a valued partner in delivering quality healthcare, your feedback is essential to helping Presbyterian better serve providers and the patients who depend on them. The Provider Satisfaction Survey offers an opportunity to share your experiences and help shape improvements that support your practice and enhance our partnership.

Your Feedback Drives Improvement

Feedback from providers helps inform decisions related to:

- Claims processing and payment services
- Prior authorization workflows
- Provider communications
- Credentialing and contracting processes
- Provider portal functionality
- Customer service and support resources

Strengthening Our Partnership

The Provider Satisfaction Survey gives you a voice in the decisions and improvements that affect your daily operations. Your feedback helps us:

- Understand provider needs and concerns
- Reduce administrative burden where possible
- Improve provider resources and tools
- Enhance the overall provider experience

Supporting Better Patient Care

Survey feedback helps us identify member barriers and opportunities that can lead to:

- Better coordination
- Improved access to services
- A more positive experience for providers and patients alike

A Few Minutes Can Make a Difference

The survey takes only a short time to complete, but the impact of your feedback extends throughout the year. When you receive the Provider Satisfaction Survey, we encourage you to participate. Your input helps strengthen our partnership so providers can spend more time on what matters most: caring for patients.



INSIDE

COVER
Your Voice Matters: Complete the Provider Satisfaction Survey 1

TAKE NOTE
2026 Provider Education Events 2
QuitNow New Mexico: Tobacco Cessation Resources 3
Path for Wellness Personalized Nutrition Coaching 3

PROVIDER SATISFACTION CORNER
Health Equity Training Series 3

FEATURE
Closing the Year Strong: Opportunities to Improve Patient Health 4

REGULATORY REMINDERS
Access to Care Starts with Timely Appointments 5
Verify Provider Directory Information Every 90 Days 5
Crisis Services: Supporting Accurate Documentation and Billing 6
Let's Connect 6

TAKE NOTE

2026 PROVIDER EDUCATION EVENTS

Upcoming Trainings

Providers and office staff are invited to attend a variety of trainings throughout the year.

Behavioral Health Provider Education Webinars

Thursday, Dec. 10, 5 to 7 p.m.
Friday, Dec. 11, 10 a.m. to Noon

Register Here

All contracted behavioral health providers and staff are invited to attend. Providers are required to attend one Provider Education Conference & Webinar Series training each year.

Physical Health Provider Education Webinars

Wednesday, Dec. 9, 9 to 11 a.m.
Thursday, Dec. 10, Noon to 2 p.m.

Register Here

All contracted physical health, long-term care, and Indian Health Services and Tribal 638 providers are required to attend one Provider Education Conference & Webinar Series training each year.

Behavioral Health Town Halls

Monday, Dec. 7, 1 to 3 p.m.

Register Here

Behavioral health providers are invited to attend quarterly town halls designed to present information to all areas of a practice, including administrative, billing, quality and clinical.

Value-Based Care Lunch and Learns

Tuesday, Dec. 8, 10 to 11 a.m.

Register Here

Session Topic: *Prenatal and Postpartum Measures (Prenatal and Postpartum Care [PPC] 1 and 2)*

Presbyterian Dual Plus Provider Training

Available year-round on demand

Access Training Here

All contracted providers who render services to Presbyterian Dual Plus (HMO D-SNP) members are required to complete this training. Office staff cannot complete the training on behalf of the provider.

Children in State Custody (CISC) Extended Provider Network Training

Available year-round on demand

Register Here

Presbyterian is working to build a robust enhanced provider network to treat CISC members. To join this network, providers are required to complete a series of CISC trainings and attest to their completion.

Cultural Sensitivity Training

Available year-round on demand

Register Here

Contracted providers and staff are encouraged to participate in Cultural Sensitivity training and may earn up to nine hours of free Continuing Education Units (CEUs).

For more information about training opportunities,
please visit the Presbyterian provider training page.

TAKE NOTE



REFER YOUR PATIENTS TODAY
Members can sign up at **quitnownm.org**, call 1-800-QUIT-NOW (TTY 711) or scan the QR code.

HELP YOUR PATIENTS QUIT NICOTINE WITH QUITNOW NEW MEXICO

QuitNow New Mexico is a self-paced, no-cost tobacco cessation program designed to help individuals (including youth and pregnant women) quit smoking or vaping and stay tobacco-free. Support is available by phone, text and online chat.

With QuitNow New Mexico, your patients can:

- Work one-on-one with a Quit Coach to build a personalized Quit Plan, manage triggers and stay motivated
- Participate in group coaching sessions for support, troubleshooting and celebrating milestones
- Access online videos and articles to track progress and reach goals

SUPPORTING MEMBER HEALTH THROUGH PERSONALIZED NUTRITION COACHING

Presbyterian's Path for Wellness Healthy Weight program through NationsNutrition delivers personalized, dietitian-led guidance to help members make meaningful, sustainable changes to their eating habits. The program offers Medicaid members a no-cost, evidence-based approach focused on small, practical changes that align with lifestyle, food preferences and health goals.

The program encourages members to:

- Make more nutritious food selections
- Understand balanced meal planning
- Lose or manage weight
- Increase physical activity
- Reduce the risk of type 2 diabetes through sustainable daily habits

In 2025, 77% of enrolled members actively participated in the program, and 53% achieved an average weight loss of **5.5% of their body weight**, a level associated with significant improvements in weight related health risks.

REFER YOUR PATIENTS TODAY
Patients can **sign up online** or call 1-855-249-8587. Refer patients directly **here**. Scan the QR code for more information.

PROVIDER SATISFACTION CORNER

HEALTH EQUITY TRAINING SERIES

Presbyterian offers year-round, free Health Equity Training Courses to employees and community partners.

Through a consultative training model, the Health Equity Training Program collaborates with Presbyterian teams and partnering organizations to provide health equity education that addresses identified challenges.

Topics include how to identify health inequities, the importance of cultural sensitivity, effective cross-cultural communication, eliminating racism and other forms of oppression, and trauma-informed care.

Virtual continuing medical education (CME) and continuing education units (CEUs) are available. Access course descriptions and schedules at phshealthequitytraining.org. Registration is required.

Groups can request a training or receive assistance by contacting the Health Equity Training team at healthequitytraining@phs.org.

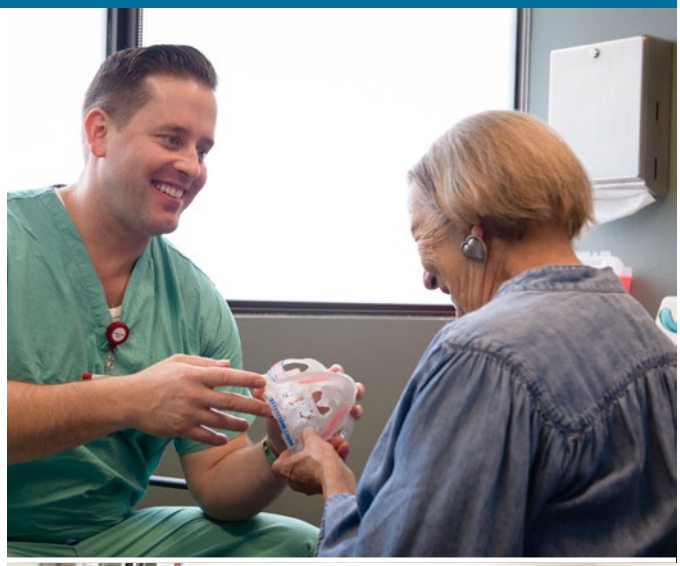
CLOSING THE YEAR STRONG: OPPORTUNITIES TO IMPROVE PATIENT HEALTH

As 2026 comes to a close, providers have an opportunity to reconnect with their patients and encourage them to stay on track with their healthcare needs. Year-end appointments offer valuable opportunities to address preventive care, routine screenings, vaccinations, follow-up care and other important aspects of overall health. Providers play an essential role in helping patients access timely care and remain engaged in their health and well-being.

Presbyterian values the impact patient engagement can have on health outcomes and encourages providers to make the most of every patient interaction. Whether discussing health goals, reviewing treatment plans, or identifying potential concerns, these conversations can help support continuity of care and ensure patients receive appropriate services and support.

At the core of any successful care experience is a strong provider-patient relationship. By fostering open communication and encouraging patients to actively participate in their care decisions, providers can help patients better understand their health needs and stay engaged in recommended care. Addressing barriers to care and connecting patients with available resources further improve access and adherence to treatment plans.

We appreciate the dedication of our provider network to supporting the health and wellness of our members. Through our continued partnership and shared commitment to high-quality care, we can help patients achieve healthier outcomes and ensure a strong start to the year ahead.







REGULATORY REMINDERS

ACCESS TO CARE STARTS WITH TIMELY APPOINTMENTS

Presbyterian is committed to ensuring that all members have timely access to care and that providers are meeting appointment access standards established by regulatory and contractual requirements. Presbyterian periodically conducts appointment availability ("mystery shopper") surveys to ensure that providers serving Turquoise Care members meet the appointment access standards outlined below.

Primary Care	
Appointment Type	**Standard**
Asymptomatic/Routine	Within 30 calendar days*
Symptomatic	Within 14 calendar days*
Urgent	Within 24 hours
*Unless the member requests a later time	

Behavioral Health	
Appointment Type	**Standard**
Initial assessment non-urgent	Within 7 calendar days*
Appointment following an initial assessment	Within 7 calendar days*
Non-urgent follow-up	Within 30 calendar days
Urgent	Within 24 hours
Face-to-face crisis	Within 90 minutes
*Unless the member requests a later time	

Specialty Care	
Appointment Type	**Standard**
Symptomatic	Within 14 calendar days*
Asymptomatic	Within 45 calendar days*
Urgent	Within 24 hours

Maternity and Prenatal Care	
Appointment Type	**Standard**
Urgent	Within 24 hours
Routine first trimester	Within 14 calendar days
Routine second trimester	Within 7 calendar days
Routine third trimester	Within 3 business days

Diagnostic laboratory, imaging and other testing	
Appointment Type	**Standard**
Routine outpatient appointment	Within 14 calendar days**
Walk-in	Consistent with clinical urgency
Urgent	Within 48 hours**
**Consistent with clinical urgency	

Dental Care	
Appointment Type	**Standard**
Asymptomatic	Within 60 calendar days*
Symptomatic	Within 14 calendar days*
Urgent	Within 24 hours
*Unless the member requests a later time	

Prescription Fill Time	
Appointment Type	**Standard**
In-person	Within 40 minutes
Practitioner phone-in	Within 90 minutes

REMINDER: VERIFY PROVIDER DIRECTORY INFORMATION EVERY 90 DAYS

In accordance with the No Surprises Act, as of Jan. 1, 2022, all providers are required to verify their directory information with Presbyterian every 90 days. **The next deadline is Dec. 27.** There are **no exemptions** from this federal requirement.

Physical Health Providers: Log in to the provider portal to make updates. Physical health providers can also request delegate access. For questions, contact providerdemo@phs.org or view this guide.

Behavioral Health Providers: Log in to the behavioral health portal. For questions or assistance, contact PHPTCBH@magellanhealth.com or view this guide.

Please note that all currently rostered physical health medical groups and behavioral health organizations should continue to follow the current roster process.



REGULATORY REMINDERS

CRISIS SERVICES: SUPPORTING ACCURATE DOCUMENTATION AND BILLING

Crisis services are designed to provide immediate intervention for members experiencing an acute behavioral health, psychiatric or substance use crisis. Available 24 hours a day, 7 days a week, these services may include telephone crisis intervention, mobile outreach crisis response, and face-to-face crisis assessment and stabilization.

Accurate documentation and billing of crisis services are essential to support medical necessities, ensure compliance with billing requirements, and reduce the risk of claim denials, recoupments or audit findings.

Crisis services may be appropriate when a member presents with:

- Suicidal or homicidal ideation
- Severe emotional distress or loss of behavioral control
- Acute worsening of mental health or substance use condition
- Need for mobile crisis response to assess, intervene and support stabilization in the community

To support accurate billing and medical necessity:

- Describe the member's crisis presentation, including symptoms and risk factors
- Document the intervention provided, such as assessment, stabilization or safety planning
- Record start and stop times, as well as the service location
- Include outcomes, referrals and follow-up plans and other treatment recommendations, when applicable
- Verify benefit coverage and applicable billing requirements and billing restrictions

Codes used for crisis assessment, intervention and stabilization services:

Crisis Psychotherapy

- 90839: Psychotherapy for crisis, first 30-74 minutes
- +90840: Each additional 30 minutes of crisis psychotherapy

Community Crisis Response

- H2011: Crisis intervention services, per 15 minutes. Crisis assessment, intervention and stabilization services provided to individuals experiencing a behavioral health crisis
- H0030: Mobile crisis follow-up, per 15 minutes. Telephone follow-up services after a mobile crisis response to support stabilization and care coordination
- S9485: Behavioral health crisis intervention and stabilization services, per diem

Emergency Department Crisis Evaluation

- 99281-99285: Emergency department evaluation and management services

Crisis Triage Center

- 0513: Crisis Triage Center (CTC) Nonresidential
- 0169: Crisis Triage Center (CTC) Residential/ Nonresidential

Potential Audit and Compliance Review

Providers may be selected for audit or medical record review to ensure crisis services are appropriately documented and billed. Claims that do not meet applicable documentation, billing, contractual or regulatory requirements may result in repayment and/or additional corrective action.

For More Information

- Presbyterian Practitioner and Provider Manuals – Chapter 16: Fraud, Waste and Abuse
- Fee Schedule for Behavioral Health Providers
- New Mexico Health Care Authority Medicaid Behavioral Health Policy and Billing Manual
- Letter of Direction (LOD) requirements for crisis intervention services
- Compliance and Fraud, Waste, and Abuse Hotline: 1-888-435-4361 or PHPFraud@phs.org

LET'S CONNECT

CONTACT GUIDE

PHONE: (505) 923-5757

SHARE YOUR FEEDBACK

SIGN UP FOR PRESBYTERIAN EMAILS