

**Vendor Manual**  
**Version 1.0**  
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## 1. Introduction

Falling Colors (FC) is a New Mexico-based company with a history of success in working with behavioral healthcare Vendors processing financial and client data for grants and state-funded services. We operate with integrity and efficiency, providing the best service and value to the State of New Mexico and its healthcare Vendors. Falling Colors is dedicated to improving the health and well-being of all New Mexicans. We believe that supporting Vendors by handling their required billing and data collection in an efficient, friendly, and supportive manner will benefit our entire behavioral health system. We are enthusiastic about the future of behavioral health in New Mexico, and we are proud to be a part of that future with you.

In the event that there is any discrepancy or conflict between the Vendor's Contract with Falling Colors Corporation and any other writing, including but not limited to Scope of Work, Manual, or other written communication, the Vendor Contract shall control. Please note that the Vendor Contract cannot be changed, modified, or amended except in writing signed by both parties.

## 2. Online Resources

### 2.1 Website

[www.bhsdstar.org](http://www.bhsdstar.org)

This website provides user guides, how-to-guides, quick guides, and training videos on specific application functionality, as well as our staff registration form to request bhsdstar access.

### 2.2 Support Desk

All issues encountered and questions about bhsdstar should be directed to [support@bhsdstar.org](mailto:support@bhsdstar.org)

Emails sent to support are then generated into a Support Ticket and handled in our support desk application.

Please refer to the Support Desk FAQ posted here: <https://fallingcolors.freshdesk.com/support/solutions> for additional information of resolution timelines and managing and viewing your support tickets.

### 2.3 User Manuals, Guides, Videos and Trainings

A complete schedule of all training methods and opportunities is listed on our website at [www.bhsdstar.org](http://www.bhsdstar.org).

Falling Colors provides training to vendors on a variety of topics. Information and links to training resources can be accessed on [www.bhsdstar.org](http://www.bhsdstar.org).

Examples of topics to be covered include, but are not limited to:

- Basic Navigation of bhsdstar
- Navigating bhsdstar Support
- Registering Clients in bhsdstar
- Invoicing and Billing in bhsdstar

- Claims Processing in bhsdstar

Training resources include user manuals, how-to-guides, quick guides, and video demonstrations. In addition, webinars and in person trainings will be scheduled as needed.

### User Guides

User guides provide comprehensive instruction on using bhsdstar on a specific topic or program area such as Invoicing, Claims Processing, Prevention etc.

### How to Guides

How-to- Guides provide procedure, topic, or role information in a specific, focused format (usually smaller than a full user guide).

### Quick Reference Materials

Quick Reference Materials provide summary, step-by-step procedures relating to a bhsdstar function, such as submitting an invoice or registering a client. Quick reference materials include Quick Guides and Video Demonstrations.

**Be sure to check the [www.bhsdstar.org](http://www.bhsdstar.org) to view the library of training resources and announcements of upcoming trainings.**

## 3. Glossary

**Behavioral Health Billed Projects**-A 'Project' is defined as specific funding for a clearly defined intention with a target population and approved service mix under which one or more providers may be participating. Projects can be supported by multiple funding streams as defined by the Collaborative.

**Behavioral Health Services Division (BHSD)**-New Mexico Human Services Department division providing a variety of behavioral health services to adults in New Mexico.

**bhsdstar System**-An information management system integral to the operation of non-Medicaid behavioral health services which supports multiple functions, including but not limited to registration of Vendors and Clients, billing and data reporting. All references to the bhsdstar System shall be understood to include any future version or iteration of the bhsdstar System, as well as any complementary or ancillary system, developed by Falling Colors for the Collaborative.

**Business Days**-Monday through Friday, except for State or Federal Holidays.

**Children Youth and Families Department (CYFD)**-State of New Mexico department providing a variety of services, including behavioral health services, to New Mexico children and their families.

**Client**-For purposes of this manual, a person with a mental health or substance abuse disorder who is receiving, has received, or is eligible to receive Behavioral Health services through this Agreement.

**Client Eligibility**-Verification that a client is not eligible for Medicaid service reimbursement for a specific date of service and service code which is done here: <https://nmmedicaid.acs-inc.com>. Additionally, certain projects

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funded by BHSD or CYFD have client eligibility criteria associated with them which are specific to each project's purpose.

**Client Registration**-Online process to register non-Medicaid clients for whom services are provided and billed through bhsdstar.

**Collaborative or The Interagency Behavioral Health Purchasing Collaborative**-The Collaborative, established pursuant to NMSA 1978, §9-7-6.4, is responsible for planning, designing and directing the statewide Behavioral Health System.

**Credentials**-Eligibility or licensure of an individual to perform services provided they have met specified qualifications and defined requirements.

**Collaborative Members or Member Agencies**-The agencies which are members of the Collaborative and which can elect to fund non-Medicaid Behavioral Health services through the ASO under this Agreement. The members individually are referred to as a Member Agency.

**Deemed Credentialed**-Vendors who are credentialed with a New Mexico Medicaid Managed Care Organization at the time this Agreement is signed will be considered to represent current credentialing or re-credentialing with Falling Colors.

**HIPAA**-Health Insurance Portability and Accountability Act (*refer to Section 4.6*)

**Managed Care Organization (MCO)**-A health care delivery system consisting of affiliated and/or owned hospitals, physicians, and others which provide a wide range of coordinated health services; an umbrella term for health plans that provide health care in return for a predetermined monthly fee and coordinate care through a defined network of physicians and hospitals. Examples: Health Maintenance Organization(HMO) Point Of Service Plan (POS), and Preferred Provider Organization(PPO).

**State Scope of Work (SOW)**- A description of the agreed upon terms of work to be completed in the execution of the Agreement. The SOW may or may not include a fee schedule in addition to or in place of a description of work.

**Vendor**-A provider rendering non-Medicaid services within the State of New Mexico.

**Vendor Administrator**-Person responsible for gathering information listed on vendor registration checklist, entering the information online, and submitting the completed registration in bhsdstar.

**Vendor Authority**-New Mexico state agencies (BHSD and CYFD) responsible for approving vendors for contracts for behavioral health services.

**Vendor Information Worksheet**-Excel document used by vendors to provide information needed to configure Vendor's registration structure.

**Vendor Manual**-A resource for behavioral health Vendors, updated periodically, to communicate any pertinent information to providers of non-Medicaid behavioral health services. There are three (3) Vendor Manuals: One is specific to the ASO, one is specific to BHSD clinical processes, and one is specific to CYFD clinical processes.

**Vendor Registration**-Online process for Vendors to request contracts to provide non-Medicaid behavioral health services funded by Vendor Authorities (BHSD and/or CYFD).

**Vendor Registration Checklist**-List of information needed to complete Vendor Registration that includes business information, business addresses and contacts, MCO credentialing, vendor services information, required vendor documents, and vendor staff information.

## 4. Vendor Expectations

### 4.1 Contacting Falling Colors

All issues encountered and questions about bhsdstar should be directed to [support@bhsdstar.org](mailto:support@bhsdstar.org)

All issues encountered and questions regarding Vendor Registration should be directed to [vendorregistration@bhsdstar.org](mailto:vendorregistration@bhsdstar.org)

### 4.2 Notification to Falling Colors of Facility and/or Clinician Changes

We require that Vendors notify us in writing within 10 calendar days of any changes related to:

- Vendor Details: changes in ownership, locations/addresses, or contact details
- Professional Liability Insurance changes
- Tax ID Number (TIN) used for claims filing
- Professional Licensure/Certification: changes such as revocation, suspension, restriction, probation, termination, reprimand, inactive status, voluntary relinquishment, or any other adverse action
- Services offered
- Staff licensure/credentials
- W-9 or EFT changes

Many of these changes can be handled online via our Vendor Registration. Changes submitted in writing should be directed to [support@bhsdstar.org](mailto:support@bhsdstar.org).

Failure to report changes within the guidelines may result in payment delays and could affect your lead agency network participation standings.

### 4.3 Professional Responsibilities

In accordance with the Vendor Contract, you are required to provide client services in a manner that is consistent with professional and legal standards applicable at the time of service regardless of a consumer's benefit plan or terms of coverage. Providers should post and/or make available to their clients Consumer Rights information.

### 4.4 National Vendor Identification

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A National Vendor Identifier (NPI) is a 10-digit unique identification number issued to health care Vendors in by the Centers for Medicare and Medicaid Services (CMS). All individual HIPAA covered healthcare Vendors such as: physicians, pharmacists, physician assistants, midwives, nurse practitioners, nurse anesthetists, dentists, denturists, chiropractors, clinical social workers, professional counselors, physical therapists, occupational therapists, pharmacy technicians, athletic trainers etc.) or organizations (hospitals, home health care agencies, nursing homes, residential treatment centers, group practices, laboratories, pharmacies, medical equipment companies, etc.) must obtain an NPI for use in all HIPAA standard transactions, even if a separate billing agency prepares the actual transactions.

Please visit the CMS website for additional information and details on how to request an NPI: <https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProidentStand/apply.html>

## 4.5 The Americans with Disabilities Act

Vendors are expected to comply with The Americans with Disabilities Act. This includes, but is not limited to, protections against discrimination that limit or prevent access to services based on the presence of the disability, and modifications to facilities or equipment that accommodate individuals to gain access to services offered for which they are eligible.

## 4.6 HIPAA

Health Insurance Portability and Accountability Act (effective August 21, 1996)

- Protects the transmission of personal health information (PHI)
- Standardizes codes for health care transactions
- Sets conditions for the use and disclosure of PHI
- Establishes security standards to ensure data integrity

Falling Colors is compliant with required HIPAA privacy and security rules as well as other applicable New Mexico state and federal laws regarding privacy, confidentiality, release and maintenance of consumer information, including substance or alcohol abuse. Annual refresher training is conducted annually.

Vendor are required to:

- Train staff regarding HIPAA and the use and disclosure of Protected Health Information (PHI).
- Maintain records dealing with HIPAA privacy issues for at least 6 years.
- Comply with HIPAA privacy and security rules.

## 4.7 Alcohol or Substance Abuse Disclosures (CFR-42)

The **Federal Substance Abuse Regulations** apply to information which could directly or indirectly identify a consumer as an alcohol or substance abuser. Although HIPAA covers substance abuse information, the federal substance abuse regulations are more restrictive than HIPAA and do not allow disclosure without the consumers written consent except in very limited circumstances (i.e., the federal substance regulations do not contain a “treatment” exception as HIPAA does).

Vendors are required to:

- Train staff regarding the use and disclosure of Alcohol and Substance Abuse information.

- Comply with Federal Substance Abuse Regulations.

## 4.8 Information Security Awareness

By participating in State or Federally funded programs, managed by Falling Colors, the Vendor attests to implementing an information security awareness program in its organization which covers: data, networks, user conduct, social media, mobile devices, and social engineering.

## 4.9 Service Prior-Authorization

The Collaborative has removed the requirements of prior authorization for services supported with non-Medicaid behavioural health funds. Billing for services previously requiring prior-authorization will be monitored and evaluated for appropriateness.

## 4.10 Continuation of Services after Termination

If the Vendor terminates their Agreement for any reason, or in the event any individual Client ceases to receive care or treatment from Vendor, Vendor shall cooperate and take all reasonable steps to ensure a smooth transfer of the Client to a new Vendor in collaboration with the Collaborative and/or Falling Colors.

## 4.11 Billing for No Shows

- Vendors cannot bill for no-shows.
- Vendors should not charge a deposit or advance payment for a potential missed appointment or no-show.
- Vendors may not bill for services not rendered.

## 4.12 Timely Filing

Falling Colors must enforce the following timeframes for Vendors to submit all Claims, Workbooks and/or encounters to Falling Colors:

Vendors have

- a. Until Midnight on the last day of the month following the month of service to submit claims, workbooks, invoices and/or encounters; and
- b. Thirty (30) days from the date a correction is required to submit the corrections.

## 4.13 Vendor Communications

Communication to Vendors regarding issues encountered and questions about bhdstar will be sent from: [support@bhdstar.org](mailto:support@bhdstar.org)

Communication to Vendors regarding issues encountered and questions about Vendor Registration will be sent from: [vendorregistration@bhdstar.org](mailto:vendorregistration@bhdstar.org)

At times, Falling Colors sends written information to Vendors. Please ensure your mailing address is correct in Vendor Registration.

## 5. Vendor Registration

All Vendors wishing to provide non-Medicaid services for BHSD and CYFD must complete and submit an online vendor registration. *Please note, initiating Vendor Registration does not guarantee funding through the Behavioral Health Collaborative agencies (BHSD and/or CYFD).*

### 5.1 Vendor Registration Process - Overview

- STEP 1 Vendor Requests information to access the Online registration portal by emailing vendorregistration@bhsdstar.org
- STEP 2 Vendor Registration acknowledges received request from Vendor by email. Email includes a Vendor Packet and a Vendor Information Excel worksheet for the Vendor to complete and return to Vendor Registration with their designated Vendor Administrator indicated.
- STEP 3 Vendor Registration configures Vendor structure in registration portal for online registration based on the submitted Vendor Information worksheet.
- STEP 4 Vendor Registration creates and provides Vendor Registration Access for the designated Vendor Administrator. Vendor Administrator will be emailed login credentials directly by Vendor Registration with a Vendor Registration user manual.
- *Note: the designated Vendor Administrator is the person who will be completing the online Vendor registration. Vendor billing and claims submission is a different process with distinct Administrative permission. Vendors will need to register their appropriate billing staff separately.*
- STEP 5 Vendor Completes all sections of registration including business profile, staff profiles, and business services then Submits Online Registration. Vendor notifies Vendor Registration by email (vendorregistration@bhsdstar.org) that completed registration has been submitted.
- STEP 6 Vendor Registration will conduct preliminary checks on Vendor's submitted registration.
- If pass preliminary checks, Vendor Registration will notify Falling Colors Finance Department the registration is ready to continue through the registration process.
  - If do NOT pass preliminary checks, Vendor Registration will contact Vendor by email to request the needed information to complete their registration.
- STEP 7 Vendor Registration notifies the Vendor Authority (BHSD and/or CYFD) Vendor's registration is ready for review (approve, deny, or request additional information).
- If registration is approved, Vendor Authority will notify Falling Colors Finance Department the registration is ready to continue through the registration process.
  - If registration is denied or more information is needed, Vendor Authority will contact Vendor directly by email to request the needed information to complete their registration.
- STEP 8 When notified by the Vendor Authority Vendor's registration is approved, Falling Colors Financial Department reviews submitted vendor registration for a complete W-9 and EFT with signatures.
- If registration submitted is complete and accurate, the Finance Department will proceed to Step 9.
  - If registration submitted is NOT complete and/or accurate, the Falling Colors Finance Department will contact Vendor directly by email to request the needed information.

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- STEP 9 Falling Colors Finance Department emails listed Executive Contact the contract, an attestation and a Business Associate Agreement (BAA) thru the DocuSign program.
- STEP 10 Vendor Executive Contact electronically signs and submits required contractual documentation.
- STEP 11 Falling Colors Chief Financial Officer (CFO) reviews and signs required contractual documentation. Falling Colors Finance Department logs and saves copies of all contractual documentation.
- STEP 12 When Scopes of Work (SOW) are received from Vendor Authority (BHSD and/or CYFD), Falling Colors Finance Department emails the SOWs to Vendor for review and signatures.

*\*\*Note: For Claims additional testing is required-Please refer to the Claims Processing section.\*\**

## 6. Credentialing

By its execution of the Vendor's agreement, Vendor certifies and affirms that it has all necessary professional licensure, accreditation, certifications, credentialing and continuing education required to perform all services Vendor is contracted to perform under the State SOW, and that it complies with any and all continuing requirements. The Vendor agrees to make evidence of compliance with all such requirements under this Agreement available to Falling Colors and/or the Member Agency requesting such evidence upon three (3) Business Days advance written notice to Vendor.

1. The Vendor shall comply with all applicable local, state and federal laws and regulations including but not limited to all professional and health facility licensing and certification requirements and any other applicable legal requirements.
2. The Vendor shall comply with all applicable local, state, and federal laws and regulations relating to care and treatment of all Clients including minors, as defined by the State of New Mexico.
3. On confirmation by Falling Colors that Vendor has submitted documentation reflecting all necessary accreditation or professional licensure requirements and has been Deemed Credentialed with a New Mexico Medicaid Managed Care Organization (MCO) to provide all services anticipated under the State SOW, Falling Colors will accept the Vendor as appropriately credentialed and provide Vendor access to the bhsdstar System. Falling Colors, the Collaborative Member Agency and the Collaborative Member Agency's designated entity shall have the right to audit such accreditation and licensure criteria upon three (3) Business Days advance written notice to Vendor.

Vendor understands that Falling Colors and the Collaborative rely on Vendor's representations regarding licensure and credentialing, as well as compliance with applicable laws, and agrees to defend and indemnify Falling Colors, the Collaborative and the State of New Mexico for any breach of this section or as described more fully in Article 16 of the Vendor's Agreement.

## 7. Client Eligibility and Registration

Vendors are responsible to determine the eligibility of a client at the time service is rendered. Non-Medicaid funds are intended for services to individuals not covered by Medicaid. Vendors must check the Medicaid portal prior to administering a service for non-Medicaid reimbursement. By submitting a service for non-Medicaid

reimbursement, Vendors are attesting that they have verified a client's non-Medicaid eligibility. Done here: <https://nmmedicaid.acs-inc.com>

Depending on specifics of scopes of work, additional eligibility criteria may exist. If you are unsure of the eligibility of a client for the non-Medicaid funding you are receiving, please contact your State Agency program manager.

For Vendors submitting claims or encounters, you must also register your client in bhsdstar prior to delivery of services. Specifics and How To Guides on the client registration process are located at [bhsdstar.org](http://bhsdstar.org).

## 8. Claims Processing

Falling Colors will process FY18 claims for BHSD and/or CBHD non-Medicaid services.

Claims can be submitted to Falling Colors through our Clearinghouse Claim MD. [www.claim.md](http://www.claim.md)

Providers can enroll with Claim MD at <https://www.claim.md/fallingcolors/> and submit claims via manual entry or via electronic upload of an 837P or 837I. There is No Cost to the provider for submitting claims directly to Falling Colors via Claim MD. (existing Claim MD customers do not need to re-enroll, but will just submit a claim using payer ID FCC20)

Providers can also submit claims to Claim MD via an already established relationship with their own Clearinghouse. Please ask your Clearinghouse to contact Claim MD at (855) 757-6060. Our Payer ID is FCC20.

Providers that will be submitting claims will need bhsdstar system access for the Claims Project to pre-register the claims clients. Please fill out the staff registration form located on the Manuals & Forms tab and submit to [support@bhsdstar.org](mailto:support@bhsdstar.org)

If you have any questions, please contact us at [support@bhsdstar.org](mailto:support@bhsdstar.org)

For details on 837 P and I required fields refer to the 837 Companion Guide at [bhsdstar.org](http://bhsdstar.org) on the Manuals & Forms tab.

## 9. Payments

All submitted claims and/or encounters will be bundled into a STAR invoice on the 1<sup>st</sup> of each month for payment.

- Member Agency program managers will review and approve encounter based invoices for payment.
- Claims invoices are pre-approved by Member Agencies for payment.

All submitted workbooks will be processed into a STAR invoice at midnight of the day they are submitted.

- Member Agency program managers will review and approve workbook based invoices for payment.

**All payments will be made no later than 30 days from the date of invoice approval.**

## 10. Disputes and Grievances

Should the Vendor have questions regarding payment the Vendor should address their questions, comments, or concerns to [support@bhsdstar.org](mailto:support@bhsdstar.org). Falling Colors will provide reasonable help to Vendor in these types of requests or will forward those requests to the Collaborative. If Vendor is dissatisfied with any decision related to payment, Vendor agrees to address its grievance or dissatisfaction solely with the Collaborative Member Agency.

## 11. Questions

For any questions email to [support@bhsdstar.org](mailto:support@bhsdstar.org).